

GIT/HEPATOBILLIARY/META BOLISM STUDY GUIDE SECOND YEAR

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

Department of Medical Education

Contents

Vision and Mission of KGMC
Khyber Medical University: Vision
Khyber Girls Medical College: Vision
Khyber Girls Medical College: Mission
Curriculum Committee KGMC
Module committee
Outcomes of the curriculum:
KNOWLEDGE
PSYCHOMOTOR
AFFECTIVE
Introduction to the Course/Module
General Learning Outcomes of the Module/Course
Specific learning objectives of the pharmacology
Teaching and learning strategies:
Learning opportunities
Timetables:
Assessment tools:
Internal Evaluation:
Attendance Requirement:

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:	
	Professor Dr.Zahid Aman, Dean KGMC.
Co-Ch	air:
Clinica	Dr. Sabina Aziz, Associate Dean KGMC. Il Sciences:
	Dr. Mohammad Noor Wazir, Department of Medicine KGMC/HMC
	Dr. Bushra Rauf Department of Gynea 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.
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- 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 GIT

1. Dr. Gulnaz Senior Lecturer Department of Biochemistry Module Coordinator
2. Dr. Naheed Mahsood Assistant Professor DMEModule Secretory :
3. Dr. Naveed Afzal Khan Coordinator DME
4. Dr. Khurram Naushad Lecturer DMEMember
5. Dr. Shabnam Gul Senior Lecturer Admin
6. Dr. Khalid Javed Professor Department of Pathology
7. Dr. Shahab ud Din Associate Professor Department of Anatomy Member
8. Dr. Ayesha Jamil Associate Professor Department of PharmacologyMember
9. Dr. Siddique Ahmad Associate Professor Surgery
10. Dr. Muhammad Iftikhar Assistant Professor Surgery
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14. Dr. Adnan Assistant Professor Department of Medicine
15. Dr. Fahad Falah Lecturer Department of Pharmacology
16. Dr. Najma Attaullah Lecturer Department of Anatomy
17. Dr. Shahnaz Lecturer Department of Community Medicine
18. Dr. Ihsanullah Lecturer Department of Forensic Medicine
19. Dr. Sarah Shahid Lecturer Department of Physiology
20. Miss. Alena Aman Student of Final Year
21. Miss. Ayesha Alam Student of Final Year

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 problem

AFFECTIVE

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

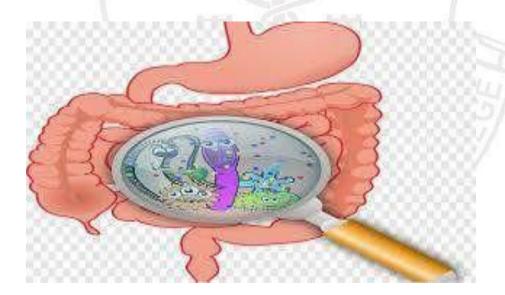
- 1. Relate to patient and careers vulnerability
- 2. Demonstrate ethical self-management
- 3. Counsel and educate patients and their families to empower them to participate in their care and enable shared decision-making.
- 4. Display compassion with patient and colleagues
- 5. Demonstrate in clinical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

Introduction to the Gastrointestinal Tract

The **gastrointestinal tract** (**digestive tract**, **alimentary canal**, **digestion tract**, **GI tract**, **GIT**) is an organ system within humans and other animals which takes in food, digests it to extract and absorb energy and nutrients, and expels the remaining waste as feces.

The mouth, esophagus, stomach and intestines are part of the gastrointestinal tract. *Gastrointestinal* is an adjective meaning of or pertaining to the stomach and intestines. A tract is a collection of related anatomic structures or a series of connected body organs.

The structure and function can be described both as gross anatomy and as microscopic anatomy or histology. The tract itself is divided into upper and lower tracts, and the intestines small and large parts



General Learning Outcomes of Course

Knowledge

AT THE END OF THIS 6 WEEKS' MODULE, THE 2ND YEAR STUDENTS WILL BE ABLE TO:

- 1) DESCRIBE THE ANATOMY OF ORAL CAVITY WITH RESPECT TO GI FUNCTIONS
- 2) ELABORATE THE STRUCTURE AND FUNCTIONS OF SALIVARY GLANDS
- 3) DESCRIBE THE STRUCTURE AND DEVELOPMENT OF ESOPHAGUS, STOMACH, SMALL INTESTINE AND LARGE INTESTINE
- 4) DESCRIBE THE ANATOMY OF PERITONEUM AND MESENTERY
- 5) EXPLAIN THE MOVEMENTS, FUNCTIONS AND REGULATIONS OF GASTROINTESTINAL FUNCTIONS
- 6) DESCRIBE THE STRUCTURE, DEVELOPMENT AND FUNCTIONS OF HEPATOBILIARY SYSTEM AND PANCREAS
- 7) DISCUSS THE MECHANISMS OF DIGESTION AND ABSORPTIONS OF CARBOHYDRATES, PROTEINS, FATS AND OTHER NUTRIENTS
- 8) DESCRIBE DIFFERENT PHYSIOLOGICAL REFLEXES OCCURRING UPON STIMULATION OF GASTROINTESTINAL ORGANS
- 9) DISCUSS THE CHEMISTRY AND FUNCTIONS OF GASTROINTESTINAL HORMONES
- 10) Describe common pathological conditions like peptic ulcers, viral hepatitis, OBSTRUCTIVE JAUNDICE, CARCINOMA OF ESOPHAGUS AND COLORECTAL CANCERS

Skills

- 1. Identify the histological features of lips, tongue under the microscope
- 2. Identify the histological features of esophagus
- 3. Identify the histological features of stomach under the microscope
- 4. Identify the histological feature of duodenum under the microscope
- 5. Identify the histological features of liver
- 6. Identify the histological features of gallbladder the microscope

Attitude

- 1. 1. Demonstrate compassion and care for patients while performing the nervous system examination
- 2. 2. Demonstrate the team work while working in the hospital environment.
- 3. 3. Show good communication skills while performing tasks.

