SWAT MEDICAL COLLEGE SWAT

DEPARTMENT OF MEDICAL EDUCATION



GASTROINTESTINAL, HEPATOBILIARY AND METABOLISM



2ND YEAR MBBS

BLOCK: E

CLASS OF: 2022-27

DURATION: 8 WEEKS

FROM: 15 MAY TO 2 JULY

STUDENT NAME

Contents

1 .	Acaedemic Calendar					
	List Of Abbrevation					
3	Module Committee:	5				
4	Recommended List Of Icons	6				
5	Mission/ Vision of the College	7				
5.1	Mission Statement of the Institution:	7				
5.2	Vision Statement of the institution:	7				
5.3	Exit competencies/outcomes :	7				
6	Overview of the Module/ Preface	8				
7	Introduction/ Organization of Module	9				
7.1	I Introduction:	9				
7.2	2 Rationale:	9				
7.3	Organization of the Study guide:	9				
7.4	Teaching Strategies:	12				
7.5	Assessment strategies	12				
7.6	Feedback mechanism and summary	13				
8	Table Of Specification	15				
9	Learning Objectives	16				
9.1	General Learning Outcomes	16				
9.2	Specific Learning Outcomes	16				
10	Learning Opportunities and Resources	60				
11	Examination and Methods of Assessment:	61				
a.	Instructions:	61				
b.	The Distribution of Internal Assessment Score (10% Marks):	61				
В.	Distribution of 15 Marks for Block OSPE will be as under:	62				
c.	University Examination: Exam has 90% Marks	62				
BLC	OCK E OSPE BLUEPRINT	63				
12	Tentative Timetables	64				
13	For inquiry and troubleshooting	72				
14	Module Evaluation Form	73				
15	Students Diary/Notes	75				

1 Acaedemic Calendar

				Calendar MBBS – 2023-24 ical College, Swat					
Activity/ Events	Week	Date	1 st Year	2 ^{na} 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 w99ks)	(5 weeks) 22 nd 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	aimuai vaam		
Regular Classes	5	11th to 15th March	Exam	Exam	- Little	Block J Exam	Foundation-III		
Regular Classes	6	18th to 22nd March					(2 Weeks) 22 rd March Module Exam		
Regular Classes	7	25th to 29th March			Infection &		Blood & Immunology-III		
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	1	G ayam	(3 Meeks) Gryam GIT and Henatohili	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) 10th and 11th June Block	exam		
Regular Classes	13	6th to 10th May			Maddianatana	K Exam	Cardiorespiratory-III		
Regular Classes	14	13th to 17th May			Multisystem (5 weeks)	T Engli	(5 weeks)		
Regular Classes	15	20th to 24th May			Module Exam 31st May		3 rd & 4 th June Block O		
Regular Classes	16	27th May to 31st May	MSK-I	GIT, Hepatobiliary &	The second secon		Exam		
Regular Classes	17	3rd to 7th June	(8 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	(2 weeks) 14 th June Module Exam		
Eid-ul-Adha Holidays	19	17th to 21th June		1 ^{et} & 2 ^{ret} July			1st & 2sd July module	(4 weeks)	Endocrine &
Regular Classes	20	24th to 28th June			exam	1st and 2nd July Module Exam	Reproduction-III		
Summer Vacations	21-23	3rd to 21st July				CAMII	(3 weeks) 29th & 30th July Block P		
Regular Classes	24	22 nd to 26 th July		Renal (3 weeks) 12th to 13th August Block E Endocrine-I (4 weeks) 6th Sep			Exam		
Regular Classes	25	29th July to 2nd Aug	CVS-I		MSK-II (5 weeks) 2nd Sep 3nd Sep		Neurosciences - III		
Regular Classes	26	5th to 9th Aug	(5 weeks) 23rd August Module			Endocrine and	(3 weeks)		
Regular Classes	27	12th to 16th Aug	Exam		Block H exam	Reproduction – II (8 weeks) 16th and 17th September	16 th August Module Exam		
Regular Classes	28	19th 23rd Aug			CVS-II (3 weeks)		GIT & Hepatobiliary		
Regular Classes	29	26th to 30th Aug	Respiratory-I			Block-L exam	(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			Multisystem-II		
Regular Classes	32	16 th to 20 th Sep	Block-C Exam	(4 weeks)	20th September Module exam	EYE and ENT	(4 weeks)		
Regular Classes/ Preparatory Leaves Regular Classes/ Preparatory Leaves	33 34	23 rd to 27 th Sep 30 th Sep to 4 th Oct		30th Sep 1st Oct	RF S.JI (4 iveeks)	(6 weeks) 14" to 18" Oct Block M1	7th -8th Oct Block Q		
Regular Classes/ Preparatory Leaves	35	7th to 11th Oct	PREPARATORY		21st and 22nd 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	LLAVES	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		11 th to 15 th Nov			DDEDARATORY				
	40				PREPARATORY	PREPARATORY	PREPARATORY		
Regular Classes/ Preparatory Leaves	41	18th to 22nd Nov	Annual Exam as per		LEAVES	LEAVES	LEAVES		
Regular Classes/ Preparatory Leaves	42	25th to 29th Nov	KMU schedule.	Annual Exam as per		22.1120	22.1120		
Regular Classes/ Preparatory Leaves	42	2 nd to 6 th Dec	Time Conventor	KMU					
Regular Classes/ Preparatory Leaves	43	9th to 13th Dec		Killo					
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					Minter vegetion	Annual Exam as per			
	54-57 January 2025				Winter vacation	KMU schedule.			
Start of new acade	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

Anat-SGD	Small Group Discussion in Anatomy	G.Med-L	General Medicine Lecture						
Bio-L	Biochemistry Lecture	OSPE	Objectively Structured Practical Examination						
Bio-P	Biochemistry Practical	Paeds-L	Pediatrics Lecture						
Bio-SGD	Small Group Discussion in Biochemistry	Patho-L	Pathology Lecture						
C.Med-L	Community Medicine Lecture	Phar-L	Pharmacology Lecture						
DSL	DSL Directed Self Learning		Physiology Lecture						
FDT	Film/Demonstration/Tutorial	Phy-P	Physiology Practical						
F.Med-L	Forensic Medicine Lecture	Phy-SGD	Small Group Discussion in Physiology						
G.Anat-L	Gross Anatomy Lecture	SDL	Self-Directed learning						
Histo-P	Histology Practical	SAQs	Short Answer Questions						
MCQs	Multiple Choice Questions	SEQs	Short Essay Questions						
Med.Edu-L Medical Education Lecture		SGDs	Small Group Discussions						
PRIME	Professionalism and communication skills, Research, Identity formation, Management and leadership, Ethics								

3 Module Committee:

s.no	Name	Department	Role						
1.	Prof. Dr. Aziz Ahmad	Dea	n / principal						
2.	Dr. M Junaid Khan	DME	Director						
Module Team									
3.	Prof. Dr. Rashid Ahmad	Physiology	Chairman MPC-1						
4.	Assoc. Prof. Dr Humaira Ali	Anatomy	Block co-ordinator						
5.	Prof. Dr. Muhammad Khan	Anatomy	Member						
6.	Assoc. Prof. Dr. Obaid ur Rahman	Bio-Chemistry	Member						
7.	Dr. Fiza Iqbal	Physiology	Member						
8.	Asst. Prof. Dr. Amanullah	Physiology	Member						
9.	Asst. Prof. Dr Sara	Bio-Chemistry	Member						
10.	Dr. Ubaid Ullah	PRIME	Member						
11.		Pathology	Co-opted Member						
12.		Community Medicine	Co-opted Member						
13.		Pharmacology	Co-opted 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 impart quality medical education through evidence based teaching incorporating professionalism, patient safety, research, critical thinking, ethics and leadership.

5.2 Vision Statement of the institution:

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

5.3 Exit competencies/outcomes:

We need integration because we want to produce medical graduates with desirable exit competencies for a physician. Faculty of Swat Medical College has set following outcomes that by the end of the 5-year MBBS program, graduates should be able to:

- 1. Diagnose and treat common conditions safely, efficiently and apply knowledge of medical sciences and health principles to the ailing humanity.
- 2. Refer life threatening and uncommon conditions to relevant experts as soon as possible
- 3. Demonstrate effective communications skills with all members of the health care system
- 4. Demonstrate professional ethics and behaviour towards all members of the health care system
- 5. Demonstrate critical thinking, problem solving and decision-making skills
- 6. Work productively in a multi-professional system
- 7. Exercise basic steps to practice Evidence-based Medicine Work in a team to organize research studies
- 8. Demonstrate ability to be pro-active in updating his knowledge and skills and in improving professionally.



6 Overview of the Module/ Preface

Congratulations and welcome to the Block E of 2nd year MBBS, comprising of gastrointestinal and renal modules, where the overarching goal is to provide high-quality educational program for acquisition of knowledge, skills, and behaviors necessary for the future doctor. Throughout the program, emphasis is placed on integrating theoretical knowledge with practical applications, ensuring a comprehensive didactic experience. The core themes of both the modules are meticulously designed to foster an in-depth and thorough understanding of the gastrointestinal and renal systems. Students will gain hands-on experience through dissections, small group interactive sessions, case based discussions and practicals in diverse settings such as museum, dissection hall and skill labs providing a well-rounded education.

The study guide acts as an indispensable tool for the students, offering clarity on module contents, instructional methodologies, faculty guidance, and assessment criteria. It serves as a crucial reference for assessment and evaluation by clearly outlining the theory and practical components that will be assessed, along with the corresponding assessment tools, which may include MCQS, SEQS and OSPE. This transparency enables students to align their efforts with the evaluation criteria, promoting a sense of accountability and preparation for success in their academic pursuits. As future medical professionals, graduates can look forward to diverse career pathways, from clinical practice to research, with opportunities in various disciplines worldwide. In essence, by actively engaging with the information provided, students can navigate their academic journey with confidence and purpose, maximizing their learning experience in the relevant subject, ethical values and professionalism.

Being the block coordinator, I wish you all the best.



7 Introduction/ Organization of Module

7.1 Introduction:

"GIT & Hepatobiliary Module" is a nine-week module with eight themes. Maximum effort has been made to make this module interesting and interactive, so you would be able to integrate basic sciences knowledge with clinical subjects and enjoy learning.

The composition of the food is complex and little of it is water soluble. Therefore, it cannot

enter directly into the body fluids. Hence it needs to be broken down into its chemical components before it can be absorbed. Gastrointestinal movements are responsible for breaking down and pushing the food along the alimentary tract, different secretions



of the GIT are concerned with breakdown of food into its digestive particles. The surface of the food is exposed to the enzymatic activity. Through the process of absorption, there is transfer of nutrients or the digestive products from the lumen of alimentary tract to blood or the lymph. Disruption of any of its activities can lead to disease states such as pain, peptic ulceration, diarrhea &constipation. Coordination of all these functions is brought about hormones of GIT and exocrine pancreas.

7.2 Rationale:

It is designed in an integrated manner to build the student's basic knowledge about the development, structure, organization, and functions of GIT and hepatobiliary systems. It includes the chemistry of saliva, bile, gastric secretions, pancreatic secretions and intestinal juices along with digestion, absorption and metabolism of carbohydrates, proteins and lipids. In addition to Anatomy, Physiology and Biochemistry, Clinical, PRIME and behavioral sciences are also included in this module.

7.3 Organization of the Study guide:

Block E is a second block of 2nd year MBBS, with GIT and renal modules. GIT module consists of nine weeks duration, with eight themes, each one based on a real-life complaint and developed around common GIT disorders. These themes will act as trigger to enhance the clinical relevance and will boost your problem-solving abilities.

S. No	Title of GIT themes	Duration				
1.	Painful swallowing	1 week				
2.	Abdominal pain	2 weeks				
3.	Jaundice	1 week				
4.	Diarrhea and Constipation	1 week				
5.	Bleeding Per Rectum	1 week				
6.	Hyperglycemia (Carbohydrate metabolism)	1 week				
7.	Obesity (Lipid metabolism)	4 days				
8.	Wasting (Protein metabolism)	8 days				

BLOCK FRAMEWORK: 2nd YEAR MBBS

В	Block D		В	Block E Block F							
Module 6	Module 7		Module 8	Module 9		Module 10	Module 11		P R E	P	P R O F
Neurosciences IA 7 weeks	Neurosciences IB 6 weeks	B L O C K D E X A	GIT & Hepatobiliary 9 weeks	Renal 3 weeks	B L O C K E X A M	Endocrinology 3 weeks	Reproduction 3 weeks	B L O C K F E X A M	R O F E S S I O N A L E X A	R E P A R A T I O N	E S S I O N A L E X A

DISTRIBUTION OF TEACHING HOURS AMONG DIFFERENT SUBJECTS

GIT Module 2nd Year MBBS											
S.No	Subjects/ Disciplines	Large Group Format			Small Group Format (Batch A, Batch B, Batch C)						
		Lectures	DSLs	PBL/CPC	Practical's	SGDs	Dissection	SDLs			
1.	Anatomy	32	8	3	7	12					
2.	Physiology	27	8	2	10	2					
3.	Biochemistry	46	8		10	4					
4.	Pharmacology	5	1		-	1					
5.	Pathology	4	-		-	-					
6.	Forensic Medicine	2									
7.	Community Medicine	3									
8.	PRIME	5									
9.	General Medicine	5									
10.	Pediatrics	1						18			
11.	Ophthalmology		1		1	1	1				
12.	ENT	1									
13.	General Surgery	5	1			1					
14.	Neurosurgery		1		-	1	-				
15.	Plastic Surgery										
16.	Radiology										
17.	Islamiyat										
18.	Pak. Study	7									
19.	IT										
	Sub Totals	142	24	5	27	18		18			
	Total Contact Ho	ours = 234									

7.4 Teaching Strategies:

An integrated curriculum is designed to fuse different subject areas, experiences, and real-life knowledge together to make a more fulfilling and tangible learning environment for students. When you look at the time table of the module, you will find that the mode of instruction is going to be multi-pronged with small group discussions (SGD), large class format (LCF), practical & skill lab sessions.



