



# GOVERNMENT MEDICAL COLLEGE KOLLAM PHASE 2 CBME TIME TABLE

	DAY			Med (SMALL GROUP DISCUSSIONS (8-9 AM) TOTAL 25 HRS) CLINICS (9am to 12 noon) - Bed side discussions	Surgery	O&G	CM (short talkk of SDL , Seminars, SGD, DOAP , Formative assessments	Ophthalmology	ENT	Clinical postings (using the student Doctor method)		12-1 break	1to2	2to3	3to4		
										8-12							
WEEK 1																	
1	DAY			Med (SMALL GROUP DISCUSSIONS (8-9 AM) TOTAL 25 HRS) CLINICS (9am to 12 noon) - Bed side discussions	Surgery	O&G	CM (short talkk of SDL , Seminars, SGD, DOAP , Formative assessments	Ophthalmology	ENT								
WEEK-1 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G		IM 1.10, 2.6, 2.9, General introduction to the posting , Symptomatology & history taking in common Cardiovascular diseases M 1.10, 2.6 History taking in a patient with Chest Pain and symptom analysis in cardiovascular diseases	Homeostasis Metabolic Changes in Injury; Lecture; SU 1.1 General Scheme of History Taking SGD,Taking a Good History; DOAP	OG 8.2 History taking in OBSTETRICS and OB 35.5 Obstetric formula , EDC etc. SGD	CM11.1. Occupational , G; CMS.1 Diet1 G	OP1.1Describe the physiology of vision – (L)	EN1.1 Anat Ext&ME(G), EN 2.1 History Ear (G),EN2.2 Head Lamp use(D)	PA 1.1 role,PA 1.2def &terms, PA 1.3 history, L							
D-2	TUESDAY			IM 9.4,14.7General examination- Build, Nourishment, Palor, Icterus IM 1.11,1.13,1.14,2.6,2.7,2.9History elicitation,documentation and relevant Physical examination in a case of acute coronary syndrome - General and systemic examination, sign elicitation	Metabolic Stress Response to Injury & Surgery; Lecture; SU 1.2 General Scheme of Physical Examination; SGD; Demonstration of Physical Examination; DOAP	OB 8.3 Examination of an obstetric patient and maternal and fetal well being DOAP +SGD	CM20.1 PHE, S; CM 11.2, ES; G; CMS.2 Diet 2 G	OP1.3Demonstrate the steps in performing visual acuity assessment for distance & near vision Colour Vision- DOAP	EN1.1 Anat In.Ear (G),EN2.3 Ear examn(D), EN2.4Tuning fork tests(D)	FM intro&jurisprudence1.1,1.3L							
D-3	WEDNESDAY			IM 4.10, 12,7General examination - Cyanosis, Clubbing, Lymphadenopathy, Edema and Thyroid IM 1.10,1.13History taking, documentation and presenting a case of valvular heart disease and bedside demonstration of abnormal heart sounds and murmurs	Theatre Protocol & Safety; Aseptic Techniques, Sterilization & Disinfection; Lecture; SU 14.1 Case Taking; Swelling – History & Exmn; Lecture/SGD; SU 18.3 Features of Common Swellings; Lecture/SGD; SU 18.3, Demonstration: Examn of Swelling; DOAP; SU 18.3	OG 8.1 and OG 8.8 Ante natal care and ante natal investigations including USG-LECTURE	CM11.3 Occ prev, G; CM 5.4 Diet 3 G D	OP1.2Types of Refractive errors (L)	EN 1.1 Anat Nose(G), EN 2.1 History Nose(D), EN2.5 Nose & PNS Exam(D)	PH 1.1, 1.9[ General principles, Drug Nomenclature] ( L)							
