MUHAMMAD MEDICAL COLLEGE

STUDY GUIDE FINAL PROFESSIONAL MBBS

BATCH 2024-25

ACADEMIC SESSION 2024-25

ABBREVIATIONS	
Foundation	FND
Hematology	HEM
Respiratory	RESP
Cardiovascular	CVS
Musculoskeletal	MSK
Pathology	PATH
Pharmacology	PHARM
Medicine	MED
Surgery	SURG
Pediatrics	PAEDS
Community Medicine	CM
Gynecology & Obstetrics	GYNAE & OBS
Cardiology	CARDIO
Spiral	S
Best Choice Questions	BCQS
Bedside Teaching	BST
Case-Based Learning	CBL
Curriculum Committee	CC
Clinical Rotation	CR
Clinical Skills Foundation Rotations	C-FRC
Clinical Pathological Conference	CPC
Class Quiz	CQ
Class Representation	CR
Continuous Medical Education	CME
Directed Self-Learning	DSE
House Officers	HO
Head Of Department	HOD
Higher Education Commission	HEC
Large Group Integrated Teaching	LGIT
Liaquat University of Medical & Health Sciences	LUMHS
Modes of Information Transfer	MIT
Objective Structured Practical Examination	OSPE
Objective Structured Clinical Examination	OSCE
Objective Structured Viva Examination	OSVE
Problem-Based Learning	PBL
Professionalism, Ethics, Research, Leadership Skills	PERLS

Patient Management Problem	PMP
Problem Solving Integrated Learning	PSIL
Pakistan Medical & Dental Council	PM&DC
Practical Work	PW/LAB
Quality Enhancement Cell	QEC
Self-Study	SS
Skills Lab	SL
Small Group Discussion	SGD
Simulation	SIM
Short Essay Questions	SEQS
Team-Based Learning	TBL
Ward-Based Teaching	WBT
Work-Place Based Assessment	WPBA

ACADEMIC CALENDAR Academic Session 2024-2025		
Activity	**Class Year**	**Dates**
Classes starts	First Prof MBBS	February 18, 2025
Eid-ul-Fitr	Holiday	March 31 to April 06, 2025
Classes Resumes	All Batches of MBBS	April 07, 2025
Summer Vacation	1st to 4th Year MBBS	June 07 to July 06, 2025
Classes Resumes	All Batches of MBBS	July 07, 2025
Classes Ends	First Year MBBS	November 14, 2025
Exam Preparation	First Year MBBS	November 15 to December 07, 2026
Annual Examination	First Year MBBS	December 08 to January 04, 2026

CONTRIBUTIONS

Prof. Dr. Syed Razi Muhammad
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MISSION STATEMENT OF MMC & VISION OF ISU/MMC & LUMHS

MISSION STATEMENT OF MUHAMMAD MEDICAL COLLEGE

Nurturing students' potential by providing them with the highest quality education, thereby producing individuals with strong values, compassion, inclusiveness, leadership, and professionalism, emphasizing community engagement, particularly with marginalized segments of the rural population, encouraging students to become empathetic and socially responsible professionals by training them in the best evidence-based practice, capable of contributing to advancements through research and innovation.

VISION OF ISUM

To be an internationally recognized institution, famous for its ethical work, emphasizing the importance of integrity, honesty, and moral principles, highlighting the University's commitment to serving the community and producing unbiased and empathetic educated people, who are inclusive and have leadership skills, encouraging them to engage in research, critical thinking, innovation, and evidence-based best practices.

VISION OF LIAQUAT UNIVERSITY OF MEDICAL AND HEALTH SCIENCES (LUMHS)

Liaquat University of Medical and Health Sciences (LUMHS) seeks to be a top-tier healthcare Institution, producing ingenious academic leaders, medical researchers, and healthcare advocates to serve global community.

MBBS PROGRAM OUTCOME

By the end of the five years of the MBBS program at MUHAMMAD MEDICAL COLLEGE, the program aims to produce Medical graduates who can:

1. Utilizing knowledge of basic and clinical sciences for patient care.
2. Acquiring an integrated knowledge of the organ, structure, function, and its regulatory mechanism through the end of integrated teaching.
3. Achieving competence in the practice of holistic medicine, encompassing promotive, preventive, curative, and rehabilitative aspects of common diseases.
4. Exhibit ethical patient-centered care based on Integrity, humility, social accountability, and high ethical values of this sacred profession
5. Becoming an exemplary citizen by observing medical ethics and fulfilling social and professional obligations, responding to national aspirations.
6. Taking focused history, performing physical examination, formulating a diagnosis, and management plan for common health problems.
7. Demonstrating professional behaviors that embody lifelong learning, altruism, empathy, and cultural sensitivity in the provision of healthcare services.
8. Engage in research activity aimed at improving the quality of health care, including behavior modification of individuals and communities for quality of life.
9. Identifying problems, critically reviewing literature, and disseminating knowledge.
10. Developing a scientific temper by acquiring continuous educational experience for proficiency in the profession and promoting healthy living of the individual and population at large by critically analyzing the situation.
11. Committing to lifelong learning to keep up to date with developments in clinical practice and trends in disease at the population level by strong leadership and management skills.
12. Applying evidence-based practices for protecting, maintaining, and promoting the health of individuals, families and community.

TEACHING FACULTY

DEPARTMENT OF PSYCHIATRY	
DEAN FACULTY OF MEDICINE AND ALLIED SCIENCES	
01	Dr. Saleemuddin Rashid
CHAIRMAN AND ASSISTANT PROFESSOR	
02	Dr. Bharat Kumar
SENIOR LECTURER	
03	Ms. Iqra Nasir-BS-Clinical Psychologist)
04	Ms. Masooma Sadiq
REGISTRAR	
05	Dr. Aisha
06	Dr. Madiha Anees
07	Dr. Siddiq Rehman
08	Dr. Sanaullah

DEPARTMENT OF SURGERY	
PROFESSORS	
01	Prof. Dr. Aijaz Ahmed Memon
02	Prof. Dr. Muhammad Javaid Rajput
03	Prof. Dr. Noor Muhammad Khaskheli
04	Prof. Dr. Syed Muhammad Tahir
05	Prof. Dr. Abdul Mannan Khan
ASSISTANT PROFESSORS	
06	Dr. Faiza Syed
07	Dr. Sohail Yousuf
08	Dr. Ghasia Khan
09	Dr. Altaf Hussain

SENIOR REGISTRAR	
10	Dr. Seema Shabir
11	Dr. Anum Asif
REGISTRAR	
12	Dr. Shoaib Hussain
13	Dr. Harlal
14	Dr. Muntazir Mahdi
15	Dr. Almas

DEPARTMENT OF PAEDIATRICS	
CHAIRPERSON AND PROFESSOR	
01	Prof Dr. Muhammad Hassan A. Memon
02	Dr. Shabir Ahmad Laghari
03	Dr. Muhammad Iqbal Pathan
ASSISTANT PROFESSOR	

04	Dr. Naheed Haroon
05	Dr. Oam Parkash
06	Dr. Suresh Kumar
07	Dr. Bilawal
SENIOR REGISTRAR	
08	Dr. Wajiha
09	Dr. Sahrish Memon
10	Dr. Faisal Nadeem
REGISTRAR	
11	Dr. Abdul Wahid
12	Dr. Huzayfah Iqbal
13	Dr. Muhammad Ishafaq Hassan
14	Dr. Zartasha Khan
15	Dr. Saleem
16	Dr. Mudasir

DEPARTMENT OF NEPHROLOGY	
ASSISTANT PROFESSORS	
01	Dr. Babita (**CHAIRMAN**)
SENIOR REGISTRAR	
02	Dr. Raffia Mazhar
	REGISTRAR
03	Dr. Haresh
04	Dr. Eareej

DEPARTMENT OF CARDIOLOGY	
PROFESSORS	
01	Dr. Fasih Hashmi (**CHAIRMAN**)
SENIOR REGISTRAR	
02	Dr. Ghulam Kubra
03	Dr. Abdul Qadir Memon
REGISTRAR	
04	Dr. Muhammad Akram Sultan
05	Dr. Jahan Zaib Khoso
06	Dr. Didar Hussain Gaju

DEPARTMENT OF DERMATOLOGY	
ASSOCIATE PROFESSORS	
01	Dr. Uzma Almas (CHAIRMAN)
SENIOR REGISTRAR	
02	Dr. Sabira
REGISTRAR	

03	Dr. Ponam Talpur
04	Dr. Iram Imam

DEPARTMENT OF PATHOLOGY	
PROFESSORS	
01	Prof. Dr. Farzana Chang {**CHAIRPERSON**}
02	Prof. Dr. Amtul Hussain Jafri
03	Prof. Dr. Muhammad Farooq Baig
04	Prof. Dr. Darya Khan
05	Prof. Dr. Riaz Ahmad Qazi
06	Prof. Dr. Bhawani Shankar
ASSOCIATE PROFESSOR	
07	Dr. Jai Krishan
ASSISTANT PROFESSORS	
08	Dr. Syed Hadi Iman
09	Dr. Aneela Faisal Memon
10	Dr. Ali Abuzar Raza
11	Dr. Sumair Akbar Ali
SENIOR LECTURERS/ LECTURERS/ DEMONSTRATOR	
12	Dr. Faria Sana
13	Dr. Sana Lund Baloch
14	Dr. Ubaid Rabani
15	Dr. Haider Ali
16	Dr. Humair Javaid
17	Dr. Tehreem Fatima
18	Dr. Syed Raza Muhammad
19	Dr. Syeda Masooma Zehra

DEPARTMENT OF GENERAL MEDICINE	
PROFESSORS	
01	Prof. Dr. Abdul Qadir Khan {**CHAIRPERSON**}
02	Prof. Dr. Iqbal Ahmed Memon
03	Prof. Dr. Mohammad Qasim
04	Prof. Dr. Khalid Shah
05	Prof. Dr. Fayyaz Ahmed
ASSOCIATE PROFESSORS	
06	Dr Aslam Aziz Ghouri
07	Dr Muneef Ahmed Channa
ASSISTANT PROFESSORS	
08	Dr. Ghordan Sothar
09	Dr Shabnum Rani
10	Dr Mahesh
SENIOR REGISTRAR	

11	Dr. Faizan Qaiser
12	Dr. Muneeba Asif
13	Dr. Saba Khan
14	Dr. Sultan Ahmed
REGISTRAR	
15	Dr. Umme Habiba

DEPARTMENT OF OBS GYNEA	
PROFESSORS	
01	Prof. Dr. Qamar Un Nisa {**CHAIRPERSON**}
02	Prof. Dr. Hemlata Pooran Kumar
03	Prof. Dr. Yasmeen
ASSOCIATE PROFESSOR	
04	Dr. Asma Jabeen
05	Dr. Farkhunda Khursheed
06	Dr. Madhu Bala
ASSISTANT PROFESSORS	
07	Dr. Anita Rathore
08	Dr. Shafia Khan
09	Dr. Firdous Khatoon
SENIOR REGISTRAR	
10	Dr. Bushra
13	Dr. Shazia Shaikh
14	Dr. Bushra
REGISTRAR	
16	Dr. Afsheen Shoukat
	Dr. Huda Afzal
17	Dr. Ayesha Mahar
18	Dr. Nazima
19	Dr. Bakhtawar Mahar

DEPARTMENT OF COMMUNITY MEDICINE	
PROFESSORS	
01	Prof. Dr. Muhammad Asif {**CHAIRPERSON**}
02	Prof. Dr. Allah Bachayoo Rajar
ASSOCIATE PROFESSOR	
03	Dr. Amjad Azam
ASSISTANT PROFESSORS	
04	Dr. Partab Puri
05	Dr. Shaikh Muhammad Akram
SENIOR LECTURERS/ LECTURERS/ DEMONSTRATORS	
06	Dr. Atta ur Rehman
07	Dr. Zain ul Hassan
08	Dr. Wisham Das

09	Dr. Khadim Lakhair
10	Dr. Aftab Memon
11	Dr. Palweesha
12	Dr. Danish Puri

VISION, MISSION, OUTCOMES, AND SRMLG SYSTEM

The Medical Education department of ISUM & MMC has worked hard to achieve the following goals:

A. To develop a curriculum that fulfils the directions of PM&DC as well as LUMHS & ISU vision and mission simultaneously.

B. To develop a plan and system to execute and monitor the curriculum that achieves the core competencies described by the WHO & PM&DC and yet take into account local dynamics, resources, limitations, strengths, and weaknesses.

A. DEVELOPING A PLAN AND SYSTEM TO EXECUTE AND MONITOR THE CURRICULUM

Ibn e Sina University, Mirpurkhas (ISUM) is a newly formed University, which is the first university of Mirpurkhas Division. It follows a vertically integrated modular system. There are 37 modules divided in 5 years of the MBBS Curriculum and 16 modules in four years of the BDS program. Each year has an average of 40 weeks of studies. Weekly plan is organized as a "theme".

Regular classes, practicals, clinics, and hospital duties are amply supported by 5 pillars that contribute to the high standards of this first-ever university of Mirpurkhas division. These pillars include:

1. "Survive" a three-pronged system of weekly tests, assignments, and post-test discussions.
2. "RLSE" or "Running Lives by Sharing Experiences, a weekly mentoring program.
3. "MCS" or daily "Mobile Clinics by Students".
4. "LBAS", or "Learner Based Annual Symposia".
5. "GSAT" Annual "Gastroenterology session with Students as Teachers". Conducted by Prof. Dr. Syed Zafar Abbas.

