

NEUROSIENCES II FOURTH YR STUDY GUIDE

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
Time tables:
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 practice

Curriculum Committee KGMC

Chair:

Professor Dr.Zahid Aman , Dean KGMC.

Co-Chair:

Dr. Ameer Mohammad Associate Dean KGMC.

Clinical Sciences:

- Dr Mohammad Noor Wazir ,Department of Medicine KGMC/HMC
- Dr. Said Amin Department of Medicine KGMC/HMC.
- Dr. Sofia Iqbal, Department of Ophthalmology KGMC/HMC.
- Dr. Ghareeb Nawaz Department of ENT KGMC/HMC.
- Dr. Bushra Rauf Department of Gynae 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.

Behavioral Sciences:

• Dr. Ameer Abbas Department of Psychiatry KGMC/HMC.

Medical Education

- Dr. Naheed Mahsood, Department of Medical Education, KGMC.
- Dr. Naveed Afzal Khan, Department of Medical Education, KGMC.
- Dr Onaiza Nasim , Department of Medical Education, KGMC

Basic Sciences:

- Dr. Khalid Javed Department of Pathology, KGMC.
- Dr. Zubia Shah Department of Physiology, KGMC.
- Dr. Amin-ul-Haq Department of Biochemistry, KGMC.
- Dr. Naheed Siddique Department of Forensic Medicine, KGMC.
- Dr. Shams Suleman Department of Pharmacology, KGMC.
- Dr. Raheela Amin Department of Community Medicine, KGMC.
- Dr. Shahab-ud-Din, Department of Anatomy, KGMC.

Outcomes of the curriculum:

The outcomes of the curriculum of MBBS According to the PMDC are as follows

- Knowledgeable
- Skilful
- Community Heath Promoter
- Problem-solver
- Professional
- Researcher
- Leader and Role Model

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



Themes

Table 1: Thematic Distribution

S. No	Themes	Duration in days
1	Disturbed sleep	5
2	Disturbed mood & behaviour	5
3	Right-sided weakness and inability to speak	3
4	Loss of consciousness and Fits	5
5	Tremors	2
6	Headache	5
7	Paraplegia	2
8	Numbness and tingling	3



Teaching Hours Allocation

Table 2: Subject Wise Hours Distribution

S#	Subject	Hours (approximate)
1	Pathology	24
2	Pharmacology	22
3	Forensic medicine	20
4	Community medicine	36
5	General medicine	12
6	Psychiatry	10
7	Paediatrics	5
8	Neurosurgery	2
9	Orthopaedics	
10	Anaesthesia	
11	PRIME/MEDICAL EDUCATION	2
12	PRIME/RESEARCH*	16**
13	Family medicine	/ / 01/ 1
	TOTAL	139

* two hours per week for research project in the whole academic session

**the final marks of research events are NOT included in total hours as these are not used in developing assessment blueprints.

Learning Objectives

By the end of NS II Module, 4th year MBBS students will be able to:

- 1) Describe anxiety disorders and their pharmacological management.
- 2) Explain the concepts of Mood disorders and their pharmacological management.
- 3) Explain psychotic disorders and their pharmacological management.
- 4) Describe the pathophysiology and management of Dementias.
- 5) Elaborate the pathophysiology, clinical features, management, and prevention of cerebrovascular diseases.
- 6) Classify epilepsy and describe the pharmacological management of epilepsy in children and adults.
- 7) Describe the types and protocols of anesthesia and explain the drugs used as anesthetics.
- 8) Explain the pathology and clinical features of cerebellar diseases.
- 9) Elaborate the clinical features and pharmacological management of Parkinson's disease.
- 10) Explain the clinical features and management of Motor neuron disease and Friedrich's ataxia.
- 11) Describe the pathology and management of head injury.
- 12) Describe the pathogenesis, clinical features, and management of common CNS infections.
- 13) Classify brain, spinal cord, and peripheral nerves tumors, and describe their clinical features and management.
- 14)Explain the pathophysiology, clinical features, investigations and management of Multiple sclerosis, transverse myelitis, and Guillain Barre syndrome.
- 15) Classify peripheral neuropathies and elaborate their etiologies and clinical presentations.
- 16) Explain the clinical features and forensic approach to a patient with neurotoxic poisons.
- 17) Explain the forensic aspects of insanity and head injury.

Specific Learning Objectives

Table 3: Theme Wise Learning objectives

	Theme I: Disturbed sleep					
S#	Subjects	Topics	Los	Contents	Hours	
1.	Psychiatry	Sleep disorders	Describe the types of sleep disorders	Sleep disorders and its	1 Hour	
			Explain the pharmacological and non-pharmacological management of sleep disorders	management		
	T	2/2	Describe the ways of improving healthy sleep	7		
		Non-organic insomnia	Define non-organic insomnia Explain the management of non-organic insomnia	Non-organic insomnia and its treatment		
		Sleep wake cycle disorders	Describe the concept of sleep-wake cycle disorder	Sleep Walk and its treatment	_	
		LGIRLS	Describe the pharmacological and non- pharmacological			

			management of sleep-wake		
			wake cycle disorder		
2.	Pharmacology	Introduction to the	Describe basic terms like	Common	1 Hour
		Pharmacology of CNS	neurotransmitters,	terminologies BBB	
			neuromodulator/neurotropic		
			factors, withdrawal	Neurotransmitters	
			symptoms (abstinence		
		201	syndrome), cross-tolerance,	Ion channels and	
			reverse tolerance	its receptors	
			(sensitization) and cross-		
		e	dependence		
			Describe the blood-brain		
	1	10 10	barrier and its clinical	1	
	2-	210	significance	\mathcal{L}_{i}	
	175	1 12	Enlist the principal	U)	
	13	$2 \setminus \sum_{i=1}^{n}$	neurotransmitters and their	2/-	
	1	31 1.8	receptors in the CNS	0	
		193	Describe voltage-gated,		
			ligand-gated (ionotropic),		
		LGIRICI	ion channels and		
		and a	metabotropic receptors on		
			the neuronal membrane		

		Classify the drugs acting on the CNS	
Sedati (Minor	ve-hypnotics tranquilizers)	Classify broadly the Sedative-Hypnotics	Minor tranquilizers
(Minor Benzo	diazepines	Sedative-HypnoticsClassify BenzodiazepinesDescribe thepharmacokinetics ofBenzodiazepinesDescribe the mechanism ofaction of BenzodiazepinesDescribe thepharmacological effects ofBenzodiazepinesDescribe the clinical uses ofBenzodiazepinesDescribe the adverse effectsof BenzodiazepinesDescribe the tolerance anddependence onBenzodiazepines	tranquilizers Benzodiazepines and its pharmacological characteristics

