SWAT MEDICAL COLLEGE SWAT

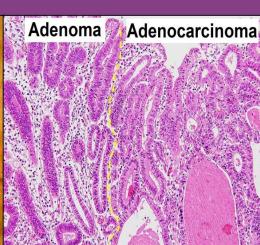
DEPARTMENT OF MEDICAL EDUCATION



GASTROINTESTINAL TRACT & HEPATOBILIARY SYSTEM-II MODULE







4RTH YEAR MBBS

BLOCK: K

CLASS OF 2024

DURATION: 12 WEEKS

FROM: 27/03/2024 TO 19/06/2024

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1 Academic Calendar

Tentative Annual Calendar MBBS – 2023-24 Swat Medical College, Swat								
Activity/ Events	Week	Date	1 st Year	2 nd Year	3 rd Year	4 th Year	5 th Year	
Orientation Week	1	12th to 16th Feb						
Regular Classes	2	19th to 23rd Feb	Foundation.l	Neurosciences-IA	Foundation II	Neurosciences – II	Previous 5 ^m Year Preparatory leaves and	
Regular Classes	3	26th Feb to 1st March	- (6 weeks)	(6 W99KS)	(5 weeks) 22nd March, Module	Neurosciences – II (δ weeks)	annual exam	
Regular Classes	4	4th to 8th March	22 nd March, Module	22 nd March, Module Exam	Exam	25th and 26th March		
Regular Classes	5	11th to 15th March	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-II	
Regular Classes	8	1st to 5th 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		-II	06th & 07th May Block N	
Regular Classes	12	29th to 3rd May				(9 weeks)	exam	
Regular Classes	13	6th to 10th May			Marking	10th and 11th June Block K Exam	Cardiorespiratory-III	
Regular Classes	14	13th to 17th May			Multisystem (5 weeks)	IX EXAMI	(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 &	moodio Entant or may		Exam	
Regular Classes	17	3 rd to 7 th June	(8 weeks) 1st & 2nd July Block-B	Metabolism-			Renal- III Module	
Regular Classes	18	10th to 14th June	Exam	(8 weeks)	Blood & immunology (3 weeks) 1st & 2nd July module exam	Renal — II Module (4 weeks) 1# and 2 nd July Module Exam	(2 weeks) 14 th June Module Exam	
Eid-ul-Adha Holidays	19	17th to 21th June		1st & 2mt July 1st &			Endocrine &	
Regular Classes	20	24th to 28th June					Reproduction-III	
Summer Vacations	21-23	3rd to 21st July				EXAM	(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	D	MSK-II (5 weeks) 2 nd Sep 3 nd Sep Block H exam	EYE and ENT (6 weeks) 14" to 18" Oct Block M1	Neurosciences - III (3 weeks) 16th August Module Exam GIT & Hepatobiliary (2 weeks) 6th Sep Module Exam Multisystem-II	
Regular Classes	26	5th to 9th Aug	(5 weeks) 23rd August Module					
Regular Classes	27	12th to 16th Aug	Exam					
Regular Classes	28	19th 23rd Aug		Endocrine-I				
Regular Classes	29	26th to 30th Aug	Respiratory-I	. (4 weeks) 6th Sep	CVS-II (3 weeks) 20 th September Module exam RFS-II (4 weeks)			
Regular Classes	30	2 nd to 6 th Sep	(4 W66KS)	о обр				
Regular Classes	31	9th to 13th Sep	23 rd -24 th SEP	Reproduction-I				
Regular Classes	32	16th to 20th Sep	Block-C Exam	(4 iveeks)			(4 weeks)	
Regular Classes/ Preparatory Leaves Regular Classes/ Preparatory Leaves	33 34	23rd to 27th Sep 30th Sep to 4th Oct		30th Sep 1st Oct			7th -8th Oct Block Q	
Regular Classes/ Preparatory Leaves	35	7th to 11th Oct	PREPARATORY		21 st and 22 rd October	& M2 Exam		
Regular Classes/ Preparatory Leaves	36	14th to 18th Oct	LEAVES		Block L exam			
Regular Classes/ Preparatory Leaves	37	21st to 25th Oct	LLATEO	PREPARATORY				
Regular Classes/ Preparatory Leaves	38	28th Oct to 1st Nov		LEAVES				
Regular Classes/ Preparatory Leaves	39	4th to 8th Nov						
Regular Classes/ Preparatory Leaves	40	11th to 15th Nov			PREPARATORY			
Regular Classes/ Preparatory Leaves	41	18th to 22nd Nov			LEAVE\$	PREPARATORY	PREPARATORY	
Regular Classes/ Preparatory Leaves	42	25th to 29th Nov	Annual Exam as per			LEAVES	LEAVES	
Regular Classes/ Preparatory Leaves	42	2 nd to 6 th Dec	KMU schedule.	Annual Exam as per				
Regular Classes/ Preparatory Leaves	43	9th to 13th Dec		KMU				
Regular Classes/ Preparatory Leaves	44	16th to 20th Dec						
Regular Classes/ Preparatory Leaves	45	23rd to 27th 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	emic sessi	on 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

2 List Of Abbrevation

KEY:	Abbrevation	KEY:	Abbrevation
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
SDL	Self-Directed learning	SAQs	Short Answer Questions

3 Module Committee

s.no	Name	Department	Role
1.	Prof. Dr. Aziz Ahmad	Dean / p	principal
2.	Dr. M Junaid Khan	DME	Director
		Module Team	
3.	Prof. Dr Imran Ud Din	Pathology department	MPC Chairman – II
4.	Assist. Prof. Dr. Siyab Ahmad	Pathology department	Module Co-ordinater
5.	Asso. Prof. Dr Humaira Ali	Anatomy	Member
6.	Prof. Dr. Fiza Iqbal	Physiology	Member
7.	Asso. Prof. Dr Obaid Ur Rahman	Biochemistry	Member
8.	Assit. Prof. Dr. Muhammad Younas	Forensic Medicine	Member
9.	Assist. Prof. Dr. Moneeb khan	Community medicine	Member
10.	Asso. Prof. Dr Rahman Shah	Pharmacology	Member
11.	Prof. Dr. Saif ur Rahman	Surgery	Member
12.	Assist. Prof. Dr. Sardar Ali	Medicine	Member
13.	Asso. Prof. Dr. Ibrahim Khan	Peadiatrics	Member
14.	Asso. Prof. Dr. Tabassum Nahid Kausar	Obstetrics and Gynecology	Member
15.	Prof. Dr. Gulshan Hussain	Otorhinolayrangealogy	Member
16.	Prof. Dr. Haroon Ur Rashid	Opthalomology	Member
17.	Miss Afroz	PRIME	Member
18.	Mr. Nadeem Badshah	Medical eduction	Member
19.	Mr. Abdul Mateen	Examination Cell	Member



4 Recommended List Of Icons



Introduction To Case



For Objectives



Critical Questions



Assessment



Resource Material

5 Mission/ Vision of the College

5.1 Mission Statement of the Institution:

To train medical students as per international standards, thereby producing doctors who exhibit excellence as professionals, academicians, researchers and adeptly fulfil community healthcare needs through the application of ethical and evidence-based practices

5.2 Vision Statement of the Institution:

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

6 Preface

Welcome to the gastrointestinal and hepatobiliary system module study guide, where the overarching goal is to provide students with a profound understanding of medical science and practice of astrointestinal and hepatobiliary system. This module covers the topics which are inflammatory and neoplastic diseases of oral cavity, salivary gland, non-neoplastic and tumor of esophagus, gastritis and peptic ulcer, malignancies of stomach, diarrheal diseases, malabsorption syndromes and inflammatory bowel diseases, benign and malignant lesions of small and large intestine. Pathological conditions of liver like jaundice and cholestasis, autoimmune liver diseases & cholangiopathies, metabolic liver diseases-1, drug and toxin induced liver injury & fatty liver disease, cirrhosis of liver, tumors of liver, inflammatory diseases and tumors of gall bladder.

All these diseases are very common in clinical practice and will be helpful in understanding the GIT and Liver pathology. Real life scenarios have been added in the module which will be discussed in small groups to help students to develop them clinical approach to understand and solve the clinical problem by correlating their basic knowledge of anatomy, physiology, biochemistry and pathology with findings of a clinical case.

7 Introduction/ Organization of Module

7.1 **Introduction**:

In this module, medical students will learn in detail the normal structure, function and diseases of GI Tract and hepatobiliary system. Children and adults present to general practice, or hospitals with signs and symptoms of some of very common illnesses related to GIT & Liver including vomiting, chronic diarrhea, constipation, peptic ulcers, enteric fever, malnutrition, jaundice etc. This module will provide students opportunities to understand the basis of these illnesses including the mechanism involved in the development of these pathologies and integrate basic medical science knowledge to clinical problem-solving.