Themes

- 1) Painful swallowing—-----1 week
- 2) Abdominal pain—----2 weeks
- 3) Jaundice—----1 week
- 4) Diarrhea and Constipation—1 week
- 5) Bleeding Per Rectum—----1 week
- 6) Hyperglycemia-(Carbohydrate metabolism)- 1 week
- 7) Obesity (Lipid metabolism)- 4 days
- 8) Wasting (Protein metabolism)- 8 days

Theme 1: Painful swallowing

Subject	Topic	Learning objectives	Teaching strategy	Assessment
Gross Anatomy	Oral cavity	Describe the musculature of tongue	Demo/SGD	MCQ
	Salivary glands	Describe the gross anatomy of parotid, submandibular and	Demo/SGD	MCQ
	Esophagus	Describe the extent, course, relations and gross structure of	Demo/SGD	MCQ
Embryology	Developme nt of	Describe the developmental events of	LGF	MCQ
	tongue	tongue	3/ /5	/
	Developme nt of	Describe the development of	LGF	MCQ
	Developme nt of	Describe the development of salivary glands	LGF	MCQ

Histology	Oral cavity	Describe the microscopic structure of	LGF	MCQ
		lips		
		Describe the histological features of	LGF	MCQ
		tooth in longitudinal and transverse		
		section		
		Explain the histology of tongue.	LGF	MCQ
		Differentiate between the microscopic	LGF	MCQ
		picture of anterior 2/3rds and posterior		
		1/3rds of the		
		tongue		

	Esophagus	Identify the epithelium of esophagus	LGF	MCQ
		and esophageal glands in mucosa		
		Differentiate between musculature in	LGF	MCQ
		different parts of the esophagus		
Physiology	General principles	Describe electrical activity of	LGF	MCQ
	of gastrointestinal	gastrointestinal smooth muscle		
	motility			
		Describe the mechanism of excitation of smooth	LGF	MCQ
		muscle of gastrointestinal		
		Differentiate between slow wave and spike	LGF	MCQ
		potential		
	Neural control of	Differentiate between mesenteric and	LGF	MCQ
	GIT function	submucosal plexus.		
	(Enteric Nervous			
	system)			

	Classify the following enteric nervous system neurotransmitters as excitatory or inhibitory: norepinephrine, acetylcholine, CCK, VIP, histamine, and somatostatin	LGF	MCQ
	Describe the role of autonomic nervous system in regulation of GIT's function	LGF	MCQ
T 3	Differentiate between sympathetic and parasympathetic modulation of the enteric nervous system and the effector organs of the GI tract	LGF	MCQ

	Describe three types of gastrointestinal reflexes	LGF	MCQ
Hormonal control of Gastrointestinal motility	Describe gastrointestinal hormone actions, stimuli for secretion, and site of secretion	LGF	MCQ
Functional types of movements in the gastrointestinal tract	Describe the functional types of movements in the gastrointestinal tract	LGF	MCQ
5	Describe law of gut.	LGF	MCQ
(至)	Describe blood flow through the villus and its significance	LGF	MCQ
Gastrointestinal blood flow— Splanchnic circulation	Describe anatomy of the gastrointestinal bloodsupply	LGF	MCQ

	Describe the effect of gut activity and metabolic factors on gastrointestinal blood flow		MCQ
	Describe nervous clantrol of gastrointestinal bloodflow	LGF	MCQ
Ingestionof food	Describe the mechanics of ingestion of food	LGF	MCQ
	Describe chewing and mastication	LGF	MCQ

	Describe different stages of swallowing.	LGF	MCQ
	Describe the effects of the pharyngeal stage of swallowing on respiration	LGF	MCQ
General principles of alimentary tract secretion	Describe basic mechanisms of stimulation of the alimentary tract glands	LGF	MCQ
5	Describe dual effect of sympathetic stimulation on alimentary tract glandular secretion	LGF	MCQ
Role of mucus and saliva	Describe the secretion of saliva and its nervous regulation	LGF	MCQ

	Describe the plasma and saliva concentrations of Na+, Cl-, and HCO3- at low secretion rates and at high secretion rates and the principal cell types involved in each secretion rate.	LGF	MCQ
	State the substrates and digestion products of salivary amylase (ptyalin).	LGF	MCQ
	Identify the stimuli and cell types involved in GI secretion of mucous, and identify the function of salivary mucus.	LGF	MCQ

		Describe three types of stimuli that increase salivarysecretion.	LGF	MCQ
		State the components of the saliva important in oral hygiene, and identify the role of salivary secretions in eliminating heavy metals	LGF	MCQ
	Disorders of swallowing and esophagus	Describe the clinical abnormalities of swallowing mechanism	LGF	MCQ
		Describe Achalasia and Megaesophagus	LGF	MCQ
Biochemistry	Saliva	Describe the composition of salivary secretions	LGF	MCQ
	1	Describe the formation and characteristics of salivary secretions	LGF	MCQ
		Elaborate the functions of saliva	LGF	MCQ

Pathology	Carcinoma of	Describe the histological types and presentation	LGF	MCQ
	Esophagus	of esophageal		
		carcinoma 16		
ENT	Oral ulceration	Enlist the causes of oral ulcerations	LGF	MCQ
		Describe Aphthous ulcers and its	LGF	MCQ
		treatment		
		Describe the clinical features and drugsused to	LGF	MCQ
		treat esophageal		
		candidiasis		

Theme 2: Pain Epigastrium

Subject	Topic	Learning objective	Teaching strategy	Assessment
Gross Anatomy	Anterior abdomen Wall	Describe the origin, insertion, nerve supply and actions of anterolateral abdominal wall muscles	Demo/SGD	MCQ
		Describe the formation of rectus sheath	Demo/SGD	MCQ
		Describe the contents of rectus sheath	Demo/SGD	MCQ
	THE STATE OF THE S	Describe the surface anatomy of anterior abdominal wall Describe the structures related to transpyloric plane	Demo/SGD	MCQ
		Enlist various types of abdominal hernias	Demo/SGD	MCQ
	Inguinal canal	Describe the boundaries of inguinal canal	LGF	MCQ