Subject Integration

The study guide is planned to get thorough going benefit from the themes and clinical relevance to achieve the learning objectives.

Horizontal Integration: Lectures on relevant topics are horizontally integrated with other basic science subjects in year 1& 2 of the medical program

Vertical Integration: is done through clinical correlation of basic sciences through clinical lectures.

Lectures

Lecturing or large group format (LGF) teaching is didactic one-way teaching of concepts by subject expert to a large group of learners. They are an efficient means of transferring knowledge and concepts to large groups. They can be used to stimulate interest, explain concepts, provide core knowledge, and direct student learning.

Small group discussions (SGD)

Small-group discussion is a student-centered methodology, which allows students to actively involve and be partners in the teaching-learning process. Students interact with peers and instructors, discussing, and sharing ideas in a group of 6 to 10.

7.5 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.

A. 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.

B. 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.

C. Assessment tools:

Multiple Choice Questions (MCQ)

The MCQ is a restricted response, objective assessment instrument. It contains a stem or a description of a problem, lead-in, or the question, followed by four or five options in outline format.

Short Answer Questions (SAQ)

Short answer question is an open ended, semi-structured question format. A structured, predetermined marking scheme improves objectivity. The questions can incorporate clinical scenarios.

Objective Structured Clinical Examination (OSCE)

OSCE consists of multiple stations (usually 15-20) where each candidate is asked to perform a defined task such as taking a focused history or performing a focused examination of a particular system. A standardized marking scheme specific for each case is used.

7.6 Feedback mechanism and summary

Students can give written feedback of any faculty through LMS or Feedback forms at the end of a particular session or a module.

Effective Feedback, Effective Learning!



THE STUDY GUIDE:

- Inform students how student learning program of the integrated modular system has been organized.
- Help students organize and manage their studies throughout the module.
- Guide students on assessment methods, rules and regulations.
- Communicates summarized information on the organization and management of the module.
- This will help the student to contact the right person in case of any difficulty.
- Defines the objectives which are expected to be achieved at the end of the module.
- Identifies the learning strategies such as lectures, small group teachings, clinical skills, demonstration, tutorial and case-based learning that will be implemented to achieve the module objectives.
- Provides a list of learning resources such as books, computer-assisted learning programs, web- links, journals, for students to consult in order to maximize their learning.
- Highlights information on the contribution of continuous and block examinations on the student's overall performance.
- Includes information on the assessment methods that will be held to determine every student's achievement of objectives.
- Focuses on information pertaining to examination policy, rules and regulations.

COMPETENCIES:

Competencies focused in Year I and II are: -

- Medical Knowledge
- Problem solving
- Procedural skills
- Communication skills
- Empathy
- Professionalism
- Leadership and Management skills
- Research skills

OUTCOMES:

This curriculum meets the standards of Pakistan Medical Commission and our students, on completion of program will develop required competencies as defined worldwide in a graduate doctor. By the end of first year, students should be able to:

- Correlate the developmental and anatomical knowledge of cell, hematology, immunology, nerve, muscle, bone, cardiovascular and respiratory systems to their physiological and biochemical basis.
- Perform basic examination skills related to basic concepts addressed
- Comprehend the significance of behavioral science in medical education.
- Analyze multiple perspectives of Islamic studies or ethics
- Discuss the basic principles of research.

8 Table Of Specification

Subject	We	No. of Hours		Asse	essment	
	Weightage	Allocat ed in	Know	ledge	S	Skills
	Je	Time	SEQs	MCQs	OSPE	Viva
		table				BLOCK E
Gross	12.49%	29	00	16		
Anatomy					04	02
Histology	9.82%	23	00	09		
Embryology	2.56%	06	00	4		
Physiology	21.36%	50	00	15	00	02
Biochemistry	29.48%	69	00	22	03	02
PRIME including Research	2.56%	06	00	03	00	00
Pharmacology	2.13%	05	00	01	00	00
Pathology	1.70%	04	00	03	00	00
Community Medicine	0.85%	02	00	01	00	00
Forensic Medicine	0.85%	02	00	01	00	00
Pakistan Studies	3.41%	08	00	00	00	00
General Medicine	2.13%	05	00	01	00	00
General	2.13%	05	00	02	00	00
Surgery ENT	0.42%	01	00	00	00	00
SDL	7.69%	18	00	00	00	00
Paeds	0.42%	01	00	00	00	00
Total	100%	234	00	78	07	06



9 Learning Objectives

9.1 General Learning Outcomes

At the end of this 9 weeks` module, the 2ndYear MBBS students will be able to:

Knowledge:

- Describe the anatomy of oral cavity with respect to GI functions.
- Elaborate the structure and functions of salivary glands.
- Describe the structure and development of esophagus, stomach, small intestine and large intestine.
- Describe the anatomy of peritoneum and mesentery.
- Explain the movements, functions and regulations of gastrointestinal functions.
- Describe the structure, development and functions of hepatobiliary system and pancreas.
- Discuss the mechanisms of digestion and absorptions of carbohydrates, proteins, fats and other nutrients.
- Describe different physiological reflexes occurring upon stimulation of gastrointestinal organs.
- Discuss the chemistry and functions of gastrointestinal hormones.
- Relate the basic sciences knowledge/pathophysiology with understanding of the common GIT diseases like peptic ulcers, viral hepatitis, obstructive jaundice, carcinoma of esophagus and colorectal cancers.
- Explain the metabolic processes related to carbohydrates, fats and protein metabolism.
- Explain the psychosocial aspects of common psychiatric and functional bowel disorders.

Skills

- Dissect various parts of GIT, and related structures including peritoneum, to demonstrate their gross anatomy and relationship to each other.
- Identify different organs of GIT under microscope and on model.

Attitude

- Demonstrate effective communication skill strategies especially during small group discussion.
- Describe the components of medical ethics.
- Explain research ethics, research misconduct and plagiarism.

9.2 Specific Learning Outcomes

Theme-1: "PAINFUL SWALLOWING"

Introduction:

This is a one-week activity and comprises of structural and functional features of upper gastrointestinal tract (oral cavity, oesophagus). It includes general principles of GIT motility and secretion. Developmental and microscopic features of oral cavity and esophagus are also

part of this theme.

The contents of this theme will be taught in LGF-Lectures, DSL and SGF-Practicals, SGD, SDL.

		Theme-1:	PAIN	FUL SWALLOWI	NG		
S. No	Topic	Content	S. No	Learning objectives	Teaching strategies	H o u r	Assessment
		G	ROS	S ANATOMY			
1	Oral cavity – I	Oral cavity	1	Describe the musculature of tongue Describe the nerve supply of tongue	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
2	Oral cavity – II	Salivary glands	2	Describe the gross anatomy of parotid, submandibular and sublingual salivary gland	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
3	Esophagus	Esophagus	3	Describe the extent, course, relations and gross structure of esophagus.	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			EMB	RYOLOGY			
1	Oral cavity	Development of tongue	4	Describe the developmental events of tongue Enlist various anomalies of tongue development	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
2	Esophagus	Development of esophagus	5	Describe the development of Esophagus	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
3	Salivary glands	Development of salivary glands	6	Describe the development of salivary glands	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			HIS	STOLOGY			

				Describe the		1	MCQ/SEQ/
1	Oral cavity	Oral cavity	7	microscopic	LGF/SGD		VIVA/OSP
				structure of lips			Е
				Describe the			
				histological			
				features of tooth			
			8	in longitudinal			
				and transverse			
				section			
				Explain the			
				histology of			
			9	tongue.			
				tongue.			
				Differentiate			
				between the			
				microscopic			
			10	picture of anterior			
				2/3rds and			
				posterior 1/3rds			
				of the tongue			
				Identify the			
				epithelium of			MCQ/SEQ/
2	Esophagus	Esophagus	11	esophagus and	LGF/SGD	1	VIVA/OSP
_	Loopingus	Loopinguo		esophageal glands	LGI75GD		E
				in mucosa			
				Differentiate			
				between			
			12	musculature in			
			12	different parts of			
				the esophagus			
			PHY	SIOLOGY			
		General		Describe			
	GIT	principles of		electrical activity			MCQ/SEQ/
1.	motility	gastrointestinal	13	of gastrointestinal	LGF/SGD	1	VIVA/OSP
		motility		smooth muscle			E
				Describe the			
				mechanism of			
			14	excitation of			
				smooth muscle of			
				gastrointestinal			
				Differentiate			
			15	between slow			
				wave and spike			
				wave and spike			1

				potential			
2.	Neural control of GIT function	Enteric Nervous system	16	Differentiate between mesenteric and submucosal plexus.	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			17	Classify the following enteric nervous system neurotransmitters as excitatory or inhibitory: norepinephrine, acetylcholine, CCK, VIP, histamine, and somatostatin			
			18	Describe the role of autonomic nervous system in regulation of GIT's function			
			19	Differentiate between sympathetic and parasympathetic modulation of the enteric nervous system and the effector organs of the GI tract			
			20	Describe three types of gastrointestinal reflexes			
3.	GIT Hormones	Hormonal control of Gastrointestina l motility	21	Describe gastrointestinal hormone actions, stimuli for secretion, and site of secretion	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
4.	Movements of the GIT	Functional types of	22	Describe the functional types	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP

the gastrointestinal tract 23 Describe law of gut. Describe blood flow through the villus and its significance 5. GIT blood supply 5. GIT blood supply Gastrointestinal blood flow Splanchnic circulation 5. GIT blood supply Acceptable a circulation Acceptable a circulatio			movements in		of movements in			Е
gastrointestinal tract 23 gut. Describe law of gut. Describe blood flow through the villus and its significance 5. GIT blood supply 5. GIT blood supply Describe anatomy of the gastrointestinal blood supply Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe here of gut activity and metabolic factors on gastrointestinal blood flow Describe here of gut activity and metabolic factors on gastrointestinal blood flow Describe here of gut activity and metabolic factors on gastrointestinal blood flow Describe here of gastrointestinal blood flow Describe here of gastrointestinal blood flow Describe here of gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe here of gastrointestinal blood flow Describe here of gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe here of gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metab								
tract								
23 Describe law of gut. Describe blood flow through the villus and its significance Describe anatomy of the significance Describe anatomy of the activity and metabolic factors on gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe chewing and mastication Describe chewing and mastication Describe the effects of the mechanics of ingestion of food Describe chewing and mastication Describe the effects of the pharyngeal stage of swallowing on respiration Describe the effects of the pharyngeal stage of swallowing on respiration Describe the effects of the pharyngeal stage of swallowing on respiration Describe the effects of the pharyngeal stage of swallowing on respiration Describe the effects of the pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract secretion MCQ/SEQ/VIVA/OSP E								
Secretion Secr			tract					
5. GIT blood supply Describe anatomy of the gastrointestinal blood flow—Splanchnic circulation 26 Describe anatomy of the gastrointestinal blood supply Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe chewing and mastication Describe chewing and mastication Describe chewing and mastication Describe the effects of the pharyngeal stage of swallowing. Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E MCQ/SEQ/VIVA/OSP MCQ/SEQ/VIVA/OSP				23				
5. GIT blood supply 25 25 25 25 25 25 26 27 27 27 28 28 29 29 29 29 29 29								
5. GIT blood supply Describe anatomy of the gastrointestinal blood supply Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe herous control of gastrointestinal blood flo								
5. GIT blood supply Splanchnic circulation 25 Describe anatomy of the gastrointestinal blood supply Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe heaving and mastication Describe chewing and mastication Describe the effects of the pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD Describe the claimentary tract glands LGF/SGD Describe the claimen				24	_			
5. GIT blood supply Splanchnic circulation 25 Describe anatomy of the gastrointestinal blood supply Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe heaving and mastication Describe chewing and mastication Describe the effects of the pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD Describe the claimentary tract glands LGF/SGD Describe the claimen					significance			
5. GIT blood supply 1 blood flow—Splanchnic circulation 25 25 26 26 26 26 26 27 27 27			Gastrointestina					1.600/070/
supply Splanchnic circulation Bastrointestinal blood supply E	_	GIT blood	l blood flow—	2.5	<u> </u>	I CE/CCE	1	
circulation blood supply E	5.	supply	Splanchnic	25	gastrointestinal	LGF/SGD	1	
26 Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow 27 Describe nervous control of gastrointestinal blood flow 6. Ingestion of food Mechanics of ingestion of food 28 Describe the mechanics of ingestion of food Describe the mechanics of ingestion of food 29 Describe chewing and mastication Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration 7. GIT Secretion General principles of alimentary tract glands Describe basic mechanisms of stimulation of the alimentary tract glands MCQ/SEQ/ VIVA/OSP AMCQ/SEQ/ Stimulation of the alimentary tract glands					_			E
26 activity and metabolic factors on gastrointestinal blood flow 27 Describe nervous control of gastrointestinal blood flow 6. Ingestion of food Mechanics of ingestion of food 28 Describe the mechanics of ingestion of food 29 Describe chewing and mastication 29 Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration 7. GIT Secretion General principles of alimentary tract secretion 26 Describe basic mechanisms of stimulation of the alimentary tract glands Activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe the effects of food 1 MCQ/SEQ/ VIVA/OSP E MCQ/SEQ/ VIVA/OSP E								
26 activity and metabolic factors on gastrointestinal blood flow 27 Describe nervous control of gastrointestinal blood flow 6. Ingestion of food Mechanics of ingestion of food 28 Describe the mechanics of ingestion of food 29 Describe chewing and mastication 29 Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration 7. GIT Secretion General principles of alimentary tract secretion 26 Describe basic mechanisms of stimulation of the alimentary tract glands Activity and metabolic factors on gastrointestinal blood flow Describe nervous control of gastrointestinal blood flow Describe the effects of food 1 MCQ/SEQ/ VIVA/OSP E MCQ/SEQ/ VIVA/OSP E					effect of gut			
metabolic factors on gastrointestinal blood flow 27 Describe nervous control of gastrointestinal blood flow 6. Ingestion of food Mechanics of ingestion of food 28 Describe the mechanics of ingestion of food Describe chewing and mastication Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration 7. GIT Secretion General principles of alimentary tract glands MCQ/SEQ/VIVA/OSP E MCQ/SEQ/VIVA/OSP 1 MCQ/SEQ/VIVA/OSP E MCQ/SEQ/VIVA/OSP E MCQ/SEQ/VIVA/OSP 1 MCQ/SEQ/VIVA/OSP				26	activity and			
blood flow Describe nervous control of gastrointestinal blood flow 6. Ingestion of food Mechanics of ingestion of food 28 Describe the mechanics of ingestion of food 29 Describe chewing and mastication Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration GIT Secretion GIT Secretion General principles of alimentary tract glands Describe basic mechanisms of stimulation of the alimentary tract glands Describe nervous control of gastrointestinal blood flow Describe the effects of the of stimulation of the alimentary tract glands Describe basic mechanisms of stimulation of the alimentary tract glands				26	metabolic factors			
Describe nervous control of gastrointestinal blood flow Ingestion of food Mechanics of ingestion of food 28 mechanics of ingestion of food Describe the mechanics of ingestion of food Describe chewing and mastication Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration GIT Secretion General principles of alimentary tract secretion Describe basic mechanisms of stimulation of the alimentary tract glands Describe nervous control of gastrointestinal blood flow Describe the effects of the pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands					on gastrointestinal			
27 control of gastrointestinal blood flow 6. Ingestion of food ingestion of food 28 mechanics of ingestion of food 29 mechanics of ingestion of food 29 Describe chewing and mastication 29 Describe different stages of swallowing. 28 mechanics of ingestion of food 29 Describe chewing and mastication 29 Describe different stages of swallowing. 29 Describe different stages of swallowing. 20 Describe the effects of the pharyngeal stage of swallowing on respiration 20 Describe basic mechanisms of stimulation of the alimentary tract glands 27 Describe the mechanisms of stimulation of the alimentary tract glands 27 Describe the mechanisms of stimulation of the alimentary tract glands 27 Describe the mechanisms of stimulation of the alimentary tract glands 28 Describe the mechanisms of stimulation of the alimentary tract glands 28 Describe the mechanisms of stimulation of the alimentary tract glands 27 Describe the mechanisms of stimulation of the alimentary tract glands 27 Describe the mechanisms of stimulation of the alimentary tract glands 27 Describe the mechanics of the mechanic					blood flow			
6. Ingestion of food Ingestion I					Describe nervous			
6. Ingestion of food				27	control of			
6. Ingestion of food Ingestion of food 28 Describe the mechanics of ingestion of food 1 VIVA/OSP				21	gastrointestinal			
6. Ingestion of food ingestion of food 28 mechanics of ingestion of food 29 Describe chewing and mastication Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration GIT Secretion General principles of alimentary tract secretion General principles of alimentary tract glands Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 VIVA/OSP E					blood flow			
food food lingestion of food lingestion lingestion of food lingestion ling		Ingestion of	Mechanics of		Describe the			MCQ/SEQ/
7. GIT Secretion General principles of alimentary tract secretion General glands Good Ingestion of food E	6.	_	ingestion of	28	mechanics of	LGF/SGD	1	VIVA/OSP
and mastication Describe different stages of swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration GIT Secretion General principles of alimentary tract secretion General principles of alimentary tract glands MCQ/SEQ/ Stimulation of the alimentary tract glands		1000	food		ingestion of food			E
7. GIT Secretion General principles of alimentary tract secretion And mastication Describe different stages of swallowing.				29	Describe chewing			
7. GIT Secretion General principles of alimentary tract secretion General glands Stages of swallowing. Describe the effects of the 31 pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E				2)				
swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration General principles of alimentary tract secretion General principles of alimentary tract glands Swallowing. Describe the effects of the pharyngeal stage of swallowing on respiration LGF/SGD 1 MCQ/SEQ/VIVA/OSP E								
7. GIT Secretion General principles of alimentary tract secretion General glands Describe the effects of the pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands Describe the effects of the pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands				30	=			
7. GIT Secretion General principles of alimentary tract secretion General glands effects of the pharyngeal stage of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E								
7. GIT Secretion General principles of alimentary tract secretion General glands Secretion General principles of alimentary tract secretion General glands Secretion General principles of alimentary tract glands General principles of stimulation of the alimentary tract glands MCQ/SEQ/VIVA/OSP E								
7. GIT Secretion General principles of alimentary tract secretion General glands Of swallowing on respiration Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E								
7. GIT Secretion General principles of alimentary tract secretion General principles of alimentary tract glands respiration Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E				31				
7. GIT Secretion General principles of alimentary tract secretion General principles of alimentary tract glands Describe basic mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E								
7. General principles of alimentary tract secretion 32 mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E								
7. GIT principles of alimentary tract secretion 32 mechanisms of stimulation of the alimentary tract glands LGF/SGD 1 MCQ/SEQ/VIVA/OSP E			General					
Secretion alimentary tract secretion stimulation of the alimentary tract glands LGF/SGD 1 VIVA/OSP E		GIT	principles of			I OF OC	4	
tract secretion glands	7.			32		LGF/SGD	1	
glands								E
33 Describe dual								
				33	Describe dual			

				important in oral			
) 39	the saliva			
			39	components of			
				State the			
				salivary secretion.			
			38	that increase			
				types of stimuli			
				Describe three			
				salivary mucus.			
				identify the function of			
		secretion		mucous, and			Е
9.	Saliva -II	Salivary	37	GI secretion of	LGF/SGD	1	VIVA/OSP
		Control of		types involved in			MCQ/SEQ/
				stimuli and cell			
				Identify the			
				amylase (ptyalin).			
				of salivary			
			36	digestion products			
				substrates and			
				State the			
				secretion rate.			
				involved in each			
				cell types			
				and the principal			
				secretion rates			
			35	and at high			
				secretion rates			
				HCO3- at low			
				Na+, Cl-, and			
				concentrations of			
				plasma and saliva			
				regulation Describe the			
		and saliva		and its nervous			Е
8.	Saliva -I	Role of mucus	34	secretion of saliva	LGF/SGD	1	VIVA/OSP
				Describe the			MCQ/SEQ/
				secretion			
				glandular			
				alimentary tract			
				stimulation on			
				sympathetic			
				effect of			

10.	Oesophagus	Disorders of Swallowing and Oesophagus	40	hygiene, and identify the role of salivary secretions in eliminating heavy metals Describe the clinical abnormalities of swallowing mechanism Describe Achalasia and Mega esophagus	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			RIOC	CHEMISTRY		<u> </u>	
	T T		DIUC		T		
1.	Saliva	Chemical composition and Role of Salivary secretions	42	Describe the composition of salivary secretions	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			43	Describe the formation and characteristics of salivary secretions			
			44	Elaborate the functions of saliva			
			PAT	THOLOGY		_	
1.	Esophagus	Carcinoma of Esophagus	45	Describe the histological types and presentation of esophageal carcinoma	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
				ENT			
1.	Oral Cavity	Oral ulceration	46	Enlist the causes of oral ulcerations	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			47	Describe Aphthous ulcers and its treatment			
			48	Describe the clinical features			

		and drugs used to		
		treat esophageal		
		candidiasis		

Theme 2: "PAIN EPIGASTRIUM"

Introduction:

This is a 2-weeks activity and consists of structural features of abdominal wall and also includes anatomical, developmental and functional characteristics of stomach, duodenum and pancreas. It also includes gastric secretion and its disorders. Pharmacological and surgical management of peptic ulcer, gastric cancer and acute pancreatitis are also discussed.

The contents of this theme will be taught in LGF-Lectures, DSL and SGF-Practicals, SGD, SDL.

		THEME	-2 PA	IN EPIGASTRIUN	I		
S. No	Торіс	Content	S. No	Learning objectives	Teaching strategies	H o u r	Assessment
		(GROSS	ANATOMY			
1	Anterior abdominal wall	Muscles of anterior abdominal wall.	49	Describe the origin, insertion, nerve supply and actions of anterolateral abdominal wall muscles	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			50	Describe the formation of rectus sheath			
			51	Describe the contents of rectus sheath			
			52	Describe the surface anatomy of anterior abdominal wall Describe the structures related to transpyloric			

				plane			
			53	Enlist various types of abdominal hernias			
2.	Inguinal canal	Inguinal canal boundaries.	54	Describe the boundaries of inguinal canal	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			55	Enlist the contents of inguinal canal in males and females			
			56	Differentiate between direct and indirect inguinal hernia			
3.	Peritoneum	Omentum	57	Describe greater and lesser omentum	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			58	Describe the nerve supply of peritoneum			
	Peritoneum	Omental bursa	59	Describe the anatomy of lesser sac.			
		Epiploic foramen.	60	Describe the boundaries of epiploiec foramen			
		Peritoneal recesses, ligaments and pouches.	61	Describe the various peritoneal pouches, recesses and ligaments			
4.	Stomach	Stomach- structure	62	Describe the gross structure of stomach	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
		Stomach- Blood supply and lymphatics	63	Describe the blood supply and lymphatic drainage of stomach			

			T	D 21 4	1	1	
				Describe the			
		Stomach bed.	64	anatomy of			
				stomach bed			
5.	Duodenum	Structure and blood supply of duodenum	65	Describe the gross structure and blood supply of duodenum	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			66	Write the relations of various parts of duodenum			
6.	Pancreas	Structure of pancreas	67	Describe the gross structure of pancreas and its ductal system	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			HIS'	TOLOGY			
1.	Stomach	Microscopic anatomy of stomach	68	Enumerate the different layers of the stomach wall	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			69	Write a note on gastric glands.			
			70	Differentiate between fundic and pyloric mucosa			
2.	Duodenum.	Microscopic features of Duodenum	71	Discuss histological features of duodenum and describe duodenal glands.	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
3.	Pancreas	Microscopic features of Pancreas .	72	Describe the histology of pancreas	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			73	Differentiate histologically between exocrine and endocrine portions of pancreas			
			EMBI	RYOLOGY			
1.	Fore Gut1	Foregut Development	74	Describe the development of	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP

		1	Τ	stomach	T		Е
		1		stomach			Ľ
				Describe the			
			75	development of			
				duodenum			
				Enlist various			
			76	developmental			
			70	anomalies of			
				stomach			
				Enlist various			
			77	developmental			
			' '	anomalies of			
				duodenum			
		Development		Describe the			MCQ/SEQ/
2.	Fore gut2	of	78	development of	LGF/SGD	1	VIVA/OSP
		Pancreas		pancreas			E
				Enlist various			
			79	anomalies of			
				pancreas			
			PHYS	SIOLOGY			
		Motor		Describe the			MCQ/SEQ/
1.	Stomach	function of	80	motor function of	LGF/SGD	1	VIVA/OSP
		Stomach		stomach.			E
				Describe basic			
			81	electrical rhythm			
			01	of the stomach			
				wall			
			82	Describe Pyloric			
			02	pump			
				Describe role of			
			83	the pylorus in			
			0.5	controlling			
				stomach emptying			
				Describe the			
			84	regulation of			
				gastric emptying			
		Mechanism		Describe			MCQ/SEQ/
2.	Gastric	of Gastric	85	characteristics of	LGF/SGD	1	VIVA/OSP
۷.	Secretion-I	Secretion	0.5	the gastric	LOIASON	1	E
		Secretion		secretions			L
				Describe the			
			86	mechanism of			
			00	secretion of			
				different gastric			

				glands			
3.	Gastric Secretion-II	Regulation of Gastric Secretion	87	Describe the phases and regulation of gastric secretion.	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			88	Enlist the hormones that inhibit and increase gastric secretions.			
			89	Enumerate the reflexes that inhibit and increase gastric secretions			
			BIOCI	HEMISTRY			
1.	Gastric secretions	Chemical composition and Role of Gastric secretions	90	Describe the chemical composition of gastric secretions	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
			91	Describe the functions of HCl and other constituents of gastric secretions			
			92	Discuss the mechanism of synthesis and secretion of HCl from gastric mucosa			
			93	Discuss the mechanism of secretion and role of Intrinsic factor from gastric parietal cells			
			PAT	HOLOGY			
1.	Stomach	Peptic ulcer disease	94	Describe the mechanism of formation of peptic ulcers, its	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E

