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#### Bharati Vidyapeeth (DU) Medical College, Pune

III MBBS Part I: 2023-2024 Batch VI semester: Teaching Timetable: (1st September 2025-24th January 2026) Venue: Dr Anandibai Joshi Hall

Day	8.30-9.30	9.30-12.30	12.30-1.30	1.30-2.30	2.30-4.30
Monday	L-Medicine (17)	Clinics	Lunch	L- Ophthalmology (15)	SGT (47 - 4 )
				SDL -Ophthalmology (2)	Community Medicine-(17 weeks)
Tuesday	L-Surgery (18)	Clinics	Lunch	L-Paediatrics (18)	SGT- FMT 1st 3rd 5th Tues- (10 weeks)
Tucsuay					SGT ENT -2 <sup>nd</sup> 4 <sup>th</sup> Tues-(8 weeks)
	L-ENT (15)	Clinics	Lunch	L-Gynaecology (17)	SGT-Ophthalmology-
Wednesday	SDL-ENT (2)				1st 3rd 5th Wed-(10 weeks),
					SGT Ortho-2 <sup>nd</sup> 4 <sup>th</sup> Wed-(7 weeks)
Thursday	L- Community Medicine (17)	Clinics	Lunch	L Ortho (15), SDL Ortho (2)	SGT-Surgery (17 weeks)
Friday	L-Forensic Medicine (18)	Clinics	Lunch	*AETCOM-Community Medicine (6),	SGT -Medicine-(18 weeks)
				*AETCOM-FMT (12)	
	#SDL- Surgery (8),	Clinics	Lunch	*SDL Medicine (2) , *SDL Gynaecology	Extra slots for exams, revisions and
Saturday	#SDL-Medicine (8)			(6), "SDL Ortho (6), #SGT Surgery (2)	SDLs

<sup>18</sup>th October 2025-26th October 2025-Diwali Vacation

Summer Vacation: 4th February 2026 to 15th February 2026

PRINCIPAL
Bharati Vidyapeeth
(Deenled to be University)
Michael College

111043.

<sup>\*</sup>AETCOM-Community Medicine-5th September 2025 -10th October 2025, FMT-17th October 2025 -23rd January 2026

<sup>\*</sup>SDL Surgery-13th September 2025-15th November 2025, Medicine-22nd November 2025-24th January 2026

<sup>\*</sup>SDL Medicine-13th September 2025-20th September 2025, Obs-27th September 2025-15th October 2025, Ortho-22nd October 2025-10th January 2026 #SGT Surgery-17th January 2026-24th January 2026

<sup>15</sup>th December 2025 to 29th December 2025-Family Adoption Programme (FAP)

<sup>27</sup>th January 2026-3rd February 2026-6th term semester ending (II PCT) Examination

#### Bharati Vidyapeeth (DU) Medical College, Pune

III MBBS Part I: 2023-2024 Batch VII sem A: Teaching Timetable: (16th February 2026-28th February 2026) Venue: Dr Anandibai Joshi Hall

Day	8.30-9.30	9.30-12.30	12.30-1.30	1.30-2.30	2.30-4.30
Monday	L-Medicine (2)	Clinics	Lunch	L-FMT-(2)	SGT-Community Medicine (2 weeks)
Tuesday	SDL Surgery (2)	Clinics	Lunch	SGT-Community Medicine-(2)	SGT- FMT (2 weeks)
Wednesday	SDL Gynaecology (2)	Clinics	Lunch	SGT-Community Medicine-(2)	SGT-Gynaecology (2 weeks)
Thursday	L-Community Medicine (1), SGT ENT (1)	Clinics	Lunch	SDL Paediatrics (2)	SGT Surgery (2 week)
Friday	SGT FMT (2)	Clinics	Lunch	AETCOM ENT (2)	SGT Gynaecology (2 weeks)
Saturday	SGT Surgery (2)	Clinics	Lunch	SGT Medicine (1) SGT Ortho (1)	Extra hours for revision and exams

## Bharati Vidyapeeth (Deemed To Be University) Medical College, Pune

III MBBS Part I: 2023-2024 Batch VII sem B: Teaching Timetable: (16th March 2026-4th July 2026) Venue: Dr Anandibai Joshi Hall

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Day	8.30-9.30	9.30-12.30	12.30-1.30	1.30-2.30	2.30-4.30
Monday	<sup>a</sup> L-Medicine (11), <sup>a</sup> SGT Paediatrics (5)	Clinics	Lunch	L-FMT-(14)	SGT-Community Medicine (14 weeks)
Tuesday	@L-Surgery (13) @SGT Surgery (2)	Clinics	Lunch	L-CM-(13)	SGT- FMT (13 weeks)
Wednesday	#L Gynaecology- (13) #SDL Gynaecology (2) #SDL Ortho (1)	Clinics	Lunch	L-CM-(14)	SGT-Obs (14 weeks)
Thursday	!L-Community Medicine (10), !L FMT-(6)	Clinics	Lunch	L-Paediatrics (7) SDL Paediatrics (7)	_SGT FMT-(7 weeks) _SGT Gynaecology-
Friday	**SDL Ophthalmology (8), **SGT ENT-(5), **SDL ENT (1) SGT Peds (1)	Clinics	Lunch	# SGT Medicine (12) # SDL Paediatrics (1)	*SGT Paediatrics (5 weeks)  *SGT Surgery (3 week)  *SDL ENT ( 3 weeks)  *SGT FMT ( 2 weeks)
Saturday	^SGT Paediatrics (13), ^SGT Ortho (2), ^SGT Medicine (1)	Clinics	Lunch	"SDL Ortho (1) "SGT Ortho (3) "@AETCOM ENT (3) "@AETCOM Ophthalmology (7)	SDL ENT (1) Extra slots for exams, revisions and SDLs and SGTs

Block B electives-2nd March 2026-14th March 2026-8.30 am to 5 pm

Block A electives-16th March 2026-28th March 2026-1.30 pm to 5 pm, Regular morning lecture and clinical posting (8.30 am to 12.30 pm)

- <sup>a</sup>L-Community Medicine-16<sup>th</sup> March 2026-30<sup>th</sup> May 2026, <sup>a</sup>SGT-6<sup>th</sup> June 2026-4<sup>th</sup> July 2026
- @L-Surgery -17th March 2026-16th June 2026,@SGT Surgery -23rd June 2026 -30th June 2026,
- #L Gynaecology-18th March 2026-13th June 2026, #SDL Gynaecology-17th June 2026-24th June 2026, #SDL Ortho-1st July 2026
- !L-Community Medicine-19th March 2026-21st May 2026, !L-FMT-28th May 2026-2nd July 2026
- \_SGT FMT-2<sup>nd</sup> April 2026-14<sup>th</sup> May 2026, \_SGT Gynacology-21<sup>st</sup> May 2026-2<sup>nd</sup> July 2026
- \*\*SDL Ophthalmology-20<sup>th</sup> March 2026 -15<sup>th</sup> May 2026, \*\*SGT and SDL ENT-22<sup>th</sup> May 2026-26<sup>th</sup> June 2026, SGT Peds-3<sup>rd</sup> January 2026
- # SGT Medicine-3<sup>rd</sup> April 2026-26<sup>th</sup> June 2026, # SDL Paediatrics -3<sup>rd</sup> July 2026
- \*SGT Paediatrics-3rd April 2026-8th May 2026, \*SGT Surgery-15th May 2026-29th May 2026, \*SDL ENT-5th June 2026-19th June 2026, \*SGT FMT -26th June 2026 -3rd July 2026
- ^SGT Paediatrics-21st March 2026-13th June 2026, ^SGT Ortho-20th June 2026-27th June 2026, ^SGT Medicine-4th July 2026
- $^{9}$  SDL Ortho-4th April 2026,  $^{9}$  SGT Ortho-11th April 2026-25th April 2026
- @@AETCOM ENT-2nd May 2026-16th May 2026, @@AETCOM Opthalmology-23rd May 2026-4th July 2026

Prelim exam-6th July 2026-14th July 2026

University exam-10th August 2026-19th August 2026

Supplementary Prelim-3<sup>rd</sup> week of September 2026

Supplementary Final-1st week of October 2026



# Bharati Vidyapeeth

(Deemed to be University) Pune, India.

# **MEDICAL COLLEGE, PUNE**

Pune-Satara Road, Pune - 411 043 (INDIA)



III M.B.B.S (Part I) Batch: 2023-2024

Roll Nos.: 01 to 150

CLINICAL POSTING SCHEDULE: Time: 9.30 am to 12.30pm

Posting Period: 01/09/2025 to 028/02/2026: General Medicine (GM): 4, General Surgery (GS): 4, Obgy: 4, Ped: 4, Community Medicine (CM):2, ENT +Opthlmology=1+1=2=20 WKs

VI Semester:	GM	GS	Obgy	Ped	CM	ENT	Opth
01/09/2025 to 13/09/2025					Е		
15/09/2025 to 20/09/2025	A	В	C	D		E1	E2
22/09/2025 to 27/09/2025						E2	E1
29/09/2025 to 11/10/2025	В	C	D	Е	A		
13/10/2025 to 17/10/2025						A1	A2
Diwali Vacation			18/10/20	25 To 2	6/10/20	025	
27/10/2025 to 01/11/2025	В	C	D	Е		A2	A1
03/11/2025 to 15/11/2025					В		
17/11/2025 to 22/11/2025	С	D	Е	A		B1	B2
24/11/2025 to 29/11/2025						B2	B1
01/12/2025 to 13/12/2025	D	Е	A	В	C		es es es
Family Adoptic	on Program	& FMT	:15/12/20	25 to 29	/12/20	25	
30/12/2025 to 03/01/2025				Ъ		C1	C2
05/01/2026 to 10/01/2026	D	Е	A	В		C2	C1
12/01/2026 to 24/01/2026	E	A	B	С	D		AN ANY PART EAST (SEE
II Part Completion Examination	on/ VI Semest	er Endi	ng Exam	ination	27/01/	/2026 to	03/02/2026
Summer V	acation:	04/0	2/2026 to	15/02/2	2026		
VII Semester:							
16/02/2026 to 21/02/2026	Е	A	В	С		D1	D2
22/02/2026 to 28/02/2026	E	A	D	C		D2	D1

#### **Batches and Roll Nos:**

Note:

A: 1 to 30, A1: 1 to 15, A2: 16 to 30	B: 31 to 60, B1: 31 to 45, A2: 46 to 60	E: 121 to 150, E1: 121 to 125, E2: 126 to 150
C: 61 to 90, C1: 61 to 75, C2: 76 to 90	D: 91 to 120, D1: 91 to 105, D2: 106 to 120	

- At end of Clinical Posting, End of Posting (EOP) exam to be conducted which is a part of Internal Assessment.
- 2. Batch should be posted in Skills Laboratory, as per the slots given by in charge of Skills lab.

PRINCIPAL Bharati Vidyapeeth



# Bharati Vidyapeeth

(Deemed to be University)
Pune, India.

## **MEDICAL COLLEGE, PUNE**

Pune-Satara Road, Pune - 411 043 (INDIA)



III M.B.B.S (Part I) Batch: 2023-2024

Roll Nos.: 01 to 150

CLINICAL POSTING SCHEDULE: Time: 9.30 am to 12.30pm

Posting Period: 16/03/2026 to 04/07/2026

Community Medicine (CM):2, Orthopaedics: 2, Dermatology: 2, Psychiatry: 2,

ENT:2,Opth: 2+ Electives: 4 wks =16 WKs

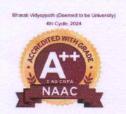
Elective Block B (Clinical)	02/0	3/2026 to	14/03/202	6: Full D	ay 9.00 am	to 5.00pm
Elective Block A (Pre and para-Clinical)	16/03	3/2026 to 2	28/03/2026	: 1.30 pr	m to 5.00pi	m
VII Semester: Posting Period	CM	Ortho	Derm	Psy	ENT	Opth
16/03/2026 to 28/03/2026	A	В	C	D	Е	F
30/03/2026 to 11/04/2026	В	С	D	Е	F	A
13/04/2026 to 25/04/2026	C	D	Е	F	A	В
27/04/2026 to 09/05/2026	D	Е	F	A	В	С
11/05/2026 to 23/05/2026	Е	F	A	В	С	D
25/05/2026 to 06/06/2026	F	A	В	C	D	Е
08/06/2026 to 20/06/2026	This	period wil	l be used for	or missed	d postings d	uring
22/06/2026 to 04/07/2026	Also	additiona	orts events.  I examinat  cademical	ions of (	CM and FM tudents.	T will be

#### **Batches and Roll Nos:**

A: 1 to 25	B: 26 to 50
C: 51 to 75	D: 76 to 100
E: 101 to 125	F: 121 to 150

#### Note:

- At end of Clinical Posting, End of Posting (EOP) exam to be conducted which is a part of Internal Assessment.
- 2. Batch should be posted in Skills Laboratory, as per the slots given by in charge of Skills lab.
- 3. The process of declaration of electives and allotment will be done in Month of January 2026-February 2026.



# Bharati Vidyapeeth (Deemed to be University)

Pune, India.



Pune-Satara Road, Pune - 411 043 (INDIA)



## **Schedule of Autopsy posting**

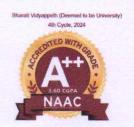
Forensic Medicine and Toxicology

III MBBS Part I: 2023-2024 batch

Time: 9.30 am to 12.30 pm

#### Schedule of visits for Autopsy Demonstration

Sr. No.	Batch	Roll No	Date	Day	Clinical posting to adjust
1	A	1 to 25	6/11/2025 & 7/11/2025	Thursday & Friday	Paediatrics
2	В	26 to 50	13/11/2025 & 14/11/2025	Thursday & Friday	СМ
3	С	51 to 75	20/11/2025 & 21/11/2025	Thursday & Friday	Medicine
4	D	76 to 100	27/11/2025 & 28/11/2025	Thursday & Friday	Surgery
5	Е	101 to 125	04/12/2025 & 05/12/2025	Thursday & Friday	Surgery
6	F	126 to 150+R	11/12/2025 & 12/12/2025	Thursday & Friday	Surgery



# Bharati Vidyapeeth

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Pune, India.



Pune-Satara Road, Pune - 411 043 (INDIA)



#### III MBBS Part I 2023-2024 Admission Batch

Family Adoption Program (FAP) and

Forensic Medicine and Toxicology(FMT) 15<sup>th</sup> December 2025-29<sup>th</sup> December 2025 (Roll numbers as per Phase I)

A Batch (1-75) A1:1-38, A2: 39-75, B Batch (76-150) B1:76-113, B2:114-150

Date	FAP	Pandemic module (Community Medicine (CM)	FMT (Self Directed Learning)	FMT (SGT-Practicals)
15/12/2025	A1	A2	B1	B2
16/12/2025	A1	A2	B1	B2
17/12/2025	A1	A2	B1	B2
18/12/2025	B1	B2	A1	A2
19/12/2025	B1	B2	A1	A2
20/12/2025	B1	B2	A1	A2
22/12/2025	A2	A1	B2	B1
23/12/2025	A2	A1	B2	B1
24/12/2025	A2	A1	* B2	B1
25/12/2025	B2	B1	A2	A1
27/12/2025	B2	B1	A2	A1
29/12/2025	B2	B1	A2	A1

#### Note:

- Timings for FAP 8.30AM to 4.30PM for respective students as per Phase I Roll nos.
- 1.30PM to 4.30PM as per batches as per Phase I Roll nos to CM and FMT.
- There will be no clinical postings during this time.

# BHARATI VIDYAPEETH (DEEMED TO BE) UNIVERSITY MEDICAL COLLEGE, PUNE

# III MBBS Part I -2<sup>nd</sup> PCT Exam Time-Table 6<sup>th</sup> semester end posting exam time table (27<sup>th</sup> January 2026 to 3<sup>rd</sup> February 2026)

Theory Examination								
Date	Day	Time	Subject	Marks				
27/01/2026	Monday	10am to 1 PM	Community Medicine	100				
28/01/2026	Tuesday	10am to 1 PM	FMT	100				

#### Venue for the theory examination

Exam Hall	Roll No.
Community Medicine exam hall	1-38
4 <sup>th</sup> Floor Anatomy exam hall	39-76
1st floor Microbiology Exam Hall	77-114
Pharmacology Demo 5 I Floor	115-150

#### Practical Examination including Viva

#### Time: 9 am onwards Venue: Respective department

Date	Day	CM	FMT	
29/01/2026	Thursday	A	В	
30/01/2026	Friday	C	D	
31/01/2026	Saturday	Е	A	
02/02/2026	Monday	D	Е	
03/02/2026	Tuesday	В	C	

#### **Practical batches**

A=1 to 30 B=31-60 C=61-90 D=91-120 E=121-150

Note: 1. Attendance is compulsory for the examination.

2. Scores of all these examinations contribute towards internal assessment.

3. Syllabus and paper pattern will be displayed by respective departments.

# BHARATI VIDYAPEETH (DEEMED TO BE) UNIVERSITY MEDICAL COLLEGE, PUNE

# III MBBS Part I -Prelim Exam Time-Table (6th July 2026 to 14th July 2026)

Theory Examination								
Date	Day	Time	Subject	Marks				
06/07/2026	Monday	10am to 1 PM	Community Medicine-I	100				
07/07/2026	Tuesday	10am to 1 PM	Community Medicine-II	100				
08/07/2026	Wednesday	10am to 1 PM	FMT	100				

Venue for the theory examination

Exam Hall	Roll No.
Community Medicine exam hall	1-38
4 <sup>th</sup> Floor Anatomy exam hall	39-76
1st floor Microbiology Exam Hall	77-114
Pharmacology Demo 5 I Flour	115-150

Practical Examination including Viva
Time: 9 am onwards Venue: Respective department

Date	Day	CM	FMT	
09/07/2026	Thursday	A	В	
10/07/2026	Friday	C	D	
11/07/2026	Saturday	Е	A	
13/07/2026	Monday	D	E	
14/07/2026	Tuesday	В	C	

#### **Practical batches**

A=1 to 30 B=31-60 C=61-90 D=91-120 E=121-150

Note: 1. Attendance is compulsory for the examination.

- 2. Scores of all these examinations contribute towards internal assessment.
- 3. Syllabus and paper pattern will be displayed by respective departments.

# BHARATI VIDYAPEETH (DEEMED TO BE) UNIVERSITY MEDICAL COLLEGE, PUNE

# III MBBS Part I -Remedial Exam Time-Table (20th July 2026 to 21st July 2026)

Theory Examination							
Date	Day	Time	Subject	Marks			
20/07/2026	Monday	10 to 1 PM	Community Medicine	100			
21/07/2026	Tuesday	10 to 1 PM	FMT	100			

Venue for the theory examination

Exam Hall	Roll No.
Community Medicine exam hall	1-38
4 <sup>th</sup> Floor Anatomy exam hall	39-76
1st floor Microbiology Exam Hall	77-114
1st Floor Pharacology Demo 5	115-150

Practical Examination including Viva
Time: 1.30 pm onwards Venue: Respective department

Date	Day	Subject
20/07/2026	Monday	Community Medicine
21/07/2026	Tuesday	FMT

Note: 1. Attendance is compulsory for the examination.

2. Scores of all these examinations contribute towards internal assessment.

3. Syllabus and paper pattern will be displayed by respective departments.

## Teaching Hours in Phase III Part I MBBS (2023-2024 batch)

Subject	Lecture			!	SGT			SDL		CP(weeks)
	VI sem	VII sem	Total	VI sem	VII sem	Total	VI sem	VII sem	Total	Total
Electives					156	156				4
General Medicine	17	13	30	36	14	50	10	0	10	4
<b>General Surgery</b>	18	13	31	36	14	50	8	2	10	4
Obs and Gynac	17	13	30	0	50	50	6	4	10	4
Paediatrics	18	7	25	0	30	30	0	10	10	4
Ortho	15	0	15	14	6	20	8	2	10	2
FMT	18	22	40	20	50	70	10	10	20	
CM	17	38	55	34	36	70	10	10	20	4
ENT	15	0	15	16	4	20	2	8	10	3
Ophthalmology	15	0	15	20	0	20	2	8	10	3
Psychiatry	0	0	0							2
Dermatology	0	0	0							2
Pandemic Module	09	09	18							
FAP				21	0	21	10		10	
AETCOM				10	09	19	06	06	12	
Total Hours	159	115	274	207	369	576	72	40	132	36
		Lectures			SGT			SDL		Clinical posting
		274			576			132	- Salt 1	576

Lectures	SGT	SDL	Clinical posting	Total hours
274	576	132	576	1558

III MBBS Part I (2023-24 a	admission) :	subjects' Month	wise covera	age of Topics and corresponding o	ompetency n	umbers
	Teachi	ing block: 1st Se	ptember 20	025 to to 4th July 2026		
	CM		FMT		ENT	

Month	TL type	CM Topics	CM Comp Nos.	FMT Topics	FMT Comp numbers	ENT Topics	ENT Comp Nos	Ophth Topics	Ophth Comp numbers
September	Lecture	Introduction to Phase III - Lectures, SGT, Pandemic Module, AETCOM, SDL, Clinical postings and FAP, Exam pattern, Marks distribution and Attendance policy.Overview of portion completed in Phase I and Phase II	1105.	Asphyxia	FM2.20	Management of diseases of Ear, Nose and Throat (External ear pathology)	EN 4.1, EN 4.2	Anatomy and embryology of eye	numbers
	SGT					Anatomy and physiology of ear, nose, throat and head and neck, Clinical Skills	EN 1.1, EN 2.11,	Anatomy and embryology of eye,	
	SDL								
	AETCOM	AETCOM- Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, non- judgmental and empathetic manner - Introductory small group session (5 groups)	Module 3.1						
	Pandemic module								
	FAP								

October	Lecture	Epidemiology and Prevention of Airborne Infection: I (Chickenpox, Rubella, Measles, Mumps) Airborne Infection-II (Acute Respiratory Tract Infection, Influenza) Airborne Infection III- (Tuberculosis and NTEP), , Airborne Infection IV – SARS/COVID 19,	CM 8.1, CM 8.3	Mechanical Asphyxia	FM2.21, FM2.22,	Management of diseases of Ear, Nose and Throat (Serous otitis media, Acute otitis media with complication, Chronic otitis media mucosal and squamosal, Squamosal chronic otitis media /Complications of otitis media (intracranial and extra cranial))	EN 4.5, EN 4.3, EN 4.6, EN 4.7, EN 4.8	Physiology of vision- vision, colour vision, binocular single vision,Refractive errors I- emmetropia,myopia,h ypermetropia,refracti ve errors II- astigmatism, presbyopia,aphakia	OP1.1,O P 1.2,OP1. 4,OP1.5
	SGT	Biostat Exercises I - Sources, types of data, presentation of data, measures of central tendency and variability,probability and normal curve Biostat Exercises II-( sampling, standard errors of mean and proportions,Test of significance) Biostat Exercises III-Correlation, fallacies in Biostatics, Health information system, statistical software, role of computer in statistics and epidemiology and screening for disease, Quiz on TB;,Debate on gender issues and empowerment,	CM 6.2-6.4, 7.3, 7.4, 8.7 9.7, 7.9, 7.6	Samples for DNA Fingerprintin g, Specimens, Demo- Autopsy, visits to AFMC for autopsy	FM14.21 , FM3.2, FM3.6, FM3.10, FM2.9, FM3.3, FM14.17 , FM14.5	Management of diseases of Ear, nose and throat, Anatomy and physiology of ear, nose, throat and head and neck (Otosclerosis, Inner ear (Meniere's disease, Vestibular schwannoma, BPPV), Deaf and Mute child Evaluation and Cochlear Implant, Facial nerve)	EN 4.1, EN 4.11, EN 3.5, EN 4.21, EN 1.1, EN 4.28	Physiology of vision,Refractive errors I,refractive errors II	OP1.1,O P 1.2,OP1. 4,OP1.5
	SDL								