	Enlist the contents of inguinal canal in males and females	LGF	MCQ
	Differentiate between direct and indirect inguinal hernia	LGF	MCQ
Peritoneum	Describe greater and lesser	LGF	MCQ
	Describe the nerve supply of peritoneum	LGF	MCQ
	Describe the anatomy of lessersac.	LGF	MCQ
	Describe the boundaries of epiploiec foramen	LGF	MCQ
	Describe the various peritoneal pouches, recesses and ligaments	LGF	MCQ

Stomach	Describe the gross structure of	MCQ
	stomach	
	Describe the blood supply and	MCQ
	lymphatic drainage of stomach	
	Describe the anatomy of stomach	MCQ
	bed	
Duodenum	Describe the gross structure and	MCQ
	blood supply of duodenum	
	Write the relations of various parts of	MCQ
	duodenum	
Pancreas	Describe the gross structure of	MCQ
	pancreas and its ductal system	
Stomach	Enumerate the different layers of the	MCQ
	stomach wall	
	Write a note on gastric glands.	MCQ
	Differentiate between fundic and	MCQ
	pyloric mucosa	
	Duodenum	stomach Describe the blood supply and lymphatic drainage of stomach Describe the anatomy of stomach bed Duodenum Describe the gross structure and blood supply of duodenum Write the relations of various parts of duodenum Pancreas Describe the gross structure of pancreas and its ductal system Stomach Enumerate the different layers of the stomach wall Write a note on gastric glands. Differentiate between fundic and

	Duodenum	Discuss histological features of duodenum and describe duodenal glands.	LGF	MCQ
	Pancreas	Describe the histology of pancreas	LGF	MCQ
		Differentiate histologically between exocrine and endocrine portions of pancreas	LGF	MCQ
Embryology	Development of foregut	Describe the development of stomach	LGF	MCQ
	THE THE PERSON NAMED IN COLUMN TO PERSON NAM	Describe the development of duodenum	LGF	MCQ

		Enlist various developmental anomalies of stomach	LGF	MCQ
		Enlist various developmental anomalies of duodenum	LGF	MCQ
	Pancreas	Describe the development of pancreas	LGF	MCQ
		Enlist various anomalies of pancreas	LGF	MCQ
Physiology	Motor function of Stomach	Describe the motor function of stomach.	LGF	MCQ
		Describe basic electrical rhythm of the stomach wall	LGF	MCQ
	(2)	Describe Pyloric pump	LGF	MCQ
	1	Describe role of the pylorus in controlling stomach emptying	LGF	MCQ
		Describe the regulation of gastric emptying	LGF	MCQ

Gastric secretion	Describe characteristics of the gastric secretions	LGF	MCQ
	Describe the mechanism of secretion of different gastric glands 22	LGF	MCQ
	Describe the phases and regulation of gastric secretion.	LGF	MCQ
	Enlist the hormones that inhibit and increase gastric secretions.	LGF	MCQ

		Enumerate the reflexes that inhibit and increase gastric secretions	LGF	MCQ
Biochemistry	Gastric secretions	Describe the chemical composition of gastric secretions	LGF	MCQ
		Describe the functions of HCI and other constituents of gastric secretions	LGF	MCQ
		Discuss the mechanism of synthesis and secretion of HCl from gastric mucosa	LGF	MCQ
	(2)	Discuss the mechanism of secretion and role of Intrinsic factor from gastric parietal cells	LGF	MCQ
Pathology	Peptic ulcer disease	Describe the mechanism of formation of peptic ulcers, its stages and complications	LGF	MCQ
		Describe the etiology, pathology and clinical presentation of gastric	LGF	MCQ

		Describe the mechanism of	LGF	MCQ
		development, presentation and		
		complications of acute pancreatitis		
Pharmacology	Drugs used in	Classify the drugs used in Peptic ulcer	LGF	MCQ
	Peptic ulcer	disease		
		Describe the mechanism of action of	LGF	MCQ
		drugs used in Peptic ulcer		

Forensic	Poisons	Enlist indications and	LGF	MCQ
Medicine	identification	contraindicationsforgastriclavage Describe the		
	through gastric	sampling technique of		
	lavage	gastric lavage fluid		
Medicine	GERD and	Describe the etiology, clinical features,	LGF	MCQ
	Peptic ulcer	complications and drug treatment of GERD and		
		peptic ulcer		
		disease		
Surgery	Peptic ulcer	Describe the complications of long-	LGF	MCQ
		term peptic ulcer disease and its surgical		
		management		
	Lump in the	Describe common causes of lump in abdomen and	LGF	MCQ
	abdomen	enlist the common surgical procedures for treatment of		
		hernia.		
	Acute pancreatitis	Describe the etiology, clinical features,		MCQ
		complications and	LGF	
		management of acute pancreatitis		

Theme 3: Jaundice

Subject	Topic	Learning objective	Teaching strategy	Assessment
Gross Anatomy	Liver	Describe the borders and surfaces of liver	Demo/SGD	MCQ
		Describe the visceral surface of liver	Demo/SGD	MCQ
		Describe the peritoneal reflections and associated ligaments of liver	Demo/SGD	MCQ
	5	Describe the lobes and segments of liver	Demo/SGD	MCQ
	1	Describe the blood supply of liver	LGF	MCQ
		Describe the hepato renal pouch of morrison and its clinical significance	LGF	MCQ
	Extra hepatobiliary apparatus	Describe the gross anatomy of gall bladder	Demo/SGD	MCQ
		Describe calot's triangle	LGF	MCQ

		Describe the gross anatomy of extra hepatic billiary tree	LGF	MCQ
	Spleen	Describe the gross anatomy of spleen and blood supply of spleen	LGF	MCQ
	Hepatic portal venous system	Describe the formation and tributaries / branches of hepatic portal venous system	LGF	MCQ
		Explain the clinical significance of hepatic portal system	LGF	MCQ
Embryology	Developme nt of distal fore gut	Describe the development of liver	LGF	MCQ
		Describe the development of gall bladder and billiary tree	LGF	MCQ