D-4	THURSDAY			IM 1.11,1.12, 1.13, 1.14Normal arterial pulse, Blood pressure- method of clinical examination and common abnormalitiesIM 8.9,10,11,7,14.7History taking in a case of metabolic syndrome - Diabetes, Hypertension, Obesity -Risk factors for atherosclerosis	Shock, Principles of Resuscitation; Lecture; SU 2.1,2,Case Presentation: Swelling, Demonstrate & Observe, Excision of Swelling; DOAP; SU 18.3 Seminar, Discussion & Doubt Clearing; SU 18.3	OG 6.1 Diagnosis of pregnancy- SGD and OG 8.6 Nutrition in pregnancy SGD	CM20.2 Outbreak, S, CM11.4, Ergo, G; CMS.3 Seminar PEM	OP2.1Lid swellings Cause Symptoms signs ( L)	EN1.1 Anat,Pharynx(G), EN 2.1 History Throat(D), EN2.6 Throat examn(D),EN2.7 Neck examn(D),	Intro & History; MI 1.1- L							
D-5	FRIDAY			IM 1.11, 1.12, 1.14Normal Jugular Venous Pulse and Examination of JVP and Common abnormalities IM 4.9,4.10History taking, documentation and presenting a case of fever- bedside demonstration of relevant physical examination	Demonstration: Examn of Ulcer; DOAP; SU 5.2lecture/SGD; SU 5.1, 5.2 Seminar, Discussion & Doubt Clearing; SU 18.3	OG 7.4 Maternal changes in pregnancy - SGD	CM11.5 Occ prev, G; CM 5.4 Diet 4 D	OP2.2 Lid malformations (L)	EN 1.1 Anat PNS(G), EN2.8 Audiogram (G)	Morphology of bacteria MI 1.1- L							
D-6	SATURDAY	PA6.1 edema, L	Antimicrobial stewardship MI 1.6-L	FM 8.1 8.6 G							Pandemic module 2.1	AETCOM 2.1 Communication1	1				
WEEK 2																	
WEEK-2 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G		IM 1.11, 1.15Examination of Cardiovascular system - Percussion, AuscultationIM 3.4History elicitation, documentation and bed side presentation in a patient presenting with respiratory symptoms	Wound Healing; Lecture; SU 5.1, 5.3 Case Presentation: Ulcer Seminar; Discussion & Doubt Clearing; SU 5.2 Dressing a Wound; DOAP; SU 5.2, 17.7	OG 4.1 Development of fetus and placenta LECTURE	CM12.2, Elderly prob, G, CMS.5; CM17.5 PHC G visit	OP 3.4, 3.5Trachoma ( SGD),Vernal Conjunctivitis ( SGD)	EN1.1 Phy hearing(G) EN2.9 radiology (G),EN2.10 Common ENT instruments(G)	PA2.3 accumulations, PA 2.5 calcif, G							
D-2	TUESDAY			IM 3.4, 3.5Symptomatology & history taking in common Respiratory diseasesIM 3.5Bedside demonstration of physical examination of respiratory system	FIRST AID; DOAP; SU 17.1 Sutures, Knots & Needles; SU 14.3 Demonstrate & Observe; Aseptic Techniques, Suturing Technique; DOAP; SU 14.4	OG 1.3 Demography and vital statistics still birth and abortions - SGD and OG 9.1 Early preg complications ( miscarriages ) SGD	CM20.3health event, S; CM12.3 Elderly prev, G, CM 5.6 (seminar nutr. Prog)	OP3.6 Piercigium (L)	EN1.1 Phy Balance(G),EN4.1 Otolgia (G),EN4.4 TM(D)	CM7.2 Intro ID epi, L							
D-3	WEDNESDAY			Examination of Respiratory System- Inspection, palpationIM 1.10History taking & documentation of signs in a case of rheumatic heart disease and complications like Atrial fibrillation, pulmonary edema and/ or infective endocarditis	Hernia; Lecture; SU 28.1 Case Taking ; Hernia – History & Exmn; Lecture/SGD; SU 28.2 Demonstration: Examn of Hernia; DOAP; SU 28.2 Ingino-Scrotal Swellings; Lecture; SU 28.1	OG 12.1, 12.3, 12.4 Medical disorders in pregnancy HTN, diabetes , heart disease - basics - SGD OG 9.3 acute abdomen in pregnancyincluding ectopic SGD	CM12.4 Elderly prob, G, CMS.7, CM17.5 Subcentre G visit	OP4.1 Corneal Ulceration SGDOP 4.4 Corneal Edema ( SGD)OP 4.5 Corneal Blindness ( SGD)	EN 1.1 phy nose(G) EN4.3 ASOM (D) EN3.1 Otomicroscopy(G)	PH 1.4,1.2 [ Pharmacokinetics] [L]							