Students will identify how gastrointestinal and hepatobiliary system (Embryology, Microscopic Anatomy and Gross Anatomy) integrates with function (physiologic mechanisms of GI motility, digestion and absorption, and liver and pancreatic function). During the module, students will acquire a wider, more generally applicable knowledge of immunology, metabolism, infectious disease and pathology related to the GI system. Therefore, the overall objective of this course is to provide an integrative understanding of the structure and functions of the gastrointestinal tract.

7.2 Rationale:

Diseases of the GIT are common all over our country. It is essential to make early diagnosis and treat the disease in order to reduce morbidity and mortality. This module provides an integrative understanding and detailed and clinically relevant information of pathology related to the digestive and biliary system.

7.3 Organization of the Study guide:

The modules include sessions on important pathological diseases of gastrointestinal system and hepatobiliary system. The relevant clinical subjects are also taught under the shared themes with pathological explanation. The medical and surgical management and preventive aspect of the diseases is also addressed.

Teaching Hours Allocation

Table: Total hours distribution of each subject

S. No	Subject	Hours
1	Pathology	49
2	Pharmacology	20
3	Forensic medicine	22
4	Community medicine	23
5	Medicine	13
6	Surgery	14

7	Pediatrics	4
8	Family medicine	3
9	Anatomy	1
10	PRIME	1
11	Research*	16**

Table 2: Themes

S. No	Themes	Topics covered	Duration Weeks
1	Difficulty in swallowing	Oral cavity Salivary glands Esophagus	1
2	Pain epigastrium	Stomach and duodenum	1
3	Pain right upper abdomen	Liver Gall bladder Pancreas	2
4	Diarrhea and constipation	Small intestine	3
5	Bleeding Per Rectum	Large intestine	4
6	Practical work		1

7.4 Teaching Strategies:

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

- Interactive Lectures
- Small Group Discussion
- Case- Based Learning
- Practicals
- Skills session
- Hospital / Clinic visits
- Self-study

INTERACTIVE LECTURES (IL): In large group, the Interactive 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.

SMALL GROUP DISCUSSION (SGD): 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 Interactive Lectures, tutorials and self study. The facilitator role is to ask probing questions, summarize, or rephrase to help clarify concepts.

CASE-BASED LEARNING (CBL): A small group discussion format where learning is focused around a series of questions based on a clinical scenario. Students' discuss and answer the questions applying relevant knowledge gained in clinical and basic health sciences during the module.

PRACTICAL: Basic science practicals related to anatomy, biochemistry, pathology, pharmacology and physiology are scheduled for student learning.

SKILLS SESSION: Skills relevant to respective module are observed and practiced where applicable in skills laboratory or Department of Physiotherapy.

HOSPITAL VISITS: In small groups, students observe patients with signs and symptoms in hospital or clinical settings. This helps students to relate knowledge of basic and clinical sciences of the relevant module,

SELF STUDY: 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.

7.5 Assessment strategies

Theory:

- MCQs (Multiple Choice Questions) are used to assess objectives covered in each module.
- A MCQ has a statement or clinical scenario followed by four options (likely answer).
- Students after reading the statement/scenario select ONE, the most appropriate response from the given list of options.
- Correct answer carries one mark, and incorrect 'zero mark'. There is no negative marking.

OSPE/OSCE: Objective Structured Practical/Clinical Examination:

- Each student will be assessed on the same content and have same time to complete the task.
- Comprise of 12-25 stations.
- Each station may assess a variety of clinical tasks, these tasks may include history taking, physical examination, skills and application of skills and knowledge
- Stations are observed, unobserved, interactive and rest stations.
- Observed and interactive stations will be assessed by internal or external examiners.
- Unobserved will be static stations in which there may be an X-ray, Labs reports, pictures, clinical scenarios with related questions for students to answer.
- Rest station is a station where there is no task given and in this time student can organize his/her thoughts.

Internal Evaluation

- Students will be assessed to determine achievement of module objectives through the following:
- Module Examination: will be scheduled on completion of each module. The method of examination comprises theory exam which includes MCQs and OSPE (Objective Structured Practical Examination).
- Graded Assessment of students by Individual Department: Quiz, viva, practical, assignment, small group activities such as CBL, online assessment, ward activities,

examination, and log book.

7.6 Feedback mechanism and summary

- **1.** Students' feedback on assessment strategies will be taken in a preformed proforma for feedback twice a year i.e., pre-prof and prof exams.
- **2.** Feedback of theory as well as OSPE/OSCE & Viva will be taken.
- **3.** Department of Medical Education & Quality Enhancement Cell in collaboration with Exam Cell of STMC is responsible to conduct this exercise.

8 Table Of Specification

Subject	No. of	Hours	Allocated in		I	Asse				
	Large Group Small Gro Format Format		-	Tota l	Weightage	Percent Distribution	MCQs	VIVA	OSPE	
	Lecture	DSL	Practical	SGD		,	n	S		(7)
Pathology	s 36	s 03	s 06	s 04	49	29.1	29.5%	35	02	02
rathology	30	03	00	04	49	29.1 %	29.5%	33	02	02
Pharmacolo gy	10	03	05	02	20	11.6 %	12.04 %	14	02	02
Forensic medicine	10	03	05	05 04		13.3	13.25	16	02	02
Community medicine	14	00	09	00	23	14.1 %	13.85 %	17	02	04
Medicine	13	00	00	00	13	8.3%	7.8%	10	00	01
Surgery	14	00	00	00	14	8.3%	8.4%	10	02	01
Peadiatrics	04	00	00	00	04	2.5%	2.4%	03	00	00
Family Medicine	03	00	00	00	03	1.6%	1.8%	02	00	00
Anatomy	01	00	00	00	01	0.8%	0.6%	01	00	00
PRIME	01	00	00	00	01	0.8%	0.6%	00	00	00
Research	00	00	00	16	16	10%	9.6%	12	00	00
Total	106	09	25	26	166	100	100%	120	20	0



9 Learning Objectives

9.1 General Learning Outcomes

Knowledge

By the end of GIT-II Module, 4th year MBBS students will be able to:

- 1. Describe the development of foregut, mid gut and hind gut.
- 2. Discuss the anomalies of the gut.
- 3. Describe gross and microscopic anatomy of various parts of GIT.
- 4. Describe gross and microscopic features of liver and biliary system.
- **5.** Explain the physiology of GIT.
- **6.** Describe biochemistry of digestive juices
- 7. Describe biochemistry of digestion and absorption of carbohydrates, proteins and lipids
- 8. Understand and explain the mechanism of the metabolism of the liver
- 9. Explain pathological findings identified in GIT pathology
- 10. Enlist pathologies involving gastrointestinal tract
- 11. Identify role of pharmaceutical agents used for diseases involving GIT like vomiting and diarrhea.

Skills

- 1. Interpret the liver function tests in different hepatic diseases.
- 2. Write prescriptions for common GIT & hepatobiliary disorders.
- 3. Describe medico legal aspects of abdominal trauma.
- 4. Describe medico legal aspects of vegetable acid, corrosive and irritants poisoning.
- 5. Describe the epidemiology and prevention of malnutrition and viral hepatitis.
- **6.** Interpret radiological investigations in relation to GIT

Attitude

The students must show positive attitude to:

- 1. Develop good manners and should be honest to their studies
- **2.** Work hard and be regular and punctual in the class
- **3.** Participate in class and practical work efficiently
- **4.** Follow the basic laboratory protocols.
- **5.** Develop communication skills with sense of responsibility
- **6.** Demonstrate the effective attitude towards the teachers and colleagues
- **7.** Maintain ethical values in dealing with patients.
- **8.** Demonstrate a professional attitude, team building spirit and good communication skills

9.2 Specific Learning Outcomes

	Theme-1 (Difficulty in swallowing)							
Subject	Topic	Hours	S#	Learning objective				
Pathology	Salivary Gland (Inflammation and tumors)	1	1	Classify the inflammatory and neoplastic diseases of salivary gland.				
			2	Describe the etiology, morphology and clinical presentation of inflammatory and neoplastic diseases of salivary gland.				
	Esophagus	2	3	Classify esophagitis. Describe the etiology, pathophysiology, morphology, clinical presentation and complications of esophagitis				
			6	Classify esophageal tumors. Describe the etiology, pathogenesis, morphology, clinical presentation, diagnosis and complications of esophageal tumors				
Medicine	Oral Cavity Diseases	1	7	Discuss the etiology of stomatitis and Aphthous ulcers				

		8	Discuss the clinical features of stomatitis and Aphthous ulcers
		9	Discuss the investigations of stomatitis
		10	Devise a management plan for stomatitis and Aphthous ulcers
Esophagus: 1) Esophageal	1	11	Discuss the causes of esophageal motility Disorders
motility disorders		12	Discuss the clinical features of esophageal motility disorders