	AETCOM	Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, nonjudgmental and empathetic manner - Focused small group session with role play or video, Task on standardized patients and evaluation by facilitator	Module 3.1						
	Pandemic module								
	FAP								
November	Lecture	Epidemiology and Prevention of Intestinal Infections - I (Diarrheal diseases, Cholera), Epidemiology and Prevention of Intestinal Infections - II(Food poisoning), Intestinal Infections - II (Integration with Medicine-Polio)- Viral Hepatitis, Typhoid, Polio, Epidemiology and Prevention of Arthropod borne diseases - I (Malaria, Dengue Fever) Epidemiology and Prevention of Arthropod borne diseases - II(Chikengunya, Flirariasis)	CM 8.1	Mechanical Asphyxia, Sexual Offences	FM2.23, FM3.13 to FM3.17	Management of diseases of Ear, Nose and Throat	EN 4.20, EN 4.19, EN 4.21, EN 4.12, EN 4.18,	Conjunctiva I- anatomy and functions, classification of conjuctivitis, Conjunctiva II- trachoma, allergic onjuctivitis and degenerations, Cornea I-anatomy, transperancy and methods of examination, Cornea II- bacterial and fungal corneal ulcers	OP3.3, 3.4, OP 3.5, OP 3.6,3.7, OP 4.1,OP4. 2,4.3,4.4

	SGT	Principles and measures to control disease epidemic; Investigation of food poisoning Bio medical waste management (Vertical Integration with Micro), Mindfulness session by Dr Psychiatry faculty	8.4, 20.2, 8.1, 14.1,14.2, 14.3, CM 15.1, 15.2, 15.3	Examination of victim, Examination of alleged accused, Sexual paraphilia, visits to AFMC for autopsy	FM14.15 , FM14.14 , FM14.5	Anatomy and physiology of ear, nose, throat and head and neck, Clinical skills/ Management of diseases of Ear, nose and throat	EN 4.12, EN 1.1, EN 2.15, EN 4.15	Conjunctiva I, Conjunctiva II,Cornea I, Cornea II	OP3.3, 3.4, OP 3.5, OP 3.6,3.7, OP 4.1,OP4. 2,4.3,4.4
	SDL							SDL-1-Refractive surgeries	
	AETCOM	Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, nonjudgmental and empathetic manner- Task on standardized patients and evaluation by facilitator	Module 3.1	Case studies in bioethics- Disclosure of medical errors	AETCO M3.2				
	Pandemic module								
	FAP								
December	Lecture	Zoonotic diseases - I(Rabies ,Plague, Leptospirosis, Brucellosis),Zoonotic diseases - II(Japanese Encephalitis),	CM8.1	State Medicine	FM4.1 to FM4.30	Management of diseases of Ear, Nose and Throat	EN 4.23, EN 4.24, EN 4.27, EN 4.28, EN 4.29, EN 4.33, EN 4.25	cornea III-viral keratitis, keratoconus, corneal dystrophies and degenerations, Cornea IV- keratoplasty and eye banking, Episcleriis , Scleritis	OP 4.5,4.6,4. 7,4.8,4.9, OP 5.1,OP 5.2

SGT	Family Planning I- methods with advantages and short comings evaluation of contraceptive devices, Family planning -II- Family welfare programme, National population policy evaluation of contraceptive devices, Evaluation of health education programme, Exercises I- measurements in epidemiology, problems on descriptive studies, problems on analytical studies pidemiology, Revision OSPE	CM 10.6, 10.7, 15.1 - 15.3, CM 7.4,, 7.5, 7.4 &7.5	Forensic Laboratory investigation in medical legal practice, Documents, Medical Records, Examination of blood, hair, fiber, semen and other body fluids, Demo- Autopsy	FM6.1 to FM6.3, FM1.9, FM14.6 to FM14.8, FM14.5	Clinical skills/ Management of diseases of Ear, nose and throat, Anatomy and physiology of ear, nose, throat and head and neck	EN 2.13, EN 3.6, P 14.2, EN 4.14, EN 4.47, EN 4.30, EN 4.48, EN 4.50, EN 36.3. EN 1.1	Tutorial -Cornea III,Cornea IV,Episcleriis ,Scleritis	OP 4.5,4.6,4. 7,4.8,4.9, OP 5.1,OP 5.2
SDL							SDL 2-Infectious Conjunctivitis	
AETCOM			Case studies in bioethics- Disclosure of medical errors, The foundations of communicati on- 4	AETCO M3.2, AETCO M3.3				
Pandemic module	Outbreak Management including Quarantine, Isolation, Contact Tracing	Pandemi c module 3.1						

January	Lecture	Guest lecture on IDSP(Definition, types of Surveillance, infectious disease), Surface Infections I-Leprosy & NLEP, Surface Infections II(STD, AIDS), Nutrition(Surveilla nce and Rehabilitation), National nutritional programmes(Description of seven nutritional programmes in detail) Demographic and family planning(National population policy, causes of population explosion, vital statistics, Epidemiological transition) Mental health(Problem statement,	CM 8.1,8.5,8. 7,8.3,5.5, 5.6, 9.3, 9.4,9.6,1	State Medicine, General Toxicology	FM4.1 to FM4.30, FM8.1to FM8.6,	Management of diseases of Ear, Nose and Throat	EN 4.32, EN 4.34, EN 4.35, EN 4.31, EN 4.26, EN 4.27, EN 4.41	Uvea I-anatomy of uvea and classification of uveitis, anterior uveitis,Uvea II-intermediate uveitis,endophthalmtis, panophthalmitis,Lens & Cataract I-anatomy of lens and classification of cataract, stages of cataract, pre	OP 6.1,6.2,6. 3,6.4,OP 6.8,OP7. 1,7.2
	SGT	Prevention, National Mental health problem)  Nutrition I - sources of nurtrients, classification of food cereals, pulses Nutrition II-Nutritional significance of various food groups Nutrition III-Balanced diet, nutritional requirement of various physiological groups including pregnancy lactation Nutritional assessment, Nutrition IV - Therapeutic diet, community Nutritional assessment, nutritional	5.1, 15.2, 15.3 CM 5.1- 5,5	Mass disaster, Gastric lavage, Clinical Examination of patient of poisoning, Viscera preservation technique, certificate writing revision	FM2.33, FM2.34, FM8.8, FM14.2, FM14.3, FM2.14, FM8.5	Management of diseases of Ear, nose and throat	EN 1.1, EN 4.10, EN 40.4, EN 3.5	Tutorial- Cornea IV,Uvea I,Uvea II	OP 6.1,6.2,6. 3,6.4,OP 6.8,OP7. 1,7.2

		education, nutritional surveillance, Exercises II- problems on experimental studies, environment health							
	SDL			Handling of MLCs	FM1.8			SDL 3-Eye donation and Eye Banking	
	AETCOM			The foundations of communicati on- 4	AETCO M3.3			AETCOM bioethics-confidentiality	
	Pandemic module								
	FAP								
February	Lecture	Essentials of management(Introduction , material , manpower management, qualities of a leader and management & Modern management techniques ,Disaster management (Definition, types , disaster cycle, disaster preparedness )	CM 8.5,16.1, 16.2 CM 16.3,16.4 ,13.1- 13.4	Caustics, Metallic irritants	FM9.1, FM9.3	Management of diseases of Ear, Nose and Throat	EN 4.43, EN 4.44, EN 4.42, EN 4.45	Lens & Cataract II- cataract surgeries and complications, post operative management of cataract, IOLs,Glaucoma I- IOP regulations, angle of anterior chamber, pathophysiology of glaucoma,Glaucoma II- ACG and congenital glaucoma,Glaucoma III- open angle and secondary	OP 7.4,OP6. 5,6.7,6.9, 8.1,8.2

								glaucoma,Retina I- anatomy and functions of retina, rhodopsin cycle, methods of retinal examinations, diabetic retinopathy	
	SGT	Planning cycle demonstrate and describe the steps in evaluation of health education programme, Revision	CM 16.2, 4.3	journal completion		Management of diseases of Ear, nose and throat	EN 4.18	Tutorial -Lens & Cataract I,II, Glaucoma I,Glaucoma II,Glaucoma III,Retina I	OP 7.4,OP6. 5,6.7,6.9, 8.1,8.2
	SDL			Blast injuries	FM3.10				
	AETCOM							AETCOM bioethics- confidentiality	
	Pandemic module								
March	Lecture	MCH-I(ANC, PNC, Newborn care),MCH-II(Programmes related to MCH-JSY, JSSK and other MCH programme),MCH-III(Adolescent health ,ARSH clinic)	CM10.1, 10.2, 10.3,10.4 ,10.5,10. 8, 9.1	Forensic Psychiatry, Non-metallic irritants, The Mental Health Act	FM5.1 to FM5.5, FM5.6, FM9.2	Management of diseases of Ear, Nose and Throat	EN 4.46, EN 4.38	Retina II	OP 8.4
	SGT	Revision OSPE	CM 8.1, 8.3, 8.2 15.1-15.3 13.1-13.4	Veg Irritants, Delirients, Agricultural poisons	FM14.17 , FM9.5	Management of diseases of Ear, nose and throat	EN 4.35, EN 4.36	Tutorial - Retina I,II	OP 8.4

	SDL			Expert witness, Dying declaration, Analyatical Toxicology	FM14.22 , FM14.20 , FM8.10	Neonatal Screening and rehabilitation of Deafness, Ophthalmic Manifestations of ENT Pathologies, Palliative care in terminal Head Neck Malignancies	EN 2.15, EN 24.17; EN1.2, EN1.1, Su20.1, DE 4.1, DE4.2, DE4.3, DE4.4, EN4.46	SDL 4-Diabetic Retinopathy	
	AETCOM								
	Pandemic module	Interdisciplinary collaboration, Principles of Public Health Administration, Health Economics	Pandemi c Module 3.2						
	FAP	Helath check up camp and Laboratory Investigations							
April	Lecture	Hypertension with NPCDCC(Epidemiology, risk factors, prevention, DASH diet, National programme, NPCDCS), Obesity (Epidemiology, various methods of assessment, prevention, diet, management, National programme, NPCDCS), Blindness (Epidemiology, types of blindness, prevention, VISION 2020), Cancers (Types of cancer, Epidemiology of common cancers ), Diabetes with NPCDCC(Epidemiology,	CM 8.2, 8.3,12.1- 12.4	Infanticide, Biotoxicolog y, Alcohol	FM2.27, FM2.28, FM3.29, FM11.1, FM9.4	Management of diseases of Ear, Nose and Throat	EN 4.49, EN 4.47	Optic nerve- papilledema,papilitis, optic atrophy, Neuroophthalmology - visual and pupillary pathways, Eyelid I - ptosis, ectropion,entropion, lid infections.	OP 8.5,OP 2.1

	risk factors, prevention, diet, management, National programme, NPCDCS),Accidents(Epi demiology, prevention including legislations),Geriatric health(Epidemiology, health problems, prevention and various schemes related to old age), Genetics (Classification of genetic disorders, preventive genetics)							
SGT			Asphyxiants, Medico-legal report on Alcohol intoxication	FM9.6, FM14.16	Management of diseases of Ear, nose and throat	EN 4.53	Tutorial- optic nerve, neuroophthalmology, visual and pupillary pathways,lid	OP 8.5,OP 2.1
SDL	Introduction and allotment of topics to the students and Presentation of SDL-Public health events in last five years and public health achievements in last 10 years	CM 20.1			Prepare 10 MCQs and 10 OSCE questions in ENT with answers , Anatomy of Larynx : Model Making	EN1.1, EN1.2, EN 1.1	SDL 5-Retinopathy of prematurity	
AETCOM								
Pandemic module	Operational research, field work, surveillance	Pandemi c module 3.3						
FAP	Environmental awraeness							

May	Lecture	,Guest lecture on organ donation( Importance, laws related to donation, organ retrieval and donation center criteria), Laws related to Medicine including Public health(Demonstrate awareness about laws pertaining to practice of medicine such as Clinical Establishment Act and Human Organ Transplantation Act and its implications),Student seminar on National health mission, Recent advances(Digital India, Health Insurance)	CM 20.4,8.3	Anti-pyretics Neuropsychot oxicology (Barbiturates and all)- 1 Narcotic Analgesics, Anaesthetics, and Muscle Relaxants	FM10.1		lacrimal apparatus-dacryocystitits, Orbit I- anatomy and spaces of orbit , Orbit II- orbital cellulitis, cavernous sinus thrombosis, Thyroid orbitopathy, Ocular injuries- blunt trauma, penetrating trauma, chemical injuries	OP 2.1,2.4,O P2.5,OP2 .6,OP2.7, OP2.8, OP 9.5
	SGT	Tutorial 1- Man and Medicine, concept of Health and disease Principles of Epidemiology and epidemiological methods, screening for the disese, Tutorial 2-Epidemiology of Respiratory and intestinal infections, Tutorial 3-(Epidemiology of arthropod borne diseases and zoonotic diseases, surface infections, emerging reemerging infections and hospital acquired infections) Tutorial 4-	CM 17.1- 17.5 16.1-16.4 6.1-6.4 4.1-4.3 18.1 18.2 19.1-19.3 20.1-20.4	Spinal poisons, Cardiotoxic plants, Emerging technologies	FM14.17 , FM10.1, FM7.1	Revision classes/MCQ tests	Tutorial- lacrimal apparatus-dacryocystitits, Orbit I- anatomy and spaces of orbit , Orbit II- orbital cellulitis, cavernous sinus thrombosis, Thyroid orbitopathy, Ocular injuries- blunt trauma, penetrating trauma, chemical injuries	OP 2.1, OP 2.4,OP2. 5,OP2.6, OP2.7,O P2.8,OP 9.5

		(surface infections, emerging reemerging infections and hospital acquired infections						
SDL	L	•••					SDL 6-blunt trauma	
AET	TCOM							
Pane mod	ndemic dule							
FAP	P							
June-July  Lect	cture	Tribal health(Health issues, challenges),Essential Medicine,Hospital acquired infections(Epidemiology and preventio),MCQ test/Theory paper pattern explanation	CM8.1,1 9.1 ,19.2,19.	Substance abuse, Torture	FM12.1, FM3.30, FM3.31, FM3.33, FM2.15		Squint I- Extraocular muscle anatomy, actions and nerve supply, binocular vision, classification of squint, paralytic squint, Squint II-concomittant squint, amblyopia, causes, assessment, managem ent of squint, Intraocular tumours-retinoblastoma, malignant melanoma, enucleation, eviscerati on, Ocular Theruapuetics, Community Ophthal	OP 9.2, OP 2.7,OP 2.8,9.4

SGT	Tutorial 5- epidemiology of non-communicable diseses Health information and Basic Medical statistics Tutorial 6-Environment and health, genetics and health, Medicine and social sciences Tutorial 7-Demography and Family Planning Reproductive maternal and child health and Geriatrics Tutorial 8-Nutrition and Health Tutorial - 9 (Occupational health and Mental health), Tutorial - 10 (Communication for heaalth education, Health planning and management),	8.2,8.3, 6.1- 6.4,2.1- 2.5, 3.1- 3.8, 20.1- 20.4,11.1 -11.5 15.1- 15.3, 4.1- 4.3,16.1- 16.4,13.1 -13.4, 14.1-14.3 9.1- 9.7,10.1- 10.9 10.1- 10.9,12.1 -2.4,5.1,5.	Toxicology Demo, Certificate writing revision	FM14.17 , FM3.18, FM3.20, FM3.21		Tutorial- squint I, intra ocular tumors	OP 9.2, OP 2.7,OP 2.8,9.4
SDL			Designer drugs, Environment al Toxicology	FM12.1, FM13.1, FM13.2		SDL 7-Chemical injuries	
AETCOM							
Pandemic module							
FAP							

# Bharati Vidyapeeth (DU) Medical College Pune

### Phase III MBBS, Part I VI and VII Semester

## Department of Community Medicine, Lectures Total hours (55\*1 hours each=55 hours)

Lecture No.	Topic	Content	Competency No.	Integration
1	Introduction to Phase III	Introduction to Phase III - Lectures, SGT, Pandemic Module, AETCOM, SDL, Clinical postings and FAP, Exam pattern, Marks distribution and Attendance policy. Overview of portion completed in Phase I and Phase II		
2	Epidemiology and Prevention of Airborne Infection: I	Chickenpox, Rubella,	CM 8.1	
3	Epidemiology and Prevention of Airborne Infection: II	Measles, Mumps	CM 8.1	
4	Airborne Infection:I	Acute Respiratory Tract Infection,	CM 8.1	
5	Airborne Infection:II	, Influenza	CM 8.1	
6	Airborne Infection III -	Tuberculosis and NTEP	CM 8.1, CM 8.3	
7	Airborne Infection IV –	SARS/COVID 19 Post Covid pulmonary rehabilitation	CM 8.1	
8	Epidemiology and Prevention of Intestinal Infections - I (Integration with Medicine-Cholera)	Diarrheal diseases	CM 8.1	Vertical- Medicine
9	Epidemiology and Prevention of Intestinal Infections - I (Integration with Medicine-Cholera)	Cholera	CM 8.1	
10	Epidemiology and Prevention of Intestinal Infections - II	Food poisoning	CM 8.1	
11	Intestinal Infections - III (Integration with Medicine-Polio)	Viral Hepatitis, Typhoid,	CM 8.1	Vertical- Medicine
12	Intestinal Infections IV (Integration with Medicine-Polio)	Polio	CM 8.1	Mararak
13	Epidemiology and Prevention of Arthropod borne diseases - I	Malaria, Dengue fever	CM 8.1	PRINCIPAL Bharati Vidyapee

14	Epidemiology and Prevention of Arthropod borne diseases - II	Chickenguniya	CM 8.1	
15	Epidemiology and Prevention of Arthropod borne diseases - II	Filariasis	3.72 3.72	
16	Zoonotic diseases - I	Rabies	CM 8.1	
17	Zoonotic diseases - II	Plague	CM 8.1	
18	Zoonotic diseases - III	Leptospirosis	CM 8.1	
19	Zoonotic diseases - IV	Brucellosis	CM 8.1	
20	Zoonotic diseases - V	Japanese encephalitis	CM 8.1	
21	Guest lecture on IDSP	Definition , types of Surveillance, infectious disease	CM 8.1,8.5,8.7	
22	Surface Infections I	Leprosy + NLEP	CM 8.1,8.3	
23	Surface Infections II	STD, AIDS	CM 8.1	
24	Nutrition	Surveillance and Rehabilitation	CM 5.5	
25	National nutritional programmes	Description of seven nutritional programmes in detail	CM 5.6	
26	Demographic and family planning	National population policy, causes of population explosion, vital statistics, Epidemiological transition	CM 9.3,CM 9.4,CM 9.6	
27	Mental health	Problem statement, Prevention, National Mental health problem	CM 15.1, CM 15.2, 15.3	
28	Essentials of management	Introduction, material, manpower management, qualities of a leader and management & Modern management techniques	CM 8.5,16.1, 16.2 CM 16.3,16.4	
29	Disaster management	Definition, types, disaster cycle, disaster preparedness	CM 13.1-13.4	Horizontal Forensic Medicine
30	MCH-I	ANC, PNC, New-born care	CM10.1,CM 10.2, CM 10.3,CM 10.4	Vertical - OBGY
31	MCH-II	Programmes related to MCH-JSY, JSSK and other MCH programme	CM 10.5	Vertical - Pediatrics
32	MCH-III	Adolescent health ,ARSH clinic	CM 10.8, CM 9.1	Vertical - Pediatrics
33	Hypertension with NPCDCC	Epidemiology, risk factors, prevention, DASH diet, National programme, NPCDCS		Vertical Medicine
34	Diabetes with NPCDCC	Epidemiology, risk factors, pfevention, diet,	CM 8.2, CM 8.3	Vertical Medicine

		management,National		
		programme, NPCDCS		
35	Obesity	Epidemiology, various methods of assessment, prevention, diet, management, National programme, NPCDCS	CM 8.2	
36	Blindness	Epidemiology, types of blindness, prevention, VISION 2020	CM 8.2	
37	Cancers-	Types of cancer, Epidemiology of common cancers	CM 8.2	Vertical - OBGY
38	Accidents	Epidemiology, prevention including legislations	CM 8.2	
39	Geriatric health	Epidemiology, health problems, prevention and various schemes related to old age	CM 12.1-12.4	Vertical Medicine
40	Genetics	Classification of genetic disorders, preventive genetics		
41	Guest lecture on organ donation	Importance, laws related to donation, organ retrieval and donation center criteria	CM 20.4	
42	Laws related to Medicine including Public health	Demonstrate awareness about laws pertaining to practice of medicine such as Clinical Establishment Act and Human Organ Transplantation Act and its implications		
43	Student seminar on National health mission	Content- objectives, strategy, evaluation	CM 8.3	
44	Recent advances	Digital India , Health Insurance		
46	Hospital acquired infections	Epidemiology and prevention	CM 8.1	Vertical Medicine
47	Tribal health	Health issues, challenges		
48	Essential Medicine		CM 19.1 ,19.2,19.3	Vertical- Pharmac
49	Student seminar on National health Programmes			
50	Revision lecture -1			
51	Revision lecture -1			
52	Revision lecture -1			
53	Revision lecture -1			
54	Revision lecture -1	2		

55	MCQ test/Theory paper		
	pattern explanation		

## Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I

#### VI and VII Semester

## Department of Community Medicine Small group teaching(SGT): Total hours (36\*2 hours each=72 hours)

Sr. No.	Topic	Content	Competency No.	SGT Method*
1	Biostat Exercises I	Sources, types of data, presentation of data,measures of central tendency and variability,probability and normal curve	CM 6.2, 6.4	Small group discussion
2	Biostat Exercises II	sampling, standard errors of mean and proportions, Test of significance	CM 6.3, CM 6.4	Small group discussion
3	Biostat Exercises III	Corelation, fallacies in Biostatiscyics, Health information system, statistical software, role of computer in statistics and epidemiology and screening for disease	CM 6.2, CM 7.3, CM 7.4, CM 8.7, CM 9.7, CM 6.2, CM 7.9, CM 7.6	Small group discussion
4	Debate on gender issues and empowerment	Gender inequality, status in India, women empowerment, laws related	CM 10.9	Debate in small group
5	Quiz on TB	Epidemiology, problem statement, measurement of the TB burden, management, NTEP	CM 8.1	Quiz participation
6	Principles and measures to control disease epidemic	Define epidemic, Steps in an investigation of epidemic	CM 8.4 CM 20.2	Small group discussion
7	Investigation of food poisoning	Definition of food poisoning, types of food poisoning, steps in investigation of food poisoning	CM 8.1 CM 7.7	Small group discussion
8	Bio medical waste management (Vertical Integration with Micro)	Definition, Classification, health hazards, categories, demonstration of color coding, discussion of treatment and disposal technologies of biomedical waste management	CM 14.1,14.2,14.3	Practical
9	Mindfulness session by Psychiatry faculty	Introduction to the concept, importance, hands on session	CM 15.1, CM 15.2, CM 15.3	Practical
10	Family Planning-I	Methods with advantages and short comings evaluation of contraceptive devices	CM 10.6	Small group discussion
11	Family Planning-II	Family welfare programme, National population policy evaluation of contraceptive devices, Evaluation of health education programme,	CM 10.7	Small group discussion
12	Evaluation of health education programme	Demonstrate and description of the health education programme indicators	CM 4.3	Small group discussion

		problems on analytical studies		
14	Epidemiology Exercises II	problems on experimental studies, environment health (water)	CM 7.4, CM 3.2, CM 3.6	Small group discussion
15	Nutrition I	sources of nurtrients, classification of food cereals, pulses	CM 5.1, CM 5.3	Demonstration in small groups
16	Nutrition II	Nutritional significance of various food groups,Food hygiene,Food adulteration, Food fortification, Food additives	CM 5.1, CM 5.3	Small group discussion
17	Nutrition III	Balanced diet, nutritional requirement of various physiological groups including pregnancy lactation Nutritional assessment	CM 5.1, CM 5.2	Small group discussion
18	Nutrition IV	Therapeutic diet, community Nutritional assessment, nutritional education, nutritional surveillance	CM 5.2, CM 5.4, CM 5.5	Case scenario
19	Planning cycle	Planning cycle demonstrate and describe the steps in evaluation of health education programme	CM 16.2, 4.3	Small group discussion
20	Revision	Revision		Small group discussion
21	Tutorial 1	Man and Medicine, concept of Health and disease Principles of Epidemiology and epidemiological methods, screening for the disese	CM1.1-CM1.10 CM7.1-CM7.9	Writing of the theory questions, discussion of the ideal answers by the teacher,Peer assessment and feedback
22	Tutorial 2	Epidemiology of Respiratory and intestinal infections	CM8.1,CM 8.3	Writing of the theory questions, discussion of the ideal answers by the teacher,Peer assessment and feedback
23	Tutorial 3	Epidemiology of arthropod borne diseases and zoonotic diseases,	CM8.1,CM 8.3	Writing of the theory questions, discussion of the ideal answers by the teacher,Peer assessment and feedback
24	Tutorial 4	surface infections, emerging reemerging infections and hospital acquired infections	CM8.1,CM 8.3	Writing of the theory questions, discussion of the ideal answers by the teacher,Peer assessment and feedback
25	Tutorial 5	epidemiology of non communicable diseses Health information and Basic Medical statistics	CM8.2,CM8.3, CM6.1-CM6.4	Writing of the theory questions, discussion of the ideal answers by the teacher,Peer assessment and feedback
26	Tutorial 6		CM2.1-M2.5,CM 3.1-CM3.8, CM20.1-CM 20.4	Writing of the theory questions, discussion of the ideal answers by the teacher,Peer assessment and feedback