		Describe the developmental anomalies of liver and biliary tree	LGF	MCQ
Histology	Liver	Discuss the histological features of liver	LGF	MCQ
		Describe liver parenchyma and general structural plan of the liver	LGF	MCQ
		Describe the histological features of the structures present in the portal triad	LGF	MCQ
	Spleen	Discuss the histological features of spleen	LGF	MCQ
	-	Differentiate between red pulp and white pulp	LGF	MCQ
Physiology		Describe the role of pancreatic secretions in digestion.	LGF	MCQ
	Pancreatic secretion	Describe the phases and regulation of pancreatic secretion	LGF	MCQ

Physiology of liver	Describe Physiological Anatomy of the Liver	LGF	MCQ
	Describe blood flow through the liver	LGF	MCQ
	Describe metabolic functions of liver	LGF	MCQ
	Describe Regulation of Liver Mass— Regeneration	LGF	MCQ
	Describe Bilirubin formation and excretion	LGF	MCQ

	Secretion of bile by liver	Describe the mechanism of secretion of bile by the liver	LGF	MCQ
		Describe the function of bile salts in fat digestion and absorption	LGF	MCQ
		Describe functions of the biliary tree in digestion	LGF	MCQ
Biochemistry	Bile	Describe the constituents of bile	LGF	MCQ
		Describe the functions of bile	LGF	MCQ
		Describe the mechanism of gall stone formation	LGF	MCQ
Pathology	Acute/ chronic viral hepatitis	Describe the different viruses causing acute and chronic hepatitis	LGF	MCQ
		Describe the pathogenesis, stages and clinical presentation of liver cirrhosis	LGF	MCQ

Pharmacology	First pass hepatic	Describe the mechanism of drugs	LGF	MCQ
	metabolism of	detoxification and metabolism in the		
	drugs	liver		
	Hepatotoxic drugs	Enlist some of the commonly used hepatotoxic drugs and their 1	LGF	MCQ

Forensic	Hepatotoxic	Enlist the poisons which cause	LGF	MCQ
Medicine	poisons	hepatotoxicity		
		Diagnose poisoning through routine		
		toxicological sampling		
Community	Hepatitis B and C	Describe the epidemiology of	LGF	MCQ
Medicine	virus infection	hepatitis B and C virus infection and		
		its control measures		
		Describe water borne hepatitis	LGF	MCQ
		(Hepatitis A and E) viruses and its		
		control measures		
Medicine	Liver cirrhosis	Describe the etiology, clinical	LGF	MCQ
		features, complications and		
		treatment options of liver cirrhosis		
Surgery	Obstructive	Describe the etiology, clinical features,	LGF	MCQ
	jaundice	biochemical investigations and treatment		
		options of obstructive		
		jaundice		

Theme 4: Diarrhoea and Constipation

Subject	Topic	Learning objective	Teaching strategy	Assessment
Gross Anatomy	Jejunum and ileum	Describe the gross features of jejunum and ileum	LGF	MCQ
		Tabulate differences in gross features and blood supply of jejunum and ileum	LGF	MCQ
	Mesenteries	Describe the mesentery of small intestine	LGF	MCQ
	Appendix	Describe the gross features, blood supply and mesentery of appendix	Demo/SGD	MCQ
	(3)	Describe the clinical correlates of appendix	LGF	MCQ
	Abdominal aorta	Enumerate the branches of abdominal aorta.	Demo/SGD	MCQ
		Describe the course and distribution of celiac trunk	LGF	MCQ

	Describe the course and distribution of superior mesenteric artery	LGF	MCQ
	Describe the course and distribution of inferior mesenteric artery	LGF	MCQ
Inferior vena cava	Describe the origin ^{3,4} course, tributaries and relations of inferior vena cava	LGF	MCQ
Lymphatic drainage	Describe the origin, course and relations of citerna chili	LGF	MCQ
	Describe the lymphatic drainage of abdominal organs	LGF	MCQ

Embryology	Development of	Describe the formation and rotation	LGF	MCQ
	midgut	of midgut loop		
		Describe the physiological herniation	LGF	MCQ
		of midgut loop		
		Enlist the derivatives of mid gut loop	LGF	MCQ
		Describe the development of	LGF	MCQ
		mesenteries		
		Describe the various anomalies of	LGF	MCQ
		midgut development		
Histology	Jejunum and ileum	Discuss histological features of	LGF	MCQ
		jejunumand describe plica circulares.		
	24	Discuss histological features of ileum	LGF	MCQ
	151	and describe Payers patches.		
	132	Discuss the various structural	LGF	MCQ
	10	specializations meant for increasing the		
	/	surface area of small intestine (plica		
		circulares, crypts of lieburkhun,		
		villi and microvilli)		

	Appendix	Discuss histological features of appendix.	LGF	MCQ
Physiology	Movement s of the	Describe different types of movements of small 36	LGF	MCQ
		Describe the control of peristalsis by nervous and hormonal signals	LGF	MCQ
	Secretion of small	Describe secretion of mucus by Brunner's	LGF	MCQ

	Pancreatic	Describe the chemistry, secretion, functions	LGF	MCQ
		·	LOI	WOQ
	enzymes	and regulation of pancreatic enzymes		
	Intestinal digestive	Describe the chemistry, secretion,	LGF	MCQ
	enzymes	functions and regulation of small		
		intestinal digestive enzymes		
		Describe secretion of intestinal digestive	LGF	MCQ
		juices by the crypts of Lieberkühn		
	Gastrointestinal	Describe the secretion, structure,	LGF	MCQ
	hormones	functions and regulation of Gastrin,		
		Secretin, Cholecystokinin's and other		
		GI hormones		
	Disorders of	Describe abnormal digestion of food in	LGF	MCQ
	small intestine	the small intestine in pancreatic failure		
		Describe mal absorption by the small	LGF	MCQ
		intestinal mucosa in Sprue		
Biochemistry	Pancreatic	Describe the composition of	LGF	MCQ
	secretions	pancreatic secretions		
		Describe the mechanism of secretion	LGF	MCQ
		and actions of pancreatic enzymes		
		Describe the mechanism of synthesis	LGF	MCQ
		of Bicarbonates		
	L			