MIT:mode of information transfer. E.g. lecture, SGD, DSL, Practical, skill lab etc etc

			13	Discuss the relevant investigations of esophageal motility disorders
			14	Devise a management plan of esophageal motility Disorders
	2) Esophagitis	1	15	Discuss the etiology of esophagitis
			16	Discuss the clinical features of esophagitis
			17	Discuss the appropriate diagnostic testing for Esophagitis
			18	Devise a management plan for esophagitis
	3) Cardia achalasia	1	19	Discuss the etiology, clinical features, investigations and management of Cardia Achalasia
	4) Gastro Esophageal reflux disease (GERD)		20	Discuss the risk factors, etiology, clinical features, investigations, complications and management of GERD
ENT	Cleft lip and palate	1	21	Discuss the etiology, clinical features, investigations, complications and management of cleft lip and palate
	Pharyngitis and Tonsillitis	1	22	Discuss the etiology, clinical features, investigations, complications and management of Pharyngitis and acute Tonsillitis
			23	Explain the clinical features, and management of peritonsillar abscess
			24	Discuss the classification, etiology, clinical features, investigations, and management of Chronic Tonsillitis
	Oropharyngeal cancer	1	25	Discuss the classification, etiology, clinical features, investigations, and management of oropharyngeal cancers
	Salivary glands	1	26	Classify diseases of the salivary glands

			27	Explain the etiology, clinical features, investigations and management of Mumps, and Sialadenitis
			28	Explain the etiology, clinical features, investigations and management of salivary ducts stones
	Dysphagia	1	29	Explain the types, etiology, clinical features, investigations and management of a patient with dysphagia
Surgery	Tumors of the esophagus	1	30	Discuss the classification, etiology, clinical features, investigations, staging and management of Esophageal cancers
	Para esophageal		31	Explain the etiology, clinical features, investigations and management of Paraesophageal hiatus hernia
PRIME/ Medical	Social accountability	1	32	Explain the concept of social accountability
Education			33	Differentiate between different social accountability issues

	Theme-2 (Epigastric pain)								
Pathology	Gastritis	1	34	Explain the types, etiology, microscopic morphology and clinical features of Gastritis					
	Peptic ulcers	2	35	Discuss the etiology, pathophysiology, morphology, complications and lab. diagnosis of peptic ulcer disease					
			36	Discuss the role of H.Pylori & campylobacter in the causation of Peptic ulcer disease					

			37	Discuss the morphology, virulence factors and lab diagnosis of H. Pylori & campylobacter
	Gastric polyps		38	Classify gastric polyps and tumors
	and tumors		39	Describe the pathogenesis, morphology, lab diagnosis and complications of gastric polyps and tumors.
Medicine	Gastritis	1	40	Explain the types, etiology, clinical features, investigations, management and complications of Gastritis
	Peptic ulcer disease	2	41	Explain the types, etiology, clinical features, investigations, management and complications of Gastritis

			42	Describe H.pylori eradication therapy protocols in the treatment of peptic ulcer
	Upper GI Bleeding	1	43	disease Explain the etiology, clinical features, investigations and management of a patient with upper GI bleeding
			44	Describe the indications and procedures of pharmacological and endoscopic treatment of variceal bleeding
Pharmac	Anti-emetics	2	45	Classify anti-emetic drugs
ology	ology		46	Describe the mechanism of serotonin antagonists as anti-emetic agents.
			47	Enlist the clinical uses (anti-emetic) and adverse effects of serotonin antagonists.
			48	Describe the pharmacological basis of serotonin antagonists in chemotherapy induced vomiting
			49	Describe the mechanism of H1-antagonists as anti-emetic agents.

50	Enlist the clinical uses (anti-emetic) of H1- antagonists.
51	Describe the mechanism of anticholinergic drugs as anti-emetic agents.

52	Enlist the clinical uses (anti-emetic)
	anticholinergic drugs.
53	Describe the pharmacological basis
	scopolamine in motion sickness
54	Describe the anti-emetic mechanism of
	Domperidone).
55	Enlist the clinical uses (anti-emetic) and adverse
	effects of D2-receptor blockers.
56	Compare the pharmacological features
	metoclopramide & Domperidone.
57	Describe the drug interaction of metoclopramide
	with levodopa.
58	Describe the mechanism of neuroleptics as anti-
	emetic agent.
59	Enumerate the clinical uses (anti-emetic) of
	neuroleptic drugs.
60	Describe the antiemetic mechanism
	benzodiazepines.
61	Describe the antiemetic mechanism
	glucocorticoids.

62	Enumerate the indications (anti-emetic)
63	List anti-emetic drugs used in morning sickness.
64	List anti-emetic drugs used in chemotherapy induced vomiting.

	Drugs used in		65	Enlist the drugs used in variceal hemorrhage
	the treatment of variceal bleeding		66	Describe the mechanism of somatostatin and octreotide in variceal hemorrhage
			67	Describe the mechanism of Vasopressin & Terlipressin in variceal hemorrhage
			68	Describe the mechanism of beta-blockers in variceal hemorrhage
	Drugs used in	2	69	Classify the drugs used in Peptic ulcer disease
	the treatment of Peptic ulcer disease and		70	Describe the mechanism of action, indications and adverse effects of proton pump inhibitors (PPIs).
	Gastritis		71	Describe the pharmacokinetics of PPIs special emphasis on time of administration
			72	Describe the drug interaction of Omeprazole & H2 blockers with Sucralfate
			73	Describe the drug interaction of Omeprazole with Clopidogrel
			74	Describe the mechanism of action, indications and adverse effects of H-2 blockers.
			75	Compare/differentiate H2-blockers In terms of bioavailability and interactions
			76	Describe the mechanism of action, indications and adverse effects of Antacids.
			77	Enumerate the properties of an ideal antacid.
			78	Describe the pharmacokinetics of antacids with special emphasis on time of administration
			79	Describe the drug interactions of antacids with tetracyclines, iron and fluroquinolones.
			80	Describe the mechanism of sucralfate in the treatment of peptic ulcer
			81	List the indicationsof sucralfate.

82	Discuss the drug interaction of sucralfate with digoxin, ketoconazole and tetracyclines.
83	Describe the pharmacokinetics of sucralfate with special emphasis on time of administration.
84	Describe the mechanism, indications and adverse effects of bismuth compounds.

			85	Describe the role of anticholinergic drugs in peptic ulcer.
			86	List the indications (anti-peptic anticholinergic drugs.
			87	Discuss the pharmacological basis for the use of prostaglandin analogues treatment of peptic ulcer.
			88	List the contraindications of misoprostol.
			89	Describe triple therapy for the eradication of H.pylori infection.
			90	Describe quadruple therapy for the eradication of H.pylori infection
Forenssic medicine	Common house-hold poisons	1	91	Enlist, domestic, medicinal and garden poisons commonly used
	Corrosives/ Mineral acids		92	Enlist different commonly used mineral acids
			93	Enumerate physical appearance and uses of Sulphuric acid
			94	Describe mechanism of action, fatal dose & period of Sulphuric acid
			95	Describe clinical features and treatment of Sulphuric acid burns

			96	Describe postmortem appearance and			
			90	forensic postmortem appearance and			
				importance of Sulphuric acid burns			
			97	Enumerate physical appearance and uses of nitric acid			
			98	Describe mechanism of action and fatal dose & period of nitric acid			
			99	Describe clinical features and postmortem appearance of nitric acid burns			
			100	Enumerate physical appearance and uses of hydrochloric acid			
			101	Describe clinical features and postmortem appearance of hydrochloric acid burns			
	Corrosives/	1	102	Enlist different commonly used alkali			
	Alkali		103	Enumerate physical appearance and uses of alkali			
			104	Describe mechanism of action, clinical features and treatment of alkali burns			
			105	Describe postmortem appearance and forensic importance of alkali burns			
		1	106	Enlist different commonly used organic acids			
	Corrosive/ organic acid		107	Enumerate physical appearance and uses of carbolic acid			
		1	ı	1			
		108		be mechanism of action, fatal dose & period polic acid			
		109	Descri	be clinical features and treatment			
				carbolic acid poisoning			
		110		be postmortem appearance and forensic ance of carbolic acid poisoning			
		111	Enume Acid	erate physical appearance and uses of oxalic			

		112	Describe mechanism of action, fatal dose & period of oxalic acid
		113	Describe clinical features and treatment of oxalic acid poisoning
		114	Describe postmortem appearance and forensic importance of oxalic acid poisoning
Corrosive/	1	115	Enumerate physical appearance, sources and uses of cyanides
		116	Describe mechanism of action, fatal dose & period of cyanides
		117	Describe clinical features and treatment cyanide poisoning
		118	Describe postmortem appearance and forensic importance of cyanide acid poisoning