B. IMPLEMENTATION OF CURRICULUM THROUGH SRMLG			
S. N	**FIVE PILLARS**	**PMDC Core Competencies**	**MBBS-Class**
1	**Survive**	**Lifelong Learner**	**First Year, Second Year, Third Year, Fourth Year, Final Year**
2	**Weekly mentoring program**	**Care Provider, Communicator**	**First Year, Second Year, Third Year, Fourth Year, Final Year**
3	**Daily Mobile Clinics by Students**	**Care Provider Decision Maker Community Leader Communicator**	**Fourth Year (Mondays & Wednesdays) Final Year(Tuesdays and Thursdays)**
4	**LBAS, or "Learner Based Annual Symposia**	**Decision Maker Community Leader Communicator Researcher Manager**	**First Year, Second Year, Third Year, Fourth Year, Final Year**
5	**GSAT" Annual "Gastroenterology session with Students as Teachers. Conducted by Prof. Dr. Syed Zafar Abbas.**	**Communicator, Researcher, Care Provider Manager,**	**Fourth Year, Final Year**

IBN-E-SINA UNIVERSITY, Mirpurkhas - 2024

Online Moodle Test Schedule for 2024

S. No	Days	Time	Year/Class
1	Monday	01:00pm to 02:00pm	Third Year BDS
2		02:30pm to 03:30pm	Final Year MBBS
3	Tuesday	10:00am to 11:00am	Third Year DPT
4		01:00am to 02:00PM	Fourth Year MBBS
5		02:30pm to 03:30pm	Final Year BDS
6	Wednesday	02:30pm to 03:30pm	Third Year MBBS
7	Thursday	10:00am to 11:00am	Second Year BDS
8		11:00am to 12:00pm	CHPE Morning Program
9		12:00am to 01:00am	Second Year DPT
10		02:30pm to 03:30pm	Second Year MBBS
11	Friday	11:30am to 12:30pm	First Year DPT
12		12:30pm to 01:30pm	First Year BDS
13		02:30pm to 03:30pm	First Year MBBS

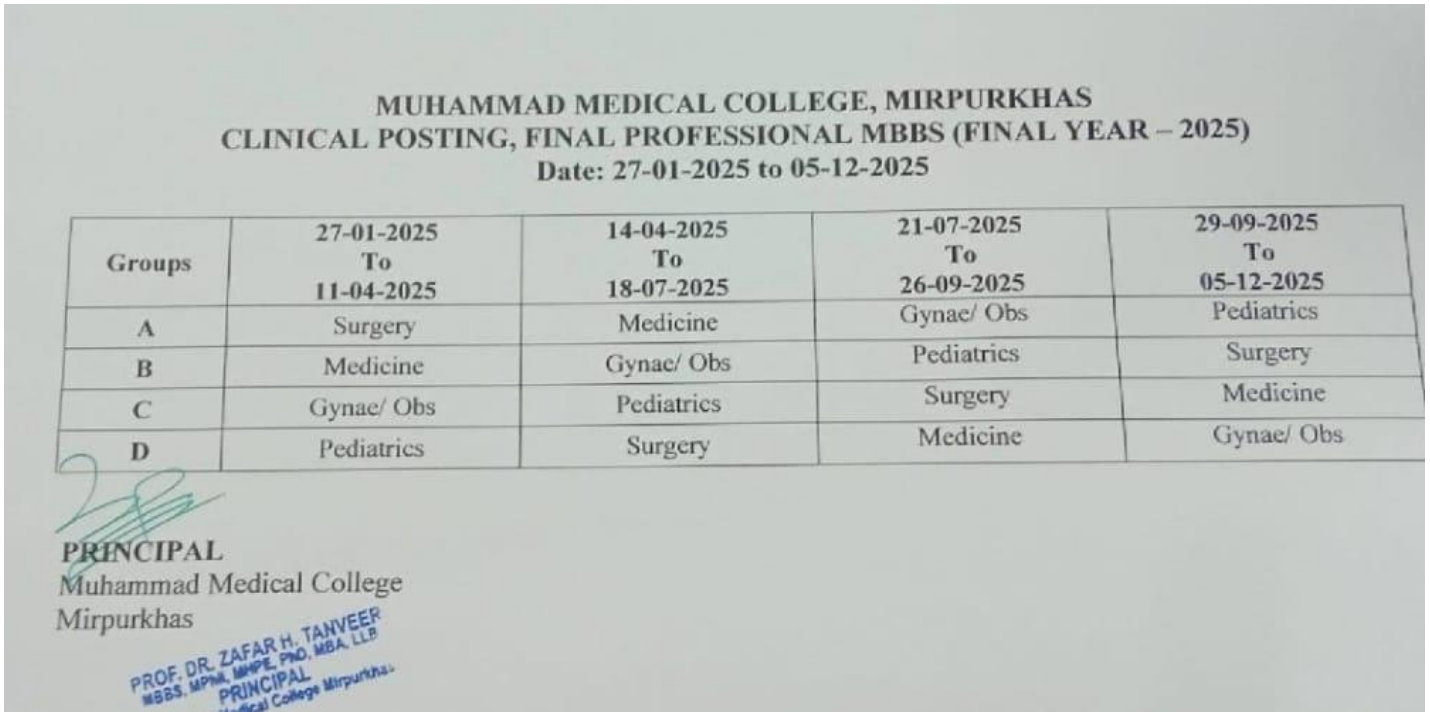
IT DEPARTMENT

FINAL PROFESSIONAL MENTORING GROUPS CLASS COORDINATOR: PROF. DR. AJAZ MEMON		
Group	**Mentor**	**Meeting venue (Mentor should fill)**
A1	Dr. Asma Jabeen	
A2	Dr Shabnum Rani	
A3	Dr. Madhubala	
B1	Dr. Faiza Syed/dr Huda Afzal	
B2	Dr. Anum Asif	
B3	Dr Muneeba Asif/Dr Saba Khan	
C1	Prof Dr Javaid Rajput	
C2	Prof Dr Aslam Ghori	
C3	Prof Dr Nadeem Memon	
D1	Dr Yawar Masood Durrani	
D2	Dr Mahesh Kumar	
D3	Dr Faizan Qaiser	

PURPOSE OF STUDY GUIDE

A study guide encourages effective study skills and self-directed lifelong learning. Study guide is like a 24/7 tutor sitting on the students‟ shoulder to advise them on what they should be doing at any stage in their study. Study guide is an important tool in the educational process because of information overload, curriculum change, spiral curriculum, distance learning, work-based learning and self-directed learning. The study guides are usually made to direct the students toward a pathway that dictates completion of syllabus through integrated curriculum. It is a time bound document which facilitates timely completion of proposed curriculum, and anyone can identify at any time what is to be taught in which part of academic year. A preloaded document that ensures how and when to complete the part of curriculum. This helps the need for documentation and prevents information overload. These are helpful to students to manage their own learning. These are helpful in planning for excellence awards to be achieved in a competitive environment. These can be used for distance learning, curriculum maintenance and curriculum dissemination. The benefits of study guide are:

- It helps in incorporating integrated programs.
- It facilitates students' interaction with the curriculum.
- Provides a framework for learning. It ensures uniformity
- Records of students' work can be obtained.
- Help inculcating self-study skills
- It prepares the student for examinations It presents content related to the subject. It provides knowledge about the content Reading is the only activity required



MUHAMMAD MEDICAL COLLEGE, MIRPURKHAS
CLINICAL POSTING, FINAL PROFESSIONAL MBBS (FINAL YEAR – 2025)
Date: 27-01-2025 to 05-12-2025

Groups	27-01-2025 To 11-04-2025	14-04-2025 To 18-07-2025	21-07-2025 To 26-09-2025	29-09-2025 To 05-12-2025
A	Surgery	Medicine	Gynae/ Obs	Pediatrics
B	Medicine	Gynae/ Obs	Pediatrics	Surgery
C	Gynae/ Obs	Pediatrics	Surgery	Medicine
D	Pediatrics	Surgery	Medicine	Gynae/ Obs

PRINCIPAL
Muhammad Medical College
Mirpurkhas

PROF. DR. ZAFAR H. TANVEER
MBBS, MPhil, MHPE, PhD, MBA, LLB
PRINCIPAL
Medical College Mirpurkhas

The above-mentioned clinical rotation schedule is to be followed by every student throughout the year. Groups of students are decided by the Hospital Administration.

ATTENDANCE POLICY FOR STUDENTS

As per the PMDC rules for eligibility in annual examinations.

- Minimum attendance requirement is 75% in each subject: attendance is for lectures, demos, practical's, clinics, PBLs, SURVIVE, CPC, presentations, etc, indoor and outdoor.
- The attendance is not simply for lectures.

Attendance is maintained by the Department of Student Affairs at MMC.

DEPARTMENTOF
GENERAL SURGERY

ACADEMIC SESSION 2024-25

Integrated modular curriculum- Final year Syllabus for the Subject of Surgery

Introduction:
The integrated modular curriculum for the subject of General Surgery of final year MBBS is divided into 14 modules, distributed to each Professor and a senior doctor assisting the Professor.
Each module will be further broken into academic teaching utilizing the resources and considering the limitations. It includes lectures, ward teachings, OT and OPD attendance, skill lab teaching (Every Monday 2.30-4pm in skills lab), presentation by the students (Thursday 12-2pm), research (every Thursday by Prof. S.M. Tahir) and mentoring meeting (every Wednesday between 1-2pm).
An integrated curriculum is designed to enhance learning by connecting theoretical knowledge with practical application. In contrast to traditional method, an integrated approach promotes a meaningful understanding of concepts by integrating basic science with clinical practice. An integrated approach is consistent with global trends in medical education, with an emphasis on systems-based and competency-based learning to prepare students for real-world healthcare.

Integrated curriculum allows students to relate principles of anatomy, physiology, pathology, and pharmacology to clinical scenarios. This comprehensive framework not only enhances understanding, but also improves clinical reasoning, decision-making, and problem-solving skills. By incorporating active learning methods, such as case- based discussions, simulation exercises, and interdisciplinary teamwork, students are equipped to address comprehensive patient care.

Curriculum also emphasizes professionalism, ethical consideration, and effective communication, preparing students to provide empathetic, patient-centred care. It also promotes self-directed learning, required for thriving in a rapidly changing medical education. Thus the integrated approach ensures that future doctors are competent, confident, and prepared to meet the challenges of healthcare delivery. Rationale:

Rationale:
Integrated curriculum in surgery for undergraduates (Final year MBBS) is essential as this is the critical phase in preparing students for their roles as competent medical professionals. By integrating anatomy, physiology, pathology, and radiology with clinical practice, students gain the ability to correlate theoretical knowledge with real-life patient management. This approach enhances their diagnostic decision-making skills while preparing them to address complex clinical scenarios in a multidisciplinary healthcare setting. Additionally, integrating procedural skills and evidence-based medicine ensures that students are equipped for the needs of surgical practice, from preoperative assessment to postoperative care.

Curriculum also emphasizes professionalism, ethical decision-making, and effective communication, which are critical components of patient-centered care. Teamwork and interdisciplinary collaboration exposure prepare students for real-world challenges, promoting holistic care. Curriculum not only enhances clinical competence but also instills lifelong learning habits. Ultimately, an integrated surgical curriculum ensures that graduating students are ready to transition into their roles as capable healthcare professionals.

Learning Objectives:
At the end of the Integrated Curriculum of Surgery, students will be able to:

Cognitive Objectives:

1. Demonstrate in-depth knowledge of anatomy, physiology, pathology, and clinical features of surgical diseases, and integrate this knowledge into patient care.
2. Conduct detailed histories and physical examinations, interpret relevant diagnostic tests, and make accurate diagnoses of common surgical conditions.
3. Demonstrate in-depth understanding of the indications and contraindications of common surgical procedures.
4. Integrate basic scientific and clinical knowledge for the management of surgical patients.
5. Identify and manage surgical emergencies, including trauma, shock, and acute abdominal conditions, with an emphasis on timely interventions and stabilization.
6. Anticipate, recognize, and manage postoperative complications, including infections, bleeding, and thromboembolic events.
7. Learn to engage in modern diagnostic tools, minimally invasive surgical techniques and surgical innovations to improve patient care.

Psychomotor Objectives:

1. Perform basic surgical skills under supervision, including basic procedures such as wound dressing, catheterization, passing nasogastric tubes, suturing, assisting in minor surgical procedures and basic life support.

Affective Domain Objectives:

1. Apply principles of patient safety, sterility, infection control, and surgical ethics to clinical practice.
2. Provide compassionate, respectful, and culturally appropriate care, and communicate effectively with patients and their families.
3. Work effectively within multidisciplinary teams, coordinating with anaesthesiologists, radiologists, and other healthcare professionals to improve patient outcomes.
4. Recognize the role of surgery in public health, and low-resource settings, emphasizing on preventive and cost-effective care.
5. Engage in self-directed learning and participate in clinical research to stay abreast of surgical advances.
6. Advocate professional values, ethical principles and commitment to continuous improvement in surgical care.

MODULES	**MODULES 1, 2 & 3**	**MODULE 4, 5 & 6**	**MODULES 7,8 & 9**	**10, 11 & 12**	**13, 14 & 15**	**16, 17 & 18**
DAYS	**MONDAY**	**TUESDAY**	**WEDNESDAY**	**THURSDAY**	**FRIDAY**	**AFTERNOON MON TO THURSDAY**
Teachers	Team A. Prof. Aijaz A Memon, Dr. Samiullah Gill and Dr. Ghasia. Prof. Sheba, Prof. Raheem Sial	Team B. Prof. S M Tahir, Prof. Mahesh Kumar, and Prof. Pir Abdul Lateef	Team C. Prof. Mannan and Dr. Sohail	Team D. Prof. Noor M Khaskheli and Dr. Faiza	**Team E. Prof. Javed Rajput and Dr. Anum**	**Team F. Prof. Syed Razi Muhammad and Prof. Jamshed Bashir**
	Module 1: Basic principles of Surgery,	Module 4: Wound and its	Module 7: Vascular disorders	Module 10: Perioperative care: Pre-	**Module 13**: Breast and its related	**Module 16:** Surgical History,

Modules	Global Health and Surgery, Transplantation <u>Module 2:</u> Diagnostic imaging (11-2pm in alternative weeks 1,3,5,7 & 9 in Prof. AHM Institute of Radiology, in liaison with the radiologist), Interpretation of Lab results, Tissue and molecular diagnosis (11-2pm in alternative weeks 2,4,6,8 & 10 in Patho Lab). The surgical tutor must accompany the students to the radiology or pathology. <u>Module 3:</u> Basic surgical skills workshop (2.30-4 pm at SDC), Weekly survive test-every Monday at 4 pm).	management Wound healing, Tissue engineering and regeneration, Surgical infections, Tropical infestations. <u>Module 5:</u> Trauma, Fracture (General) , Shock, Haemorrhage, blood transfusion, metabolic response to injury, patient care and safety. <u>Module 6:</u> Surgical Research, SPSS (students will be divided into a group of 4, will work on and prepare a project for the annual symposium). Surgical case presentation: 12-2pm. Prof. Tahir, Prof. Mahesh and Prof. Pir Abdul Lateef should be supervising and conducting	Arterial disorders, venous disorders, lymphatic disorders <u>Module 8:</u> small bowel and its related disorders, Small Iintestine, Intestinal Obstruction, peritoneum and mesentery, inflammatory bowel disease <u>Module 9:</u> Large bowel and Anal Canal Appendix, Large Gut, Rectum and anal canal	operative care, postoperative care, Anaesthesia and pain relief, fluid and Nutrition (8.30 am to 1pm). <u>Module 11:</u> Upper GI Oesophagus, stomach, duodenum, Bariatric, GI endoscopy Module 5: Abdominal wall Hernia and Inguinoscrotal swelling. Abdominal Wall Hernias, Testis and scrotum, Day care surgery. <u>Module 12:</u> Neck swelling and adrenal Thyroid, parathyroid, extra thyroidal neck swellings, adrenals. *Meeting with Mentors: 1 pm-2 pm	disorders Breast and its related disorders, surgical oncology. **<u>Module 14:</u>** Hepato Biliary system and pancreatic system: Biliary system, Liver, pancreas, Spleen, Minimal access surgery **<u>Module 15:</u>** Abdominal wall Hernia and Inguinoscrotal swelling Abdominal Wall Hernias, Testis and scrotum, Day care surgery	Clinical Examination **<u>Module 17:</u>** Affective Domain, Audit, Ethics **<u>Module 18:</u>** Surgical revision of 1-12 Modules, OT, (OPD-Wed-pm 2.30-5pm), Ward rounds.

		this session every week.				