	Digestion and	Describe the mechanism of digestion	LGF	MCQ
	absorption Nutritional	and absorption of fats in the Define Protein energy mainutificon	LGF	MCQ
Community	Fdisorsorre	intestines Beatings related dinicities of digestion and	L &F	MCQ
Medicine	Adi pose titissues	Discuss ascipus et leis we introduce ostasis absorption of proteins in the	LGF	MCQ
Pharmacology	Anti-diarrheal	Gleasiures ti-diarrheal drugs and their intestines	LGF	MCQ
Pediatrics	₩ €₩	meshanismhef actionogy, clinical Describe the mechanism of digestion	L&F	MCQ
	ga l©trogateori tis	Gassies drugs used itagons tipation	LGF	MCQ
	constipation	end their rotechare gas to ention tis intestines		
		Describe the mechanism of absorption of Iron, Vitamin-B12 and Folate in the intestines	LGF	MCQ
	Energy requirement of human body	Discuss the daily energy requirement of a human body in health and disease	LGF	MCQ
	/3	Define BMR	LGF	MCQ
		Enlist the causes of high and low BMR	LGF	MCQ
		Describe the daily requirements of common vitamins, Iron, Calcium, lodine and other minerals	LGF	MCQ

Theme 5: Bleeding Per Rectum

Subject	Topic	Learning objective	Teaching strategy	Assessment
		S. AMEDIA.		
Gross Anatomy	Large intestine	Describe the gross features of cecum, ascending, transverse and descending and sigmoid colon	Demo/SGD	MCQ
		Describe the mesentery of large intestine	Demo/SGD	MCQ
	2-4	Describe the gross anatomy of rectum	Demo/SGD	MCQ
	13	Describe the gross anatomy of anal canal	Demo/SGD	MCQ
	1	Describe the blood supply of anal canal and its clinical correlates.	LGF	MCQ
		Describe the boundaries and contents of Ischiorectal (anal) fossa	LGF	MCQ
Embryology	Development of hind gut	Describe the partitioning of cloaca	LGF	MCQ

		Enlist the derivatives of hind gut	LGF	MCQ
		Enlist the developmental anomalies of hindgut	LGF	MCQ
Histology	Colon	Discuss the histological features of colon	LGF	MCQ
		Describe the characteristic features of intestinal glands	LGF	MCQ
	Rectum	Describe the histological features of Rectum	LGF	MCQ
Physiology	Movements of the Colon	Describe different types of movements of colon	LGF	MCQ
		Describe gastro-colic reflex and duodeno-colic reflexes	LGF	MCQ
		Describe the mechanism of defecation	LGF	MCQ
	Secretion of Large Intestine		LGF	MCQ

Disorders of Large intestine	Describe constipation, megacolon	LGF	MCQ
	Explain mechanism of diarrhea and its causes.	LGF	MCQ
	Explain paralysis of defection in spinal cord injuries	LGF	MCQ
General Disorders of the gastrointestinal tract	Describe the mechanisms of Vomiting and Nausea	LGF	MCQ
	Describe Vomiting Act	LGF	MCQ
	Describe Gastrointestinal Obstruction	LGF	MCQ
	Describe gases in the gastrointestinal	LGF	MCQ

Metabolism

Subject	Topic	Learning objective	Teaching strategy	Assessment
Theme-6	6: Glucose co	ontrol (Carbohydrate metabolism)		
Biochemistry	Oxidative Phosphorylation	Describe the generation of proton gradient & the resultant motive force across the inner mitochondrial membrane by transport of electrons through ETC which in turn produces ATP by oxidative phosphorylation		MCQ
		Describe the structure of ATP synthase enzyme(complex-V) & explain how it works as a rotary motor to synthesize ATP from ADP & Pi	LGF	MCQ
	Respiratory Chain Inhibitors &	Describe the control of the rate of respiration, oxidation of reducing equivalents via ETC & its tightly coupling with oxidative phosphorylation in mitochondria	LGF	MCQ
	Δ,	Discuss certain common poisons which block respiration or oxidative phosphorylation & identify their site of action	LGF	MCQ
Biochemistry	Intestinal juices	Describe the composition of intestinal juices	LGF	MCQ
Pathology	Carcinoma of colon and Rectum	Describe the etiology, histological findings, clinical presentation and staging of carcinoma of colorectal carcinoma	LGF	MCQ
Surgery	Colorectal malignancies	Describe the etiology, clinical features, investigations and management of colorectal cancers	LGF	MCQ

	Explain how uncouplers act as poisons by dissociating oxidation from oxidative phosphorylation via ETC but at the same time they may have a physiological role in generating body heat	LGF	MCQ
Glycolysis	Define Glycolysis	LGF	MCQ
	Describe the entry of glucose into different kinds of cells through various GLUT transporters	LGF	MCQ
	Describe the reactions of glycolysis	LGF	MCQ
	Describe the transportation of NADH to Mitochondria via various Shuttles	LGF	MCQ
	Describe the energetics of glycolysis	LGF	MCQ
	Describe the fates of pyruvate	LGF	MCQ
	Describe the types of glycolysis especially the anaerobic glycolysis	LGF	MCQ
	Describe the key enzymes and regulation of glycolysis	LGF	MCQ
	Discuss the glycolysis in RBC	LGF	MCQ
	Describe the biomedical Significance and clinical disorders of glycolysis	LGF	MCQ
	Discuss glycolysis in cancer cells	LGF	MCQ
Oxidation of Pyruvate	Describe the conversion of pyruvate into acetyl CoA	LGF	MCQ