Surgery	Gastric cancer	1	119	Describe the types, etiology, risk factors, lab diagnosis and management of a patient with gastric cancer
	Gastric outlet obstruction	1	120	Describe the etiology, diagnosis and management of a patient with gastric outlet obstruction
Community medicine and public health	Health system of Pakistan: Introduction	2	121	Describe health care system of Pakistan using WHO Health system frame work
	Primary health care		122	Define PHC
	(PHC)		123	Describe the history of development of PHC
			124	Describe the concepts and components of PHC
			125	Describe comprehensive & selective PHC
			126	Describe reasons for failure of PHC
			127	Describe Health Systems before & after PHC
			128	Describe district health care system
			129	Enumerate indicators for assessing PHC

				Page
He	ealth educati	ion	3	130 Define health education
				131 Describe objectives andfunctions
				Education
				 Describe the components of health education Describe the methods of health education
		101		
		134		Describe the communication channel in
		135		health Education Describe the constraints in health education
		136		Describe classification of theories of
		130		health Educaion
		137		Describe the stages in health education
		138		Describe the principles of health education
		139	_	Describe the strategies for an effective
]	health
			(education program
		140]	Explain the methods of evaluation
			(effectiveness of a health education project
Health		141]	Define concept of HMIS
		142]	Enumerate the components of HMIS
		143		Describe its importance in health care delivery System
		144		Enumerate the principles of HMIS
		145		Give the causes of failure of HMIS
Hospital	1	146]	Define health care delivery system
administra	tion	147]	Describe the need of a specialized
			1	hospital administration
		148]	Describe the attributes of a good
]	hospital Administrator
		149) I	Describe functions involved in
		142		hospital administration
		150	0 1	Describe the levels of hospitals and managem
			1	levels in a hospital

				149	Describe functions involved in
					hospital administration
				150	Describe the levels of hospitals and management levels in a hospital
Health	plans	-	1	151	Describe different health plans

Longitudinal, horizontal,		152	Describe characteristics of health plans
integrated, 5 year,			
ADP, SAP, Short			
term,			
long term			
Health plans – MDGs	1	153	Enumerate MDGS
		154	Describe targets & indicators of various
			health related MDGs
		155	Describe reasons for failure to achieve MDGS
Health plans – SDGs	1	156	Enumerate SDGs related to health
		157	Describe targets & indicators of various health related SDGs
		158	Describe Pakistan progress on set targets
Health planning	1	159	Define health planning
		160	Describe importance & use of planning in health
		161	Explain the reasons for ineffective health planning in Pakistan
		162	Describe health planning cycle
		163	Describe the types of health planning

Health	1	164	Define Health economics		
economics		165	Explain the importance of economic studies in health		
		166	Describe different tools used in economic Evaluations		
Health policy	1	167	Define health policy		
		168	Describe its role in health system		
		169	Describe different stages in policy making		
		170	Describe the different types of policies		
		171	Describe the constraints in policy making		
		172	Describe health policy of Pakistan.		
Role of international	1	173	Enumerate international health agencies working in health sector.		
health		174	Discuss structure and function of WHO & UNICEF		
agencies in 175			Explain the roles of WHO & UNICEF in Pakistan.		

	public health								
	Theme-3 (Pain right upper abdomen)								
Anatomy	Gross	1	176	Explain the lobes and segments of the liver					
	anatomy	177	Discuss the gross structure of gall bladder and biliary channels						
			178	Explain the gross and microscopic structure of the pancreas					
	Liver histology		179	Explain the microscopic structure of the liver and gall bladder					

Pathology	Liver Function Tests	1	180	Enumerate the functions of the liver. Explain the significance of different liver function tests. Interpret the Liver function tests in different diseases.
	Mechanisms of liver injury and repair	1	181	Describe the etiology and morphology of liver injury and repair
	Acute Liver failure		182	Describe the etiology, pathogenesis, clinical and biochemical and other features of acute liver failure
	Chronic Liver disease and liver cirrhosis	1	183	Describe the etiology, pathogenesis, clinical and biochemical and other features of chronic liver disease
			184	Explain the complications of liver cirrhosis
	Portal hypertension		185	Describe the etiology, pathogenesis, clinical features and complication of portal hypertension
	Viral hepatitis A and E	1	186	Explain the Etiology, pathogenesis, morphology and clinical features of Acute viral hepatitis A and E infection

Viral hepatitis B	2	187	Explain the Etiology, risk factors, pathogenesis, morphology and clinical features of Acute viral hepatitis B infection
		188	Explain the pathogenesis, morphology and clinical features of Chronic viral hepatitis B infection
		189	Discuss the stages of viral hepatitis B infections
		190	Discuss the complications of chronic Hepatitis B virus infection
		191	Discuss the serological markers of hepatitis B Virus infection
		192	Explain the preventive strategies of Hepatitis B virus infection
Viral Hepatitis C	1	193	Explain the Etiology, risk factors, pathogenesis, morphology and clinical features of viral hepatitis C infection
		194	Discuss the complications of chronic Hepatitis C virus infection
Autoimmune	1	195	Define autoimmune hepatitis
hepatitis		196	Explain the serological and morphological features of autoimmune hepatitis
Toxin and hepatitis		197	Explain the etiology and morphological features of toxins and drug induced hepatitis

Alcoholic liver disease	1	198	Discuss the morphology, pathogenesis
Metabolic liver diseases Non-Alcoholic Hemochromatosis Wilson`s disease	1	199	Describe the morphology, clinical features and complications of NAFLD, Hemochromatosis, Wilson's disease and Alpha-1 Anti-Trypsin deficiency
Alpha-1 antitr ypsin deficiency		200	Describe the etiology, morphology, features and complications of Hemochromatosis

		201	Describe the etiology, morphology, features and complications of Wilson's disease Describe the etiology, morphology,
			clinical features and complication of Alpha- 1 Anti-Trypsin deficiency
Liver abscess	1	203	Describe the etiology, pathogenesis, morphology, clinical presentation, complications
Tumors of the liver	1	204 205	•
		206	-

Gall bladder • Gall stones	1	207	Discuss the types, risk factors, morphology, clinical features and complications of gall stones
Cholecystitis		208	Discuss the risk factors, etiology, morphology, clinical features and complications of acute cholecystitis
		209	Discuss the risk factors, etiology, morphology, clinical features and complications of Chronic Cholecystitis
Gall bladder cancer	1	210	Discuss the risk factors, etiology, morphology, clinical features, staging and complications of carcinoma gall bladder
Pancreas	2	211	Enlist and define the congenital anomalies of Pancreas

	212	Discuss the risk factors, etiology, morphology, clinical features and complications of acute Pancreatitis
	213	Discuss the risk factors, etiology, morphology, clinical features and complications of chronic pancreatitis
	214	Describe the pathogenesis and complications of pancreatic pseudocyst

			215	Discuss the risk factors, etiology, morphology, clinical features, staging and complications of carcinoma of pancreas
Pediatrics	Hereditary	1	216	Classify hereditary hyperbilirubinemias
	hyperbilirubinemias		217	Explain the types, clinical features, investigations and management o hyperbilirubinemias
	Acute hepatitis A	1	218	Explain the Etiology, pathogenesis, features, investigations and treatment of Acute viral hepatitis A infection
Medicine	Hepatitis B virus infection	1	219	Explain the Etiology, pathogenesis, viral hepatitis B infection
			220	Explain the Etiology, pathogenesis, features, investigations and treatment of chronic viral hepatitis B infection
	Hepatitis C virus infection	1	221	Explain the Etiology, pathogenesis, viral hepatitis C infection
			222	Explain the clinical features, investigations, management and complications of liver cirrhosis

	232	Explain	the	etiology,	clinical features,
		_			complications of
		acute and	cnronic	cholecystitis	

			233	Explain the etiology, clinical features, investigations, treatment and complications of acute and chronic pancreatitis
	Carcinoma of the gall bladder		234	Discuss the risk factors, etiology, clinical features, staging and complications of carcinoma of gall bladder
	Liver abscess	1	235	Explain the etiology, clinical features, investigations, treatment and complications of liver abscesses
	Hydatid liver cysts		236	Explain the etiology, clinical features, investigations, treatment, and complications of Hydatid liver cysts.
Pharmaco logy	Hepatotoxic drugs	1	237	Describe first pass hepatic metabolism
			238	Enlist common hepatotoxic drugs

		239	Explain the drug treatment of paracetamol poisoning.
Drugs used in the treatment of hepatitis B	1	240	Classify the drugs for hepatitis B virus infection.
		241	Describe the duration and adverse effects of drugs used in the treatment of chronic hepatitis B.
	1	242	Classify the drugs for hepatitis C virus infection.