D-4	THURSDAY			Examination of respiratory system- Percussion, AuscultationIM 3.5History elicitation, documentation, presentation & demonstration of signs in a case of Pneumonia/consolidation	Thyroid Gland – Anatomy, Physiology, Hypo & Hyperthyroidism; Lecture; SU 22.1 Case Presentation: Hernia Seminar; Discussion & Doubt Clearing; SU 22.3 Case Taking; Thyroid Swelling – History & Exmn; Lecture/SGD; SU 22.3	OG 9.4 GTD SGD and OG 9.5 Hyperemesis SGD	CM19.1, FMI, S; CM 13.1 Disaster, G; CMS.8; CM 17.5 Anganwadi G visit	OP 4.6Keratoplasty (L) OP 4.9 Eye Donation /eye Banking (SGD)	EN1.1PHY swallo/resp(G) EN4.5 OME (G)EN4.10 Myringotomy (G)	Major HAI; MI 8.5,8.6							
D-5	FRIDAY			IM 5,6,16,4,5,10, 16.5Symptomatology & history taking in different types of Gastrointestinal diseases, Examination of abdomen IM 3.5 , 5.1 History elicitation, documentation, presentation & demonstration of signs in a case of Asthma/COPD *Self learning by students - Bilirubin metabolism and biochemical basis of hyperbilirubinemia	Thyroid Swellings – Benign & Malignant; Lecture; SU 22.2,22.4 Demonstration: Examn of Thyroid Swelling; DOAP; SU 22.3 Case Presentation: Thyroid Swelling Seminar; Discussion & Doubt Clearing; SU 22.3	OG 11.1 - Multiple pregnancy SGD OG 10.1 APH SGD	CM13.3 Manmade disaster, G; CM6.1 Epi 1 G D; FA	OP 3.8Foreign body Removal (DOAP) OP 3.9 Instillation of Drops (DOAP) OP 4.8	EN 4.2 Ext ear dis.(G) EN4.6 Discharging ear (G) EN4.5 Syringing (D)	PA 2.7 Apoptosis, L							

WEEK 3

GMC KOLLAM

WEEK-3 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM17.2,18.3,19.35symptomatology & history taking in common Neurological disorders - Stroke, epilepsy,migraine, peripheral neuropathyand myelopathyIM3.5History elicitation, documentation, presentation & demonstration of signs in a case of pleural effusion/pneumothorax	Breast – Anatomy, Benign Breast Diseases; Lecture; SU 25.1,25.2 Case Taking: Breast Lump - History & Examination: Lecture/SGD; SU 25.5 Demonstration: Examn of Breast & Axilla; DOAP; SU 25.5 Ethics in General Surgery; Lecture; AETCOM	OG 13.1 Normal labour - mechanism , stages and monitoring SGD and DOAP	CM13.4. National Disaster Authority, G; CM6.2 stat1 D	OP 6.6 Conditions affecting Anterior Chamber (L) OP 6.2Iridocyclitis (SGD) OP 6.7 Depth of anterior chamber (SGD) OP 6.4 Hypopyon /Hyphaema (SGD)	EN1.1 Anat Mastoid(G) EN4.7 COM Mucosal (D) EN4.10 Myringoplasty(G)& EN4.11 Cor. Mastoectomy (G)	PA 2.7 Apoptosis, G		
D-2	TUESDAY				Examination of Higher mental functions and a brief description of common clinical situations affecting cognitionIM5.6,5.10History elicitation, documentation, presentation & demonstration of signs in a case of Chronic liver disease, Cirrhosis & portal hypertension	Tumors of The Breast; Lecture; SU 25.3 Case Presentation: Breast Lump; Seminar: Discussion & Doubt Clearing; SU 25.5 Investigations: Thyroid & Breast Swellings; SGD; SU 22.3, 25.3	OG 14.2 Conduct of labour SGD and Skill lab training	CM 19.2 Essential medicine, S; CM 14.1, Hosp waste G ; CM6.3 stat2 D	OP 6.1Granulomatous /Nongranulomatous Uveitis (SGD)OP6.8Investigation for Uveitis	EN4.12 Hearing loss(G) EN4.8 COM squamosal (G) EN4.11 R &MR Mastoectomy(G)	FM L	Specimen collection & transport; MI 8.9, 8.10 - G & D PA 3.2 Amyloid,G PH1.11,4.1,5.1] routes of drug administration ] [D]	