	Enumerate the enzymes & coenzymes of PDH		LGF	MCQ
	complex			
	Describe the sequence of reactions catalyzed	by	LGF	MCQ
	PDH complex.			
	Describe the regulation of PDH complex		LGF	MCQ
	Discuss the clinical aspects of PDH complex		LGF	MCQ
	especially the congenital lactic acidosis			
Tricarboxylic Acid	Define citric acidcycle		LGF	MCQ
Cycle				
	Describe the sources of acetyl CoA in		LGF	MCQ
	mitochondria			
	Describe the reactions of TCA		LGF	MCQ
	Discuss the energetics of TCA		LGF	MCQ
	Discuss the energy yield of one molecule of		LGF	MCQ
	glucose when it is converted into carbon dioxid	de		
	and water			
	Name the vitamins that play key role in TCA		LGF	MCQ
	Describe the amphibolic nature of TCA		LGF	MCQ
	Discuss the regulation of TCA		LGF	MCQ
Hexose Mono	Discuss the Role of Pentose Phosphate	LGF		MCQ
Phosphate shunt	Pathway			
-	Name the tissues where Hexose Mono	LGF		MCQ
	Phosphate shunt occurs			
	Describe the reactions of the two parts of	LGF		MCQ
	Hexose Mono Phosphate shunt			
	Describe the Role of thiamine in Hexose	LGF		MCQ
	Mono Phosphate shunt			
	·			

	Enumerate the Similarities & differences b/w	LGF	MCQ
	glycolysis and HMP shunt pathway		
	Discuss the functions of NADPH (produced in	LGF	MCQ
	Hexose Mono Phosphate shunt) in various		
	tissues and cells		
	Discuss G6PD deficiency and its effects in	LGF	MCQ
	various tissues and cells		
	Describe the regulation of HMP shunt	LGF	MCQ
	pathway		
Uric Acid	Enumerate the products of Uric acid	LGF	MCQ
Pathway	pathway and theirimportance		
	Discuss why ascorbic acid is vitamin for	LGF	MCQ
	humans		
Galactose	Describe the uses & requirements of	LGF	MCQ
Metabolism	galactose in the body		
	Enumerate the inhibitors of TCA and	LGF	MCQ
	their sites of inhibition		
Gluconeogenesi	Define Gluconeogenesis	LGF	MCQ
	Name the organs and sub cellular	LGF	MCQ
	location where Gluconeogenesis		
	Describe the substrates or precursors of	LGF	MCQ
	Gluconeogenesis		
	Describe the three bypass reactions	LGF	MCQ
	Describe the Gluconeogenesis from Fatty	LGF	MCQ
	Acids		
	Discuss the Cori's cycle	LGF	MCQ
	Discuss the regulation of Gluconeogenesis	LGF	MCQ

	Name the key enzymes of Gluconeogenesis	LGF	MCQ
	Discuss the various reactions with enzymes involved	LGF	MCQ
	Describe the Genetic Deficiencies of Enzymes in Galactose Metabolism and their effects	LGF	MCQ
Fructose Metabolism	Describe the Main source of Fructose	LGF	MCQ
	Discuss the various reactions with enzymes involved	LGF	MCQ
	Discuss the various reactions with enzymes involved	LGF	MCQ
	Describe the Genetic Deficiencies of Enzymes in Galactose Metabolism and their effects	LGF	MCQ
Glycogen Metabolism	Describe the structure and functions of the glycogen especially the significance of its polymer	LGF	MCQ
	Describe the Difference between Liver & muscle glycogen	LGF	MCQ
	Describe the synthesis of glycogen by two mechanisms with its enzymes	LGF	MCQ
	Discuss the breakdown of glycogen with its enzymes	LGF	MCQ
	Describe the Regulation of Glycogen metabolisms	LGF	MCQ
	Discuss the glycogen storage diseases with deficient enzymes and cardinal clinical features	LGF	MCQ

subject	Topic	Learning objectives	Teaching strategy	Assessment
Theme 7: Ob	esity (Fat m	etabolism)		<u> </u>
Biochemistry	Fatty acid (FA)	Enumerate the organs where	LGF	MCQ
	synthesis	fatty acid synthesis occurs with		
	(De Novo)	sub cellular sites		
		Discuss the source of Acetyl CoA that will be	LGF	MCQ
		used for FA synthesis with reason		
		Discuss how acetyl CoA comes out of	LGF	MCQ
		mitochondria for the synthesis of FA		
		Describe the steps of FA synthesis with	LGF	MCQ
		enzymes		
		Describe the FA synthase enzyme with its	LGF	MCQ
		structure and components		
		Describe the product of FA synthase and the	LGF	MCQ
		subsequent fate of this product		
		Discuss the regulation of FA synthesis	LGF	MCQ
		Discuss why animals cannot convert fatty	LGF	MCQ
		acids into glucose		
		Describe the further elongation and	LGF	MCQ
		desaturation of FA		

	Enumerate the various methods of oxidation of FA	LGF	MCQ
	Discuss the stages of beta oxidation with its reactions	LGF	MCQ
	Calculate the no. of ATP obtained when one molecule of palmitic acid is oxidized completely	LGF	MCQ
	Describe the genetic deficiencies of FA oxidation i.e. MCAD & CAT deficiencies with their hallmarks	LGF	MCQ
	Discuss the oxidation of odd-chain FA	LGF	MCQ
	Compare the processes of FA synthesis with FA oxidation	LGF	MCQ
Metabolism of Ketone bodies	Enumerate the ketone bodies	LGF	MCQ
/3	Define ketogenesis	LGF	MCQ
/	Describe the steps of ketogenesis	LGF	MCQ
	Discuss the energy yield during ketogenesis in liver	LGF	MCQ
	Enumerate the conditions in which there is increased ketogenesis	LGF	MCQ
	Discuss utilization of ketone bodies	LGF	MCQ