	Drugs used in the treatment of hepatitis C		243	Describe the duration and adverse effects of drugs used in the treatment of chronic hepatitis C.			
Community medicine	Viral Hepatitis	1	Describe the epidemiological determinants of Hepatitis B & C.				
			245	Describe the prevalence and incidence with reference to local context.			
			246	Describe the preventive & control measures for Hepatitis B & C.			
Family Medicine	Acute and chronic hepatitis	1	247	Explain the etiology and clinical features of acute hepatitis.			
			248	Explain the management strategies of acute hepatitis in family practice.			
			249	Explain the etiology, clinical features			
			250	Explain the management strategies of chronic hepatitis in family practice.			
			251	Describe the red flags in a patient with acute and chronic hepatitis for referral to specialty care.			

Diphyllobothrium	263	Discuss the life cycle, morphology,
latum		pathogenesis, clinical features and complications
		of Diphyllobothrium latum
Schistosoma hematobium, mansoni and	264	Enlist physical characteristics of Trematodes
japonicum	265	Classify Schistosoma on the basis of organ systems
		Affected

			266	Describe the routes of infection, pathophysiology life cycle, clinical features and lab diagnosis of Schistosoma hematobium, mansoni and japoncum Compare the morphological characteristics
				of eggs of different species of Schistosoma.
A	ascaris lumbricoides	4	268	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Ascaris Lumbricoides
St	trongyloides		269	Discuss the life cycle, morphology, pathogenesis, clinical features and Strongyloides
	ankylostoma uodenale		270	Discuss the life cycle, morphology, pathogenesis, clinical features and Ankylostoma duodenale

	Enterobius vermicularis		271	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Enterobius vermicularis
Medicine	Intestinal tuberculosis	1	272	Discuss the etiology, pathogenesis, clinical features, investigations, treatment and complications of intestinal tuberculosis
Surgery	Acute appendicitis	1	273	Discuss the etiology, risk factors, pathogenesis, clinical features, differential diagnosis, investigations, treatment and complications of acute appendicitis
	Intestinal obstruction	1	274	Discuss the etiology, clinical features, investigations, management and complications of intestinal obstruction
Pharmacolog	Antidiarrheal	1	275	Define and classify antidiarrheal agents

у	Etc		276	Describe the mechanism of action of different antidiarrheal agents
	Laxatives	1	277	Define and classify laxative drugs
	(Bulk-forming, stool softners, osmotic laxatives, laxatives, etc.		278	Describe the mechanism of action of different laxatives

Lactulose		279	Describe the pharmacological basis of Lactulose in the treatment of hepatic encephalopathy
Anti- amoebic drugs	1	280	Classify anti-amoebic drugs Describe mechanism of actions of Metronidazole & Dialoxanide Furoate
		282	Enlist indications and adverse effect Metronidazole & Dialoxanide Furoate.
		283	Describe the drug interaction of Metronidazole with Alcohol.
Anthelminti cs	1	284	Classify Anti-Helminthic drugs

			28	85 E	numerate clinical use(s), adverse effects and		
					ontraindications of Albendazole, Mebendazole,		
				P	yrantal Pamoate, Ivermectin, Praziquantel &		
				N	liclosamide		
			28	86 D	Describe mechanism of action of Albendazole,		
				N	Iebendazole, Pyrantal Pamoate,		
					Ivermectin, Praziquantel &		
				N	liclosamide		
	Anti-	1	28	37 L	List the drugs used in enteric fever		
	Salmonellos						
i	is drugs						
			28	88 D	Describe the basis for selection of antibiotics in enteric fever based on age, pregnancy and resistance		
				e			
				re			
				289	Describe the clinical applications		
					fluroquinolones in the treatment of		
					gastrointestinal disorders		
Fore	Irritants	-	3	290	Classify irritants paisons		
nsic			٦		Classify irritants poisons		
lisic	Forensic		291		Enlist common metallic irritant poisons		

medi	medicine		292	Describe physical appearance, uses,
cine				mechanism, fatal dose, fatal period and signs
				and symptoms of Copper and Mercury poisons
			293	Describe the treatment, postmortem appearance and medicolegal importance of common
				5 1
				Copper and Mercury poisons
			294	Describe the signs and symptoms, treatment,
				postmortem appearance and medicolegal
				importance of acute and chronic Arsenic
				poisoning
			295	Describe the signs and symptoms, treatment,
				postmortem appearance and medicolegal
				importance of acute and chronic Lead poisoning
	Irritants	1	296	Enlist commonly encountered mechanical
				poisons
			297	Enumerate symptoms and signs,
				treatment, postmortem appearance and forensic
				importance
				of powder glass

Irritants/	4	298	Enlist commonly encountered inorganic elements
nonmetallic			poisoning
poisons		299	Enumerate physical appearance and uses of
		2,,,	phosphorus
		300	Describe mechanism of action, fatal dose & period of phosphorus
		301	Describe clinical features and treatment
			phosphorus poisoning
		302	Describe postmortem appearance and forensic
			importance of phosphorus poisoning
		303	Describe physical appearance, uses, mechanism of
			action, clinical features, treatment, postmortem
			appearance and forensic importance
			of aluminum phosphide

304	Describe physical appearance, uses, mechanism of action, clinical features, treatment, postmortem appearance and forensic importance of chlorine
305	Describe physical appearance, uses, mechanism of action, clinical features, treatment, postmortem appearance and forensic importance of iodine

	Irritants/ vegetable poisons	2	306	Enlist commonly encountered inorganic elements poisoning.
			307	Describe characteristics, active principles, and clinical features of vegetable poisons.
			308	Enumerate uses, fatal dose and fatal periods of vegetable poisons.
			309	Describe treatment, postmortem appearance, and forensic importance of vegetable poisons.
	Irritants/ animal poisons	2	310	Differentiate between poisonous and non-poisonous snakes
			311	Classify snakes on the basis of their venom.
			312	Describe the characteristics of snake venoms
			313	Classify different snakes venoms
			314	Describe steps of management of snake bite
			315	Describe post mortem appearance and medicolegal aspects of venomous snake bite
			316	Describe sign and symptoms of scorpion bite
Com munit y	Overview of common intestinal worms'	1	317	Describe the common intestinal worm infestationin our local context
medici infestation and their control		318	Describe the epidemiological determinants of common worm infestation with reference to local Context	

			319	Describe the preventive & control measures for
				common worm infestation
	Control of	1	320	Describe the epidemiology of Dysentery.
	dysentery		321	Describe the prevention & control measures of
				Dysentery.
	Food	1	322	Describe the term food Hygiene
	hygiene		323	Describe the importance of food hygiene
			324	Describe the process of Food hygiene
Family	Enteric	1	325	Classify enteric infections
medicine	infections		326	Describe the etiology, clinical features,
				investigations and management of Salmonellosis
			327	Describe the red flags in a patient with Salmonella
				infections for referral to specialty care.
		1	328	Explain the etiology, and management of acute gastroenteritis.
			329	Discuss the primary and secondary prevention of
				acute gastroenteritis in a primary healthcare setting.
			330	Describe the red-flags in a patient with acute
				gastroenteritis for referral to specialty care.

Pediatrics	Lactase deficiency	1	331	Describe the clinical features, investigations, complications, and management of
				complications, and management of Lactase deficiency.
	Infectious diarrhea		332	Describe the etiology, clinical investigations, complications, and management of infectious diarrheas in children.
	Celiac disease	1	333	Describe the etiology, clinical of Celiac disease.