1.	Peptic ulcer	Complicatio	101	Describe the	LGF/SGD	1	MCQ/SEQ/
1	D .: 1	G 11	l		I OF GC	1	MOOTER
			SIII	RGERY			
1.	Peptic ulcer	GERD and Peptic ulcer	100	complications and drug treatment of GERD and peptic ulcer disease	LGF/SGD	1	VIVA/OSP E
				Describe the etiology, clinical features,			MCQ/SEQ/
			ME	DICINE			
1.	Gastric Lavage	Poisons identification through gastric lavage	99	Enlist indications and contraindications for gastric lavage Describe the sampling technique of gastric lavage fluid	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E
		FO	RENSI	C MEDICINE			
			98	mechanism of action of drugs used in Peptic ulcer			
1.	Peptic ulcer	in Peptic ulcer	97	used in Peptic ulcer disease Describe the	LGF/SGD	1	VIVAOSPE
4		Drugs used		Classify the drugs	I GE/GGE		MCQ/SEQ/
		P	HARM	IACOLOGY			
2.	T differents	pancreatitis		presentation and complications of acute pancreatitis	201/302		E
2.	Pancreas	Acute	96	Describe the mechanism of development,	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP
		Gastric cancer	95	etiology, pathology and clinical presentation of gastric cancer			
				complications Describe the			
				stages and			

		ns of Peptic		complications of			VIVA/OSP
		ulcer		long-term peptic			Е
				ulcer disease and			
				its surgical			
				management			
				Describe common			
				causes of lump in			
				abdomen and			MCQ/SEQ/
2.	Lump in the	Hernia	102	enlist the	LGF/SGD	1	VIVA/OSP
۷.	abdomen	Heima	102	common surgical	LOI7SOD	1	E
				procedures for			L
				treatment of			
				hernia.			
				Describe the			
				etiology, clinical			MCQ/SEQ/
3.	Pancreas	Acute	103	features,	LGF/SGD	1	VIVA/OSP
3.	1 ancieas	pancreatitis	103	complications and	LOI7SOD	1	E
				management of			E
				acute pancreatitis			

Theme 3: "JAUNDICE"

Introduction:

This theme has one-week activity and comprises of anatomical, functional and biochemical aspect as well as developmental and microscopic features of the hepatobiliary system. It also includes hepatotoxicity and liver diseases.

The contents of this theme will be taught in LGF-Lectures, DSL and SGF-Practicals, SGD, SDL.

	THEME-3: JAUNDICE										
S. No	Topic	Content	S. No	Learning objectives	Teaching strategies	H o u r	Assessment				
	GROSS ANATOMY										
1.	Liver	Gross features of liver.	104	Describe the borders and surfaces of liver	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E				
			105	Describe the visceral surface of liver							
		Peritoneal	106	Describe the							

		attachments of		peritoneal			
		liver.		reflections and			
				associated			
				ligaments of liver			
				Describe the			
		Liver lobes	107	lobes and			
		ZIVOI 160CS	107	segments of liver			
				Describe the			
		Blood supply of	108	blood supply of			
		liver		liver			
				Describe the			
				hepato renal			
			100	pouch of			
			109	morrison and its			
				clinical			
				significance			
	Extra hepatic	Call bladdar		Describe the			MCQ/SEQ/
2.	biliary	Gall bladder -	110	gross anatomy of	LGF/SGD	1	VIVA/OSP
	apparatus	gross structure		gall bladder			E
			111	Describe calot's			
			111	triangle			
		Hepatic ducts,		Describe the			
		cystic duct and	112	gross anatomy of			
		Bile duct.	112	extra hepatic			
		Dire duct.		billiary tree			
		Spleen		Describe the			MCQ/SEQ/
3.	Spleen&	Structure and blood	113	gross anatomy of	LGF/SGD	1	VIVA/OSP
	portal Vein	supply		spleen and blood			E
		11.7		supply of spleen			
				Describe the			
		TT 4' 1		formation and			
		Hepatic portal	114	tributaries /			
		venous system		branches of			
				hepatic portal			
				venous system			
		Applied conset of		Explain the clinical			
		Applied aspect of portal hepatic	115	significance of			
		system	113	hepatic portal			
		System		system			
		Ţ	 EMRP	YOLOGY			
	Distal Fore	Development of		Describe the			MCQ/SEQ/
1.	gut	Gall bladder &	116	development of	LGF/SGD	1	VIVA/OSP
	Sut	Gair bladder &	1	ac veropinent of			1111/001

		Biliary tree.		liver			Е
		J					
				Describe the			
			117	development of			
				gall bladder and			
				billiary tree			
				Describe the			
				developmental			
			118	anomalies of			
				liver and biliary			
				tree			
		1	HIST	OLOGY	I		
		Microscopic		Discuss the			MCQ/SEQ/
1.	Liver	structure of liver.	119	histological	LGF/SGD	1	VIVA/OSP
		structure of fiver.		features of liver			Е
				Describe liver			
			120	parenchyma and			
			120	general structural			
				plan of the liver			
				Describe the			
				histological			
			121	features of the			
				structures present			
				in the portal triad			
		G 1 ' '		Discuss the			MCQ/SEQ/
	Spleen	Spleen microscopic	122	histological	LGF/SGD	1	VIVA/OSP
	1	structure		features of spleen			Е
				Differentiate			
			123	between red pulp			
				and white pulp			
			PHYS	IOLOGY			
				Describe the role			
		Pancreatic		of pancreatic			MCQ/SEQ/
1.	Pancreas	secretion	124	secretions in	LGF/SGD	1	VIVA/OSP
				digestion.			Е
				Describe the			
				phases and			
			125	regulation of			
			123	pancreatic			
				secretion			
				Describe			
	Liver Physiology of liver			Physiological			MCQ/SEQ/
2.		Physiology of liver	126		LGF/SGD	1	VIVA/OSP
					Anatomy of the Liver		
				LIVEI			

	1		1	D " 11 1	1	1	
				Describe blood			
			127	flow through the			
				liver			
				Describe			
			128	metabolic			
				functions of liver			
				Describe			
			4.00	Regulation of			
			129	Liver Mass—			
				Regeneration			
				Describe			
				Bilirubin			
			130	formation and			
				excretion			
				Describe the		+	
		Counting of hile 1		mechanism of			MCQ/SEQ/
3.	Bile	Secretion of bile by liver	131		LGF/SGD	1	VIVA/OSP
				secretion of bile			Е
				by the liver			
				Describe the			
				function of bile			
			132	salts in fat			
				digestion and			
				absorption			
				Describe			
			133	functions of the			
			133	biliary tree in			
				digestion			
		В	IOCH	EMISTRY			
		Chemical		Describe the			MCQ/SEQ/
1.	Bile	composition and	134	constituents of	LGF/SGD	1	VIVA/OSP
		Role of Bile		bile			E
			125	Describe the			
			135	functions of bile			
				Describe the			
			125	mechanism of			
			136	gall stone			
				formation			
	I .		PATE	IOLOGY			
				Describe the			
				different viruses			MCQ/SEQ/
1.	Liver - I Hepatitis	137	causing acute	LGF/SGD	1	VIVA/OSP	
		Порши		and chronic			E
				hepatitis			-
]]	порасти			<u> </u>

				Describe the						
				pathogenesis,			MCQ/SEQ/			
2.	Liver - II	Cirrhosis	138	stages and	LGF/SGD	1	VIVA/OSP			
			100	clinical	2017202		E			
				presentation of			L			
				liver cirrhosis						
	PHARMACOLOGY									
				Describe the						
	Denisor	First pass handtie		mechanism of			MCO/SEO/			
1	Drugs	First pass hepatic	120	drugs	I CE/CCD	1	MCQ/SEQ/			
1.	detoxificatio	metabolism of	139	detoxification	LGF/SGD	1	VIVA/OSP			
	n	drugs		and metabolism			Е			
				in the liver						
				Enlist some of						
				the commonly						
		Hepatotoxic drugs	140	used hepatotoxic						
		1		drugs and their						
				toxicities						
		FOR	ENSI	C MEDICINE						
				Enlist the						
	Hepatotoxicit	Hepatotoxic		poisons which	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP			
			141	cause						
				hepatotoxicity						
1.				Diagnose						
1.	у	poisons	141	poisoning	LGI75GD	1	E E			
				-			L			
				through routine						
				toxicological						
		COM	NITINIT	sampling						
	1	COM	IVIUNI	TY MEDICINE						
				Describe the			 			
				epidemiology of			MCQ/SEQ/			
1.	Hepatitis-I	Hepatitis B and C	142	hepatitis B and C	LGF/SGD	1	VIVA/OSP			
		1		virus infection			E			
				and its control						
				measures						
				Describe water						
				borne hepatitis			MCQ/SEQ/			
2.	Hepatitis-II	Hepatitis A and E	143	(Hepatitis A and	LGF/SGD	1	VIVA/OSP			
				E) viruses and its			E			
				control measures						
			MEI	DICINE						
1.	Liver	Cirrhosis	144	Describe the	LGF/SGD	1	MCQ/SEQ/			
1.	Livel	CHIHOSIS	144	etiology, clinical	LOIYSOD	1	VIVA/OSP			
		1	1	1	1					

				features, complications and treatment options of liver cirrhosis			Е
SURGERY							
1.	Gall Bladder	Obstructive jaundice	145	Describe the etiology, clinical features, biochemical investigations and treatment options of obstructive jaundice	LGF/SGD	1	MCQ/SEQ/ VIVA/OSP E

Theme 4: DIARRHEA AND CONSTIPATION

Introduction:

This theme has one-week duration and consists of structural, developmental and functional aspects of small gut. Pancreatic secretions, digestion/absorption, energy requirement of human body and nutritional disorders are also discussed in this theme.

It also includes disorders of small intestine and their treatment.

Methods of teaching comprises of LGIF- Lectures, DSL and SGIF-Practicals, SGD, SDL.

	THEME-4: DIARRHEA AND CONSTIPATION										
S. N	Topic	Content	S. No	Learning objectives	Teaching strategies	H o u r	Assessment				
	GROSS ANATOMY										
1.	Jejunum and ileum	Structure & blood supply of jejunum and ileum	146	Describe the gross features of jejunum and ileum	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE				
			147	Tabulate differences in gross features and blood supply of jejunum and ileum							
2.	Mesenteries	Gross	148	Describe the	LGF/SGD	1	MCQ/SEQ/V				

		features of		mesentery of small			IVA/OSPE
		Mesenteries		intestine			TVIUOSIE
3.	Appendix	Structure of appendix	149	Describe the gross features, blood supply and mesentery of appendix	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE
		Clinical aspects of appendix.	150	Describe the clinical correlates of appendix			
4.	Abdominal aorta	Abdominal aorta and its branches	151	Enumerate the branches of abdominal aorta.	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE
			152	Describe the course and distribution of celiac trunk			
			153	Describe the course and distribution of superior mesenteric artery			
			154	Describe the course and distribution of inferior mesenteric artery			
5.	Inferior vena cava	Inferior vena cava and its tributaries.	155	Describe the origin, course, tributaries and relations of inferior vena cava	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE
6.	Lymphatic drainage of abdominal viscera.	Lymphatic drainage of abdominal organs.	156	Describe the origin, course and relations of Cisterna chili	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE
			157	Describe the lymphatic drainage of abdominal organs			
			E	MBRYOLOGY			
1.	Mid Gut	Development of mid Gut.	158	Describe the formation and rotation of midgut loop	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE
			159	Describe the physiological herniation of midgut			

				loop		1	
				Enlist the derivatives			
			160	of mid gut loop			
				Describe the		+	
			161	development of			
			101	mesenteries			
		Componital		Describe the various		1	
		Congenital	1.60				
		anomalies of	162	anomalies of midgut			
		mid gut	<u> </u>	development			
		126]	HISTOLOGY	T	1	
		Microscopic		Discuss histological			
1.	Jejunum &	anatomy of	163	features of jejunum	LGF/SGD	1	MCQ/SEQ/V
	ileum.	jejunum &		and describe plica			IVA/OSPE
		ileum.		circulares.			
				Discuss histological			
			164	features of ileum and			
			104	describe Payers			
				patches.			
				Discuss the various			
				structural			
				specializations			
				meant for increasing			
			165	the surface area of			
				small intestine (plica			
				circulares, crypts of			
				Lieberkühn, villi and			
				microvilli)			
		Microscopic		,		1	
2.	Appendix.	structure of	166	Discuss histological	LGF/SGD	1	MCQ/SEQ/V
_,	P P •	Appendix	100	features of appendix.	2017202		IVA/OSPE
		F F	P	PHYSIOLOGY			
		Movements	<u>-</u>	Describe different			
1.	Small	of the small	167	types of movements	LGF/SGD	1	MCQ/SEQ/V
1.	intestine	intestine	10,	of small intestine.	2017502		IVA/OSPE
				Describe the control		+	
				of peristalsis by			
			168	nervous and			
				hormonal signals			
		1		Describe secretion of		+	
		Brunner's					MCO/SEO/V
2.	Duodenum	glands	169	mucus by Brunner's	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE
		Secretion		glands in the			
				duodenum			