	Describe the drug interactions of Benzodiazepines Name the antidote (competitive antagonist) to Benzodiazepines
Barbiturates	Classify barbiturates
	Describe the mechanism of action and clinical uses of barbiturates
EP 82	Describe the difference regarding the mechanism of action of Barbiturates in comparison to Benzodiazepines
Buspirone	Describe the mechanism of action and clinical use of Buspirone
GIR	Describe the merits and demerits of Buspirone in comparison to Benzodiazepines

		Ramelteon	Describe the mechanism of action and clinical use of Ramelteon		
		CNS stimulants	Classify CNS stimulants		-
		Respiratory analeptics	Describe the mechanism of action, clinical uses and	Respiratory Aneleptics	-
		Nikethamide)	adverse effects of Respiratory analeptics		
		Methyl xanthine/Theophylline, Caffeine, Theobromine)	Describe the mechanism of action, clinical uses and adverse effects of Methyl xanthine	Methylxanthine	
	E.	Sibutramine	Describe the mechanism of action and clinical use of Sibutramine	Sibutramine	_
3.	Forensic Medicine	Classification of neurotoxins	Define and classify neurotoxins	Classifications	1 Hour
		Cerebral Poisons- Somniferous Poisons	Describe and enlist Somniferous poison.	Types MOA	
		MorphineOpium	Describe the mechanism of action for the Somniferous poison.	Sign and symptoms	

	Heroin	Describe different signs,	Autopsy
		symptoms and autopsy	appearance
		appearance in a typical of	Fatal dose
		Somniferous poisons.	Treatment and
		Describe fatal dose,	diagnosis
		treatment, and diagnosis for	Medicolegal
		the Somniferous poisons.	importance
	100	Describe medico-legal	
		importance for the	
		Somniferous poisons.	
	6	Describe and enlist	
		Somniferous poison.	
	Inebriant Poisons	Describe and enlist Inebriant	Types
1	Ethyl Alcohol	poison.	MOA
	Methyl Alcohol	Describe mechanism of	Sign and
	1721 16.	action for the Inebriant	symptoms
	181 16	poison.	Autopsy
	1 643	Describe different sign,	appearance
		symptoms, and autopsy	Fatal dose
	LGIRIE	appearance in a typical of	Treatment and
	0.0	Inebriant poisons.	diagnosis

	Describe fatal dose,	Medicolegal
	treatment, and diagnosis for	importance
	the Inebriant poisons.	
	Describe medico-legal	
	importance for the Inebriant	
	poisons.	
Sedative & Hypnotics	Describe and enlist sedative	Types
Chloral hydrate	and hypnotics	MOA
Barbiturates	Describe mechanism of	Sign and
	action for the Sedative and	symptoms
C	hypnotics.	Autopsy
	Describe different sign,	appearance
	symptoms, and autopsy	Fatal dose
27/70	appearance in a typical of	Treatment and
171 12	Sedative and hypnotics.	diagnosis
121 10	Describe fatal dose,	Medicolegal
131 1.81	treatment, and diagnosis for	importance
	the Sedative and hypnotics.	
	Describe medico-legal	
GIRIC	importance for the Sedative	
1120	and hypnotics.	

F	Fuels, stimulants and	Describe and enlist fuels,	Fuels:
	nallucinogens	stimulants and	Stimulants
	Agrochemical	hallucinogens.	Hallucinogens
	poisons	Describe mechanism of	Sign and
	Kerosene	action of fuels, stimulants	symptoms
	Hallucinogens-	and hallucinogens.	Autopsy
	LSD	Describe different sign,	appearance
	• Stimulants-	symptoms and autopsy	Fatal dose
	Amphetamines	appearance in a typical case	Treatment and
		of fuels, stimulants and	diagnosis
	C	hallucinogens poisoning.	
		Describe fatal dose,	
	0	treatment, and diagnosis of	
24		fuels, stimulants and	-C
151	172	hallucinogens.	41
172	A No.	Describe medico-legal	1
	21 12	importance of fuels,	0
	SAS -	stimulants and	
		hallucinogens.	
	Drug Dependence	Describe Drug dependence	Drug dependence
	0.0	and its psychological	Its psychological
		effects.	effects

			Describe drug abuse and outline the procedure to investigate a case due to narcotics.	Drug abuse	
4.	Community medicine/epidemiology	Epidemiology	Define epidemiology Explain the basic concepts of epidemiology	Definition Concept	1 Hour
		Study design	Classify and elaborate study designs	Study Design	
		Screening	Explain the screening in epidemiology	Screening	
	T	Measures of mortality and morbidity	Explain the measures of morbidity and mortality	Measurement of mortality and morbidity	



	Theme II: Disturbed Mood & Behaviour					
S#	Subjects	Topics	Los	Contents	Hours	
1.	Psychiatry	Depressive disorders	Classify depressive disorders	Classification	2	
	(mood and anxiety		Describe the aetiology,	Aetiology	Hours	
	disorders)		clinical features and	C/F		
		15.	management protocols of	Management		
			different depressive			
		21	disorders			
		Bipolar Affective	Describe the clinical	Clinical	-	
		Disorder	features and management	presentation		
	1		protocols of Bipolar	Management		
	5	P18	affective disorders	1		
	1-5	Suicide	Describe the preventive	Preventive		
	13	115	measures of suicide	measures		
	1	Anxiety Disorders	Classify anxiety disorders	Classification	-	
		1603	Differentiate between	Differences		
		VA V	medical and psychiatric	Management		
		GIPLA	causes of anxiety			
		MLS.	Differentiate between			
			anxiety and phobia			

	Describe the pharmacological and non- pharmacological management of different anxiety disorders including relaxation techniques and breathing exercises	
Dissociative disorders	Explain the different behavioral and neurological presentations of dissociative disorders Describe the pharmacological and non- pharmacological management of dissociative disorders	Types Management
Stress related disorders	Classify stress related disorders Explain the concept of stress in stress related disorders	Classification and management

			Explain the pharmacological and non-pharmacological management of stress related disorders		
		Somatoform disorders	Classify somatoform disorders	Classification Counselling of	_
			Describe the concept of medically unexplained	patient	
			Counsel a patient with medically unexplained symptoms		
	E	Atypical depression and seasonal affective disorder	Describe the clinical presentation of atypical depression	C/F Management	
	13	Z Kon	Recognize the symptoms of atypical depression	5	
		Contraction of the second	Describe the management of atypical depression and seasonal affective disorders	1	
2.	Psychiatry (Psychotic illnesses)	Personality disorders	Classify personality disorders	Classification C/F	1 Hour