Theme- 5 (Bleeding per Rectum)

Pathology	Inflammatory bowel	2	334	Classify IBD
	disease (IBD)		335	Discuss the risk factors and etiology of IBDs
			336	Explain the pathogenesis clinical presentation of IBD
			337	Differentiate between Ulcerative colitis and Crohn`s disease
			338	Discuss the investigations and management of IBDs
			339	Explain the intestinal and extra- intestinal manifestations/complications of IBDs

		340	Explain the role of surveillance colonoscopy in patients with Ulcerative colitis
Diverticular disease	1	341	Explain the etiology, pathogenesis, morphology and clinical features of Colonic diverticulosis
Colonic polyps	1	342	Classify colonic polyps.
		343	Describe the pathogenesis, morphology, clinical presentation, complications and diagnosis of different types of colonic polyps
Hemorrhoid s		344	Define hemorrhoids

			345	Explain the morphology, pathogenesis and clinical features of Hemorrhoids
	Colorectal carcinoma	1	346	Describe the adenoma carcinoma sequence
			347	Describe the pathogenesis, morphology, clinical presentation, complications and staging of colorectal Carcinoma
Surgery	Ulcerative colitis	1	348	Explain the etiology, pathogenesis, clinical features, complications and surgical management of Ulcerative colitis
	Crohn`s disease	1	349	Explain the etiology, pathogenesis, clinical features, complications and surgical management of Crohn`s disease

Diverticular disease	1	350	Explain the etiology, pathogenesis,
			features, complications and
			management of Diverticulosis and
			Diverticulitis
Anal diseases:	1	351	Define perianal fistula and anal fissure
 fistula 		352	Explain the risk factors and management of
• fissures			anal fistula and anal fissures

	•	hemorrhoids		35	3	Explain the risk factors and management of hemorrhoids
	Colo	rectal cancers	1	35	4	Classify colorectal cancers
				35	6	Describe the staging of colorectal cancers
				35	7	Explain the pathogenesis, risk factors and clinical features of colorectal cancers
				35	8	Explain the complications, management
	Ische	emic Colitis		1 359		Explain the etiology, pathogenesis, Ischemic colitis
Medicine		able bowel Irome		36	0	Explain the risk factors, clinical features, and
	T 71	. 117	1	26		management of Irritable bowel syndrome
	Ulcei	rative colitis	1	36		Explain the etiology, pathogenesis, of Crohn's disease
	Crohn's disease			1	36	2 Explain the etiology, pathogenesis, features, complications and management of Crohn`s disease
		Ano-rectal		1	36	3 Classify anorectal infections
	infections				36	Explain the risk factors, clinical features and management of anorectal infections including sexually transmitted infections
Pharmacol	ogy	Drugs used in	the of	1	36	5 Enlist the drugs used in IBS
	treatment Irritable Bow Syndrome (IBS)				36	6 Describe the mechanism of a antagonisms (Alosetron) in IBS
		Drugs used in the	e	2	36	7 Classify the drugs used in IBD

	treatment of IBD		360	Describe the mechanism of actions of aminosalicylates, glucocorticoids, purine analogues, methotrexate, monoclonal antibodies and anti-integrin in IBDs
			369	Explain the adverse effects of drugs used in the treatment of IBD
Foreeni sic	Abdominal injuries	1	370	Describe injuries to abdominal wall
medici ne			371	Describe injuries to esophagus, intestine and Stomach Describe injuries to liver and spleen

	Practical work						
Pathology	Ascaris Lumbricoides	6	373	Identify the important morphological and staining characteristics of the ova			
	Enterobius vermicularis		374	Identify the important morphological and staining characteristics of the ova			
	Ankylostoma duodenale		375	Identify the important morphological and staining characteristics of the ova			
	Liver Function Tests		376	To interpret normal and abnormal liver function tests in different clinical scenarios			
Pharmacolog y	Peptic ulcer disease	5	377	construct prescription for I Quadruple therapy)			
	Anti-emetics		378	construct prescriptions for motion sickness, morning sickness, post-operative patient			
			379	construct prescriptions for cancer chemotherapy-			

		induced vomiting
	380	construct a prescription for a patient suffering from amoebic dysentery
Enteric fever	381	construct a prescription for a patient suffering from Enteric fever
	382	Write a prescription for a patient suffering from Ascariasis

Forensic	Poisons	5	383	Identify corrosives
medicine				Tuesday Contostics
	Corosives		384	Case presentation of vitriolage
	Irritants		385	identify common irritant poisons
	Metallic poisons		386	identify common Metallic and poisons
	Vegetable and animal		387	identify common Vegetable and animal poisons
	poisons			animai poisons
Community	Protein calorie	1.5	388	Identify the model
medicine	malnutrition			
			389	Differentiate between the clinical
				features of 2
				models
			390	Justify its public health importance
			391	Signify the concept of food
				fortification and food
				adulteration

My food plate/ The pyramid	1.5	392	Describe different components of the model
Health education	1.5	394	identify a health education message on the problem/scenario provided Formulate a health education message on the problem/scenario provided
House fly /arthropods	1.5	396	Identify the model Explain the disease caused by this vector and its control

Aedes E	gypti	1.5	398	Identify the model
		=	399	Explain the disease caused by this vector and its
				control
Autoclay	re	1.5	400	Identify the model
		Ī	401	Explain the types of items for which
				autoclaves
				are used
			402	Explain the steps of instruments
				sterilization



10 Learning Opportunities and Resources

a. Books:

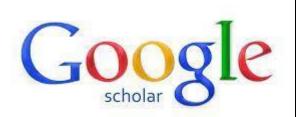
S #	Subjects	Resources
1.	Anatomy	A. Gross Anatomy 1. K.L. Moore, Clinically Oriented Anatomy
		B. Embryology
		1. KeithL. Moore. The Developing Human
		2. Langman's Medical Embryology
2.	Community	1. Community Medicine by Parikh
	Medicine	2. Community Medicine by M Ilyas
		3. Basic Statistics for the Health Sciences by Jan W Kuzma
3.	OBGYN	1. Obstetrics by Ten Teachers, Louise C. Kenny, Jenny E. Myers
		2. Gynaecology by Ten Teachers, Louise Kenny, Helen Bickerstaff
		3. Hacker & Moore's Essentials of Obstetrics and Gynecology
		4. Textbook of Gynecology, Rashid Latif Khan
		5. Fundamentals of Gynaecology, Dr Arshad Chohan
4.	Pathology	1. Robbins & Cotran, Pathologic Basis of Disease,9 th edition.
		2. Rapid Review Pathology,4 th edition by Edward F. Goljan MD
5.	Physiology	1. Textbook Of Medical Physiology by Guyton And Hall
		2. Ganong's Review of Medical Physiology
		3. Human Physiology by Lauralee Sherwood
		4. Berne & Levy Physiology
		5. Best & Taylor Physiological Basis of Medical Practice
6.	Peads	Basis of Pediatrics (8th Edition Pervez Akbar)

b. Website:









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

https://scholar.google.com





https://medlineplus.gov

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

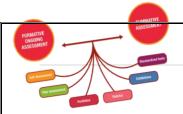
c. Others:

- 1. https://www.youtube.com/user/washingtondeceit
- 2. https://www.webpathology.com/
- 3. https://webpath.med.utah.edu/
- 4. https://www.pathologyatlas.ro/
- 5. https://www.osmosis.org/blog/2015/02/16/four-key-resources-to-learn-histology
- 6. https://www.histopathology.guru/
- 7. https://www.pathologyatlas.ro/
- 8. https://histology.medicine.umich.edu/full-slide-list

d. Articles:

- 1. Gullo I, Grillo F, Mastracci L, Vanoli A, Carneiro F, Saragoni L, Limarzi F, Ferro J, Parente P, Fassan M. Precancerous lesions of the stomach, gastric cancer and hereditary gastric cancer syndromes. Pathologica. 2020 Sep;112(3):166.
- 2. Kurebayashi Y, Kubota N, Sakamoto M. Immune microenvironment of hepatocellular carcinoma, intrahepatic cholangiocarcinoma and liver metastasis of colorectal adenocarcinoma: Relationship with histopathological and molecular classifications. Hepatology Research. 2021 Jan;51(1):5-18.
- 3. Pop OL, Vodnar DC, Diaconeasa Z, Istrati M, Binţinţan A, Binţinţan VV, Suharoschi R, Gabbianelli R. An overview of gut microbiota and colon diseases with a focus on adenomatous colon polyps. International journal of molecular sciences. 2020 Oct 5;21(19):7359.
- **4.** D'amico F, Baumgart DC, Danese S, Peyrin-Biroulet L. Diarrhea during COVID-19 infection: pathogenesis, epidemiology, prevention, and management. Clinical Gastroenterology and hepatology. 2020 Jul 1;18(8):1663-72.
- 5. Vecchio AL, Conelli ML, Guarino A. Infections and chronic diarrhea in children. The Pediatric infectious disease journal. 2021 Jul 1;40(7):e255-8.

- **6.** Zhou Y, Wang M, Yan C, Liu H, Yu DG. Advances in the application of electrospun drug-loaded nanofibers in the treatment of oral ulcers. Biomolecules. 2022 Sep 7;12(9):1254.
- 7. Morgan E, Soerjomataram I, Rumgay H, Coleman HG, Thrift AP, Vignat J, Laversanne M, Ferlay J, Arnold M. The global landscape of esophageal squamous cell carcinoma and esophageal adenocarcinoma incidence and mortality in 2020 and projections to 2040: new estimates from GLOBOCAN 2020. Gastroenterology. 2022 Sep 1;163(3):649-58.
- 8. Tarazi M, Chidambaram S, Markar SR. Risk factors of esophageal squamous cell carcinoma beyond alcohol and smoking. Cancers. 2021 Feb 28;13(5):1009.
- 9. Poddar U, Yachha SK, Krishnani N, Kumari N, Srivastava A, Sarma MS. Solitary rectal ulcer syndrome in children: a report of 140 cases. Journal of pediatric gastroenterology and nutrition. 2020 Jul 1;71(1):29-33.