Distribution of topics to each Professor with the schedule of teaching per Module is distributed as under;

NAME OF PROFESSOR	MODULE
Prof. Aijaz A Memon and Dr. (Monday)	**Module 1:** Basic principles of Surgery, Global Health and Surgery, Transplantation **Module 2:** Diagnostic imaging (11-2pm in alternative weeks 1,3,5,7 & 9 in Prof. AHM Institute of Radiology, in liaison with the radiologist), Interpretation of Lab results, Tissue and molecular diagnosis (11-2pm in alternative weeks 2,4,6,8 & 10 in Patho Lab). The surgical tutor must accompany the students to the radiology or pathology. **Module 3:** Basic surgical skills workshop (at 2.30-4pm at SDC), Students will attend the weekly survive test every Monday at 4 pm).
Prof. S M Tahir and Dr. (Tuesday)	**Module 4:** Wound and its management Wound healing, Tissue engineering and regeneration, Surgical infections, Tropical infestations. **Module 5:** Trauma, Shock, Haemorrhage, blood transfusion, metabolic response to injury, Patient care and safety **Module 6:** Surgical Research, SPSS (students will be divided into a group of 4, will work on and prepare a project for the annual symposium). Surgical case presentation: 12-2 pm. Prof. Tahir & team should be supervising and conducting every session.
Prof. Mannan and Dr. Sohail (Wednesday)	**Module 7**: Vascular disorders Arterial disorders, venous disorders, lymphatic disorders **Module 8**: Small bowel and its related disorders, Small Intestine, Intestinal Obstruction, peritoneum and mesentery, inflammatory bowel disease. **Module 9:** Large bowel and Anal Canal Appendix, Large Gut, Rectum, and anal canal
Prof. Noor M Khaskheli and Dr. (Thursday)	**Module 10**: Perioperative care: pre-operative care, postoperative care, Anesthesia and pain relief, fluid and Nutrition (8.30 am to 1pm). **Module 11**: Upper GI Esophagus, stomach, duodenum, Bariatric, GI endoscopy. **Module 12**: Abdominal wall Hernia and Inguinoscrotal swelling Abdominal Wall Hernias, Testis and scrotum, Day care surgery. **Module 13:** Neck swelling and adrenal Thyroid, parathyroid, extra thyroidal neck swellings, adrenals
Prof. Javed Rajput and Dr. (Friday)	**Module 14**: Breast and its related disorders Breast and its related disorders, surgical oncology **Module 15:** Hepato Biliary system and pancreatic system: Biliary system, Liver, pancreas, Spleen, Minimal access surgery **Module 16:** Abdominal wall Hernia and Inguinoscrotal swelling Abdominal Wall Hernias, Testis and scrotum, Day care surgery

Prof. Syed Razi Muhammad & Prof. Jamshed Mon to Thursday 2.30 to 5pm	Mon to Thursday 2.30 to 5 pm (excluding the time for appointments like weekly survive tests and time for meetings with mentors) **Module 17**: Surgical History, Clinical Examination **Module 18:** Affective Domain in Surgery **Module 19:** Surgical revision of 1-12 Modules, OT, OPD (Wednesday 2.30-5 pm), Ward rounds.
Meeting with Mentors: 1 pm-2 pm (students will meet their mentors who are stationed and will fill in the Weekly report of mentoring). We will include a report of mentoring for 14 weeks. Each week will include students' attendance, academic performance, and survival results. The students' Progress book will include a section for 40 weeks of structured reporting of mentoring.	
Students will visit and spend at least 1-2 days per week at Dr. Syed Ali Muhammad Hospital in the City to diversify their clinical experience.** * Students will visit and spend at least 1-2 days per week at Children Hospital to diversify their clinical experience.** ***** Timetable will include workshops and learning at skills lab.** ****** Daily first part of Modular teaching will extend from 8.30 to 2pm except on Wednesday when it will end by 1pm so students can attend mentorship from 1-2pm (Wednesday).** ******* Daily second part of Modular teaching will extend from 2.30 to 5pm.** **Challenge: Include the 986 clinical hours in the timetables.**	

Names of workshops conducted will be:

COMPREHENSIVE DISTRIBUTION OF CLINICAL SKILLS/ WORKSHOP AT SKILLS LAB MMC

64 CLINICAL SKILLS IN SKILLS LAB OF MMC

Competence-based medical education is being promoted by the World Federation of Medical Education and the Pakistan Medical and Dental Council (PM&DC). In its quest to be a national/international leader in producing quality doctors, Muhammad Medical College, Ibn-E-Sina University has developed a state-of-the-art Skills Lab/ Simulation Centre and a unique Program of teaching and training the 64 Clinical skills required by a doctor. Each skill will be taught at the skill/ simulation lab and will be strengthened in the wards. Following is the schedule of the program. Each session may be preceded by a brief introduction/video. A printed as well as an electronic logbook will be maintained by each student. This record will be automatically updated and kept in the student's e-file, and some marks will be awarded in each modular/ annual examination to the student.

A. **Here, the skills have been divided according to**

A. CLASS (64)

a. 3rd Year **(10)-Preferably by SRs/APs**
b. 4th Year **(18) Preferably by SRs/APs**
c. 5th Year **(36) Preferably by Professors**

B. **SUBJECT (64)**

a. Surgery **(20-2 workshops per week)**
b. Medicine **(20-2 workshops per week)**
c. Gynae & OBS **(9)**
d. Paeds **(6)**

e. Pathology **(6-all in 3rd year)**
f. ENT **(2-3rd year)**
g. Eye **(1-3rd year)**

C. Competence (64)

- Patient assessment by the medical students (22)
- Procedural Skills (12)
- Patient care (7)
- Prescribing (5)
- Therapeutic procedures (18)

FINAL YEAR MBBS

LIST OF SKILL-BASED WORKSHOPS AND COMPETENCIES ACCORDING TO MODULES

S. N	SKILLS	DESCRIPTION	LEVEL OF COMPETENCE	SUBJECT	LINK	SKILLS LAB/WARD
1	Carry out the removal of Sutures and surgical drains	Firmly grasp the drainage tube close to skin with dominant hand, and with a swift and steady motion, withdraw the drain and place it on the waterproof drape/pad (the other hand should stabilize the skin with 4 x 4 sterile gauze around the drain site). Remove sutures by following aseptic techniques	Safe to practice under direct supervision	**Surgery**	**Surgery**	
2	Application of POP	Apply the POP on top of the cotton wool padding from distal to proximal, without applying tension to the roll, overlapping each layer by 50%.	Safe to practice under direct supervision	**Surgery**		
3	Perform surgical scrubbing up	Follow approved processes for cleaning hands and wearing appropriate personal protective equipment before procedures or surgical operations	Safe to practice under direct supervision	**Surgery**		

4	Digital rectal examination and Proctoscopy	Should know common causes of bleeding per rectum and common perianal diseases and be able to diagnose them by means of digital rectal examination and proctoscopy.	safe to practice under direct supervisio n	**Surgery**		
5	Identifying and learning the use of basic surgical instruments.		Safe to practice under indirect supervision	**Surgery**	**https:// www.yo utube.c om/wat ch?v=U 8tKeMLl 5p4**	
6	Taking informed consent		Safe to practice under indirect supervision	**Surgery**		
7	Preoperative counselling		Safe to practice under indirect supervision	**Surgery**		
8	Carry out male Urinary Bladder Catheterization	Insertion of a catheter tube through the urethra and into the bladder to drain urine.	Safe to practice under indirect supervision	**Surgery**		
9	Carry out wound care and basic wound closure and dressing	Provide basic care of surgical or traumatic wounds and apply dressing appropriately.	Safe to practice under direct supervision	**Surgery**		
10	Carry out nasogastric tube placement	Pass a tube into the stomach through the nose and throat for feeding and administering drugs or draining the stomach's contents. Should know how to ensure correct	Safe to practice simulation	**Surgery**		

		placement.				
11	Use local anesthetics	Inject or topically apply a local anaesthetic. Understand maximum doses of local anaesthetic agents.	Safe to practice under direct supervision	**Surgery**		
12	Apply a splint for fractures POP,	Can apply routine splints for fractures like Thomas, - Neck of femur	Safe to practice under direct supervision	**Surgery**		
13	Nebulization	Follow the directions for the specific brand of nebulizer machine and cup	Safe to practice under indirect supervision	Medicine		
14	Set up an infusion	Set up run through and intravenous infusion. Have awareness of the different equipment and devices used.	Safe to practice under direct supervision	Medicine		
15	Use correct techniques for moving and handling, including patients who are frail	Use, and/ or direct other team members to use, approved methods for moving, lifting and handling people or objects, in the context of clinical care, using methods that avoid injury to patients, colleagues, or oneself	Safe to practice under indirect supervision	Medicine		
16	Breaking bad news (video)		Safe to practice under indirect supervision	Medicine	https://youtu.be/MKnWkrPLGOs?si=JQKQ6bPznsfWhIRE	

17	Introduction to care of the elderly & dying (palliative care)(video)		Safe to practice under indirect supervision	Medicine	https://youtu.be/Lbbd1uIwbxs?si=3ahg-eaZX-3_mNWm	
18	Instruct patients in the use of devices for inhaled medication	Explain to a patient how to use an inhaler correctly, including spacers, and check that their technique is correct. Should know about various types of Inhalers	Safe to practice under direct supervision	Medicine		
19	Prescribe and administer oxygen	Prescribe and administer oxygen safely using a delivery method appropriate for the patient's needs and monitor and adjust oxygen as needed. Knows the exact volume given per Minute	Safe to practice under direct supervision	Medicine		
20	Prepare and administer injectable (intramuscular, subcutaneous, intravenous) drugs	Prepare and administer injectable drugs and prefilled syringes Knows about various channels of CVP	Safe to practice under direct supervision	Medicine		
21	Measure CVP (central venous pressure)	should be able to measure, interpret, and monitor central venous pressure readings	safe to practice under direct supervision	Medicine		
22	Should be able to perform essential lifesaving procedures (BLS)	Tracheostomy, endotracheal intubation, and chest intubation. Should be competent at Basic Life Support.	safe to practice under direct supervision	Medicine		

23	Nutritional assessment	Calculate BMI, carry out nutritional assessment of patients, and guide them according to their caloric requirements	safe to practice under direct supervision	Medicine		
24	Take HVS	To test vaginal discharge for the presence of vaginal thrush, bacterial vaginosis, and Trichomonas vaginalis. Carried out in clean conditions, using a speculum to look at the cervix and vagina.	Safe to practice under direct supervision	**Gynae/ Obs**		
25	Positioning for breastfeeding	Should be able to direct the patient on the positioning of breastfeeding	Safe to practice under indirect supervision	**Gynae/ Obs**		
26	Performing CTG and its interpretation			**Gynae/ Obs**		
27	Carry out female urinary catheterization	Insert a urethral catheter in both male and female patients. Should know its complications and Management		**Gynae/ Obs**		
28	Antenatal Care & calculating EDD	Should be able to direct the patient on the positioning of breastfeeding		**Gynae/ Obs**		
29	Normal Vaginal Delivery	Should be able to direct the patient on the positioning of breastfeeding		**Gynae/ Obs**		
30	Obstructed labor and assisted deliveries	Should be able to direct the patient on the positioning of breastfeeding		**Gynae/ Obs**		

31	Performing CTG and its interpretation			**Gynae/ Obs**		
32	History taking					
33	Pediatric Examination					
34	Dehydration and IV infusion					
35	Nutritional Diseases					
36	Infectious Diseases & EPI					

Mentorship:

Mentor will check and grade as:

1. **Attendance (will be marked by biomedical devices in the ward during morning and afternoon (2.30 pm) and in Survive, on paper in the workshop at SDC, Laboratory, Radiology, and OPD.**

- Excellent- 90-100%
- Good 80-89%
- Acceptable 75-79
- Need improvement 65-74
- Parents will be informed and asked to be proactive every week.

2. Academic performance so far e.g marks secured in Survive and in assignments.
3. Any presentation,
4. Progress in research,
5. Any disciplinary problem(s).
6. Comments by the mentor.
7. Comments by the mentee.

Assessment (Midterm and End of term):

On Thursday and Friday of week 5, a midsession with the mentor and a comprehensive test of Surgery including MCQs (25-50 marks), OSCEs (10 interactive stations-50 marks) and Long case-50 marks, mentoring process-50 marks), attendance (50 marks), Workshop attended (10 marks), history/examinations Journal (10 marks for 5 history & examinations-2 marks each), participated in weekly presentation (10 marks), Portfolio (10 marks), research project completed (10 marks), total 300 marks.

On Thursday and Friday of week 10, an end-of-term mentoring session and a final test will be conducted, including MCQs (25-75 marks), OSCEs (10 interactive stations-75 marks), and a long case (50 marks).

Marks distribution will be as follows:

1. Total 200 marks from end of term examination.
2. Total 50 marks from the midterm
3. Total 50 marks for attendance

4. Total 50 marks for performance as Workshop attended (10 marks), history/examinations Journal (10 marks for 10 history & examinations-1 mark each), participated in weekly presentation (10 marks), Portfolio (10 marks), research project completed (10 marks)
5. Total 200 marks for survive (numbers obtained and assignments, one plus PTD per week).

2. 50 marks for the mentoring process.

Total-600 marks. Final marks in the internal assessment will be 10% of the marks obtained here.

CONTEXUALLY DEVELOPED PLAN OF SURGICAL DEPARTMENT

The following is the contextually developed surgical plan. It includes everything that LUMHS has planned. However, keeping in view of our situation and strengths, I have made following changes:

- Added 6 modules, increasing the number of modules from 12 to 18.
- Instead of dividing the modules into surgical units, I have divided them into a team of 2-3 senior teachers.
- We will not conduct one unit after another. Instead, 5 teams (team A, B, C, D & E) will start their one module on each day of the week simultaneously. The 6th team (team F) will conduct the afternoon session (2.30-5: 00 Pm).
- Additional modules of Diagnostic imaging, Interpretation of Lab results and Basic surgical skills workshop will be conducted by team A. They will include the Professors of Radiology and Pathology too.
- Weekly survive test with 10 MCQs of Surgery (other 3 departments will answer 10 MCQs of their subjects) will be held at 4 pm on Monday. Students will need to write an assignment too. Post Test Discussion assignments will continue.
- On Tuesday, an additional module of Surgical Research & SPSS have been added (students will be divided into a group of 4, will work on and prepare a project for the annual symposium).
  On Tuesday, **a surgical case presentation will be held between 12-2pm.** Prof. Tahir, Prof. Mahesh and Prof. Pir Abdul Lateef should be supervising and conducting this session every week.
- On Thursday, all students of final year will be meeting with their assigned mentors between 1pm-2pm (students will go to meet their mentors, wherever mentors are stationed, both will fill the Weekly report of mentoring**).** We will include a weekly report of mentoring for 10 weeks. Students' Progress book will include section for 40 weeks of structured reporting of mentoring). Each week will include students' attendance, academic performance, including survive results comments by Mentor and comments by Mentee.
- Every afternoon, the students will be taught about History & Examination, on Wednesday, they will be attending my afternoon clinic. This will ensure they get extra training on clinical skills. We will also teach them the affective domain in this time which otherwise remains a hidden curriculum. We also intend to revise the topics taught in the morning sessions.
- Every 5th Thursday, there will be a mid-term exam consisting of MCQs, OSCE and Long cases. Every 10th Friday there will be an end of term examination from the whole syllabus. If a holiday falls on these days, the days may be adjusted.