	Describe the clinical	Diagnosis
	features, diagnostic criteria	Management
	and management of	
	personality disorder	
Psychotic disorders	Differentiate between	Types concept
	organic and non-organic	Classifications
	psychosis	
	Explain the concept of	
	psychosis	
- 21	Classify psychotic disorders	
Schizophrenias	Describe the clinical	C/F
	features, diagnostic criteria	Diagnosis
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and management of	Management
<u>)</u> (0)	Schizophrenias	Psychotherapy
515	Explain the role of	Electroconvulsive
1 12	psychotherapy and	Rehabilitations
2 Va	Electroconvulsive therapy in	strategies
61 16	Schizophrenias	
192 -	Describe the rehabilitations	
Val	strategies with patients of	
LGIRLS	Schizophrenias	
Delusional disorders	Describe the types and	Management and
	management of delusional	Types
	disorders	
	Psychotic disorders Schizophrenias Delusional disorders	Describe the clinical features, diagnostic criteria and management of personality disorderPsychotic disordersDifferentiate between organic and non-organic psychosisExplain the concept of psychosisExplain the concept of psychosisSchizophreniasDescribe the clinical features, diagnostic criteria and management of SchizophreniasSchizophreniasDescribe the clinical features, diagnostic criteria and management of SchizophreniasExplain the role of psychotherapy and Electroconvulsive therapy in SchizophreniasDescribe the rehabilitations strategies with patients of SchizophreniasDelusional disordersDescribe the types and management of delusional disorders

2	General Medicine	Substance abuse disorder	Describe the ways of differentiating delusional disorders from Schizophrenias Describe the concept of drug dependence Classify of drug abuse Describe the principles of management of substance abuse Explain the concept of harm reduction	General concept Classification Management Harm reduction	1 Hour
3.	General Medicine	Alzheimer's disease and Dementias	Explain the pathophysiology, clinical features and management of Alzheimer`s disease Describe the reversible and irreversible causes of Dementia	Pathophysiology C/F Management Dementia and its types	1 Hour
4.	Pharmacology	Depression Antidepressants SSRIs (Selective Serotonin Reuptake Inhibitors)	Describe the Monoamine hypothesis of depression Classify antidepressants Enlist SSRIs Enlist the most selective SSRIs	Monoamine hypothesis Classification Types MOA Clinical uses	2 Hours

		Describe the	Adverse Effects
		pharmacokinetics,	
		mechanism of action,	
		clinical uses, adverse	
		effects and drug	
		interactions of SSRIs	
	/7	Classify antidepressants	
	TCAs (Tricyclic	Enlist TCAs	Types
	Antidepressants)	Describe the mechanism of	MOA
		action, clinical uses,	Clinical uses
		adverse effects and drug	Adverse Effects
		interactions of TCAs	
		Enlist TCAs	
	MAOIs (Monoamine	Enlist MAOIs	Monoamine
	Oxidase Inhibitors)	Describe the	Oxidase
12	21 1/2	pharmacokinetics,	Inhibitors
	41 10	mechanism of action,	4/
	122	clinical use, adverse effects	1
	VY A N	and drug interactions of	
	Cin	MAOIs	
	LEIRLS	Describe Serotonin	
		syndrome	
		Describe Hypertensive	
		Cheese reaction	
		Describe St John's Wort	

	Describe the procedure of switching-over from one category of antidepressants to another one Describe "Augmentation" of antidepressant therapy Describe Electroconvulsive Therapy (ECT) for depression	
Psychoses (Schizophrenia and others)	Describe the Dopamine hypothesis of Schizophrenia	Dopamine hypothesis
Antipsychotics (Anti- schizophrenic drugs)	Describe the advantages of Atypical antipsychotics over the Typical (Classical/Traditional/Old) agents	Antipsychotic drugs
GIRLS	Describe the mechanism of action of Antipsychotics Describe the pharmacological effects of Antipsychotics Describe the clinical uses of Antipsychotics	

	Describe the drug interactions of Antipsychotics Describe the adverse effects of Antipsychotics	
	Explain the drug treatment of extrapyramidal syndrome	
Bipolar affective disorder (Manic Depressive illness)	Describe the concept of "mood-stabilization" in Bipolar affective disorder (Manic Depressive illness)	Mood stabilization
Mood-stabilizing drugs	Enlist Mood-stabilizing drugs	Types
Lithium carbonate	Describe the pharmacokinetics, mechanism of action, clinical uses, adverse effects and drug interactions of Lithium carbonate	Pharmacokinetics MOA Clinical uses Averse Effects
Alcohols	Describe alcoholism Describe the pharmacokinetics of Ethanol	Alcoholism and its pharmacological characteristics

]		Describe the mechanism of	
I				action of Ethanol	
				Describe the	
				pharmacological effects of	
				Ethanol	
				Describe the clinical uses of	
		17		Ethanol	
				Describe the adverse effects	
				of Ethanol	
				Describe Disulfiram-like	
				reaction with example of	
				drugs causing it	
				Describe the management of	
	2	2/0		Ethanol intoxication	
		r 10		Describe the management of	65
	12	N/P		Ethanol withdrawal	651
	13	21 1		symptoms	ŭ/
		8		Describe the treatment of	
		$\langle P \rangle$		alcoholism	
				Describe briefly Methanol	
		1		poisoning	
		Opioids	(Morphine,	Differentiate between	Types
		Diamorphi	ne,	Opioids and Opiates	MOA
		Codeine,	Pethidine,	Describe the term	Adverse Effects
		Methadone	2,	"narcotic"	Pharmacological

Pentaz	ocine,	Describe the source of	features
		Opium	
Pentaz	orphine, methorphane)	Describe the source of Opium Enlist the "brain's own Morphine" (endogenous Opioids) Classify Opioids Enlist Opioids with mixed agonist-antagonist properties Enlist Opioids with partial agonist activity Describe the pharmacokinetics, mechanism of action, pharmacological effects, clinical uses, adverse effects and drug interactions of Opioids Describe the use of opioids	features
		Describe the use of opioids as palliative care in terminal illness	
		Describe opioid rotation Describe the treatment of Opioid over dosage	

		Describe the Opioid antagonists (antidotes) Describe Opioid dependence Describe the management of Opioid dependence Describe the contraindications of Opioids	
	11	Enlist the drugs used for pain in opioid addicts	
	Tramadol	Describe the mechanism of action and clinical use of Tramadol	MOA
T	Drugs of abuse	Describe substance abuse, drug dependence, addiction and habituation	Substance abuse Drug dependence Addiction
13	3/20	Describe the Dopamine hypothesis of addiction	Habituation Dopamine
	1497	Enlist the drugs causing addiction	Types of drugs
	GIRI	Enlist the non-addictive drugs of abuse	that causes addiction
	16	Describe "Club drugs"	