MCQ/SEQ/V VA/OSPE MCQ/SEQ/V VA/OSPE
VA/OSPE MCQ/SEQ/V
MCQ/SEQ/V
VA/OSPE
MCQ/SEQ/V
VA/OSPE
ACO/SEO/M
MCQ/SEQ/V VA/OSPE
VA/OSPE
400 /0E0 /5
MCQ/SEQ/V
VA/OSPE

				synthesis of			
				Bicarbonates			
				Describe the			
	Diagratian and	Digestion and		mechanism of			MCO/CEO/M
2.	Digestion and absorption	absorption	179	digestion and	LGF/SGD	1	MCQ/SEQ/V
		Lipids		absorption of fats in			IVA/OSPE
				the intestines			
				Describe the			
				mechanism of			
		Digestion and		digestion and			
		absorption of	180	absorption of			
		proteins		proteins in the			
				intestines			
				Describe the			
		Digestion and		mechanism of			
		absorption of		digestion and			
		Carbohydrate	181	absorption of			
		s		carbohydrates in the			
				intestines			
				Describe the			
		Digestion and		mechanism of			
		absorption of		absorption of Iron,			
		Iron, Vitamin	182	Vitamin-B12 and			
		B12 & Folate		Folate in the			
				intestines			
		Energy					
	_	requirement		Discuss the daily			
	Energy	of human	400	energy requirement			MCQ/SEQ/V
3.	requirement of	body in	183	of a human body in	LGF/SGD	1	IVA/OSPE
	human body	health and		health and disease			
		disease					
		Basal					
		Metabolic	184	Define BMR			
		Rate					
			107	Enlist the causes of			
			185	high and low BMR			
		D-''-		Describe the daily			
		Daily		requirements of			
		requirement	106	common vitamins,			
		of common	186	Iron, Calcium,			
		vitamins &		Iodine and other			
		minerals		minerals			
4.	Nutritional	Protein	187	Define Protein	LGF/SGD	1	MCQ/SEQ/V

	disorders	energy malnutrition Adipose		energy malnutrition and its associated clinical conditions			IVA/OSPE				
5.	Adipose tissues	tissues homeostasis	188	Discuss adipose tissue homeostasis	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE				
	PHARMACOLOGY										
1.	Diarrhoea	Anti- diarrheal drugs	189	Classify anti- diarrheal drugs and their mechanism of action	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE				
2.	Constipation	Drugs for constipation	190	Classify drugs used in constipation, and their mechanism of action	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE				
		(COMM	UNITY MEDICINE							
1.	Food borne infection	Epidemiolog y and Prevention	191	Describe the epidemiology of food borne infections and their control measures	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE				
			P	AEDIATRICS							
1.	Gastroenteriti s	Acute gastroenteriti s	192	Describe the aetiology, clinical features, complications and treatment of acute gastroenteritis	LGF/SGD	1	MCQ/SEQ/V IVA/OSPE				

Theme 5: Bleeding Per Rectum

Introduction:

This theme is a 1-week activity, consisting of anatomical, developmental and functional aspects of large intestine. It also includes general disorders of the gastrointestinal tract as well as malignancies of the large gut.

Methods of teaching comprises of LGIF- Lectures, DSL and SGIF-Practicals, SGD, SDL.

	THEME-5: BLEEDING PER RECTUM												
S. N o	N Topic Content S. No		Learning objectives Teaching strategies		H o u r	Assessment							
	GROSS ANATOMY												
1.	Large	Gross	193	Describe the gross	LGF/SGD	1	MCQ/SEQ/VIV						

	intestine-	structure of		features of cecum,			A/OSPE
	I	large		ascending, transverse			
		intestine.		and descending and			
				sigmoid colon			
		Large					
		intestine	104	Describe the			
		Mesentery	194	mesentery of large			
				intestine			
		Gross					
		Structure					
	Large	of rectum		D 11 .1			MCO/GEO/MIN
2.	intestine-	and anal	195	Describe the gross	LGF/SGD	1	MCQ/SEQ/VIV
	II	canal and		anatomy of rectum			A/OSPE
		their blood					
		supply.					
				Describe the gross			
			196	anatomy of anal			
				canal			
		Applied		Describe the blood			
		aspects of	197	supply of anal canal			
		anal canal	177	and its clinical			
		anai canai		correlates.			
				Describe the			
		Ischioanal		boundaries and			
		fossa	198	contents of			
		10334		Ischiorectal (anal)			
				fossa			
				EMBRYOLOGY			
		Developme		Describe the			MCQ/SEQ/VIV
1.	Hind Gut	nt of hind	199	partitioning of cloaca	LGF/SGD	1	A/OSPE
		gut					
			200	Enlist the derivatives			
				of hind gut			
		Developme		Enlist the			
		ntal	201	developmental			
		anomalies		anomalies of hindgut			
		G 1		HISTOLOGY			
	C 1	Colon	202	Discuss the	I OF/CCD	1	MCQ/SEQ/VIV
1.	Colon	microscop	202	histological features	LGF/SGD	1	A/OSPE
		У		of colon			
			• • •	Describe the			
			203	characteristic features			
				of intestinal glands			

	Rectum & anal canal	Rectum& anal canal microscop	204	Describe the histological features of Rectum			
				PHYSIOLOGY			
1.	Large Intestine-	Movement s of the Colon	205	Describe different types of movements of colon	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
2.	Reflexes	GIT Reflexes	206	Describe gastro-colic reflex and duodeno-colic reflexes	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
			207	Describe the mechanism of defecation reflex			
3.	Secretion of Large Intestine	Mucus	208	Describe secretion of mucus by the large intestine	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
4.	Large Intestine- II	Disorders of Large intestine	209	Describe constipation, megacolon	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
			210	Explain mechanism of diarrhea and its causes.			
			211	Explain paralysis of defection in spinal cord injuries			
5.	General Disorders of the gastrointe stinal tract	Vomiting	212	Describe the mechanisms of Vomiting and Nausea	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
			213	Describe Vomiting Act			
			214	Describe Gastrointestinal Obstruction			
				BIOCHEMISTRY			
1.	Intestinal juices	Compositi on of intestinal	215	Describe gases in the gastrointestinal tract (flatus)	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE

		juices					
				PATHOLOGY			
1.	Large Intestine	Carcinoma of colon and Rectum	216	Describe the composition of intestinal juices	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
				SURGERY			
1.	GIT	Obstructio n	217	Describe the etiology, histological findings, clinical presentation and staging of carcinoma of colorectal carcinoma	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
2.	Large Intestine	Colorectal malignanc y	218	Describe the etiology, clinical features, investigations and management of colorectal cancers	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE

$The me-6 \ (Glucose \ control-Carbohydrate \ metabolism)$

Introduction:

This theme has one-week activity of Biochemistry department only, consisting of carbohydrate metabolism. Methods of teaching include both LGIF and SGIF sessions.

	THEME-6: GLUCOSE CONTROL (CARBOHYDRATE METABOLISM)										
S. No	Topic	Content	S. No	Learning objectives	Teaching strategies	H o u r	Assessment				
			BIO	CHEMISTRY							
1.	Oxidative Phosphoryl ation	Process of Oxidative Phosphoryla tion & Mechanism of ATP synthesis	219	Describe the generation of proton gradient & the resultant motive force across the inner mitochondrial membrane by transport of	LGF/SG D	1	MCQ/SEQ/ VIVA/OSPE				

				electrons through			
				ETC which in			
				turn produces			
				ATP by oxidative			
				phosphorylation			
				Describe the			
				structure of ATP			
				synthase			
			220	enzyme(complex-			
			220	V) & explain how			
				it works as a			
				rotary motor to			
				synthesize ATP			
				from ADP & Pi			
				Describe the			
				control of the rate			
				of respiration,			
	Daarinstans	Role of		oxidation of			
	Respiratory	Respiratory		reducing	I CE/CC		MCO/GEO/
2.	Chain	Chain	221	equivalents via	LGF/SG	1	MCQ/SEQ/
	Inhibitors &	Inhibitors &		ETC & its tightly	D		VIVA/OSPE
	Uncouples	Uncouples		coupling with			
		1		oxidative			
				phosphorylation			
				in mitochondria			
				Discuss certain			
				common poisons			
				which block			
				respiration or			
			222	oxidative			
				phosphorylation			
				& identify their			
				site of action			
				Explain how			
				uncouplers act as			
				poisons by			
				dissociating			
			223	oxidation from			
				oxidative			
				phosphorylation			
				via ETC but at the			
				same time they			
				may have a			

in generating body heat Glycolysis in Normal cells, RBCs & Cancer cells Describe the entry of glucose into different kinds of cells through various GLUT transporters Describe the transporters Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and clinical disorders					physiological role		
3. Glycolysis in Normal cells, RBCs & Cancer cells Describe the entry of glucose into different kinds of cells through various GLUT transporters Describe the transportation of glycolysis Describe the entry of glucose into different kinds of cells through various GLUT transporters Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the types of glycolysis 229 Describe the types of glycolysis 230 Especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Describe the biomedical 231 Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
Glycolysis in Normal cells, RBCs & Cancer cells Describe the entry of glucose into different kinds of cells through various GLUT transporters Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the fates of pyruvate Describe the types of glycolysis Describe the danaerobic glycolysis Describe the key enzymes and regulation of glycolysis Describe the biomedical Significance and							
of glucose into different kinds of cells through various GLUT transporters Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis 229 Describe the types of glycolysis 230 Especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical Significance and	3.	Glycolysis	in Normal cells, RBCs & Cancer	224		1	
of glucose into different kinds of cells through various GLUT transporters Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis 229 Describe the types of glycolysis 230 Especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical Significance and					Describe the entry		
cells through various GLUT transporters Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and							
cells through various GLUT transporters Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and				225	different kinds of		
transporters Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis 229 Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and				223	cells through		
Describe the reactions of glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 231 Significance and					various GLUT		
226 reactions of glycolysis Describe the transportation of 227 NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis 229 Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and					transporters		
glycolysis Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and					Describe the		
Describe the transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis 229 Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical 233 Significance and				226	reactions of		
transportation of NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical 233 Significance and					glycolysis		
227 NADH to Mitochondria via various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
Mitochondria via various Shuttles Describe the energetics of glycolysis 229 Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical 233 Significance and					_		
various Shuttles Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and				227			
Describe the energetics of glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
228 energetics of glycolysis 229 Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
glycolysis Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis 231 Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
Describe the fates of pyruvate Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and				228			
Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
Describe the types of glycolysis 230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and				229			
of glycolysis especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
230 especially the anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
anaerobic glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and				220			
glycolysis Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and				230			
Describe the key enzymes and regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and							
231 enzymes and regulation of glycolysis 232 Discuss the glycolysis in RBC Describe the biomedical Significance and							
regulation of glycolysis Discuss the glycolysis in RBC Describe the biomedical 233 Significance and							
glycolysis Discuss the glycolysis in RBC Describe the biomedical Significance and				231			
Discuss the glycolysis in RBC Describe the biomedical Significance and					•		
glycolysis in RBC Describe the biomedical 233 Significance and				1			
Describe the biomedical 233 Significance and				232			
biomedical 233 Significance and				+		1	
233 Significance and							
				233			
, , , , , , , , , , , , , , , , , , , ,							
of glycolysis							

			234	Discuss glycolysis in cancer cells			
4.	Oxidation of Pyruvate	Conversion pyruvate in acetyl CoA		Describe the conversion of pyruvate into acetyl CoA	LGF/SG D	1	MCQ/SEQ/ VIVA/OSPE
			236	Enumerate the enzymes & coenzymes of PDH complex			
			237	Describe the sequence of reactions catalyzed by PDH complex.			
			238	Describe the regulation of PDH complex			
			239	Discuss the clinical aspects of PDH complex especially the congenital lactic acidosis			
5.	Tricarboxyli c Acid Cycle	Describe Tricarboxyli c Acid Cycle	241	Define citric acid cycle	LGF/SG D	1	MCQ/SEQ/ VIVA/OSPE
			242	Describe the sources of acetyl CoA in mitochondria			
			243	Describe the reactions of TCA			
			244	Discuss the energetics of TCA			
			245	Discuss the energy yield of one molecule of glucose when it is converted into carbon dioxide and water			
			246	Name the			

				vitamins that play key role in TCA			
			247	Describe the amphibolic nature of TCA			
			248	Discuss the regulation of TCA			
			249	Enumerate the inhibitors of TCA and their sites of inhibition			
6.	Gluconeoge nesis	Describe Gluconeoge nesis	250	Define Gluconeogenesis	LGF/SG D	1	MCQ/SEQ/ VIVA/OSPE
			251	Name the organs and sub cellular location where Gluconeogenesis occurs			
			252	Describe the substrates or precursors of Gluconeogenesis			
			253	Describe the three bypass reactions			
			254	Describe the Gluconeogenesis from Fatty Acids			
			255	Discuss the Cori's cycle			
			256	Discuss the regulation of Gluconeogenesis			
			257	Name the key enzymes of Gluconeogenesis			
7.	Hexose Mono Phosphate shunt	Describe Hexose Mono Phosphate shunt	258	Discuss the Role of Pentose Phosphate Pathway	LGF/SG D	1	MCQ/SEQ/ VIVA/OSPE
			259	Name the tissues where Hexose			