DEPARTMENTOF MEDICINE

ACADEMIC SESSION 2024-25

DEPARTMENT OF MEDICINE FACULTY OF MEDICINE & ALLIED MOHAMMAD MEDICAL COLLEGE-MIRPURKHAS			
TEACHING FACULTY			
DEAN, CHAIRMAN: PROF. DR. A. QADIR KHAN			
S #	**MEDICAL UNIT I (FIRST FLOOR)**	**MEDICAL UNIT II (GROUND FLOOR)**	
01	Prof: Dr. A. Qadir Khan	**01**	Prof: Dr. Iqbal Memon
02	Prof: Dr Aslam Ghouri	**02**	Prof: Dr. Muhammad Ali
03	Prof: Dr.Nadeem Memon	**03**	Prof: Dr. Fayaz Memon
04	Prof: Dr. Khalid Sheikh	**04**	Prof: Dr. Shaheen Mughal
05	Prof: Dr. Rashid Khan	**05**	Prof: Dr. Syed Fasih Hashmi
06	Dr. Shabnam Rani A.P	**06**	Dr. Mahesh Kumar A.P
07	Dr. Saleem Rashid A.P	**07**	Dr. Faizan Qaiser A.P
08	Dr. Bharat Kumar A.P	**08**	Dr. Chaman Das A.P
09	Dr. Muneeba Asif A.P	**09**	Dr. Sabira Khan A.P
10	Dr. Babita A.P	**10**	Dr. Naeem Laghari
11	Dr. Sarwat Anjum		

COURSE CONTENT: DISTRIBUTED INTO 9 MODULES	
MODULE I BLOOD • Iron Deficiency Anemia • Hemolytic Anemia and Related Disorders. • Aplastic Anemia • Haemoglobinopathies • Megaloblastic Anemia • Blood Transfusion and Complications	**MODULE II ONCOLOGY (HEMATOLOGICAL MALIGNANCY)** Acute Myeloid Leukemia • Acute Lymphoblastic Leukemia • CLL • CML • Myeloproliferative Disorders • Lymphoproliferative Disorders • Multiple Myeloma • Myelodysplastic Syndrome

MODULE III BLEEDING DISORDERS	MODULE IV INFECTIOUS DISEASES
• ITP • Hemophilia • DIC • Coagulation Disorders • Thrombolytic therapy • Anti-coagulants	• Malaria • Rabies • Coronavirus infection and related disorders • Sexually transmitted infections and related conditions • Pyrexia of unknown origin/Sepsis/septic Shock • Amebic Liver Abscess • Hydatid Cyst
MODULE V MUSCULOSKELETAL SYSTEM	**MODULE VI POISONING**
• Approach to joint disorders • SLE • MCTD overlap syndrome • Rheumatoid arthritis • Osteoarthritis • Osteoporosis and osteomalacia • Sjogren's Syndrome • Systemic sclerosis • Polyarteritis nodosa • Gout • Wegener's granulomatosis • Ankylosing Spondylitis • Psoriatic Arthritis • Paget's Disease • Reactive arthritis • Pott's Disease	• Paracetamol Poisoning • Organophosphorus Poisoning • Snakebite • Blackstone Poisoning • Salicylates Poisoning • Opioid Poisoning • Benzodiazepine Poisoning

MODULE VII ENDOCRINE AND METABOLIC DISEASES	MODULE VIII GENETIC & GERIATRIC
• Down's syndrome • Klinefelter syndrome • Marfan's syndrome • Turner's syndrome • Health problems of the elderly • General Principles of treating the elderly • Patient Safety: How to Ensure	• Acute Pulmonary Edema • ARDS • Shock • Hemochromatosis • Wilson's Disease • Primary Biliary Cirrhosis • Autoimmune Hepatitis • Alcoholic Liver Disease • MASH & MAFLD • Hepatocellular Carcinoma
MODULE IX MULTISYSTEM	
• Acute Pulmonary Edema ARDS • Shock • Hemochromatosis • Wilson's Disease • primary biliary cirrhosis • Autoimmune Hepatitis • Alcoholic Liver Disease • MASH & MAFLD Hepatocellular Carcinoma	

LIST OF PROCEDURES:

By the end of the course student should acquire skills in common paediatric procedures according to the following level of competency

1. **LEVEL: 1** Able to perform under the direct supervision: 1a; on a mannequin, 1b; on a simulator
2. **LEVEL: 2** Able to perform under indirect supervision

PROCEDURE	**LEVEL**
Instruct patients in the use of devices for inhaled medication, Nebulization	2
Prepare and administer injectable (intramuscular, subcutaneous, intravenous) drugs	1
Prescribe and administer oxygen	2
Carry out intravenous cannulation	2
Carry out a safe and appropriate blood transfusion	2
Carry out male and female urinary catheterization	2
Carryout nasogastric tube placement	2
Lumbar puncture	1
Measure capillary blood glucose	2
Blood sampling: Carry out arterial blood gas and acid-base sampling from the radial artery in adults	2
Set up an infusion	2

MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS

DEPARTMENT OF MEDICINE -D ALLIED -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025

CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 01 / MODULE I THEME HEMATOLOGICAL DISEASES

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduates for learning history taking and physical examination	Students with postgraduate for learning history taking and physical examination	Students with postgraduate degrees for learning history taking and physical examination	Students with postgraduate degrees for learning history, taking and physical examination	**Students with postgraduate degrees for learning history, taking and physical examination**
9.30 to 10.30	Attending ward Round in Unit I with Prof Dr. Aslam Ghouri, Prof: Dr.Khalid Sheikh, Dr. Shabnam Rani	Attending ward Round with Prof: Dr.A.Qadir Khan, Dr.Muneeba Asif Dr.Chaman Das Dr. Mahesh Kumar	Attending ward Round with Prof: Dr. Aslam Ghouri, Pof: Dr. Khalid Sheikh, , Dr.Sarwat Anjum	**9:00 am 10:00** Attending ward Round in Unit I with Prof Dr. Aslam Ghouri , Prof: Dr.Khalid Sheikh, Dr Nadeem Memon	**Attending ward Round with Prof: Dr.Iqbal Memon, Prof: Dr.Muhd Ali , Prof: Dr.Fayaz Memon**
10.30 to 11.30	Interactive Lecture at Medicine Seminar Room Approach the patient with Anemia and Iron Deficiency Anemia Prof: Dr. Aslam Ghouri	Interactive Lecture at Medicine Seminar Room Approach the patient with Hemolytic Anemia and Aplastic Anemia Dr.Mahesh Kumar	Interactive Lecture at Medicine Seminar Room Approach the patient with Megaloblastic Anemia Prof: Dr.Iqbal Memon	**11:00 -12:00 pm** Interactive Lecture at Medicine Seminar Room: Approaching the Patient with Hemoglobinopathies, Prof. Dr. Nadeem Memon	**Alternate week Skill lab/ Tutorial on Approach with Patient Blood Transfusion complication Prof:Dr.Muhammad Ali**
11.30 Am to 12.30 pm	Tutorial on Approach to patient with Anemia Prof: Dr.Aslam Ghouri	01:00 pm to 02:00 pm Mantor Session Prof: Dr.A.Qadir Khan	Tutorial on Approach to patient with Lymphadenopathy and Hepatosplenic- megaly Prof: Dr.Iqbal Memon	Tutorial on Approach to patient with Pancytopenia Prof:Dr.Nadeem Memon	**Alternate week Skill lab Small Group Learning Bedside/Topic Dr.Muhd Ali**
12.30 To 2.00 pm	Small Group Learning Bedside/Topic Prof: Dr. Aslam Ghouri	Small Group Learning Bedside/Topic Prof: Dr.A.Qadir Khan	Small Group Learning Bedside/Topic Prof: Dr. Iqbal Memon & MENTORING	Small Group Learning Bedside/Topic-Prof: Dr.Nadeem Memon	**Small Group Learning Bedside/Topic Dr.Muhd Ali**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 4.00 pm	Individual History and exam by subgroups as per allotted beds, supervised by postgraduate	Individual History and exam by subgroups as per allotted beds, supervised by postgraduate	Individual History and exam by sub groups as per allotted beds supervised by postgraduate	Individual History and exam by subgroups as per allotted beds supervised by postgraduate	**Self-Directed Learning (SDL)**
4.00 Pm 5:00	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**

Prof Dr Abdul Qadir Khan, Chairman, Department of Medicine-MMCH

MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS

DEPARTMENT OF MEDICINE ALLIED -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025

CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 02 / MODULE II-THEME: BLOOD-SUB THEME HEMATOLOGICAL DISEASES-PULMONOLOGY

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduate degrees for learning history taking and physical examination	Students with postgraduate degrees for learning history, taking a physical examination	**Holiday**	Students with postgraduate degrees for learning history, taking and physical examination	**Students with postgraduate degrees for learning history, taking a physical examination**
9.30 to 10.30	Attending ward rounds	Attending ward rounds	**Holiday**	Attending ward rounds	**Attending ward rounds**
10.30 to 11.30	Interactive Lecture Approach the patient with AML , ALL Dr.Faizan Qaiser	Interactive Lecture approach the patient with CLL, CML Dr.Muneeba Asif Dr Yawer Durani	**Holiday**	Interactive Lecture on Approaching the Patient with Myeloproliferative Disorders Lymph Proliferative Disorders by Prof Dr. Nadeem Memon	**Alternate week Skill lab/ Tutorial on Approach to Patient with Multiple Myeloma Myelodysplastic Syndrome Prof Dr.M.Ali**
11.30 Am to 12.30 pm	Interactive Lecture on introduction to pulmonological disorders by Prof Dr Rashid Khan / Dr Yawer Durani	Interactive Lecture on Pneumonias by Prof Dr Rashid Khan /	**Holiday**	Interactive Lecture on COPD, Bronchial Asthma by Prof Dr Rashid Khan / Dr Yawer Durani	**Interactive Lecture on CA LUNG by Prof Dr Rashid Khan / Dr Yawer Durani**
12.30 To 2.00 pm	Small Group Learning Bedside/Topic Dr.Faizan Qaiser	01:00 pm to 02:00 pm Mantor Session Prof: Dr.A.Qadir Khan	**Holiday**	Small Group Learning Bedside/Topic Prof Dr.Shaheen Mughal	**Small Group Learning Bedside/Topic Dr.Saleem Rashid**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	**Holiday**	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 4.00 pm	Individual History and exam by sub groups as per allotted beds supervised by postgraduate	Individual History and exam by sub groups as per allotted beds supervised by postgraduate	**Holiday**	Individual History and exam by sub groups as per allotted beds supervised by postgraduate	**Self-Directed Learning (SDL)**
4.00 Pm 5:00	**Weekly BCQ Test IT LAB**	Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG	**Holiday**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**

Prof Dr Abdul Qadir Khan, Chairman, Department of Medicine-MMCH

MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS
DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025
CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 03 / MODULE III-SUB THEME HEMATOLOGICAL DISEASES-REVISION OF PULMONOLOGY

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical Examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	**Students with postgraduates for learning history taking and physical examination**
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	Interactive Lecture Approach the patient with ITP Dr.Iqbal Memon	Interactive Lecture approach the patient with Hemolytic Anemia and Aplastic Anemia Dr. Mahesh Kumar	Interactive Lecture approach the patient with Megaloblastic anemia Prof Dr. Aslam Ghouri	Interactive Lecture approach the patient with Hemoglobinopathies Prof Dr. Nadeem Memon	**Alternate week Skill lab/ Tutorial on Approach with Patient Blood Transfusion complications by Prof Dr.Mohammad Ali**
11.30 Am to 12.30 pm	Tutorial on Approach to patient with Bleeding Disorders by Dr. Shabnam Rani	Mentor Session by Prof: Dr.A.Qadir Khan	Tutorial on Approach to patient with Lymphoma Prof Dr. Aslam Ghouri	Tutorial on Approach to patient with Upper GI Bleed Hematemesis by Prof Dr. Abdul Qadir Khan	**Alternate week Skill lab Small Group Learning Bedside/Topic By Prof Dr. Mohammad Ali**
12.30 To 2.00 pm	Small Group Learning Bedside/Topic Prof Dr.Iqbal Memon	OPD with Prof: Dr.A.Qadir Khan	Small Group Learning Bedside/Topic Dr. Faizan Qaisar & MENTORING	Small Group Learning Bedside/Topic By Prof Dr. Abdul Qadir Khan	**Small Group Learning Bedside/Topic By Prof Dr. Mohammad Ali**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 4.00 pm	Individual History and exam by sub groups as per allotted beds supervised by Postgraduate Dr.On Call	Individual History and exam by sub groups as per allotted beds supervised by postgraduate Dr. On Call	Individual History and exam by sub groups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by sub groups as per allotted beds supervised by postgraduate Dr.On Call	**Self-Directed Learning (SDL)**
4.00 Pm 5:00	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar, Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr.Hanif Khan/ On Call PG**

Prof Dr Abdul Qadir Khan, Chairman, Department of Medicine-MMCH

MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS
DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025
CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 04 / MODULE IV THEME: INFECTION DISEASES SUB THEME INFECTION DISEASES

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical Examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	**Students with postgraduates for learning history taking and physical examination**
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	Interactive lecture Rabies+ Malaria by Dr Iqbal Memon	Interactive lecture on COVID 19 By Dr Mahesh	Interactive lecture by Dr Aslam Ghouri on PUD	Interactive lecture on sepsis / Septic shock by Dr Nadeem Memon	**Interactive lecture on amebic liver abcess/ hydated cyst by Dr Muhammad Ali**
11.30 Am to 12.30 pm	Tutorial approach to the patient with Dengue and chicken guinea by Dr Shabnam	Approach to the pt with Lower GI bleeding by Dr Abdul Qadir khan	Tutorial approach to the patient by Dr Faizan Qaiser	Approach to the patient with CLD by Dr Abdul Qadir khan	**Skill lab, bedside with Dr Muhammad Ali**
12.30 To 2.00 pm	Small group, bedside by Dr Babita	OPD with Dr Abdul Qadir khan	Small group, bedside by Dr Rahid khan & MENTORING	Small group learning, bedside by Dr Abdul Qadir Khan	**Small group learning bedside with Dr Faizan**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 4.00 pm	Individual History and exam by sub groups as per allotted beds supervised by Postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	**Self-Directed Learning (SDL)**
4.00 Pm 5:00	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar, Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan/ On Call PG**

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MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS
DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025
CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 05 / MODULE V-THEME: MUSCULOSKELETAL SYSTEM-SUB THEME MUSCULOSKELETAL SYSTEM