			Enlist the drugs having high- risk of addiction (scored 5 on the list of relative-risk of addiction) Enlist the drugs having moderate-risk of addiction (scored 4 on the list of relative-risk of addiction) Describe the drug treatment of Nicotine, Alcohol, Cannabis and Opioid abuse Describe the drug abuse in sports with examples	Non-addictive drugs "Club drugs" Nicotine, Alcohol, Cannabis Opioids Drugs used in sports.	
5.	Forensic Medicine	Insanity and relationship to criminal charges	Define insanity.Classify insanity and explain its sub-typesDescribe relationship of insanity with criminal charges.Describe different pleas and its legal exception based on unsoundness of mind.	Insanity and relationship to criminal charges	1 Hour

	Describe McNaghten rules,	
	Durham`s rule and Impulse	
	along with its application	
	and criticism.	
	Differentiate between true	
	and feigned insanity	
Forensic Psychiatry	Define and describe Forensic	Definition
	Psychiatry.	Common
	Describe different terms	terminologies
	used in Forensic Psychiatry:	
	a) Affect	
	b) Confabulation	
	c) Delirium	
	d) Delusion	
717	e) Fague	65
171 12	f) Hallucination	21
1721 10.	g) Illusion	21
181 18	h) Intelligent Quotient	7/
NR SR	i) Lucid Interval	Ø.
	j) Neurosis	
LGIRI	k) Psychopath	
	l) Psychosis	
	m) Stupor	
	Twilight states	

	Mental health act	Define mental disorders	Types of mental	
		based on mental health act	disorders	
		Describe procedure of	Admission and	
		admission and discharge of	discharge	
		mentally ill patient based on	procedure	
		mental health act	Wandering	
	/ /	Describe procedure of	lunatic	
		handling a wandering		
		lunatic		
	Will	Define testamentary	Testamentary	
		capacity	capacity	
		Enlist conditions required	Valid Will	
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	for a valid Will	features	
R	D/02	Describe the role of a doctor	Dr-patient Will	
	517	in taking a Will from a sick	1.5	
12	$\lambda \lambda 2$	person	31	
\·	Civil and criminal	Explain the concept of civil	Civil and criminal	
	responsibility of	and criminal responsibility	responsibility of	
	mentally ill patients	of mentally ill patients	mentally ill	
	Nois	V V	patients	
6. Community medicine	Mental health	Describe classification of	classification	1 Hour
		mental health illnesses	Definition	

			Discuss global perspectives	perspectives	
			and epidemiology of mental	Epidemiology	
			health disorders	Risk Factors	
			Discuss risk factors leading	Prevention and	
			to mental health problems	Control	
			Discuss prevention and	-	
		17	control of mental health		
			disorders		
7.	PRIME/MEDICAL	Conflict resolution	Explain the prerequisites for	Prerequisites	1 Hour
	EDUCATION		conflict resolution as a	Skills	
			leader	demonstration	
			Show the ability to solve		
			problems regarding difficult		
			patients/attendant.		
8.	Community	Biostatistics:	Describe the significance of	Significance	1 Hour
	medicine/biostatistics	Introduction	biostatistics in health and	1.1	
	12	$\lambda \lambda 2$	epidemiology	221	
	12	Data and variable	Define and classify variables	Definition and	
		types	10.052 / 5	Types	
		Sampling	Define sampling	Definition	
		VI A	Discuss types of sampling	Types	
		Biases in	Define Bias	Definition	
		epidemiological	Discuss different types of	Types	
		atudiaa	biases	Brovention	
		studies	Discuss how bias can be	FIEVEIILIUII	
			prevented		

Theme III: Right-sided weakness and inability to speak					
S#	Subjects	Topics	Los	Contents	Hours
1.	Pathology	Hypoxia, ischemia, and infarction	Define hypoxia, ischemia, and infarction, and describe its morphology and consequences in the context of CNS involvement	Common terminologies	1 Hour
		Intracranial haemorrhage	Describe the aetiology, risk factors and morphology of intracranial haemorrhage	C/F Aetiology Risk Factors	
		Strokes syndromes	Describe the aetiology, risk factors, morphology, and clinical and radiological features of stroke		
		Subarachnoid haemorrhage (SAH)	Explain the aetiology, risk factors and clinical features of SAH		
2.	General Medicine	Stroke Describe the risk factors of Types C/F, rad	Risk Factors Types C/F, radiological	1 Hour	
		LGIRLS	Explain the types of strokes	findings	
			Describe the clinical features, radiological features, and management of a patient with intracerebral bleed Describe the clinical features, radiological features, and management of a patient with stroke due to an infarction	Management of intracerebral bleed and infarction	
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3.	Community medicine	Non-communicable diseases: Strokes	Discuss the epidemiological determinants of stroke in community	Epidemiology Prevention Rehabilitation	1 Hour
	E	918	Discuss the prevention and rehabilitation of strokes	P	
4.	Neurosurgery	al Cr	Describe the neurosurgical management of stroke and Subarachnoid hemorrhage	Management	1 Hour
5.	Community medicine/biostatistics	Measures of central tendency	Classify measures of central tendency	Central tendency	1 Hour
		LGIRLS	Calculate measures of central tendency		

		Interpret and signify the results Describe the advantages and disadvantages of different measures	
Measures dispersion	of	Classify measures of dispersion	Dispersion
		Calculate measures of dispersion	
		Interpret the results of measures of dispersion	
00		Explain the advantages and disadvantages of measures of dispersion	
E		Explain the use of different measures in specific circumstances	
Normal di	stribution	Define normal distribution	Normal
		Describe normal distribution	curve and its
		Calculate and graphically represent normal distribution	significance

		Explain its use & significance in relation to data Describe percentile and interquartile range Calculate and depict percentile and interquartile range Explain use and significance of these in different situations	
H H	Confidence Interval, Confidence level, Standard error	Define confidence level and interval Describe confidence level and interval Calculate confidence level and interval Explain their use and significance in different situations	Confidence interval, confidence level Standard errors
	P value, critical region, rejection	Define P value, critical region, rejection region, α β errors	P Value and its significance
	region, alpha beta errors	Describe P value, critical region, rejection region, α β errors	

	Calculate P value, critical	
	region, rejection region, α B	
	errors	
	Describe their use and	
	significance in different	
	situations	



	Theme IV: Loss of consciousness and Fits					
S#	Subjects	Topics	LOS	Contents	Hours	
1.	General Medicine	Seizures	Define seizures	Definition	1	
			Differentiate between a seizure	Classification		
		17	and syncope	Pathophysiology		
			Classify epilepsy	C/F		
			Explain the pathophysiology,	Investigations		
		0	clinical features, risk factors,	Risk Factors		
			investigations and treatment of	Management		
			Tonic-Clonic epilepsy			
			Explain the pathophysiology,	-		
			Tonic-Clonic epilepsy Explain the pathophysiology, clinical features, investigations and treatment of absence			
	5	21%	seizures	T^{λ}	nent	
	1-5	$\langle \langle \mathcal{P} \rangle$	Explain the pathophysiology,			
	13	51 13	clinical features, investigations	2/		
		31 15	and treatment of psychomotor	6		
		1831	epilepsy			
		VA.	Explain the management of a	-		
		GIRI	patient with status epilepticus			
2.	Anaesthesia	i i i i i i	Define anaesthesia	Definition	1	

