

BAHAWALPUR MEDICAL COLLEGE (BMC) BAHAWALPUR





STUDY GUIDE BLOCK-3-FIRST YEAR MBBS 2K23 CRRICULUM CVS & RESPIRATORY 2023-2027

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LIST OF ABBREVIATIONS			
CFRC	Clinical-Foundation, Rotation, Clerkship		
CVS	Cardio Vascular System		
CBL	Case Based Learning		
LGIS	Large Group Interactive Session		
PBL	Problem Based Learning		
PERLs	Professionalism, Ethics, Research and Leadership skills.		
TBL	Team Based Learning		
SDL	Self-Directed Learning		
UHS	University of Health Sciences		

VISION STATEMENT

"UHS is a leading University aiming to keep its graduates apt with ever emerging global health challenges, evolving educational methodologies and emerging technological advancement to maintain its distinguishable position as Medical University."

MISSION STATEMENT

"BMC is committed to produce humane healthcare professionals having empathy, high ethical values, technological standards and core competencies in patient management and research to cater the healthcare need of community."

1. OUTCOME OF MBBS PROGRAM

By the end of the five year the MBBS programs **BAHAWALPUR MEDICAL COLLEGE** (aims to produce medical graduates who are able to):

- 1. Demonstrate an appropriate Basics knowledge of medical sciences.
- 2. Elicit professional skills while providing patient centered care by relevant and comprehensive physical examination.
- 3. Exhibit ethical and moral values in health promotion and disease prevention at population level to the care of individual patients.
- 4. Evaluate the use of laboratory tests and imaging studies and interpret the results to arrive at clinical decision making.
- 5. Commit to lifelong learning to keep up to date with developments in medical practice and trends in disease at population level by strong leadership and management skills.
- 6. Perform the common medical and surgical techniques in clinical settings including the 'basic life support.
- 7. Engage in research activity aimed at improvement of quality of health care including behavior modification of individual and community for quality life.

2. CURRICULUM FRAMEWORK

- The University of Health Sciences Lahore has designed a five-year modular framework for Integrated Curriculum based on Specific Systems, Clinical Clerkships, Quran and Professionalism.
- **4** The time calculation for completion of modules and blocks is based on 35 hours per week.
- Total hours of teaching, learning and formative/summative internal assessment to be completed in a year are 1200.

Year	Block	Modular Configuration		
	1	Foundation-1		
		Hematopoietic & Lymphatic		
	2	Musculoskeletal & Locomotion-1		
		Cardiovascular-1		
Year-I	3	Respiratory-1		
		PERLs 1		
		Quran-1		
		Islamiat & Pak Studies		
		Clinical Skills Foundation C-FRC-1 (Clinical-Foundation, Rotation, Clerkship)		
		GIT & Nutrition-I		
		Renal-I		
		Endocrinology & Reproduction-I		
		Neurosciences-I		
Year-2		Head & Neck Special Senses		
		Inflammation		
		PERLs-2		
		Quran-2		
		Islamiat & Pak Studies		
		Clinical Skills Foundation C-FRC-2 (Clinical-Foundation, Rotation, Clerkship)		
		Foundation-2		
		Infectious Diseases		
		Neoplasia		
		Musculoskeletal & Locomotion-2		
Year-3		Hemopoitic, Immunity & Transplant-2		
I Cal-J		Cardiovascular -2		
		Respiratory-2		
		Forensic Medicine		
		Community Medicine & Family Health-1		
		PERLs-3		
		Quran-3		
		Clinical Skills Foundation C-FRC-3 (Clinical-Foundation, Rotation, Clerkship)		

	GIT & Nutrition-2		
	 Renal-2		
	Endocrinology & Reproduction-2		
	Neurosciences-2		
Year-4	Maternal & Child Health		
	Ophthalmology		
	Otorhinolaryngology		
	Community Medicine & Family Medicine-2		
	Psychiatry & Behavioral Sciences		
	PERLs-4		
	Quran-4		
	Clinical Skills Foundation C-FRC-4 (Clinical-Foundation, Rotation, Clerkship)		
	Gynecology & Obstetrics		
	Pediatrics		
Year-5	Medicine		
	Surgery		
	Clinical Clerkships		
	Clinical Skills Foundation C-FRC-5 (Clinical-Foundation, Rotation, Clerkship)		

A few salient features that have been incorporated in Curriculum 2K23 for all the three domains of training after deliberations and through an iterative process by subject experts, medical educationists and the university lead as follows.

1. Horizontal Integration- COGNITIVE:

The framework of Curriculum 2K23 has 44 modules spanning 05 years. The horizontal integration is evident in the modular configuration where different basic disciplines approach the themes simultaneously. Modules have been structured where all the basic disciplines are represented based on their respective weightage of content. Assessment framework ensures that the applied/clinical aspect also is inculcated in the concept development of the learner keeping the clinical relevance and context at the core.

2. Clinical Relevance & Theme-COGNITIVE:

All module objectives are preceded by the recommended themes and clinical relevance. These are grounded in the rationale of the module so that pattern of learningcould be steered for a practical professional approach. However institutional discretiondoes not prohibit adopting any other thematic approach provided that the program outcomes are adequately achieved.

3. Vertical Integration- COGNITIVE:

Spiral placement of the modules within the frameworkensures a revisit of the basic sciences. In the first step theapplied / clinical learning objectives orientate the learner and the repetitive module horizontally rhymes with the clinical rotations with a backdrop of basic sciences. The final year of clerkship is the final revisit, which is primarily workplace based and principally involves the perfect integrated blend of tri-domain learning.

4. C-FRC-PSYCHOMOTOR:

Clinical Skills follow a spiral which is entirely skills dominant. This spiral is the core of psychomotor training. The first two years will be of **Clinical Skills- Foundation** whichwill represent clinical orientation. The clinical orientation will be conducted in wards, skills lab and simulation centers (depending on the available resources). The clinical orientation along with the applied/clinical component of the knowledge base willchannelize the learner for the practical and

professional aspect of learning.

The subsequent two years the spiral will move on to **Clinical Skills Rotations**. The rotations in different wards will be based on foundational developmental already commenced in pre-clinical years. The year 3 and year 4 which have the rotations will also have the second visitof the modules which would now be more clinically inclined with a stronger base of Pharmacology and Pathology. Community oriented practices and family medicine will also be broadening the element of systems thinking and diversity of practice for a healthcare leader of tomorrow.

5. Clinical Clerkship: Finally, **Clinical Clerkships** are aimed to be entirely facilitated in workplace environments. The clerkship model will involve the delegation of duties thus adding to the acquisition of professional accountability as a competency. The psychomotor training and skills acquisition will be the maximum in the year of clerkship. The entire process of C-FRC will be endorsed in a logbook which would be the training base of the learner for future references and exam evaluations.

6. PERLs-AFFECTIVE:

Affective training has been formally inculcated in the curricular framework. The model of PERLs has been introduced so that the yield of doctors has a strong, resilient, ethically driven character. PERLs stands for Professionalism, Ethics, Research and Leadership skills. PERLs rounds up professional development for the effective application of the knowledge and skills base achieved. For a professional to be social accountable and to be able to play the healthcare leadership role for societal elementslike advocacy, equity or resources and healthcare access, a formal training is a must.

The categorical approach for this training has been achieved by rolling in the assessment of the competencies acquired along with development of portfolios. PERLs will run throughout the year via portfolio development. The portfolio development itself is a methodology which ensures student centered learning. The method of self-reflection which is integral for portfolio development places the learner in the right spot to steer his/her own learning needs.

The spiral of PERLs will be monitored directly by the respective department of Medical Education. However, the teaching sessions, and mentoring process, can and will be assigned to other disciplines. For example, communication skills can have an input from the faculty of Family Medicine and research can be facilitated by the Community Medicine & Public Health faculty. Ethics can be jointly covered by the Forensic department and Behavioral sciences. Leadership is an ambit where the students will be motivated if the institutional leads themselves get involved and can also have the input of the successful alumni. The Faculty of Medical Education will look after the entire process and will also engage in the teaching sessions, when and wherever required.

Type of evidence, activities to be performed, learning situation for the acquirement of the competencies, for the portfolio should be defined and enlisted by the academic council along with the help of the department of medical education. A 'mentoring platform' can flaunt the spirit of affective learning through the PERLS spiral. So it is recommended that a mentorship program should be developed at the respective institutes.

7. Other Curricular Elements:

The framework of Curriculum 2K23 has certain other newer elements. These elements define our local context, our existing educational practices and conformity to evidence relating best international practices. Some will be commencing from the first year, however, rest will be a part of the following years. A few of these are:

- Quran
- Clinical
- Entrepreneur ship
- Family Medicine
- Minimal Service Delivery StandardsElectives
- Basic Life Support

Note: All subjects, topics, laboratory, practical and clinical work to be examined regularly and credit to be accounted in internal evaluation.

3. INTRODUCTION TO STUDY GUIDE

The purpose of this study guide is the logical integration of curriculum outlines includes learning objectives, learning strategies and assessment pattern.

The target audiences of this study guide are <u>The First Year MBBS Student</u>. The highly proficient teaching faculty will provide necessary guidance related to achieve intended learning objectives, effective use of teaching tools and integrated teaching methods. The curriculum includes teaching strategies such as Large Group Interactive Session (LGIS), small group interactive methods like Team Based Learning (TBL), Case Based Learning (CBL), Problem Based Learning (PBL), Tutorials, Reflective Writing, Bedside Teaching, Simulation, Skills Lab, Demonstrations, Laboratory Practical, Ward Rounds and Case Presentations. These are the modern and scientific teaching strategy. The study programs support social and moral development of a medical student besides achieving academic excellence. A team of highly trained and professional teachers act as mentors to guide students on social and academics related affairs.

The mandate of medical education is to equip medical professionals with requisite knowledge, skills and attitude. As a medical student it is expected of you to keep an exemplary character and honest morality. Plan and strive hard with full sincerity and devotion. This marks the beginning of your professional career where attitude defines your altitude and acts as a panacea in practical life.

4. INTRODUCTION OF CVS & RESPIRATORY MODULE

	CARDIOVASCULAR SYSTEM (CVS) MODULE
Introduction	 This module is the first step towards producing doctors who have the basic information for decision making regarding understanding of CVS. This module provides the basis for CVS and then rotations of medicine in later years. It helps students to develop necessary skills in diagnosing and developing management plans for common cardiovascular Conditions. It will focus on the normal structure and functions of the CVS. It will help students apply this information and skills to solve clinically relevant problems suitable for this level of students.
Rationale of CVS Module	 The CVS comprises the study of the heart & circulatory system. The initial learning activities will help in understanding the normal structure & development of the organs of the system. Understanding of anatomical details of each component of CVS will be accompanied by study of normal physiological mechanisms. This will help in better understanding the possible pathological conditions of the system, including some of the most prevalent conditions in society like Ischemic Heart Disease. Hypertension, Shock, Heart block, Heart Failure. This will be followed by discussion on some important group of drugs used for treatment and/or prevention of these conditions (administration route, mechanism of action and side effects). The impact of cardiovascular diseases on society and the effect of ageing on cardiovascular system will be discussed.
Target Students	First Year MBBS Students
Module Outcome	 Describe the normal structure of heart including development. Describe the normal structure of heart including development, topographical anatomy, neurovascular supply, and histology. Review the arrangement of circulatory system (arteries, veins, lymphatics). Define the congenital anomalies of cardiovascular system with reference to normal development and early circulation. Define functions of cardiac muscle along with its properties. Interpret pressure changes during cardiac cycle along with regulation of cardiac pumping. Interpret normal & abnormal ECG, ST-T changes, and its abnormalities. Identify the risk factors and role of lipids in coronary blockage and atherosclerosis (hyperlipidemia/ dyslipidemia). Define cardiac output and its modulating/controlling factors. Differentiate left and right sided heart failure and correlate it with the importance of pressure differences. Enumerate different types of arrhythmias and describe the electrical events that produce them. Discuss the psychosocial impact of cardiovascular diseases in society.
Theme	 ↓ Heart ↓ Circulation

Clinical Relevance	🖶 Cardiac Failure		
	📥 Arrhythmias		
	📥 Atherosclerosis & Ischemic Heart Diseases		
	+ Hypertension		
	4 Shock		
	4 Congenital Heart Diseases.		
	+ Peripheral Arterial Diseases.		
Duration	Seven weeks		

	RESPIRATORY SYSTEM MODULE
Introduction	 This Respiratory Module has been plan to provide insight of basic concepts regarding the structural functional knowledge of Respiratory System. This module links with Respiratory Second Module in Spiral-2 where the students appreciate and link the basics with applied aspects.
Rationale of Respiratory Module	 The diseases related to the respiratory system are on the rise not only in developing countries but also in developed countries. The infant mortality rate in Pakistan is highest in Southeast Asia and one of the important reasons is common respiratory infections in children. With the world suffering from COVID-19 not only physically but also mentally, it is very important for medical students to study in detail the structures functions, prevention, epidemiology, genetic basis of diseases and their management. The respiratory system is responsible for bringing oxygen into the body and removing carbon dioxide. It is made up of several organs and structures, including the nose, pharynx, larynx, trachea, bronchi, lungs, and diaphragm.
Target Students	First Year MBBS Students
Module Outcome	 By the end of this module the students will be able to: Apply basic sciences knowledge to understand the causes of common Respiratory problems. Explain the pathogenesis of respiratory diseases. Enlist the main investigations relevant to respiratory disorders. Recognize risk factors and preventive measures of main respiratorydiseases.
Theme Clinical Relevance	 Rib Cage Thoracic vertebrae. Upper respiratory System Lower respiratory System Acute Respiratory Distress Syndrome Bronchial Asthma Tuberculosis. Pneumonia.
Duration	Four weeks

5. CURRICULUM MAP

PROPOSED YEAR WISE CURRICULUM OUTCOMES OF MBBS PROGRAM

COMPETENCIES	FIRST YEAR MBBS	SECOND YEAR MBBS	THIRD YEAR MBBS	FOURTH YEAR MBBS	FINAL YEAR MBBS
	Correlate between gross Anatomy, Human Physiology & Pathology		Relate the effects & interactions of physical, emotional & social environments to health & disease of human being.	Apply Evidence Based Medicine Concept to provide best Possible Cost Effective Care.	Relate the effects and Interaction of Physical, Emotional & Social Environment to Health & Disease of Humanities.
	Differentiate betwee & Abnormal Structur Functions of the Boo	re &	Relate the Natural History of the acute & chronic communicable, non-communicable diseases with respective etiologic agents and effects of appropriate intervention on the progress of the disease.	Ensure compliance with the Legal System as it Impacts on Healthcare and the PM&DC Regulations.	Relate the natural history of the acute & chronic communicable, non-communicable diseases wit respective etiologic agents and effects of appropriate intervention on the progress of the disease.
KNOWLEDGEABLE	Differentiate betwee & Abnormal Molecu Cellular, Biochemica Physiological & Pathophysiological Mechanisms	lar,	Apply Evidence Based Medicine Concept to provide best Possible Cost Effective Care.	Ensure Patient Safety & Infection Control in their Clinical Practice.	Apply Evidence Based Medicine Concept to pro best Possible Cost Effective Care.
	Differentiate betwee & Abnormal Human		Ensure compliance with the Legal System as it Impacts on Healthcare and the PM&DC Regulations.		Ensure compliance with the legal system as it impacts on healthcare and the PM&DC regulation
	Differentiate betwee Biological & Social Determinants and R of Disease, Various I Causes and Causativ for Specific Inquiries & Diseases.	isk factors Etiological ve Agents	Ensure Patient Safety & Infection Control in their Clinical Practice.		Ensure Patient Safety & Infection Control in the Clinical Practice.

	Perform basic radiological procedures related to normal & abnormal functions of the body.	• Take a focused history and identify the patient's risk factors with appreciation of the bio- psychosocial model.	Take a focused history and identify the patient's risk factors with appreciation of the bio-psychosocial model.	Perform Procedure with the Consent of Patient, ensuring Infection Control when giving Injection I/V, I/M, S/C. I/D), Managing Infusion Lines Blood Transfusions, providing first Aid, Basic Li Support, Including CPR, Nebulizers, NG Intuba Wound Care and dressings. Catheterization
SKILLFUL	Perform practical procedures for handling instruments.	 Perform Physical & Mental state examination in order to identify Specific Problems & Differentiate from others. Identify Non Conformity to Anatomical & Physiological configuration. 	 Perform Physical & Mental state examination in order to identify Specific Problems & Differentiate from others. Identify Non Conformity to Anatomical & Physiological configuration. 	Critique the advantages & disadvantages, indications, contraindications, limitations, complications of the current treatment modalitie justify the use of each with best available scientif evidence
	Manage time and prioritize tasks & uses of resources.	• Formulate a Provisional Diagnosis with Justification and two to three likely differential diagnosis.	• Formulate a Provisional Diagnosis with Justification and two to three likely differential diagnosis.	Formulate management plan in partnership with patients ensuring their safety.
	Ensure Patient Safety always including Strict Infection Control Practices.	• Order appropriate investigations with the Consent of the Patient.	Order appropriate investigations with the Consent of the Patient.	Advice and counsel the patient & their family

Order appropriate investigations with the consent of the patient, ensuring infection control in giving injections (IV, IM, SC, ID), managing infection lines & blood transfusions, providing first aid, basic life support (including cardiopulmonary resuscitation, nebulizers, wound care, Monitoring Oxygen saturation/therapy, taking swabs and pap-smear, performing ECG and peak flow spirometry, blood sugar testing, catheterization, dipstick urine analysis and simple skin suturing	Educate the patient regarding their health proble available options, management plan, self-care & of prescribed drugs & equipment such as Inhale
Critique the advantages & disadvantages, indications, contraindications, limitations, complications of the current treatment modalities, justify the use of each with best available scientific evidence	Recognize & take into consideration issues of eu equality & that opportunities are missed if not perceived to be useful by others.
Formulate management plan in partnership with patients ensuring their safety.	Describe & debate the reasons of success or faile of various approaches to increase prevention & t decrease social inequities.
Advice and counsel the patient & their family	

			Educate the patient regarding their health problems, available options, management plan, self-care & use of prescribed drugs & equipment such as Inhalers.	
			Recognize & take into consideration issues of equity, equality & that opportunities are missed if not perceived to be useful by others.	
			Describe & debate the reasons of success or failure of various approaches to increase prevention & to decrease social inequities.	
			Manage time & prioritize the task & use of resources.	
			Ensure patient safety always including strict Infection Control Policies.	
CRITICAL THINKER	Adapt a Problem solving Approach in Discussing Problems/ Issues	Use of Information Obtained from & Correlated from different sources. Critical data evaluation (Interpret, Analyze, Synthesize and evaluate to form decisions).	Use of Information Obtained from & Correlated from different sources. Critical data evaluation (Interpret, Analyze, Synthesize and evaluate to form decisions).	Use of Information Obtained from & Correlated from different sources. Critical data evaluation (Interpret, Analyze, Synthesize and evaluate to fo decisions).

	Use of Information & correlate them from different sources. Critical data evaluation (Interpret, Analyze, Synthesize and evaluate to form decisions).	Dealing Effectively with Complexity, Uncertainty & Probability in Medical Decision Making, Reflecting on the latest Evidence & Application to the Health Problem	Dealing Effectively with Complexity, Uncertainty & Probability in Medical Decision Making, Reflecting on the latest Evidence & Application to the Health Problem	Dealing Effectively with Complexity, uncertainty probability in medical decision making, reflectin the latest evidence & application to the health problem
	Regular Reflection on their own practice & on standards of medical practice.		Raising Concerns about Public Risks & Patient Safety.	Regular reflection on their own practice & on standards of medical practice
				Initiating Participating in or Adapting to Change required, ensuring that the Profession and the Patient both Benefit.
				Flexibility and a Problem Solving Approach
				Commitment to Quality Assurance and Monitori by Participating in Audits and Reporting critical Incidence to improve Medical Practice and Decr Risk to Self, Patient and Public.
DECEADOUED	Demonstrate Practices of Effective Academic Writing	Critically Review Literature	Identify a Researchable problem & Critically review the literature.	Identify the Measurable Problem and Critically review the Literature.
RESEARCHER	Discuss Importance of Research Process in Academic Medicine.	Identify Research Problem	Phrase Succinct Research Question	Phrase Succinct Research Question

	Identify Components	s of an Original Article	Formulate Research Question.	Formulate Hypothesis	Formulate Hyp	oothesis
	Critique on selected Club Meeting	Original Article in Journal	Formulate Research Hypothesis	Identify the Appropriate Research Design(s) in Epidemiology and Analytical Test in Biostatistics to answer the Research Questions.	Epidemiology	propriate Research Design(s) in and Analytical Test in Biostatistic search Questions.
			Identify the Appropriate Research Design(s) in Epidemiology and Analytical Test in Biostatistics to answer the Research Questions.	Collect Analyze & Evaluate Data & Present Results where Possible	Collect Analyze where Possible	e & Evaluate Data & Present Resi
				Demonstrate Ethics in Conducting Research and in Ownership of Intellectual Property.		Ethics in Conducting Research and Intellectual Property.
Professionalism & Ethics	Discuss the Role of Ethics in Medical Practice	Demonstrate principles of patient Autonomy, beneficence, nonmaleficence, distributive justice, confidentiality, informed consent and ethics.	Respect the views & interests of the Patient & the Patient's Family	Demonstrate Professional Valu Professional Accountability, H Probity & Ethics without discr the basis of Age, Gender, Relig Color, Race, Ethnic or Nationa Cultural , Disability, Disease, I Marital and Parental status, Sez Orientation and Social or Econ	onesty, imination on ion or Beliefs , il origin, Lifestyle, xual	Demonstrate professional values Self & Professional Accountabili Honesty, Probity & Ethics with discrimination on the basis of Ag Gender, Religion or Beliefs, Col Race, Ethnic or National origin, Cultural, Disability, Disease, Lifestyle, Marital and Parental st Sexual Orientation and Social or Economic Status

6. TIME TABLE

BAHAWALPUR MEDICAL COLLEGE

FIRST PROFESSIONAL MBBS-2023-BATCH-2 CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5 4TH-8TH-SEPTEMBER-2023 (25TH-WEEK SCHEDULE) (THORAX, LIPIDS)

DAY	08:30-09:30	09:30-10:30	10:30-	10:50-12:20	12:20-13:20		13:40-14:40		14:40-16:00
VENUE	LECTURE HALL I	LECTURE HALL I	10:30- 10:50	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I		CSIM
Monday 04-09-2023	GENERAL ANATOMY CVS Intro CVA-001 Prof Tazeen	PHYSIOLOGY Outline of CVS CV-P-001 Prof A Qaiser		MEDIASTINUM-1 CVA-001 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Mechanism of Pul- Ventilation Re-P-001 Prof Tahir AM		BIOCHEMISTRY Classification of Lipid CVB-001-002 Dr Gul/ PNI	BLOOD PR (Super A=Leo B=Phys	PHYSIOLOGY ESSURE-Demonstration vised by Prof Tahir) ct-Hall-I –Dr Uzma iology-Lab- Dr Bazla emistry –Lab-Dr Zahra
Tuesday 05-09-2023	LIBRARY/ SELF STUDY	PHYSIOLOGY Physiological Anatomy of Cardiac Muscles CV-P-001 Prof A Qaiser		EDIASTINUM-2-CVA-001 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Significance of FA CVB-003 Dr Faryal	ICH BREAK	BEHAVIORAL SCIENCE Psychosocial Aspects of CVS-CV-BhS-001 Ms Faseeha	BLOOD PR (Supervis A=Lee B=Phys	PHYSIOLOGY ESSURE -Performance) Eed by Senior faculty). ct-Hall-I –Dr Uzma iology-Lab- Dr Bazla Emistry –Lab-Dr Zahra
Wednesday 06-09-2023	HISTOLOGY Cardiac Muscle-I CV-A-014 Prof Tazeen	PHYSIOLOGY Properties of Cardiac Muscles-I CV-P-001 Prof A Qaiser	BREAK	MEDIASTINUM-3 CVA-001 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Breathing Mechanism-I Re-P-001 Prof Tahir AM	NAMAZ & LUNCH	BIOCHEMISTRY Biomedical Importance of Ecosonoid CVB-004 Dr Faryal/ PNI	BL I A=Leo B=Phys	PHYSIOLOGY OOD PRESSURE Performance) ct-Hall-I –Dr Uzma iology-Lab- Dr Bazla emistry –Lab-Dr Zahra
	BIOCHEMISTRY Revision			10:50-12:30 LAB/PRACTICAL	12:30-13:20		13:40-15:00 LAB/PRACTIC		15:00-16:00
Thursday 07-09-2023	CVB-001-004 Dr Faryal/ PNI	GROSS ANATOMY Superior Inferior Vena Cava-1 Dr Rabail Tariq/PTK		A=Anatomy= Cardiac Muscles (CVA-020) B= Physiology-Examination of Pulse-CVP-031 C=Biochemistry= Cholesterol Est-(CVB-011)	PHYSIOLOGY Breathing Mechanism-2 Re-P-001 Prof Tahir AM		B=Anatomy= Cardiac Mus C= Physiology-Examination 031 A=Biochemistry= Cholester (CVB-011)	n of Pulse-CVP-	GROSS ANATOMY Superior Inferior Vena Cava- 2 Dr Faraz
	EMBRYOLOGY	CHS		CBL	PATHOLOGY	13:20- 14:00	14:00-15:30 LAB/PRACTIC		15:30-16:00
Friday 08-09-2023	Early Development of Heart CV-A-006 Prof Tazeen	Primordial Model to Prevent CVS CV-CM-001 Dr Iqra Zulfiqar		HYPERTENSION-CVAg-001 Prof Tahir AM,Prof Qaisar ,Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry	Hemodynamics & CVS CV-Pa-001 Dr Shahjehan Zafar/PAG	JUMMA BREAK	C=Anatomy= Cardiac Mus A= Physiology- Physiology- Pulse-CVP-03 B=Biochemistry= Choleste (CVB-011)	Examination of	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

11TH-15TH-SEPTEMBER-2023 (26TH-WEEK SCHEDULE) (THORAX, LIPIDS)

DAY	08:30-09:30	09:30-10:30	10:30:	10:50-12:20	12:20-13:20		13:40-14:40	14:40-16:	00
VENUE	LECTURE HALL I	LECTURE HALL I	10:30: 10:50	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I	CSIM	
Monday 11-09-2023	GENERAL ANATOMY Clinical Picture of Mediastinum Syndrome CVA-014 Prof Tazeen	PHYSIOLOGY Properties of Cardiac Muscles-II CV-P-001 Prof A Qaiser		PERICARDIUM-1 CVA-002 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Lipoprotein-I CVB-005 Dr Gul Zeba/ PNI		PHYSIOLOGY Surfactant Re-P-003 Prof Tahir AM	PHYSIOLO General Examination- (Supervised by P A=Lect-Hall-I –I B=Physiology-Lab C=Biochemistry –L	Demonstration rof Tahir). Dr Uzma D- Dr Bazla
Tuesday 12-09-2023	CHS Health Promotion-I CV-CM-003 Dr Iqra Zulfiqar	PHYSIOLOGY Conducting System- I CV-P-001 Prof A Qaiser		PERICARDIUM-2 CVA-002 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY HDL, VLDL CVB-005 Dr Gul Zeba/ PNI	LUNCH BREAK	PHARMACOLOGY Antihypertensive CV-Ph-001 Dr Zafar Iqbal	PHYSIOLO General Examination (Supervised by P A=Lect-Hall-I –I B=Physiology-Lat C=Biochemistry –L	-Performance rof Tahir). Dr Uzma D- Dr Bazla
Wednesda y 13-09-2023	HISTOLOGY Classification of Arteries & Tunics-1 CVA-014 Prof Tazeen	PHYSIOLOGY Conducting System- 2 CV-P-001 Prof A Qaiser	BREAK	PERICARDIUM-3 CVA-002 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Lung Compliance- I Re-P-003 Prof Tahir AM	NAMAZ & LUN	BIOCHEMISTRY Lipoprotein Disorders-I CVB-006-007 Dr Gul Zeba/ PNI	PHYSIOLO General Exam Demonstra (Supervised by P A=Lect-Hall-I –I B=Physiology-Lat C=Biochemistry –L	ination tion rof Tahir). Dr Uzma D- Dr Bazla
	СНЅ	HISTOLOGY Classification of		10:50-12:30 CBL	12:30-13:20		-	IO-15:00 RACTICAL	15:00-16:00
Thursday 14-09-2023	Health Promotion-2 CV-CM-003 Dr Iqra Zulfiqar	Arteries & Tunics-1 CVA-014 Prof Tazeen		CHEST PAIN-CVAg-002 Prof Tahir AM, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry	PAK STUDIES Nature Of Civics Mr Adnan Zahoor		B= Physiology- Ch C=Biochemistry= E	iac Muscles (CVA-020) est Examination-CVP- 032 stimation of HDL, HDL /B-012)	Library/Self Directed Learning
	BIOCHEMISTRY	PHYSIOLOGY		LAB/PRACTICAL	PATHOLOGY	13:20- 14:00		00-15:30 RACTICAL	15:30-16:00
Friday 15-09-2023	Lipoprotein Disorders- 2- CVB-006-007 Dr Ghazala P	Lung Compliance-2 Re-P-003 Prof Tahir AM		B=Anatomy= Cardiac Muscles (CVA-020) C= Physiology- Chest Examination A=Biochemistry= Estimation of HDL, HDL (CVB-012)	Infarction CV-Pa-001 Dr Shahjehan Zafar/PAG	JUMMA BREAK	A= Physiology- B=Biochemistry= E	iac Muscles (CVA-020) Chest Examination Estimation of HDL,HDL /B-012)	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

18TH-22ND-SEPTEMBER-2023 (27TH-WEEK SCHEDULE) (THORAX, LIPIDS)

DAY	08:30-09:30	09:30-10:30	10:30:	10:50-12:20	12:20-13:20		13:40-14:40	14:40-16	:00
VENUE	LECTURE HALL I	LECTURE HALL I	10:50	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I CSIM		
Monday 18-09-2023	GENERAL ANATOMY CAT Prof Tazeen	PHYSIOLOGY Action Potential SA/SV-I CV-P-001 Prof A Qaiser		External & Internal Features of Heart-1 CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Cholesterol-I CVB-007 Dr Ghazala-R		PHYSIOLOGY Pulmonary Volume & Capacities-1 Re-P-003 Prof Tahir AM	PHYSIOL Demonstration JV (Supervised by A=Lect-Hall-I - B=Physiology-La C=Biochemistry -	/P (CV-P033) Prof Tahir) -Dr Uzma ab- Dr Bazla
Tuesday 19-09-2023	CHS Secondary Tertiary Prevention-I CV-CM-005 Dr Iqra Zulfiqar	PHYSIOLOGY Action Potential in Ven-I CV-P-001 Prof A Qaiser		External & Internal Features of Heart-2-CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Pulmonary Volume & Capacities-2 Re-P-003 Prof Tahir AM	& LUNCH BREAK	BIOCHEMISTRY Cholesterol-2 CVB-007 Dr Ghazala-R	PHYSIOLO JVP(CV-P033) Pe (Supervised by A=Lect-Hall-I - B=Physiology-La C=Biochemistry -	erformance Prof Tahir) -Dr Uzma ab- Dr Bazla
Wednesday 20-09-2023	HISTOLOGY Arterial Histology CVA-015 Prof Tazeen	PHYSIOLOGY Action Potential in Ven-2 CV-P-001 Prof A Qaiser	BREAK	External & Internal Features of Heart-3-CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY REVISION CVB-003-004 Dr Gul Zeba/ PNI	NAMAZ & LUN	PHARMACOLOGY Anti-Angina Drugs CV-Ph-002 Dr Zafar Iqbal	PHYSIOLO JVP(CV-P033) Pe (Supervised by A=Lect-Hall-I - B=Physiology-La C=Biochemistry -	erformance Prof Tahir) -Dr Uzma ab- Dr Bazla
	HISTOLOGY			10:50-12:30 CBL	12:30-13:20		13:40-15:0 LAB/PRACTI		15:00-16:00
Thursday 21-09-2023	Classification & Histology of Venous System-1 CVA-016 Prof Tazeen	PHARMACOLOGY Anti-Angina Drugs CV-Ph-002 Dr Zafar Iqbal		EDEMA Prof Tahir AM, Prof Qaisar, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry	CHS Secondary Tertiary Prevention-2-CV- CM-005 Dr Iqra Zulfiqar		A=Anatomy= Blood Ves B= Physiology- Chest C=Biochemistry= Cardiac I	Examination	ISLAMIAT Mr Nabeel
	PHYSIOLOGY	MENTORING A=Dr Faryal		LAB/PRACTICAL	PATHOLOGY	13:20- 14:00	14:00-15:3 LAB/PRACTI		15:30-16:00
Friday 22-09-2023	Determination of Lung Volume-1 Re-P-003 Prof Tahir AM	B=Dr Kiran C=Dr Bazla D=Dr Gul E=Dr Hibba		B=Anatomy= Blood Vessels (CVA-021) C= Physiology- Chest Examination A=Biochemistry= Cardiac Marker-(CVB-013	Atherosclerosis CV-Pa-002 Dr Shahjehan Zafar	JUMMA BREAK	C=Anatomy= Blood Ves A= Physiology- Chest B=Biochemistry= Cardiac I	Examination	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

25TH-29TH -SEPTEMBER-2023 (28TH-WEEK SCHEDULE) (THORAX, ENZYMES)

DAY	08:30-09:30	09:30-10:30	10:30:	10:50-12:20	12:20-13:20		13:40-14:40	14:	40-16:00
VENUE	LECTURE HALL I	LECTURE HALL I	10:50	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I		CSIM
Monday 25-09-2023	PHYSIOLOGY CAT (CVS) Prof AMQ	HISTOLOGY Classification & Histology of Venous System-2 CVA-016 Prof Tazeen		BLOOD SUPPLY Heart-1 CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Properties of Enzymes CVB-008 Prof Nasim Ilyas		PHYSIOLOGY Determination of Lung Volume & Capacities Re-P-003 Prof Tahir AM	Demor (Supervise A=Lect-H B=Physiolo	/SIOLOGY nstration CXR ed by Prof Tahir) Iall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
Tuesday 26-09-2023	PHYSIOLOGY ECG-I CV-P-004 Prof A Qaiser	CHS Tertiary Prevention in Heart Disease-I CV-CM-005 Dr Iqra Zulfiqar Demonstration		BLOOD SUPPLY Heart-2 CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Classification of Enzymes CVB-008 Prof Nasim Ilyas	NAMAZ & LUNCH BREAK	PHARMACOLOGY Anti-Arrhythmic Drugs CV-Ph-003 Dr Zafar Iqbal	Perfor (Supervise A=Lect-H B=Physiolo	/SIOLOGY rmance CXR ed by Prof Tahir) Iall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
Wednesday 27-09-2023	EMBRYOLOGY Heart Tube-1 CVA-007 Prof Tazeen	PHYSIOLOGY ECG-2 CV-P-004 Prof A Qaiser	BREAK	BLOOD SUPPLY Heart-3 CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Action of Enzymes CVB-008 Prof Nasim Ilyas	NAMAZ & LL	PHYSIOLOGY Alveolar Ventilation-1 Re-P-004 Prof Tahir AM	Perfor (Supervise A=L B=Phy	/SIOLOGY rmance CXR ed by Prof Tahir) .ect-Hall-I ysiology-Lab hemistry -Lab
	СНЅ	EMBRYOLOGY		10:50-12:30 CBL	12:30-13:20		13:40-15:00 LAB/PRACTICA	L	15:00-16:00
Thursday 28-09-2023	Tertiary Prevention IN Heart Disease-I CV-CM-005 Dr Iqra Zulfiqar	Heart Tube-2 CVA-007 Prof Tazeen		ASTHMA Prof Tahir AM,Prof Qaisar, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry)	PAK-STUDIES Concept of Sovereignty Mr Adnan Zahoor		A=Anatomy= Blood Vessel B= Physiology- Spiro C=Biochemistry= Lipid Profi	metry	LIBRARY
	PHYSIOLOGY	SURGERY Pericardial Sinus		LAB/PRACTICAL	PATHOLOGY	13:20- 14:00	14:00-15:30 LAB/PRACTICA		15:30-16:00
Friday 29-09-2023	Alveolar Ventilation-2 Re-P-004 Prof Tahir AM	CV-A-004 Dr Muhammad Asghar		B=Anatomy= Blood Vessels (CVA-021) C= Physiology- Spirometry A=Biochemistry= Lipid Profile-(CVB-014)	SHOCK CV-Pa-004 Dr Shahjehan Zafar	JUMMA BREAK	C=Anatomy= Blood Vessels (CVA-021) A= Physiology- Spirometery B=Biochemistry= Lipid Profile (CVB-014)		SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

2ND-6TH-OCTOBER-2023 (29TH-WEEK SCHEDULE) (THORAX, ENZYMES)

DAY	08:30-09:30	09:30-10:30	10:30	10:50-12:20	12:20-13:20		13:40-14:40	14:40	-16:00
VENUE	LECTURE HALL I	LECTURE HALL I	:10:5 0	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I	CS	SIM
Monday 02-10-2023	BIOCHEMISTRY CAT (CVS) Lipid Test Prof Nasim Ilyas	PHYSIOLOGY Dead Space-1 Re-P-003 Prof Tahir AM		Cardiac Plexus-1 CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Effects of lons on ECG-3 CV-P-005 Prof A Qaiser		GENERAL ANATOMY Lymphatic Drainage of Heart CV-A-003 Prof Tazeen	Heart Sound- (Supervised A=Lect-Hal B=Physiolog C=Biochem	IOLOGY Demonstration by Prof Tahir) II-I –Dr Uzma y-Lab- Dr Bazla istry –Lab-Dr ahra
Tuesday 03-10-2023	BIOCHEMISTRY Factors Affecting Enzymes CVB-009 Prof Nasim Ilyas	PHYSIOLOGY Arrhythmias CV-P-006 Prof A Qaiser		Cardiac Plexus-2 CVA-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Dead Space-2 Re-P-003 Prof Tahir AM	NCH BREAK	BEHAVIORAL SCIENCE Vocational Issues CV-BhS-001 Ms Faseeha	Heart Sound (Supervised A=Lect-Hal B=Physiolog C=Biochem	IOLOGY I-Performance by Prof Tahir) II-I –Dr Uzma y-Lab- Dr Bazla istry –Lab-Dr ahra
Wednesda y 04-10-2023	EMBRYOLOGY Development of Embryonic Veins CVA-010 Prof Tazeen	PHYSIOLOGY Brady Arrhythmias- CV-P-006 Prof A Qaiser	BREAK	Radiology CT/MRI CVA-004 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Enzyme Regulation CVB-009 Prof Nasim Ilyas	NAMAZ & LUNCH BREAK	PHYSIOLOGY Respiratory Passage Way-1 Re-P-004 Prof Tahir AM	Heart Sound (Supervised A=Lect-Hal B=Physiolog C=Biochem	IOLOGY I-Performance I by Prof Tahir II-I –Dr Uzma y-Lab- Dr Bazla istry –Lab-Dr ahra
	BIOCHEMISTRY	Pediatrics		10:50-12:30 CBL	12:30-13:20		13:40-15:00 LAB/PRACTIC		15:00-16:00
Thursday 05-10-2023	Enzyme Inhibition CVB-009 Prof Nasim Ilyas	Articular/Ventricul ar Septal Defects CV-A-009 Prof Abdul Rehman		ECG Prof Tahir AM, Prof Qaisar, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry)	PAK-STUDIES Mr Adnan Zahoor		A=Anatomy=Epiglottis L 025) B= Physiology- Chest A C=Biochemistry=Chest M Stethograph (Re-	arynx (Re-A- uscultation) lovements by	ISLAMIAT
	CHS CAT	EMBRYOLOGY Fate of Pharyngeal		LAB/PRACTICAL	PATHOLOGY	13:20- 14:00	14:00-15:30 LAB/PRACTIC		15:30-16:00
Friday 06-10-2023	CV-CM-001-005 Dr Iqra Zulfiqar	Arch Arteries CVA-009 Prof Tazeen		B=Anatomy= Epiglottis Larynx (Re-A- 025) C= Physiology- Chest Auscultation A=Biochemistry=Chest Movements by Stethograph (Re-B-005)	Types of Heart Failure CV-Pa-004 Dr Shahjehan Zafar/PAG	JUMMA BREAK	C=Anatomy= Epiglottis I 025) A= Physiology=Chest A B=Biochemistry=Chest N Stethograph (Re-	uscultation lovements by	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

9TH-13TH-OCTOBER-2023 (30TH-WEEK SCHEDULE) (THORAX, ENZYMES)

DAY	08:30-09:30	09:30-10:30	10:30	10:50-12:20	12:20-13:20		13:40-14:40	14:40	0-16:00
VENUE	LECTURE HALL I	LECTURE HALL I	:10:5 0	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I	C	SIM
Monday 09-10-2023	ANATOMY CAT Prof Tazeen	PHYSIOLOGY Tachy Arrhythmias- CV-P-006 Prof A Qaiser		TRACHEA-1 Re-A-002 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Importance of Enzymes CVB-009 Prof Nasim Ilyas		PHYSIOLOGY Respiratory Passage Way-2 Re-P-004 Prof Tahir AM	CHEST EX A=Lect-Ha B=Physiolog C=Biochem	IOLOGY AMINATION II-I –Dr Uzma y-Lab- Dr Bazla iistry –Lab-Dr ahra
Tuesday 10-10-2023	PHYSIOLOGY Prof A Qaiser	PEDIATRICS Congenital Defects CV-A-009 Prof Abdul Rehman		TRACHEA-2 Re-A-002 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Hypercholestremia CVB-010 Prof Nasim Ilyas	& LUNCH BREAK	PHARMACOLOGY Drugs used in Cardiac Failure CV-Ph-004 Dr Zafar Iqbal	CHEST EX (Supervised A=Lect-Ha B=Physiolog C=Biochem	IOLOGY AMINATION by Prof Tahir) II-I –Dr Uzma y-Lab- Dr Bazla iistry –Lab-Dr ahra
Wednesda y 11-10-2023	EMBRYOLOGY AV Canal & Sinus Venosis-1 CVA-010 Prof Tazeen	PHYSIOLOGY Pulmonary Systemic Circulation CV-P-008 Prof A Qaiser	BREAK	TRACHEA-3 Re-A-002 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Phospholipids-1 CVB-009 Dr Ghazala	NAMAZ & LUNC	PHYSIOLOGY Pulmonary Circulation-I Re-P-004 Prof Tahir AM	CHEST EX. (Supervised A=Lect-Ha B=Physiolog C=Biochem	IOLOGY AMINATION I by Prof Tahir) II-I –Dr Uzma y-Lab- Dr Bazla nistry –Lab-Dr ahra
	BIOCHEMISTRY	EMBRYOLOGY		10:50-12:30 CBL	12:30-13:20		13:40-15:00 LAB/PRACTICA		15:00-16:00
Thursday 12-10-2023	Phospholipids-2 CVB-009 Dr Ghazala	AV Canal & Sinus Venosis-2 CVA-010 Prof Tazeen		ECG CVP-003 Prof Tahir AM, Prof Qaisar, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry)	CHS Risk factor Assessment of CVS Disease-I CV-CM-007 Dr Iqra Zulfiqar		A=Anatomy= Trachea (B= Physiology= Peak Exp Rate (Re-P-03 C=Physiology=Chest Mo Stethograph (Re-E	viratory Flow 0) Avements by	LIBRARY
	PHYSIOLOGY	CHS Risk factor		LAB/PRACTICAL	PATHOLOGY	13:20- 14:00	14:00-15:30 LAB/PRACTICA		15:30-16:00
Friday 13-10-2023	Pulmonary Circulation- 2 Re-P-004 Prof Tahir AM	Assessment of CVS Disease-I CV-CM-007 Dr Iqra Zulfiqar		B=Anatomy=Trachea (Re-A-026) C= Physiology=Peak Expiratory Flow Rate (Re-P-030) A=Physiology=Chest Movements by Stethograph (Re-B-005)	Types of Heart Failure CV-Pa-004 Dr Shahjehan Zafar	JUMMA BREAK	C=Anatomy= Trachea (A= Physiology= Peak Exp Rate (Re-P-03 B=Physiology=Chest Mo Stethograph (Re-E	viratory Flow 0) Avements by	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

16TH-20TH-OCTOBER-2023 (31ST-WEEK SCHEDULE) (THORAX, ENZYMES)

DAY	08:30-09:30	09:30-10:30	10.20	10:50-12:20	12:20-13:20		13:40-14:40	14	:40-16:00
DAY VENUE	LECTURE HALL I	LECTURE HALL I	10:30: 10:50	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I		CSIM
Monday 16-10-2023	PHYSIOLOGY CAT-RESPIRATION Prof AMQ	General Anatomy Upper Respiratory Tract Re-A-001 Prof Tazeen		THORACIC CAVITY-1 Re-A-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Pressures in Pulmonary System Re-P-004 Prof Tahir AM		PHYSIOLOGY Nervous Regulation of Circulation CV-P-009-010 Prof A Qaiser	Auscultation (Supervis A=Lect- B=Physiol	YSIOLOGY / Breathing Sounds- Demo ed by Prof Tahir) Hall-I –Dr Uzma ogy-Lab- Dr Bazla istry –Lab-Dr Zahra
Tuesday 17-10-2023	CHS Risk factor Assessment of CVS Disease-I CV-CM-007 Dr Iqra Zulfiqar	PHYSIOLOGY Rapid Control of Arterial Pressure CV-P-011 Prof A Qaiser		THORACIC CAVITY-2 Re-A-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Biological Importance of Phospholipids Re-B-002 Dr Ghazala R	ICH BREAK	PHARMACOLOGY Drugs used in Cardiac Failure CV-Ph-004 Dr Zafar Iqbal	Auscultation Pe (Supervis A=Lect- B=Physiol	YSIOLOGY / Breathing Sounds- rformance ed by Prof Tahir) Hall-I –Dr Uzma ogy-Lab- Dr Bazla istry –Lab-Dr Zahra
Wednesda y 18-10-2023	EMBRYOLOGY Bony Cage of Thoracic Cavity Re-A-015 Prof Tazeen	PHYSIOLOGY Long Term Control of Arterial Pressure CV-P-012 Prof A Qaiser	BREAK	THORACIC CAVITY-3 Re-A-003 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	Cardiology Pericardial Disease CV-A-023	NAMAZ & LUNCH BREAK	PHYSIOLOGY Principles of gaseous Exchange Re-P-005 Prof Tahir AM	Auscultation Pe (Supervis A=Lect- B=Physiol	YSIOLOGY / Breathing Sounds- rformance sed by Prof Tahir) Hall-I –Dr Uzma ogy-Lab- Dr Bazla istry –Lab-Dr Zahra
	BEHAVIORAL SCIENCE	HISTOLOGY		10:50-12:30 CBL	12:30-13:20		13:40-15:00 LAB/PRACTIC/		15:00-16:00
Thursday 19-10-2023	CAT CV-BhS-001 Ms Faseeha	Respiratory Epithelium Re-A-020 CVA-010 Prof Tazeen		ASTHAMA Re-B—001-003 Prof Tahir AM, Prof Qaisar, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry)	BIOCHEMISTRY Elastin Disorders Re-B-003 Dr Ghazala R		A=Anatomy=Bronchial Tro B= Physiology= O2 Satur 031 C=Physiology=Tu	ee (Re-A-027) ration (Re-P-	LIBRARY
	PHYSIOLOGY Transport of O2 in	PERLS		LAB/PRACTICAL	PATHOLOGY	13:20- 14:00	14:00-15:30 LAB/PRACTIC/		15:30-16:00
Friday 20-10-2023	Blood-1 Re-P-005 Prof Tahir AM	Portfolio CVB-009 Dr Kiran		B=Anatomy=Bronchial Tree (Re-A- 027) C= Physiology= O2 Saturation (Re-P- 031 A=Physiology=Tutorial	Acute Respiratory Distress Syndrome Re-Pa-001 Dr Shahjehan Zafar	JUMMA BREAK	C=Anatomy= Bronchial 027) A= Physiology= O2 Satur 031) B=Physiology=Tut	ration (Re-P-	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

23RD-27TH-OCTOBER-2023 (32ND-WEEK SCHEDULE) (THORAX, ENZYMES)

DAY	08:30-09:30	09:30-10:30	10:30	10:50-12:20	12:20-13:20		13:40-14:40	14:	40-16:00
DAY VENUE	LECTURE HALL I	LECTURE HALL I	:10:5 0	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I		CSIM
Monday 23-10-2023	BIOCHEMISTRY CAT -ENZYMES Prof Nasim Ilyas	PHYSIOLOGY Cardiac Output CV-P-013 Prof A Qaiser		RIB CAGE-1 Re-A-004 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Transport of O2 in Blood-2 Re-P-005 Prof Tahir AM		General Anatomy Thoracic Vertebrae Re-A-006 Prof Tazeen	ABGs-D (Supervise A=Lect-H B=Physiole	YSIOLOGY emonstration ed by Prof Tahir) fall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
Tuesday 24-10-2023	CHS Prevention of ARI Re-CM-001 Dr Iqra Zulfiqar	PHYSIOLOGY Skeletal Muscle & Coronary Circulation CV-P-014-015 Prof A Qaiser		RIB CAGE-2 Re-A-004 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Acid Base Balance Re-B-004 Dr Ghazala R	LUNCH BREAK	PHARMACOLOGYC ough Suppressants Re-Ph-001 Dr Zafar Iqbal	ABGs (Supervise A=Lect-H B=Physiole	YSIOLOGY Performance ed by Prof Tahir) Iall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
Wednesda y 25-10-2023	HISTOLOLOGY Clinical Correlates ReA-024 Prof Tazeen	PHYSIOLOGY Circulatory Shock CV-P-016 Prof A Qaiser	BREAK	RIB CAGE-3 Re-A-004 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BIOCHEMISTRY Acid Base Disorders Re-B-004 Dr Ghazala R	NAMAZ & LUN	BEHAVIORAL SCIENCE CAT CV-BhS-001 Ms Faseeha	Inhaler U (Supervise A=Lect-H B=Physiole	YSIOLOGY se Performance ed by Prof Tahir) łall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
	BIOCHEMISTRY	EMBRYOLOGY		10:50-12:30-CBL	12:30-13:20		13:40-15:00 LAB/PRACTIC/		15:00-16:00
Thursday 26-10-2023	Clinical Interpretation of Acid Base Balance Re-B-004 Dr Ghazala R	Diaphragm Re-A-016 Prof Tazeen		HYPOXIA Re-P=016 Prof Tahir AM,Prof Qaisar, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry)	PHYSIOLOGY Transport of CO2 in Blood-1 Re-P-007 Prof Tahir AM		A=Physiology=Tu B= Physiology= Age Inc Fibrosis (Re-Ag- A=Biochemistry== Detern Meter (Re-B-0	luced Lung 001) nination of Ph	LIBRARY
	PHYSIOLOGY	BIOCHEMISTRY/CM Role of Vitamins in		LAB/PRACTICAL	PATHOLOGY/AGING	13:20- 14:00	14:00-15:30 LAB/PRACTIC/		15:30-16:00
Friday 27-10-2023	Transport of O2 in Blood-3 Re-P-005 Prof Tahir AM	RTIS Re-CM-001 Dr Ghazala R/Dr Iqra Zulfiqar		B=Physiology=Tutorial C= Physiology= Age Induced Lung Fibrosis (Re-Ag-001) B=Biochemistry== Determination of Ph Meter (Re-B-005)	Increase Vulnerability to Infection & Neoplasia Re-Ag-002 Dr Shahjehan Zafar	JUMMA BREAK	C=Physiology=Tu A= Physiology Physio Induced Lung Fibrosis (C=Biochemistry== Detern Meter (Re-B-0	ology= Age Re-Ag-001) hination of Ph	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

30TH-OCTOBER-3RD-NOVEMB2023 (33RD-WEEK SCHEDULE) (THORAX, ENZYMES)

DAY	08:30-09:30	09:30-10:30	10:30	10:50-12:20	12:20-13:20		13:40-14:40	14:	40-16:00
VENUE	LECTURE HALL I	LECTURE HALL I	:10:5 0	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I	τι	ITORIAL
Monday 30-10-2023	PHYSIOLOGY Transport of CO2 in Blood-2 Re-P-007 Prof Tahir AM	PHYSIOLOGY Heart Sounds CV-P-017 Prof A Qaiser		PLURAL CAVITY-I Re-A-013 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	General Anatomy Thoracic Vertebrea Re-A-006 Prof Tazeen		PHYSIOLOGY Humoral Control of Blood Flow-2 CV-P-009 Prof A Qaiser	TUB (Supervise R A=Lect-F B=Physiolo	/SIOLOGY ERCULOSIS ed by Prof Tahir) e-P-017 Iall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
Tuesday 31-10-2023	CHS Epidemiology of Respiratory Disease Re-CM-002-003 Dr Iqra Zulfiqar	PHYSIOLOGY Heart Failure CV-P-018-019 Prof A Qaiser		PLURAL CAVITY-2 Re-A-013 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	BEHAVIORAL SCIENCES Psychosocial Cough Re-Bhs-002 Dr Zafar Iqbal	NAMAZ & LUNCH BREAK	PHYSIOLOGY Transport of CO2 in Blood-2 Re-P-007 Prof Tahir AM	Vulvular (Supervise C A=Lect-F B=Physiolo	/SIOLOGY Heart Diseases ed by Prof Tahir) V-P-022 Iall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
Wednesday 01-11-2023	HISTOLOLOGY Clinical Correlates ReA-024 Prof Tazeen	PHYSIOLOGY IHD CV-P-020 Prof A Qaiser	BREAK	PLURAL CAVITY-3 Re-A-013 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHARMACOLOGY Antihistamines Re-Ph-002 Dr Zafar Iqbal	NAMAZ & L	PHYSIOLOGY Ventilation Perfusion Ratio-1 Re-P-008 Prof Tahir AM	Endocardi Diseas A=Lect-H B=Physiolo	/SIOLOGY al & Myocardial ses-CV-P-024 lall-I –Dr Uzma ogy-Lab- Dr Bazla stry –Lab-Dr Zahra
	CHS Occupational Lung	EMBRYOLOGY		10:50-12:30 CBL	12:30-13:20		13:40-15:00 TUTORIAL		15:00-16:00
Thursday 02-11-2023	Diseases Re-CM-004 Dr Iqra Zulfiqar	Diaphragm Re-A-016 Prof Tazeen		RESPIRATORY FAILURE Prof Tahir AM, Prof Qaisar, Prof NI, Dr Ghazala R, Prof Tazeen All Demonstrators of Anatomy, Physiology, Biochemistry)	SURGERY ABCs in Trauma Patients Re-P-028 Dr M Asghar		PHYSIOLOGY Artificial Respira A=Lect-Hall- B=Physiology-I C=Biochemistry	ition I .ab	LIBRARY
	PHYSIOLOGY	RADIOLOGY		TUTORIAL- PHYSIOLOGY	PATHOLOGY	13:20- 14:00	14:00-15:30-TUT	DRIAL	15:30-16:00
Friday 03-11-2023	Transport of CO2 in Blood-2 Re-P-007 Prof Tahir AM	Imaging in CVS Disorders CV-P-027		SPIROMETER (Re-P-032) A=Physiology-Lab B=Biochemistry Lab C=Skills Lab	Restrictive Lung Disease Re-Pa-003 Dr Shahjehan Zafar	JUMMA BREAK	PHYSIOLOG Bronchitis –(Re-P A=Lect-Hall- B=Physiology-I C=Biochemistry	-022) I .ab	SDL

FIRST PROFESSIONAL MBBS-2023-BATCH-2

CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

6TH-10TH-NOVEMBER-2023 (34TH-WEEK SCHEDULE) (THORAX, ENZYMES)

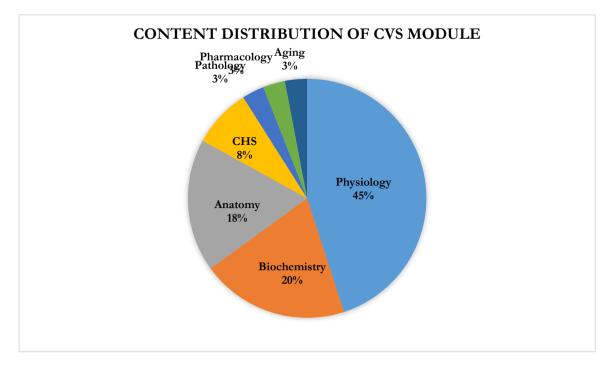
DAY	08:30-09:30	09:30-10:30	10:30-	10:50-12:20	12:20-13:20		13:40-14:40	14:40-16:00
DAY VENUE	LECTURE HALL I	LECTURE HALL I	10:30- 10:50	DISECTION HALL	LECTURE HALL I	13:20- 13:40	LECTURE HALL I	TUTORIAL
Monday 06-11-2023	PHYSIOLOGY Nervous Regulation of Respiration Re-P-013 Prof Tahir AM	PHYSIOLOGY HTN, Vulvular Heart Disease, Pericardial Disease-I CV-P-022-023 Prof A Qaiser		Chest Land Marks on X-Ray Re-A-014 A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY CO Poisoning Re-P-012 Prof Tahir AM		General Anatomy Neurovascular Supply of Thorax Re-A-010 Prof Tazeen	PHYSIOLOGY Venous Thrombosis Embolism CV-P-026 A=Lect-Hall-1 –Dr Uzma B=Physiology-Lab- Dr Bazla C=Biochemistry –Lab-Dr Zahra
Tuesday 07-11-2023	PHYSIOLOGY Hypoxia Re-P-016 Prof Tahir AM	PHYSIOLOGY Endocardial, Myocardial Disease CV-P-024-025 Prof A Qaiser	BREAK	REVISION-1 Respiration A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	PHYSIOLOGY Exercise & Respiration Re-P-016 Prof Tahir AM	LUNCH BREAK	PHARMACOLOGY Anti-Histamines Re-Ph-003 Dr Zafar Iqbal	PHYSIOLOGY Imaging in CVS Disorders CV-P-027 A=Lect-Hall-I –Dr Uzma B=Physiology-Lab- Dr Bazla C=Biochemistry –Lab-Dr Zahra
Wednesday 08-11-2023	PHYSIOLOGY Imaging of CVS CV-P-027-030 Prof A Qaiser	PEDIATRICS Fetal Circulation at Birth CVP-029 Prof Abdul Rehman	B	REVISION-2 Respiration A=DH-Dr Hiba B=Museum-Dr Rabial C=Lecture Hall-I-Dr Rabbiya	HISTOLOLOGY Pneumocystis ReA-028 Prof Tazeen	NAMAZ & LUNCH	PHYSIOLOGY Chemical Control of Respiration Re-P-014 Prof Tahir AM	PHYSIOLOGY Superior Mediastinum Syndrome CV-P-028 A=Lect-Hall-1 –Dr Uzma B=Physiology-Lab- Dr Bazla C=Biochemistry –Lab-Dr Zahra
Thursday 09-11-2023	EC	DB-III		PREPARATORY L	EAVES		PREPAR	RATORY LEAVES
Friday 10-11-2023	EC)B-III		PREPARATORY L	EAVES		PREPAR	RATORY LEAVES

BAHAWALPUR MEDICAL COLLEGE FIRST PROFESSIONAL MBBS-2023-BATCH-2 CARDIOVASCULAR & RESPIRATORY SYSTEM - MODULE-4-5

13TH-17TH-NOVEMBER-2023 (35TH-WEEK SCHEDULE) (THORAX, ENZYMES)

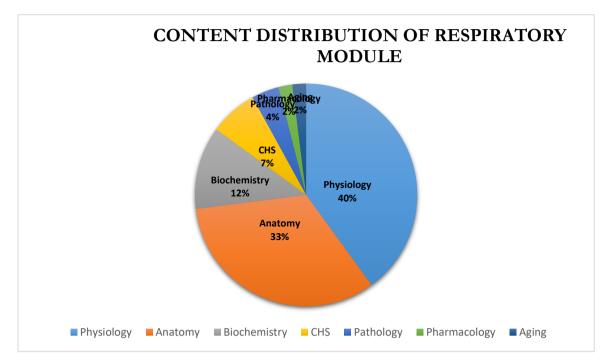
DAY DATE	9:30 AM -12:30 PM GROUP-A	9:30 AM -12:30 PM GROUP-B	9:30 AM -12:30 PM GROUP-C					
Monday 13-11-2023	EOB-III (THEORY) LECTURE HALL I	END OF BLOCK-III EXAM (THEORY) LECTURE HALL 2	EOB-III (THEORY) DISECTION HALL					
Tuesday 14-11-2023		END OF BLOCK III-PREPARATORY LEAVES						
		9:30 AM -14:00 PM						
Wednesday 15-11-2023	EOB-3 (OSPE/OSCE/VIVA (INTERNAL & EXTERNAL) GROUP-B							
Thursday 16-11-2023	EOB	EOB-3 (OSPE/OSCE/VIVA (INTERNAL & EXTERNAL) GROUP-A						
Friday 17-11-2023	EOB	EOB-3 (OSPE/OSCE/VIVA (INTERNAL & EXTERNAL) GROUP-C						

7. DISTRIBUTION & DURATION OF TEACHING ACTIVITIES AMONGST DIFFERENT DISCIPLINE



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Disciplines	LGIS	Demonstration	Practical	CBL	CFRC	Poster Presentation
Anatomy	<u>~</u>	~	<u>~</u>	~		<u>~</u>
Physiology	<u>~</u>	~	<u>~</u>	~	<u>~</u>	<u>~</u>
Biochemistry	<u>~</u>	~	<u>~</u>	~		<u>~</u>
Pathology	<u>~</u>			<u>~</u>		<u>~</u>
Pharmacology	<u>~</u>			~		~
CHS	<u>~</u>			~		~
Aging	<u>~</u>			~		<u>~</u>



Disciplines	LGIS	Demonstration	Practical	CBL	CFRC	Poster Presentation
Anatomy	>	<u>~</u>	<u>~</u>	<u>~</u>		<u>~</u>
Physiology	<u>~</u>	<u>~</u>	<u>~</u>	<u>~</u>	<u>~</u>	<u>~</u>
Biochemistry	<u>~</u>	<u>~</u>	<u>~</u>	<u>~</u>		<u>~</u>
Pathology	~			<u>~</u>		~
Pharmacology	<u>~</u>			<u>~</u>		<u>~</u>
CHS	<u>~</u>			~		<u>~</u>
Aging	✓			~		<u>~</u>

8. LEARNING OBJECTIVES OF CVS & RESPIRATORY SYSTEM

THEORY			
	SPECIFIC LEARNING OUTCOMES	DISCIPLINE	TOPIC
CODE	GROSS ANATOMY	TOTAL HOU	RS = 14
	 Define mediastinum giving its boundaries and Compartments. List the contents of its variouscompartments. Justify the clinical picture of superior mediastinum syndrome anatomically 	Human Anatomy Integrate With Surgery	
CV-A- 001	 Describe the formation, tributaries and termination of Superior Vena Cava. Describe the formation, branches, and relations of ascending aorta, aortic arch and descending thoracic aorta. Discuss the distribution of ascending aorta, aortic 	Human Anatomy	Mediastinun
	 arch and descending thoracic aorta in reference to their branches Describe formation, course and tributaries of azygous, hemi-zygous and accessory hemi zygous veins Describe the course, relations, and distribution of vagus and thoracic splanchnic nerves in relation to nerve supply of heart. 		
CV-A-	 Describe Pericardium and its parts with emphasis on their neurovascular supply and lymphatic drainage Describe the pericardial cavity mentioning transverse and oblique sinuses. Discuss their clinical significance 	Human Anatomy	Pericardium
002	Describe the surgical significance of pericardial sinus	Integrate With Surgery	
	 Describe the anatomical correlates of pericardial rub, pericardial pain, pericarditis, pericardial effusion, and cardiac tamponade. Describe the Anatomical basis for pericardiocentesis. 	Integrate With Medicine	
CV-A- 003	 Describe the external features of heart. List various chambers of heart mentioning their salient features and openings. Describe the arterial supply of heart: coronary arteries and their distribution with special emphasis on collaterals established during ischemia. Describe the sites of anastomosis between right and left coronary arteries with the participating vessels. 	Human Anatomy	Heart
	 Discuss the anatomical correlates of cardiac arterial supply. Describe the anatomical basis for cardiac catheterization 	Integrate With Cardiology/Medicine	
	 Describe the anatomical correlates of elctrocardiography, heart block, atrial fibrillation, 	Integrate With Medicine	

	artificial cardiac pacemaker, cardiac referred pain.		
	• Describe the anatomical basis for echocardiography, coronary angiography. Angioplasty & Coronary Grafts.	Integrate With	
	Describe the features of angina pectoris and myocardial infarction and correlate them anatomically	Cardiology/Medicine	
	 Describe the venous drainage of heart. Describe the alternative venous routes to the heart. 	-	Heart
	 Identify the vessels supplying the heart with their origins/terminations. 	-	
	Describe the Lymphatic of heart	Human Anatomy	
	of Cardiac Plexus.	-	
	Describe components and significance of fibrous Skeleton of heart.	-	
	Describe the cardiac valvesExplain the anatomical basis for valvular heart	Integrate With	
	diseases.Perform surface marking of various anatomical	Cardiology/Medicine Human Anatomy	
	landmarks of heart and great vessels.		
	Perform percussion and auscultation of heart.	Integrate With Medicine	
	• Identify the salient features of heart and great vessels on CT/MRI.	Integrate With Radiology	
CV-A- 004	Describe the surgical importance of pericardial sinus	Surgery	
CV-A- 005	Discuss the anatomical principles of Varicose,	Surgery	
CODE	EMBRYOLOGY & POST-NATAL DEVELOPMENT	TOTAL HOURS=14	
CV-A- 006	• Describe the early development of heart and blood vessels	Human Embryology	Introduction
	• Define parts of primitive heart tube and give its Folding.		
CV-A- 007	0		
CV-A- 007	• Describe the development of various chambers of Heart with emphasis on their partitioning.		Development of
CV-A- 007	Describe the development of various chambers of		Development of Heart
CV-A- 007	 Describe the development of various chambers of Heart with emphasis on their partitioning. Identify various parts of developing heart tube and structures derived from them during embryonic and 		Heart Development of Heart &
	 Describe the development of various chambers of Heart with emphasis on their partitioning. Identify various parts of developing heart tube and structures derived from them during embryonic and fetal life (Models and specimens) Describe the embryological basis of dextrocardia and 		Heart Development of Heart & Development of
	 Describe the development of various chambers of Heart with emphasis on their partitioning. Identify various parts of developing heart tube and structures derived from them during embryonic and fetal life (Models and specimens) Describe the embryological basis of dextrocardia and Ectopia Cordis. 	Integrate with Pediatrics	Heart Development of
CV-A- 007 CV-A- 007-a	 Describe the development of various chambers of Heart with emphasis on their partitioning. Identify various parts of developing heart tube and structures derived from them during embryonic and fetal life (Models and specimens) Describe the embryological basis of dextrocardia and Ectopia Cordis. Describe the development of sinus venosus. List clinically significant types of atrial septal defects along with their embryological basis and 	Integrate with Pediatrics Human Embryology	Heart Development of Heart & Development of
	 Describe the development of various chambers of Heart with emphasis on their partitioning. Identify various parts of developing heart tube and structures derived from them during embryonic and fetal life (Models and specimens) Describe the embryological basis of dextrocardia and Ectopia Cordis. Describe the development of sinus venosus. List clinically significant types of atrial septal defects along with their embryological basis and features. Describe probe patent foramen ovale Describe the partitioning of truncus arteriosus and 		Heart Development of Heart & Development of

	basis of ventricular septal defects		
CV-A-008	• Describe the development of cardiac valves and conducting system.	Human Embryology	
	Describe the development of lymphatic system	Human Embryology	
CV-A-	 Describe the embryological correlates and clinical presentation of developmental defects of heart: Tetralogy of Fallot, Patent ductus arteriosus, Unequal division of arterial trunks, Transpositionof great vessels and Valvular stenosis, Co arctation of aorta 	Integrate with Pediatrics	Development of Artries
009	• Describe the formation and fate of pharyngeal arch arteries	Human Embryology	
	 Describe the anomalies of great arteries emerging from heart: Coarctation of aorta, anomalous arteries 	Integrate with Cardiology/Medicine	
	• Describe the development of embryonic veins associated with developing heart: Vitelline veins, Umbilical Veins and Common cardinal vein and their fate	Human Embryology	Development of Veins
CV-A-	• Describe the formation of superior & inferior vena cava and portal vein with their congenitalanomalies		
010	• With the help of diagrams illustrate the development of superior vena cava, inferior venacava and portal vein		
CV-A-	List the derivatives of fetal vessels and structures:	Human Embryology	
011	Umbilical vein, ductus venosus, umbilical artery, foramen ovale, ductus arteriosus		Fetal Vessels&
	Describe Fetal and neonatal circulationmentioning transitional neonatal circulation with itsclinical implication	Integrate with Pediatrics/ Obgyn	Circulation
CV-A- 012	List clinically significant types of atrial septal defects along with their embryological basis and features. Describe patent foramen ovale. Describe the embryological correlates and clinical presentation of developmental defects of heart: Tetralogy of Fallot, Persistent ductus arteriosus, Unequal division of arterial trunks, Transposition of great vessels and Valvular stenosis	Pediatrics	Congenital Hear defects
		TOTAL H	OURS=4
CODE	MICROSCOPIC ANATOMY (HISTOLOGY PATHOLOGY)		
CV-A- 013	• Describe the microscopic and ultramicroscopic structure of cardiac muscle emphasizing on T-tubules, sarcoplasmic reticulum and intercalated discs.	Histology	Cardiac Muscle
	• Identify, draw and label histological structure of cardiac muscle		
	Describe general histological organization of	I lists la ser	Blood Vessels
CV-A- 014	blood vessels: Tunica intima, media and adventitia.	Histology	Organizations

	of elastic artery, muscular artery, arterioles, vein, capillaries and sinusoids		
CV-A-	• Describe histological features of		Arteries
015	arteries: Muscular arteries, elastic arteries,	Histology	
	Arterioles		

CV-A-016	• Describe histological features of veins and exchange vessels: large veins, medium sizedveins, venules, Capillaries, and sinusoids		Veins
	Compare and contrast the light microscopic structure of arteries and veins	Histology	
CV-A-017	• Describe the histopathological basis of thrombus and embolus formation.	Integrate with Pathology	Thrombus/Embolus formation
CV-A-018	• Explain the histological basis of arteriosclerosis and atherosclerosis	Histology	Arteriosclerosis atherosclerosis
CV-A-019	Describe role of arterioles in hypertension	0,	Hypertension

	PRACTICAL					
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC			
	Histology	Total H	Iours = 3			
CV-A-020	• Identify, draw and label histological structure of cardiac muscle	Histology	Histologicalfeatures of Cardiac Muscle			
CV-A-021	• Identify, draw and label histological sections of elasticity artery, muscular artery, arterioles, vein, capillaries and sinusoids	Histology	Histologicalfeatures of Blood Vessels			

NORMAL FUNCTION							
	Theory						
CODE	MEDICAL PHYSIOLOGY	Total Hours = 75					
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC				
	• Explain the physiological anatomy of cardiac muscle.						
CV-P-001	• Explain the functional importance of intercalated discs.						
	• Discuss the properties of cardiac muscles.						
	• Describe and draw the phases of action potential of ventricle.						

	• Describe and draw the phases of action potential of SA node along with explanation of the mechanism of self-excitation/ Auto rhythmicity of SA node.	Physiology	CardiacMuscle
	• Define and give the duration of the Absolute and relative refractory period in cardiac muscle.		
	• Draw & explain pressure & volume changes of left ventricle during cardiac cycle.		
	• Explain & draw relationship of ECG with cardiac cycle.		
	• Explain & draw the relationship of heart sounds with cardiac cycle.		
	• Enlist, draw, and explain the physiological basis of atrial pressure waves in relation to cardiac cycle.		
	• Define & give the normal values of the cardiac output, stroke volume, end diastolic volume & end systolic volume	Integrate with Medicine	
	Describe the Frank starling mechanism.		
	• Describe the autonomic regulation of heart pumping.		
	• Describe the effect of potassium, calcium ions & temperature on heart function.		
CV-P-002	Define chronotropic effect- positive and negative.		
	• Define the inotropic effect: positive and negative.		
	Define dromotropic effect: positive and negative		
	• Describe the location of adrenergic & cholinergic receptors in heart.	Physiology	Regulationof heart pumping
	• Name the receptors present in coronary arterioles.		
	• Explain sympathetic & parasympathetic effects onheart		
	rate & conduction velocity		
CV-P-003	• Draw and explain the conducting system of heart	Physiology	Conductingsystem of heart
	• Describe the physiological basis and significance of AV nodal delay.		

		Integrate with	
	• Explain the ectopic pacemaker.	Cardiology/	
		Medicine	
	• Enlist, draw, and explain the physiological basis & give durations of waves, intervals, and segments of normal ECG.		
	• Describe the standard limb leads, Augmented limb leads & precordial leads.	Physiology	
	Define Einthoven's Triangle & Einthoven's Law		
	• Explain the physiological basis of upright T wave in normal ECG.		
	• Describe the location and significance of J point in ECG.		
CV-P-004	• Explain the physiological basis of current of injury.		
	• Enlist the ECG changes in angina pectoris.	Integrate with Medicine	Fundamentals of ECG
	• Enlist the ECG changes in myocardial infarction.		LCO
	Plot the mean cardiac axis.		
	• Enlist the physiological & pathological causes of right axis deviation of heart.	Physiology	
	• Enlist the physiological & pathological causes of left axis deviation of heart		
	• Describe the abnormalities of T wave and their causes.	Integrate with Medicine	-
CV-P-005	• Describe the effect of hypokalemia and hyperkalemia on ECG	Integrate with Biochemistry	Effect of electrolyteon
	• Describe the effect of hypocalcemia and hypercalcemia on ECG.		ECG
CV-P-006	• Define tachycardia and enlist its causes.	Integrate	
5.2.000	• Define bradycardia and enlist its causes.	with Medicine	

	Classify arrhythmias		
-	• Explain the physiological basis of sinus arrythmia.		
	• Explain the physiological basis of reflex bradycardia in Athletes.	Physiology	
-	• Explain the carotid sinus syndrome.		
-	• Enlist the causes of atrioventricular block.	Integrate with	-
-	• Explain the types of atrioventricular blocks.	Cardiology/	
	• Explain the ECG changes in 1 st , 2 nd & 3 rd degree heart block.	Medicine	Cardiac
-	• Explain the cause, physiological basis & ECGchanges in Stokes Adam syndrome/ventricular escape.	Physiology	– a rr hythmia
-	• Enlist the causes of premature contractions.	Integrate with	-
	• Explain the causes and ECG changes of prematureatria contractions.	Cardiology/ Medicine	
-	• Explain the physiological basis of pulses deficit.	Physiology	-
-	• Explain the causes and ECG changes in PVC.		-
	• Enlist the causes and ECG findings in Long QT syndrome.	Integrate with	
-	 Explain the causes, physiological basis, features,ECG changes & management of ventricular fibrillation. 	Cardiology/ Medicine	
-	• Explain the causes, physiological basis, features & ECG changes of atrial fibrillation.		
-	• Explain the physiological basis, features & ECG changes of atrial flutter.	Physiology	
	Compare Flutter and Fibrillations	Physiology	-
CV-P- 007	• Explain the functional parts of circulation (arteries, arterioles, capillaries, veins, venules).	Physiology	Organization of Circulation
CV-P- 008	• Explain the pressures in systemic & pulmonary circulation.	Physiology	Blood flow
	• Explain the types of Blood flow and significance of		
	• Reynolds number.		
	• Discuss acute local control of local blood flow.		
OV. 1. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0. 0.	• Discuss acute humoral control of local blood flow.		Local &
CV-P-009	• Explain long term control of local blood flow.	1	Humoral Contro

	• Name the organs in which auto regulation of blood flow occurs during changes in arterial pressure(metabolic & myogenic mechanisms).	Physiology	of Blood flow
	• Explain the role of autonomic nervous system for regulating the circulation.		
-	• Explain the vasomotor center.		
CV-P-010	• Explain the control of vasomotor center by higher nervous centers.		Nervous
-	• Explain emotional fainting/vasovagal syncope.	Physiology	Regulation of
	• Identify vessels constituting micro- capillaries.Enumerate hydrostatic and osmotic factors that under Starling's Hypothesis of capillary Functions.		circulation
	• Explain the role of nervous system in rapid control of arterial blood pressure.		
-	• Explain the regulation of arterial blood pressure during exercise.		
	• Enlist different mechanisms for short term regulation of arterial blood pressure.		
CV-P-011	• Explain the role of baroreceptors in regulation of arterial blood pressure.		
	• Explain the role of chemoreceptors in regulation of arterial blood pressure.		
-	• Make a flow chart to discuss the role of Atrial volume reflexes/Bainbridge reflex in control of blood pressure.	Physiology	Rapid control of arterial blood pressure
	• Make a flow chart to show the reflex responses to increased blood volume which increase blood pressure and atrial stretch.		pressure
	• Describe the role of CNS ischemic response in regulation of the blood pressure.		
-	Explain the Cushing reflex		
	• Explain the role of abdominal compression reflex to increase the arterial blood pressure.		
CV-P-012	• Make a flow chart to discuss the role of renin angiotensin system for long term control of blood pressure.		Role of kidneys in long term Regulationof
	• Make a flow chart to show the regulation of blood pressure in response to increase in ECF volume.	Physiology	Arterial Blood
	• Make a flow chart to show the regulation of blood pressure in response to increase in salt intake.		Pressure
	• Define cardiac output, cardiac index & venous return with their normal values.		

CV-P-013	• Explain the pathological causes of high & low cardiac output.	Integrate with Cardiology/	
	Discuss the factors regulating cardiac output	Medicine	Cardiacoutput
	Discuss factors regulating venous return	Physiology	
CV-P-014	• Explain the regulation of skeletal muscle blood flowat rest & during exercise.	Physiology	Skeletalmuscle circulation
CV D 015	• Explain the physiological anatomy of coronary circulation.		
CV-P-015	• Explain the regulation of coronary blood flow.	Physiology	Coronary
	• Explain the physiological basis of angina, myocardial & sub endocardial infarction		circulation
	Define & enlist different types of shock.	Physiology	
CV-P-016	• Explain the causes, features, and pathophysiology of hypovolemic/hemorrhagic shock.		
	• Explain the causes, features, and pathophysiology of septic shock.		

	• Explain the causes, features, and pathophysiology of	Integrate with	
	neurogenic shock.	Pathology	
	• Explain the causes, features, and pathophysiology of anaphylactic shock.		Circulatoryshock
		Integrate	
	• Discuss the treatment of different types of shock.	with Medicine	
	• Explain the different stages of shock.		
	• Explain the mechanisms that maintain the cardiacoutput & arterial blood pressure in non-progressive shock.		
	• Enlist different types of positive feedback mechanisms that can lead to the progression ofshock.	Physiology	
	• Enlist the different types of heart sounds and explain the physiological basis of each.		
CV-P-017	• Enlist the causes of 3 rd and 4 th heart sounds.	Physiology	
	• Explain the causes & physiological basis of murmurs caused by valvular lesions.		Heart Sounds
	• Enumerate abnormal heart sounds and describe the	Integratewith	
	physiological basis of each.	Medicine	
CV-P-018	• Classify different types of heart failure		
CV-F-018	• Discuss the signs and symptoms of Heart failure.		Heart Failure
	• Discuss the management of Heart failure.		

CV-P-	Discuss the signs and symptoms of: Arrhythmias.	General	Arrhythmias	
019	• Discuss the management of Arrhythmias.	Medicine/	Arrhythmias	
CV-P-020	Enlist various categories of ischemic heart diseases	Cardiology	IschemicHeart	
	• Discuss the signs and symptoms of ischemic heart diseases		Disease (IHD)	
	• Discuss the management of ischemic heart diseases.			
	• Discuss the signs and symptoms of: Hypertension.	-		
CV-P-021	• Discuss the management of Hypertension.		Hypertension	
CV-P-022	Enlist various valvular heart diseases		ValvularHeart	
CV-1-022	• Identify presentations and signs and symptoms of valvular heart diseases		Diseases	
	Outline management strategies			
CV-P-023	Identify various pericardial diseases	General	Pericardial	
	Identify presentations and signs and symptoms	Medicine/	Diseases	
	Outline management strategies	Cardiology		
CV-P-024	• Identify various endocardial and myocardial diseases	General	Endocardialand myocardial	
	Identify presentations and signs and symptoms	Medicine/	diseases	
	Outline management strategies	Cardiology		
CULD 025	Define Peripheral arterial diseases	General	Peripheral	
CV-P-025	Identify symptoms and signs of PAD	Medicine	Arterial Diseases (PAD)	
	Outline management strategies			
	Enlist various sites of venous thromboembolism			
CV-P-026	Identify various symptoms and signs of DVT	General	Venous	
	• Identify various symptoms and signs of pulmonary embolism	Medicine,Surgery	thrombo- embolism	
	Outline management strategies			
CV-P-027	• Identify the salient features of heart and great vessels on CT/ MRI	Radiology	Imaging inCVS disorders	
	Discuss the principles of cardiac catheterization			
CV-P-028	• Justify the clinical picture of superior mediastinum syndrome anatomically	Surgery	Superior mediastinum Syndrome	
CV-P-029	• Describe Fetal and neonatal circulation mentioning transitional neonatal circulation with it clinical implication	ediatrics,Obgyn	Fetal circulation at Birth	

CV-P-030	 Psychological basis of emotional fainting and its impact 	Behavioral Sciences	Emotional Fainting
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC
CODE	MEDICAL BIOCHEMISTRY	Total Hours = 30	
CV-B-001	Classify lipids.	Biochemistry	Classificationn of lipids
CV-B-002	• Discuss the biomedical functions & properties oflipids.	Biochemistry	Functions oflipids & Properties of lipids
CV-B-003	• Classify fatty acids. Discuss the role of trans saturated, saturated, poly- and mono-unsaturated fatty acids in diet on lipid profile.	Biochemistry	Classificationn of fatty
	Discuss lipid peroxidation and its significance		acids
CV-B-004	• Explain the biochemical and therapeutic roles of eicosanoids (prostaglandins, leukotrienes, thromboxane, and prostacyclin)	Biochemistry	Eicosanoids
CV-B-005	 Describe the types, structure, biomedical importance of Lipoproteins Discuss the synthesis, transport and fate of Lipoproteins 	Biochemistry	Circulation Lipoproteins
CV-B-006	Interpret the disorders associated with impairment of lipoprotein metabolism especially atherosclerosisand LDL oxidized	Biochemistry	Hyper lipidemias
CV-B-007	 Explain the sources, properties, and biomedical role of cholesterol Describe the reactions of cholesterol biosynthesisand its regulation & fate. Discuss Genetic basis of the Hypercholesterolemia 	Biochemistry	Cholesterol
CV-B-008	Describe enzymes with reference to: Active sites SpecificityCatalytic Cofactor efficiency Coenzyme Holoenzyme Apoenzyme Prosthetic group Zymogens Location	Biochemistry	Hypercholest erolemia
CV-B-009	 Classify enzymes according to the reaction theycatalyze. Explain the mechanism of enzyme action fromreactants to products (catalysis). a) Illustrate enzyme kinetics in relation to MM b) Equation & Line weaver- Burke plot Discuss the effect of various factors (with specialreference to Km/V max) on enzymatic activity. Substrate concentration Temperature PH 	Biochemistry	Enzyme

CV-B-009	• Explain the regulation of enzymatic activity.		
	a. Compare allosteric regulation with regulation by covalent modification.		
	 b. Discuss the effect of inhibitors on enzymatic activity which includes: 		
	Competitive inhibition Uncompetitive inhibition		
	c. Interpret the effect of organophosphorus poisoning on enzyme activity on basis of given data.		
CV-B-009		Integrate with	
	• Explain the application of enzyme in clinical diagnosis and	Medicine/	
	therapeutic use	Cardiology	
	• Discuss the signs and symptoms of hyperlipidemia	Biochemistry	Type I to V
CV-B-010	• Interpret data related to hyperlipidemia	/ Medicine	hyperlipidemias

CODE	SPECIFIC LEARNING OBJECTIVES	Total Hours	s = 10 + 08 = 18
CODE	y	DISCIPLINE	TOPIC
CV-P-031	• Record an electrocardiogram by correct lead placement and connections.		ECG
CV-P-032	 Perform auscultation of chest to recognize normal heart sounds. 		Heart Sounds
CV-P-033	• Examine neck veins to determine Jugular Venous Pulse.	Physiology	JVP
CV-P-034	• Examine arterial pulse to recognize normal characteristics of pulse.		ArterialPulse
CV-B-011	Perform estimation of Cholesterol by kit method		Cholesterol Estimation
CV-B-012	Perform estimation of HDL, LDL		HDL, LDL Estimation
CV-B-013	Estimation of cardiac markers	Biochemistry	Cardiac Marker Estimation
CV-B-014	• Interpret lab reports based on enzymes for diseases like cardiac disorders and hyperlipidemias		Interpretationn of Lab report

AGING				
CODE	SPECIFIC LEARNING OBJECTIVES	Total Hours = 5		
CODL		DISCIPLINE	TOPIC	
CV-Ag-001	• Discuss the effect of age on blood vessels with reference to hypertension		Hypertension	
CV-Ag-002	• Discuss the risk of cardiac attack in old age and weather conditions	Physiology/	CardiacAttack	
CV-Ag-003	• Discuss the effect of age on valvular system of the heart.	Geriatrics/ Medicine	Valvulardiseases	
CV-Ag-004	• Discuss the effect of age on neural conduction of the heart in relation to arrythmia.		Arrythmia	
CV-Ag-005	• Discuss the protective role of female hormone against CVS diseases in women of reproductiveage group	Physiology/ Obstetrics and Gynecology	Role of female hormone on CVS disease	

PATHOPHYSIOLOGY AND PHARMACOTHERAPEUTICS				
		Total Hours = 5+5= 10		
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC	
CV-Pa-001	Classify types of thrombosis, embolism, and infarction		Hemodynamics and CVS	
CV-Pa-002	• Discuss the pathophysiology of thrombosis, embolism, and infarction		Atherosclerosis	
CV-Pa-003	Identify the types and causes of hypertension		Hypertension	
CV-Pa-004	Discuss the pathophysiology of atherosclerosis, hypertension, and shock		Shock	
CUD 005	• Discuss the clinical consequences of hypertension and atherosclerosis	Pathology	CardiacFailure	
CV-Pa-005	Classify the types of heart failure	-	CardiacFailure	
	Identify the causes leading to heart failure			
CV-Pa-006	Identify the types of ischemic heart disease		IschemicHeart	
	• Discuss the pathophysiology of different types of ischemic heart disease		Disease	
CV-Ph-001	• Outline the pharmacological concepts of drugs used in hypertension.		Anti hypertensive drugs	
CV-Ph-002	Outline the pharmacological concepts of drugs used in angina.		Antianginaldrugs	
CV-Ph-003	• Outline the pharmacological concepts of drugs used in arrythmias.	Pharmacologyy	Antiarrhythmics drugs	
CV-Ph-004	• Outline the pharmacological concepts of drugs used in cardiac failure.		Drugs forcardiac failure	

CV-Ph-005	Outline the pharmacological concepts of drugs usedin peripheral vascular diseases.		Drugs for peripheralvascular diseases
	DISEASE PREVENTION & IMPACT		
CODE			lours = 15
	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC
CV-CM-001	• Describe the various strategies and models to prevent diseases.		Disease Prevention Models
	Describe primordial prevention and its application		
CV-CM-002	to preventing CVS diseases.		
	Depict the concept of primary prevention in context		Primordial Prevention
	to CVS and able to apply on CVS diseases.		Prevention
	11.5	Community	
CV-CM-003	Discuss the basic concept of health promotion and its application to CVS.	Medicine and Public Health	Health Promotion
	its application to CV3.		110110101
CV-CM-004	• Discuss various methods of behavioral change interventions at community level.		Behavioral Change Intervention
CV-CM-005	• To apply secondary and tertiary preventions on CVS diseases (coronary heart disease, ischemicheart disease, hypertension)		Secondary & Tertiary Prevention
CV-CM-006	Describe the concept of cardiovascular diseases as non-communicable diseases		Non- communicable disease
CV-CM-007	• Identify the risk factors in the community for CVS diseases.		Risk factor assessment of CVS
	• Learn and apply interventions to prevent the risk factors in community.		diseases
CV-BhS-001	• Identify and deal with the various psychosocial aspects of cardiovascular conditions (such as Hypertension, Coronary artery disease, Heart failure, Arrythmias, and other cardiovascular conditions) on Individual, Family and Society.	3ehavioralSciences	Personal, Psychosocial and vocationalissues

CARDOVASCULAR SYSTEM MODULE

Objectives	Skills	Miller's PyramidLevel reflected
Auscultation of heart sounds	Heart sounds	Shows
Detection of ankle swelling/edema – pitting /non-pitting	Edema	Shows
Abdominal jugular reflex	JVP	Shows
Identify main organs of the thoraxon CXR	CXR	Shows
Perform detection of pedal andcarotid pulses	Pedal and carotid pulse	Shows
Perform cervical and axillary lymphnode examination	Lymph node Examination	Shows

LEARNING OUTCOMES OF RESPIRATORY SYSTEM MODULES			
CODE	SPECIFIC LEARNING OUTCOMES	DISCIPLINE	TOPIC
	GROSS ANATOMY	TOTAL H	OURS =30
	• Describe the anatomical features and neurovascular supply of nasal cavity	Human Anatomy	Upper
Re-A-001	Describe the anatomical features and	Human	Respiratorytract
	neurovascular supply of pharynx	Anatomy	
	Describe the anatomical features and	Human	_
	neurovascular supply of larynx	Anatomy	
Re-A-002	• Describe the anatomical features of the Trachea with its extent, relations, neurovascular supply and lymphatics.	Human Anatomy	Trachea
Re-A-003	• Give the boundaries of thoracic cavity, superior and inferior thoracic apertures andlist the structures contained/ traversing them.	Human Anatomy	ThoracicCavity
	• Describe the anatomical correlates of Thoracic inlet syndrome & Thoracic outlet syndrome.	Integrate with Surgery	
	• Identify and differentiate the typical from atypical ribs.		

	• Describe the anatomical features of ribs and give their attachments.	Human Anatomy	
	Describe the anatomical correlates of supernumerary cervical rib.	Integrate with Surgery	=
	• Classify the articulations of the ribs.	Human Anatomy	_
Re-A-004	• Describe the anatomical features of these articulations.		Rib Cage
	• Describe the movements with the muscles producing articulations.	Human Anatomy	-
	• Describe the effects of fracture to the neck of rib and give its anatomical justification	Integrate with	-
	• Describe the anatomical correlates of Flail Chest.	Orthopedics	
	• Describe the anatomical correlates of Thoracotomy	Integrate with Surgery	
Re-A-005	• Define the attachments, relations, nerve supply and actions of intercostal muscles	Human Anatomy	Intercostalspace
	• Define an intercostal space and give details of its contents		
	• Describe the anatomical correlates of intercostal incisions	Integrate with Surgery	_
	• Describe the anatomical features and attachments on typical & atypical thoracicvertebrae.		
	• Differentiate between typical and atypical vertebrae		
Re-A-006	• Explain the thoracic part of vertebral column (normal curvature, intervertebral joints, muscles & fascia of the back, blood supply, lymphatic drainage, nerve supply of back) Associated Clinical conditions -Kyphosis, Scoliosis	Human Anatomy	Thoracic Vertebrae
	Describe the bony features and attachments on the sternum	Human Anatomy	
Re-A-007	Describe the anatomical correlates of median sternotomy.	Later i il	
ice 11 007	Describe the anatomical correlates of sternal biopsy.	Integrate with Surgery	Sternum
	• Describe the presentation of sternal fractures and correlate it anatomically	Integrate with Orthopedics	
Re-A-008	• Describe the endo thoracic fascia with its attachments.		Connectivetissue of thorax

	• Describe the supra-pleural membrane with its attachments.	Human Anatomy	
Re-A-009	• Classify the joints of the thorax mentioning their articulations, movements with themuscle producing them.	Human Anatomy	Joints ofthorax
	• Describe the mechanism of thorax: pump handle and bucket handle movements.	- Human Anatomy	
Re-A-010	• Describe the origin, course, relations and distribution of intercostal nerves and vessels	Human Anatomy	
	• Describe the course and relations of Internal thoracic vessels.		Neurovascular supply of thorax
	Describe the alternate routes of venous drainage in blockage of superior/ inferiorvena cava	Integrate with medicine	
	• Describe the cutaneous nerve supply and dermatomes of thorax.	Human Anatomy	
Re-A-011	• Give anatomical justification of the manifestations of herpes zoster infection on thoracic wall.	Integrate with medicine	Cutaneous Nerve supply of thorax
	Discuss anatomical correlates of intercostal nerve block	Integrate with Anesthesia	
Po A 012	Name the parts of diaphragm mentioning their attachments and neurovascular supply	Human Anatomy	Diaphragm
Re-A-012	 Explain the role of diaphragm in respiration Enumerate the diaphragmatic apertures with their vertebral levels, mentioning the structures traversing them. 	Integrate with medicine	
Re-A-013	 Describe the pleura giving its parts, layers, neurovascular supply, and lymphaticdrainage Describe the pleural cavity giving its 	Human Anatomy	Pleural
	 recesses and the lines of pleural reflection Describe the anatomical correlates of pleural pain pleurisy, pneumothorax, pleural effusion 	Integrate with Medicine	Cavity
	Describe the anatomical features, relations of lungs		
Re-A-014	• Describe the neurovascular supply and lymphatic drainage of lungs.		Luga
Ke-A-014	Compare and contrast the anatomical features and relations of right and left lung	Human Anatomy	Lungs
	• Describe the root of the lung and pulmonary ligament with arrangement of structures at the hilum		
	 Define Bronchopulmonary segments. Give their vascular supply, lymphatic drainageand clinical significance 		

	 Describe the anatomical correlates of chest tube intubation Describe the anatomical correlates of thoracentesis Explain the pathophysiology of Atelectasis. 	Integrate with surgery Integrate with	
	Describe the anatomical correlates of bronchoscopy	pulmonology Integrate with pulmonology	
	Describe the anatomical basis for medico- legal significance of lungs in determining theviability of newborn	Integrate with ForensicMedicine	
	Identify various anatomical landmarks on chest X-Rays, CT and MRI	Integrate with Radiology	
	EMBRYOLOGY & POST-NATAL DEVELOPMENT	TOTAL HO	OURS = 6
Re-A-015	• Describe the development of ribs, sternum, and thoracic vertebrae. Give the associated congenital malformations	Human Embryology	Bony components of thoracic cavity
	 List the embryological sources of the diaphragm. Describe the events taking place in the development and descent of the diaphragm 	Human Embryology	
Re-A-016	• Describe the embryological basis of congenital anomalies of the diaphragm: diaphragmatic hernias, eventuation of diaphragm, epigastric hernia, hiatal hernia, retrosternal hernia	Integrate with Pediatrics	Diaphragm
	• Describe the development of upper respiratory tract: larynx and trachea	Human Embryology	
Re-A- 017	• Describe congenital anomalies of larynx and trachea: laryngeal web, laryngeal atresia,tracheal stenosis and atresia.	Integrate with Pediatrics	Upper Respiratory Tract
	• List the types of tracheo-esophageal fistulas. Describe their embryological basis and clinical presentation	Integrated with Surgery	Lungs
Re-A-	• List the phases of lung development with their time periods. Describe the eventstaking place in each phase	Human Embryology	
018	• Describe the embryological basis and clinical presentation of respiratory distresssyndrome/Hyaline membrane disease.	Integrate with Pediatrics	

	MICROSCOPIC STRUCTURE	Total Hours = 4	
Re-A-019	Give the general histological organization of respiratory system.	Histology	Organization of respiratory system
Re-A-020	Describe the microscopic and ultra-microscopic structure of respiratory epithelium	Histology	Respiratory epithelium
Re-A- 021	Describe the histology of blood-air barrier	Histology	blood-air barrier
Re-A- 022	Describe the histological features of epiglottis and larynx	Histology	Epiglottis & larynx
Re-A- 023	Describe the histological features of trachea and lungs	histology	trachea and lungs
Re-A-024	 Explain the histological basis of: Coughing Atelectasis Infant respiratory distress syndrome 	I	
	Diffuse alveolar damageLung carcinoma	Integrate with pathology	Clinical correlates

	ANATOMY PRACTICAL			
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC	
	Histology	Total H	lours = 5	
Re-A-025	• Identify, draw and label the histologic sections of epiglottis and larynx.		Epiglottis&larynx	
Re-A-026	• Describe the histological features of bronchialtree: trachea, bronchi, bronchioles, alveoli		Trachea & Organizationof respiratory system	
	• Identify, draw and label the histological sections of bronchial tree: trachea, bronchi, bronchioles, alveoli, Lung	Histology		
Re-A-027	• Describe the mucosal changes encountered in the trachea-bronchial tree		Bronchial tree & Lung	
	• Compare and contrast the histological features of various components of bronchial tree: trachea, bronchi, bronchioles, alveoli.			
Re-A-028	• Describe, compare and contrast the light and electron microscopic features of type I and type II pneumocytes		Pneumocytes	
	• Draw the compliance diagram of air filled and saline filled lungs	Medical Physiology		

	THEORY			
	MEDICAL PHYSIOLOGY	Total H	Hours = 45	
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC	
	 Enlist the muscles of inspiration and expiration in quiet breathing Enlist the muscles of inspiration and expiration in labored breathing 	Integratewith Anatomy		
Re-P-001	Explain the components of the work of breathing	Medical	- D di	
	 Discuss the mechanics of pulmonary ventilation Explain periodic breathing 	Physiology	Breathing	
	Explain the causes and pathophysiology of sleep apnea	Integratewith medicine	-	
	Define lung compliance			
	Enlist the factors that affect lung compliance	-		
	Draw the Compliance Diagram of Filled & Saline Filled Lungs.	Medical Physiology		
Re-P-002	• Enlist the Components of Surfactants.		Lung Compliance	
ite i 002	• Describe the role of surfactant in Lung Compliance.			
	• Explain the Role of surfactant in Premature Babies.	Integrate with Pediatrics		
Re-P-003	• Define the different lung volumes and capacities and their clinical significance.			
	Discuss fev1/FVC ratio and its clinical significance Enlist the lung volumes and capacities that cannot	Medical		
	• Enlist the lung volumes and capacities that cannot be measured by spirometer.	Physiology	Lung Volumes & Capacities	
	• Define Dead Space and Explain its Type.		Capacities	
	Discuss FEV1/FVC ratio in relation to Bronchial Asthma.			
	Discuss FEV1/FVC ratio in relation to Chronic Obstructive Pulmonary disease/restrictive lung diseases	Integrate with Pulmonologist		
	Discuss FEV1/FVC ratio in relation to pulmonary embolism			
Re-P-004	Define alveolar ventilation.		Alveolar Ventilation	
	Define minute respiratory volume			
	Explain the ultrastructure of respiratory membrane			
Re-P-005	• Discuss the factors affecting diffusion of gases across the respiratory membrane	Medical Physiology	Principles of Gaseous Exchange	
	• Explain the diffusion capacity of respiratory membrane for oxygen and carbon dioxide			
	• Define alveolar, pleural and trans pulmonary pressure.			
	• Explain differences in the partial pressures of atmospheric, humidified, alveolar air and explain			

	physiological basis of change in each pressure		
	• Explain different forms of Oxygen in Blood.		
	Draw and explain oxy hemoglobin dissociation curve		
	• Enlist the factors that cause rightward shift of oxy hemoglobin dissociation curve.	Medical Physiology	Transport of Oxygen in Blood
Re-P-006	• Enlist the factors that cause leftward shift of oxy hemoglobin dissociation curve		
	• Explain The Bohar's Effect.		
	• Define; enlist the types, and causes of cyanosis	Integrate with Medicine	_
Re-P-007	• Enlist different forms in which CO2 is transported in the blood.		Transport of CO2 in Blood
	• Explain the Carboxy hemoglobin dissociation curve.	Medical	
	Explain the Haldane effect.	Physiology	
	• Explain the chloride shift/Hamburger phenomenon.		
	• Define the respiratory exchange ratio (RER)		
	• Explain the alveolar oxygen and carbon dioxide pressure when VA/Q = infinity, zero and normal		
Re-P-008	• Explain the concept of physiological shunt when VA/Q ratio is less than normal	Medical Physiology	VA/Q (Ventilation Perfusion Ratio)
	• Explain the concept of physiological dead space when VA/Q ratio is above normal		
	 Enlist the respiratory & non-respiratory functions of lungs. 		
Re-P-009	 Explain the nervous control of bronchiolar musculature 	Medical Physiology	Protective Reflexes
	• Trace the reflex arc of cough reflex and sneeze reflex		
	• Explain the principal means by which acclimatization occurs	Medical Physiology	Activation & Space
Re-P-010	• Explain the events that occur during acute mountain sickness		
F	• Enlist the features of chronic mountain sickness		

Re-P-011	• Explain the pathophysiology, features, prevention and treatment of decompression sickness.	Medical Physiology	Deep seadiving
D. D. 042	Draw and explain the effect of CO poisoning on oxyhemoglobin dissociation curve	Medical Physiology	
Re-P-012	• Explain the pathophysiology, features, and treatment of CO poisoning.	Integratewith medicine	- CO poisoning
D. D. 042	• Enumerate the components of respiratory centers and explain their functions.		
Re-P-013	• Explain the inspiratory RAMP signal	Medical Physiology	Nervous regulation of
	• Explain the Herring Breuer reflex/lung inflation reflex and its clinical significance		respiration
	• Explain the location of chemo sensitive area (central chemoreceptors) and peripheralchemoreceptors)		
Re-P-014	• Explain the effect of hydrogen ions & carbon dioxide on the chemo- sensitive area	Medical	Chemicalcontrol of respiration
	• Explain the role of oxygen in the control of respiration/peripheral chemoreceptors	Physiology	
Re-P-015	• Explain the regulation of Respiration during Exercise	Medical Physiology	Exercise and respiration
	• Enlist the effects of acute hypoxia		
Re-P-016	• Explain the hypoxia inducible factor a master switch for body response to hypoxia	Medical Physiology	Hypoxia
	• Define and explain different types of hypoxias	Integratewith Medicine	пурохіа
Re-P-017	• Explain the pathophysiology of Tuberculosis.	Integratewith Pathology	Tuberculosis
Re-P-018	Describe the pathophysiology of Pneumonia	Integrate with Pathology	Pneumonia
	Define Dyspnea		
Re-P-019	• Enlist different causes of dyspnea	GeneralMedicine	Dyspnea
	Differentiate between cardiac and respiratory dyspnea	1	

	Outline management strategies for dyspnea		
	• Enlist the causes of Pneumothorax		
Re-P-020 -	• Describe the signs and symptoms of Pneumothorax	Surgery	Pneumothorax
	• Enlist the causes of Pleuritis		
Re-P-021	• Describe the signs and symptoms of Pleuritis		Pleuritis
-	Discuss the management of Pleuritis		
	• Enlist the causes of Bronchitis		
Re-P-022	• Discuss the signs and symptoms of Bronchitis		Bronchitis
-	Discuss the management of Bronchitis		
	Classify different types of pneumonia		
Re-P-023	• Discuss the sign symptoms of pneumonia		Pneumonia
-	• Discuss the management of pneumonia	GeneralMedicine	
	Classify different types of asthma		
Re-P-024	• Discuss the signs and symptoms of asthma		Asthma
	• Discuss the management of asthma		
D. D. 025	Classify different types of Tuberculosis		
Re-P-025	• Discuss the signs and symptoms of tuberculosis		Tuberculosis
-	Discuss the management of Tuberculosis		
	• Classify different types of acute respiratory distress syndrome		
Re-P-026	• Discuss the signs and symptoms of acute respiratory distress syndrome	GeneralMedicine	Acute respiratory distress syndrome
	• Discuss the management of acute respiratory distress syndrome		
	Define respiratory failure		
Re-P-027	• Describe various types of respiratory failure	GeneralMedicine	RespiratoryFailure
	• Enlist various causes of respiratory failure		I J
	• Outline management strategies of respiratory failure		
Re-P-028	• Describe ABC in a trauma patient	Surgery	First Aid in Surgical Patients

	MEDICAL BIOCHEMISTRY	Total Hours = 15	
Re-B-001	• Explain and interpret the pedigree of single genedefect i.e., Emphysema and cystic fibrosis (autosomal recessive)	Medical Biochemistry	Geneticdefects
Po B 002	Explain the biochemical significance of phospholipids	Medical Biochemistry	Dhospholizida
Re-B-002	• Interpret Respiratory Distress syndrome on the basis of given data	Integrate with Physiology	- Phospholipids
Re-B-003	• Describe the structure, synthesis, degradation and functions of Elastin	Medical Biochemistry	Elastin
KC-D-005	• Discuss the pathophysiology of Emphysema.	Integrate with Pathology	
	Discuss the concept of acid base balance		
Re-B-004	• Interpret metabolic and respiratory disorders of acid base balance on the basis of sign, symptoms and ABG findings.	Medical Biochemistry	Acid basebalance
	• Describe the Clinical interpretation of acid base Balance.	Integratewith Medicine]

Practical			
CODE	PRACTICAL	Total I	Hours = 10
	SPECIFIC LEARNING OBJECTIVES	DISCIPLIN E	ΤΟΡΙϹ
Re-P-029	• Perform the clinical examination of chest for therespiratory system (inspection, palpation, percussion, Auscultation)		Clinical Examination of Chest
Re-P-030	• Determine Peak Expiratory Flow rate with PeakFlow Meter	Medical Physiology	Peak Expiratory Flow rate measurement
Re-P-031	Determine Blood Oxygen Saturation with finger Pulse Oximeter	-	Oxygen Saturation
Re-P-032	Determine Respiratory Volumes & Capacities with Spirometer/ Spiro lab. (FEV1/FVC ratio)		
Re-P-033	• Student should be able to Record the movements of chest by stethograph		
Re-B-005	• Determine the pH of the solution by pH meter	Medical Biochemistry	Determination n of pH

PATHOPHYSIOLOGY AND PHARMACOTHERAPEUTICS					
		Total H	ours = 5+3		
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC		
Re-Ph-001	 Identify the drugs for Cough Suppression & Expectoration. 	Pharmacology& Therapeutics	Cough Suppressants		
	• Explain the mechanism of action and adverse effects of cough suppressants				
Re-Ph-002	• Explain the mechanism of action and adverse effects of anti-histamines		Anti- histamines		
Re-Ph-003	• Explain the mechanism of action and adverse effects of anti-asthmatics		Anti- asthmatics		
Re-Pa-001	Describe the pathophysiology of acute respiratory distress syndrome		Acute Respiratory Distress Syndrome		
Re-Pa-002	• Describe the pathophysiology of obstructive lung disease	Pathology	Obstructive lung Disease		
Re-Pa-003	• Describe the pathophysiology of Restrictive Lung Disease		Restrictive Lung Disease		

	AGING		
	Aging theory	Total	Hours = 3
CODE	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC
Re-Ag-001	• Discuss the effect of age on decreased lungcompliance		Age- inducedlung fibrosis
Re-Ag-002	• Discuss the role of age on respiratory clearance leading to recurrent inflammatory processes at theciliated respiratory epithelium	Pathology	Increased vulnerabilityto infection & neoplasia

	DISEASE PREVENTION	& IMPACT	
CODE		Total H	lours = 10
-	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	ТОРІС
	• Identify the common risk factors of acute respiratory infections with emphasis on smoking	CommunityMedicine	D
	• Discuss preventive strategies of different problems related to respiratory system	and Public Health	Prevention ofacute respiratory infections (ARI)
Re-CM-001	• Enlist the common vaccines used for the prevention of ARI		
	• Explain the role of vitamins in the respiratory tractinfections	Integrate with Biochemistry	
Re-CM-002	• Explain the effect of air pollutants on the respiratory system		Interaction of environment &
Re-CM-003	• Describe the burden of respiratory diseases	CommunityMedicine	Respiratory system
Re-CM-004	• Enlist the common respiratory diseases related tooccupation	and Public Health	Epidemiology of respiratoryDiseases
Re-BhS - 001	• Identify the psychosocial factors leading to dyspnea.		OccupationalLung Diseases
Re-BhS-002	• Identify the psychosocial factors leading to psychogenic cough.	Behavioral Sciences	Dyspnea
Re-BhS-003	• Identify and deal with the various psychosocial aspects of Respiratory conditions (such as Asthma, COPD, Tuberculosis, Cystic Fibrosis, Sleep Apnea) on Individual, Family and Society.		Psychogeniccough

RESPIRATORY SYSTEM MODULE

Objective	Skill	Miller's PyramidLevel Reflected
Auscultation of Chest	Chest sounds	Shows
Detection of clubbing	Clubbing	Shows
Performance and significance of Arterial blood gases	ABGs	Shows
Identification of pneumonic patchon chest x ray	Pneumonia CXR	Shows
Identification of COPD on chest xray	COPD CXR	Shows
Administering inhaler to a patient	Inhaler use	Shows

9. OPERATIONAL DEFINITIONS

OPERATIONAL DEFINITION OF DIFFERENT TEACHING STRATEGIES

OPER	ATIONAL DEFINITION OF DIFFERENT TEACHING STRATEGIES
Following are a few of Instructions sho	culum also needs a diversity of educational Vernacular for the different learning styles. v of recommended Instructional Strategies. It is advised that at least three different methods ould be adopted in the institutional Planning. This will enable the diversity of Learning
patterns to be facil	
Interactive Session (Large Group LGIS)	 Lecture format is the most widely used approach to teaching especially in a large class size with average attention span of 20-30 mins. Interactive lecturing involves a two-way interaction between the presenter and the participants. Interactive methods like brainstorming, buzz group, simulation, role play, and clinical cases canbe used. Significance of its usage: Relaxed environment Diverse opinions
	 Active involvement Increase attention and motivation. Independence and group skills. Cost effective. Suitable for taking advantage of available audiovisual technologies
Team Based learning (TBL)	 TBL is a uniquely powerful form of small group learning. It provides a complete coherent framework for building a flipped course experience. There are four essential elements of TBL which include: Teams must be properly formed and managed 5-7 students). Getting students ready. Applying course concepts Making students accountable Significance of its usage Students are more engaged. Increased excitement in TBL classroom. Teams outperform best members. Students perform better in final and standardized exams.
Problem Based Learning (PBL)	 Students perform better in mar and standardized exams. It is an instructional student-centered approach in which students work in small groups on a health problem. Identifying their own educational needs. Being responsible for the acquisition of the knowledge required to understand the scenario. Significance of its usage Teamwork Critical evaluation of literature Self-directed learning. Use of resources Presentation skills Leadership Respect for Colleagues view.
Case Based Learning (CBL)	 Respect for Colleagues view. It is an inquiry structured learning experience utilizing live or simulated patient cases to solve, or examine a clinical problem, with the guidance of a teacher and stated learning objectives.

	Significance of Its Usage
	• Induce a deeper level of learning by inculcating critical thinking skills.
	 Flexibility on use of case
	 Helps students acquire insightful information.
	Stay abreast with novel advancements in healthcare
	 Tutorial is a class or short series of classes, in which one or more instructors provides intensive instruction on some subject to a small group. Its purpose is to explore student point of view for discussion.
	 It directed reflective learning skills.
Tutorials	
	Significance of Its Usage
	• Develop and assess the extent of background knowledge of students which enables them to properly understand concepts which may not have been understood in lectures.
	 Develop problem-solving skills. Develop practice of self-learning. Reduced time to understand the topic.
Reflective	 It is a metacognitive process that occurs before, during and after the situation with the purpose of developing greater understanding of both the self and situation so that future encounters with the situation are informed from previous encounters.
Writing	
	Significance of its usage
	Questioning attitude and new
	perspectives.Areas for change and improvement.
	 Respond effectively to new challenges.
	 Critical thinking and coping skills
	 It is a teaching method which provides descriptive information about a clinical patientscenario and to share this educational experience with the general medical and scientific community. It prepares students for clinical practice, using authentic clinical cases by linking theory to practice with the help of inquiry-based learning methods.
	Significance of its usage
Case	
Presentations	Cultivate the capacity for critical analysis.
	Judgment and Decision making.
	• Facilitate creative problem solving.
	Allow students to develop realistic solutions to complex problems
	Teaching and learning that occurs with actual patient as the focus.
	It occurs in wards, emergency departments, operating rooms, and high dependency units.
D 1 ' 1	Significance of its usage
Bedside Teaching	Stimulus of clinical contact.
Teaching	Psychomotor skills
	Communication skills
	• Language skills.
	• Interpersonal skills
	Professional attitudes and empathy
	Role modeling
	Person, device or set of conditions, which attempts to present education and evaluation of problems authentically.
Simulation	The student or trainee is required to respond to the problems as s/he would under natural circumstances.
omuation	Significance of its usage
	• Safety for patients Liberty to make mistakes.

	Manageable/variable complexity of tasks
	• Opportunity to develop self-efficacy before real patient encounter.
	Repeatability of tasks.
	Learning at different pace is permissible
	 It refers to specifically equipped practice rooms functioning as training facilities offering hands on training for the practice of clinical skills within non-threatening environment prior to their real-life application. This applies to both basic clinical skillsas well as complex surgical skills.
	Significance of its usage
Skills	• Controlled, anxiety-free, and risk-free learning environment to students.
Laboratories	• A platform for repeated practice for mastery in relevant clinical skills.
	 Increase the preparedness of student learners before transitioning to the real hospital setting.
	Build strong communication skills.
	• Enable learners to make critical decisions.
Case Based	Clinical Case based conferences allow clinicians and medical students to present difficult case material and include discussions of diagnostic, clinical formulation, and/or treatment issues.
Conference	Significance of its usage
	Provides detailed (rich qualitative) information.
	• Provides insight for further research.
	Permitting investigation of otherwise impractical (or unethical) situations.
Lab Practical	Lab practical involve things like identifying a structure, a type of stain through a microscope, a problem with a preparation, reading biochemical test results and answering safety questions. These simulations allow students to attempt theexperiments in the laboratory in a risk-free way that provides the opportunity to makemistakes and learn how to correct them using the immediate feedback generated. Significance of its usage Enhance mastery of subject matter.Develop scientific reasoning.
	Develop practical skills. Develop teamwork abilities. The demonstration method in teaching can be defined as giving a demo or performing a
	specific activity or concept. It is a teaching-learning process carried outin a very systematic manner.
Demonstrations	Significance of its usage
	 Promotes learning and correlates theory with practice.
	• Sharpens the observation skills.
	 Sustain interests in learning environment
	 Helps teacher to evaluate student's response.
Ward Rounds	It is a composite clinical practice to review inpatients management and progress, tomake decisions about further investigations, treatment options and discharge from hospital. It is an opportunity for clinicians, students, and patients to participate in education and training at bedside. Significance of its usage
	Patient menagement shills
	management skills History taking
	History taking Physical
	examination Time
	management skills
	Communication skills

9. ASSESSMENT POLICY

STATUES

1. The First Professional MBBS Examination shall be held at the end of first year MBBS class

2. Every candidate shall be required to study contents of Anatomy (including Histology), Physiology, Biochemistry, Behavioural Sciences, Community Medicine & Public Health, Pathology, Pharmacology & Therapeutics, Islamic Studies/Ethics and Pakistan Studies, Clinical skills and Professionalism, Ethics, Research and Leadership. The teaching and assessment shall be done in three modular blocks

- 3. There will be four papers in the professional examination. Three papers shall be based on contents of three Blocks and the fourth paper on contents of Islamic Studies/Ethics and Pakistan Studies:
 - a. Paper 1 will be based on contents of Block 1;
 - b. Paper 2 will be based on contents of Block 2;
 - c. Paper 3 will be based on contents of Block 3.
 - d. Paper 4 will be based on contents of Islamic Studies/Ethics and Pakistan Studies
- 4. Each paper will comprise of "Written' and 'Oral/Practical/Clinical examinations except the paper of Islamic Studies/Ethics and Pakistan Studies, which shall comprise of written component alone.
- 5. The Written and Oral/Practical/Clinical examinations in each paper will carry 150 marks each, making the total marks of 300 for each paper of papers 1.2. And 3.
- 6. Total marks of the First Professional Examination will be 1000, however marks of Islamic Studies/Ethics and Pakistan Studies shall not be counted towards merit determination and determination of positions in the examination.
- 7. Major content areas of the year are from
 - a. Anatomy including applied/clinical Anatomy,
 - b. Physiology including applied/clinical Physiology &
 - c. Biochemistry including applied/clinical Biochemistry
- 8. The Applied/Clinical content for the Anatomy, Physiology and Biochemistry shall be based on clinical correlations.
- 9. Minor content areas of the year are from Behavioral Sciences, Community Medicine & Public Health, Pathology, Pharmacology & Therapeutics, Clinical Foundation I and PERLS I.

10. Written Examination

- **4** There will be one written paper in each of the Papers 1, 2, and 3,
- Each written paper will consist of One-best-type' Multiple Choice Questions (MCO) and Structured Essay Questions (SEQ) in a ratio of 70:30 %
- Lach MCQ will have five options (one best response and four distractors) and will carry one (01) mark
- 4 There will be no sections within an SEO, and it will be a structured question with five (05) marks each.
- SEO's will only be based on the major content areas of the year
- ↓ There will be total of 85 MCQs and 07 SEOS in every written paper Papers 1,2, and 3.
- **4** The duration of each written paper will be 180 minutes (03 hours)
- **4** The MCQs section will be 110 minutes duration and the SEQ section 70 minutes.

11. Oral/Practical/Clinical Examination

- **4** There will be an Oral Practical/Clinical examination in each of Papers 1 2, and 3.
- There will be a total of twelve (12) OSPE/OSCE/Viva stations in each Oral/Practical/Clinical examination.
- ↓ There will be seven (07) Observed OSPE stations from major subject areas.
- There will be two (02) Observed OSCE stations, 01 from C-FRC1 and 01 from PERLs-1 in each Oral/Practical/Clinical examination.
- **4** There will be three (03) structured viva stations in each Oral/Practical/Clinical examination.
- ↓ Each OSPE/ OSCE will carry night (08) marks.
- Each structured viva station will carry 16 marks (8 marks each for internal and external examiner)
- **4** The duration of each Oral/Practical/Clinical examination will be 150 minutes (2.5 hours).

- Time for each OSPE and OSCE station will be eight (08) minutes Time for each structured viva station will be 20 min (10 min for each examiner)
- 12. Every candidate shall take the examination in the following Blocks/subjects of First Professional MBBS Examination

A. Block 1 (Foundation Hematopoietic & Lymphatic Modules)	300 Marks
B. Block 2 (Musculoskeletal & Locomotion Module)	300 Marks
C. Block 3 (Cardiovascular System Respiratory Modules)	300 Marks
D. Islamic Studies Ethics and Pakistan Studies 100 Marks	300 Marks

13. Block 3 (Cardiovascular System + Respiratory Modules)

The examination in Block 3 shall be as follows:-

- 1. One written paper of 120 marks having two parts:
- a) Part I shall have eighty five Multiple Choice Questions (MCQs) of 85 marks and the time allotted shall be 110 minutes.
- b) Part II shall have seven Structured Essay Questions (SEQs) of 35 marks and the time allotted shall be 70 minutes.
- 2. Oral/Practical/Clinical examination shall have 120 marks,
- 3. The continuous internal assessment through Block Examination conducted by the college of enrollment shall carry 60 marks, ie., 20% of the total allocated marks for the block. The score will be equally distributed to the Written and Oral/Practical/Clinical Examinations.

14. ISLAMIC STUDIES/ETHICS AND PAKISTAN STUDIES

The examination in Islamic Studies/Ethics and Pakistan Studies shall be as follows-

- I. One written paper of 100 marks in Islamic Studies/Ethics and Pakistan Studies having two components: Islamic Studies/Ethics component having 60 marks, three (3) Long Essay Questions (LEOs) to be attempted out of five (5) Long Essay Questions (LEOs), having 20 marks each.
- II. Pakistan Studies component having 40 marks, two (2) Long Essay Questions (LEOS) to be attempted out of four (4) Long Essay Questions (LEQS), having 20 marks each.

Note: Islamic Studies for Muslims, and Ethics for Non-Muslims candidates,

15. The marks distribution in each subject is given in Table 1

Table 1

Subject	Theory		Practical		Total
Block 1 (Foundation + Hematopoietic and Lymphatic Modules)	Part I MCQs Part II SEQS	85 Marks 35Marks	Oral and Practical / Clinical Examination	120 Marks	300
	Internal Assessment	30 Marks	Internal Assessment	<u>30</u> Marks	
		150		150	
Block 2 (Musculoskeletal & Locomotion Module)	Part I MCQs Part II SEQS	85 Marks 35Marks	Oral and Practical / Clinical Examination	120 Marks	300
	Internal Assessment	30 Marks	Internal Assessment	<u>30</u> Marks	
		150		150	
Block 3 (CVS & Respiratory)	Part I MCQs Part II SEQS	85 Marks 35Marks	Oral and Practical / Clinical Examination	120 Marks	300
	Internal Assessment	30 Marks	Internal Assessment	<u>30</u> Marks	
		150		150	
				Total	900
*Islamic Studies/ Eth Pakistan Studies	nics and	Islamic Stud 3 LEQs to be of 5 LEQs	ies/Ethics e attempted out	60 Marks	
		Pakistan Stu 2 LEQs to be of 4 LEQs	adies e attempted out	40 Marks	
		I		100	

MBBS 1ST Professional

PAPER 3

	Written Exam				Oral/ Practical/ Clinical Exam				
					OSPR/OSCE/Viva Stations				
Theme	Subject	MCQ (1 mark) SEQ (5 mark each)		Marks	OSPE (O8 marks each) Observed	OSCE (O8 marks each) Observed	Structured Viva (16 marks each)	Marks	
Normal Structure	Anatomy & applied/ clinical	16	2	26	1	-	1	24	
Normal function	Physiology& applied/ clinical	31	4	51	4	-	1	48	
	Biochemistry& applied/ clinical	18	1	23	2	-	1	32	
Disease Burden &	Community Medicine Public Health	06	-	06	-	-	-	_	
Prevention	Behavioral sciences	02	-	02	-	-	-	-	
Pathophysiology and	Pathology	07	-	07	-	-	-	-	
Pharmacotherapeutics	Pharmacology	05	-	05	-		-	-	
CFRC	CFRC-1-2	-	-	-		1	-	08	
PERLs	PERLs-1-2	-	-	-		1	-	08	
		85	7*5=35	120	7 Stations x 08=56	2Stations x 08=16	3 Vivas x 16=48	120	



9A. ASSESSMENT PLAN

BAHAWALPUR MEDICAL COLLEGE DEPARTEMENT OF MEDICAL EDUCATION FORMATIVE ASSESSMENT PLAN-FIRST YEAR MBBS-BATCH-II-2023

EXAMINATION PLAN

# of Exams	Disciplines	PATTERN	Bimonthly Assessment	Day	End of Block (EOB)/ Module Exam
	Anatomy	Written test(MCQ and SEQ)	21st-March-2023	Tuesday	
I	Physiology	Written test(MCQ and SEQ)	22 nd -March-2023	Wednesday	
1	Biochemistry	Written test(MCQ and SEQ)	31 st -March-2023	Friday	
	Anatomy	Written test (MCQ and SEQ) VIVA	10th-April-2023, 11th-April-2023	Monday & Tuesday	
	Physiology	Written test(MCQ and SEQ) OSPE	12th-April-2023, 13th-April-2023	Wednesday	
II	Biochemistry	Written test(MCQ and SEQ)	14th-April-2023	Friday	
III	Anatomy	Written test(MCQ and SEQ)	2 nd May-2023	Tuesday	
	Physiology	Written test(MCQ and SEQ)	3rd May-2023	Wednesday	
·	Biochemistry	Written test(MCQ and SEQ)	5 th - May-2023	Friday	
	Applied Anat	omy, Physiology, Biochemistry, CHS, BS,		Thursday	25th- May-2023
	W	Pathology, Pharmacology /ritten test (MCQ and SEQ)			
I-EOB	(OSPE	EOB-3-Group-A E/OSCE/Viva (Internal/External)		Monday	29th- May-2023
	,	EOB-3-Group-B E/OSCE/Viva (Internal/External		Tuesday	30th- May-2023
	× ×	EOB-3-Group-C E/OSCE/Viva (Internal/External		Wednesday	31st- May-2023
	Anatomy	Written test(MCQ and SEQ)	05th- June-2023	Monday	
IV	Physiology	Written test(MCQ and SEQ)	07th- June-2023	Wednesday	
	Biochemistry	Written test(MCQ and SEQ)	09th- June-2023	Friday	

	Anatomy	Written test(MCQ and SEQ)	24 th - July-2023	Monday	
V	Physiology	Written test(MCQ and SEQ)	26th- July-2023	Wednesday	
	Biochemistry	Written test(MCQ and SEQ)	28th- July-2023	Friday	
	Applied Anator	my, Physiology, Biochemistry, CHS, BS,		Monday	28th- Aug-2023
		Pathology, Pharmacology			
	Wr	itten test (MCQ and SEQ)		XX7 1 1	
II-EOB	(OCDE)	EOB-3-Group-C		Wednesday	30th-Aug-2023
II-EOD	(OSPE/	/OSCE/Viva (Internal/External) EOB-3-Group-A		Thursday	31st-Aug-2023
	(OSPE	/OSCE/Viva (Internal/External		Thursday	51 st -Aug-2025
	(031 E)	EOB-3-Group-B		Friday	01-Sep-23
	(OSPE	/OSCE/Viva (Internal/External		1 IIday	01-5Cp-25
	Anatomy	Written test(MCQ and SEQ)	18th -Sep-2023	Monday	
VI				,	
	Physiology	Written test(MCQ and SEQ)	25 th -Sep-2023	Monday	
	Biochemistry	Written test(MCQ and SEQ)	02 nd -Oct-2023	Monday	
	Anatomy	Written test(MCQ and SEQ)	10th -Oct-2023	Monday	
VII	Physiology	Written test(MCQ and SEQ)	16 th -Oct-2023	Monday	
	Biochemistry	Written test(MCQ and SEQ)	23rd -Oct-2023	Monday	
	Applied Anator	my, Physiology, Biochemistry, CHS, BS,		Monday	13th-Nov-2023
	Pathology, Pharmacology				
	Written test (MCQ and SEQ)				
	EOB-3-Group-B			Wednesday	15 th -Nov-2023
III-EOB	(OSPE/OSCE/Viva (Internal/External)				
		EOB-3-Group-A		Thursday	16 th -Nov-2023
	(OSPE,	/OSCE/Viva (Internal/External			
		EOB-3-Group-C		Friday	17th-Nov-2023
	(OSPE,	/OSCE/Viva (Internal/External			

10. BOOKS & READING RESOURCES

4 Anatomy

- Snell. R.S. Clinical Anatomy for MedicalStudents. Philadelphia USA Lippincott Williams and Wilkins: Latest Ed.
- Sinnatamby C. S. Lasts Anatomy Regional and Applied London, ChurchillLiving Stone: Latest Ed.
- Williams, P.L. Bannister, L.H. Berry, M.B,Collins, P., Dyson M. Ferguson, M.WJ. Gray's Anatomy London. Churchill living stone: Latest Ed.
- Moore K.L. Clinically Oriented Anatomy.Baltimore, U.S.A. Williams and Wilkins: Latest Ed.

4 Physiology

- Fox, S.I. Human Physiology, McGraw-Hill, Boston.
- Ganong WF. Review of Medical Physiology. Lange Medical Publications, McGraw-Hill, Boston.
- Guyton AC and Hall JE. Textbook of Medical Physiology. W. B. Sunders &Co., Philadelphia.
- Mushtaq Physiology-Board Reviewseries physiology

4 Biochemistry

- Champe, P.C. & Harvey, E.A. Biochemistry (Lippincott's Illustrated Reviews). J.B Lippincott Co
- Marks, D.B., Marks, A.D. &Smith, C.M.Basic Medical Biochemistry: A Clinical Approach. Williams and Wilkins Co. Baltimore.
- Robert K. Murray, Daryl K. Granner, Peter A. Mayes, Victor W. Rodwell. Harper's Biochemistry. McGraw-Hill
- Biochemistry by Stryer

4 Pathology

- Vinary Kumar, Abul K. Abbas and NelsonFausto Robbins and Cotran, Pathologic basis of disease. WB Saunders.
- Richard Mitchall, Vinary Kumar, Abul K. Abbas and Nelson Fausto Robbins and Cotran, Pocket Companion to Pathologic basis of diseases. Saunder Harcourt.
- Walter and Israel. General Pathology. Churchill Livingstone.

4 Pharmacology

- Basic and Clinical Pharmacology byKatzung, McGraw-Hill.
- Pharmacology by Champe and Harvey, Lippincott Williams & Wilkins

Behavioral Sciences

- Handbook of Behavioral Sciences byProf. Mowadat H.Rana, 3rd Edition
- Integrating Behavioral Sciences in Healthcare by Asma Humayun & Michael Herbert, 1st Edition

Community Medicine

- Parks Textbook of Preventive and SocialMedicine. K. Park (editor)
- Public Health and Community MedicineIlyas, Ansari (Editors)