27		Demography and Family	CM9.1-	Writing of the theory
		Planning Reproductive maternal	CM9.7,CM10.1-	questions, discussion of the
	Tutorial 7-	and child health and Geriatrics	CM10.9 CM 10.1-	ideal answers by the
			CM 10.9,CM12.1-	teacher,Peer assessment and
			CM12.4	feedback

 $<sup>*</sup>SGT\ Method-Group\ discussion/\ Tutorial/seminar/DOAP/Practical/\ skills\ lab$ 

## Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI and VII Semester Department of Community Medicine

**Clinical Posting Schedule:** 

Time: 9:30am-12:30pm, Total weeks 2; 12 days x 3hours per day =36hours

Day of	Topic/s	Competency	Hour	Teaching learning
posting	1	1 ,	S	method: bedside
				clinic/ Skills lab/
				Clinical clerkship
1	Introduction to case discussion format,		3	
	Hospital Case discussion- Antenatal			Small group
	case	CM 10.1 -10.4		discussion
2	Hospital Case discussion-Post natal		3	Small group
	case	CM10.1 - CM 10.6		discussion
3			3	Small group
	*Family Case discussion-Diabetes	CM 8.2- CM 8.5		discussion
4			3	Small group
	*Family Case discussion-Hypertension	CM 8.2 - CM 8.5		discussion
5	Hospital Case discussion-	CM 8.1 ,CM8.3, CM	3	Small group
	Diarrhea/ARI	8.5		discussion
6	Harrial Constitution Talescales	CM 8.1 ,CM 8.3 ,CM	3	
	Hospital Case discussion-Tuberculosis	8.5	_	C 11
7	Hospital Case discussion-Protein	CM 8.1, CM 8.3, CM	3	Small group
-	energy malnutrition	8.5		discussion
8	Case studies discussion with OSCE	CM 0 1 4 - CM 0 5	3	
0	simulation	CM 8.1 to CM 8.5		C 11
9	Visit to Drimory hoolth contar	CM 17.1-CM17.5, CM8.1-CM 8.3	3	Small group discussion
10	Visit to Primary health center			discussion
10	Museum visit	Multiple competencies	3	
11	******		3	Small group
	Visit to leprosy hospital	CM 8.1 and CM 8.3		discussion
12	Reflection, JLB completion		3	
	End of clinical posting (OSCE-			C 11
	Clinical Skills)			Small group
				discussion

## Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI and VII Semester

## **Department of Community Medicine**

**Clinical Posting Schedule: 2weeks** 

(Time: 9:30-12:30, Total weeks 2; 12 days x 3hours per day=36hours)

Day of posting	Topic/s	Competency	Hours	Teaching learning method: bedside clinic/ Skills lab/ Clinical clerkship
1	Orientation of the posting	CM10.2-CM10.5,CM2.1-CM2.5	3	Small group discussion
2	#UHC visit	CM 17.5, CM 8.3, CM 19.1 to CM 19.3	3	Educational visit and Small group discussion
3	UHC-Hospital Waste Disposal Methods	CM 14.1 to CM 14.3, CM 8.7	3	DOAP, Small group discussion
4	Orientation of RHTC	CM 9.5,CM9.6, CM 10.6, CM4.3	3	Educational visit and Small group discussion
5	Visit to milk dairy	CM 10.5,CM 8.3	3	Educational visit and Small group discussion
6	Anganwadi visit	CM 8.3	3	Educational visit and Small group discussion
7	UHC- ANC OPD	CM 10.3,CM 10.4	3	Small group discussion
8	UHC -Medicine OPD	CM 8.1 to CM 8.5	3	Small group discussion
9	Training session for health workers	CM 8.6	3	DOAP
10	*Extension activity	CM 4.2	3	DOAP
11	Reflection and feedback		3	Small group discussion
12	Term end exam OSCE-Communication skills		3	Small group discussion

## Bharati Vidyapeeth (DU) Medical College, Pune MBBS-Phase III- Part I VI Semester

### DEPARTMENT OF FORENSIC MEDICINE AND TOXICOLOGY

**Lectures Schedule: Duration: One hr/Lecture** 

Lecture no.	Topic	Content	Competency	Integration
110+		Mechanical injuries and wounds: Define injury, assault & hurt. Describe IPC pertaining to injuries	FM3.4	
1	MLA of Injury	Mechanical injuries and wounds: Describe accidental, suicidal and homicidal injuries. Describe simple, grievous and dangerous injuries. Describe ante-mortem and post-mortem injuries	FM3.5	-
		Describe factors influencing infliction of injuries and healing, examination and certification of wounds and wound as a cause of death: Primary and Secondary	FM3.7	
2	Thermal Death	Describe types of injuries, clinical features, pathophysiology, post- mortem findings and medico-legal aspects in cases of burns, scalds, lightening, electrocution and radiations	FM2.25	-
3	Thermal Death	Describe types of injuries, clinical features, pathophysiology, post- mortem findings and medico-legal aspects in cases of burns, scalds, lightening, electrocution and radiations	FM2.25	-
4	Mechanical Asphyxia	Mechanical asphyxia: Define, classify and describe asphyxia and medico-legal interpretation of post-mortem findings in asphyxial deaths	FM2.20	-
5	Mechanical Asphyxia	Mechanical asphyxia: Describe and discuss different types of hanging and strangulation including clinical findings, causes of death, post-mortem findings and medico-legal aspects of death due to hanging and strangulation including examination, preservation and dispatch of ligature material	FM2.21	-
6	Mechanical Asphyxia	Mechanical asphyxia: Describe and discuss pathophysiology, clinical features, post- mortem findings and medico-legal aspects of traumatic asphyxia, obstruction of nose & mouth, suffocation and sexual asphyxia	FM2.22	-
7	Mechanical Asphyxia	Describe and discuss types, patho-physiology, clinical features, post mortem findings and medico-legal aspects of drowning, diatom test and, gettler test.	FM2.23	-
8	Sexual	Describe different types of sexual offences. Describe various sections of IPC regarding rape including definition of rape (Section 375 IPC), Punishment for Rape (Section 376 IPC) and recent amendments notified till date	FM3.13	Obstetrics &
	Offences	SEXUAL OFFENCES: Describe and discuss the examination of the victim of an alleged case of rape, and the preparation of report, framing the opinion and preservation and dispatch of trace evidences in such cases	FM3.14	- Gynaecology
		SEXUAL OFFENCES: Describe and discuss examination of accused and victim of sodomy, preparation of report, framing of opinion, preservation and dispatch of trace evidences in such cases	FM3.15	
9	Sexual Offences	SEXUAL OFFENCES: Describe and discuss adultery and unnatural sexual offences- sodomy, incest, lesbianism, buccal coitus, bestiality, indecent assault and preparation of report, framing the opinion and preservation and dispatch of trace evidences in such cases	FM3.16	-
10	State	Describe the functions and role of Medical Council of	FM4.3	

	Medicine	India and State Medical Councils		
		Describe the Indian Medical Register	FM4.4	
		Describe Medical Ethics and explain its historical emergence	FM4.1	
		Describe the Code of Medical Ethics 2002 conduct, Etiquette and Ethics in medical practice and unethical practices & the dichotomy	FM4.2	
		Demonstrate respect to laws relating to medical practice and Ethical code of conduct prescribed by Medical Council of India and rules and regulations prescribed by it from time to time	FM4.28	
		Rights/privileges of a medical practitioner, penal erasure, infamous conduct, disciplinary Committee, disciplinary procedures, warning notice and penal erasure	FM4.5	
		Describe the Laws in Relation to medical practice and the duties of a medical practitioner towards patients and society	FM4.6	
11	State Medicine	Enumerate rights, privileges and duties of a Registered Medical Practitioner. Discuss doctor- patient relationship: professional secrecy and privileged communication	FM4.24	-
		Describe communication between doctors, public and media	FM4.10	
		Describe the Consumer Protection Act-1986 (Medical Indemnity Insurance, Civil Litigations and Compensations), Workman's Compensation Act & ESI Act	FM4.8	
		Describe and discuss euthanasia	FM4.11	
		Describe & discuss the challenges in managing medico- legal cases including development of skills in relationship management — Human behaviour, communication skills, conflict resolution techniques	FM4.14	
		Describe the principles of handling pressure – definition, types, causes, sources and skills for managing the pressure while dealing with medico-legal cases by the doctor	FM4.15	
12	State	Describe and discuss Bioethics	FM4.16	_
	Medicine	Describe and discuss ethical Principles: Respect for	FM4.17	1
		autonomy, non- malfeasance, beneficence & justice Clinical research & Ethics Discuss human experimentation including clinical trials	FM4.25	_
		Discuss the constitution and functions of ethical committees	FM4.26	
		Describe and discuss Ethical Guidelines for Biomedical Research on Human Subjects & Animals	FM4.27	
		Discuss legal and ethical issues in relation to stem cell research	FM4.12	
		Describe and discuss medical negligence including civil and criminal negligence, contributory negligence, corporate negligence, vicarious liability, Res Ipsa Loquitor, prevention of medical negligence and defenses in medical negligence litigations	FM4.18	
13	State Medicine	Define Consent. Describe different types of consent and ingredients of informed consent. Describe the rules of consent and importance of consent in relation to age, emergency situation, mental illness and alcohol intoxication	FM4.19	AETCOM
		Describe therapeutic privilege, Malingering, Therapeutic Misappenture, Professional	FM4.20	

		Secrecy, Human Experimentation		
		Describe Products liability and Medical Indemnity Insurance	FM4.21	
		Explain Oath – Hippocrates, Charaka and Sushruta and procedure for administration of Oath.	FM4.22	
		Describe the modified Declaration of Geneva and its relevance	FM4.23	
		Describe the history of Toxicology	FM8.1	
		Define the terms Toxicology, Forensic Toxicology,	T1 60 0	
1.4	General	Clinical Toxicology and poison	FM8.2	D1 1
14	Toxicology	Describe the various types of poisons, Toxicokinetics, and Toxicodynamics and diagnosis of poisoning in living and dead	FM8.3	—Pharmacology
15	General	Describe the general symptoms, principles of diagnosis and management of common poisons encountered in India	FM8.6	
15	Toxicology	Describe basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination	FM8.8	
		Describe Medico-legal autopsy in cases of poisoning	FM8.5	
		Describe the Laws in relations to poisons including NDPS Act, Medico-legal aspects of poisons	FM8.4	
16	General Toxicology	Describe the procedure of intimation of suspicious cases or actual cases of foul play to the police, maintenance of records, preservation and dispatch of relevant samples for laboratory analysis.	FM8.9	-
17	Caustics	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: Caustics Inorganic – sulphuric, nitric, and hydrochloric acids	FM9.1	-
18	Caustics	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: Caustics Organic- Carboloic Acid (phenol), Oxalic and acetylsalicylic acids	FM9.1	-
19	Metallic irritants	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Arsenic, lead	FM9.3	-
20	Metallic irritants	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to mercury, copper, iron, cadmium and thallium	FM9.3	-
		Classify common mental illnesses including post- traumatic stress disorder (PTSD)	FM5.1	
21	Forensic Psychiatry	Define, classify and describe delusions, hallucinations, illusion, lucid interval and obsessions with exemplification	FM5.2	Psychiatry
21		Describe Civil and criminal responsibilities of a mentally ill person	FM5.3	
		Differentiate between true insanity from feigned insanity	FM5.4	
		Describe & discuss Delirium tremens	FM5.5	

# Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VII Semester

#### DEPARTMENT OF FORENSIC MEDICINE AND TOXICOLOGY

**Lectures Schedule: Duration: One hr/lecture** 

Lecture	Topic	Content	Competency	Integration
no.		Define and discuss impotence, sterility, frigidity, sexual dysfunction, premature ejaculation. Discuss the causes of impotence and sterility in male and female	FM3.22	
	Impotency,	Discuss Sterilization of male and female, artificial insemination, Test Tube Baby, surrogate mother, hormonal replacement therapy with respect to appropriate national and state laws	FM3.23	
1	Sterility	Discuss the relative importance of surgical methods of contraception (vasectomy and tubectomy) as methods of contraception in the National Family Planning Programme	FM3.24	<del>-</del>
		Discuss the major results of the	FM3.25	
		National Family Health Survey Discuss the national Guidelines for accreditation, supervision & regulation of ART Clinics in India	FM3.26	
2	Abortion	Define, classify and discuss abortion, methods of procuring MTP and criminal abortion and complication of abortion. MTP Act 1971	FM3.27	Obstetrics &
		Describe evidences of abortion - living and dead, duties of doctor in cases of abortion, investigations of death due to criminal abortion	FM3.28	Gynaecology,
		Define and discuss infanticide, foeticide and stillbirth	FM2.27	
3	Infanticide	Describe and discuss signs of intrauterine death, signs of live birth, viability of foetus, age determination of foetus, DOAP session of ossification centres, Hydrostatic test, Sudden Infants Death syndrome and Munchausen's syndrome by proxy	FM2.28	Pediatrics
		Describe and discuss child abuse and battered baby syndrome	FM3.29	
4	Agricultural poisons	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced 2	FM9.5	General Medicine

		elimination with regard to		
5 6	Agricultural poisons  Biotoxicology  Alcohol	Organophosphates, Carbamates  Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Organochlorines, Pyrethroids, Paraquat, Aluminium and Zinc phosphide  Describe features and management of Snake bite, scorpion sting, bee and wasp sting and spider bite  Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote	FM9.5 FM11.1	General Medicine  General Medicine
		therapy, procedures of enhanced elimination with regard to Ethanol Describe General Principles and basic methodologies in treatment of		
8	Alcohol	poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to methanol, ethylene glycol	FM9.4	-
9	Anti-pyretics	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to:  i. Antipyretics – Paracetamol, Salicylates	FM10.1	Pharmacology
10	cology	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: Neuropsychotoxicology Barbiturates, benzodiazepins phenytoin, lithium, haloperidol, neuroleptics, tricyclics	FM10.1	Pharmacology
11	Narcotic Analgesics, Anaesthetics, and Muscle Relaxants	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to: Narcotic Analgesics, Anaesthetics, and Muscle Relaxants	FM10.1	Pharmacology
12	Narcotic Analgesics, Anaesthetics, and Muscle Relaxants	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced 13	FM10.1	Pharmacology

		elimination with regard to: Narcotic Analgesics, Anaesthetics, and Muscle Relaxants		
		Describe features and management of abuse/poisoning with following camicals: Tobacco, cannabis, amphetamines, cocaine, hallucinogens, & solvent	FM12.1	-
		Describe and discuss issues relating to torture, identification of injuries caused by torture and its sequalae, management of torture survivors	FM3.30	
	Torture	Torture and Human rights Describe and discuss guidelines and Protocols of National Human Rights Commission regarding torture	FM3.31	
13		Should be able to demonstrate the professionalism while dealing with victims of torture and human right violations, sexual assaults-psychological consultation, rehabilitation	FM3.33	AETCOM
		Describe special protocols for conduction of medico-legal autopsies in cases of death in custody or following violation of human rights as per National Human Rights Commission Guidelines	FM2.15	

# Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI Semester

#### DEPARTMENT OF FORENSIC MEDICINE AND TOXICOLOGY

Small group teaching Schedule:Duration: One hr/SGT

Sr. No.	Topic	Content	Competency No.	SGT Method*
1	Sickness certificate	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially - documents of issuance of sickness and fitness certificate.		Demonstration
2	Demo- Autopsy	Conduct & prepare post-mortem examination report of varied etiologies (at least 15) in a simulated/ supervised environment	FM14.5	Group discussion
		Mechanical injuries and wounds: Define injury, assault & hurt.  Describe IPC pertaining to injuries  Mechanical injuries and wounds: Describe accidental, suicidal and	FM3.4	
3	MLA of Injury	homicidal injuries. Describe simple, grievous and dangerous injuries. Describe ante-mortem and post-mortem injuries	FM3.5	Tutorial
		Describe factors influencing infliction of injuries and healing, examination and certification of wounds and wound as a cause of death: Primary and Secondary	FM3.7	
		Describe the clinical features, post-mortem finding and medicolegal aspects of injuries due to physical agents like heat or cold	FM2.24	
4	Thermal Death	Describe types of injuries, clinical features, patho-physiology, post- mortem findings and medico-legal aspects in cases of burns, scalds, lightening, electrocution and radiations	FM2.25	Tutorial
5	Samples for DNA Fingerprinting	To collect, preserve, seal and dispatch exhibits for DNA-Finger printing using various formats of different laboratories.	FM14.21	Group discussion
6	Radiographs	Identification Mechanical Injuries	FM3.2 FM3.6	Demonstration
		Firearm Injuries	FM3.10	
7	Expert witness	To give expert medical/ medico-legal evidence in Court of law	FM14.22	Group discussion
8	Dying declaration	To record and certify dying declaration in a simulated/ supervised environment	FM14.20	Group discussion
9	Photographs		FM3.2	Demonstration
,	Thotographs	Identification Formasia Dathalagy Machanical Injunios Firegrees	FM2.9	Demonstration
		Identification, Forensic Pathology, Mechanical Injuries, Firearm Injuries, Toxicology	FM3.3	
10	Specimens	injuries, Toxicology	FM3.10	Demonstration
			FM14.17	
11	Examination of victim	To examine & prepare medico-legal report of a victim of sexual offence/unnatural sexual offence in a simulated/ supervised environment	FM14.15	Group discussion
12	Examination of alleged accused	To examine & prepare report of an alleged accused in rape/unnatural sexual offence in a simulated/ supervised environment	FM14.14	Group discussion
13	Sexual paraphilia	Describe and discuss the sexual perversions fetishism, transvestism, voyeurism, sadism, necrophagia, masochism, exhibitionism, frotteurism, Necrophilia		Seminar
14	Injury 1 (Mechanical)	echanical injuries and wounds:  efine, describe and classify different types of mechanical injuries, brasion, bruise, laceration, stab wound, incised wound, chop ound, defense wound, self-inflicted/fabricated wounds and their edico-legal aspects		Tutorial
15	Forensic Laboratory investigation in medical legal practice	Describe different types of specimen and tissues to be collected both in the living and dead: Body fluids (blood, urine, semen, faeces saliva), Skin, Nails, tooth pulp, vaginal smear, viscera, skull, specimen for histo-pathological famination, blood grouping, HLA	FM6.1	Group discussion

		Typing and DNA Fingerprinting.		
		Describe Locard's Exchange Principle		
		Describe the methods of sample collection, preservation, labelling, dispatch, and interpretation of reports	FM6.2	
16	Forensic Laboratory	Demonstrate professionalism while sending the biological or trace	FM6.3	
17		Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially - maintenance of patient case records, discharge summary, prescribed registers to be maintained in Health Centres maintenance of medico-legal register like accident register.	FM1.9	Group discussion
	F	Demonstrate and interpret medico-legal aspects from examination of hair (human & animal) fibre, semen & other biological fluids	FM14.6	
18	Examination of blood, hair, fiber, semen and	ii jemonstrate & identity that a particiliar stain is pidod and identity - i	FM14.7	Group discussion
	other body fluids	Demonstrate the correct technique to perform and identify ABO & RH blood group of a person	FM14.8	
		Define, classify and describe asphyxia and medico-legal interpretation of post-mortem findings in asphyxial deaths	FM2.20	
10		Describe and discuss different types of hanging and strangulation including clinical findings, causes of death, post-mortem findings and medico-legal aspects of death due to hanging and strangulation including examination, preservation and dispatch of ligature material.	FM2.21	
19	Mechanical Asphyxia	Describe and discuss patho-physiology, clinical features, post- mortem findings and medico-legal aspects of traumatic asphyxia, obstruction of nose & mouth, suffocation and sexual asphyxia	FM2.22	Tutorial
		Describe and discuss types, patho-physiology, clinical features, post mortem findings and medico-legal aspects of drowning, diatom test and, gettler test.	FM2.23	
20	Demo- Autopsy	Conduct & prepare post-mortem examination report of varied etiologies (at least 15) in a simulated/ supervised environment	FM14.5	Group discussion
21	Mass disaster	Demonstrate ability to use local resources whenever required like in mass disaster situations  Demonstrate ability to use local resources whenever required like in	FM2.33	- Seminar
		mass disaster situations	FM2.34	
22	Gastric lavage	Describe basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination	FM8.8	Group discussion
23	Clinical Examination of patient of poisoning	Demonstrate the correct technique of clinical examination in a suspected case of poisoning & prepare medico-legal report in a simulated/ supervised environment	FM14.2	Group discussion
		Assist and demonstrate the proper technique in collecting, preserving and dispatch of the exhibits in a suspected case of poisoning, along with clinical examination	FM14.3	
24	Viscera preservation technique	Describe and discuss examination of clothing, preservation of viscera on post-mortem examination for chemical analysis and other medico-legal purposes, post-mortem artefacts	FM2.14	Demonstration
		Describe preservation and dispatch of viscera for chemical analysis	FM8.5	
25		Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Phosphorus, Iodine, Barium	FM9.2	Seminar
26	Injury 2	Firearm injuries:  Describe different types of firearms including structure and components. Along with description of ammunition propellant	FM3.9	Tutorial

charge and mechanism of fire-arms, different types of cartridges and bullets and various terminology in relation of firearm – caliber, range, choking		
Firearm injuries: Describe and discuss wound ballistics-different types of firearm injuries, blast injuries and their interpretation, preservation and dispatch of trace evidences in cases of firearm and blast injuries, various tests related to confirmation of use of firearms	FM3.10	
Regional Injuries: Describe and discuss regional injuries to head (Scalp wounds, fracture skull, intracranial haemorrhages, coup and contrecoup injuries), neck, chest, abdomen, limbs, genital organs, spinal cord and skeleton	FM3.11	
Regional Injuries  Describe and discuss injuries related to fall from height and vehicular injuries – Primary and Secondary impact, Secondary injuries, crush syndrome, railway spine	FM3.12	