10.Examination and Methods of Assessment:

a. Instruction:

The year-4 will be assessed in 4 blocks

- 1) Block-1 (Neurosciences-2 module) will be assessed in paper-J
- 2) Block-2 (GIT and hepatobiliary module) will be assessed in paper-K
- 3) Block-3 (Renal-2, Endocrine & Reproduction-2 module) will be assessed in paper-L
- 4) Block-4 (ENT and EYE modules) will be assessed in paper-M
- 5) Each written paper consists of 120 MCQs.
- 6) Internal assessment will be added to final marks in KMU as shown in below table.
- 7) In OSPE, each station will be allotted 6 marks, and a total of 120 (+10% marks of internal assessment) marks are allocated for each OSPE/OSCE examination.

b. Internal:

Formative Assessment

- Assignment
- Quiz (face-to-face or online)
- Student Presentation
- Class participation in small group discussions and case-based learning sessions
- Project / Poster

4th Year MBBS Students are directed to maintain their practical journals and logbooks for formative assessmen

c. KMU EXAM:

Summative Assessment

Modular Exam:

Module exam will be assessed by any of the following assessment methods:

- MCQ
- SEO
- OSPE

Annual Exam:

- Internal Evaluation = 10%
- Final Exam= 90%

Theory: MCQs, SEQs Practical: Viva & OSPE

MCQS

Subject	Total MCQs
Pharmacology	16
Pathology	41
Forensic medicine	16
Community medicine	18
PRIME	01
Medicine	11
Surgery	12
Pediatrics	03
Family medicine	02
Total	120

OSPE

Subject	Viva stations	OSPE/OSCE Stations	Tota l
Pharmacology	2	2	4
Pathology	2	2	4
Forensic medicine	2	2	4
Community medicine	2	4	6
Medicine (GIT examination)	X	1	1
Surgery (GIT/local examination)	X	1	1
Total	8	12	20

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

	4 th Year MBBS Modules Assessment Plan							
Theory paper	Modules	Theory marks	Internal assessme nt theory (10%)	OSPE/OSPE	Internal assessment OSPE/OSPE (10%)	Total Marks		
Paper J	Neurosciences-2	120	13	120	13	266		
Paper K	GIT & Hepatobiliary-2	120	13	120	13	266		
Paper L	Renal-2, Endocrine & Reproduction-2	120	14	120	13	267		
Paper M	ENT and EYE	120	13	120	13	266		
Research*				20	15	35		
Total Marks	S	480	53	500	67	1100		

^{*}Research viva of 20 marks will be conducted in paper-L. However, the rest of 15 marks will be decided by the concerned department internally for the contribution of the students in researc

11.Tentative Timetables

SWAT MEDICAL COLLEGE, SWAT

Department of Medical Education Time Table **4rthYear MBBS** Class Session 2028

Week-1

Theme-1: Difficulty in swallowing

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 11:00AM	11:00AM – 04:00 PM
Monday 27/03/2024	C. M – L1 Chi Square test	Med – L1 Oral Cavity Diseases	Surgery – L1 Tumors of the esophagus	
Tuesday 28/03/2024	EYE – L1 Optics & Eye	Pharma – L1 Anti-emetics	Patho – L1 Salivary Gland (Inflammation and tumors)	M
Wednesday 29/03/2024	F. M – L1 Common house hold poisons	Med – L2 Esophageal motility Disorders	Patho – L2 Esophagus - I	TAL WORK
Thursday 30/03/2024	F. M – L2 Corrosives / Mineral acids	ENT – L1 Cleft lip and palate	Patho – L3 Esophagus - II	HOSPITAL
Friday 31/03/2024	Pharma – L2 Drugs used in the treatment of variceal bleeding - I	Patho – L4 Peptic ulcers - I	C. M – L2 Correlation, Regression	

Week – 2 Theme-2: Pain epigastrium

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 11:00AM	11:00AM – 04:00 PM
Monday 03/04/2024	Patho – L5 Liver function test	Med – L3 Esophagitis	Pharma – L3 Antidiarrheal Drugs	
Tuesday 04/04/2024	F. M – L3 Corrosives/ Alkali	Patho – L6 Gastric polyps and tumors	C. M – L3 Primary health care (PHC)	
Wednesday 05/04/2024	ENT – L2 Pharyngitis and Tonsillitis	CPC	Surgery – L2 Gastric cancer	HOSPITAL WORK
Thursday 06/04/2024	EYE – L2 Refractive Errors	F. M – L4 Corrosive/ organic acid	Patho – L7 Gastritis, Pepticulers	HOSHIAL WORK
Friday 07/04/2024	C. M – L4 Health system of Pakistan Introduction	EYE – L3 Correction of Refractive Errors	Pharma – L4 Drugs used in the treatment of peptic ulcer disease and gastritis – I	

 $\label{eq:Week-3} Week-3$ Theme-3: Pain right upper abdomen

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 11:00AM	11:00AM – 04:00 PM
Monday 10/04/2024	ENT – L3 Oropharyngeal cancer	Patho – L8 Mechanisms of liver injury and repair, acute liver failure	C. M – L5 District health system & HMIS	
Tuesday 11/04/2024	C. M – L6 Health Education	Med – L4 Cardia achalasia, GERD	Patho – L9 Viral Hepatitis B	
Wednesday 12/04/2024	Paed – L1 Hereditary Hyperbilirubinemias	F. M – L5 Corrosive/ vegetable acid and cyanides	Surgery – L3 Gastric outlet obstruction	HOSPITAL WORK
Thursday 13/04/2024	EYE – L4 Differential Diagnosis Of Lid Bumps	Prime – L1 Social accountability	Patho – L10 Chronic liver disease	
Friday 14/04/2024	Pharma – L5 Drugs used in the treatment of peptic ulcer disease and gastritis – II	EYE – L5 Chalazion, Stye	Patho – L11 Viral Hepatitis C	

Week – 4 Theme-4: Pain right upper abdomen

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 11:00AM	11:00AM – 04:00 PM
Monday 17/04/2024	ENT – L4 Salivary glands	Med – L5 Gastritis	Patho – L12 Autoimmune hepatitis	
Tuesday 18/04/2024	F. M – L6 Irritants (Lead) Arsenic	Patho – L13 Metabolic liver disease	C. M – L7 Health Education	HOSPITAL WORK
Wednesday 19/04/2024	Patho – L14 Viral Hepatitis A and E	Pharma – L6 Drugs used in the treatment of hepatitis B & C - I	Surgery – L4 Gall bladder and pancreas – I	
Thursday 20/04/2024		EID HC	OLIDAY	
Friday 21/04/2024		EID HO	OLIDAY	

Week – 5
Theme-5: Diarrhea and constipation

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 12:00PM	12:15PM – 01:15 PM	01:15PM 03:00PM
Monday 01/05/2024			IABOUR DAY		
Tuesday 02/05/2024	ENT – L5 Chronic Tonsillitis	C. M – L6 Hospital Administration		Patho – L15 Gall Bladder pathology	Practical
Wednesday 03/05/2024	F. M – L7 Nonmetallic poisons - I	CPC	HOSPITAL	Patho – L16 Peptic ulcers - II	Practical
Thursday 04/05/2024	EYE – L6 Tumors of Eyelids	C. M – L7 Health Education	WORK	ENT – L6 Dysphagia	Research – L1
Friday 05/05/2024	Pharma – L7 Drugs used in the treatment of hepatitis B & C - II	EYE – L7 Management of Lid Bumps – I		PRAYER BREAK	Research – L1

Week – 6 Theme-6: Diarrhea and constipation

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 12:00PM	12:15PM – 01:15 PM	01:15PM 03:00PM
Monday 08/05/2024		PREPARAT	ΓORY LEAV	E	
Tuesday 09/05/2024		BLCOK – J T	HEORY EX	AM	
Wednesday 10/05/2024		PREPARAT	ΓORY LEAV	E	
Thursday 11/05/2024		BLOCK – J	OSPE EXA	М	
Friday 12/05/2024	Patho – L17 Pancreas – I	EYE – L8 Ptosis	HOSPITAL WORK	PRAYER BREAK	Research – L1

 $\label{eq:Week-7} Week-7$ Theme-7: Diarrhea and constipation

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 12:00PM	12:15PM – 01:15 PM	01:30PM 03:00PM	
Monday 15/05/2024	F. M – L8 Nonmetallic poisons - II	Med – L6 Peptic ulcer disease – I		Patho – L18 Pancreas – I	Practical	
Tuesday 16/05/2024	F. M – L9 Abdominal injuries	Patho – L19 Pancreas – II		C. M – L8 Health plans longitudinal horizontal, ADP, SAP	Practical	
Wednesday 17/05/2024	Med – L7 Peptic ulcer disease – II	Paed – L2 Acute hepatitis A	HOSPITAL WORK	C. M – L9 Health plan MDGs	Practical	
Thursday 18/05/2024	EYE – L8 Trichiasis, Entropion and Ectropion	Patho – L20 Liver Abscess		Surgery – L5 Carcinoma gall bladder		
Friday 19/05/2024	ENT – L7 Oral ulceration	EYE – L9 Ptosis		PRAYER BREAK	Patho – L21 Parasitic entercolitis	