	Discuss the energy yield in ketone bodies	LGF	MCQ
	utilization in extra hepatic tissues		
	Describe the regulation of ketogenesis in well-	LGF	MCQ
	fed healthy conditions, during early stages of		
	starvation & in prolonged starvation		
	Discuss the ketoacidosis in diabetes	LGF	MCQ
Complex	Describe the synthesis of triacylglycerol by	LGF	MCQ
Lipid metabolism	two mechanisms		
	Describe the synthesis of phosphatidic acid	LGF	MCQ
	Enumerate the substances formed from	LGF	MCQ
	phosphatidic acid		
	Describe the synthesis of	LGF	MCQ
	glycerophospholipids		
	Discuss the degredation of	LGF	MCQ
	glycerophospholipids		
	Describe the synthesis of ceramide and	LGF	MCQ
	sphingophospholipids (shingomyelin)		
	Discuss the degradation of shingomyelin	LGF	MCQ
	Discuss Niemann-Pick disease with its cardinal	LGF	MCQ
	clinical features		

	Discuss Farber disease with its cardinal clinical	LGF	MCQ
	features		
	Describe the synthesis of glycosphingolipids	LGF	MCQ
	Describe the degradation of	LGF	MCQ
	glycosphingolipids		
	Describe the abnormalities of phospholipid metabolism i.e. true demyelinating diseases	LGF	MC Q
	and sphingolipidosis		
Eicosanoid metabolism	Define eicosanoids and describe their two classes	LGF	MCQ
	Describe the synthesis of prostanoids by cyco- oxygenase pathway	LGF	MCQ
	Enumerate the two isomers of cyclo-oxygenase with theirinhibition	LGF	MCQ
	Discuss whylow dose aspirin therapy is used in strokes and heart attacks	LGF	MCQ
	Describe biochemical reason for the adverse effects of NSAIDs & steroids	LGF	MCQ
	Describe the catabolism of the prostanoids	LGF	MCQ

	Describe the lipoxygenase pathway for synthesis	LGF	MCQ
	of Leukotrienes and lipoxins		
	Describe the synthesis of leuktriene	LGF	MCQ
	biosynthesis inhibition		
	Enumerate the leukotriene receptor	LGF	MCQ
	antagonists		
Metabolism	Describe the major sites of cholesterol synthesis	LGF	MCQ
of cholesterol	as well as sub cellular sites		
	Describe the source of cholesterol synthesis	LGF	MCQ
	Describe the various steps of cholesterol	LGF	MCQ
	synthesis		
	Discuss the regulation of cholesterol synthesis	LGF	MCQ
	Enumerate the inhibitors of HMG CoA	LGF	MCQ
	reductase inhibitors		
	Describes the degradation and excretion of	LGF	MCQ
	cholesterol with		
	synthesis of bile acids, their conjugation, bile salt formation and micelle		
	formation in lumen of the intestine		
	Discuss the enterohepatic circulation of bile salts	LGF	MCQ
	Discuss the role of bile acid sequestrants i.e.	LGF	MCQ
	cholestyramine and dietary fiber		
	Discuss the regulation of bile acid synthesis	LGF	MCQ

	Metabolism of	Describe the structure of a	LGF	MCQ
	lipoproteins	typical lipoprotein particle		
		Enymerate the various classes of LP	LGF	MCQ
		Enumerate the functions of apolipoproteins	LGF	MCQ
		Describe the steps of chylmicrons'	LGF	MCQ
		metabolism		
		Describe the metabolism of VLDL	LGF	MCQ
		Describe the metabolism of LDL	LGF	MCQ
		Describe the metabolism of HDL	LGF	MCQ
	Disturbances of	Differentiate between hyperlipidemia and	LGF	MCQ
	Lipid metabolism	dyslipidemia		
		Describe the Classification of hyperlipidemia wi enzyme deficiency	th LGF	MCQ
Medicine	Hyperlipidemias	Describe the epidemiology, preventive	LGF	MCQ
		strategies and diseases associated with hyperlipidemias		

Theme 8: Wasting (Protein metabolism)

Subject		Topic	Learning	objective	Teachir strateg	•
Biochem	& c pro disa	ino acid pool hemical cesses for similation of teins	Discuss how amino acid pool is form	ned	LGF	MCQ
			Discuss the chemical processes resport dissimilation of proteins: transamination deamination and trans deamination	on,	LGF	MCQ
		Discuss the o	clinical importance of	LGF		MCQ
Ammonia transport and effects of ammonia toxi on brain		and transport	mmonia is formed in various tissues red to liver fects of ammonia toxicity in brain	LGF		MCQ
Ureacycle&i associated inherited disorders	its	Describe The Formation in	Krebs-Henselet Cycle of Urea Liver	LGF		MCQ
			clinical significance of various olved in urea formation	LGF		MCQ

Metabolism of	Discuss biosynthesis, fate, metabolic functions	LGF		MCQ
aromatic amino	and related inherited disorders of Discuss biosynthesis, fate, metabolic			
acids	Discuss biosynthesis, fate, metabolic ariomatic amino acids			MCQ
Metabolism of	functions and related inherited disorders of acidic Discuss plosynthesis, rate, metabolic	LGF		MCQ
sulphur containing	amino acids, functions and related inherited disorders of sulphu	ır	Samuel Control	
amino acids	Discuss plosynthesis, tate, metabolic containing amino acids	LGF		MCQ
Metabolism of	functions and related inherited disorders of Discuss biosynthesis, fare, metabolic branched chain amino acids tunctions and related inherited disorders of Glycing	LGF		MCQ
individual amino	branched cháin amino acids	е.		
Purine nucleotide acids metabolism	Enumerate purine and Pyrimidine bases serine, and alarine	LGF		MCQ
metabolism	Describe the steps of denovo synthesis of the	LGF		MCQ
	parent purine nucleotide i.e Inosine mono	LGI		MCQ
	phosphate (IMP)		-	
		LOF		MOO
	Discuss the conversion of IMP to AMP & GMP	LGF		MCQ
	Describe the regulation of purine synthesis	LGF	1/~	MCQ
	Describe the salvage pathway of purine	LGF		MCQ
	synthesis with its regulation		Los	11100
	Describe Lesch-Nyhan syndrome cardinal clinical features	with its	LGF	MCQ
	Discuss the anti-metabolites of p nucleotides i.e purine analogs, amin		LGF	MCQ
	analogs & folic acid analogs		SC.2/	
	Enumerate the synthetic inhibitors synthesis with their mechanisms	of purine	LGF	MCQ
	Discuss the synthesis of deoxy ribon	ucleotides	LGF	MCQ
	Describe the mechanism of action ribonucleotide reductase with its i	_	LGF	MCQ