D-3	WEDNESDAY				Examination of cranial nerves 1 to 6 and common clinical scenarios affecting themIM3.8,4,18.5,18.7History elicitation, documentation, presentation & demonstration of signs in a case of stroke- Hemiplegia,Facial palsy, Aphasia	Salivary Gland Swelling & Other Neck Swellings; Lecture; SU 21.1 Case Taking: Salivary Gland, Other Neck Swellings; Lecture/SGD; SU 21.1 Investigations: Examn of Neck Swellings & Salivary Glands; DOAP; SU 21.1 Acute Abdomen; Lecture; SU 28.3,28.15,29.4,29.5	OG 17.1 Cesarean section SGD OG 19.1 Puerperium and OG 36.1AN/PN/FW clinics SDG and site visit	CM 14.3 Hosp waste laws G; CM6.4, stat3 D	OP 7.1Anatomy /metabolism lens (L)OP 7.2Cataract (SGD)	EN4.19 Vertigo (G) EN4.22 Nasal obstruction (D) EN3.2 DNE (D)	PH 1.5 [ Mechanism of drug action ] [I]		
D-4	THURSDAY				Examination of cranial nerves 7 to 12 and common clinical scenarios affecting themIM3.9,4History elicitation, documentation, presentation & demonstration of relevant physical signs in a case of Anemia	Chronic Abdomen & Abdominal Mass; Lecture; SU 28.4 Case Taking: Abdominal Mass; Lecture/SGD; SU 28.9 Demonstration: Examn of Abdomen; DOAP; SU 28.18 Counselling & Consent in General Surgery; Lecture; AETCOM	OG 17.1 and OG 17.2 - Lactation - SGD and DOAP and Skill lab	CM 19.3 Counterfeit Med, S; CM 15.1 Mental health, G; CM6.4, stat4 D	OP 7.4Cataract surgery steps and complication (SGD)	EN 4.30 Epistaxis (G)& EN 2.13 ANP(D) EN4.23 DNS (D) EN4.24 Septoplasty (G)	Bacterial genetics 1;MI 1.1-L	PH 1.3 [adrenergics][L]	PA 3.1 amyloidosis, L
D-5	FRIDAY				IM18.5,19.4Examination of motor system - Bulk, Tone, Power & reflexes and clinical situations affecting these parametersIM2.5History elicitation, documentation, presentation & demonstration of signs in a case of hematological malignancies or a case of hepatosplenomegaly & lymphadenopathy	Skin & S/c Infections, Surgical Site Infections, Antibiotics; Lecture SU 18.1, 6.1, 6.2 Case Presentation: Abdominal Lump; Seminar: Discussion & Doubt Clearing; SU 28.9 Demonstrate & Observe: Incision & Drainage; DOAP; SU 18.1	OG 16.1 PPH SGD and Skill lab	CM15.2 MH warning signs G; CM6.4, stat5 D	OP 7.5Team for cataract surgery (DOAP) OP 7.6 Informed consent / Counsel of patients (DOAP)	EN 4.27 Allergic Rhinitis(G) EN4.25 Nasal polyp(D) EN4.25 FESS (G)	Bacterial genetics 2; MI 1.1-L	PA 4.1 infl genrl, L	PH 1.3 [adrenergics][L]
D-6	SATURDAY	PA 6.3 shock, L	Oncogenic viruses; MI 8.3-L	FM SDL 1.2,1.8							Pandemic module 2.2	AETCOM 2.1 Communication2	AETCOM 2.1 Communication3
WEEK 4													