				Mono Phosphate			
				shunt occurs			
				Describe the			
				reactions of the			
			260				
			200	two parts of			
				Hexose Mono			
				Phosphate shunt			
				Describe the Role			
			261	of thiamine in			
				Hexose Mono			
				Phosphate shunt			
				Enumerate the			
				Similarities &			
			262	differences b/w			
			202	glycolysis and			
				HMP shunt			
				pathway			
				Discuss the			
				functions of			
				NADPH			
			262	(produced in			
			263	Hexose Mono			
				Phosphate shunt)			
				in various tissues			
				and cells			
				Discuss G6PD			
				deficiency and its			
			264	effects in various			
				tissues and cells			
				Describe the			
				regulation of			
			265	HMP shunt			
				pathway			
				Enumerate the			
		Describe		products of			
8.	Uronic Acid	Uronic Acid	266	Uronic acid	LGF/SG	1	MCQ/SEQ/
5.	Pathway	Pathway		pathway and their	D	1	VIVA/OSPE
		1 addiviay		importance			
				Discuss why			
				ascorbic acid is			
			267	vitamin for			
				humans			
	Coloatosa	Describe	268	Describe the uses	LGF/SG	1	MCO/SEO/
	Galactose	Describe	∠08	Describe the uses	LUF/3U	1	MCQ/SEQ/

	Metabolism	Galactose		& requirements of	D		VIVA/OSPE
		Metabolism		galactose in the body			
			269	Discuss the various reactions with enzymes involved			
			270	Describe the Genetic Deficiencies of Enzymes in Galactose Metabolism and their effects			
9.	Fructose Metabolism	Describe Fructose Metabolism	271	Describe the Main source of Fructose	LGF/SG D	1	MCQ/SEQ/ VIVA/OSPE
			272	Discuss the various reactions with enzymes involved			
			273	Discuss the Fructose formation in Seminal fluid			
			274	Describe the mechanism of formation of diabetic cataract			
			275	Discuss the Defects in Fructose Metabolism and their effects			
10.	Glycogen Metabolism	Describe Glycogen Metabolism	276	Describe the structure and functions of the glycogen especially the significance of its polymer nature	LGF/SG D	1	MCQ/SEQ/ VIVA/OSPE
			277	Describe the Difference			

		between Liver &	
		muscle glycogen	
		Describe the	
		synthesis of	
	278	glycogen by two	
		mechanisms with	
		its enzymes	
		Discuss the	
	279	breakdown of	
	21)	glycogen with its	
		enzymes	
		Describe the	
	280	Regulation of	
	200	Glycogen	
		metabolisms	
		Discuss the	
		glycogen storage	
	281	diseases with	
	201	deficient enzymes	
		and cardinal	
		clinical features	

Theme-7 OBESITY- (Fat Metabolism)

Introduction:

This theme has 4-days activity of Biochemistry department, consisting of lipid metabolism. It also includes one lecture of General Medicine - hyperlipidaemias.

Methods of teaching include both LGIF and SGIF sessions.

	THEME-7 OBESITY- (Fat Metabolism)										
S. N o	Topic	Content	S. No	Learning objectives	Teaching strategies	1	Assessment				
				BIOCHEMISTRY							
1.	Fatty acid (FA) synthesis	De Novo synthesis of Fatty acid	282	Enumerate the organs where fatty acid synthesis occurs with sub cellular sites	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE				
			283	Discuss the source of Acetyl CoA that							

				will be used for FA			
				synthesis with			
				reason			
				Discuss how acetyl			
				CoA comes out of			
			284	mitochondria for			
				the synthesis of FA			
				Describe the steps			
			285	of FA synthesis			
				with enzymes			
				Describe the FA			
				synthase enzyme			
			286	with its structure			
				and components			
				Describe the			
				product of FA			
			287	synthase and the			
				subsequent fate of			
				this product			
				Discuss the			
			288	regulation of FA			
				synthesis			
				Discuss why			
			200	animals cannot			
			289	convert fatty acids			
				into glucose			
				Describe the further			
			290	elongation and			
			290	desaturation of FA			
				and its regulation			
				Describe how fats			
	Mobilizati	Oxidation		are mobilized from			
2.	on of	of	291	adipose tissues to	LGF/SGD	1	MCQ/SEQ/VIV
۷.	stored fats	Fattyacids	291	the organs where	LOI7SOD	1	A/OSPE
	stored rats	rattyacids		they will be used			
				for oxidation			
				Enumerate the			
			292	various methods of			
				oxidation of FA			
				Discuss the stages			
			293	of beta oxidation			
				with its reactions			
			294	Calculate the no. of			

				ATP obtained when			
				one molecule of			
				palmitic acid is			
				oxidized			
				completely			
				Describe the			
				genetic deficiencies			
			295	of FA oxidation i.e.			
			293	MCAD & CAT			
				deficiencies with			
				their hallmarks			
				Discuss the			
			296	oxidation of odd-			
			270	chain FA			
				Compare the			
			297	processes of FA			
				synthesis with FA			
		D		oxidation			
		Describe					
	Ketone	Metabolis		Enumerate the			MCQ/SEQ/VIV
3.	bodies	m of	298	ketone bodies	LGF/SGD	1	A/OSPE
	bodies	Ketone		Ketone bodies			71/OSI L
		bodies					
			299	Define ketogenesis			
				Describe the steps			
			300	of ketogenesis			
				Discuss the energy			
			301	yield during			
			301	•			
				ketogenesis in liver Enumerate the			
			302	conditions in which			
				there is increased			
				ketogenesis			
			303	Discuss utilization			
			203	of ketone bodies			
				Discuss the energy			
			304	yield in ketone			
			JU4	bodies utilization in			
				extra hepatic tissues			
				Describe the			
			305	regulation of			
				ketogenesis in well-			
	l			notogenesis in wen		<u> </u>	

				fed healthy			
				conditions, during			
				_			
				early stages of			
				starvation & in			
				prolonged			
				starvation			
			20.6	Discuss the			
			306	ketoacidosis in			
		D "		diabetes			
		Describe		Describe the			
	Complex	Complex	307	synthesis of			MCQ/SEQ/VIV
4.	Lipids	Lipid		triacylglycerol by	LGF/SGD	1	A/OSPE
	F	metabolis		two mechanisms			
		m					
				Describe the			
			308	synthesis of			
				phosphatidic acid			
				Enumerate the			
			309	substances formed			
			307	from phosphatidic			
				acid			
				Describe the			
			310	synthesis of			
			310	glycerophospholipi			
				ds			
				Discuss the			
			311	degredation of			
			311	glycerophospholipi			
				ds			
				Describe the			
				synthesis of			
			312	ceramide and			
				sphingophospholipi			
				ds (shingomyelin)			
				Discuss the			
			313	degradation of			
				shingomyelin			
				Discuss Niemann-			
			21.4	Pick disease with			
			314	its cardinal clinical			
				features			
				Discuss Farber			
			315	disease with its			
						1	

				cardinal clinical			
				features			
				Describe the			
			316	synthesis of			
			310				
				glycosphingolipids Describe the			
			217				
			317	degradation of			
				glycosphingolipids			
				Describe the			
				abnormalities of			
				phospholipid			
			318	metabolism i.e. true			
				demyelinating			
				diseases and			
				sphingolipidosis			
		Describe					
		Eicosanoid		Define eicosanoids			
5.	Eicosanoid	metabolis	319	and describe their	LGF/SGD	1	MCQ/SEQ/VIV
٥.	S	m &		two classes	LGF/SGD	1	A/OSPE
		Prostanoid		two classes			
		S					
				Describe the			
				synthesis of			
			320	prostanoids by			
				cyco-oxygenase			
				pathway			
				Enumerate the two			
			221	isomers of cyclo-			
			321	oxygenase with			
				their inhibition			
				Discuss why low			
				dose aspirin therapy			
			322	is used in strokes			
				and heart attacks			
				Describe			
				biochemical reason			
			323	for the adverse			
			223	effects of NSAIDs			
				& steroids			
				Describe the			
			324	catabolism of the			
			<i>52</i> F	prostanoids			
-			325	Describe the			
			323	Describe the			

		T		1'	T		
				lipoxygenase			
				pathway for			
				synthesis of			
				Leukotrienes and			
				lipoxins			
				Describe the			
				synthesis of			
			326	leuktriene			
				biosynthesis			
				inhibition			
				Enumerate the			
			327	leukotriene receptor			
				antagonists			
		Describe		Describe the major			
	Cholestero	Metabolis	328	sites of cholesterol	I OE/GOD	1	MCQ/SEQ/VIV
6.	1	m of		synthesis as well as	LGF/SGD	1	A/OSPE
		cholesterol		sub cellular sites			
				Describe the source			
			329	of cholesterol			
				synthesis			
				Describe the			
				various steps of			
			330	cholesterol			
				synthesis			
				Discuss the			
				regulation of			
			331	cholesterol			
				synthesis Enumerate the			
				inhibitors of HMG			
			332				
				CoA reductase inhibitors			
				Describes the			
				degradation and			
				excretion of			
				cholesterol with			
			222	synthesis of bile			
			333	acids, their			
				conjugation, bile			
				salt formation and			
				micelle formation			
				in lumen of the			
				intestine			

			334	Discuss the enterohepatic circulation of bile salts			
			335	Discuss the role of bile acid sequestrants i.e. cholestyramine and dietary fibre			
			336	Discuss the regulation of bile acid synthesis			
7.	Lipoprotei ns	Metabolis m and classificati on of lipoprotein s	337	Describe the structure of a typical lipoprotein particle	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
			338	Enumerate the various classes of LP			
			339	Enumerate the functions of apolipoproteins			
			340	Describe the steps of chylomicrons' metabolism			
			341	Describe the metabolism of VLDL			
			342	Describe the metabolism of LDL			
			343	Describe the metabolism of HDL			
8.	Disturbanc es of Lipid metabolis m	Hyperlipid emias & there classificati on	344	Differentiate between hyperlipidemias and dyslipidaemia	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
			345	Describe the Classification of hyperlipidemias with enzyme			

			deficiency			
			MEDICINE			
1.	hyperlipid emias	346	Describe the epidemiology, preventive strategies and diseases associated with	LGF/SGD	1	MCQ/SEQ/VIV A/OSPE
			hyperlipidemias			

Theme-8 WASTING (Protein Metabolism)

Introduction:

This theme has 8- days activity of Biochemistry department only and comprises of protein metabolism.

Methods of teaching include both LGIF and SGIF sessions.

	THEME-8 WASTING (Protein Metabolism)								
S. No	Topic	Content	S. No	Learning objectives	Teaching strategies	Hour	Assessment		
	BIOCHEMISTRY								
1.	Amino acid pool	Describe Amino acid pool & chemical processes for dissimilation of proteins	347	Discuss how amino acid pool is formed	LGF/SGD	1	MCQ/SEQ/VIVA/OS	PE	
			348	Discuss the chemical processes responsible for dissimilation of proteins: transamination, deamination and transdeamination					
			349	Discuss the clinical importance of transaminases					
2.	Ammonia transport	Ammonia formation,	350	Discuss how ammonia is	LGF/SGD	1	MCQ/SEQ/VIVA/OS	PE	

	and effects of ammonia toxicity on brain Urea cycle	transport of ammonia and effects of ammonia toxicity on brain Urea cycle & its associated inherited	351	formed in various tissues and transported to liver Discuss the effects of ammonia toxicity in brain Describe the Krebs-Henselet Cycle of Urea Formation in				
		disorders	352	Describe the clinical significance of various enzymes involved in urea formation				
	Metabolism of aromatic amino acids	Describe Metabolism of aromatic amino acids	353	Discuss biosynthesis, fate, metabolic functions and related inherited disorders of aromatic amino acids				
3.	Metabolism of sulphur containing amino acids	Describe Metabolism of sulphur containing amino acids	354	Discuss biosynthesis, fate, metabolic functions and related inherited disorders of sulphur containing amino acids	LGF/SGD	1	MCQ/SEQ/VIVA/OS	PE
4.	Metabolism of individual amino acids	Describe Metabolism of individual amino acids	355	Discuss biosynthesis, fate, metabolic functions and related inherited disorders of Glycine, serine,	LGF/SGD	1	MCQ/SEQ/VIVA/OS	PE

			and alanine		
			Discuss		
			biosynthesis,		
			fate, metabolic		
		356	functions and		
		330	related inherited		
			disorders of		
			acidic amino		
			acids		
			Discuss		
			biosynthesis,		
			fate, metabolic		
		357	functions and		
		331	related inherited		
			disorders of		
			branched chain		
			amino acids		