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical Examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	**Students with postgraduates for learning history taking and physical examination**
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	Interactive lecture on SLE+ MCTD+ overlap syndrome by Dr Shabnam Rani	Interactive lecture on RA+ OA By Dr Mahesh	Interactive lectureon Osteoporosis + Osteomalacia by Dr Aslam Ghouri	Interactive lecture Gout, Psoriatic Arthritis by Dr Nadeem Memon	**Interactive lecture on Reactive Arthritis, Sclerosis, Sjogerns syndrome Dr Muhammad Ali**
11.30 Am to 12.30 pm	Tutorial approach to the patient with renal failure and Difference between CKD and AKI by Dr Babita	Approach to the pt with CLD by Dr Abdul Qadir khan	Small group, bedside learning by Prof Dr Fasih Hashmi	Approach to the patient with Ascites by Dr Abdul Qadir khan	**Tutorial approach to the pt With RA by Dr Muhammad Ali**
12.30 To 2.00 pm	Small group, bedside by Dr Khalid Shaikh	OPD with Dr Abdul Qadir khan	approach to the pt with osteoporosis and osteomalacia, by Dr Aslam Ghouri	Small group learning, bedside by Dr Faizan Qaiser / Dr Abdul Qadir Khan	**Small group learning bedside with Dr Faizan**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 4.00 pm	Individual History and exam by sub groups as per allotted beds supervised by Postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr. On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	**Self-Directed Learning (SDL)**
4.00 Pm 5:00	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan/ On Call PG**

Prof Dr Abdul Qadir Khan, Chairman, Department of Medicine-MMCH

MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS
DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025
CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 06 / MODULE VI-THEME: POISONING

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	**Students with postgraduates for learning history taking and physical examination**
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	Interactive lecture on Paracetamol poisoning by Dr Shabnam Rani	Interactive lecture on OPP / Black stone poisoning By Dr Mahesh	Interactive lectureon Snake Bite by Dr Aslam Ghouri	Interactive lecture Salicylate Poisoning by Dr Nadeem Memon	**Interactive lecture on Opiod Poisoning Dr Muhammad Ali**
11.30 Am to 12.30 pm	Tutorial approach to the patient with Nephrotic syndrome by Dr Babita	Approach to the pt with Diarrhea by Dr Abdul Qadir khan	Small group, bedside learning by Prof Dr Fasih Hashmi	Approach to the patient with PSE by Dr Abdul Qadir khan	**Tutorial approach to the pt With Corrosive poisoning by Dr Muhammad Ali**
12.30 To 2.00 pm	Small group, bedside by Dr Khalid Shaikh	OPD with Dr Abdul Qadir khan	Small group Bedside by Dr Rashid Khan	Small group learning on pt with liver abscess/ Hydiated cyst Dr Abdul Qadir Khan	**Small group learning bedside with Dr Faizan / Dr Sarwat Anjum**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 4.00 pm	Individual History and exam by subgroups as per allotted beds supervised by Postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by subgroups as per allotted beds supervised by postgraduate Dr.On Call	**Self-Directed Learning (SDL)**
4.00 Pm 5:00	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar, Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan/ On Call PG**

Prof Dr Abdul Qadir Khan, Chairman, Department of Medicine-MMCH

MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS

DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025

CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 07 / MODULE VII-THEME:ENDOCRINE AND METABOLIC DISEASES

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduates for learning history taking and physical examination	**Students with postgraduates for learning history taking and physical examination**
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	Interactive lecture on Diabetes and its complications by Dr khalid shaikh	Interactive lecture on Polygrandular failure By Dr Mahesh	Interactive lecture on Hypogonadism by Dr Aslam Ghouri	Interactive lecture on Hypoglycemia by Dr Nadeem Memon	**Interactive lecture on Dyslipidemia Dr Sarwat Anjum**
11.30 Am to 12.30 pm	Case PPT	Approach to the pt by Dr Babita	Small group, bedside learning by Prof Dr Fasih Hashmi	Approach to the patient by Dr Abdul Qadir khan	**Tutorial approach to the pt With DM and Complications by Dr Sarwat Anjum**
12.30 To 2.00 pm	Small group, bedside by Dr Nadeem Memon	Small group learning with Dr Abdul Qadir khan	Mentor Mentees Meeting	Small group learning /OPD By Dr Muneeba / Dr Faizan	**Small group learning with psychiatric illness with Dr Saleem Rashid**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 4.00 pm	Individual History and exam by sub groups as per allotted beds supervised by Postgraduate Dr.On Call	Individual History and exam by sub groups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by sub groups as per allotted beds supervised by postgraduate Dr.On Call	Individual History and exam by sub groups as per allotted beds supervised by postgraduate Dr.On Call	**Self-Directed Learning (SDL)**
4.00 Pm 5:00	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar, Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar,Dr.Hanif Khan/ On Call PG**

Prof Dr Abdul Qadir Khan, Chairman, Department of Medicine-MMCH

MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS

DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025

CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 08 / MODULE VIII-THEME:GENETIC AND GERIATRIC DISEASES

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with postgraduate degrees for learning history, taking and physical examination	Students with postgraduates for learning history taking and physical examination	Students with postgraduate degrees for learning history taking and physical examination	Students with postgraduate degrees for learning history, taking and physical examination	Students with postgraduate degrees for learning history taking and physical examination
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	Interactive lecture on Down's Syndrome, Kline Felter's syndrome by Dr Shabnam Rani	Interactive lecture on Marfan's Syndrome By Dr Mahesh	Interactive lecture on Health problem with elderly pt by Dr Aslam Ghouri	Interactive lecture on General principles of treating elderly by Dr Nadeem Memon	**Interactive lecture on patient safety, how to ensure by Dr Muhammad Ali**
11.30 Am to 12.30 pm	Case Presentation by Students	Posttest discussion with Dr Abdul Qadir khan	Small group, bedside learning by Prof Dr Fasih Hashmi	Approach to the patient by Dr Abdul Qadir khan	**Skill lab/ Workshop by Dr Muhammad Ali**
12.30 To 2.00 pm	Small group, bedside by Dr Khalid Shaikh	Small group learning with Dr Abdul Qadir khan	Small group Bedside by Dr Rashid Khan	**1:00 to 2:00 pm Mentoring Session**	**Short cases by Dr Nadeem Dr Faizan Dr Muneeba**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 5.00 pm	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan/ On Call PG**

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MUHAMMAD MEDICAL COLLEGE-MIRPURKHAS

DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025

CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 09 / MODULE IX-THEME:MULTISYSTEM CRITICAL CARE MEDICINE

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with SR Dr. Yawerl Durrani	Students with SR Dr. Saba Khan	Students with SR Dr. Yawerl Durrani	Students with SR Dr. Saba Khan	**Students with SR Dr. Yawerl Durrani**
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	Introductory lecture on Acute Pulmonary Edema Prof. Dr. Iqbal	IL on ARDS Dr. Mahesh Kumar	IL on Shock Dr. Nadeem Memon	IL on Heart Stroke Dr. Saba / Dr. Muneeba	**IL Review of Critical Care Medicine Prof. Dr. M.Ali / Dr. Mahesh Kumar**
11.30 Am to 12.30 pm	Case Presentation by Students Prof. Dr. Iqbal / Dr. Faizan / Dr. Nadeem	Bedside Teaching Prof. Dr. Abdul Qadir Khan	Bedside C.T. / T.B. / R.S. cases Prof. Dr. Iqbal / Dr.S.Fashi Hashmi	DSA / Hospital Posting	**Bedside / C.T. Dr. Saleem Rashid SR**
12.30 To 2.00 pm	Bedside / C.T. Prof. Dr. Khalid Shaikh	Post Test Discussion Dr. Mahesh Kumar	1–2 PM Mentoring Session	Bedside Teaching Dr. Khalid / Dr. Waleed Arshad	**Workshop Procedures Dr. Saba Khan**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 5.00 pm	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan/ On Call PG**

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DEPARTMENT OF MEDICINE -ROTATION-TIMETABLE FOR FINAL YEAR MBBS -ACADEMIC YEAR 2025

CURRICULUM: INTEGRATED MODULAR CURRICULUM- WEEK 10 / MODULE X-THEME:ONCOLOGY AND MISCELLANEOUS

Time	Monday	Tuesday	Wednesday	Thursday	Friday
8.30 to 9.30	Students with SR Dr. Yawer Durani	Students with SR Dr. Saba Khan	Students with SR Dr. Yawer Durani	Students with SR Dr. Saba Khan	**Students with SR Dr. Yawer Durani**
9.30 to 10.30	Attending ward rounds	Attending ward Rounds	Attending ward rounds	Attending ward rounds	**Attending ward Rounds**
10.30 to 11.30	IL on AML / ALL Prof. Dr. Iqbal Noman	IL on CML / CLL Dr. Mahesh Kumar	IL on Multiple Myeloma Dr. Nadeem Memon	IL on Vasculitis Dr. Saba Khan	**IL on Pulmonary HTN, Pulmonary Embolism Prof. Dr. M.Ali**
11.30 Am to 12.30 pm	Case Presentation Prof. Dr. Abdul Qadir Khan, Dr. Iqbal, Dr. Faizan	Bedside Teaching / Cases Prof. Dr. Abdul Qadir Khan	Bedside / CT Prof. Dr. Fashi Hashim Prof. Dr. Rashid Khan	DSA / Hospital Posting (11 AM – 12 PM)	**WARD EXIT TEST**
12.30 To 2.00 pm	Bedside / CT Dr. Mahesh / Teaching Topics	Post-Test Discussion Dr. Mahesh Kumar	1 – 2 PM Mentoring Session	Bedside Dr. Waleed Asad	**WARD EXIT TEST**
2.00 pm- 3.00 pm	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	Prayers and Lunch Break	**Prayers and Lunch Break**
3.00 Pm To 5.00 pm	**Weekly BCQ Test IT LAB**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan / On Call PG**	**Evening class by Dr. Mahesh Kumar, Dr. Hanif Khan/ On Call PG**

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ASSESSMENT

Students go through formative and summative assessments in their ward postings. Summative assessment is done at the end of the clinical posting. The students are assessed on

a) Written examination.
b) Clinical examination

Total=100 marks

a) Writtenexaminationconsistsof15BCQs (Total30marks)
b) Clinical examination (one long case40marksandone shortcase20marks)05marksonHistoriessubmission 05 marks on attendance

Studentshavingattendancelessthan75percent will not be allowed to sit in the ward test

BOOKS RECOMMENDED

MEDICINE

- Davidson's Principles and Practice of Medicine
- Kumar & Clark Clinical Medicine
- MacLeod's Clinical Examination
- Hutchison's Clinical Methods: An Integrated Approach to Clinical Practice, 25th

DEPARTMENT OF PAEDIATRICS

ACADEMIC SESSION 2024-25

DEPARTMENT OF PEDIATRIC MMC TEACHING FACULTY

S. No	Name
1.	Prof Dr M Hassan A Memon
2.	Prof Dr Ghulam Shabbir Laghari
3.	Dr Naheed Kazi
4.	Dr Akram Sheikh
5.	Dr Om Parkash
6.	Dr Bilawal
7.	Dr Faisal Nadeem

MISSION OF UNDERGRADUATE PEDIATRIC TRAINING:

To deliver excellence in teaching and learning and actively engage students to develop the minimum essential clinical knowledge, psychomotor skills, critical thinking decision making, and counseling and communication skills regarding the management of pediatric illnesses to ensure the delivery of safe patient care, keeping in mind the contextual needs of the community, and to deal with global healthcare challenges effectively.

RULES AND REGULATIONS:

1. Daily timings for pediatric posting is 8.30 to 3.00 pm, biometric (digital) and manual attendance both will be taken into account for this purpose.
2. 75% of class attendance is mandatory to appear in end of rotation test.
3. After 9.00 a.m. Students are considered to be late and three late coming will be count as one absent.
4. Attendance of all three sessions will be mandatory for attendance of the day
5. Evening calls will be assigned in groups for 3 hours/day either 3-6 pm or 5 to 8 pm as per their residence and availability conveyance facility.
6. Bed allotment of students will be done, and all students are supposed to follow their patients accordingly.
7. Formative assessment in form of end modular test/ TBL and WBA (Mini- Cex) will be taken multiple times throughout the rotation while summative assessment will be arranged for last 2-3 days of rotation (clinical examination & OSCE).
8. OPD timing will be strictly followed from 11.30 to 12.30 pm on respected days as per the task of the day whether outdoor or indoor.

Discipline-Specific Outcomes of Pediatric teaching (undergraduate).

At the end of the Paediatric clerk ship, the students should be able to:

1. **Take the appropriate history** of patients taking into consideration the age, birth history development, socioeconomic status, family, nutritional, and immunization aspects.
2. **Demonstrate Physical examination skill** that reflect consideration of clinical presentation and comfort according to age and development of child.
3. **Formulate problem list of active and chronic issues**, including a differential diagnosis of their paediatric presentations. A safe and patient-centred approach should be used for the diagnosis of major presenting problems encountered in paediatrics by using clinical reasoning skills based on the following:
    - Relevant basic and clinical science knowledge and Evidence-based medicine.
4. **Select the most appropriate investigation** relevant to each of the presenting clinical scenarios with justification for its selection
    - Septic screening
    - Metabolic workup
    - Screening test
    - Radiological investigation
5. **Develop a management plan** for each problem on the problem list, justify it, interpret data, and learn to identify and manage critical and acute paediatric illnesses.

    While presenting a management plan
    - Evidence-based recommendations should be considered.
    - Basic and clinical science concepts should be applied.
6. **Demonstrate proficiency in specific procedural skills.**
7. **Demonstrate practical communication skills with the patient's family.**
    - Establish rapport with children

- Counselling of patients regarding common paediatric presentations
- Communicate the result of paediatric history and physical examination in a well-organized, written and oral report.

8. Demonstrate collaboration with other team members as a part of a multidisciplinary team in caring for children. Work as a team in solving clinical problems as in Case Based Learning (CBLs) during the paediatric rotation.

9. Able to demonstrate professionalism. Professional behaviour in the form of:

- Punctuality
- Expresses awareness of emotional, personal, family, and cultural influences on patient well being
- Respectable and professional dressing, including wearing a white coat.
- Demonstration of respect and courtesy towards patients and classmates.

10. Ensure patient safety: The student should be aware of and practice the principles of patient safety, which include.

- Understanding and learning from errors
- Engaging with patients and caregivers
- Being an effective team player
- Practicing infection control
- Improving medication safety

11. Identify and access information/resources on evidence-based pediatric practice.

- Demonstrate continuous learning
- Participate in departmental Continuing Medical Education activities to update their knowledge.

PROGRAM

The 5th-year MBBS Pediatric clinical posting comprises 8-weeks of clinical rotation in pediatric department. Students go through the pediatric outpatient clinic, the EPI clinics, pediatric ward, pediatric ICU, and Neonatal ICU. TEACHING/LEARNING STRATEGY: During rotation, students will learn through

- Case-based learning
- Bedside clinical teaching sessions
- Flipped classrooms
- Seminars
- Role-play/role modelling
- Outpatient-based teaching
- Interactive lectures
- Working as a team with postgraduates and senior colleagues (house officers) during their evening postings, students also visit Emergency paediatric patients under the supervision of paediatric residents and then follow the patients from admission till discharge.