 $\label{eq:Week-8} Week-8 \\$ Theme-8: Bleeding Per Rectum

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 12:00PM	12:15PM – 01:15 PM	01:30PM 03:00PM
Monday 22/05/2024	Pharma – L8 Laxatives	Med – L8 Upper GI Bleeding		Pharma – L9 Anthelmintic	Practical
Tuesday 23/05/2024	Paed – L3 Lactase deficiency and infectious diarrhea	F. M – L10 Vegetable poisons - I		Surgery – L6 Pancreatitis	Practical
Wednesday 24/05/2024	ENT – L8 Trauma to the palate and Oropharynx	C. M – L10 Health plans – SDGs	HOSPITAL WORK	F. M – L11 Vegetable poisons - II	Practical
Thursday 25/05/2024	EYE – L10 Proptosis – Basics	C. M – L11 Health Planning		Patho – L22 Tumors of the liver	Prime – L1 Dealing with patients Miss Afroz
Friday 26/05/2023	Patho – L23 Gall bladder cancer	Pharma – L10 Anti-amoebic drugs		Pharma – L9 Anthelmintic	Patho – L24 Diphyllobothrium latum

Week – 9 Theme-8: Bleeding Per Rectum

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 12:00PM	12:15PM – 01:15 PM	01:30PM 03:00PM
Monday 29/05/2024	Paed – L4 Celiac disease	Patho – L25 Inflammatory bowel disease (IBD)	HOSPITAL WORK	Med – L9 Hepatitis B virus infection	Research – L1
Tuesday 30/05/2024	F. M – L12 Snake poisons - I	C. M – L12 Health Policy		Pharma – L11 Drugs used in the treatment of IBS and IBD	Practical
Wednesday 31/05/2024			BLOCK – J O	SPE EXAM	
Thursday 01/06/2024	Patho – L26 Intestinal obstruction, Ischemic bowel	C. M – L13 Health Economics	HOSPITAL WORK	Patho – L27 Bacterial enterocolitis	Practical
Friday 02/06/2024	ENT – L9 Carcinoma of oral cavity	Surgery – L7 Liver abscess		PRAYER BREAK	Practical

 $\label{eq:Week-10} Week-10$ Theme-8: Bleeding Per Rectum

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	12:15PM – 01:15 PM	12:15PM – 01:15 PM	01:30PM 03:00PM
Monday 05/06/2024		OPENI	NG CEREMONY	(SPORTS WEEK)	
Tuesday 06/06/2024	F. M – L13 Snake poisons - II	Patho – L28 Diarrhea		Surgery – L8 Acute appendicitis	
Wednesday 07/06/2024	Family Medicine – L1 Acute and chronic hepatitis	CPC		C. M – L14 Role of internatio0nal heath agencies in public health	CDODIEC WIFELD
Thursday 08/06/2024	Med – L10 Hepatitis C virus infection	Patho – L29 Schistosoma haematobium, mansoni and japonicum	HOSPITAL WORK	C. M – L15 Overview of common intestinal worm infestation and their control	SPORTS WEEK
Friday 09/06/2024	Patho – L30 Carcinoma Pancreas	Surgery – L9 Intestinal obstruction		PRAYER BREAK	

 $\label{eq:Week-11} Week-11$ Theme-8: Bleeding Per Rectum

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	10:00AM 12:00PM	12:15PM – 01:15 PM
Monday 13/06/2024		CLOSING CERE	MONY (SPORTS WEEK)	
Tuesday 13/06/2024	F. M – L14 Irritants poisons/ powder glass	Hospital Work	Patho – L31 Ascaris and Ankylostoma duodenale	Practical
Wednesday 14/06/2024	Family Medicine – L2 Enteric infections – I		Surgery – L11 Crohn`s disease	Practical
Thursday 15/06/2024	Family Medicine – L3 Enteric infections – II		C. M – L17 Food Hygiene	Practical
Friday 16/06/2024	C. M – L18 Control of Dysentery		PRAYER BREAK	Patho – L32 Colonic polyps hemorrhoids colorectal carcinoma

Week – 12 Theme-8: Bleeding Per Rectum

Day/Date	08:00AM - 09:00AM	09:00AM - 10:00AM	12:15PM – 01:15 PM	12:15PM – 01:15 PM		01:30PM 03:00PM
Monday 19/06/2024	Med – L13 Intestinal tuberculosis	Surgery – L12 Diverticular disease		Med – L14 Irritable bowel syndrome		Research – L1
Tuesday 20/06/2024	Med – L15 Ulcerative colitis	Surgery – L13 Anal diseases Fistula fissures hemorrhoids		DSL/Pathology		Med – L16 Crohn`s disease
Wednesday 21/06/2024	Surgery – L14 Colorectal cancers	Med – L17 Ano-rectal infections	HOSPITAL WORK	Prime – L2 Power Dynamics		Surgery – L15 Ischemic Colitis
Thursday 22/06/2024	EYE – L11 Preseptal and Orbital Cellulitis	ENT – L10 Approach to a patient with sore throat		Prime – L3 Emotional intelligence		Research – L1
Friday 23/06/2024	ENT – L11 Anatomy & physiology of salivary glands	EYE – L12 Thyroid Eye disease (TED)		PRAYER BRE	ZAK	DSL/Pathology

12.For inquiry and troubleshooting



Assist. Prof. Dr. Siyab Ahmad Pathology department Block K Module Co-ordinater siyabamc@gmail.com

13.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.

MB	BBS Year: E	Block:		Mod	_Module:			
Dat	e:							
1. (Unsatisfactory) 2 (Fair) 3	(Satisfactor	rv)	4 (0	Good)		5	
	ccellent)	(3 /		,			
•								
	tegory: Course Contents					1.		
No.	Question	1		2	3	4	5	
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 m	aterials						
	provided in this module?							
3	Were the core topics adequately covered, ensuring	ig a well-						
1	rounded understanding of the subject?							
4	How current and up-to-date were the course cont reflecting recent advancements?	ents in						
5	Did the module incorporate real-world application	one and						
3	case studies effectively?	ons and						
	·							
	Category: Learning Resources		1		1	1		
6	Were the learning resources (e.g., textbooks, onli							
	materials, laboratory facilities) readily available a easily accessible?	and						
7	How helpful were additional learning resources s	uch as						
,	supplementary readings or multimedia content?	such as						
8	Did the module offer adequate support for research	ch and						
Ü	independent study?							
9	Were digital resources and online platforms effect	ctively						
	utilized to enhance the learning experience?							
10	Were there sufficient opportunities for hands-on	practice						
	and practical application of knowledge?							
	Category: Teaching Methods							
11	How well did instructors engage with students are	nd create						
	a supportive learning environment?					1		
12	Were diverse teaching methods (e.g., lectures, gr	oup						
12	discussions, simulations) effectively employed?					1		
13	How responsive were instructors to questions, co and feedback from students?	ncerns,						
14	To what extent did instructors provide timely and	1						
14	constructive feedback on assignments and assess							
15	Were opportunities for collaborative learning and							
13	peer interactions encouraged and facilitated?	. peer to						
No.	Category: Engagement and Motivation	1			1			
16	To what extent did the module use real-world exa	amples						
-	and practical applications to engage students?	1						
17	How well were active learning techniques (e.g., p	oroblem-			1			
	solving, case studies) integrated into the curricult							
18	Did the module provide opportunities for student							

	pursue their individual interests within the subject matter?	li .						
19	Were assessments designed to challenge and motivate							
	students to excel in their studies?							
Cate	gory: Inclusivity and Diversity							
20	How well did the module accommodate different learning students?	styles and	preferences	among				
21	Were efforts made to include diverse perspectives, culture	a and haal	romovindo in s	th a				_
21	curriculum?	s, and baci	kgrounds in	uie				
22	How effectively were accommodations provided for stude	nts with va	arying levels	of				
	prior knowledge?							
	Category: Overall							
No.	Question	1 (Very	2 (Poor)	3 (Fair)	4 (Good)	5 (E	Excel	lent)
		Poor)						
23	How would you rate the overall quality of this module?							

14.Students Diary/Notes

S.NO	DATE	TASK	PENDING/COMPLETED	COMMENTS
	1	1	L	

PROGESS:	ACHIEVMENT: