

# CVS-I STUDY GUIDE 1<sup>st</sup> Year MBBS

This Study guide of the module/course outlines the key components and areas for the facilitation of the students.

**Department of Medical Education** 

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## **Vision and Mission of KGMC**

## **Khyber Medical University: Vision**



Khyber Medical University will be the global leader in health sciences academics and research for efficient and compassionate health care.

## **Khyber Girls Medical College: Vision**



"Excellence in health care, research, teaching and training in the service of Humanity"

## Khyber Girls Medical College: Mission

The mission of KGMC is to promote compassionate and professional health care leaders Who are knowledgeable, skillful, and community oriented lifelong learners serving humanity through evidence based practices.

## **Curriculum Committee KGMC**

Chair:		
ı	Professor Dr.Zahid Aman , Dean KGMC.	
Co-Chai	r:	
[	Dr. Sabina Aziz, Associate Dean KGMC.	
Cliniaal	Colomoso Santificado	
_	Sciences:	
	Dr. Mohammad Noor Wazir ,Department of Medicine KGMC/HMC	
	Dr. Bushra Rauf Department of Gynae KGMC/HMC.	
	Dr. Sofia Iqbal, Department of Ophthalmology KGMC/HMC.	
	Dr. Said Amin Department of Medicine KGMC/HMC.	
	Dr. Ghareeb Nawaz Department of ENT KGMC/HMC.	
	Dr. Jamshed Alam Department of Surgery KGMC/HMC.	
	Dr. Ambreen Ahmad, Department of Pediatrics KGMC/HMC.	
	Dr. Ain-ul-Hadi Department of Surgery KGMC/HMC.	
	Dr. Fawad Rahim Department of Medicine KGMC/HMC.	
Behavio	oral Sciences:	
	Dr. Ameer Abbas Department of Psychiatry KGMC/HMC.	
Medical	l Education	
	Dr. Naheed Mahsood, Department of Medical Education, KGMC.	

- Dr. Naveed Afzal Khan, Department of Medical Education, KGMC.Dr. Khurram Naushad, Department of Medical Education, KGMC.
- **Basic Sciences:** 
  - Dr. Amin-ul-Haq Department of Biochemistry, KGMC.
  - Dr. Khalid Javed Department of Pathology, KGMC.
  - Dr. Raheela Amin Department of Community Medicine, KGMC.
  - Dr. Zubia Shah Department of Physiology, KGMC.
  - Dr. Naheed Siddique Department of Forensic Medicine, KGMC.
  - Dr. Shams Suleman Department of Pharmacology, KGMC.
  - Dr. Shahab-ud-Din, Department of Anatomy, KGMC.

## **Module Committee for CVS**

1.	Dr. Gul Muhammad, Senior Lecturer Physiology, Module coordinator
2.	Dr. Naheed Mahsood Associate Professor <b>DME</b> Module Secretory
3.	Dr. Naveed Afzal Khan Coordinator DMEModule Secretory
4.	Dr. Khurram Naushad Lecturer <b>DME</b> Module Secretary
5.	Dr. Shabnam Gul Senior Lecturer <b>Admin</b> Member:
6.	Dr. Riffat Sultana Professor <b>Physiology</b> Member
7.	Dr. Shakila, Associate Professor <b>Community Medicine</b> Member
8.	Dr. Shahab Udin, Associate Professor <b>Anatomy</b> Member
9.	Dr. Ayesha Jamil Associate Professor <b>Pharmacology</b> Member:
10.	Dr. Afsheen Mehmood Assistant Professor PhysiologyMember
11.	Dr. Fawad Raheem, Assistant Professor <b>Medical unit</b> Member
12.	Dr. Ameer Abbas Assistant Professor <b>psychiatry</b> Member:
13.	Dr. Munir Hussain Assistant Professor <b>Pathology</b> Member:
14.	Dr. Naheed Siddique Assistant Professor Forensic MedicineMember
15.	Dr. Kalsoom Tariq Assistant Professor <b>Biochemistry</b> Member:
16.	Dr. Yousaf Jan Assistant Professor Surgical BMember

## **Integrated curriculum:**

An integrated curriculum is all about making connections, whether to real life or across the disciplines, about skills or about knowledge. An integrated curriculum fuses subject areas, experiences, and real-life knowledge together to make a more fulfilling and tangible learning environment for students. Integrated teaching means that subjects are presented as a meaningful whole. Students will be able to have better understanding of basic sciences when they repeatedly learn in relation to clinical examples. Case based discussions, computer-based assignments, early exposure to clinics, wards, and skills acquisition in skills lab are characteristics of integrated teaching program.

## **Outcomes of the curriculum:**

The Curricular Outcomes of the MBBS Program for a Graduating Doctor according to the PMDC are as follows:

## 1. Knowledgeable

Knowledgeable about the diseases and health conditions prevalent in the population of Pakistan and use Evidence-based medicine to provide best possible cost-effective care.

### 2. Skillful

Skillful in History taking and Physical examination to compassionately deal with a patient.

## 3. Community health promoter

Take appropriate decisions and actions for protecting and promoting the health of their community.

### 4. Critical Thinker

Evaluate critically the patient data to effectively deal with complexity of medical decisions for the best possible outcomes using evidence-based practices in service of humanity.

## 5. Professional

Display professional values (honesty, accountability, cultural and religious sensitivity), attitudes and behaviors (empathy, ethics, good communication skills and lifelong learner) that embody good medical practice.

## 6. Researcher

Exhibit a spirit of inquisitiveness, inventiveness, and ethical conduct while carrying out research in accordance with the prescribed guidelines.

### 7. Leader and role Model

Demonstrate exemplary conduct and leadership in Advancing healthcare, enhancing medical education, and Enhancing the trust of the public in the medical profession by being exceptional role models

#### **KNOWLEDGE**

By the end of five year MBBS program the KGMC student should be able to;

- 1. Acquire a high level of clinical proficiency in history taking, physical examination, differential diagnosis, and the effective use of medicine's evolving diagnostic and procedural capabilities including therapeutic and palliative modalities
- 2. Manage the common prevalent diseases in community
- 3. Identify the common medical emergencies
- 4. Develop plan for prevention of common community diseases
- 5. Formulate a referral plan
- 6. Compose a prescription plan

## **PSYCHOMOTOR**

By the end of five year MBBS program the KGMC student should be able to;

1. Demonstrate the ability to perform the disease specific relevant examination

- 2. Respond to common medical emergencies
- 3. Master the skill of first aid
- 4. Perform BLS
- 5. Apply the best evidenced practices for local health problems

### **AFFECTIVE**

By the end of five year MBBS program the KGMC student should be able to

- 1. Relate to patient and careers vulnerability
- 2. Demonstrate ethical self-management
- 3. Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.
- 4. Display compassion with patient and colleagues
- 5. Demonstrate in clinical care an understanding of the impact of psychological, social, and economic factors on human health and disease

## Introduction to the cardiovascular system

The cardiovascular system (CVS) moves vital nutrients, gases and hormones around the body. The CVS is made up of the heart, lungs and blood vessels, all working together.

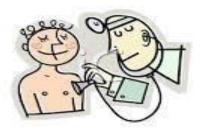
The heart functions as a pump.

The blood vessels act as pipes, carrying blood through the body.

The lungs supply the blood with oxygen and remove its carbon dioxide.

A number of complex nerve and hormone systems keep the CVS in balance with the body's changing needs for oxygen and nutrients.

Examination of CVS Auscultation( Heart Sounds )



## Themes

1- Chest pain-	2- Breathlessness and ankle swelling-	3- Blood Pressure-
(1 week)	(2 weeks)	(1 week)
4- Palpitations		
(1 week)		

#### **GENERAL LEARNING OUTCOMES**

At the end of this module, the students will be able to;

- 1) Describe the structure and surface markings of the heart, valves and great vessels
- 2) Describe the steps of development of the heart
- 3) Describe the steps of development of arterial, venous and lymphatic system
- 4) Describe the conduction system of the heart
- 5) Describe the anatomy of valves of the heart
- 6) Describe the microscopic structure of myocardium, and blood vessels
- 7) Describe the cardiac cycle
- 8) Discuss cardiac output, and venous return
- 9) Discuss blood pressure and its regulation
- 10) Discuss coronary circulation and diseases associated with it
- 11) Describe the mechanisms and types of circulatory shock and associated compensatory mechanisms
- 12) Describe the anatomy and common pericardial diseases
- 13) Describe the cardiac enzymes
- 14) Discuss the hyperlipidemias and the roles lipoproteins and cholesterol in the development of atherogenesis
- 15) Describe the mechanisms of impulse generation, conduction and excitation of myocardium

#### Skill

- 1. Measure the blood pressure.
- 2. Measure the effect of posture and exercise on blood pressure.
- 3. Examine the arterial pulses.
- 4. Auscultate the heart sounds.
- 5. Perform systematic analysis of ECG
- 6. Identify normal cardiac shadow, borders and cardiomegaly on chest radiographs.
- 7. Identify the position of borders and valves of the heart by surface marking on model / simulator
- 8. Palpate and find apex beat, and auscultatory areas in the chest of the subject provided and describe their significance.
- 9. Demonstrate the use of Stethoscope for Auscultation.
- 10. Differentiate between normal and displaced apex beat
- 11. Perform basic life support.
- 12. Interpretation of cardiac enzymes
- 13. Detection of lipids in a given sample

#### Attitude

- 1. Demonstrate ability to give and receive feedback, respect for self and peers.
- 2. Develop respect for the individuality and values of others (including having respect for oneself) patients, colleagues and other health professionals
- 3. Organize& distribute task
- 4. Exchange opinion & knowledge
- 5. Develop communication skills and etiquette with sense of responsibility.
- 6. To equip themselves for teamwork
- 7. Regularly attend the classes

heme1- (	Chest Pain			
Subject	Topic	Learning objectives	Teaching strategy	Assessment
Anatomy	Surface anatomy	Describe the surface marking of the heart	Dissection/demo	MCQ/SEQ
		Describe the surface marking of the heart valves	Dissection/demo	MCQ/SEQ
		Illustrate the surface marking of the aorta on models / x-rays	Dissection/demo	MCQ/SEQ
		Describe the surface marking of the superior vena cava	Dissection/demo	MCQ/SEQ
		Describe the surface marking of the inferior vena cava	Dissection/demo	MCQ/SEQ
		Describe the gross structure of the heart	Dissection/demo	MCQ/SEQ
	Coronary circulation	Describe the coronary arteries	Dissection/demo	MCQ/SEQ
		Enlist the branches of each main artery	Dissection/demo	MCQ/SEQ
		Describe the anastomosis of coronaries	Dissection/demo	MCQ/SEQ
		Identify the area of the heart supplied by a coronary artery and its branches	Dissection/demo	MCQ/SEQ
		Describe the venous drainage of the heart	Dissection/demo	MCQ/SEQ
		Describe the lymphatic drainage of the heart	Dissection/demo	MCQ/SEQ

	Pericardium	Define pericardium	Dissection/demo	MCQ/SEQ
		Describe different reflections of pericardium		MCQ/SEQ
		Identify entry & exit of vessels of heart via pericardium		MCQ/SEQ
		Define the following clinical condition;		MCQ/SEQ
		pericarditis		
		pericardial effusion		
		cardiac Tamponade		
Histology	Histology of	Explain the characteristics of cardiac	LGF	MCQ/SEQ
	heart muscles	muscle cell		
		Explain the Structure of Intercalated disc	LGF	MCQ/SEQ
		Define the junctional specializations making up the intercalated disk	LGF	MCQ/SEQ
		Describe identification of different microscopic	LGF	MCQ/SEQ
		views of Cardiac muscle and its ultra-structures		
		Differentiate histologically between cardiac and	LGF	MCQ/SEQ
		skeletal muscle and smooth muscles		
		Enumerate histological layers of heart wall	LGF	MCQ/SEQ
Physiology	Cardiac muscles	Explain the physiologic anatomy of the cardiac	LGF	MCQ/SEQ
		muscle		
		Describe the properties of the cardiac muscle	LGF	MCQ/SEQ
	Coronary	Describe the physiologic basis coronary	LGF	MCQ/SEQ

	circulation	circulation		
		Describe the steps of coronary thrombosis	LGF	MCQ/SEQ
		Describe the etiology of coronary thrombosis	LGF	MCQ/SEQ
Biochemistry	Cardiac	Identify the enzymes that increase in	LGF	MCQ/SEQ
	enzymes	myocardial infarction		
	Lipids and cholesterol	Describe the Chemical Structure and function of cholesterol	LGF	MCQ/SEQ
		Describe the fate of cholesterol in the body	LGF	MCQ/SEQ
		Define and Classify lipids	LGF	MCQ/SEQ
		Describe the functions of lipids in the body	LGF	MCQ/SEQ
		Classify lipoproteins and their functions	LGF	MCQ/SEQ
		Describe Cardiac enzymes and their pattern	LGF	MCQ/SEQ
		of elevation in ischemic heart diseases		
		Describe the role of Na, K, Ca and Mg in	LGF	MCQ/SEQ
		cardiac muscles contractility and their		
		biochemical abnormalities		
		Describe the cardiac manifestations of	LGF	MCQ/SEQ
		vitamin B1 deficiency		
Pharmacology		Enlist the groups of drugs used in the treatment of CAD (angina and MI)	LGF	MCQ/SEQ
		Enlist the groups of lipid lowering drugs	LGF	MCQ/SEQ

Pathology		Describe the risk factors, and lab. Diagnosis of	LGF	MCQ/SEQ
		CAD		
		Define and Enlist the stages of atherosclerosis	LGF	MCQ/SEQ
Forensic		Describe the medicolegal aspects of sudden	LGF	MCQ/SEQ
medicine		death due to cardiovascular diseases		
Community	Prevention of	Describe primordial, primary, secondary and	LGF	MCQ/SEQ
Medicine	CVD	tertiary prevention of CV diseases in	8	
		community		
Embryology	Fetal circulation	Describe the physiological changes in circulation after birth	LGF	MCQ/SEQ
	Cardiac	Enlist the developmental anomalies of heart	LGF	MCQ/SEQ
	developmental	1-7 m		
	anomalies		- 5/	/4/
		Describe the congenital anomalies of the heart. ASD	LGF	MCQ/SEQ
		VSD		1
		PDA Tetralogy of Fallot transposition of the great vessels Hemangiomas and Telangiectasias	ICAL CO	

Physiology	Cardiac cycle	Describe the Cardiac cycle	LGF	MCQ/SEQ
		Describe the concept of systole and diastole,	LGF	MCQ/SEQ
		Describe the role of atria and ventricles as	LGF	MCQ/SEQ
		pumps,		
		Describe the functions of heart valves,	LGF	MCQ/SEQ
		Correlate the cardiac cycle events with ECG	LGF	MCQ/SEQ
		Describe the mechanism of production of	LGF	MCQ/SEQ
		normal and abnormal heart sounds		
		Relate heart sounds with cardiac cycle,	LGF	MCQ/SEQ
		Describe the metabolism and oxygen utilization	LGF	MCQ/SEQ
		of cardiac muscle	- /	
		Describe the regulation of cardiac cycle	LGF	MCQ/SEQ
	Cardiac output	Describe pressure volume loop (end-systolic	LGF	11.7
		volume / end-diastolic volume / ejection	3/	(2)
		fraction / systolic volume / systolic work	( Me.	MCQ/SEQ
		output)	05/ /3	1
		Explain the Frank-Starling mechanism of the	LGF	MCQ/SEQ
		heart for the control of cardiac output by		
		venous return	CALI	
		Describe the methods for measuring of cardiac output	LGF	MCQ/SEQ

	Describe normal cardiac output and venous	LGF	MCQ/SEQ
	return during rest and during activity		
	Enlist the causes of abnormally high and	LGF	MCQ/SEQ
	abnormally low cardiac output		
	Explain the mechanisms of normal cardiac	LGF	MCQ/SEQ
	contractility and the role of calcium ion/ ATPase		
	pumps	6	
	Explain cardiac output	LGF	MCQ/SEQ
	(regulation/measurement) and peripheral		
	resistance and its regulation		
	Explain the factors regulating cardiac output	LGF	MCQ/SEQ
	and venous return.		
Blood flow	Describe the Biophysics and Interrelationships	LGF	MCQ/SEQ
	of Pressure, Flow, and Resistance in terms of		417
	Ohm's law and Poiseuille's Law	F//	0/
	Describe starling forces	LGF	MCQ/SEQ
	Describe regulation of blood flow	LGF	MCQ/SEQ
	Define basal tone.	LGF	MCQ/SEQ
	List several substances potentially involved in	LGF	MCQ/SEQ
	local metabolic control of vascular tone.	UN	
	State the local metabolic vasodilator hypothesis	LGF	MCQ/SEQ

		Describe physiological Vasodilators and	LGF	MCQ/SEQ
		Vasoconstrictors and their mechanisms		
		Describe the factors affecting the local blood	LGF	MCQ/SEQ
		flow including auto-regulation.		
		Describe the function of capillaries	LGF	MCQ/SEQ
		Describe circulatory changes during exercise	LGF	MCQ/SEQ
		Describe blood flow to different organs like	LGF	MCQ/SEQ
		brain, heart, liver and skin during exercise		
	Functions of	Describe the functions of mitral, tricuspid,	LGF	MCQ/SEQ
	heart valves	aortic and pulmonic valves		/
		Describe the hemodynamics and sequel related	LGF	MCQ/SEQ
		to stenosis and regurgitation of heart valves		1
	Lymphatic	Describe the function of lymphatic system in	LGF	MCQ/SEQ
	system	the maintenance of interstitial fluid volume.	~~/	1651
		Describe the effects of Interstitial Fluid	LGF	MCQ/SEQ
		Pressure on Lymph Flow.	05/ /	37
		Describe how changes in capillary hydrostatic	LGF	MCQ/SEQ
		pressure, plasma oncotic pressure, capillary	-00	
		permeability, and lymphatic function can lead	CALL	
		to tissue edema	O.	
Medicine	Heart failure	Define Heart failure Differentiate between right- sided Heart failure	LGF	MCQ/SEQ

Anatomy				
	Histology of blood vessels	Describe the histological composition of vessel	LGF	MCQ/SEQ
		Describe the microscopic structure of artery and vein	LGF	MCQ/SEQ
		Differentiate histologically between artery and vein under light microscope	LGF	MCQ/SEQ
		Describe the histological composition of lymphatic channels	LGF	MCQ/SEQ
Embryology	Development of arteries and veins	Describe the development of arterial system	LGF	MCQ/SEQ
		Describe the development of venous system	LGF	MCQ/SEQ
		Describe the congenital abnormalities in in the vessels Coarctation of Aorta	(412)	MCQ/SEQ
Physiology	Blood Pressure	Define blood pressure	9///	MCQ/SEQ
		Describe the causes of High / low BP	60	MCQ/SEQ
		Discuss the mechanisms for rapid and long	DAL	MCQ/SEQ

		term control of blood pressure (including Renin Angiotensin system)		
		Describe the effects of sympathetic and parasympathetic stimulation on the heart and		MCQ/SEQ
		circulation		
	Circulatory	Define Circulatory Shock		MCQ/SEQ
	Shock			
		Explain the physiologic causes of circulatory shock		MCQ/SEQ
		Explain the stages of circulatory shock		MCQ/SEQ
		Describe cardiogenic shock	LGF	MCQ/SEQ
		Describe Hemorrhagic Shock	LGF	MCQ/SEQ
		Describe of Neurogenic Shock	LGF	MCQ/SEQ
		Describe Anaphylactic Shock	LGF	MCQ/SEQ
		Describe Septic Shock	LGF	MCQ/SEQ
		Explain the physiology of treatment in	LGF	MCQ/SEQ
		Shock		
Pharmacology		Describe the mechanisms of drugs used in	LGF	MCQ/SEQ
		the treatment of Hypertension		
Community		Describe the preventive strategies of	LGF	MCQ/SEQ
medicine		hypertension		

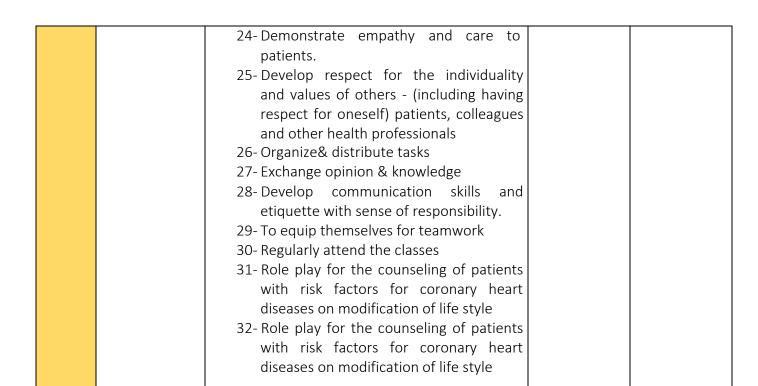
		5- Palpitations		
Anatomy	Conduction system of the heart	Describe the different components of conduction system  SA  Node  AV  Node  Bundle of His	LGF	MCQ/SEQ
		Purkenje Fibers  Describe the sympathetic innervation of heart	LGF	MCQ/SEQ
		Describe the parasympathetic innervation of the heart	LGF	MCQ/SEQ
Physiology	Excitation and contraction of cardiac muscles	Describe the excitation—contraction process in cardiac muscle.  Describe Chronotropic, Inotropic and Dromotropic Effects	LGF	MCQ/SEQ
		Describe Chronotropic, Inotropic and Dromotropic Effects	LGF	MCQ/SEQ
		Differentiate excitation—contraction process in cardiac and skeletal muscle cells	LGF	MCQ/SEQ
		Describe gap junctions and the significance of functional syncytium	LGF	MCQ/SEQ
		Explain phases of cardiac muscle action potential	LGF	MCQ/SEQ
		Describe the characteristics of cardiac action potentials and the role of "slow calcium" channels in causing plateau and its significance	LGF	MCQ/SEQ
		Describe the significance of AV nodal Delay	LGF	MCQ/SEQ

	Define Pacemaker and explain why SA node is	LGF	MCQ/SEQ
	·	LUI	WICQ/3LQ
	the normal pacemaker of the heart		
	Define Ectopic Pacemaker and describe its	LGF	MCQ/SEQ
	causes		
	Describe the effects of sympathetic and parasympathetic stimulation on the heart rate and conduction of cardiac action potentials	LGF	MCQ/SEQ
	Define various types of refractory periods	LGF	MCQ/SEQ
	Differentiate the refractory period of cardiac	LGF	MCQ/SEQ
	muscle with that of skeletal muscle		
	Describe the significance of prolonged action	LGF	MCQ/SEQ
	potential in cardiac muscle		
	Describe the physiological anatomy of the sinus	LGF	MCQ/SEQ
	node		
	Define automaticity and rhythmicity and	LGF	MCQ/SEQ
	conductivity		
	Describe the specialized excitatory and	LGF	MCQ/SEQ
	conductive pathway of the cardiac muscle		
	tissue		
ECG	Describe the characteristics of normal ECG, time duration of waves, segments and voltages	LGF	MCQ/SEQ
	Explain how to record ECG	LGF	MCQ/SEQ
	Describe the AV nodal, ventricular impulse conduction	LGF	MCQ/SEQ

		Interpret ECG paper and its calibration	LGF	MCQ/SEQ
Community	CVD prevention	Identify the major risk factors which contribute	LGF	MCQ/SEQ
Medicine		to common diseases of the cardiovascular system		
		Enumerate modifiable and non-modifiable risk	LGF	MCQ/SEQ
		factors of CV diseases		
		Apply primordial, primary, secondary and tertiary prevention of CV diseases in community	LGF	MCQ/SEQ

	P:	sychomotor domain		
Chest Pain	Anatomy	<ol> <li>Identify the heart &amp; its coverings in the model / dissected specimen</li> <li>Identify the heart and major blood vessels in cadaver/dissected specimen</li> <li>Identify the chambers of the heart.</li> <li>Identify the internal structures of various chambers of the heart.</li> <li>Identify the Cardiac Muscle under the microscope</li> </ol>	Practical	OSCE
	Physiology	6- Perform basic life support. (Important)	Practical	OSCE
	Biochemistry	<ul><li>7- Interpretation of cardiac enzymes</li><li>8- Detection of lipids in a given sample</li></ul>	Practical	OSCE
Blood Pressur e		<ul> <li>9- Identify salient features of a medium sized artery &amp; vein in a cross-section under microscope.</li> <li>10- Identify the histological differences between medium size artery &amp; vein under microscope.</li> <li>11- Describe the histological differences between large size artery &amp; vein.</li> </ul>	Practical	OSCE

Breathl essness and ankle swellin g	Clinical	<ul> <li>12- Identify normal cardiac shadow, borders and cardiomegaly on chest radiographs.</li> <li>13- Identify the position of borders and valves of the heart by surface marking on model / simulator</li> <li>14- Palpate and find apex beat, and auscultatory areas in the chest of the subject provided and describe their significance.</li> <li>15- Demonstrate the use of Stethoscope for Auscultation.</li> <li>16- Differentiate between normal and displaced apex beat</li> </ul>	Practical	OSCE
	Physiology	<ul><li>17- Measure the blood pressure.</li><li>18- Measure the effect of posture and exercise on blood pressure.</li><li>19- Examine the arterial pulses.</li><li>20- Auscultate the heart sounds.</li></ul>	Practical	OSCE
Palpitat ions		21- Perform systematic analysis of ECG	Practical	OSCE
		Affective domain		
PRIME		<ul><li>22- Demonstrate ability to give and receive feedback, respect for self and peers.</li><li>23- Carry out practical work as instructed in an organized and safe manner</li></ul>	Practical	OSCE



## Teaching and learning strategies:

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

Interactive Lectures

Hospital / Clinic visits

Small Group Discussion

Skills session

Self-Directed Study

#### Interactive lectures:

An interactive lecture is an easy way for instructors to intellectually engage and involve students as active participants in a lecture-based class of any size. Interactive lectures are classes in which the instructor breaks the lecture at least once per class to have students participate in an activity that lets them work directly with the material.

- The instructor might begin the interactive segment with an engagement trigger that captures and maintains student attention.
- Then the instructor incorporates an activity that allows students to apply what they have learned or give them a context for upcoming lecture material.

As the instructor feels more comfortable using interactive techniques he or she might begin to call upon a blend of various interactive techniques all in one class period.

### **Hospital / Clinic visits:**

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

## Small group discussion (SGD):

The shy and less articulate are more able to contribute. Students learn from each other. Everyone gets more practice at expressing their ideas. A two way discussion is almost always more creative than individual thoughts. Social skills are practiced in a 'safe' environment e.g. tolerance, cooperation. This format helps students to clarify concepts acquire skills or attitudes. Students exchange opinions and apply knowledge gained from lectures, tutorials and self-study. The facilitator role is to ask probing questions, summarize, or rephrase to help clarify concepts.

### Skills/Practical session:

Skills relevant to respective module are observed and practiced where applicable in skills laboratory or Laboratories of various departments.

## **Self-Directed learning (SDL):**

Self-directed learning, which involves studying without direct supervision in a classroom/Library, is a valuable way to learn and is quickly growing in popularity among parents and students. Students' assume responsibilities of their own learning through individual study, sharing and discussing with peers, seeking information from Learning Resource Centre, teachers and resource persons within and outside the college. Students can utilize the time within the college scheduled hours of self-study.

## Time tables:

The timetables for the module will be shared via Edmodo and the notice boards in advance.

### **Assessment tools:**

Theoretical knowledge is tested by a written examination system constituted by multiple choice questions (MCQ/SEQs).

The assessment of practical knowledge involves oral, spot, or objective structured practical examinations (OSPE).

## Multiple Choice Questions (MCQ/SEQs):

- Multiple choice questions (MCQ/SEQs) are a form of assessment for which students are asked to select the best choice from a list of answers.
   MCQ/SEQ consists of a stem and a set of options. The stem is usually the first part of the assessment that presents the
  - question as a problem to be solved; the question can be an incomplete statement which requires to be completed and can include a graph, a picture or any other relevant information. The options are the possible answers that the student can choose from, with the correct answer called the key and the incorrect answers called distractors.
- Correct answer carries one mark, and incorrect 'zero mark'. There is NO negative marking.
- Students mark their responses on specified computer-based sheet designed for the college.
- The block exam will comprise of 120 MCQ/SEQs and will be compiled according to the shared blueprint.