PAEDIATRICS 5th YEAR CLINICAL TEACHING SCHEDULE

TIME	ACTIVITY
08:30 to 09:30 am	Introduction of the task by lead facilitator and a brief description/demonstration on the topic
09:30 to 10:30 am	History Taking/bedside teaching
11:00 to 12.00 pm	Case-based learning/Interactive lecture

12:00 to 01:30 pm	Practical task and clinical examination demonstration by lead facilitators /OPD/clinical skills
1:45 to 3.00 pm	Summarization of the task, feedback and assignment for next day

- Case-based learning: Students present the history and examination of a patient, and then **the** differential diagnosis, investigations, and management is discussed in detail
- Bedside teaching: History taking, clinical examination, and counseling skills are taught and practiced at the bedside or at OPD as **a** task of the day
- Flipped Classroom: Students prepare for the class by going through study material provided in the form of PowerPoint presentations, articles, videos, case history or topic then they come to the classroom to solve cases, quizzes, practice problems and engage in teamwork.
- Seminar: Students present PowerPoint presentations in small groups of 3-4 students on assigned topics.
- EPI/OPD: Students go to **the** OPD and EPI Center in small groups to learn Vaccination and practice clinical skills, mainly focusing on IMNCI.
- Clinical skills: Students master their examination, procedural, and counseling skills. Interactive lectures: Small group discussions on specific topics, scenarios, or clinical cases to enhance the active participation of students.
- Assignments / Self Studies: Students participate in unsupervised group discussions where they discuss and research their assigned topics and also take follow-up notes of pediatric ward patients.

CPC organized by the Paediatrics Department:

1. Components of the EPI program, its success, and failure.
2. EENC and KMC when and where.
3. CMAM program's role in the prevention of malnutrition in children under 5.
4. Updates in asthma management in children.

Research projects:

1. To identify the risk factors for failure of immunization in children under one year.
2. To evaluate the risk factor of formal nutrition in children.
3. Reasonsforlackofexclusivebreastfeedingininfantsunder6months.
4. Association of pneumonia with malnutrition.

ASSESSMENT: Students go through formative and summative assessments **during the ten** weeks of clinical rotation.

Formative assessment:

Formative assessment focuses on learning and improvement of students by giving them specific tasks and providing them constructive feedback.

1. End Modular test: That will be taken after end of each module. Though that will be formative, but we will assign 5% weightage.
2. Structured Bedside Assessment: is a method of formative assessment in which groups of 4-5 students are observed while they perform clinical skills, followed by structured feedback. by facilitator and co facilitators.
3. TBL Team-based learning taken after some modules which are cognitively rich. Though that will be formative because feedback will be given but we will assign 5% weightage as well.

Summative Assessment: Summative assessment focuses on **the** cumulative evaluation of the student

learning. Its further divided into Continuous assessment and End of rotation test. 20% of the total marks are carried to the final year university-based assessment at the end of the course.

Marks assigned on Assessment:

Continuous assessment has 40% weightage, and it has the following components

- End module assessment 5X8=40
- TBL 5x2=10

Mandatory requirement to appear in the end rotation assessment:

- Attendance/punctuality during clinical posting, including Evening posting
- Logbook (history and daily work record)
- Submission of the assignment.
-

End of rotation test: 50%

- Students should submit a clinical Logbook at the end of their rotation in Pediatrics.
- 75%attendanceisrequiredtobeeligiblefortheend-of-rotationtest.
- In summative assessment, students will be examined for
- Short case and long case 20marks
- Ten stations of OSCE (static and interactive)10x3=30

COURSE CONTENT: DISTRIBUTED INTO 8 MODULES	
MODULE I: INTRODUCTION MODULE • Overview of Pediatric Medicine • Overview of growth and development • Pediatric history taking (inpatient) • Pediatric history taking and examination (outpatient) • Physical examination	**MODULE I NEONATOLOGY** • ENCC, HBB • Sick young infant (neonatal Sepsis) • Neonatal Jaundice • Prematurity with complications • Birth Asphyxia with complications • Breastfeeding counseling.
MODULE II PEDIATRIC INFECTIONS • EPI Program • EPI Disease • Non-EPI Diseases	**MODULE III NUTRITION** • Normal Nutrition/IYCF • CMAM/SAM • Micronutrient deficiency • Wasting/Obesity
MODULE IV BLOOD • Anemia: Nutritional & Hemoglobinopathies, Bone marrow aplasia • Bleeding: Hemophilia, ITP, Won Willebrand, • Leukemia, Lymphoma • Blood transfusion Protocols and reactions	**MODULE V NEUROPSYCHIATRY** • Brief introduction on development • CNS infections with complications • Epilepsy/Cerebral Palsy • Small/ large Head • ADHD/Autism

MODULE VI CARDIO/RESPIRATORY DISEASES

- Upper Airway disease: Croup, Epiglottitis, Foreign Body inhalation
- Lower Airway: Asthma, Pneumonia & TB cover in infections module
- X-ray Interpretation
- Poison and Shock will be covered in this session.
- Congenital Heart Disease: Cyanotic and Acyanotic CHD with complications.
- Rheumatic Heart Disease / Congestive cardiac Failure / Myocarditis
- Essential Hypertension

MODULE VII GIT & HEPATOLOGY	MODULE VIII RENAL & ENDO
• Acute diarrhea cover in infections • Chronic Diarrhea, Celiac and Cystic Fibrosis • Viral Hepatitis/ CLD and portal hypertension	• Nephrotic syndrome • AGN &Renal failure • UTI • CKD/Short stature • Thyroid Problem Diabetes Mellitus

APPENDIX (B) List of Mandatory Examination Skills

- Measure and interpret height, weight, and head circumference, calculate BMI and plot these readings on a growth chart.
- Measure and interpret vital signs
- Palpate for fontanels and suture lines
- Elicit primitive reflexes
- Palpate all pulses, including femoral
- Assess the lumbosacral spine
- Perform Developmental examination
- Performa thorough general physical examination
- Perform a thorough Systemic examination, including Abdominal, respiratory, central nervous system, and cardiovascular system examination.

LIST OF PROCEDURES: 1. **LEVEL:1 Able to perform under the direct supervision: 1a; on a mannequin 1b; on simulator** 2. **LEVEL:2 Able to perform under indirect supervision**	
PROCEDURE	**LEVEL**
Instruct patients in the use of devices for inhaled medication	2
Prepare and administer injectable (intramuscular, subcutaneous, intravenous) drugs	1
Prescribe and administer oxygen	2
Carry out intravenous cannulation	1
Carry out safe and appropriate blood transfusion	1
Carry out male and female urinary catheterization	1
Carry out nasogastric tube placement	1

Textbook

- Resource material for final year teaching:
- Nelson textbook of paediatrics, 22 editions
  - Nelson Essentials of Pediatrics
  - Current Diagnosis & Treatment Paediatrics, 23rd edition
  - Pakistan Paediatric Association textbook

- Illustrated Paediatrics by Tom Lissauer

WHO Publications and Society Guidelines:

- WHO publications on IMNCI
- GINA Guidelines, Global Strategy for Asthma Management and Prevention.
- WHO: Global Database on Child Growth and Malnutrition
- WHO publication on Tuberculosis
- Expanded Program on Immunization in Pakistan

Clinical Methods:

Macleod's Clinical Examination

Hutchison's Clinical Methods

DEPARTMENT OF PEDIATRICS MMC TEACHING SCHEDULE FINAL YEAR MBBS WEAK 1					
Day	**08.30-09.30 am**	**09:30–11:00 am**	**11.30–01:00 pm**	**01:00-02:00 pm**	**02:00-03:00 pm**
Monday	Pediatric history with importance of BIND and systemic inquiry	Practice on history taking in small groups under supervision of co facilitators	Growth and development Assessment Practical demonstration on patient.	Practice on history taking with assessment of growth and development	Summarization of today's task: **Home assignment** IMNCI an integrated and holistic approach
Tuesday	Introduction to IMNCI with demonstration on wall charts 02 months to 59months	History taking by students in groups: Integration of IMNCI	Practical demonstration by lead facilitator on the general physical examination on patient and CBD and feedback on indoor history	Practice on general physical examination in small groups under the supervision of co-facilitators	Summarization of today's task: Introduction to CRF 2month to 5 years (5mainsymtoms)
Wednesday	Practice on filling of CRF (2month -5 years) Check for general danger signs And 5 main symptoms	Practical demonstration on IMNCI strategy (Preventive components)	Practical demonstration on IMNCI strategy (Therapeutic components)	Practice on filling of CRF On five main symptoms at indoor (severe classification)	Summarization of today's task Home assignment for screen check for Malnutrition and palmar Pallor
Thursday	Practice on filling of CRF Demonstration and practice on the whole process at OPD/ indoor	First formative assessment on history, general physical examination and 2 months to 5 years IMNCI			Summarization of Today's task: Task for next session, Introduction ENCC Neonatal examination J2-J7 ENC
Friday	ENC Neonatal history and examination (neonatal recording form)	Practice on filling out Neonatal recording forms and taking neonatal history	Breastfeeding assessment: Feeding problems	Practical session on feeding problems and breastfeeding counseling	Summarization of today's task: Introduction IMNCI sick young infant module

DEPARTMENT OF PEDIATRICS MMC TEACHING SCHEDULE FINAL YEAR MBBS WEEK 2					
Day	**08.30-09.30 am**	**09:30–11:00 am**	**11.30–01:00 pm**	**01:00-2:00 pm**	**02:00-03:00 pm**
Monday	Brief introduction to sick young infants: Neonatal sepsis	Demonstration on neonatal examination, Practice on filling of CRF 0-2 months	SGD and CBD on a sick young infant and NNS	Check for HIV, IMNCI approach	Summarization of today's task Next day task: Neonatal jaundice, Difference in physiological and pathological jaundice CBD
Tuesday	Difference in physiological and pathological jaundice CBD	Practice on filling of CRF 0-2 months Followed by feedback	Birth Asphyxia, Neonatal Seizures	Demonstration on Neonatal resuscitation And Practice in Small groups	Summarization of today's task, Next day task Approach to a small baby & KMC
Wednesday	Practical approach to prematurity, its complications, and prevention	Practice on filling of CRF (0- 2month) Whole case approach at OPD	Practical session on feeding assessment and feeding counseling with role plays by the lead facilitator	Feeding history and breastfeeding assessment. Feeding counseling	Summarization of today's task: Revision of the module
Thursday	2nd Formative assessment on case recording form 0 - 2 months IMNCI, and TBL (Neonatology)				Nutrition in first1000 days Growth velocity charts, Nutritional statistics/ indicators
Friday	Nutrition in the first 1000 days, Growth velocity charts, Nutritional statistics/ indicators	Practice on history taking in small groups, **Nutritional history**	Practical demonstration on patients by lead facilitator on anthropometry: Height, weight, MUAC	Practice on IMNCI CRF Check for malnutrition	Summarization of today's task: Introduction to CMAM with four components

DEPARTMENT OF PEDIATRICS MMC TEACHING SCHEDULE FINAL YEAR MBBS WEEK 3					
Day	**08.30-09.30 am**	**09:30–11:00 am**	**11.30–01:00 pm**	**01:00-02:00 pm**	**02:00-03:00 pm**
Monday	Introduction CMAM	Practice on Screening by MUAC and Anthropometry	Practical demonstration by lead facilitator GPE on patient SAM child (Macro & micronutrients)	Practice on GPE in small groups under the supervision of co-facilitators Practice on filling of CCP form and daily care form	Summarization of today's task 10 step management of SAM
Tuesday	10-step management of SAM Demonstration on filling of CCP form	Case based discussion on SAM with complication	Outdoor visit of OTP OPT protocol	Indoor visit of NSC Short case evaluation in NSC essential task to be assessed on each student's nutritional assessment and GPE on SAM child (Mini CEX)	Summarization of today's task BFHI / IYCF key messages Responsive feeding and its importance
Wednesday	BFHI/IYCF key messages Responsive feeding and its importance	Practical session on Nutritional counseling with role plays	2nd Formative assessment SBQ, TBL and short assay on nutrition module		Approach to a child with CNS infections, febrile convulsions
Thursday	Introduction to CNS infections Approach to a child with CNS infections, febrile convulsions	Practice on history taking in small groups for CNS infections, Febrile convulsions	Practical demonstration on patient by lead facilitator for CNS examination	Practice on IMNCI CRF Check for Neck stiffness General danger signs And motor system examination	Summarization of today's work Next day task tutorial on childhood epilepsy
Friday	Introduction to epilepsy, Approach to a child with unprovoked convulsions with case scenarios	Practice on history taking and CNS examination Able to differentiate b/w UMNL/ LMNL	Presentation on AFP by lead facilitator CBD	Practice on CNS examination in small groups under supervision of co facilitators	Summarization of today's task. Next day session tutorial on cerebral Palsy

DEPARTMENT OF PEDIATRICS MMC TEACHING SCHEDULE FINAL YEAR MBBS WEAK 4					
Day	**08.30-09.30 am**	**09:30–11:00 am**	**11.30–01:00 pm**	**01:00-02:00 pm**	**02:00-03:00 pm**
Monday	Introduction to Cerebral Palsy, etiology, presentation, and Management	History taking and examination of a child with cerebral palsy and developmental assessment	Visit to the Rehabilitation center with Demonstration of clinical signs on the patient by the lead Facilitator, and Developmental Assessment	Approach to a child with Behavioral disorders (ADHD and ASD)	Summarization of Today's task: Next day session tutorial on ADHS & ASD
Tuesday	Case based Discussion and video demonstration on ASD	Short case Examination motor system Developmental assessment SOMI/gait assessment	SBQ, TBL, and short essay on the Neuropsychiatric Module		
Wednesday	Acute watery diarrhea and dysentery classificationof dehydration and it's management	Practice on history taking in small groups Hydration Status and its management according to IMNCI	Practical demonstration on patient by lead facilitator On hydration Status and Shock and Plan C Management	Practice on filling of CRF of IMNCI 02 month to 05 years age and counseling to patients with diarrhea	Summarization of today's task Next day session chronic diarrhea tutorial (CBD)
Thursday	Chronic diarrhea Causes and management case scenarios followed by CBD	Clinical approach to a child with chronic diarrhea. Celiac disease and other	GPE, demonstration of Signs of macro and micronutrients deficiency on malnourished child (SAM	Mini Cex on GIT and Short case examination (abdominal examination with visceromegaly) Case of CLD or Celiac disease	Summarization of today's task Next day session tutorial on viral Hepatitis and CLD(CBD)
Friday	Acute viral hepatitis (A, B, C E) case scenarios followed by CBD	Clinical Approach to a child with CLD Cas based discussion o CLD and its complications	Long case assessment on SAM child or CLD child followed by feedback	SBQ, TBL and short essay on GIT, Hepatobiliary	