<sup>\*</sup>SGT Method-Group discussion/ Tutorial/seminar/DOAP/Practical/ skills lab

Batches for small group: 30 students per batch:

Batch	Roll No.s
A	1-30
В	31-60
C	61-90
D	91-120
Е	121-150

# Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VII Semester

#### DEPARTMENT OF FORENSIC MEDICINE AND TOXICOLOGY

**Small group teaching Schedule:Duration : One hr/SGT** 

Sr. No.	Topic	Content	Competency No.	SGT Method*
		Define, describe and discuss death and its types including		
		somatic/clinical/cellular, molecular and brain-death, Cortical Death and Brainstem Death	FM2.1	
		Describe and discuss natural and unnatural deaths	FM2.2	
		Describe and discuss issues related to sudden natural deaths	FM2.3	
		Describe salient features of the Organ Transplantation and The Human Organ		
1	Forensic Pathology 1	Transplant (Amendment) Act 2011 and discuss ethical issues regarding organ donation	FM2.4	Tutorial
		Discuss moment of death, modes of death - coma, asphyxia and syncope	FM2.5	
		Discuss presumption of death and survivorship	FM2.6	
		Describe and discuss suspended animation	FM2.7	
		Describe and discuss postmortem changes including signs of death, cooling of body, post-mortem lividity, rigor mortis, cadaveric spasm, cold stiffening and heat stiffening	FM2.8	
		Describe putrefaction, mummification, adipocere and maceration	FM2.9	
		Discuss estimation of time since death	FM2.10	
2	Forensic	Describe and discuss autopsy procedures including post-mortem examination, different types of autopsies, aims and objectives of post-mortem examination	FM2.11	Tutorial
	Pathology 2	Describe the legal requirements to conduct post-mortem examination and procedures to conduct medico-legal post-mortem examination	FM2.12	
		Describe and discuss obscure autopsy	FM2.13	
3	Veg Irritants  To identify & draw medico-legal inference from common poisons e.g. castor, marking nut, abrus seeds, capsicum		FM14.17	Seminar
4	Metallic irritants  Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Arsenic, lead, mercury, copper, iron, cadmium and thallium		FM9.3	Tutorial
5	Delirients	To identify & draw medico-legal inference from common poisons e.g. dhatura, cannabis, calotropis	FM14.17	Seminar
6	Agricultural poisons	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Organophosphates, Carbamates, Organochlorines, Pyrethroids, Paraquat, Aluminium and Zinc phosphide	FM9.5	Tutorial
7	Asphyxiants	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ammonia, carbon monoxide, hydrogen cyanide & derivatives, methyl isocyanate, tear (riot control) gases	FM9.6	Seminar
8	Asphyxiants	Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to Ammonia, carbon monoxide, hydrogen cyanide & derivatives, methyl isocyanate, tear (riot control) gases	1112.0	Sommu
9	Spinal poisons	To identify & draw medico-legal inference from common poisons- Nux vomica	FM14.17	Seminar
10		Describe General Principles and basic methodologies in treatment of poisoning: decontamination, supportive therapy, antidote therapy, procedures of enhanced elimination with regard to:	FM10.1	Seminar

		T		7
 		Cardiovascular Toxicology Cardiotoxic plants – oleander, odollam, aconite, digitalis		
11	intoxication	simulated/ supervised environment	FM14.16	Demonstration
12	Shake bite	Describe features and management of Snake bite, scorpion sting, bee and wasp sting and spider bite	FM11.1	Tutorial
	Toxicology Demo	Le g dhafura casfor cannabis oniim aconife copper siilphafe pesticides L		
	Toxicology Demo	compounds, marking nut, oleander, Nux vomica, abrus seeds, Snakes,	FM14.17	Demonstration
15	Toxicology Demo	To identify & draw medico-legal inference from common poisons e.g. dhatura, castor, cannabis, opium, aconite copper sulphate, pesticides		
16	Toxicology Demo	compounds, marking nut, oleander, Nux vomica, abrus seeds, Snakes, capsicum, calotropis, lead compounds & tobacco.	FM14.17	Demonstration
		Describe anatomy of male and female genitalia, hymen and its types.  Discuss the medico-legal importance of hymen. Define virginity, defloration, legitimacy and its medicolegal importance	FM3.18	
17	Virginity, Pregnancy,	Discuss the medicolegal aspects of pregnancy and delivery, signs of pregnancy, precipitate labour superfoctation, superfecundation and signs of recent and remote delivery in living and dead	FM3.19	Tutorial
ļ	Delivery	Discuss disputed paternity and maternity	FM3.20	1
		Discuss Pre-conception and Pre Natal Diagnostic Techniques (PC&PNDT) - Prohibition of Sex Selection Act 2003 and Domestic Violence Act 2005	FM3.21	
10		Define, classify and discuss abortion, methods of procuring MTP and criminal abortion and complication of abortion. MTP Act 1971	FM3.27	Tertonial
18		Describe evidences of abortion - living and dead, duties of doctor in cases of abortion, investigations of death due to criminal abortion	FM3.28	- Tutorial
19	Emerging technologies	Enumerate the indications and describe the principles and appropriate use for: DNA profiling, Facial reconstruction, Polygraph (Lie Detector), Narcoanalysis, Brain Mapping, Digital autopsy, Virtual Autopsy, Imaging technologies	FM7.1	Seminar

<sup>\*</sup>SGT Method-Group discussion/ Tutorial/seminar/DOAP/Practical/ skills lab

Batches for small group: 30 students per batch:

Batch	Roll No.s
A	1-30
В	31-60
C	61-90
D	91-120
Е	121-150

#### Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI and VII Semester

### **DEPARTMNT OF MEDICINE Lectures Schedule: Duration: One hr/Lecture**

Lecture Topic	Content	Competency	Integration
no.			_
1 Medical problem old age	1. Disease susceptibility & comorbidties: DM, HTN, osteoporosis, Atherosclerosis: (Ischemic heart disease, stroke, peripheral vascular disease) ,recurrent infections, prolonger recovery, drug intolerance, problems with polytherapy 2. Disabilities &Recurrent falls: risk factors, multidisciplinary approach ,assessment and management, balance exercises, physiotherapy, walking aids, hearing aids 3. Anorexia & malnutrition: causes, clinical manifestations, nutritional supplementation 4. Urinary problems :overflow incontinence ,prostate enlargement (males) stress and urge incontinence (females) 5. Neuropsychiatric :sleep disorders, cognitive impairment, Delirium; assesment of causes , management  Screening in elderly, exercise, nutrition	CM12.1 CM12.2 CM12.3 CM12.4	СМ

2		<ol> <li>Know etiological agent of leptospirosis-3 R's of leptospirosis-Rats,Rains and Rice fields</li> <li>Learn epidemiology and transmission-contaminated animal urine usually by rodents, as epidemic, endemic, or sporadic.</li> <li>Describe main clinical features of leptospirosis including fever,rash,systemic symptoms, jaundice, reduced urine output, shock etc</li> <li>Know about Weil's disease (severe icteric form of leptospirosis).</li> <li>Diagnosis –MAT(microscopic agglutination test),Blood and CSF cultures</li> <li>Learn treatment and prophylaxis of mild and moderate, severe leptospirosis (ceftriaxone,doxycycline).</li> </ol>	IM25.1, IM 25.2, IM25.3, IM25.4, IM25.5, IM25.8	
3	HIV Part 1	<ol> <li>Epidemiology Etiopathogenesis of HIV infection</li> <li>Transmission of HIV infection- Sexual, Parenteral, Vertical</li> <li>DIAGNOSIS OF HIV- Tridot, ELISA, Western Blot, p24 Antigen assay</li> <li>Initial Evaluation of HIV patient-general physical examination and investigations CD4 count CHEST X RAY, viral load, viral resistance test etc.</li> </ol>	IM6.3, IM6.7, IM6.9	Microbiology, PSM
4	HIV II	<ol> <li>Complication of HIV infection and discuss opportunistic infections and malignancies</li> <li>What is AIDS and AIDS defining conditions.</li> <li>Treatment of HIV paient- discuss HAART and treatment complications.</li> <li>Prophylaxis from HIV infections</li> </ol>	IM6.1, IM6.2, IM6.4, IM6.5, IM6.6, IM6.10, IM6.16, IM6.17, IM6.18	Pharmacology, PSM
5	PUO	<ol> <li>To know the definition &amp; criteria of PUO</li> <li>Know about types of PUO</li> <li>Etiopathogenesis</li> <li>To understand (PDC's) potentially diagnostic clues through proper history taking, examination &amp; investigations about possible etiology.</li> </ol>	IM4.8, IM4.4, IM4.5, IM4.9, IM4.11, IM4.12	

		5.	To discuss different diagnostic tests	
			which may be needed to arrive at	
			diagnosis	
		Mai	nagement of PUO- supportive Rx,cooling	
			asures, antipyretics and specific treatment	
			per cause	
6	Rikettsial Diseases		Etiopathogenesis of rickettsial fever	
			Vectors associated with transmission	
			rickettsial fever	
		3.	Explain RMSF (Rocky Mountain	
			Spotted Fever), Scrub typhus, Murine	
			typhus and their mode of transmission	
			and their signs and symptoms.	
		4.	Evaluation of patient of suspected	
			rickettsial fever and investigations for	
			diagnosis- indirect immunofluresnce	
			and PCR., importance and interpretation	
			of Weil Felix test	
		5.	Treatment of rickettsia- doxycycline,	
			tetracycline and chloramphenicol.	
7	Herpes simplex,	At	the end of lecture student should be able	
	zoster and		to know	
	chickenpox	Sim	ilarity between the herpes zoster and	
	_		cken pox i.e.	
			etivation of varicella virus .	
		1		
		1.	To know the causative agent of the herpes zoster - DNA virus	
			To know the pathology of infection -	
			virus remains dormant in dorsal root or	
			other sensory ganglia to activate later.	
		2.	To know the most common organ	
			systems involved: CNS, optical system	
			.ramsay hunt syndrome, auditory	
			system.	
		3.	To know the most common risk	
			factors.:immuno-compromised states e.g. HIV	
		4	To know different clinical phases of	
		'	illness: i.e. pre-eruptive, acute eruptive,	
			chronic phase	
		5.	To arrive at the diagnosis using clinical	
			and laboratory parameters:	
			Like painful skin lesions and direct	
			fluoroscent antibody testing (DFA),	
			PCR assay.	
		6.	To know the treatment of the infection	
			: symptomatic and specific	
			which depends upon hosts immune	
			status	
8	COVID-19	1.	Etiology and epidemiology	
	-		C, r	

		2. Pathogenesis – inflammation,		
		thrombosis		
		3. Concept of quarantine		
		4. Concept of isolation		
		5. Treatment modalities-drugs and		
		therapeutics		
		-		
		Vaccines in COVID-19		
9	Adult immunization	1. Types of Immunisation – Active		
		- Passive		
		2. Different routes of vaccine		
		administration		
		3. Recommended immunization schedule		
		4. Vaccination for health care workers and		
		before splenectomy		
		<ul><li>5. Post exposure immunization</li><li>6. Vaccination for travelers.</li></ul>		
		6. Vaccination for travelers.		
10	Introduction To	1. Know five cardinal cardiac symptoms:	IM1.11,	
	Cardiovascular	• •	IM1.12,	
	System And Clinical	syncope, edema	IM1.13,	
	Examination	<ol><li>NYHA classification</li></ol>	IM1.14,	
		3. General examination: Pulse, Blood	IM1.15	
		pressure, JVP and pulse waveform,		
		Pedal odema, cyanosis, clubbing, skin		
		eg. xanthelesma.		
		4. Systemic Examination:		
		a) Inspection :- Chest deformities, Apex		
		impulse (position and character), scars,		
		visible pulsations etc.		
		b) Palpation: – Apex, P2, Parasternal		
		heave, thrill etc		
		c) Percussion:- Heart borders to define		
		cardiac size		
		d) Ausculation:		
		- Areas (mitral ,aortic tricuspid,		
		pulmonary, neo aortic)		
		- Normal heart sounds character,		
		intensity		
		- Adventitious sounds: opening		
		snaps clicks.		
		- Murmurs :Intensity, character,		
	<u> </u>	propagation, systolic /diastolic	D 11 C	
11	Acute	1. Organism (Group A Streptococci)	IM1.3,	
			IM1.9,	
		3. Clinical Presentation – Involvement Of	IM1.27	
		Heart (Pancarditis), Joint (Migratory		
		Polyarthritis) Skin (Erythema Marginatum), Chorea & Subcutaneous Nodules.		
		4. Revised Jones Criteria To Diagnose		
		Acute Rheumatic Fever		
		5. Importance Of ASO And CRP Titers In		
		Diagnosing ARF		
		magnosing AIVI		

		6. Management – Salicylates, NSAIDS and Antibiotic (Dose, Duration)	
12	Valvular Heart Disease -Part I	Mitral Stenosis –  1. Etiology of Ms  2. Pathophysiology of MS  3. Clinical Features  a) Symptoms  b) Physical Findings  c) Auscultatory Findings Including D/D of MDM  4. Rx- Medica, Surgical (Indication & Names)	
13	Valvular Heart Disease Part II	Mitral Regurgitation  1. Etiology Of Acute & Chronic MR  2. Pathophysiology Of Acute & Chronic MR  3. Clinical Features  a) Symptoms b) Physical Findings c) Auscultatory Findings  4. Relevant Investigations For MR • Rx For MR – Medical, Surgical – Indication & Names)  MVP  1. Know Various Names Of MVP 2. Etiopathogenesis For MVP 3. Clinical Features a. Symptoms b. Auscultatory Findings 4. Investigations For MVP  Aortic Stenosis- 1. Etiology Of As 2. Pathophysiology Of As 3. Clinical Features a. Symptoms (Syncope ,Angina , Dyspnoea) b. Physical Findings c. Auscultatory Findings Investigations For AS  Aortic Regurgitation- 1. Causes Of AR 2. Pathophysiology Of AR 3. Clinical Features a. Physical Findings –Especially Various Signs - Peripheral b. Auscultatory Findings c. Criteria To Determine Severity Of AR  4. Investigations For AR –Rule Of 55 5. Rx For AR – Medical Surgical –(Indication And Names)	

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	Infective Endocarditis	<ol> <li>Causative Organism For Infective Endocarditis In Different Situation(Native Valve, Prosthetic Valve ,Drug Users)</li> <li>Clinical Presentation(Cardiac &amp; Non Cardiac Manifestation)</li> <li>Dukes Criteria, Blood Culture(Timing; how Many Samples) &amp; Echocardiography In Empirical Diagnosis Of Infective Endocarditis</li> <li>Management According To Organism (Streptococci, Enterococci, Staphylococci &amp; Hacek)</li> </ol>		
15	Atherosclerosis & anatomy Of Coronary Circulation	•	IM2.1, IM2.2, IM2.3, IM2.4	
4		<ol> <li>Angina         <ol> <li>Chest Pain Of Short Duration (&lt;30 Min )</li> <li>5 Important Risk Factors</li> <li>ECG findings in Stable, Unstable angina</li> <li>Clinical Presentation: Chest Pain, Sweating, Nausea, Breathlessness.</li> <li>Diagnosis: Clinical, Ecg, Cardiac Enzymes</li> <li>Treatment-For Stable and Unstable Angina</li> <li>Myocardial Infarction</li> </ol> </li> <li>Definition and Distinguishing Features From Ischemia.</li> <li>Risk Factors: Modifiable And Non Modifiable.</li> <li>Clinical Presentation And Types: Silent, ChestPain, Sweating, Nausea, Breathlessness</li> <li>STEMI ,NSTEMI</li> <li>Diagnosis: ECG, Cardiac Enzymes, Troponin, 2Dechocardiography.</li> <li>Complication: Arrhythmias (Bradyarrhythmias &amp; Tachyarrythmias), Pump Failure, Cardiogenic Shock Etc.</li> <li>Treatment: Thrombolysis, Heparin, Beta - Blockers, Nitrates, Statins, Antiplatelets, ACEI, Angioplasty CABG.</li> </ol> <li>Electrical Complication Description of the Dand</li>	IM2.5, IM2.6, IM2.7, IM2.9, IM2.10, IM2.11, IM2.13, IM2.14, IM2.15, IM2.16, IM2.20, IM2.23	
<u> </u>		Electrical Complications Of Ind And		<u> </u>

		Their Treetmant		
		<ol> <li>Their Treatment-         <ol> <li>Explain Conduction System and Electrophysiology Of Heart.</li> <li>Explain Tacyarrhythmias And bradyarrythmias And Their Mechanisms.</li> <li>Know And Identify Arrythmias, Ectopics, Ventricular Tachycardia And Fibrillation, AIVR, SVT, Sinus Bradycardia And Heart Blocks In Ischemic Heart Diseases And Their Management.</li> <li>Discuss Anti Arrhythmic Drugs, Cpr And Defibrillations And Their Indications.</li></ol></li></ol>		
17	Congenital Heart Disease	<ol> <li>Understand Normal Structure And Development Of Heart</li> <li>ASD: Types, Clinical Features, Ecg&amp; 2d Echo Findings, Treatment</li> <li>VSD: Types, Clinical Features, Complications,</li> <li>Tetralogy Of Fallot: Pathophysiology, Clinical Features, Ecg&amp; 2d Echo Findings, Treatment</li> <li>Eisenmengers Syndrome .</li> <li>Ebstein's Anomaly: Pathophysiology, Clinical Features, Treatment</li> <li>Know About Transposition Of Great Arteries, Tricuspid Atresia</li> <li>Complications Of Congenital Heart Disease</li> </ol>	IM1.28, IM1.29	
18		<ol> <li>Definition- Abnormality Of Cardiac Pumping Or Filling.</li> <li>Etiology: 4 Main Causes Of CCF - Congenital Or Acquired, Idiopathic, Valvular Heart Disease, Coronary Artery Disease.</li> <li>Classification: NYHA (New York Heart Association).</li> <li>10 Precipitating Factors E.G., Arrhythmias High Output Status Etc.</li> <li>Risk Factors: Myopathy, Previous Myocardial Infarction, Alcohol.</li> <li>Clinical Presentation: Chest Pain, Breathlessness, Fatigue, Cerebral Symptoms.</li> <li>Types of Cardiac failure</li> <li>Clinical Features- Symptoms, Fatigue, Orthopanoea, Signs, S<sub>3</sub> Gallop, Basal Crepitations</li> </ol>	IM1.23,	

	<del>_</del>				
		9.	Diagnosis: Labs, Chest Xray, Ecg,		
			2dechocardiography.		
		0.	Treatment: Non Pharmacologic Like		
			Diet And Parmacologic Like Diuretics,		
			Angiotensin Converting Enzyme		
			Inhibitors, B Blockers, Digoxin		
19	Cor Pulmonale	1.	Types –Acute – Secondary To		
			Pulmonary Embolis And Chronic – Sec		
			To Lung Diseases		
		2.	Conditions Which Increases The		
		Γ.	Chances Of Dvt(Thrombhophilic States)		
		2	•		
		3.	Clinical Features Suggestive Of		
			Pulmonary Embolism		
		4.	Diffrential Diagnosis		
		5.	What Are The Investigations		
		$T_1$	reatment For Acute Pulmonary Embolism		
20	Hypertension	_	Definition Of Hypertension By Jnc 7 &	IM8.2,	
	Part I	1.	8,	IM8.3,	
	1 art 1	2	•	IM8.4,	
		۷.	Different Types Of Hypertension And	,	
			Classification: Primary, Second Staging		
				IM8.7,	
			White Coat, Masked, Secondary Etc.	IM8.8,	
		3.	Clinical Features: Headache, Giddiness,	IM8.9,	
			Chest Pain ,Breathlesness .	IM8.10	
		4.	Complications: Neurologic,		
		''	Cardiovascular, Renal, Ophthalmologic.		
			Cardiovascular, Kenar, Ophthalmologic.		
21	T I	1	T	DMO C	C1'-1
21	Hypertension	1.	Investigations Routine And Specific-,:	· ·	Cardiology
	Part II			IM8.12,	
			Echocardiography, Renal Doppler Chest	IM8.13,	
			Xray ,Fundoscopy, Urine Albumin Etc.	IM8.14,	
		2.	Treatment: - Various Classes Of	IM8.15,	
			Medications Available i.e Angiotensin	IM8.16,	
			Receptor Blockade /Ace Inhibitors, Beta	,	
			Blockers, Ca Channel Blockers/	11410.17	
			Vasodilators, Diuretics, Centrally Acting		
			,Etc.		
		3.	Definition Of Hypertensive Urgencies		
			And Emergencies And Their		
			Management		
		4.	Specific Conditions In Hypertension		
		'	Like Pregnancy Induced Hypertension		
			Etc And Their Specific Treatment.		
22	Daniaanditia	1)	•		
22	Pericarditis	1)	Types Of Pericardial Layers		
			Causes Of Pericarditis Or Effusion		
		3)	Clinical Features Of Pericarditis		
			Including Pericardial Rub, Tachycardia		
			Etc.		
		4)	Ecg Findings Of Pericarditis:Sinus		
		1.	Tachycardia, St Segment Elevation With		
1			Concavity Upwards ⪻ Segment		
			Depression.		
		5)	Diagnostic Tests For Pericarditis-		
			Pericardiocentesis And Fluid		
			Biochemistry.		
		6)	Treatment Of Pericarditis- Akt, Renal		
			D C( '1 E)		
1	1	- 1	RX, Steroids Etc. 27	İ	İ

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23	Cardiomyopathy	1) Know Definition Of Cardiomyopathy		
		2) 3 Types Of Cardiomyopathies &		
		Specific Clinical Features If Any		
		3) Lab Evaluation OfCmp By Cxr, Ecg,		
		Echo, Cardiac Catheterization.		
		4) Rx Of Each Of Cmp Including Digoxin		
		Etc.		
		5) Follow Up & Prognosis Evaluations.		
24	Diseases Of Oral	(Apthous ulcer, GERD, Achalaria Cardia, Ca		Surgery
	Cavity &Oesphagus	esophagus)		
		1. Causes & Management of apthous ulcers		
		2. Symptoms of esophageal disease – heart		
		burn,regurgitation,Chestpain,dysphagia,o		
		dynophagia, water , brash		
		3. To understand etiopathology of GERD &		
		complications like reflux esophagitis,		
		esophageal strictures ,Barrett's esophagus		
		4. To know about achalasia cardia-		
		neurologic dysphagia- absence of		
		ganglion cells in myentric plexus		
		5. Risk factor for ca esophagus		
		Types – Adenocarcinoma		
		- Squamous cell ca		
25	Diseases Of Stomach	Basic physiology of gastric mucocal	IM15.9,	
	Discuses of Stomach		IM15.15,	
		2. To know different diseases of stomach e.g	,	
		Acute & chronic Gastritis, peptic ulcers	111113.10	
		(Gastric & duodenal)		
		3. H.Pylori infection Pathophysiology &		
		4. management		
		5. Treatment - Antacid – various classes &		
		their action		
		6. Approach to dyspepsia		
		7. Names & indication for surgery in gastric		
		ulcer / duodanal ulcer		
24	Upper GI Bleeding		IM15 1	
20	Opper of breeding	Causes of upper GI tract bleeding e.g. NSAIDs	IM15.1,	
			IM15.2,	
		,H.Pyloriinfections, Varices, Ulcers	IM15.5,	
		<ol> <li>Symptoms – Haematemesis</li> <li>Malena</li> </ol>	IM15.6,	
			IM15.9,	
		- Complications- hypovolemic shock	IM15.10,	
		,anemia etc	IM15.11,	
		To diagnose upper GI bleed by	IM15.14	
		endoscopy.		
		2. Management of Upper GI bleed		
		- Medical Management		
		- Endoscopic therapy		
		Blood Transfusion – if severe anemia/shock		
27		Theory exam SAQ/LAQ/MCQ		

# Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI and VII Semester DEPARTMENT OF MEDICINE

#### Small group teaching Schedule: Duration: Two hrs/SGT

Sr. No.	Topic	Content	Competency No.	SGT Method*
1	ECG 1	To know about the normal cardiac electrical activity  1. To know basics of ECG machine- how to record ECG (12 leads), lead placement, standardizationetc.  2. To know about the basic concepts of ECG paper  3. How to read ECG- rate, rhythm, axis, individual waves, intervals etc.  4. To know about the characteristics of each wave, segment and interval	1.17, IM1.18	Tutorial
2	ECG 2	atrial flutter, atrial fibrillation	IM12.10 IM2.10, IM8.13, IM8.17	Tutorial

3		1. How to read a normal chest x	Tutorial
3			Tutoriai
		ray	
		2. Homogenous opacity of	
	Chest X Ray	unilateral/bilateral side	
		differentials	
		3. Miliary TB on chest x ray	
		4. Lung cavity/ abscess	
		5. Cannon ball appearance on x	
		ray	
		6. Cardiomegaly measurement	
		7. Atrial and ventricular	
		enlargement	
		8. Pneumonia	
		9. ARDS/ pulmonary edema	
		7. 74(DS) pullionary edema	
4		1. Ideal prescription	Tutorial
		2. Parts/ structure of prescription	
		3. Date	
		4. Superscription	
	Prescription	5. Inscription	
	writing	6. Subscription	
		7. Transcription	
		=	
		8. Signature	
		1 11	
5		1. How to interpret LFT report	Tutorial
		2. How to interpret pleural fluid	
		reports	
		3. CSF reports	
		4. Ascitic fluid report interpretation	
		5. Thyroid reports interpretation	
		6. Hemogram and peripheral smear	
		7. interpretation	
		es tube	
		1. Other names Description and	
		explaining various markingse.g	
	Lab data	405059 65Cardiac orifice Body	
		Pylorus1st part of	
		DuodenumStomach	
		2. Indications-	
		DiagnosticTherapeutic	
		3. Contraindications	
		Procedure- Technique of insertion	
		and confirmation of placement	
		4. Complications	
		a. Epistaxis	
		b. Rhinitis,Pharyngitis	
		c. Variceal bleed	
	Tubes and	ETT	Tutorial
6	catheters		1 utorial
	Catheters	1. Description	
		a. Portex	
		b.Cuffed /Uncuffed	
		c. Various sizes	
		2. Indication of Intubation	
		a. Respiratory failure	
		b. Cardio- respiratory arrest	
		c. General anasthesia	
,	Î.		
		3. Contraindications	
		3. Contraindications a. Trauma 30	

		h I amma a ama		
		b. Laryngospasm		
		4. Procedure-Consent, position of		
		pt., site, technique of insertion,		
		post intubation care.		
		5.Complications		
		a. Obstruction		
		b. Intubation either		
		Bronchus/esophagus		
		c. Trauma to cords intubation		
		Teeth dislodgement		
7	l Pleural Tapping and Biopsy	1. Indications of pleural tapping-diagnostic, therapeutic	IM3.9	Tutorial
		2. Contraindications local skin		
		infection, bleeding diathesis		
		3. Instruments- needle, syringe,		
		three way IV tubing etc.		
		4. Importance of Radioimaging		
		before and after the procedure		
		5. Procedure – position, site, how		
		much can be tapped		
		6. Analysis of pleural fluid		
		7. Complications - pneumothorax.		
		Hemothorax, empyema		
		8. Indications of pleural biopsy-		
		recurrent pleural effusion, pleural		
		mass		
		9. Instruments- Tru cut biopsy		
		needle		
8	Ascitic tapping	1. Indications of ascitic tapping-	IM5.15	Tutorial
8	Ascitic tapping	Indications of ascitic tapping- diagnostic , therapeutic	IM5.15	Tutorial
8	Ascitic tapping	11 0		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites,		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe,		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid		Tutorial
8	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding,		Tutorial
	Ascitic tapping	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury		
8		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments		Tutorial  Tutorial
	Ascitic tapping  Lumbar Puncture	diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and Therapeutic		
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		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and Therapeutic  3. Contraindications- Absolute and relative		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and Therapeutic  3. Contraindications- Absolute and relative  4. Procedure-Consent, position of		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and Therapeutic  3. Contraindications- Absolute and relative		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and Therapeutic  3. Contraindications- Absolute and relative  4. Procedure-Consent, position of pt., site, post procedure orders etc.		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and Therapeutic  3. Contraindications- Absolute and relative  4. Procedure-Consent, position of pt., site, post procedure orders etc.  5. Complications- local and		
		diagnostic, therapeutic  2. Contraindications- local skin infection, severe thrombocytopenia  3. Procedure – position of pt, sites, insertion of needle- Z technique  4. Instruments required-syringe, needle, local anesthetic.  5. How much fluid can be tapped,  6. Analysis of ascitic fluid  7. Complications- bleeding, infection, bowel injury  1. Description of the instruments needed-  a. Needle proper  b. Stylus  2. Indications- Diagnostic and Therapeutic  3. Contraindications- Absolute and relative  4. Procedure-Consent, position of pt., site, post procedure orders etc.		

10	Liver Biopsy,	1. Description of the instruments		Tutorial
	1 3	needed-		
	Kidney	a. Outer hollow needle		
	Biopsy	b.Inner split needle		
		c. Solid stylet		
		2. Indication of Biopsy-Cirrhosis		
		,Carcinoma ,Chronic hepatitis,		
		Storage & metabolic disorders		
		3. Contraindications-		
		Coagulopathy, Hydatidcyst, Cong		
		estedliver,massive, ascites,Hemangioma etc.		
		4. Procedure-Consent, position of		
		patient, site, post procedure		
		orders etc.		
		5. Complications-Hemorrhage,		
		Biliary peritonitis ,Precipitation		
		of hepatic coma etc.		
		6. Description of the instruments		
		needed-		
		- Outer hollow needle		
		- Inner split needle		
		- Solid stylet		
		7. Indications of Biopsy-		
		Nephroticsyndrome, Glomerulon		
		ephritis of any cause,		
		Proteinuria, Hematuria,		
		Systemic disorders with renal		
		involvement, transplant		
		rejection, Malignancy etc		
		8. Contraindications-Coagulopathy,		
		ESRD, Solitary kidney etc.		
		9. Procedure - Consent, position of		
		pt., site, post procedure orders etc		
		10. Complications - Hemorrhage,		
		infection etc.		
11		1. Description of the instruments	IM4.17	Tutorial
		needed-Needle		
		stylet,adjustableguard,e.gsalah,		
		klima		
	Bone Marrow	2. Indications- Anemia,		
	Aspiration and	pancytopenia, hematological		
	Biopsy	malignancies, pyrexia of		
		unknown origin 3. Contraindications- local		
		infection, coagulopathy etc.		
		4. Procedure-Consent, position of		
		patient, site, post procedure		
		orders etc.		
		5. Complications- hemorrhage,		
		infection		
		6. Analysis of bone marrow-		
		a. Cellularity of marrow		
		b. WBC, Megakaryocytes,		
		plasma cell		
		c. M.E ratio		

		d. parasite /tumour		
		cells/ fibrous		
		tissue/iron		
12		CVP Line	IM10.22	Tutorial
		1. Description of the instruments		
		needed-Needle, Guide wire,		
		Central line etc.		
		2. Procedure-Consent, position of		
		pt., site, post procedure orders		
		etc.		
		Complications- Pneumothorax, Carotid		
		artery puncture etc		
		IV Fluids		
		1. Types a.Colloids-		
	P line insertion IV	Hemaccel, Albumin etc.		
	Fluids & Infusion	b.Crystalloids		
	set	c.e.g NS, Dextrose,		
		RL,Hypertonic saline		
		2. Indications- Hypovolemic shock,		
		severe dehydration etc		
		3. ContraindicationCCF, other fluid		
		overload states		
		4. Advantages of IV fluids Rapid		
		connection of defici		
		5. Disadvantages		
		a. Thrombophlebitis		
		b. Hematoma		
		c. Pyogenic reaction		
		Overloading		
13	Blood transfusion		IM9.19	Tutorial
		group systems?		
		2. Which are the different blood		
		components?		
		3. What pre transfusion testing or precautions are taken?		
		4. What are the indications for		
		blood transfusion?		
		5. What are the contraindications		
		for blood transfusion?		
		What are the adverse reactions to		
		blood transfusion?		
14		1. What is Heat stroke?		Small group
	1 137	2. Clinical manifestations of heat		discussion
	eat stroke and Near	stroke		
	Drowning	3. Other causes of hyperthermia		
		4. Complications of heat stroke		
		5. Management of heat stroke		
15	A outo alastal	1. Metabolism of alcohol in body.		Small group
	Acute alcohol intoxication &	2. clinical features of acute alcohol		discussion
	withdrawal	intoxication		
	syndrome	3. Management of acute alcohol		
	Syndionic	intoxication		
		4. Manifestations of alcohol		
		withdrawal		
		5. Treatment of alcohol		
		withdrawal 33		

16	rine examination	<ol> <li>Methods of collection of urine specimens</li> <li>How is the gross &amp; microbiological examination of urine done?</li> <li>Which are the different urinary casts?</li> <li>Evaluation of proteinuria</li> <li>Further reading – treatment of UTI</li> </ol>	IM25.7	Small group discussion
17	naphylaxis &	1. Types of hypersensitivity		Small group discussion
	Acute Urticaria	reactions		discussion
		2. Etiology of anaphylaxis &urticaria		
		3. Clinical features of anaphylaxis-		
		3severe life threatening		
		complications		
		4. Treatment of anaphylaxis		
		5. Treatment of acute urticaria		
18	Exam on above topics	SAQ/ MCQ		

<sup>\*</sup>SGT Method-Group discussion/ Tutorial/seminar/DOAP/Practical/ skills lab

Batches for small group: 30 students per batch:

Batch	Roll No.s
A	1-30
В	31-60
C	61-90
D	91-120
E	121-150

#### Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI and VII Semester

#### **DEPARTMENT OF MEDICINE**

Clinical Posting Schedule: \_\_\_\_

(Total 4 weeks: 6 days x 3hours per day = 72 hours)

Day of posting	Topic/s	Competency	Hours	Teaching learning method: bedside clinic/ Skills lab/ Clinical clerkship
Monday	CVS - History taking and symptomatology	IM1.10, IM2.6, IM8.9	3 (2+1)	Bedside Clinic + Clinical Clerkship
Tuesday	General examination in CVS- 1 (Pulse, BP, JVP)	IM1.11, IM1.12, IM1.13, IM1.14, IM2.7, IM8.10	3 (2+1)	Bedside Clinic + Clinical Clerkship
Wednesday	Blood transfusion + General examination in CVS- 2	IM9.19 IM1.11, IM1.14, IM2.7	3(2+1)	Skill Lab + Bedside clinic
Thursday	Mitral Stenosis (MS)	IM1.11, IM1.12, IM1.13, IM1.14, IM1.15	3 (2+1)	Bedside Clinic + Clinical Clerkship
Friday	Mitral Regurgitation (MR)	IM1.11, IM1.12, IM1.13, IM1.14, IM1.15	3 (2+1)	Bedside Clinic + Clinical Clerkship
Saturday	Aortic Stenosis (AS)	IM1.11, IM1.12, IM1.13, IM1.14, IM1.15	3 (2+1)	Bedside Clinic + Clinical Clerkship
Monday	Aortic Regurgitation (AR)	IM1.11, IM1.12, IM1.13, IM1.14, IM1.15	3 (2+1)	Bedside Clinic + Clinical Clerkship
Tuesday	Congenital heart disease (VSD/TOF)	IM1.11, IM1.12, IM1.13, IM1.14, IM1.15	3 (2+1)	Bedside Clinic + Clinical Clerkship
Wednesday	Ascitic fluid Aspiration + Multi- valvular heart disease (MR +MS/AS/AR) (2+1)	IM 5.15 IM1.11, IM1.12, IM1.13, IM1.14, IM1.15	3(2+1)	Skill Lab + Bedside clinic
Thursday	Thyroid disease - Grave's disease/ Severe Hypothyroidism	IM12.5, IM12.6, IM12.7	3 (2+1)	Bedside Clinic + Clinical Clerkship
Friday	Approach to Polyarthritis	IM7.11, IM7.12	3 (2+1)	Bedside Clinic + Clinical Clerkship

Saturday	Case presentation / Buffer		3 (2+1)	Bedside Clinic + Clinical Clerkship
Monday	GIT- History & Symptomatology	IM5.9, IM15.4, IM16.4	3 (2+1)	Bedside Clinic + Clinical Clerkship
Tuesday	General examination in GIT diseases.	IM4.10, IM5.10, IM15.5, IM15.7, IM16.5	3 (2+1)	Bedside Clinic + Clinical Clerkship
Wednesday	Lumbar Puncture + Decompensated Liver Cirrhosis	IM6.15 IM5.9, IM5.10	3 (2+1)	Skill Lab + Bedside Clinic
Thursday	Acute hepatitis	IM4.9, IM4.10, IM5.9, IM5.10	3 (2+1)	Bedside Clinic + Clinical Clerkship
Friday	Splenomegaly ± Lymphadenopathy	IM4.9, IM4.10	3 (2+1)	Bedside Clinic + Clinical Clerkship
Saturday	Hepatomegaly ± Splenomegaly	IM4.9, IM4.10, IM5.9, IM5.10	3 (2+1)	Bedside Clinic + Clinical Clerkship
Monday	Case of Jaundice with approach to Jaundice	IM4.9, IM4.10, IM5.9, IM5.10	3 (2+1)	Bedside Clinic + Clinical Clerkship
Tuesday	Decompensated Liver Cirrhosis	IM5.9, IM5.10	3 (2+1)	Bedside Clinic + Clinical Clerkship
Wednesday	Ryle's Tube Insertion + Lump/ mass per Abdomen	IM4.9, IM4.10	3 (2+1)	Skill Lab + Bedside Clinic
Thursday	Decompensated Liver Cirrhosis	IM5.9, IM5.10	3 (2+1)	Bedside Clinic + Clinical Clerkship
Friday	Case Presentation/ Buffer		3 (2+1)	Bedside Clinic + Clinical Clerkship
Saturday	End of Posting Examination	1	1	1

## Bharati Vidyapeeth Deemed To Be University Medical College, Pune MBBS – Phase III – Part I

#### VI and VII Semester

Department of General Surgery Lecture Schedule: Duration : One hr /Lecture

Lecture no.	Topic	Content	Competency	Integration
1	Surgical infections	Define and describe the aetiology and pathogenesis of surgical Infections. Enumerate Prophylactic and therapeutic antibiotics Plan appropriate management	SU6.1 SU6.2	Microbiology
2	Basic surgical skills	Describe Aseptic techniques, sterilization and disinfection.	SU14.1	Microbiology
3	Anaesthesia and pain management	Describe principles of Preoperative assessment. Enumerate the principles of general, regional, and local Anaesthesia.	SU11.1 SU11.2	Anaesthesiolo gy
4	Development al anomalies of face, mouth and jaws	Describe the etiology and classification of cleft lip and palate.  Describe the Principles of reconstruction of cleft lip and palate	SU19.1 SU19.2	
5	Investigation of surgical patient	Biological basis for early detection of cancer and multidisciplinary approach in management of cancer	SU9.2	
6	Oropharynge al cancer - I	Describe etiopathogenesis of oral cancer symptoms and signs of oropharyngeal cancer. Enumerate the appropriate investigations and discuss the Principles of treatment.	SU20.1 SU20.2	
7	Disorders of salivary glands - I	Describe surgical anatomy of the salivary glands, pathology, and clinical presentation of disorders of salivary glands	SU 21.1	
8	Disorders of salivary gland - II	Enumerate the appropriate Investigations and the Principles of treatment of disorders of salivary glands	SU 21.2	
9	Thyroid- I	Describe the applied anatomy and physiology of thyroid. Describe the etiopathogenesis of thyroidal swellings.	SU 22.1 SU 22.2	Human Anatomy
10	Thyroid - II	Describe the clinical features, classification and principles of management of thyroid cancer	SU22.4	

11	Parathyroid glands	Describe the applied anatomy of parathyroid.  Describe and discuss the clinical features of hypo - and hyperparathyroidism and the principles of their management.	SU 22.5 SU 22.6
12	Adrenal gland	Describe the applied anatomy of adrenal glands.  Describe the etiology, clinical features and principles of management of disorders of adrenal gland  Describe the clinical features, principles of investigation and management of Adrenal	SU 23.1 SU 22.2 SU23.3
13	Breast - I	tumours  Describe applied anatomy and appropriate investigations for breast disease	SU 25.1
14	Breast - II	Describe the etiopathogenesis, clinical features and principles of management of benign breast disease including infections of the breast	SU 25.2
15	Breast - III	Describe the etiopathogenesis, clinical features, Investigations and principles of treatment of benign and malignant tumours of breast.	SU 25.3
16	Minimally invasive General Surgery	Describe the Indications, advantages and disadvantages of Minimally invasive General Surgery	SU 16.1
17	Abdomen - peritoneum	Describe causes, clinical features, complications and principles of management of peritonitis	SU 28.3
18	Abdomen	Describe pathophysiology, clinical features, investigations and principles of management of Intra-abdominal abscess, mesenteric cyst, and retroperitoneal tumors	SU 28.4
19	Abdomen - esophagus	Describe the applied Anatomy and physiology of esophagus.	SU 28.5
20	Abdomen - esophagus	Describe the clinical features, investigations and principles of management of malignant disorders of esophagus.	SU 28.6
21	Abdomen - stomach	Describe the applied anatomy and physiology of stomach. Describe and discuss the aetiology, clinical features, investigations and principles of management of congenital hypertrophic pyloric stenosis.	SU 28.7 SU 28.8

22	Abdomen - stomach	Describe and discuss the aetiology, clinical features, investigations and principles of management of Peptic ulcer disease	SU 28.8	
23	Abdomen - Stomach	Describe and discuss the aetiology, clinical features, investigations and principles of management of Carcinoma stomach		
24	Pancreas - I	Describe the clinical features, principles of investigation, prognosis and management of pancreatitis.	SU 24.1	
25	Pancreas - II	Describe the clinical features, principles of investigation, prognosis and management of pancreatic endocrine tumours	SU24.2 SU24.3	
	Term end exar	m		2 Hours

#### Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS - Phase III - Part I

#### VI and VII Semester

#### **Department of surgery**

Small group teaching Schedule: Duration 2hrs/SGT

Sr. no	Topic	Content	Competency No.	SGT Method
1	Wound healing and wound care	Differentiate the various types of wounds, plan and observe management of wounds.	SU5.3	Practical
		Discuss medico legal aspects of wounds.	SU5.4	
2	Nutrition and fluid therapy	Describe and discuss the methods of estimation and replacement of the fluid and electrolyte requirements in the surgical patient	SU12.2	Tutorial / Group discussion
3	Anaesthesia and pain management	Describe Principles of safe General Surgery	SU11.6	Tutorial
4	Investigation of surgical patient	Choose appropriate biochemical, microbiological, pathological, imaging investigations Communicate the results of surgical investigations and counsel the patient appropriately and interpret the investigative data in a surgical patient	SU9.1 SU9.3	Tutorial
5	Pre, intra and post- operative management.	Observe common surgical procedures and assist in minor surgical procedures; Observe emergency lifesaving surgical procedures.	SU10.3	Practical
6	Pre, intra and post- operative management.	Perform basic surgical Skills such as First aid including suturing and minor surgical procedures in simulated environment	SU10.4	Skill lab
7	Anaesthesia and pain management	Demonstrate maintenance of an airway in a mannequin or equivalent	SU11.3	Tutorial
8	Basic Surgical Skills	Describe Aseptic techniques, sterilization and disinfection	SU14.1	Group Discussion
9	Basic Surgical Skills	Describe Surgical approaches, incisions.	SU14.2	Tutorial
10	Basic Surgical Skills	Describe the use of appropriate instruments in Surgery in general	SU14.2	Tutorial
11	Basic Surgical Skills	Describe the materials and methods used for surgical wound closure and anastomosis (sutures, knots and needles)	SU14.3	Tutorial
		Demonstrate the techniques of asepsis and suturing in a simulated environment	SU14.4	
12	Trauma	Describe the Principles of FIRST AID.  Demonstrate the steps in Basic Life Support. Transport of injured	SU17.1	Tutorial / DOAP
		patient in a simulated environment.	SU17.2	Dorn
13	Trauma	Describe the clinical features of soft tissue injuries. Chose appropriate investigations and discuss the principles of management.	SU17.7	Seminar
14	Trauma	Describe the pathophysiology of chest injuries. Describe the clinical features and principles of management of chest injuries.	SU17.8 SU17.9	Tutorial
15	Trauma	Demonstrate Airway maintenance. Recognize and manage tension pneumothorax, hemothorax and flail chest in simulated environment.	SU17.10	Skill lab
16	Endocrine General Surgery:	Describe the etiopathogenesis of thyroidal swellings	SU22.2	Tutorial
	Thyroid and			
	parathyroid	40		

17	Breast	Demonstrate the correct technique to palpate the breast for breast	SU25.5	DOAP
		swelling in a mannequin or equivalent		
		Describe and identify the morphologic and microscopic features	PA31.3	
		of carcinoma of the breast		
18	Skill Module	Incision and drainage	10.3	Skill lab

<sup>\*</sup>SGT Method-Group discussion/ Tutorial/ Seminar/ DOAP/ Practical/ Skill lab Batches for small group: 30 students per batch:

Batch	Roll No.s
A	1-30
В	31-60
С	61-90
D	91-120
Е	121-150

#### Bharati Vidyapeeth Deemed To Be university Medical College, Pune MBBS- Phase III- Part I VI and VII Semester

#### **Department of General surgery**

#### Clinical posting schedule:

(Total Weeks - 4; 24days x 3hours per day = 72hours)

Day of post ing	Topic/s	Competency	Hours	Teaching learning method: bedside clinic/ skills lab/ clinical clerkship
1	Swelling: case presentation- discussion of investigation and treatment plan	SU18.3	3	Bedside clinic
2	Ulcer: case presentation- discussion of classification, investigations and treatment plan	SU5.2 SU5.3	3	Bedside clinic Clinical clerkship
3	Ulcer (Diabetic foot): discussion and treatment plan		3	Bedside clinic Clinical clerkship
4	Scrotal swellings: case presentation hydrocele/ varicocele- discuss investigations and treatment plan	SU30.4 SU30.5	3	Bedside clinic
5	Inguinal hernia- case presentation- discuss treatment plan	SU28.2	3	Bedside clinic
6	Case presentation: ventral hernia (discuss investigations and treatment plan)	SU28.2	3	Bedside clinic
7	Breast: symptomatology, History taking and examination of breast lump.	SU25.5	3	Bedside clinic.
8	Breast: discussion of differential diagnosis with investigations and treatment plan	SU25.1	3	Clinical clerkship Bedside clinic
9	Breast: Case presentation- benign Breast Lump		3	Bedside clinic
10	Breast: Case presentation- carcinoma breast			Bedside clinic
11	Thyroid: symptomatology, history taking, physical examination	SU22.3	3	Bedside clinic
12	Thyroid: discussion of differential diagnosis with investigations and broad outline of management	SU22.3 SU22.4	3	Bedside clinic Clinical clerkship
13	Thyroid: Case presentation – Multinodular goitre	SU22.3	3	Bedside clinic
14	Thyroid: case presentation – solitary nodule thyroid	SU22.3	3	Bedside clinic
15	Case presentation: other neck swellings- cervical lymphadenopathy	SU22.8	3	Bedside clinic
16	Oral malignancy History taking, examination and investigations	SU20.1	3	Bedside clinic Clinical clerkship
17	Oral malignancy: Case presentation	SU20.2	3	Bedside clinic
18	Varicose veins: History taking, examination and investigations and various treatment modalities	SU27.5 SU27.6	3	Bedside clinic Clinical clerkship
19	Case presentation: varicose veins		3	Bedside clinic
20	Peripheral vascular disease: history taking and examination and investigations	SU27.1 SU27.2 SU27.3	3	Bedside clinic Clinical clerkship
21	Case presentation: Peripheral vascular disease	42	3	Bedside clinic