List of practical works

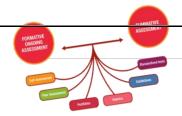
Subject	Topic	S. No	Learning objectives	
Histology	Lips and tongue	358	Identify the histological features of lips and	
Thstology	Lips and longue	336	tongue under the microscope	
	Esophagus	359	Identify the histological features of Esophagus	
	Esophagus	339	under the microscope	
	Stomach	360	Identify the histological features of stomach	
	Stomach	300	under the microscope	
	Duodenum		Identify the histological features of duodenum	
	Duodenam	361	under the microscope	
	Liver		Identify the histological features of liver under	
	Livei	362	the microscope	
	Gall bladder		Identify the histological features of gall bladder	
	Gail bladdel	363	under the microscope	
	Jejunum and	364	Identify the histological features of Jejunum and	
	Ilium	304	Ilium under the microscope	
	Appendix	365	Identify the histological features of Appendix	
	Appendix	303	under the microscope	
	Colon and	366	Identify the histological features of Colon and	
	Rectum	300	Rectum under the microscope	
Physiology	Examination of	367	Evamine a standardized natient's abdomen	
1 Hysiology	abdomen	307	Examine a standardized patient's abdomen	
Biochemistry	Determination of	368	Estimate the plasma proteins in a given blood	

plasma pi	roteins	sample	
Determin	ation of		
free, total	and	Estimate free, total and combined acidity of	
combined	dacidity 369	gastric juice	
of the Ga	stric	gastife juice	
juice			
Determin	ation of 370	Estimate serum Bilirubin in a given blood samp	
serum Bi	lirubin 370	Estimate serum Binituoni in a given blood sample	
Determin	ation of		
Titrable a	acidity 371	Estimate the Titrable acidity of urine	
of urine			
Determin	ation of 372	Estimate serum Cholesterol in a given blood	
serum che	olesterol 3/2	sample	



10 Learning Opportunities and Resources

S.No	SUBJECT	LEARNING RESOURCES/ RECOMMENDED
		BOOKS
1.	Gross Anatomy	Clinical Anatomy by Regions by Richard S. Snell (Latest Edition)
		Gray's Anatomy for Students (Latest Edition)
		K.L. Moore, Clinically Oriented Anatomy (Latest Edition)
		Netter's "Atlas of Human Anatomy (Latest Edition)
		Last's Anatomy (Latest Edition)
2.	Histology	Textbook of Histology by Junqueira (Latest Edition)
		diFiore's ATLAS of Histology with Functional Correlations (Latest Edition)
		Atlas of Human Histology by Wheaters. (Latest Edition)
		Textbook of Histology by Laiq Hussain (Latest Edition)
3.	Embryology	Langman's Medical Embryology (Latest Edition)
		The Developing Human "by Keith L Moore" (Latest Edition)
4.	Physiology	Textbook of Medical Physiology by Guyton and Hall (Latest Edition)
		Ganong's "Review of Medical Physiology" (Latest Edition)
5.	Biochemistry	Harper's Illustrated Biochemistry (Latest Edition)
		Lippincott's Illustrated Review: Biochemistry (Latest Edition)
6.	Pharmacology	Katzung's Basic and Clinical Pharmacology (Latest Edition)
7.	Pathology	Robbin's Basic Pathology (Latest Edition)
8.	Community Medicine	Essential Community Medicine (Latest Edition) K Park Textbook of Preventive and Social Medicine (Latest
		Edition)
9.	General Medicine	Davidson's Principles and Practice of Medicine (Latest Edition)
10.	Radiology	David Sutton's Textbook of Radiology and Imaging (Latest Edition)
11.	Neurosurgery	Greenberg's Textbook of Neurosurgery
		Rangacharya's Principles of Neurosurgery



11 Examination and Methods of Assessment:

a. Instructions:

- Students must arrive the examination venue at least 15 minutes before the scheduled start time. Latecomers 15 minutes after the start of exam, will not be allowed to enter the examination hall after the start time, and if permitted, they will not receive extra time.
- Students without College ID Card and white Lab Coat will not be allowed to sit in exam.
- In case of an emergency such as a medical emergency, students should inform the examination supervisor.
- Students are required to submit prohibited items such ass mobile phones, smartwatches, electronic devices, books, notes, or any unauthorized materials before entering the examination hall.
- Students must maintain complete silence within the examination hall. They should refrain from communicating with fellow students and strictly follow invigilator instructions.
- Students must mark their attendance properly.
- No student will be allowed to leave the examination hall before half the time is over and paper should be properly handed to the examiner.
- Violation of these guidelines may lead to disqualification from the examination.

b. The Distribution of Internal Assessment Score (10% Marks):

The distribution of Internal Assessment Score for 2nd Year MBBS will be as follows:

- Total Marks for 2nd Year MBBS= 700 & Internal Assessment Marks=70 (10%)
- 50 % of the Internal Assessment Marks may be given to Block Exams
- 50 % of the Internal Assessment marks may be given to Class Test/ End of Module Exam, Assignments and Presentations.
- Biochemistry department is responsible to maintain the attendance record for BLOCK D in coordination with all the concerned departments.
- Anatomy department is responsible to maintain the attendance record for BLOCK E in coordination with all the concerned departments.
- Physiology department is responsible to maintain the attendance record for BLOCK F in coordination with all the concerned departments.

A. Distribution of 20 Marks for Block Papers for second Year MBBS will be as under:

Block	Block D	Block E	Block F	Total
Marks	07	6.5	6.5	20

B. Distribution of 15 Marks for Block OSPE will be as under:

Block	Block D	Block E	Block F	Total
Marks	05	05	05	15

C. Distribution of 20 marks for Class Test/ End of Module Exam & Assignments for 2nd Year MBBS will be as under:

Subject (Theory)	Block D	Block E	Block F	Total
Class Test/ End of Module Exam	04	3.5	3.5	11
Assignments	03	03	03	09
Total	07	6.5	6.5	20

D. Distribution of 15 marks for Presentations, Attitude/ Behavior for 2^{nd} Year MBBS will be as under:

Subject (OSPE)	Block D	Block E	Block F	Total
Presentations	03	03	03	09
Attitude/ Behavior	02	02	02	06
Total	05	05	05	15

c. University Examination: Exam has 90% Marks

- To appear in any university examination, more than 75% attendance in all disciplines is mandatory for the students.
- The Paper A will be comprised of 120 MCQs. The distribution of 90% Marks for Paper --- Written Exam will be as under:

Blue Print for Block E Assessment						
SUBJECT	GIT	Renal	Total MCQs			
Gross Anatomy	16	7	23			
Histology	9	4	13			
Embryology	4	3	7			
Physiology	15	14	29			
Biochemistry	22	8	30			
PRIME	3	2	5			
Pathology	3	1	4			
Pharmacology	1	1	2			
Forensic Medicine	1	0	1			
Community Medicine	1	0	1			
General Medicine	1	1	2			
EYE	0	0	0			
ENT	0	0	0			
Surgery	2	1	3			
Total	78	42	120			

BLOCK E OSPE BLUEPRINT

SUBJECT	GIT	RENAL	VIVA STATIONS	TOTAL STATIONS
Anatomy				
Histology	4	3	2	9
Embryology				
Physiology	0	1	2	3
Biochemistry	3	1	2	6
TOTAL	7	5	6	18

12 Tentative Timetables

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBILIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-2024 WEEK-1

THEME 1: Painful Swallowing

Days	8:00 to 9:00 am	09:00 to 10:00 am	10:00 am to 11:00 am	11:00am to 1:00 pm			1:30 to 2:30 pm			
Monday 13/05/2024	Gross Anatomy Oral Cavity Dr.	Gross Anatomy Salivary Gland Dr.	Physiology General principles of gastrointestin al motility Dr.	PRACTICALS/ SGDs Batch A: Phy Dr. Batch B: Histo Dr. Batch C: Bio Dr.			Batch A: Phy Dr. Batch B: Histo Dr.			Anatomy- DSL Dr.
Tuesday 14/05/2024	Embryology Development of the Tongue & Esophagus Dr.	Physiology Neural control of GIT function Dr.	Gross Anatomy Esophagus Dr.	PRACTICALS/ SGDs Batch A: Bio Dr. Batch B: Phy Dr. Batch C: Histo P Dr.			Physiology- DSL Dr.			
Wednesda y 15/05/2024	Embryology Development of Salivary Glands Dr.	Physiology Hormonal control of Gastrointes tinal motility Dr.	Biochemistr y Saliva Dr.	PRACTICALS/ SGDs Batch A: Histo Dr. Batch B: Bio Dr. Batch C: Phy Dr.		E R S	Biochemistry -DSL Dr.			
Thursday 16/05/2024	Histology Oral Cavity & Esophagus Dr.	Physiology Functional types of movements in the GIT Dr.	Physiology Gastrointesti nal blood flow Dr.	11:00am to 12:00 pm Physiology Ingestion of food Dr.	pm Physiology General principles of alimentary tract secretion Dr.	E A K	PRIME Social Accountability Dr.			
Friday 17/05/2024	Pak Studies Establishmen t of Pakistan Dr.	Physiology Role of mucus and saliva Dr.	Physiology Disorders of swallowing and esophagus Dr.	Pathology Carcinoma of Esophagus Dr.	ENT Oral ulceration Dr.		SDL (SLRC/Librar y)			

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBILIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-24 WEEK-2

THEME 2: Pain Epigastrium

Days	8:00 to 9:00 am	09:00 to 10:00 am	10:00 am to 11:00 am	11:00am to 1	1:00 pm		1:30 to 2:30 pm		
Monday 20/05/2024	Gross Anatomy Anterior Abdominal Wall Dr.	Gross Anatomy Inguinal Canal Dr.	Gross Anatomy Peritoneum Dr.	PRACTICALS/ SGDs Batch A: Phy Dr. Batch B: Histo Dr. Batch C: Bio Dr.		Batch A: Phy Dr . Batch B: Histo Dr.			Anatomy-DSL Dr.
Tuesday 21/05/2024	Embryology Development of foregut & Pancreas Dr.	Gross Anatomy Stomach Dr.	Physiology Motor function of Stomach Dr.	PRACTICALS/ SGDs Batch A: Bio Dr. Batch B: Phy Dr. Batch C: Histo Dr.		Physiology-DSL P R Dr.			
Wednesda y 22/05/2024	Histology Stomach Dr.	Physiology Gastric secretion Dr.	Biochemistry Gastric secretions Dr.	PRACTICALS/ SGDs Batch A: Histo Dr. Batch B: Bio Dr. Batch C: Phy Dr.		A Y E R S	Biochemistry- DSL Gastric secretions Dr.		
Thursday 23/05/2024	Gross Anatomy Duodenum & Pancreas Dr.	Histology Duodenum & Pancreas Dr.	Pathology Peptic ulcer disease Dr.	11:00am to 12:00 pm General Medicine GERD and Peptic ulcer Dr.	12:00 to 1:00 pm General Surgery Peptic Ulcer Dr.	B R E A K	PRIME Verbal & Non Verbal Communication Skills Dr.		
Friday 24/05/2024	Pak Studies Objectives Resolution Islamic Provision in The Constitutions of 1956, 1962 & 1973 Dr.	Pharmacology Drugs used in Peptic ulcer Dr.	General Surgery Lump in the abdomen Dr.	Forensic Medicine Poisons identificatio n through gastric lavage Dr.	General Surgery Acute Pancreatitis Dr.		SDL (SLRC/Library)		

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBILIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-2024 WEEK-3

THEME 3: Jaundice

Days	8:00 to 9:00 am	09:00 to 10:00 am	10:00 am to 11:00 am	11:00am to 1:	00 pm		1:30 to 2:30 pm			
Monday 27/05/021	Gross Anatomy Liver Dr.	Anatomy Extrahepatic biliary apparatus Dr.	Physiology Pancreatic secretion Dr.	PRACTICALS/ Model Dissection Batch A: Bio P Dr. Batch B: Histo P Dr. Batch C: Model Dissection Dr.		Dissection Batch A: Bio P Dr. Batch B: Histo P Dr.			Anatomy-DSL Dr.	
Tuesday 28/05/021	Embryolog y Developme nt of distal foregut Dr.	Physiology Physiology of liver Dr.	Gross Anatomy Spleen Dr.	PRACTICALS Batch A: Model Dissection Dr. Batch B: Bio P Dr. Batch C: Histo P Dr.			Anatomy Spleen Dr. Batch A: Model Dissection P R Batch B: Bio P Dr. Batch C: Histo P Dr. Y			Physiology-DSL Dr.
Wednesda y 29/05/021	Histology Liver Dr.	Physiology Secretion of bile by Liver Dr.	Biochemist ry Bile Dr.	PRACTICALS Batch A: Histo P Dr. Batch B: Model Dissection Dr. Batch C: Bio P Dr.		Batch A: Histo P Dr. Batch B: Model Dissection Dr.		E R S	Biochemistry- DSL Bile Dr.	
Thursday 30/05/021	Histology Spleen Dr.	Gross Anatomy Hepatic portal venous system Dr.	Pathology Acute/ chronic viral hepatitis Dr.	11:00am to 12:00 pm Forensic Medicine Hepatotoxic poisons Dr.	12:00 to 1:00 pm General Medicine Liver Cirrhosis Dr.	R E A K	PRIME Listening Skills Dr.			
Friday 31/05/021	Pak Studies Introduction of Complete Islamic System in Pakistan Dr.	Pharmacolo gy First pass hepatic metabolism of drugs Dr.	Communit y Medicine Hepatitis B and C virus infection Dr.	Pharmacolo gy Hepatotoxic drugs Dr.	General Surgery Obstructive Jaundice Dr.		SDL (SLRC/Library)			

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBILIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-2024 WEEK-4

THEME 4: Diarrhea and Constipation

Days	8:00 to 9:00 am	09:00 to 10:00 am	10:00 am to 11:00 am	11:00am to 1:	00 pm		1:30 to 2:30 pm	
Monday 03/06/2024	Gross Anatomy Jejunum & Ileum Dr.	Gross Anatomy Mesenteries & Appendix Dr.	Physiology Movements of the small intestine Dr.	PRACTICALS Dissection Batch A: Bio P Batch B: Histo Batch C: Mode Dr.	Dr. P Dr.		Anatomy-DSL Dr.	
Tuesday 04/06/2024	Embryology Development of midgut Dr.	Physiology Secretions of the small intestine Dr.	Gross Anatomy Abdominal Aorta Dr.	PRACTICALS Batch A: Model Dissection Dr. Batch B: Bio P Dr. Batch C: Histo P Dr.		P R A		
Wednesda y 05/06/2024	Histology Jejunum & Ileum Dr.	Physiology Pancreatic enzymes Dr.	PRIME Reading skills Dr.	PRACTICALS Batch A: Histo P Dr. Batch B: Model Dissection Dr. Batch C: Bio P Dr.		Y E R S	Biochemistry Pancreatic Secretions Dr. Najmuddin	
Thursday 06/06/2024	Histology Appendix Dr.	Biochemistr y Digestion & Absorption of Carbohydrate s Mr. Khalilullah	Gross Anatomy Inferior Vena Cava Dr.	11:00am to 12:00 pm Physiology Intestinal digestive enzymes Dr.	PRIME Reading skills Dr.	B R E A K	Biochemistry Digestion & Absorption of Proteins Mr. Khalilullah	
Friday 07/06/2024	Pak Studies Geography of Pakistan Dr.	y Digestion & Absorption of Lipids Mr. Khalilullah	Physiology Gastrointesti nal hormones Dr.	Biochemistry Energy requirement of human body Dr.	Physiology Disorders of small intestine Dr.		SDL (SLRC/Library)	

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBILIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-24

WEEK-5

THEME 4/5: Diarrhea and Constipation/ Bleeding Per Rectum

Days	8:00 to 9:00 am	09:00 to 10:00 am	10:00 am to 11:00 am	11:00am to 1	:00 pm		1:30 to 2:30 pm		
Monday 10/06/2024	Biochemistr y Nutritional Disorders Dr.	Biochemistry Adipose tissues Dr.	Community Medicine Food borne infection Dr.	PRACTICALS/ Model Dissection Batch A: Phy P Dr. Batch B: Histo P Dr. Batch C: Model Dissection Dr.		Batch A: Phy P Dr. Batch B: Histo P Dr. Batch C: Model Dissection			Anatomy-DSL Dr.
Tuesday 11/06/2024	Paeds Acute gastroenteriti s Dr.	Pharmacolog y Anti-diarrheal drugs Dr.	Pharmacolog y Drugs for constipation Dr.	PRACTICALS Batch A: Model Dissection Dr. Batch B: Phy P Dr. Batch C: Histo P Dr.		PRACTICALS Batch A: Model Dissection Dr. Batch B: Phy P Dr.		P R A Y	Physiology- DSL Dr.
Wednesda y 12/06/2024	Gross Anatomy Large Intestine Dr.	Physiology Movements of the Colon Dr.	Physiology Secretion of Large Intestine Dr.	PRACTICALS Batch A: Histo P Dr. Batch B: Model Dissection Dr. Batch C: Phy P Dr.		E R S	Biochemistry- DSL Absorption of Iron, Vitamin B12 & Folate Dr.		
Thursday 13/06/2024	Embryology Development of Hindgut Dr.	Histology Colon Dr.	Histology Rectum Dr.	11:00am to 12:00 pm Physiology Disorders of Large intestine Dr.	Biochemistry Intestinal Juices Dr.	E A K	PRIME Sample size Dr.		
Friday 14/06/2024	Pak Studies Natural Resources of Pakistan Dr.	Physiology General Disorders of the GIT Dr.	Pathology Carcinoma of colon & rectum Dr.	Surgery Colorectal malignancie s Dr.	SDL (SLRC/Library)		SDL (SLRC/Library)		

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBIIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-24 WEEK-6

THEME 6: Carbohydrate Metabolism

Days	8:00 to 10:0	00 am	10:00 am to 11:00 am	11:00am to 12:00 pm	12:00 to 1:00 pm		1:30 to 2:30 pm
Monday 24/06/2024	SGDS Batch A: Phy Batch B: An Batch C: Bio	at Dr.	Biochemistry Oxidative Phosphorylatio n Dr.	Biochemistry Respiratory Chain Inhibitors & Uncouples Dr.	Biochemistry Glycolysis -I Dr.		Anatomy-DSL Dr.
Tuesday 25/06/2024	Batch A: Bio Dr . Batch B: Phy Dr .		atch A: Bio Dr . atch B: Phy Dr . Biochemistry Glycolysis -II Pyruvate Oxidation of Pyruvate		Biochemistry Tricarboxylic Acid Cycle-I Dr. Physic PR R A Y Dr.		
Wednesda y 26/06/2024	Batch B: Bio	SGDS Batch A: Anat Dr. Batch B: Bio P Dr. Batch C: Phy Dr.		Biochemistry Gluconeogenes is Dr.	Biochemistry Hexose Mono Phosphate Shunt Dr.	E R S	Biochemistry- DSL Dr.
Thursday 27/06/2024	SDL (SLRC/Lib rary)	Biochemistr y Uronic Acid Pathway Dr.	Biochemistry Galactose Metabolism Dr.	Biochemistry Fructose Metabolism Dr.	Biochemistry Glycogen Metabolism Dr.	R E A K	SDL (SLRC/Library)
Friday 28/06/2024	Pak Studies Industrial Developm ent and Education of Pakistan Dr.	Skill Lab Anatomy Dr.	Skill Lab Physiology Dr.	Skill Lab Medicine Dr.	SDL (SLRC/Library		SDL (SLRC/Library)

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBIIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-24 WEEK-7

THEME 7: Fat Metabolism

Days	8:00 to 9:00 am	09:00 to 10:00 am	10:00 am to 11:00 am	11:00am to 1:00 pm			1:30 to 2:30 pm		
Monday 15/07/2024	Biochemistr y Fatty acid Synthesis-I (De Novo) Dr.	Biochemistry Fatty acid synthesis-II (De Novo) Dr.	Biochemistry Mobilization of stored fats Dr.	PRACTICAL Batch A: Phy I Batch B: Histo Batch C: Bio I	Or. Dr.		Anat-DSL Dr.		
Tuesday 16/07/2024	Biochemistr y Oxidation of Fatty Acids Dr.	Biochemistry Oxidation of Fatty Acids Dr.	Biochemistry Metabolism of Ketone bodies Dr.	PRACTICALS /SGDs Batch A: Bio Dr. Batch B: Phy Dr. Batch C: Histo Dr		Batch A: Bio Dr. Batch B: Phy Dr.		P R A	Bio-DSL Ketone Bodies Dr.
Wednesda y 17/07/2024	Biochemistr y Complex Lipid metabolism –I Dr.	Biochemistry Complex Lipid metabolism –II Dr.	Biochemistry Complex Lipid metabolism – III Dr.	PRACTICALS/SGDs Batch A: Histo Dr. Batch B: Bio Dr. Batch C: Phy Dr.		Batch A: Histo Dr. Batch B: Bio Dr.		Y E R S	Phy-DSL Dr.
Thursday 18/07/2024	Biochemistr y Eicosanoid metabolism Dr.	Biochemistry Metabolism of Cholesterol-I Dr.	Biochemistry Metabolism of Cholesterol-II Dr.	Biochemistr y Metabolism of Lipoproteins Dr.	Biochemist ry Disturbance s of Lipid metabolism Dr.	E A K	. SDL (SLRC/Library		
Friday 19/07/2024	Pak Studies The Principles of Pakistan Foreign Policy Mr.	General Medicine Hyperlipidemi as Dr.	Skill Lab Anatomy Dr.	Skill Lab Physiology Dr.	Skill Lab Medicine Dr		SDL (SLRC/Library)		

shura

SWAT MEDICAL COLLEGE DEPARTMENT OF MEDICAL EDUCATION TIME TABLE FOR GIT, HEPATOBIIARY & METABOLISM MODULE (2nd Year MBBS) SESSION 2023-24 WEEK-8

THEME 8: Protein Metabolism

Days	8:00 to 9:00 am	09:00 to 10:00 am	10:00 am to 11:00 am	11:00am to 1:00 pm		1:30 to 2:30 pm	
Monday 00/0/2024	Amino acid pool & chemical processes for dissimilation of proteins Dr.	Ammonia transport and effects of ammonia toxicity on brain Dr.	Biochemistry Urea cycle & its associated inherited disorders Dr.	PRACTICALS/SGDs Batch A: Phy Dr. Batch B: Histo Dr. Batch C: Bio Dr.	P R A Y E	Anat- DSL Dr.	
Tuesday 00/0/2024	Biochemistry Metabolism of aromatic amino acids Dr.	Pak Studies Kashmir Dispute Mr.	Biochemistry Metabolism of Sulphur containing amino acids Dr.	PRACTICALS /SGDs Batch A: Bio Dr. Batch B: Phy P Dr. Batch C: Histo P Dr	S B R E	Bio-DSL Urea Cycle Dr.	
Wednesday 00/0/2024	Biochemistry Metabolism of Glycine, Serine & Alanine Dr.	Biochemistry Metabolism of Acidic Amino acids Dr.	Biochemistry Metabolism of Branched Chain Amino acids Dr.	PRACTICALS/SGDs Batch A: Histo Dr. Batch B: Bio Dr. Batch C: Phy Dr.	K	Phy-DSL Dr.	
Thursday 00/0/2024	SELF-STUDY (SLRC/ LIBRARY)						
Friday 00/0/2024		GIT, HEPATOBIIARY & METABOLISM MODULE WRITTEN EXAM					

13 For inquiry and troubleshooting



Please contact
Dr Humaira Ali
Associate Professor Anatomy
0333 5139383

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.

MBE	Block	k:			Modu	Module:	
Date	 :						
1. (U	(nsatisfactory) 2 (Fair) 3 (Sa	tisfacto	ry)	4 (Good)		5
(Exc	ellent)						
`	gory: Course Contents						
	-				1.0	1.4	1 =
No.	Question		1	2	3	4	5
1	To what extent did the course contents align with th	e					
	stated learning objectives of the module?						
2	How clear and comprehensive were the course mate	erials					
	provided in this module?						
3	Were the core topics adequately covered, ensuring a	a well-					
	rounded understanding of the subject?						
4	How current and up-to-date were the course content	ts 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	i					
	easily accessible?						
7	How helpful were additional learning resources such	h 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 effective	ely					
10	utilized to enhance the learning experience?	4:					
10	Were there sufficient opportunities for hands-on pra	ictice					
	and practical application of knowledge? Category: Teaching Methods						
11	How well did instructors engage with students and of	rreate					
11	a supportive learning environment?	cicate					
12	Were diverse teaching methods (e.g., lectures, group	n					
	discussions, simulations) effectively employed?	r					
13	How responsive were instructors to questions, conce	erns,					
	and feedback from students?						
14	To what extent did instructors provide timely and						
	constructive feedback on assignments and assessme	ents?					
15	Were opportunities for collaborative learning and pe	eer-to-					
	peer interactions encouraged and facilitated?						
No.	Category: Engagement and Motivation						
16	To what extent did the module use real-world exam	ples					
	and practical applications to engage students?						

23	How would you rate the overall quality of this module?							
		(Very Poor)		(Fair)	(Good)	(E	xcel	llent)
No.	Category: Overall Question	1	2 (Poor)	3	4	5		
22	How effectively were accommodations provided for stude prior knowledge?	nts with va	arying levels	of				
21	Were efforts made to include diverse perspectives, cultures, and backgrounds in the curriculum?							
20	How well did the module accommodate different learning students?	styles and	preferences	among				
Cate	gory: Inclusivity and Diversity	I	-1		l			
19	Were assessments designed to challenge and motivate students to excel in their studies?							
18	Did the module provide opportunities for students to pursue their individual interests within the subject matter?							
17	How well were active learning techniques (e.g., problem- solving, case studies) integrated into the curriculum?							

15 Students Diary/Notes

S.NO	DATE	TASK	PENDING/COMPLETED	COMMENTS
	ı		1	

PROGESS:	ACHIEVMENT:
	