Introduction to the subject	Describe different types of anaesthesia	Types
General anaesthesia	Describe the methods of induction of anaesthesia	Methods of induction
Neuroaxis block	Describe the following terms: Spinal block Epidural block Caudal block 	Common terminologies
Regional anaesthesia	Combined spinal /Epidural Describe the following terms: • Nerve block • Single shot • Continuous infusion Local infiltration	
Preoperative evaluation and risk assessment	Explain the purpose of preoperative evaluation Perform risk assessment of patient undergoing general anaesthesia	Preoperative evaluation and risk assessment

	Describe the steps of history taking in preoperative evaluation for anaesthesia Describe the plans of general and regional anaesthesia techniques Describe the ASA classification for pre-operative risk	
Monitoring in anaesthesia	assessment Describe the non-invasive and invasive techniques of patients` monitoring for the following	Non-invasive and Invasive techniques
SERVICE GIRL	parameters during general anaesthesia <u>Non-invasive:</u> a. Oxygenation b. Hemodynamic c. Temperature d. Electrical activity e. Neuromuscular activity f. Circulation <u>Invasive:</u>	

			 a. Oxygenation b. Hemodynamic c. Temperature d. Cardiac output e. Central venous pressure Circulation 		
3.	Pharmacology	Anti-seizure drugs (Anti-epileptics)	Classify anti-seizure drugs Enlist the "Broad-spectrum" anti-epileptics (Valproate and Lamotrigine)	Classifications	1
	T	Carbamazepine	Describe the mechanism of action, clinical uses, adverse effects and drug interactions of Carbamazepine	Clinical uses MOA Adverse Effects Drugs	-
		Phenytoin	Describe the pharmacokinetics of Phenytoin with reference to the phenomenon of zero-order kinetics Describe the mechanism of action, clinical uses, adverse effects and drug interactions of Phenytoin	interactions	

Valproate	Describe the mechanism of	
	action, clinical uses, adverse	
	effects and drug interactions of	
	Valproate	
Ethosuximide	Describe the mechanism of	-
	action, clinical uses and adverse	
	effects of Ethosuximide	
Phenobarbitone	Describe briefly the historic role of phenobarbitone in the	Clinical uses
	management of epilepsy	
Benzodiazepines	Name the benzodiazepines used in the management of epilepsy	
Lamotrigine, Topiramate and	Name the new antiepileptic drugs	Anti-epileptic drugs and its
others	Describe the mechanism of action, clinical uses and adverse effects of Lamotrigine and Topiramate	features
GIRI	Describe the use of antiepileptics during pregnancy	-

		Describe drug interaction of antiepileptics with oral contraceptive pills	
	Status epilepticus	Describe the management of status epilepticus	Management
	General anaesthetics	Describe the stages of general anaesthesia Describe balanced anaesthesia	General anaesthetics
	Inhaled anaesthetics (N ₂ O,	Describe the pharmacokinetics of Inhaled anaesthetics	Inhaled anaesthetics
5	Halothane, Isoflurane, Sevoflurane, Desflurane)	Discuss the clinical significance of Blood: Gas partition coefficient of Inhaled anaesthetics	2
		Describe the mechanism of action of Inhaled anaesthetics Define MAC ₅₀ (minimum Alveolar	1
	GIRL	Describe the significance of MAC ₅₀ Describe the pharmacological	
		effects of Inhaled anaesthetics	

		Describe the adverse effects of		
		Innaled anaestnetics		
		Describe diffusion hypoxia		
		Describe Malignant hyperthermia		
		and its management		
		ideal inhaled anaesthetics		
	IV anaesthetics (Thiopentone,	Describe the mechanism of action, clinical use and adverse	IV anaesthetics	
	Propofol, Etomidate.	effects of Intravenous anaesthetics		
T	Ketamine, Midazolam,	Describe re-distribution of Thiopentone	2	
(A	Fentanyl)	Define neuroleptanalgesia and neuroleptanaesthesia	5/	
		Describe dissociative anaesthesia		
	GIRI	Name the anaesthetic agent that causes dissociative anaesthesia		
		Describe TIVA (Total Intravenous Anaesthesia) technique		

		Pre-anaesthetic	Describe Pre-anaesthetic	Pre-anaesthetic	
		medications	medications	medications	
			Describe the drugs used as Pre-		
			anesthetic medications		
		Obstetric analgesia	Describe the drugs for obstetric	Obstetric	-
		/ /	analgesia	analgesia	
4.	Forensic medicine	Deliriant Poisons	Describe and enlist Deliriant	Deliriant Poisons	1
		• Dhatura	poisons.		
		Hyocyamus	Describe mechanism of action of	-	
		nigra	the Deliriant poisons.		
		Cannabis indica	Describe different sign,		
		A. Carlo	symptoms and autopsy		
	1	10	appearance in a typical of		
	2-	2170	Deliriant poisons.	\mathcal{L}_{i}^{\prime}	
	17	1 172	Describe fatal dose, treatment,	4/	
	12	21 10.	and diagnosis of the Deliriant	1	
		31 16	poisons.		
		1 692	Describe medico-legal	-	
			importance of the Deliriant		
		LGIRI	poisons.		
			Describe and enlist Deliriant		
			poisons.		

5.	Community	Z test & it's	Define & Describe 'z' test	Z test & it's	1
	medicine/biostatistics	application, Types	Describe its use in different	application,	
		/ shapes of	statistical settings	Types / shapes	
		frequency	Calculate 'z' test	of frequency	
		distribution	Explain its application in	distribution	
			hypothesis testing		
			Interpret and apply to clinical	-	
		1	settings		
			Discuss various shapes of		
			frequency distribution		
			Describe the applications of		
			parametric and non-parametric		
	2	202	tests	2	