DEPARTMENT OF PEDIATRICS MMC TEACHING SCHEDULE FINAL YEAR MBBS WEAK 5					
Day	**08.30-09.30 am**	**09:30–11:00 am**	**11.30–01:00 pm**	**01:00-02:00 pm**	**02:00-03:00 pm**
Monday	Paediatric history with the importance of BIND and systemic inquiry	Practice on history taking in small groups under the supervision of co-facilitators	Growth and development Assessment Practical demonstration on a patient by lead facilitator	Practice on history taking with assessment of growth and development	Summarization of Today's task: **Home assignment** IMNCI an integrated and a holistic approach
Tuesday	Introduction to IMNCI with demonstration on wall charts, 02 months to 59 months	History taking by students in groups: Integration of IMNCI	Practical demonstration by the lead facilitator on general physical examination on patient and the CBD, and feedback on indoor history	Practice general physical examination in small groups under the supervision of co-facilitators	Summarization of today's task: Introduction to CRF 2 month to 5 years (5 main symptoms)
Wednesday	Practice on filling of CRF (2month - 5 years) Check for general danger signs and 5 main symptoms	Practical demonstration on IMNCI strategy (Preventive components)	Practical demonstration on IMNCI strategy (Therapeutic components)	Practice on filling of CRF On five main symptoms at indoor(severe classification)	Summarization of today's task Home assignment for screen check for Malnutrition and palmar Pallor
Thursday	Practice on filling of CRF Demonstration and practice on whole process at OPD/ indoor	First formative assessment on history, general physical examination and 2months to 5 years IMNCI			Summarization of today's task. Task for next session: Introduction to infectious disease in children
Friday	Immunization	Interactive lecture on Immunization (EPI Centre)	CBL (vaccines and side effects) Schedule	Fever IMNCI Malaria Check for Immunization	Approach to a child with fever and body rashes: Measles/Chicken pox/Dengue/Rubella

DEPARTMENT OF PEDIATRICS MMC TEACHING SCHEDULE FINAL YEAR MBBS WEAK 6						
Day	**Theme**	**08.30-9.30 am**	**9.30-11.00 am**	**11.30 am-12.30 pm**	**12.30-02.00 pm**	**02.00-2.30 pm**
Monday	Fever with cough	Interactive lecture on the Approach to Cough Tuberculosis and HIV	Short case on GPE and Chest examination	CBL (Pneumonia and Pertussis)	CBD on the diagnosis of TB in children	Summarization and assignment
Tuesday	Fever with focus	Approach with throat and Ear	Practice patients with CRF on filling	CBL (Diphtheria and Mumps	Long case assessment	Summarization and assignment: Malaria & Typhoid guideline
Wednesday	Fever without focus	Approach and Malaria and Typhoid CBL	Practice on Patients, history taking, and Examination	Rabies with pre and post exposure vaccination	Tetanus treatment and prevention	Summarization and assignment For the next module
Thursday	**Assessment of whole module (Mini-CEX(short cases, SBQs.**					
Friday	Pallor	Interactive lecture on Approach to child with Anemia (Nutritional Anemia & Thalassemia)	Practice on patient by history taking and focused examination (GPE & Hepatosplenic eagle)	Case presentation by students and discussion	Data interpretation CBC interpretation, Hb Electrophoresis PBL in small groups	Summarization and assignment On Blood Transfusion in children: Indications &complications

Department of Pediatrics MMC Teaching Schedule Final Year MBBS Week 7						
Day	**Theme**	**08:30 am to 9:30 am**	**09:30 am to 11:00 am**	**11:30 am-1230 pm**	**12:30 pm to 02:00 pm**	**02:00 pm-02:30 pm**
Monday	Bleeding disorder in children, Group discussion on Pediatric malignancies	Hands-on demonstration on transfusion procedure and discussion	Interactive lecture on the approach to children with Bleeding disorders in children. Hemophilia, ITP, Von Willebrand disease	Practice on patients: history taking and rashes on the body.	CBL, data interpretation, and discussion Q&A	Summarization and assignment On common hematological malignancies
Tuesday	Case based discussion on Fever, Pallor And, Lymphadenopathy	Approach to a child with Fever, pallor, and Lymphadenopathy	**Assessment of the whole module (Mini-CEX, short cases, Long case SBQs.**			Summarization of whole module and feedback
Wednesday	Cough & Difficult Breathing	Interactive lect on Common Respiratory Conditions Upp and Lower Air way Obstruction	History taking and examination on patients with Bronchiolitis, Asthma or cystic fibrosis	CBD on patients with respiratory emergencies : Anaphylaxis, Foreign Body Inhalation, Epiglottitis and Croup	Practical demonstration n on patients with use of nebulizer &Inhaler	Summarization and assignment Oxygen therapy in Children
Thursday	Difficult breathing	Live session on oxygen therapy in children case-based Discussion	Interactive session on X-ray chest interpretation & correlation with clinical findings	Interactive discussion on Approach to children with CCF	Practice on Patient by history taking and precordial examination in a small groups	Summarization and assignment on Rheumatic fever and RHD
Friday	Recurrent Difficult Breathing	Approach to child with congenital heart disease	Case-based discussion on diagnosis and management of cyanotic and Acyanotic Heart disease	Short c ase & OSCE assessment and module test	Summarization of the module and feedback Assignment on common poisons in children and management . (SDL)	

DEPARTMENT OF PEDIATRICS MMC TEACHING SCHEDULE FINAL YEAR MBBS WEAK 8					
Day	**08:30-9:30 am**	**09:30-11:00 am**	**11:30 am-12.30 pm**	**12:30-02:00 pm**	**02:00-02:30 pm**
Monday	Approach to a child with Proteinuria & hematuria interactive lecture	Practice on Patients for history taking & examination	Interpretation of Labs/CBD On AGN, Nephrotic syndrome	Practical demonstration on catheterization, fluid balance and management	Summarization & Assignment on Urinary Tract
Tuesday	Case base Discussion on pyelonephritis Cystitis Practical demonstration on collection of urine culture	Approach to a child with Renal failure Acute and chronic	Practice on a patient for history taking and examination	Practice on labs and management case-based discussion in a small group	Summarization & Assignment on Obesity
Wednesday	Approach to short stature: Interactive session	Practice on patient for history taking and examination	Practical demonstration on anthropometry and plot on centiles and labs in OPD	Approach to child with hypothyroidism interactive session with discussion	Summarization of Hyperthyroidism in children
Thursday	Case-Based Discussion on Hyperthyroidism in Children	Interactive lecture on Diabetes Mellitus in children	Practice on patient history taking and examination in OPD	Demonstration: Insulin types and techniques. Discussion on complications and counseling of Nutrition	Summarization & Assignment on Obesity in Children
Friday	Case-based discussion on Obesity	Assessment SBQs OSCE, and Modular test			Summarization & Feedback

In every rotation student will conduct the CPC and present a research project.
Participation in research projects and CPCs is mandatory.

DEPARTMENT OF
GYNAECOLOGY AND OBSTETRICS

ACADEMIC SESSION 2024-25

Introduction:

A study guide encourages effective study skills and self-directed lifelong learning. Study guide is like a 24/7 tutor sitting on the students‟ shoulder to advise them on what they should be doing at any stage in their study. The study guide is an important tool in the educational process because of information overload, curriculum change, spiral curriculum, distance learning, work-based learning and self-directed learning. The study guides are usually made to direct the students toward a pathway that dictates completion of syllabus through integrated curriculum. It is a time bound document which facilitate timely completion of proposed curriculum, and anyone can identify at any time what is to be taught in which part of academic year. A preloaded document that ensures how and when to complete the part of curriculum. This helps the need for documentation and prevents information overload. These are helpful to students to manage their own learning. These are helpful in planning for excellence awards to be achieved in a competitive environment. These can be used for distance learning, curriculum maintenance and curriculum dissemination. The benefits of study guide are:

- It helps in incorporating integrated programs.
- It facilitates students' interaction with the curriculum.
- Provides a framework for learning. It ensures uniformity
- Record of students' work can be obtained, Helps inculcating self-study skills
- It prepares the student for examinations It presents content related to the subject. It provides knowledge about the content Reading is the only activity required

Rationale:

Since doctors are concerned with community health that makes it necessary to acquire knowledge and skills to impart health care to make a 7 Seven Star doctor who has to be a care provider, good communicator, decision maker, community leader, manager, researcher, and professional he has to be guided through a system that can impart all these competencies. This requires orientation and introduction to medical sciences in relation to health and disease. These guidelines will help the doctor to become a successful healthcare leader and ethical doctor of tomorrow. Female genital tract and diseases related to the reproductive system are very important and gaining attention constantly and have been incorporated in millennium development goals as well. The diseases related to the genital tract are core teaching in this module. There are 7 modules of Gynecology that make up the major portion of genital tract disorders. Themes are further have multiple clinical conditions. Table of specification of each clinical condition are made accordingly. There is a separate portion for obstetrics as well consisting of 13 modules.

Integrated modular curriculum for the subject Gynecology Obstetrics of final year. MBBS is divided into 20 modules related to 13 modules related to Obstetrics and 7 modules related to Gynecology distributed among different senior teachers.

Each module will be further broken into academic teaching utilizing the resources and considering the limitations. It includes lectures, ward teachings, OT and OPD attendance, skill lab teaching, presentation

by the students, workshops, research and mentoring meetings.

An integrated curriculum is designed to enhance learning by connecting theoretical knowledge with practical application. In contrast to traditional method, an integrated approach promotes a meaningful understanding of concepts by integrating basic science with clinical practice.
Integrated approach is consistent with global trends in medical education, with an emphasis on systems-based and competency-based learning to prepare students for real-world healthcare.

Integrated curriculum allows students to relate principles of anatomy, physiology, pathology, and pharmacology to clinical scenarios. This comprehensive framework not only enhances understanding but also improves clinical reasoning, decision-making, and problem-solving skills. By incorporating active learning methods, such as case- based discussions, simulation exercises, and interdisciplinary teamwork, students are equipped to address comprehensive patient care.

Curriculum also emphasizes professionalism, ethical consideration, and effective communication, preparing students to provide empathetic, patient-centered care. It also promotes self-directed learning, required for thriving in a rapidly changing medical education. Thus, the integrated approach ensures that future doctors are competent, confident, and prepared to meet the challenges of healthcare delivery. Rationale:

Integrated curriculum in Gynecology and Obstetrics for undergraduates (Final year MBBS) is essential as this is the critical phase in preparing students for their roles as competent medical professionals. By integrating anatomy, physiology, pathology, and radiology with clinical practice, students gain ability to correlate theoretical knowledge with real-life patient management. This approach enhances their diagnostic decision-making skills while preparing them to address complex clinical scenarios in a multidisciplinary healthcare setting. Additionally, integrating procedural skills and evidence-based medicine ensures that students are equipped for the needs of obstetrical and gynecological practice, from preoperative assessment to postoperative care. Antenatal care, intrapartum and postpartum care.

Curriculum also emphasizes professionalism, ethical decision-making, and effective communication, which are critical components of patient-centred care. Teamwork and interdisciplinary collaboration exposure prepares students for real-world challenges, promoting holistic care. Curriculum not only enhances clinical competence but also instils lifelong learning habits. Ultimately, an integrated OBG curriculum. This curriculum will ensure that graduating students are ready to transition into their roles as capable healthcare professionals.

Learning Objectives:

At the end of the Integrated Curriculum of Gynaecology and Obstetrics, students will be able to:
Cognitive Objectives:

- Demonstrate in-depth knowledge of anatomy, physiology, pathology and clinical features of Gynaecology and Obstetrics problems and integrate this knowledge into patient care.
- Conduct detailed histories and physical examination, interpret relevant diagnostic tests, and make accurate diagnoses of common OBG conditions.
- Demonstrate in depth understanding of the indications, contraindications of common

surgical procedures related to Obstetrics and Gynaecology.

- Integrate basic scientific and clinical knowledge for the management of obstetrical patients and newborn care.
- Provide Obstetrical care and Gynaecology care. Deals efficiently obstetrical and gynaecological emergencies, including normal labour, APH, PPH, medical disorders (eclampsia, anemic failure, preterm labour, in pregnancy, Pepsis, shock (ectopic, miscarriage molar pregnancy and acute OBG conditions, with an emphasis on timely interventions and stabilization of patient and fetus and new-born.
- Anticipate, recognize, and manage postoperative complications, including infections, bleeding, and thromboembolic events.
- Learn to engage in modern diagnostic tools, minimally invasive techniques and surgical innovations related to Obstetrics and Gynaecology to improve patient care.
- Should be able to counsel the woman and her attendant about the nature of clinical problem with reasonable communication skills.
- Can identify high-risk cases for referral to senior gynaecologists & be able to provide initial life-saving measures in an emergency before referring to a tertiary care hospital.
- Shall be able to practice ethically and can follow principles of safe and value- b a s e d community health services focusing on the wellness of women.
- Shall present a summary of at least one assigned case to a faculty member during a ward round. (CBL)
- Observe communication between doctor and patient, including explanation of the condition, treatment options, and complications of treatment.
- Suggest a management plan for the patient.
- Observe the following:
  Pelvic ultrasound scan, Hysteroscopy, Diagnostic laparoscopy, Endometrial sampling
  Perform a cervical smear (model/patient).
- Explain the significance of cervical smear results and appropriate management.
- Attend a family planning clinic.
- Attend a genitourinary clinic.

Psychomotor Objectives:

Perform basic surgical skills under supervision, including basic procedures such as normal vaginal delivery, instrumental delivery, wound dressing, catheterization, intravenous cannulation, passing nasogastric tubes, suturing, assisting in minor obstetrical and gynaecological procedures and basic life support related to mother and newborn.

Affective Domain Objectives:

1. Apply principles of patient safety, sterility, infection control, and surgical ethics to clinical practice.
2. Provide compassionate, respectful and culturally appropriate care, and communicate effectively with patients and their families.
3. Work effectively within multidisciplinary teams, coordinating with pediatrician anesthesiologists, radiologists, and other healthcare professionals to improve patient

outcomes.

4. Recognize the role of OBG practice in public health and low-resource settings, emphasizing preventive and cost-effective care.
5. Engage in self-directed learning and participate in clinical research to stay abreast of OBG advances.
6. Advocate professional values, ethical principles, and commitment to continuous improvement in patient care.