22	Case presentation: Amputation stump.	SU27.4	3	Bedside clinic
	Describe principles of amputation.			Clinical clerkship
23	Case presentation: Ileostomy colostomy.		3	Bedside clinic
	Discuss complications and management of			Clinical clerkship
	stoma			
24	Clinical term end			•

#### Bharati Vidyapeeth (Deemed To Be University) Medical College Pune MBBS-Phase III- Part I

#### VI and VII Semester

#### DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

**Lecture Schedule: Duration: One hr/Lecture** 

Lecture No.	Topics	Content	Competency	Integration
1.	Demographic and Vital Statistics	Birth Rate, Maternal Mortality and Morbidity: Define & Discuss Perinatal Mortality and Morbidity, Neonatal Mortality Audits	OG1.1 & 2	Community medicine
2.	Demographic and Vital Statistics	Still Birth and Abortions: Define & Discuss	OG1.3	
3.	Antepartum haemorrhage	Define, Classify APH. Aetiology, pathogenesis, clinical features and management of Placenta Previa	OG10.1	
4.	Antepartum haemorrhage	Aetiology, pathogenesis, differential diagnosis, clinical features and management of Placental Abruption	OG10.1	
5.	Operative Obstetrics	Caesarean section: Indications, Procedure, Complications	OG15.1	
6.	Operative Obstetrics	Forceps & Vaccum extraction	OG15.1	
7.	Operative Obstetrics	Cervical Cerclage: Indications, Procedure, Complications	OG15.1	
8.	Lactation	Mastitis & Breast abscess: Clinical features, diagnosis and Management	OG17.3	
9.	Abnormal Puerperium	Puerperal pyrexia and Puerperal Pyrexia	OG19.1	
10.	Normal and Abnormal Puberty	Precocious Puberty and Delayed Puberty	OG23.2	
11.	Vaginal Discharge and Genital Infections	Vaginal Infections: Etiology, characteristics, hygiene, management and syndromic approach	OG22.2	
12.	Vaginal Discharge and Genital Infections	STDs: Etio-pathogenesis, CF, DD, Investigation, Management and long term implications	OG27.1	
13.	Vaginal Discharge and Genital Infections	Genital Tuberculosis: Etio-pathogenesis, CF, DD, Investigation, Management and long term implications	OG27.2	
14.	Vaginal Discharge and Genital Infections	HIV: Etio-pathogenesis, CF, DD, Investigation, Management and long term implications	OG27.3	
15.	Vaginal Discharge and Genital Infections	PID: Etio-pathogenesis, CF, DD, Investigation, Management and long term implications	OG27.4	
16.	Abnormal Uterine Bleeding	AUB I:Definition, Classification, Aetiology, Clinical Features	OG24.1	

17.	Abnormal Uterine Bleeding	AUB II: Investigations & Management	OG24.1
18.	Infertility	Infertility: Causes, Types, CF, Differential Diagnosis, Baseline Investigations including semen analysis	OG28.1
19.	Infertility	Infertility Investigations: Tubal Patency Tests & Restoration of tubal patency	OG28.2
20.	Infertility	Infertility: Ovulation Induction drugs, principles and monitoring	OG28.3
21.	Infertility	Assisted Reproductive Techniques	OG28.4
22.	PCOS and Hirsutism	PCOS: Etio-pathogenesis, Clinical Features, Diagnosis & Investigations, Management long term complications	OG30.1
23.	Fibroids & Endometriosis	Fibroid I: Aetiology, Pathology, CF, DD	OG29.1
24.	Fibroids & Endometriosis	Fibroid II: Investigations, Management Principles & Complications including degenerations	OG29.1
25.		Term end theory	

#### VI and VII Semester

#### DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

#### **Small Group Teaching: Duration: 1 hr/Small Group Teaching**

Serial No.	Topic	Content	Competency	SGT Method
1,00				
1.	Antenatal Care	Objectives of Antenatal Care	OG8.1	Group discussion
2.	Antenatal Care Obstetrics History & Clinical Importance		OG8.2	Tutorial
3.	Antenatal Care	Obstetrics Examination	OG8.3	DOAP
4.	Antenatal Care	Monitoring of Maternal and Fetal Well-being	OG8.4	Group Discussion
5.	Antenatal Care	Nutrition in Pregnancy	OG8.6	Seminar
6.	Antenatal Care	Role of Ultrasound and Doppler in Obstetrics	OG16.3	Tutorial
7.	Labour & Operative Obstetrics	Physiology of Normal Labor & Stages of Labour	OG13.1	Seminar
8.	Labour & Operative Obstetrics	Mechanism Of Labor	OG13.1	DOAP
9.	Labour & Operative Obstetrics	Management of First and Second Stage of Labour	OG13.1	Tutorial
10.	Labour & Operative Obstetrics	Management of third stage of Labour	OG13.1	Practical
11.	Labour & Operative Obstetrics	Indications and Suturing of Episiotomy	OG15.1	Group discussion
12.	Labour & Operative Obstetrics	Pain Relief in Labor	OG 13.1	Tutorial
13.	Labour & Operative Obstetrics	Induction & Augmentation of Labor	OG 13.1	Seminar
14.	Labour & Operative Obstetrics	Preterm Labor & PROM	OG 13.2	Tutorial
15.	Labour & Operative Obstetrics	Post Dated & Post Term Pregnancy	OG 13.2	Seminar
16.	Complications in Third Stage of labour	PPH: Causes, Definition, Drug Treatment of Atonic PPH	OG16.1	Group discussion

17.	Complications in Third Stage of labour	PPH: Traumatic and Surgical Management of PPH	OG16.1	Group discussion
18.	Lactation	Physiology of Lactation and Breast Feeding	OG17.1	Seminar
19.	Lactation	Counselling of Breast Feeding in a Simulated Environment and breast feeding problems	OG17.2	DOAP
20.	Contraception Classification of Temporary and Permanent Methods. Discussion on Natural Methods, Pearl's Index		OG21.1	Seminar
21.	Contraception	Barrier Methods of Contraception	OG21.1	Tutorial
22.	Contraception	Oral Contraceptives: Classification, Mechanism Of action. Side Effects	OG21.1	Seminar
23.	Contraception	Injectable Contraceptives and Emergency Contraceptives	OG21.1	Tutorial
24.	Contraception	Intrauterine Contraceptive Devices: Classification, Mechanism of Action, Side Effects and PPIUCD programme	OG21.1 OG21.2	DOAP
25.	Contraception	Female Sterilization	OG21.1	Tutorial
26.	Contraception	Male Sterilization and Medical Eligibility Criteria [MEC] for various contraceptive methods	OG22.1	Seminar
27.	Medical Termination of Pregnancy	MTP Act & Law, PCPNDT Act	OG20.1	Seminar
28.	Medical Termination of Pregnancy	1 <sup>st</sup> Trimester MTP	OG20.1	Group discussion
29.	Medical Termination of Pregnancy	2 <sup>nd</sup> Trimester MTP	OG20.1	Seminar
30.	Medical Termination of Pregnancy	Abortions I [ Definition, aetiology, types and management of first trimester abortions]	OG9.1	Tutorial
31.	Medical Termination of Pregnancy	Abortions II [ Second trimester abortion and Incompetent Os]	OG9.1	Group discussion
32.	Complications in early pregnancy	Acute Abdomen in Early Pregnancy with focus on ectopic pregnancy [Aetiology, Clinical features, Differential Diagnosis and Management]	OG9.3	Group discussion
33.	Complications in early pregnancy	Vesicular Mole	OG9.4	Seminar
34.	Complications in early pregnancy	Hyperemesis Gravidarum	OG9.5	Tutorial
35.	Neonatology	Care of New-born	OG18.1	DOAP

#### Bharati Vidyapeeth (Deemed To Be University) Medical College Pune MBBS-Phase III- Part I Block I and Block II

#### DEPARTMENT OF OBSTETRICS AND GYNECOLOGY

Clinical Posting Schedule: (Total weeks 4; 6 days x 3hours per day = 72 hours)

Day of posting	Topic/s	Competency	Hours	Teaching learning method
1.	Obstetric examination, Lie, Presentation, Attitude, Leopold Manoeuvres [excluding internal examination]	OG35.1	3	Clinical clerkship
2.	Objectives of Antenatal Care Including ANC visits and Antenatal Investigations	OG8.1	3	Clinical clerkship
3.	Partograph	OG8.4	3	Clinical clerkship
4.	Monitoring of fetal well-being [NST, DFMC, BPP, USG]	OG16.3	3	Clinical clerkship
5.	Screening of high risk pregnancy & Nutrition in Pregnancy	OG8.1, OG8.6	3	Clinical clerkship
6.	Types of Maternal Pelvis and Clinical importance in Obstetrics & Fetal skull	OG14.1, OG14.2	3	Skills lab
7.	Mechanism of normal labour	OG14.2	3	Skills lab
8.	Episiotomy: Indications, Procedure, Complications	OG15.1	3	Skills lab
9.	PPH: Causes, Definition	OG16.1	3	Clinical clerkship
10.	PNC Case Discussion	OG19.1	3	bedside clinic
11.	Caesarean section: Indications, Procedure, Complications	OG15.1	3	Clinical clerkship
12.	Case discussion Multiple Pregnancy:	OG11.1	3	bedside clinic
13.	Case discussion Hypertensive Disorders in Pregnancy:	OG12.1	3	bedside clinic
14.	Case discussion Intra Uterine Growth Retardation	OG16.3	3	bedside clinic
15.	Case discussion Anaemia in pregnancy	OG12.2	3	bedside clinic
16.	Case discussion Preterm Labour, PROM & Post-Dated Pregnancy	OG13.2	3	bedside clinic
17.	Cervical Cerclage: Indications, Procedure, Complications	OG15.1	3	Clinical clerkship
18.	Oral Contraceptives, Injectable Contraceptives ,Emergency Contraceptives	OG21.1	3	Skills lab
19.	Intrauterine Contraceptive Devices	OG21.1	3	Skills lab

20.	Female Sterilization	OG21.1	3	Clinical clerkship
21.	MTP 1 <sup>st</sup> & 2 <sup>nd</sup> trimester	OG20.1	3	Clinical clerkship
22.	Vaginal Infections: syndromic approach	OG22.2	3	Clinical clerkship
23.	Prevention and Screening of Cancer Cervix	OG33.4	3	Clinical clerkship
24.	Case discussion of Benign Ovarian mass	OG34.2	3	bedside clinic
25.	End of Posting Exam		3	

### Bharati Vidyapeeth Deemed To Be University Medical College Pune

#### **DEPARTMENT OF PEDIATRICS**

## **Phase III MBBS: PART I**

VI and VII Semester

**Lectures: Duration One hr/Lecture** 

No.	Topic	Content	Competency	Integration
1.	Normal Growth and development in child	Anthropometry measurement and assessment, growth chart plotting. Principles of normal development. Milestones in infancy and childhood in all domains.	PE1.1, PE1.2, PE1.3, PE1.4 PE1.5, PE1.6, PE1.7	
2.	Development al and behavioural disorders	Enumerate and discuss the causes of developmental delay. Etiology, clinical features, diagnosis and management of child with learning disabilities.	PE3.1, PE3.2, PE3.3, PE3.4, PE4.2, PE4.3, PE4.4, PE4.5	
3.	Short stature	Etiology, diagnosis and management of short stature; physiological short stature	PE2.4, PE2.5, PE2.6	

#### • Small Group Teaching: Duration: 2hrs/SGT

Sr. No.	Topic	Content	Competency No.	SGT Method
1.	Immunization-1	Vaccines in NIS	PE19.1, PE19.3,	SGD in
			PE19.4, PE19.7,	immunization
			PE19.8	OPD
2.	Immunization-2	Optional vaccines	PE19.5, PE19.10,	SGD in
			PE19.11, PE19.16	immunization
				OPD
3.	Growth-1	Anthropometry and	PE1.1, PE1.2,	SGD -
		plotting on growth	PE1.3, PE1.4	seminars
		charts		
4.	Growth - 2	Growth disorders	PE2.1, PE2.2,	SGD- case
			PE2.3, PE2.4,	based
			PE2.5, PE2.6	discussion
5.	Development-1	Normal milestones	PE1.5, PE1.6,	SGD seminars
			PE1.7	
6.	Development-2	Approach to	PE3.1, PE3.2,	SGD- case
	_	developmental delay	PE3.3, PE3.4	based
		_		discussion

# • <u>Clinical Postings:</u> (Total weeks: 4, Days- 24 x 3 hours per day =72 hours)

Day of posting	Topic/s	Compenets	Competency	Hours	Teaching learning method
2 day	Fever with rash (3 cases)	Identify different types of rash and their causes e.g. Measles, Chicken Pox etc.	PE34.15, PE34.18, PE34.20	6 hours	Small group discussion
3 days	Respiratory system examination with 2 cases	Differentiate –Upper versus lower respiratory affection. Localise in the respiratory tract along with type of affection. e.g. Bronchiolitis, Bronchopneumonia, Pneumonia, Croup, Empyema, Asthma	PE28.1, PE28.2, PE28.3, PE28.4, PE28.5, PE28.6, PE28.7, PE28.8, PE28.9, PE28.11, PE28.14, PE28.17, PE28.18	9 hours	Small group discussion, DOAP
1 days	Perabdominal examination	To be able to identify Hepato/ splenomegaly and free fluid in abdomen	PE29.12, PE29.13	3 hours	Bedside clinic
2 days	Hepato Splenomegaly (2 cases)	Clinical approach to Differential diagnosis ( Malaria. Typhoid, Hemolytic anemia, Leukemia)	PE26.6, PE26.7, PE29.4, PE29.11, PE29.12, PE29.13, PE29.16, PE29.19, PE29.20	6 hours	Bedside clinic
2 days	CNS examinatiuon	Common symptoms indicative of CNS affection- spasticity, seizures	PE30.18, PE30.19	6 hours	Bedside clinic
2 days	Newborn (2 cases)	History taking, differentiating FT from PT, identifying sick newborn. Eliciting clinical signs like icterus	PE20.2, PE20.4, PE20.5, PE20.6 PE20.7, PE20.19, PE20.20, PE20.22	6 hours	Bedside clinic, DOAP
2 days	CVS Examination (2)	Examination of CVS and Ask relevant history and perform examination to differentiate between cyanotic and Acyanotic heart disease	PE23.3, PE23.7, PE23.8, PE23.9, PE23.10	6 hours	Bedside clinic

1 day	AGE	History and clinical features to identify grades of dehydration To be able to prepare and advise ORS therapy	1 22, 1 22	3 hours	DOAP
1 day	PEM	Dietary history taking, Identify and classify SAM and MAM	PE10.1, PE10.2, PE10.3, PE10.5, PE10.6	3 hours	DOAP, bedside clinic
2 days	Anemia	Identify anemia. Appropriate history to identify the cause. Clinical signs in Nutritional anemia and Thalassemia/Sickle cell	PE13.3, PE13.4, PE13.5, PE13.6, PE29.1, PE29.3, PE29.3	6 hours	Bedside clinic
5 days	IMNCI	IMNCI Module: 2 months to 2 years: Danger signs, identification of severe pneumonia, severe dehydration, Severe malnutrition, meningitis, severe measles, mastoiditis etc.	PE16.1, PE16.2, PE16.3, PE21.1, PE21.11, PE24.9, PE24.10, PE24.11, PE28.15	15 hours	DOAP

End of Clinical posting Examination

#### **VII Semester**

## • Lectures: Total 17: Duration : One hr/Lecture

No.	Торіс	Content	Competency	Integration
1.	Breast feeding and lactation management	Physiology of lactation, composition of breast milk, initiation and teaching of feeding. Hazards of pre lacteal feed, bottle feeding	PE7.1, PE7.2, PE7.3, PE7.4, PE7.5, PE7.6 PE7.7, PE7.8	
2.	Infant feeding	Normal requirement of proteins, CHO, fats for infants and children. Complementary feeds and method of weaning	PE8.1, PE8.2, PE8.3, PE8.4, PE8.5	
3.	Normal fluid and electrolyte balance	Normal fluid and electrolyte composition of body fluids. Regulation of fluid and electrolyte balance esp. Na and K. Causes and treatment of hypo and hypernatremia, hypo and hyperkalaemia.	PE15.1, PE15.2, PE15.3, PE15.5	
4.	Diarrhea with dehydration	Etiopathogenesis, clinical differentiation of watery and invasive diarrhea, complications of diarrheal illnesses.	PE24.1, PE24.2, PE24.3, PE24.4, PE24.5, PE24.8, PE24.9	
5.	Acute maculopapular exanthematous illnesses	Epidemiology, basic pathology, natural history, symptoms, signs, complications, investigations, differential diagnosis of maculopapular illnesses.	PE34.15, PE34.18, PE34.20	
6.	Acute vesicobullous exanthematous illnesses	Epidemiology, basic pathology, natural history, symptoms, signs, complications, investigations, differential diagnosis of vesicobullous illnesses.	PE34.15, PE34.18, PE34.20	
7.	Nutritional anaemia	Clinical approach to child with anaemia.	PE13.3, PE13.4, PE13.5, PE13.6,	
8.	Haemolytic anaemia	Concept of haemolytic anaemia, different causes, lab approach	PE29.1, PE29.3, PE29.3	
9.	Childhood TB	Tuberculous infection versus disease, primary and post primary TB, diagnostic criteria in children vs adults, Technique and interpretation of Mantoux and BCG test, Xray patterns *Routes of transmission, common clinical features, establishing diagnosis by appropriate investigations, categorization and RNTCP guidelines for treatment	PE34.1, PE34.2, PE34.4, PE34.7, PE34.10, PE34.13	Pulmonary medicine
10	. Hypothyroidism	Congenital hypothyroidism,. Neonatal screening for hypothyroidism	PE33.1, PE33.2, PE33.3	
11	. Acute respiratory illnesses	Approach to a child with respiratory distress, stridor, and wheezing, grading severity. National ARI program	PE28.1, PE28.2, PE28.3, PE28.4, PE28.5, PE28.6,	
12	Upper respiratory tract infections - Croup syndrome	Etiopathogenesis, clinical features, complications, investigations, differential diagnosis and management of - *Upper respiratory conditions- Croup syndrome, foreign body	PE28.1, PE28.2, PE28.3, PE28.4, PE28.5, PE28.6,	

13.	Lower respiratory tract infections	Etiopathogenesis, clinical features, complications, investigations, differential diagnosis and management of - LRTI	PE28.9, PE28.11, PE28.14, PE28.17, PE28.18
14.	Urinary tract infections	Prevalence and aetiology of urinary tract infections, clinical manifestations, classification, pathogenesis, complications, diagnosis and treatment. Predisposing factors especially conditions like Posterior urethral valves,	PE21.1
15.	Acute glomerular nephritis, Haemolytic uremic syndrome	Causes and diagnosis of haematuria. Etiopathogenesis, clinical features, diagnosis, complications and management of acute post-streptococcal glomerulonephritis	PE21.2, PE21.4
16.	Nephrotic syndrome	Causes and diagnosis of haematuria. Etiopathogenesis, clinical features, diagnosis, complications and management of nephrotic syndrome	PE21.3
17.	Acute flaccid paralysis	Common causes of AFP- Polio, GBS. Clinical localization of the lesion causing AFP. Relevant investigations to confirm diagnosis.	PE30.13
18.	Theory Examination	on	· · · · · · · · · · · · · · · · · · ·

#### • Small Group Teaching: Duration: 2hrs/SGT

Sr. No.	Topic	Content	Competency No.	SGT Method
1.	PEM-1	Nutritional assessment	PE9.2, PE9.3, PE9.4, PE9.5	SGD, bedside
2.	PEM-2	Marasmus and	PE9.6, PE10.1, PE10.2,	SGD, bedside
		Kwashiorkor	PE10.3, PE10.4, PE10.5,	
			PE10.6	
3.	AGE-1	Clinical features and	PE24.1, PE24.2,	SGD, bedside
		various types		
4.	AGE - 2	Management of	PE24.3, PE24.4, PE24.5,	SGD, bedside
		dehydration	PE24.8, PE24.13, PE24.14	
5.	Vitamin-1 (A and B	Etiopathogenesis,	PE12.1, PE12.2, PE12.3,	SGD
	complex)	clinical features,	PE12.4, PE12.5, PE12.15,	
		management	PE12.16, PE12.17, PE12.18	
6.	Vitamin-2 (C, D K)	Etiopathogenesis,	PE12.19, PE12.20, PE19.21,	SGD
		clinical features,	PE12.6, PE12.7, PE12.8,	
		management	PE12.9, PE12.10, PE12.13,	
			PE12.14	
7.	Childhood Tb	Evaluation and	PE34.1, PE34.2, PE34.3,	SGD
		management	PE34.4, PE34.5, PE34.8	
8.	Introduction to	Neonatal nomenclature,	PE20.1, PE20.2, PE20.4	SGD, bedside
	newborn	characteristics of normal		
		neonate, assessment and		
		care of normal newborn		
9.	Interpretation of	How to interpret CBC	PE29.14	SGD
	CBC			