	Theme V: Tremors						
S#	Subjects	Topics	Los	Contents	Hours		
1.	Pathology	Neurodegenerative	Describe the aetiology, risk	Common	1		
		disorders:	factors, morphology and	Neurological			
		Alzheimer`s	clinical featur <mark>es</mark> of	disorders			
		disease	Alzheimer`s disease				
		Parkinson`s	Describe the ethology, risk				
		disease	factors, morphology and				
		Huntington's	clinical features of				
		Disease and	Parkinson`s disease				
		Spinocerebellar					
		ataxias	Describe the aetiology, risk				
	The second secon	Motor Neuron disease	factors, morphology and	7			
	5		clinical features of	7			
	13	N N 42 7	Huntington`s disease	7			
	12		Describe the clinical				
			features of spinocerebellar				
		VA V	ataxias				
		GIDI	- AL				
2.	General Medicine	Parkinson`s disease	Describe the aetiology, risk	Aetiology	1		
			factors, morphology and	Risk factors			

		clinical features of Motor	Morphology	
		Neuron Disease	Clinical	
		Describe the types, clinical	features	
		presentation and	Types	
		management of Motor		
		neuron disease		
Pharmacology	Drugs for Parkinsonism	Classify drugs for	Classification	1
	Sec.	Parkinsonism		
	Levodopa (with	Describe the	MOA	-
	Carbidopa)	pharmacokinetics,	Clinical uses	
	C	mechanism of action,	Adverse	
		adverse effects,	Effects	
1	10	contraindications and drug		
2-1	110	interactions of Levodopa	\mathcal{L}	
15		Discuss the rationale of	1/	
12		combining Carbidopa (or	1	
1	1 31 1.8	Benserazide) with Levodopa		
	SAN T	Describe the on-off		
		phenomenon		
	LGIRICH	Describe the end-of-dose	1	
	ULD IV	akinesia		
	Pharmacology	Pharmacology Drugs for Parkinsonism Levodopa (with Carbidopa)	Pharmacology Drugs for Parkinsonism Classify drugs for Parkinsonism Levodopa (with Carbidopa) Describe the pharmacokinetics, mechanism of action, adverse effects, contraindications and drug 	Pharmacology Drugs for Parkinsonism Classify drugs for Parkinsonism Classify drugs for Parkinsonism Levodopa (with Carbidopa) Describe the types, clinical presentation and management of Motor neuron disease MOA Levodopa (with Carbidopa) Describe the types, clinical presentation and management of Motor neuron disease MOA Levodopa (with Carbidopa) Describe the pharmacokinetics, mechanism of action, adverse effects, contraindications and drug interactions of Levodopa Clinical uses Discuss the rationale of combining Carbidopa (or Benserazide) with Levodopa Describe the on-off phenomenon Describe the end-of-dose akinesia

	Describe "drug holidays" for	
	Levodopa	-
Bromocriptine	Describe the mechanism of	
	action, clinical uses and	
	adverse effects of	
/ //	Bromocriptine	
Selegiline	Describe the mechanism of	
	action and clinical uses of	
	Selegiline	
	Describe the differentiating	
	point regarding the use of	
A. Martin	Selegiline as	
10	antiparkinsonian drug and	
In In	its use as an antidepressant	C
1×1 12	drug	
Apomorphine	Describe the mechanism of	
121 1.6	action and clinical use of	
	Apomorphine	
Drug-induced	Enlist the drugs causing	Drug-induced
Parkinsonism	Parkinsonism-like symptoms	Parkinsonism

			Enlist the drugs used in the		
			management of drug-		
			induced Parkinsonism		
			Describe the rationale of		
			avoiding Levodopa in drug-		
			induced Parkinsonism		
4.	Paediatrics	Cerebellar ataxias	Describe the clinical	Friedreich's	1
		Jan Market	features and management	Ataxia	
			of Friedreich's Ataxia		
5.	Community	"t" test & its	Define & Describe 't' test	t" test & its	1
	medicine/biostatistics	application	Explain its use in different	application	
		A STATE OF STATE	statistical settings		
	1	10	Calculate 't' test		
	24	10/1	Describe its application in	\mathcal{L}	
	15	172	hypothesis testing	17	
	13	A No.	Interpret and apply to	12	
	1	21 1.0	clinical settings		
		SPS N	Calculate degree of	-	
			freedom		
		Chi square test & its	Describe 'x ² ' test	Chi square	
		application	Describe its use in different	test & its	
			statistical settings	application	

		Calculate 'x ² ' test Explain its application in hypothesis testing	_
		Interpret and apply to clinical settings	-
Correlat	ion, regression	Describe Correlation &	Correlation,
		Regression	regression
		Interpret and apply to clinical settings	
Practica	l Problems in	Discuss practical problems	Practical
biostatis	tics	encountered in the	Problems in
0		application of biostatistics and SPSS	biostatistics



	Theme VI: Headache						
S#	Subjects	Topics	Los	Contents	Hours		
1.	Pathology	Meningitis	Explain the aetiology, clinical features, investigations and complications of acute pyogenic meningitis	Aetiology C/F Investigations Managements	2		
			Explain the aetiology, clinical features, investigations and complications of Tuberculous meningitis				
		Encephalitis	Explain the aetiology, clinical features, investigations and complications of viral encephalitis	7			
		Brain abscess	Explain the aetiology, clinical features, investigations and complications of brain abscess				
		Cerebral Toxoplasmosis	Explain the aetiology, clinical features, investigations and				

	complications of Cerebral	
	Toxoplasmosis	
Tumours of CNS	Describe the classification of	Common CNS
• Gliomas	brain tumours on the basis of	tumours
• Embryonal	primary and secondary origin	
neoplasms	and benign and malignant	
Meningioma	Describe the classification,	
Other neoplasms	gross and microscopic	
	morphology and clinical	
	features of Gliomas	
	Describe the classification,	
	gross and microscopic	
	morphology and clinical	5
ATT IS	features of embryonal	9
51 12	neoplasms of brain	1
121 10	Describe the gross and	
181	microscopic morphology and	
192	clinical features of Meningioma	
No.	Enlist brain neoplasms other	
LGIRL	than gliomas, meningioma and	
	embryonal cell neoplasms	

			Enlist the metastatic brain		
-			neoplasms		4
Ζ.	Pharmacology	Migraine and Cluster	Classify drugs used for the	Classification	1
		headaches	treatment of Migraine and		
			Cluster headaches		
			Enlist the drugs used for the		
			prophylaxis of Migraine and		
)	Cluster headaches		
		Triptans (Sumatriptan and	Describe the mechanism of	MOA, clinical	
		others)	action, clinical use and adverse	uses and	
			effects of Sumatriptan	adverse	
		Ergot alkaloids	Enlist Ergot alkaloids	effects	
		10	Describe the pharmacological	5.	
	1	11/1	effects of Ergot alkaloids	G	
		Ergotamine	Describe the mechanism of	1	
		121 10.	action, clinical use and adverse	8	
		131 1.6	effects of Ergotamine		
3.	Forensic	Head Injury	Describe head injury in relation	Head Injuries	1
	Medicine		to scalp and skull injuries.	and its	
		LGIRLS	Classify different varieties of skull fractures.	characteristics	

			Explain commonest site of skull fracture. Describe mechanism of cerebral injury including coup and counter coup mechanism. Describe injuries to cranial content and its medicolegal importance. Describe intracranial haemorrhages and its types in detail as per medicolegal point of view. Describe the medicolegal aspects of Punch drunk syndrome		
4.	General Medicine	Meningitis	Explain the aetiology, pathogenesis, clinical presentation, investigations and management of Acute pyogenic meningitis Explain the aetiology, pathogenesis, clinical	Pyogenic Tuberculous Meningitis	1