<table>
<tr><td colspan="2">CONTEXTUAL PALN OF GYNEA & OBS DEPARTMENT AT MMCH</td></tr>
<tr><td colspan="2">Following is the OBG developed plan. It includes everything that LUMHS has planned. However, keeping in view of our situation and strengths, the following changes are incorporated contextually:
➢ Instead of dividing the modules into OBG units, I have divided them among senior teachers.
➢ Weekly survive test with 10 MCQs of OBG (the other 3 departments will answer 10 MCQs of their subjects) will be held at 4 pm on Monday. Students will need to write an assignment, too. Post Test Discussion, assignments will continue.
➢ The OBGYN case presentation or topic will be held once a week by a group of 4 to 5 students
➢ On Wednesday, all students of the final year will be meeting with their assigned mentors between 1 pm and 2 pm (students will go to meet their mentors, wherever mentors are stationed, and both will fill out the Weekly report of mentoring). We will include a weekly report of mentoring for 10 weeks. The students' Progress book will include a section for 40 weeks of structured reporting of mentoring. Each week will include students' attendance, academic performance, including survive results, comments by Mentor, and comments by Mentee.
➢ Once a week, on Tuesday, students posted in the gynae ward attend clinical teaching in the city branch of MMCH.
➢ Every 5th Thursday, there will be a mid-term exam consisting of MCQs, OSCE, and long cases. Every 10th Friday, there will be an end-of-term examination covering the whole syllabus. If a holiday falls on these days, the days may be adjusted.</td></tr>
<tr><td colspan="2">COURSE CONTENT OF OBSTETRICS MODULES: DISTRIBUTED INTO 13 MODULES</td></tr>
<tr><td><u>MODULE – 01 BASIC CLINICAL SKILLS</u>:
Learning Outcome:
By the end of this module, students will be able to understand and demonstrate adequate knowledge, skills, and attitudes in relation to history taking, general physical and systemic examination, suggesting relevant investigations, appropriate procedural and communication skills in Obstetrics</td><td><u>MODULE – 02 PHYSIOLOGY OF PREGNANCY:</u>

Learning Outcome:
By the end of this module, students will be able to understand and demonstrate adequate knowledge, skills (Application), and attitudes in relation to the physiology of pregnancy
Re-Call:</td></tr>
</table>

MODULE III: ANATOMY OF FETAL SKULL AND MATERNAL BONY PELVIS Learning Outcome: By the end of this module, students will be able to understand and demonstrate adequate knowledge, skills, and attitudes in relation: Re-Call:	**MODULE IV NORMAL PREGNANCY** Learning Outcome: By the end of this module, students will be able to understand and demonstrate adequate knowledge, skills, and attitudes in relation to antenatal care in low-risk pregnancy and the appropriate modification to antenatal care
MODULE – V HIGH RISK PREGNANCY Learning Outcome: By the end of this module, students will be able to understand and demonstrate adequate knowledge, skills, and attitudes in relation to recognition of the high-risk pregnancy and the appropriate modification to antenatal care:	**MODULE – VI MISCELLANEOUS MEDICAL DISORDERS IN PREGNANCY** Learning Outcome: By the end of this module, students will be able to understand and demonstrate adequate knowledge, skills and attitudes in relation to the effect of pre-existing medical conditions on pregnancy and the effect of pregnancy on these conditions
MODULE – VII PERINATAL INFECTIONS Learning Outcome: By the end of this module, students will be able to demonstrate an understanding of the etiologic, risk factors for, risks, and management of the perinatal infections.	**MODULE – VIII ABNORMAL PREGNANCY** Learning Outcome: By the end of this module, students will be able to demonstrate an understanding of the etiology, risk factors for, risks and management of the major antenatal complications of pregnancy
MODULE IX NORMAL LABOR Learning Outcome: By the end of this module, students will be able to understand and demonstrate appropriate knowledge, skills, and attitudes in relation to labour Normal Labor·	**MODULE – 10 ABNORMAL LABOR** Learning Outcome: By the end of this module, students will be able to understand and demonstrate appropriate knowledge, skills, and attitudes in relation to abnormal labor
MODULE – 11 PUERPERIUM Learning Outcome: By the end of this module, students will be able to demonstrate an understanding of the normal and post-partum period	**MODULE – 12 NEWBORN CARE** Learning Outcome: By the end of this module, students will be able to demonstrate an understanding of essential newborn care and common neonatal problems and their management
MODULE – 13 ETHICS IN OBSTETRICS PRACTICE Learning Outcome: By the end of this module, students will be able to understand and demonstrate adequate knowledge, skills, and attitudes in relation to ethics and legal issues in Obstetrics: Ethics and Legal Issues in Obstetrics	

GYNAECOLOGY MODULES

MODULE – 14 GYNEACOLOGY MODULE

LEARNING OUTCOME: By the end of this module, students will be able to understand and demonstrate Adequate knowledge, skills, and attitudes in relation to history taking, Examination, investigation, and common gynaecological problems in the Community:

- Introduction, gynaecological history taking
- Clinical examination by video
- Anatomy of the female genital tract
- Development of the female genital tract
- Puberty and adolescence
- Ovulation and its legal importance
- Physiology of the menstrual cycle
- Menstrual disorders
- Abnormal menstruation
- Amenorrhea
- Primary amenorrhea
- Secondary amenorrhea
- Polycystic ovarian disease
- Hirsutism/virilism

MODULE 15 SUB FERTILITY AND EARLY PREGNANCY LOSS

LEARNING OUTCOME: By the end of this module, students will be able to

Understanding of the common causes, investigations, and management of subfertility and early pregnancy loss:

- **Sub-fertility**
- Early pregnancy loss
- Abortion
- Ectopic pregnancy
- Gestational trophoblastic disease
- Endometriosis and Adenomyosis

MODULE – 16. SEXUAL AND REPRODUCTIVE HEALTH

Learning Outcome:
By the end of this module, students will be able to understand and demonstrate

- Adequate knowledge, skills, and attitudes in relation to fertility control (Contraception and termination of pregnancy),
- The diagnosis and management of Sexually transmitted infections (including HIV), Sexual dysfunction
- Menopause and HRT.
- Introducing the sexual history taking
- Contraception and sterilization
- Infections of female genital tract
- Management of lower abdominal pain
- Acute pelvic inflammatory disease (PID)
- Chronic PID

MODULE – 17 UROGYNAECOLOGY AND PELVIC FLOOR PROBLEMS

Learning Outcome:
By the end of this module, students will be able to understand and demonstrate Adequate knowledge, skills, and attitudes in relation to incontinence and prolapse:

- Utero vaginal prolapse
- Urinary incontinence
- Stress incontinence
- Urge incontinence
- Urinary frequency
- Urinary tract infections
- Urinary fistulae

• Sexually transmitted infections (STIs) including HIV/AID Screening and Management Prevention of STIs • Iatrogenic infections of the female reproductive tract • Reproductive tract infection in males • Awareness of psycho sexual problems • Vaginal discharge	
MODULE – 18 GYNECOLOGICAL ONCOLOGY Learning Outcome: By the end of this module, students will be able to understand and demonstrate Adequate knowledge, skills and attitudes in relation to Gynaecology Oncology: • Conditions affecting the vulva and vagina • Benign conditions of the vulva • VIN and invasive vulval carcinoma • Benign conditions of the vagina • VIAN and vaginal carcinoma • Condition affecting the cervix, uterus, ovarian and fallopian tubes • Benign conditions of the cervix • CIN and invasive carcinoma of the cervix • Benign conditions of the uterus • Malignant disease of the uterus • Benign tumour of the ovaries • Cancer of the ovaries • Cancer of the fallopian tubes • Chemotherapy for gynaecological cancers and GTDs, and radiotherapy	**MODULE – 19 COMMON GYNECOLOGICAL OPERATIONS** Learning Outcome: By the end of this module, students will be able to understand and demonstrate Adequate knowledge, skills, and attitudes in relation to common gynaecological Procedures, preoperative and postoperative management: • Common gynaecological procedures • Hysteroscopy • Laparoscopy • Cystoscopy • Dilatation and curettage • Abdominal and vaginal hysterectomy • Myomectomy • Preoperative preparations • Postoperative complications and their management
MODULE – 20 Ethics in Gynecology Learning Outcome: By the end of this module, students will be able to understand and demonstrate Adequate knowledge, skills, and attitudes in relation to ethics and legal issues in Gynaecology: • Litigation and consents • Ethics and reproductive health	

TOPICS FOR TUTORIAL WEEK 1				
Date	**Teachers**	**Topics**	**Workshop**	**Assignment**

	name			
27-1-25	Dr Yasmeen	Introduction to Gynae history, examination and relevant investigation		Gynae Hx
28-1-25	Dr Qamar	Introduction to OBS history, examination and relevant investigation	Obstetrical examination	
29-1-25	Dr Shazia	Essential drugs and immunization in pregnancy		
30-1-25	Dr Hemlata	Diagnosis of pregnancy, conception, implantation, development of placentae, and physiological changes of pregnancy		
31-1-25	Dr Bushra	Prenatal diagnosis		Prenatal diagnosis

TOPICS FOR TUTORIAL WEEK 2			
DATE	**TEACHERS NAME**	**TOPICS**	**WORKSHOP / ASSIGNMENT**
3-2-25	Dr. Madhu Bala	Fetal skull and maternal pelvis (workshop)	Fetal skull and maternal pelvis Workshop
4-2-25	Dr Asma	Normal Pregnancy +ANC(low and risk)	Assignment
5-2-25	Dr Farkhunda	Imaging ultrasound all three trimester	
6-2-25	Dr. Shazia	Haematological disorders of pregnancy, including Anaemia in pregnancy Thrombocytopenia and thrombophilia Coagulation and fibrinolytic disorders	Assignment
7-2-25	Dr. Bushra	IUGR and fetal monitoring	

TOPICS FOR TUTORIAL WEEK 3			
Day	Teacher	Topic	Assignment/workshop
Monday	Dr Yasmeen	Prolonged pregnancy and Multiple pregnancy	
Tuesday	Dr Qamar Habib	Diabetes in pregnancy	Assignment
Wednesday	Dr Shazia	Liver diseases in pregnancy·	

Thursday	Dr Hemlata	Hypertensive disorders of pregnancy: PIH, Pre-eclampsia, Eclampsia, Essential HTN, Chronic renal diseases. Cardiac diseases in pregnancy	Assignment
Friday	Dr Bushra	ISO immunization	

TOPICS FOR TUTORIAL WEEK 4			
DAY	**TEACHER**	**TOPIC**	**ASSIGNMENT/WORKSHOP**
Monday	Dr Madhubala	Epilepsy Migraine Thyroid diseases	
Tuesday	Dr Asma	Respiratory disorders, Autoimmune disease	
Wednesday	Dr Shazia	Perinatal infections: Chlamydia, Gonorrhoea, Trichomoniasis, Genital warts, HIV, AIDS	
Thursday	Dr Farkhunda	Perinatal infections: Syphilis· Toxoplasmosis Cytomegalovirus Rubella Varicella zoster, Malaria, Urinary tract infection Bacterial infections, Herpes simplex viral infections	Assignment
Friday	Dr Bushra	Antepartum haemorrhage, Placenta previa, Abruptio placentae Vasa previa	Assignment
TOPICS FOR TUTORIAL WEEK 5			
DAY	**TEACHER**	**TOPIC**	**ASSIGNMENT/WORKSHOP**
Monday	Dr Yasmeen	Intra uterine fetal death Polyhydroamnios / oligohydroamnios·	
Tuesday	Dr Qamar	Mal-presentation and position Breech presentation Transverse lie and shoulder presentation Face presentation Brow presentation Cord prolapsed	Assignment
Wednesday	Dr Shazia	Physiology, Mechanism, Diagnosis, Management of labor, Structure and use of partograph. Intra partum fetal monitoring Fetal heart rate monitoring. Fetal scalp sampling	Assignment
Thursday	Dr Hemlata	Methods of induction and augmentation of labor Indications,	

		Contraindications, Complications. Analgesia and anesthesia. Management of 3rd stage of labor	
Friday	Dr Bushra	Antepartum haemorrhage, Placenta previa, Abruptio placentae Vasa previa	Assignment

TOPICS FOR TUTORIAL WEEK 6			
DAY	**TEACHER**	**TOPIC**	**ASSIGNMENT/WORKSHOP**
Monday	Dr Madhubala	Episiotomy Perineal trauma, and Caesarean section	
Tuesday	Dr Asma	Prolonged labour· Causes, Management Obstructed labour, ruptured uterus Causes	Assignment
Wednesday	Dr Shazia	Management Complications of the 3rd stage of labour· PPH (Primary & Secondary) workshop, Causes Management Uterine inversion·	Assignment
Thursday	Dr Furkhunda	Normal Puerperium· Physiological changes Abnormal Puerperium· Puerperal disorders Puerperal pyrexia the breasts and breast disorders· Contraception· Maternal and Perinatal mortality·	
Friday	Dr Bushra	Essential newborn care Observe the immediate assessment, apgar score and resuscitation of newborn· care Breast feeding and its importance· Neonatal problems·	Assignment

Meeting with Mentors every Wednesday: 1pm-2 pm (students will meet their mentors, wherever mentors are stationed, both will fill the Weekly report of mentoring). We will include a weekly report of mentoring for 10 weeks. Students' Progress book will include a section for 40 weeks of structured reporting of mentoring. Each week will include students' attendance, academic performance, including survey results, comments by Mentor, and comments by Mentee.

Names of workshops conducted will be:

1. Maternal resuscitation
2. PPH management
3. Assisted Vaginal Delivery: Vacuum/Forceps
4. **CTG**
5. Breech Presentation
6. Contraception
7. Shoulder Dystocia
8. Pap smear
9. Hysterosalpingography
10. Maternal Pelvis and Fetal Skull
11. Mechanism of Labour

Mentorship:

Mentor will check and grade as:

1. Attendance (will be marked by biomedical devices in ward during morning 8:30 am and afternoon (2.30pm) and in Survive, on paper in workshop at SDC, Laboratory, Radiology and OPD.
    - Excellent- 90-100%Good 80-89%
    - Acceptable 75-79
    - Need improvement 65-74
    - Poor . Parents need to take action Less than 65%.
1. Academic performance so far e.g marks secured in Survive and in assignments.
2. Any presentation,
3. Progress in research,
4. Any disciplinary problem(s).
5. Comments by the mentor.
6. Workshops attended
7. Comments by the mentee.

Prof. Qamar Un Nisa requested to include weekly mentoring comments in the gradebook. Each page should cover two weeks. Hence, an addition of 10 leaves (20 pages) will be required with the above headings in the gradebooks.

I expect the examination department to participate in the assessment process throughout the year.

Assessment (Midterm and End of term):

On Thursday of week 5, a mid-session assessment will be held. Marks will be distributed as follows: On Friday of 10 week final term will be held

1. A WhatsApp group of parents & teachers will be formed where the progress of students will be shared. Only teachers will be able to post. Parents will be encouraged to make appointments through the Chairpersons of subjects to
   discuss their wards' progress.
2. On Friday of week 10, an end-of-term mentoring session and a final test will be conducted, including
3. MCQs- total of 25, 2 marks for each, 50 marks
4. OSCEs (10 interactive stations-5 marks each)-50 marks
5. Long case-50 marks,
6. Mentoring process-50 marks
7. Attendance-50 marks
8. Survive Score (week 5-10)- 50
9. Survive assignment (including PD) (week 5-10) 50
10. Workshops attended-10 marks
11. History/examinations Journal (2 marks for each history & examinations) total 10 marks
12. Participated in weekly presentation- 10 marks
13. Portfolio- 10 marks
14. Research project completed- 10 marks

Total 400 marks.
This will be shared in the WhatsApp group of parents.
For the internal assessment of the final year, the marks distribution will be as follows:

- 200 marks from the mid-term (50% of marks scored)
- 400 marks from end of term examination.
- Total-600 marks.
- Final marks in the internal assessment will be 10% of the marks obtained here.