## **Short Essay Questions (SEQ)**

Short answer questions generally ask for brief, text-based responses and may also be referred to as *fill-in-the-blank*; or *completion* questions.

Variations of the short answer question may request a list of terms or rules in which the order is not important, or may require a numerical or formula response.

Here is some general information about short answer questions:

Does not measure interpretation.
Can be used to check for preciseness such as correct spelling (good when using computer grading), proper or specific names of
things, especially factual knowledge, and proper creation of formulas.
Requires specific, definite, exact information.
Can be used to discriminate whether errors can be detected in a diagram, for example.

## **Advantages of Short Answer Questions**

Easy to write.
Reduces possibility of guessing.
Can have a lengthy stem such as a paragraph. (Caution: You generally should not expect an exact answer character-by-
character.)
May be easy to score if the required answer is short.

## **Objective Structured Practical Examination (OSPE)**

The content may assess application of knowledge, or practical skills.
Student will complete task in define time at one given station.
All the students are assessed on the same content by the same examiner in the same allocated time.
A structured examination will have observed, unobserved, interactive and rest stations.
Observed and interactive stations will be assessed by internal or external examiners.
Unobserved will be static stations in which students will have to answer the questions related to the given pictures, models or
specimens the provided response sheet.
Rest station is a station where there is no task given, and in this time student can organize his/her thoughts.
The Block OSPE will be comprise of 18 examined station and 7 rest stations. The stations will be assigned according to the shred
blueprint.

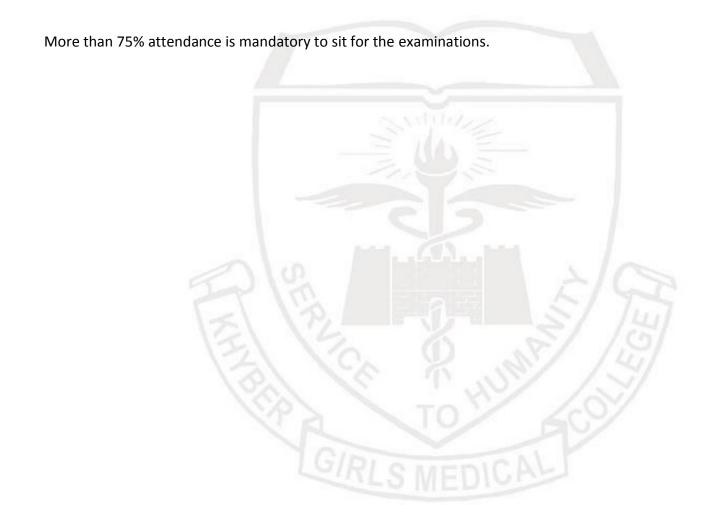
## Internal Evaluation:

Internal evaluation is a process of quality review undertaken within an institution for its own ends. 10% marks of internal evaluation will be added to final marks. This 10% will be based on

Distributio	n of 13 Marks for block C paper
Marks obtained	Average of Percentage in Block exam and Pre Professional exam.

Distribution of 1	10 Marks for Block E OSPE/OSPE Average of percentage in Block OSPE
Marks obtained	Exam , Block Pre Prof OSPE and modul viva
	1 HAM (2)

## **Attendance Requirement:**



## **Learning Resources For Students**

Anato	omy
	Snell Neuroanatomy
	B.D Churasia
	Nelter Atlas
	Langman embryology
	Keithalmore embryology
	Laiq Hassain Basic Histology
	Difore Atlas Histology
Physi	ology
	Guyton nd Hall physiology
	Ganong physiology
	Human Physiology from cells to system by lauralee sherwood
	BRS Physiology
	Neuroscience by Dale Purves
Bioch	emistry
	Chatterjee text book of Biochemistry
	Harpers Biochemistry
	Lippincotts Biochemistry
	Satya Narayan biochemistry

Apart from these resource learning ,students can consult books available in library or recommended by the specialty experts.