5.	Community	Rabies	presentation, investigations and management of Tuberculous meningitis Explain the actiology, clinical	Actiology	1
5.	medicine		presentation of a patient with Rabies	C/F Prophylaxis	
			Describe post-exposure prophylaxis of Rabies		
6.	Family medicine	Rabies prophylaxis	Describe the types of wounds inflicted by rabid dog bite	Wounds caused by	1
		0	Explain the types of active and passive immunisation for Rabies post-exposure prophylaxis	rabid dogs Types of immunizations	
		E E	Describe the indications of Rabies vaccine and immunoglobulins	1	
7.	Paediatrics	Meningitis	Explain the aetiology, pathogenesis, clinical presentation, investigations and management of Acute pyogenic meningitis in children and neonates	Aetiology, pathogenesis, clinical presentation, investigations	1

		ТВМ	Explain the aetiology,	and	
			pathogenesis, clinical	management	
			presentation, investigations and		
			management of Acute pyogenic		
			meningitis in children		
8.	Psychiatry	Chronic daily headache	Differentiate between	Types	1
			neurological and psychological	C/F	
		1	headache (chronic tension	Management	
			headache)		
			Identify the red signs in		
			p <mark>at</mark> ients with headache		
			Describe the principles of		
		10	management of acute and		
	F	In m	chronic headaches	4	
9.	PRIME/RESEARCH	Data analysis	Use MS Excel for data analysis	Data analysis	1
		121 12	Use SPSS for data analysis	8	
		131 181	Use Endnote for reference		
		1 682	management		
			Compile, analyze and write a		
		LGIRIG	dissertation		
			WIEDIG		

	Theme VII: Paraplegia						
S#	Subjects	Topics	Los	Contents	Hours		
1.	Pathology	Multiple sclerosis and	Explain the pathogenesis,	Multiple	1		
		other dem <mark>yelin</mark> ating	morphology and clinical features of	Sclerosis			
		disorders of CNS	multiple sclerosis	Common			
			Describe the morphology of the	pathological			
			following:	demyelinating			
			Acute demyelinating	disorders			
			encephalomyelitis				
			Acute necrotizing haemorrhagic				
		10	encephalitis				
2.	Forensic	Neurotoxins:	Describe and enlist spinal poison.	Sign, symptoms	1		
	Medicine	151 12	Describe mechanism of action for the	and autopsy			
		121 12	spinal poison.	appearance			
		1/21/6	Describe different sign, symptoms	6			
		163/	and autopsy appearance in a typical				
		XA	case of spinal poisons.				
		G	Describe fatal dose, treatment, and				
			diagnosis for the spinal poisons.				

		Snake bite neurotoxins Botulism toxins	Describe medico-legal importance for the spinal poisons. Describe vertebral and spinal injuries Describe different sign, symptoms and autopsy appearance in a typical case of snake bite poisons Describe different sign, symptoms and autopsy appearance in a typical case of botulism		
3.	General Medicine	Multiple sclerosis Transverse myelitis	Explain the pathophysiology, clinical features and management of Multiple sclerosis Describe the aetiology, pathophysiology, clinical features	Pathophysiology, clinical features and management	1
		Caries spine	and management of Transverse myelitis Explain the pathophysiology, clinical features, investigations and management of Caries spine		
4.	Orthopaedics	Est C	Describe the general management of a patient with traumatic paraplegia	Management of traumatic paraplegia	1
5.	Neurosurgery	Gi	Describe the general management of a patient with traumatic paraplegia Describe the types, clinical features and surgical management of spinal tumours	Traumatic paraplegia Spinal Tumor	1

	Theme VIII: Numbness and tingling						
S#	Subjects	Topics	LOS	Contents	Hours		
1.	Pathology	Patterns and types of peripheral nerves	Describe the patterns and types of neuronal injury	Types	1		
		injury		pathophysiology			
		Acute and chronic	Describe the pathophysiology and				
		demyelinating	clinical features of Guillain Barre	clinical features			
		neuropathies	syndrome				
			Explain the pathophysiology of Chronic demyelinating				
		2/10	polyneuropathies				
		Myasthenia Gravis	Describe the pathophysiology and clinical features of Myasthenia	pathophysiology			
		121 12	Gravis	clinical features			
		Tumors of Peripheral	Enlist the tumours of peripheral	Types			
		nerve	nerves	Neurofibromatosis			
		VR.	Describe the clinical features, of				
		TGI	Neurofibromatosis				

2.	Pharmacology	Local	anaesthetics	Classify Local anaesthetics	Local	1
		(Lignocai	ne and	Enlist the Local anaesthetics used	anaesthetics	
		others)		for surface anaesthesia		
				Enlist the Local anaesthetics used	-	
			17	for infiltration anaesthesia, nerve		
			11	block, spinal anaesthesia and		
				epidural anaesthesia		
				Describe EMLA (Eutectic Mixture of		
				Local Anaesthetics) and its clinical		
			1	use		
				Describe the pharmacokinetics of		
			۱.	Local anaesthetics		
		1	10	Describe the mechanism of action		
		24	10	of Local anaesthetics		
		151	\?Z	Describe the pharmacological	41	
		132	1 16	effects of Local anaesthetics on	21	
		10	N 1.9	nerves	1	
			S&N	Describe the differential blockade		
			VA-	of peripheral nerves by Local		
			LGIR	anaesthetics		
				LO WEDIOC	1	

			Describe the pharmacological effects of Local anaesthetics on other excitable membranes Describe the clinical uses of Local anaesthetics Describe the major advantages of adding Adrenaline to Lignocaine for infiltration anaesthesia Calculate the quantity of Adrenaline/ml in the traditionally used combinations of Adrenaline and Lignocaine (i.e. 1:200,000 & 1: 80,000) Describe the adverse effects of		
		13/ 13	Local anaesthetics Classify Local anaesthetics	5/	
3.	Forensic Medicine	Neurotoxins: Peripheral poison	Describe and enumerate peripheral poisons.	Peripheral poison	1
		G	Describe mechanism of action for the peripheral poisons.		