	Describe the degradation of purine nucleotides	LGF	MCQ
	Describe the fate of adenine	LGF	MCQ
	Describe why the average serum level of uric acid in humans is close to the solubility limit	LGF	MCQ
	Discuss the diseases associated with purine degradation i.e. gout	LGF	MCQ
	Describe the types of gout	LGF	MCQ
	Discuss why allopurinol is used in the treatment of gout	LGF	MCQ
	Discuss adenosine deaminase deficiency	LGF	MCQ
Pyrimidine nucleotide metabolism	Discuss the steps of de novo Pyrimidine synthesis	LGF	MCQ
	Discuss the synthesis of thymidine mono phosphate from deoxy uridine mono phosphate with its inhibition	LGF	MCQ
	Describe the salvage pathway of pyrimidines	LG F	MCQ
	Describe the degradation of Pyrimidine nucleotides	LGF	MCQ
	Discuss the abnormalities of Pyrimidine metabolism	LGF	MCQ
	Discuss Orotic aciduria	LGF	MCQ

Discuss the regulation of Pyrimidine	LGF	MCQ
metabolism		



List of practical works

Subject	To pic	Learning objectives	Teaching strategy	Assessment
Histology	Lips and tongue	Identify the histological features of lips and	Practical	MCQ
	Esophagus	tongue under the microscope Identify the histological features esophagus under the microscope	Practical	MCQ
	Stomach	Identifythe histological features of stomach under the microscope	Practical	MCQ
	Duodenum	Identify the histological features duodenum under the microscope	Practical	MCQ
	Li ve r	Identify the histological features of liver under the microscope	Practical	MCQ
	Gall bladder	Identify the histological features of gall bladder under the microscope	Practical	MCQ
	Jejunum and Ilium	Identifythe histological features of Jejunum and Ilium under the microscope	Practical	MCQ
	Appendix	Identify the histological features Appendix under the microscope	Practical	MCQ
	Colon and Rectum	Identify the histological features of Colon and Rectum under the microscope	Practical	MCQ

Physiology	Examination of abdomen	Examine a standardized patient's abdomen	Practical	OSPE
Biochemistry	Determination of plasma proteins	Estimate the plasma proteins in a given blood sample	Practical	OSPE
	Determination of free, total and combined acidity of the Gastric juice	Estimate free, total and combined acidity of gastric juice	Practical	OSPE
	Determination of serum Bilirubin	Estimate serum Bilirubin in a given blood sample	Practical	OSPE
	Determination of Titrable acidity of urine	Estimate the Titrable acidity of urine	Practical	OSPE
	Determination of serum cholesterol	Estimate serum Cholesterol in a given blood sample	Practical	OSPE

Teaching and learning strategies:

The follo	wing teaching / learning method	ls 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 (MCQs). The assessment of practical knowledge involves oral, spot, or objective structured practical examinations (OSPE).

Multiple Choice Questions (MCQs):

- Multiple choice questions (MCQs) are a form of assessment for which students are asked to select the best choice from a list of answers.
- MCQ 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 MCQs and will be compiled according to the shared blueprint.
Objec	tive Structured Practical Examination (OSPE)
0	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 shree
	blueprint.

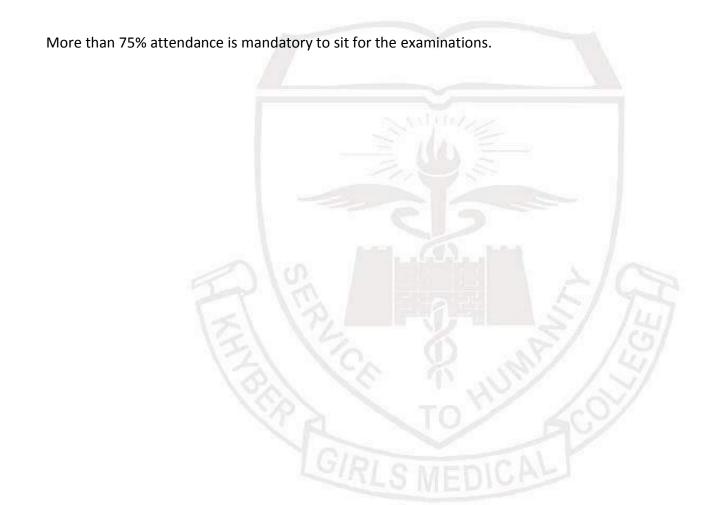
Internal Evaluation:

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

Distribution of 13 Marks for block E paper		
Marks obtained	Average of Percentage in Block exam and Pre Professional exam.	

Distribution	of 10 Marks for Block E OSPE/OSPE
Marks obtained	Average of percentage in Block OSPE Exam and Block Pre Prof OSPE
)	Practical copies

Attendance Requirement:



Learning resources for students

Anatomy

- Snell Neuroanatomy
- B.D Churasia
- Nelter Atlas
- Langman embryology

Physiology

- Guyton nd Hall physiology
- Ganong physiology
- Human Physiology from cells to system by lauralee sherwood
- BRS Physiology
- Neuroscience by Dale Purves

Biochemistry

Chatterjee text book of Biochemistry

Harpers Biochemistry

Lippincotts Biochemistry

Satya Narayan biochemistry

Keithalmore embryology

Laiq Hassain Basic Histology

Difore Atlas Histology

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