#### VI Semester and VII Semester DEPARTMEMT OTORHINOLARYNGOLOGY

Decidies Schedule, Duranon, One milbertare	Lectures	<b>Schedule:</b>	<b>Duration:</b>	One h	r/Lecture
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Lecture no.	Topic	Content	Competency	Integration
1.	Management of	External ear pathology	EN 4.1 , EN 4.2	Integration
1.	diseases of Ear,	External ear pathology	Lin 4.1 , Lin 4.2	-
	nose and throat			
2.		Canava atitis madis	EN 4.5	
۷.	Management of	Serous otitis media	EN 4.5	-
	diseases of Ear,			
-	nose and throat			
3.	Management of	Acute otitis media with	EN 4.3	PE 28.4
	diseases of Ear,	complication		
	nose and throat			
4.	Management of	Chronic otitis media mucosal and	EN 4.6 EN 4.7, EN	
	diseases of Ear,	squamosal	4.8	
	nose and throat			
5.	Management of	Squamosal chronic otitis media	EN 4.8	
	diseases of Ear,	Complication of otitis media		
	nose and throat	intracranial and extra cranial		
6.	Management of	Otosclerosis	EN 4.13	
	diseases of Ear,	0.000.01010	21,	
	nose and throat			
7.	Management of	Inner ear (meiniers disease,	EN 4.20, EN 4.19,	
, ·	diseases of Ear,	vestibular schwannoma, BPPV)	EN 4.21	
	nose and throat	vestibulai seliwalilolila, Bi i v)	1211 4.21	
8.		Doof and mute shild evaluation	EN 4.12	DV10.15
٥.	Management of	Deaf and mute child evaluation	EIN 4.12	PY10.15,
	diseases of Ear,	and cochlear implant		PY10.16
0	nose and throat		FDV 4.10	
9.	Management of	Facial nerve	EN 4.18	
	diseases of Ear,			
	nose and throat			
10.	Management of	Deviated nasal septum	EN 4.23, 4.24	
	diseases of Ear,			
	nose and throat			
11.	Management of	Allergic rhinitis (specific and non	EN 4.27, EN 4.28	
	diseases of Ear,	specific rhinitis )		
	nose and throat			
12.	Management of	Acute rhinosinusitis with	EN 4.29, EN 4.33	
	diseases of Ear,	complication		
	nose and throat			
13.	Management of	Chronic rhinosinusitis with and	EN 4.25	
	diseases of Ear,	without polys / antrochoanal		
	nose and throat	polyp		
14.	Management of	Benign lesion of nose and	EN 4.32	
1 6.	diseases of Ear,	paranasal sinuses (JNA)	LI ( T.J2	
	nose and throat	paranasai sinuses (JIVA)		
15.		Molignant logion of rose and	ENI 4 24 ENI 4 25	
13.	Management of	Malignant legion of nose and	EN 4.34 . EN 4.35	
	diseases of Ear,	paranasal sinuses /		
1.0	nose and throat	Nasopharyngeal tumors	FDV 4.04	
16.	Management of	Facial trauma and facial plastic 55	EN 4.31	

	diseases of Ear, nose and throat	surgery in ENT		
17.	Management of diseases of Ear, nose and throat	Acute and chronic tonsillitis with adenoid	EN 4.39, EN 4.26	PE 28.2, PE 28.3
18.	Management of diseases of Ear, nose and throat	Complications of various abscesses – neck space abscesses (Ludwigs)	EN 4.37, EN 4.41	
19.	Management of diseases of Ear, nose and throat	Acute and chronic laryngitis	EN 4.43	PE 28.6
20.	Management of diseases of Ear, nose and throat	Benign lesions of larynx (hoarseness and laryngeal paralysis)	EN 4.44, EN 4.42, EN 4.45	
21.	Management of diseases of Ear, nose and throat	Malignancy of larynx laryngopharynx	EN 4.46	
22.	Management of diseases of Ear, nose and throat	Malignancy of laryngopharynx	EN 4.46	
23.	Management of diseases of Ear, nose and throat	Dysphagia and Cao esophagus	EN 4.38	
24.	Management of diseases of Ear, nose and throat	Foreign body in airway and food passage	EN 4.49	PE 28.8
		BLOCK II		
25.	Management of diseases of Ear, nose and throat	Stridor (Peadiatric stridor and epiglottitis	EN 4.47	PE 28.5, PE 28.6, PE 28.7, PE 28.9

#### Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI Semester and VII Semester

# **DEPARTMENT OF OTORHINOLARYNGOLOGY Small group teaching Schedule: Duration: 2 hrs/SGT**

Sr. No.	Topic	Content	Competency No.	SGT Method*
1.	Anatomy and physiology of ear , nose , throat and head and neck	Anatomy of ear	EN1.1	Group discussion
2.	Anatomy and physiology of ear , nose , throat and head and neck	Physiology of hearing and balance	EN1.1	Tutorial
3.	Anatomy and physiology of ear , nose , throat and head and neck	Anatomy of nose	EN1.1	Seminar
4.	Clinical skills	Premalignant condition in ENT	EN 2.11	Tutorial
5.	Clinical skills/ Management of diseases of Ear, nose and throat	National program for prevention of cancer, deafness, noise and environmental pollution including noise induced hearing loss	EN 2.15, EN 4.15	Seminar
6.	Clinical skills/ Management of diseases of Ear, nose and throat	ENT emergencies (kerosene ingestion, sudden SNHL, Epistaxis, Stridor, Air way emergency tracheostomy	EN 2.13, P 14.2 ,EN 4.14, EN 4.47, EN4.30, EN 4.48, EN 4.50, EN3.6	Tutorial
7.	Anatomy and physiology of ear , nose , throat and head and neck	Anatomy & physiology of pharynx , anatomy and clinical significance of pyriform fossa	EN 1.1, AN 36.3	Group Discussion
8.	Anatomy and physiology of ear , nose , throat and head and neck	Anatomy and physiology of larynx	EN 1.1	Seminar
9.	Management of diseases of Ear , nose and throat	Otalgia	EN 4.1	Tutorial
10.	Management of diseases of Ear , nose and throat	Indication and steps of myringoplasty and myringotomy	EN 4.10 AN 40.4 EN 3.5	Demonstration
11.	Management of diseases of Ear , nose and throat	Indication and steps of mastoidectomy	EN 4.11 EN3.5	Demonstration
		BLOCK II		
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12.	Management of diseases of Ear , nose and throat	Facial nerve palsy	EN 4.18	Tutorial
13.	Management of diseases of Ear , nose and throat	Tinnitus Clinical features investigation and management	EN 4.21	Tutorial
14.	Management of diseases of Ear , nose and throat	Vasomotor rhinitis	EN4.28	Tutorial
15.	Management of diseases of Ear , nose and throat	Tumors of nasopharynx	EN 4.35	Tutorial
16.	Management of diseases of Ear , nose and throat	Salivary gland diseases	EN4.36	Tutorial
17.	Management of diseases of Ear , nose and throat	Presbycusis	EN 4.12	Group discussion
	Management of diseases of Ear, nose and throat	HIV manifestation of ENT	EN 4.53	Seminar

<sup>\*</sup>SGT Method-Group discussion/ Tutorial/seminar/DOAP/Practical/ skills lab

Batches for small group: 30 students per batch:

Batch	Roll No.s
A	1-30
В	31-60
С	61-90
D	91-120
Е	121-150

# Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI Semester and VII Semester DEPARTMENT OF OTORHINOLARYNGOLOGY

**Clinical Posting Schedule:** 

Block I: 2WKS, Block II: 2WKS

Days Alloted for the posting	Topics to be covered	Competenc y number for each topic	Hours required to cover one topic	Teaching, learning method:Bedside clinic/skills lab/Clinical clerkship
DAY-1	Throat case – signs and symptoms, investigation and management	EN 2.1, EN 2.2, EN 2.6 , EN2.7	3 hours	OPD station clinic (Beside clinic)
DAY-2	Nose case -signs and symptoms ,investigation and management	EN 2.1, EN 2.2, EN 2.5, EN.3.2	3 hours	OPD station clinic (Beside clinic)
DAY-3	Ear case - signs and symptoms ,investigation and management	EN2.1, EN2.2, EN2.3, EN2.4	3 hours	OPD station clinic (Beside clinic)
DAY-4	Head and Neck case - signs and symptoms, investigation and management	EN2.7, EN 2.11, EN 2.12	3 hours	OPD station clinic (Beside clinic)
DAY-5	Pure tone audiometry, Specimens	EN2.8, EN 4.16 ,EN 4.17	3 hours	OPD station clinic (Beside clinic)
DAY-6	Sunday		3 hours	
DAY-7	Nose case -signs and symptoms ,investigation and management	EN 2.1, EN 2.2, EN 2.5, EN.3.2	3 hours	OPD station clinic (Beside clinic)
DAY-8	Otoscopy	EN 2.3	3 hours	Skill Lab
DAY-9	Xray, OT Instruments	EN2.10, EN2.9	3 hours	OPD station clinic (Beside clinic)
DAY-10	Throat case – signs and symptoms, investigation and management	EN 2.1, EN 2.2, EN 2.6 , EN2.7	3 hours	OPD station clinic (Beside clinic)
DAY-11	Ear case - signs and symptoms ,investigation and management	EN2.1, EN2.2, EN2.3, EN2.4	3 hours	OPD station clinic (Beside clinic)
DAY-12	Anterior nasal packing	EN2.13	3 hours	Skill lab
DAY-13	Sunday		3 hours	
DAY-14	Exam  Block II plan	n for 14 days	3 hours	
DAY-1	Throat case – signs and symptoms, investigation and management with surgical videos	EN 2.1, EN 2.2, EN 2.6 , EN2.7 EN3.4,EN3. 5, EN4.39, EN4.42, EN 4.48 EN 4. <b>59</b> EN	3 hours	OPD station clinic (Beside clinic)

		4.49 EN		
		4.50 EN		
		4.50		
DAY-2	Nose case -signs and symptoms	EN 2.1, EN	3 hours	OPD station clinic
	,investigation and management with surgical videos	2.2 , EN 2.5,		(Beside clinic)
	with surgical videos	EN.3.2EN3.		
		2,EN3.4,		
		EN3.5, EN		
		4.25 TO EN		
		4.30,EN 4.33		
DAY-3	Ear case - signs and symptoms ,investigation and management	EN2.1, EN2.2,	3 hours	OPD station clinic (Beside clinic)
	with surgical videos	EN2.2, EN2.3,		(Deside cliffic)
	with surgicul videos	EN2.4		
		EN3.1,EN3.		
		4,EN3.5,EN		
		4.1 To 4.8,		
		EN 4.10 TO EN 4.12		
DAY-4	Head and Neck case - signs and	EN 4.12 EN2.7, EN	3 hours	OPD station clinic
DITI-4	symptoms ,investigation and	2.11, EN	Jilouis	(Beside clinic)
	management with surgical videos	2.12EN3.3,		(= 13.3.1 1)
		EN3.5, EN		
		4.38		
DAY-5	Pure tone audiometry, Specimens	EN2.8, EN	3 hours	OPD station clinic
		4.16 ,EN 4.17		(Beside clinic)
DAY-6	Sunday	4.17		
DAY-7	Nose case -signs and symptoms	EN 2.1, EN	3 hours	OPD station clinic
	,investigation and management	2.2 , EN		(Beside clinic)
	with surgical videos	2.5,		
		EN.3.2EN3.		
		2,EN3.4, EN3.5, EN		
		4.25 TO EN		
		4.30,EN		
		4.33		
DAY-8	Head and Neck case - signs and	EN2.7, EN	3 hours	OPD station clinic
	symptoms, investigation and	2.11, EN		(Beside clinic)
	management with surgical videos	2.12EN3.3, EN3.5, EN		
		4.38		
DAY-9	Xray, OT Instruments	EN2.10, EN2.9	3 hours	OPD station clinic (Beside clinic)
DAY-10	Throat case – signs and symptoms,	EN 2.1, EN	3 hours	OPD station clinic
	investigation and management with	2.2, EN 2.6		(Beside clinic)
	surgical videos	, EN2.7		
		EN3.4,EN3.		
		5, EN4.39,		
		EN4.42 , EN 4.48 EN		
		4.49 EN		
		4.49 EN		
		4.50 EN		
		4.50		
DAY-11	Ear case - signs and symptoms	EN2.1,	3 hours	OPD station clinic
	,investigation and management	EN2.2,		(Beside clinic)
	with surgical videos	EN2.3,		
		EN2.4		
		E <b>አ</b> ን1,EN3.		

		4,EN3.5,EN 4.1 To 4.8, EN 4.10 TO EN 4.12		
DAY-12	Revision		3 hours	OPD station clinic (Beside clinic)
DAY-13	Sunday			
DAY-14	Exam		3 hours	

#### **Instructions:**

To discuss relevant investigation of that particular case during clinic.

Cases

Ear: COM (Mucosal, squamosal, with/without complication), AOM, Otosclerosis,

Peripheral vertigo, Ototoxicity, DDSL

**Nose:** DNS ,Nasal polyposis ,Epistaxis

**Throat:** Acute tonsillitis ,Membranous tonsillitis ,Chronic tonsillitis ,Deep neck space abscesses Vocal nodule /

palsy/ polyp

**Head and Neck:** Ca maxilla ,Ca larynx ,Thyroid ,Neck masses

**Surgical videos** 

Ear: Tympanoplasty, cortical mastoidectomy, canal wall down mastoidectomy, myringotomy,

stapedotomy

Nose: Septoplasty, fuctional endoscopic sinus surgery, DCR

**Throat:** tonsillectomy and TAR

**Head and neck:** ML scopy, DL scopy, thyroid, parotid, laryngectomy

#### VI Semester and VII Semester DEPARTMENT OF OPTHALMOLOGY Lectures Schedule

Lecture				
no.	Topic	Conte	ent Competency	Integration
1	Anatomy of the eye and embryology	a) Anatomy of the b) Draw diagram of section of eye be accurately its verification of the accurate and their full ball and their full ball and their full ball and their full ball and the eye Embryology of	of the cross coall and label arious parts. us parts of eye unctions ervous supply to	Anatomy
2	Physiology of vision  Vision  Color vision  Binocular single vision	<ul> <li>a) Name the types</li> <li>b) Enumerate the</li> <li>c) Enumerate the pigments</li> <li>d) Describe the blee</li> <li>e) Name the theovision</li> </ul>	s of vision tests for vision types of visual eaching cascade ries of color for color vision Binocular Single	Physiology
3	Refractive errors – I      Emmetropia     Myopia     Hypermetropi     a	<ul> <li>Define emmetre</li> <li>Describe the operation of the operation o</li></ul>	opia opia opia optics of the e gram of myopia a ures of yopia atment modalities netropia gram of umetropia eatment	
4	Refractive errors – II  Astigmatism Presbyopia Aphakia/pseudoph akia Retinoscopy	<ul> <li>Define astigma</li> <li>Mention the cla astigmatism</li> <li>Draw a ray diag astigmatism</li> <li>Draw and expla conoid</li> <li>Discuss the ma astigmatism</li> <li>Define presbyo</li> </ul>	or titism assification of  gram of types of ain the Sturm's nagement of opia atment modalities a ocular signs of 3 modes of	

	•	advantages and disadvantages of each mode of aphakic correction Define anisometropia and aniseikonia		
> > >	etiva – I Anatomy and functions Classification of conjunctivitis Bacterial conjunctivitis Viral conjunctivitis	Enumerate the 5 parts of conjunctiva Enumerate functions of conjunctiva Enumerate the differences between conjunctival and ciliary congestion Classify conjunctivitis Enumerate 3 signs of each type of conjunctivitis. Mention the etiology and clinical features of bacterial conjunctivitis Describe the symptoms and signs of bacterial conjunctivitis Discuss the treatment of bacterial conjunctivitis Mention the etiopathogenesis and management of Ophthalmia Neonatorum Discuss clinical features and management of viral conjunctivitis		
6 Conjunc	rtiva – II Trachoma Allergic conjunctivitis Degeneration s of conjunctiva  •	Describe the clinical features, classification, complications, management and prophylaxis of trachoma Enumerate the types of allergic conjunctivitis. Discuss symptoms and signs of allergic conjunctivitis Classify groups of drug used in allergic conjunctivitis with their mechanism of action in detail Define Pterygium. discuss the etiopathogenesis, clinical features and management of Pterygium Discuss etiology, clinical features and management of conjunctival xerosis	OP 3.4, 3.5, 3.6	
7 Cornea	Anatomy Of Cornea Transparency Of Cornea Methods of examination of cornea Precorneal tear film and dry eye	Draw diagram of cross section of cornea and label its layers. Enumerate reasons for corneal transparency. Function of cornea Describe various methods of assessment of cornea Precorneal Tear film Etiology, clinical features of dry eye Various tests for dry eye Management of dry eye	OP 4.3,4.4	
8 Cornea	•	Write definition of corneal ulcer and stages. Enumerate symptoms and signs of corneal ulcer Write groups of drugs in management of bacterial corneal ulcer. Enumerate specific features of fungal corneal ulcer. 63	OP 4.1, 4.2	

	Enumerate fungi causing fungal  Wastitian		
	<ul><li>Keratitis</li><li>Mention classes of antifungal</li></ul>		
	drugs		
	Causes of non healing corneal ulcer		
	Complications of corneal ulcer		
9	Describe specific signs of viral	OP 4.1, 4.2	
	<ul><li>Keratitis.</li><li>Write etiology, clinical features</li></ul>		
	and management of H.simplex		
Cornea – III	keratitis.		
Viral keratitis	• Write etiology, clinical features and management of H.zoster		
<ul><li>Keratoconus</li><li>Non infective</li></ul>	Ophthalmicus.		
keratitis	Name topical antiviral agents.  Write stiple are clinical features.		
> Corneal	<ul> <li>Write etiology, clinical features and management of keratoconus</li> </ul>		
dystrophies and	• Exposure Keratitis, interstitial		
degenerations	keratitis, neuroparalytic Keratitis		
	Discuss differences between		
	dystrophy and degeneration.		
	<ul> <li>Enumerate five corneal dystrophies.</li> </ul>		
10 Cornea – IV	Definition of keratoplasty	OP 4.6,4.9	
<ul><li>Keratoplasty</li><li>Eye banking</li></ul>	<ul><li>Types of keratoplasty</li><li>Surgical steps and</li></ul>		
>	complications of keratoplasty		
	• Eye donation –indications,		
	contraindications, procedure of cornea harvesting and methods		
	of preservation of corneal		
	tissue,  • Eye banking –organization and		
	functions of eye bank		
11 Uvea – I ➤ Anatomy of the	<ul><li>Enumerate parts of the Uvea.</li><li>Discuss functions of each part.</li></ul>	OP 6.1,6.2,6.3,6.6,6.8	
Uvea	<ul><li>Discuss functions of each part.</li><li>Describe the methods of</li></ul>		
Classification of uveitis	classification of uveitis with		
> Anterior uveitis	<ul><li>their subtypes.</li><li>Discuss the causes of uveitis.</li></ul>		
	• Enumerate symptoms of acute		
	<ul><li>anterior uveitis.</li><li>Describe signs of acute anterior</li></ul>		
	uveitis .		
	• Classify the two groups of drugs		
	used for treatment of acute anterior uveitis. Discuss their		
	mechanism of action.		
	<ul> <li>Discuss the complications of acute anterior uveitis</li> </ul>		
12 Uvea – II	Enumerate symptoms and signs	OP 6.2, 6.3	
➤ Intermediate uveitis	of intermediate uveitis		
> Chorioretiniti	<ul> <li>Enumerate etiology, clinical features and management of</li> </ul>		
s Endophthalmi	chorioretinitis		
tis	<ul> <li>Define Endophthalmitis/ Panophthalmitis</li> </ul>		
> Panophthalmi	• Enumerate etiological causes of		
tis > Sympathetic	<ul><li>endophthalmitis.</li><li>Discuss signs and symptoms of</li></ul>		
ophthalmitis	endophthalmitis.		
	Enumerate treatment modalities  Differentiate between abblidies		
	Differentiate between phthisis bulbi and atrophic bulbi  64		
<u> </u>	64		

Lens & Cataract - I  Anatomy of lens  classification of cataract  congenital cataract  stages of cataract  clinical features of cataract  preoperative evaluation of a case of cataract	<ul> <li>Define Panophthalmitis. Write its etiology clinical features and management.</li> <li>Draw a diagram of cross section of the crystalline lens and label its parts.</li> <li>Describe the functions of the lens and cataractogenesis</li> <li>Mention the etiological classification of cataract.</li> <li>Mention the anatomical classification of cataract.</li> <li>Write etiology, clinical features and management of congenital cataract</li> <li>Enumerate stages of cortical cataract.</li> <li>Enumerate grades of nuclear sclerosis.</li> <li>Discuss symptoms of senile cataract</li> </ul>	OP 7.1,7.2
Lens and cataract II  Cataract surgeries  Post op management  Complication s of cataract surgeries IOLs		OP 7.3, 7.4
Glaucoma – I  Angle of anterior chamber  IOP regulation  Pathophysiolo gy of glaucomatous changes  Investigations in a case of glaucoma  Classification of glaucoma	<ul> <li>Draw a labeled diagram of angle of AC.</li> <li>Discuss methods of secretion of aqueous humour.</li> <li>Discuss the circulation and drainage of Aq. Humour.</li> <li>Discuss factors affecting IOP</li> <li>Define glaucoma.</li> <li>Describe the classification of glaucoma and its subtypes</li> </ul>	OP 6.5, 6.6,6.7
Glaucoma – II  Congenital glaucoma, Angle closure glaucoma  17 Glaucoma – III	<ul> <li>Define Buphthalmos. write differential diagnosis of cloudy cornea.</li> <li>Enumerate signs of Buphthalmos.</li> <li>Enumerate surgical procedures for treatment of congenital glaucoma</li> <li>Mention the D/D of acute red eye</li> <li>Define PACG.</li> <li>Describe stages of ACG.</li> <li>Describe management Primary angle closure glaucoma</li> <li>Define ocular hypertension and</li> </ul>	OP 6.5, 6.7
> Open angle glaucoma, > Secondary Glaucomas	<ul> <li>Define octular hypertension and POAG</li> <li>Describe the disc changes in POAG</li> <li>Describe the visual field changes in POAG</li> </ul>	01 0.7

Retina - I  Anatomy of the Retina & functions  Rhodopsin cycle  Methods of examination of retina,  Diabetic Retinopathy	<ul> <li>Describe management Primary open angle glaucoma</li> <li>Enumerate major causes of secondary glaucoma.</li> <li>Aetiopathogenesis of secondary glaucoma</li> <li>Draw and label correctly a diagram of the gross anatomy of retina. Describe the zones of the retina</li> <li>Draw and label correctly a cross section of retina</li> <li>Mention the vascular supply and drainage of the retina</li> <li>What are the methods of examination of retina</li> <li>Discuss the aetiopathogenesis of Diabetic Retinopathy.</li> <li>Discuss the stages of DR.</li> </ul>
19 Retina - II  Hypertensive retinopathy	<ul> <li>Discuss modalities of laser therapy for treatment of DR</li> <li>Discuss the grades of the hypertensive retinopathy</li> <li>OP 8.1, 8.2,8.4</li> </ul>
retinopathy  CRAO,  CRVO,  Retinal  Detachment,  Retinitis  pigmentosa	<ul> <li>Mention the fundus findings in Retinitis pigmentosa</li> <li>Mention the etiology of vascular occlusive diseases of retina</li> <li>Enumerate diagnostic Signs of CRAO.</li> <li>Enumerate diagnostic Signs of CRVO</li> <li>Definition of RD.</li> <li>Classify types of RD and its subtypes.</li> <li>Mention predisposing factors for RD</li> <li>Describe mechanisms of RD</li> <li>Discuss symptoms and 3 signs of RD.</li> <li>Enumerate Modalities of treatment for RD.</li> </ul>
Optic Nerve     Papilloedema     Papillitis     Optic atrophy	<ul> <li>Describe parts of Optic nerve</li> <li>Describe the anatomy of the optic nerve head</li> <li>Definition of Papilloedema</li> <li>Enumerate causes of Papilloedema</li> <li>Describe Signs of Papilloedema on fundus Examination</li> <li>Define Optic Neuritis.</li> <li>Classify optic neuritis</li> <li>Write symptoms and 2 diagnostic signs of Optic Neuritis.</li> <li>Describe types of Optic Atrophy with diagnostic signs of each</li> </ul>
Neuro- ophthalmology Visual pathway Pupillary pathway	<ul> <li>Draw a well labeled diagram of the visual pathway</li> <li>Describe basic visual field</li> <li>Describe the basic types of visual field defects</li> </ul>