			Describe different sign, symptoms and autopsy appearance in a typical of peripheral poisons. Describe fatal dose, treatment, and diagnosis for the peripheral poisons.		
			Describe medico-legal importance for the peripheral poisons.		
4.	General	Guillain Barre	Explain the pathophysiology,	pathophysiology,	1
	Medicine	syndrome	clinical features and management	clinical features	
			of Guillain Barre syndrome	and management	
		Neuropathies	Describe the causes, types, distribution and clinical features of different neuropathies	R	
		Myasthenia Gravis	Explain the pathophysiology, clinical features and management of Myasthenia Gravis	Myasthenia Gravis Neurofibromatosis	
		GI	Describe the clinical features, types and management of Neurofibromatosis		

5.	Paediatrics	Hereditary	Describe the types, clinical features	types, clinical	1
		neuropathies	and management of hereditary	features and	
			neuropathies	management	
6.	Orthopaedics	Peripheral nerve	Describe the types and	types, clinical	1
		injury	management of peripheral nerve	features and	
			injury	management	
			Explain entrapment neuropathies		
			Describe the risk factors, clinical		
			features and management of Carpal		
			tunnel syndrome		
1					



	Practical Work						
S#	Subjects	Topics	LOS	Hours			
1.	Pathology	CSF	Describe the chemical, cytological	1			
			composition of CSF				
			Estimate the following analysis of				
			CSF:				
			Chemistry				
			Cytology				
		A Martinez	• Gram stain				
			Microbiology				
		Histopathological specimens of brain	Identify the gross structure and				
		tumours	microscopic features of:				
			• Mennigionia				
			Glioma/Astrocytoma				
2.	Pharmacology	Depression	Formulate a prescription for a newly				
			diagnosed case of depression				
		Epilepsy	Formulate prescriptions for patients				
		187 1	with Tonic-Clonic and Petit-mal				
		VPX TOY	epilepsy				
		Migraine headache	Formulate prescription for a patient				
		LGIRI SMEDIC	with migraine headache				
		ALO MEDIA					

3.	Forensic	Somniferous poisons	Recognition of Opium and Heroin	
	medicine	Inebriant poisons	Recognition of Ethyl Alcohol and its examination	
		Fuel	Recognition of Kerosene oil	
		Deliriant	Recognition of Dhatura and Cannabis	
		Spinal poison	Recognition of Nux Vomica seeds	
4.	Community	Data presentation	Identify and interpret the charts	
	medicine	• pie chart		
		• histogram		
		bar chart and its types		
		venn diagram		
		scatter plot		
		Application and Interpretation of statistical	Apply a statistical test on a given	
		data	scenario	
		Data interpretation	Interpret the normal distribution curve, skewed distribution, bi and poly-modal distribution & Standard	
		VA NO	Normal Curve	



Learning Resources

Table 4: Reference Textbooks

S#	Subjects	Resources
1.	Community medicine	1. Preventive and Social Medicine by K Park
		2. Community Medicine by M. Ilyas
		3. Basic Statistics for the Health Sciences by Jan W Kuzma
		4. Textbook of Community Medicine and Public Health, 2018. Saira Afzal, Sabeena
		Jala
2.	Neurology	1. Davidson's Principles and Practice of Medicine
		2. Kumar and Clark's Clinical Medicine, Edited by Parveen Kumar, 9th Edition
3.	Neurosurgery	1. Bailey & Love's Short Practice of Surgery, 26th Edition
4.	Pathology	1. Robbins & Cotran, Pathologic Basis of Disease, 9 th edition.
	2	2. Rapid Review Pathology, 4 th edition by Edward F. Goljan MD
5.	Pediatrics	1. Nelson Textbook of Pediatrics, 19th Edition
	12	2. Textbook of Pediatrics by PPA, preface written by S. M. Haneef
	1	3. Clinical Pediatrics by Lakshmanaswamy Aruchamy, 3rd Edition
6.	Pharmacology	1. Lippincot Illustrated Pharmacology
		2. Basic and Clinical Pharmacology by Katzung
7.	Psychiatry	1. Oxford textbook of psychiatry by Michael G. Gelder, 2nd Edition
		2. Handbook of Behavioural Sciences, by Mowadat H. Rana
		3. Drugs used in Psychiatry, by Prof. Muhammad Iqbal Afridi
		4. Kaplan Series, Behavioural Sciences, Psychiatry

Assessment Plan - 4th Year MBBS

The year-4 will be assessed in 4 blocks

- 1) Block-1 (Neurosciences-2 module) will be assessed in paper-J
- 2) Block-2 (GIT and hepatobiliary module) will be assessed in paper-K
- 3) Block-3 (Renal-2, Endocrine & Reproduction-2 module) will be assessed in paper-L
- 4) Block-4 (ENT and EYE modules) will be assessed in paper-M
- 5) Each written paper consists of 120 MCQs.
- 6) Internal assessment will be added to final marks in KMU as shown in below table.
- 7) In OSPE, each station will be allotted 6 marks, and a total of 120 (+10% marks of internal assessment) marks are allocated for each OSPE/OSCE examination.

4 th Year MBBS Modules Assessment Plan							
Theory paper	Modules	Theory marks	Internal assessment theory (10%)	OSPE/OSPE	Internal assessment OSPE/OSPE (10%)	Total Marks	
Paper J	Neurosciences-2	120	13	120	13	266	
Paper K	GIT & Hepatobiliary-2	120	13	120	13	266	
Paper L	Renal-2, Endocrine & Reproduction-2	120	14	120	13	267	
Paper M	ENT and EYE	120	13	120	13	266	
Research*				20	15	35	
Total Marks		480	53	500	67	1100	

*Research viva of 20 marks will be conducted in paper-L. However, the rest of 15 marks will be decided by the concerned department internally for the contribution of the students in research project/thesis.
Assessment Blueprints

Table 5: Paper J (MCQs)

Subject	Total MCQs	
Pharmacology	20	
Pathology	22	
Forensic medicine	18	
Community medicine	27	
PRIME	02	
Medicine	17 151 Jul	
Psychiatry	09 09	
Neurosurgery	02	
Pediatrics	05	
Anesthesia	03	
Family medicine	01	
Total	120	

Table 6: OSPE/OSCE distribution of Paper J

Subject	Viva stations	OSPE/OSCE	Total Stations
		Stations	
Pharmacology	2	3	5
Pathology	2 0	2	4
Forensic medicine	2	2	4
Community medicine	2	3	5
Medicine (neurological examination)	×		5 1
Psychiatry (counselling)	X	JAN 14	1
Total	8 то	12	20

* A minimum of 20 stations will be used in final exams. Total marks will be 120 (6 marks for each station).

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.

1. 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.

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.

1. 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.

2. Disadvantages of Short Answer Questions

- It can take time to create items with complex formulas.
- Can be turned into a measure of memorization ability.
- Grading can be subjective.
- Correct responses may appear incorrect due to minor errors such as misspellings, order of words, etc.
- Difficult to machine score. Much work is being conducted in this area, but it is still in early stages of development.

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 OSCE will be comprise of 20 examined station some will be interactive viva stations other will be observed stations . The stations will be assigned according to the blueprint.



Attendance Requirement:

More than 75% attendance is mandatory to sit for the examinations.