22	Lid I anatomy of the lid Ptosis  Entropion cetropion, lagophthalmo s, Lid infections	<ul> <li>a) Draw well labeled diagrams of the pupillary pathways</li> <li>b) Name 2 afferent and 3 efferent pupillary defects</li> <li>c) Causes of mydriasis, miosis and RAPD</li> <li>Define and classify ptosis</li> <li>Name surgical procedures for ptosis correction</li> <li>Define entropion/ ectropion.</li> <li>Enumerate types of entropion/ ectropion.</li> <li>Describe clinical signs and treatment of lagophthalmos</li> <li>Stye ,Chalazion Hordeolum</li> </ul>	
	Lacrimal apparatus Acute Dacryocystitis-  Chronic dacryocystitis  Congenital NLD obstruction	Internum      Enumerate types of     Dacryocystitis.     Describe signs of acute and chronic Dacryocystitis     Mention surgical procedures for chronic Dacryocystitis.     Enumerate surgical steps of DCT and DCR.     Describe etiopathogenesis and management of congenital nasolacrimal duct obstruction	
	Lecture Orbit - I  Anatomy,  Spaces of orbit,  Proptosis	<ul> <li>Enumerate the spaces of the orbit</li> <li>Draw and label a diagram of the apex of the orbit</li> <li>Enumerate the contents of the orbit</li> <li>Enumerate types of orbital cellulitis.</li> <li>Describe diagnostic signs of orbital cellulitis</li> </ul>	Anatomy
	Lecture Orbit - II ,      Orbital     cellulitis,      Cavernous     sinus     thrombosis      Thyroid     orbitopathy	<ul> <li>Draw and correctly label a diagram of the cavernous sinus with its tributaries.</li> <li>Discuss diagnostic signs of cavernous sinuses thrombosis</li> <li>Mention common causes of proptosis in adults</li> <li>Mention common causes of proptosis in children</li> <li>Discuss investigation of proptosis</li> <li>Classify thyroid orbitopathy</li> <li>Mention management of proptosis</li> </ul>	
26	Ocular Injuries  Ocular injuries- Classification  Chemical injuries  Blunt injuries - Anterior segment  Blunt injuries - Posterior segment	<ul> <li>Classify ocular injuries.</li> <li>Mention miscellaneous causes of ocular injuries</li> <li>Describe mechanism of blunt injuries of the globe</li> <li>Mention two types of chemical injuries</li> <li>Discuss emergency treatment of chemical ocular injuries</li> <li>Enumerate blunt injuries of the anterior segment</li> <li>Mention the emergency treatment of contusion injuries</li> </ul>	

27 Lecture Squint - I  > Extra-ocular muscles- anatomy  > Actions and nerve supply  > Binocular vision  > monocular and binocular ocular movements  > Classificatio n of squint  > Paralytic squint	<ul> <li>Describe traumatic Hyphaema and its management</li> <li>Enumerate the posterior segment injuries of the globe</li> <li>Describe the origin and insertion of 6 extra ocular muscles</li> <li>Mention the actions of EOMs</li> <li>Mention the nervous control of EOMs</li> <li>Mention grades of binocular single vision</li> <li>Define squints</li> <li>Classify squints</li> <li>Enumerate sensory and motor adaptations to squint</li> <li>Definition of phoria and tropia</li> <li>Discuss signs of paralytic squint</li> <li>Discuss etiological factors of paralytic squint.</li> </ul>	AN 41.3 OP 9.1	Anatomy
Lecture Squint - II  Concomitant squint  Assessment of squint  Amblyopia- causes assessment and reference  Management of squint  29 Intraocular Tumors  Retinoblasto ma  Malignant melanoma  Enucleation, Evisceration  Exenteration	<ul> <li>Describe the diagnostic signs of concomitant squint.</li> <li>Differences between concomitant squint and paralytic squint.</li> <li>Describe tests for detection of phorias.</li> <li>Assessment of squint</li> <li>Management of squint</li> <li>Classify amblyopia</li> <li>Mention test for amblyopia</li> <li>Enumerate treatment modalities of amblyopia</li> <li>Write clinical features and management of retinoblastoma</li> <li>Write differential diagnosis of leucocoria</li> <li>Write clinical features and management of malignant melanoma</li> <li>Define Enucleation, evisceration and exenteration. write indications and contraindications of each of them</li> </ul>	OP 2.7 PA 36.1	
Ocular Therapeutics  Ocular drug delivery systems  Mydriatics and cycloplegics  NSAIDs  Steroids and immune suppressive agents  Artificial tear substitutes  Antiglaucoma drugs Miscellaneo us	<ul> <li>Write pharmacological action, indications and contraindications of each of the following drugs</li> <li>Atropine sulphate 1%</li> <li>Steroids</li> <li>Tear substitutes</li> <li>Timolol maleate eye drops</li> <li>pilocarpine</li> <li>Acetazolamide</li> </ul>	PH 1.58	Pharmacology

Community Ophthalmology  Blindness- definition causes and prevention  NPCB and DBCS  Ophthalmic camps  Vitamin A deficiency & Keratomalaci a,  Basics of Eye donation &Keratoplast y,  Trachoma control programme  >
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#### VI Semester and VII Semester DEPARTMENT OF OPHTHALMOLOGY

Small group teaching Schedule: \_\_\_\_

Sr. No.	Topic	Content	Competency No.	SGT Method*
1	Tutorial- Anatomy of the eye and embryology		AN 41.1	Tutorial
2	Tutorial- Physiology of vision	PY 10.17 OP 1.1		Tutorial
3	Refractive errors – I	<ul> <li>Emmetropia</li> <li>Myopia</li> <li>Hypermetropia</li> </ul> OP 1.2 OP1.4 Tu		Tutorial
4	Refractive errors – II	<ul><li>Astigmatism</li><li>Presbyopia</li></ul>	OP 1.2 OP1.4	Tutorial
5	Refractive Error	Aphakia/pseudophakia Retinoscopy	OP 1.2 OP1.4	Tutorial
6	Conjunctiva – I	<ul> <li>Anatomy and functions</li> <li>Classification of conjunctivitis</li> <li>Bacterial conjunctivitis</li> <li>Viral conjunctivitis</li> </ul>	OP3.4,3.5,3.6	Tutorial
7	Conjunctiva – II	<ul> <li>Trachoma</li> <li>Allergic conjunctivitis</li> <li>Degenerations of conjunctiva</li> </ul>	OP3.4,3.5,3.6	Tutorial
8	Cornea I	<ul> <li>Anatomy Of Cornea</li> <li>Transparency Of Cornea</li> <li>Methods of examination of cornea</li> <li>Precorneal tear film and dry eye</li> </ul>	OP 4.3,4.4	Tutorial
9	Cornea II	<ul> <li>Viral keratitis</li> <li>Keratoconus</li> <li>Non infective keratitis</li> <li>Corneal dystrophies and degenerations</li> </ul>	OP 4.1,4.2	Tutorial
10	Cornea	<b>J</b> 1	OP 4.3,4.4	Tutorial
11	Cornea		OP 4.1,4.2	Tutorial
12	Cornea III	<ul> <li>Viral keratitis</li> <li>Keratoconus</li> <li>Non infective keratitis</li> <li>Corneal dystrophies and degenerations</li> </ul>	OP 4.1,4.2	Tutorial
13	Cornea IV	Keratoplasty     Eye banking	OP 4.1,4.2	Tutorial
14	Uvea	<ul> <li>Anatomy of the Uvea</li> <li>Classification of uveitis</li> <li>Anterior uveitis</li> </ul>	OP 6.1,6.2,6.3,6.6,6.8	Tutorial
15	Uvea – I	II  Intermediate uveitis  Chorioretinitis  Endophthalmitis  Panophthalmitis	OP 6.1,6.2,6.3,6.6,6.8	Tutorial

		Sympathetic ophthalmitis		
16	Uvea – II		OP 6.2,6.3	Tutorial
17	Lens & Cataract - I	<ul> <li>Anatomy of lens</li> <li>classification of cataract</li> <li>congenital cataract</li> <li>stages of cataract</li> <li>clinical features of cataract</li> <li>preoperative evaluation of a case of cataract</li> </ul>	OP 7.1,7.2	Tutorial
18	Lens & Cataract - II	Cataract surgeries     Post op management     Complications of cataract surgeries     IOLs	OP 7.3,7.4	Tutorial
19	Glaucoma – I	<ul> <li>Angle of anterior chamber</li> <li>IOP regulation</li> <li>Pathophysiology of glaucomatous changes</li> <li>Investigations in a case of glaucoma</li> <li>Classification of glaucoma</li> </ul>	OP 6.5,6.6,6.7	Tutorial
20	Glaucoma – II	Congenital glaucoma , Angle closure glaucoma	OP 6.5,6.7	Tutorial
21	Glaucoma – III	<ul> <li>Open angle glaucoma,</li> <li>Secondary Glaucomas</li> </ul>	OP 6.7	Tutorial
22	Retina I	<ul> <li>Anatomy of the Retina &amp; functions</li> <li>Rhodopsin cycle</li> <li>Methods of examination of retina,</li> <li>Diabetic Retinopathy</li> </ul>	OP 8.2, 8.3, 8.4	Tutorial
23	Anatomy and Blood Supply of Retina	Anatomy and blood supply of retina	AN 41.1	Tutorial
24	Retina II	<ul> <li>Hypertensive retinopathy</li> <li>CRAO,</li> <li>CRVO,</li> <li>Retinal Detachment,</li> <li>Retinitis pigmentosa</li> </ul>	OP 8.1,8.2,8.4	Tutorial
24	Diabetic Retinopathy		OP 8.2,8.4	Tutorial
25	Optic Nerve	<ul><li>Papilloedema</li><li>Papillitis</li><li>Optic atrophy</li></ul>	OP 8.5	Tutorial
26	Neuro- ophthalmology Visual pathway Pupillary pathway	Neuro ophthalmology Visual pathway Pupillary pathway	OP 8.5, PY 10.17 PY 10.18	Tutorial
27	Lacrimal apparatus Acute Dacryocystitis	<ul><li>Chronic dacryocystitis</li><li>Congenital NLD obstruction</li></ul>	OP 2.1,2.3	Tutorial
28	Orbit – I	<ul><li>Anatomy,</li><li>Spaces of orbit,</li><li>Proptosis</li></ul>	OP 2.4	Tutorial
29	Orbit II	<ul> <li>Orbital cellulitis,</li> <li>Cavernous sinus thrombosis</li> <li>Thyroid orbitopathy</li> </ul>	OP.2.5,2.6	Tutorial
30	Ocular Injuries	Blunt trauma Penetrating trauma Chemical injuries	OP 9.5	Tutorial

31	Lid I anatomy of	anatomy of the lid Ptosis	OP 2.1,2.3	Tutorial
	the lid Ptosis	> Entropion		
	1 (03)3	> ectropion,		
		> lagophthalmos,		
	G : . I	Lid infections	A NI 41 2	T 1
32	Squint – I	<ul><li>Extra-ocular muscles- anatomy</li><li>Actions and nerve supply</li></ul>	AN 41.3 OP 9.1	Tutorial
		<ul><li>Binocular vision</li></ul>	01 7.1	
		monocular and binocular ocular		
		movements		
		Classification of squint		
		Paralytic squint		
33	Squint – II	Concomitant squint	OP 1.5,9.2	Tutorial
33	Squiit II	<ul><li>Assessment of squint</li></ul>	01 1.5,5.2	lutoriai
		Amblyopia- causes assessment		
		and reference		
		> Management of squint		
34	Intraocular Tumors	Retinoblastoma	OP 2.7	Tutorial
		<ul><li>Malignant melanoma</li><li>Enucleation,</li></ul>	PA 36.1	
		Evisceration		
		Exenteration		
35	Ocular Therapeutics	Ocular drug delivery systems	PH 1.58	Tutorial
		Mydriatics and cycloplegics		
		> NSAIDs		
		Steroids and immune suppressive agents		
		<ul><li>Artificial tear substitutes</li></ul>		
		<ul><li>Antiglaucoma drugs</li></ul>		
		Miscellaneous		
36	Community	➤ Blindness- definition causes and	OP 9.4	Tutorial
	Ophthalmology	prevention		
		<ul><li>NPCB and DBCS</li><li>Ophthalmic camps</li></ul>		
		<ul><li>Vitamin A deficiency</li></ul>		
		&Keratomalacia,		
		Basics of Eye donation		
		&Keratoplasty,		
		Trachoma control programme		

<sup>\*</sup>SGT Method-Group discussion/ **Tutorial**/seminar/DOAP/Practical/ skills lab

Batches for small group: 30 students per batch:

Batch	Roll Nos.
A	1-30
В	31-60
C	61-90
D	91-120
E	121-150

#### Bharati Vidyapeeth Deemed To Be University Medical College Pune MBBS-Phase III- Part I VI Semester and VII Semester

#### DEPARTMENT OF OPHTHALMOLOGY

Clinical Posting Schedule: \_\_\_\_

(Total weeks 2; 12 days x 3hours per day = \_36\_\_\_hours)

Day of posting	Topic/s	Competency	Hours	Teaching learning method: bedside clinic/ Skills lab/
1	History taking /symptomatology Examination of the eye	OP 2.1	3 Hrs.	bedside clinic/
2	Refractive errors  Visual acuity (with and without Pin hole) Retinoscopy Autorefractometer Stenopic slit Subjective correction Duochrome test Lenses Mydriatics and cycloplegics	OP 1.3,2.3	3 Hrs.	bedside clinic/
3	Conjunctiva  Infective and allergic conjunctivitis Pterygium Surgical videos and instruments	OP3.1,3.2	3 Hrs.	bedside clinic/
4	Case presentation – Corneal ulcer  • History taking and Examination of case and management • Complications of corneal ulcer • Antibiotics, antiviral and antifungal agents • cycloplegics	OP 4.1,4.2,4.7,4.8	3 Hrs.	bedside clinic/
5	Case presentation - iridocyclitis History taking and Examination and management Steroids and NSAIDS	OP 6.2,6.3,6.4	3 Hrs.	bedside clinic/
6	Case presentation -Cataract (examination of a cataract case)Pre-Operative preparation for Cataract surgery  • IOP	OP7.3,7.4,7.5,7.6	3 Hrs.	bedside clinic/

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	<ul> <li>Sac syringing</li> </ul>			
	<ul> <li>A scan Biometry</li> </ul>			
	<ul> <li>Lab investigations</li> </ul>			
	Preoperative preparation of			
	patient(consent, xylocaine			
	sensitivity test, dilatation of			
	pupil			
7	Surgical management of	OP7.4,7.5,7.6	3 Hrs.	bedside clinic/
	cataract (live demo -			
	operation theatre)			
	• IOLs			
	Surgical instruments for			
	cataract surgery			
	Case presentation -Post			
	operative management and			
	complications of cataract			
8	Case presentation -	OP7.4	3 Hrs.	bedside clinic/
	Pseudophakia/Aphakia			
	History taking and Examination			
	and management			
9	Case presentation -	OP6.6,6.7	3 Hrs.	bedside clinic/
	Glaucoma			
	History taking and Examination			
	and management se			
	• IOP			
	<ul> <li>Gonioscopy</li> </ul>			
	<ul> <li>Perimetry</li> </ul>			
	<ul> <li>Fundus photographs</li> </ul>			
	• OCT			
	Antiglaucoma drugs			
10	Case presentation -	OP2.1,2.3	3 Hrs.	bedside clinic/
	Dacryocystitis			
	History taking and Examination			
	and management e			
	<ul> <li>DCT and DCR</li> </ul>			
	<ul> <li>Surgical videos</li> </ul>			
	Surgical instruments			
11	Squint Examination	OP9.1,9.2,9.3	3 Hrs.	bedside clinic/
	Ocular movements			
	<ul> <li>Cover test</li> </ul>			
	<ul> <li>Prism bar cover test</li> </ul>			
	Worth four dot test			
	<ul> <li>Maddox rod test</li> </ul>			
	Diplopia charting			
	Synaptophore			
	Sjiiaptopiioie	1		

#### **VI Semester and VII Semester**

#### DEPARTMENT OF OPHTHALMOLOGY

**Clinical Posting Schedule:** \_\_\_\_

(Total weeks 2; 12 days x 3hours per day = 36\_\_\_hours)

Day of	Topic/s	Competency	Hours	Teaching learning
posting				method: bedside
				clinic/ Skills lab/
				Clinical clerkship
1	Cataract history taking &	OP 7.3	3 Hrs.	bedside clinic/
	examination of a cataract case)	OP7.5		
	Pre-Operative preparation for	OP7.6		
	Cataract surgery			
2	Surgical management of	OP7.4	3 Hrs.	bedside clinic/
	cataract(Videos - operation	OP7.5		
	theatre)			
	Post-operative management of			
	cataract			
3	Case presentation	OP 7.4	3 Hrs.	bedside clinic/
	History taking and Examination			
	and management of case			
	Pseudophakia/Aphakia			
4	Case presentation	OP 6.7	3 Hrs.	bedside clinic/
	History taking and Examination			
	and management of case of			
	GlaucomaInvestigation of a			
	case of Glaucoma			
5	Case presentation	OP 3.6	3 Hrs.	bedside clinic/
	History taking and Examination			
	and management of a case of			
	Pterygium			
6	Case presentation - History	OP2.3	3 Hrs.	bedside clinic/
	taking, Examination and			
	management of a case of			
	Dacryocystitis			
7	Case presentation	OP 4.7	3 Hrs.	bedside clinic/
	History taking and Examination			
	of a case of Corneal ulcer			
	and management History			
	taking and Examination			
8		OP 9.1	3 Hrs.	bedside clinic/
	Squint Examination	OP9.2		
	1	OP9.3		
		OD7.5	2 11	1. 1. 1. 1. 1
9	Surgical instruments	OP7.5	3 Hrs.	bedside clinic/
	2 515144 III SI GIII SIII			
10	Oution		3 Hrs.	bedside clinic/
	Optics			
	Retinoscopy and refraction			
11			4 Hrs.	
1 1	Posting anding Assessment		1 1110.	
	Posting ending Assessment			
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# Bharati Vidyapeeth Deemed To Be University Medical College Pune III MBBS: Part I

#### VI and VII Semester

#### DEPARTMENT OF PSYCHITRY

#### **Clinical Posting Schedule:**

(Total weeks 2; 12 days x 3hours per day = 36hours)

Day of posting	Topic/s	Competency	Hours	Teaching learning method: bedside clinic/ Skills lab/ Clinical clerkship
1.	Revision on Clinical assessment- History taking and mental status examination	PS 3.3- Elicit, present and document history in patients with mental disorder PS 3.5- Ennumerate, demonstrate mental status examination	3	Clinical clerkship
2.	Case discussion- Organic Psychiatric disorder	PS 3.7- Elicit clinical features of a patient with organic Psychiatric disorder PS 3.9- Describe the steps and demonstrate in a simulated environment family education in patients with organic Psychiatric disorders	3	Clinic
3.	Clinical case discussion- Schizophrenia	PS 5.2- Enumerate, elicit, describe and document symptoms of Schizophrenia  PS 5.4- Demonstrate family education in patients of Schizophrenia		Clinic
4.	Clinical case discussion- Bipolar disorder	PS 7.2- Enumerate, elicit, describe and document clinical features of patient of bipolar disorders 76	3	Clinic

5.	Clinical case discussion- Depression	PS 7.5- Demonstrate family education in a patient of bipolar disorder in a simulated environment PS 6.1- Enumerate, elicit, describe and document clinical features of patient of depression PS 6.5-		Clinic
		Demonstrate family education in a patient of		
		depression in a simulated		
		environment		
6.	End of posting assessment		3	

# Bharati Vidyapeeth Deemed To Be University Medical College Pune DEPARTMENT OF DERMATOLOGY III MBBS: Part I

#### VI and VII Semester

**Clinical Posting Schedule:** 

(Total weeks 2; 12 days x 3hours per day = 36hours)

Day of posting	Topic/s	Competency	Hours	Teaching learning method: Bedside clinic/ Skills lab/ Clinical clerkship
1	Identify and grade the various common types of acne	DR1.2	6	Bedside clinic
	Identify and differentiate vitiligo from other causes of hypopigmented lesions	DR2.1		
2	Identify and distinguish psoriatic lesions from other causes	DR3.1	3	Bedside clinic
	Demonstrate the grattage test	DR3.2		
3	Identify and distinguish lichen planus lesions from other causes	DR4.1	6	Bedside clinic
	Identify and differentiate scabies from other lesions in adults and children	DR5.2		
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	Identify and differentiate pediculosis	DR6.2		
	from other skin lesions in adults and			
	children			
4	Demonstrate (and classify based on)	DD0 2		D 1 1 1 1 1
4	Demonstrate (and classify based on) the clinical features of leprosy	DR9.2	3	Bedside clinic
	± *			
	including an appropriate neurologic examination			
	examination			
5	Identify and classify syphilis based on	DR10.1	3	Bedside clinic
	the presentation and clinical			
	manifestations			
	Identify and differentiate based on the			
	clinical features non-syphilitic sexually			
	transmitted diseases (chancroid,	DR10.7		
	donovanosis and LGV)			
6	Identify and distinguish the	DR11.2	3	Bedside clinic
O	dermatologic manifestations of HIV,	DR11.2	3	Deuside elline
	its complications, opportunistic			
	infections and adverse reactions			
7	Identify eczema and differentiate it	DR12.2	3	Bedside clinic
	from lichenification and changes of	2111212		Beaging offine
	aging			
	Define erythroderma. Enumerate and	DD10.5		
	identify the causes of erythroderma.	DR12.5		
	Discuss the treatment			
	Identify and distinguish exfoliative			
	dermatitis from other skin lesions			
	Identify and distinguish fixed drug	DR12.6		
	eruptions and Steven Johnson			
	syndrome from other skin lesions	DR12.7		
		DK12.7		
8	Distinguish bulla from vesicles	DR13.1	3	Bedside clinic
	Demonstrate the Tzanck test, nikolsky			
	sign and bulla spread sign	DR13.2		
	Calculate the body surface area of	DR13.3		
	involvement of Vesiculobullous lesions	DK13.3		
9	Identify and distinguish urticarial from	DR14.2	3	Bedside clinic
	other skin lesions			•
	Demonstrate dermographism			
	Identify and distinguish angioedema	DD14.2		
	from other skin lesions	DR14.3		
		DR14.4		
10	Identify and distinguish falliculities		2	Dadaida aliai-
10	Identify and distinguish folliculitis impetigo and carbuncle from other skin	DR15.1	2	Bedside clinic
	lesions			
	Identify staphylococcus on a gram stain			
	Identify and distinguish skin lesions of	DR15.2		
	SLE			
		DR16.1		
	Identify and distinguish Raynaud's			
	phenomenon 78			

#### DEPARTMENT OF RESPIRATORY MEDICINE

**Clinical Posting Schedule:** 

(Total weeks-2, 12 days x 3hours per day = 36hours)

Day of posting	Topic/s	Competency	Hours	Teaching learning method: bedside clinic/ Skills lab/ Clinical clerkship
1	History taking	CT 1.5, CT 1.8	6	Bedside clinic Clinical clerkship
2	Respiratory system examination	CT 1.6	3	Clinical skill
3	Asthma/COPD case presentation	CT 2.8, CT 2.9, CT 2.10, CT 2.21, CT 2.23, CT 2.24	3	Bedside clinic Clinical clerkship
4	ABG/ Pulse oximetry	CT 2.14	6	Bedside clinic Clinical clerkship
5	Spirometry PEFR	CT 2.11, CT 2.12	3	Clinical skill/clinical clerkship
6	Pulmonary TB case presentation	CT 1.5, CT 1.6, CT 1.9	3	Bedside clinic Clinical clerkship
7	Daily DOTS—DS/DR TB treatment	CT1.14, CT 1.15, CT 1.16, CT 1.17, CT 1.18	3	Clinical clerkship
8,9	Drugs- COPD/Asthma Devices- MDI/DPI/Spacer/nebulization	CT 2.16, CT 2.18, CT 2.19, CT 2.22, CT	3	Clinical skill/clinical clerkship
10,11	Chest CXR interpretation	CT 2.14	3	Clinical skill
12	End of Posting Examination		3	

#### Instructions:

Batch will be divided in groups of three and each group will be allotted three beds. Students are supposed to interact with patients on the allotted beds daily and discuss the clinical findings with teacher.

Students will apply their knowledge( whatever they have been taught during lecture) during clinical posting.

Students will enter the case record in his/her journal during clinical posting.

Note:-

For bedside teaching time allotted for

- 1. History taking-30 min
- 2. Clinical examination-30 min
- 3. Discussion 60 min
- 4. Interaction with student group regarding beds allotted and discussion 60 min