WEEK-4 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			Examination of sensory system and signs of meningeal irritation and Common causeand different patterns of sensory loss & Conditions producing meningismIM10.1,10.7,10.12History elicitation, documentation, presentation & demonstration of signs in a case of Chronic kidney failure	POAD & Gangrene; Lecture; SU 27.1, 27.4 Case Taking; POAD: History & Examn; Lecture/SGD; SU 27.2 Case Presentation: POAD; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 2.1 Anatomy of FGT - Lecture and OG 31.1 supports of the uterus - Lecture	CM16.2 Planning cycle, G; CM 7.3, CM7.6 Epi2 G D	OP 8.1Vascular occlusions of retina (L)	EN1.1 Ana. Nasophx EN 4.25 Adenoid (D) EN4.40 Adenoideectomy (G)	PA 4.1 vascular events, L		
D-2	TUESDAY				IM17.4, 18.3Symptomatology, history taking and relevant physical examination in renal diseases- Acute Kidney Injury, Chronic Kidney DiseaseIM12.6,12.7History elicitation, documentation, presentation & demonstration of signs in a case of Thyrotoxicosis/hypothyroidism	Varicose Veins & DVT: Lecture; SU 27.6 Case Taking; Varicose Veins: History & Examn; Lecture/SGD; SU 27.2 Case Presentation: Varicose Veins; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 3.1 pHYIOLOGY OF OVULATION - LECTURE with OG 28.3 ovulation - Lecture	CM18.1. International health, S; CM 16.3 Mx, G; CM7.5, Epi 3 G D	OP 8.4Treatment Modalities of Retinal diseases (L)	EN1.1 Ana.Tonsil EN 4.39 Tonsillitis (D) EN4.40 Tonsillectomy (G)	CM 7.2, Dynamics D/s trans, L	Staining techniques; MI 1.2- G Gram staining-1; MI 1.2- D PA 4.4 a/c & c/c infl sp, D PH 1.4[ Pharmacokinetics] [G]	
D-3	WEDNESDAY				IM 10.1, 10.7, 10.12Symptomatology, history taking and relevant physical examination in Rheumatological disorders- Seropositive and seronegative arthropathiesIM7.4,7.6,7.9,7.10History elicitation, documentation, presentation & demonstration of signs in a case of Rheumatoid arthritis/ SLE/other rheumatologic disorders	Scrotal Swellings; Lecture; SU 20.3, 30.3, 30.4, 30.5, 30.6 Case Taking: Scrotal & Inguinoscrotal Swellings: History & Examn; Lecture/SGD; SU 20.3, 30.4, 30.5, 30.6 Case Presentation: Scrotal & Inguinoscrotal Swellings; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 30.2, 30.3, 30.4, 30.5, 30.6	OG 23.1, 23.2 and 23.3 NORMAL and ABNORMAL puberty - Lecture	CM 16.4 health plan Ind, G; CM7.5, Epi4 G D	OP 8.2 Laser Therapy in Retina (SGD)/(DOAP)	EN4.47Stridor (G) EN4.50 Tracheostomy(G)	PH 1.3 [Antidiurenergics][L]	Antigen; MI 1.8 - S	
D-4	THURSDAY				IM 7.4, 7.6, 7.9, 7.10Common Acid Base Disturbances encountered in clinical practice and basic general approach to such situationsIM6.7History elicitation, documentation, presentation & demonstration of signs in a case of HIV-AIDS	Burns; Lecture; SU 4.1, 4.2 Skin Tumours; Lecture; SU 18.2 End-Posting Examination: OSCE	OG 35.1. History taking in gyne with clinical exam - SGD with SKILL LAB	CM 18.2 IHAgencies, S; CM3.4 Waste, G; CM7.5, Epi 5 G D	OP 8.5 Disease of Optic Nerve and Visual Pathway (SGD)OP 2.6Features of Types of Poplexis (SGD)	REVISION & DOUBT CLEARANCE	Antimicrobial agents & resistance; MI 1.6-L	PH 1.3 [Antidiurenergics][L]	PA 4.1 cellular events, L
D-5	FRIDAY				IM 11.7, 11.8Symptomatology , history taking and relevant physical examination in a case of Diabetes Mellitus and the long term complicationsIM19.3,19.4History elicitation, documentation, presentation & demonstration of signs in a case of Parkinsonism/ movement disorder	Nutrition in Surgical Patient; Lecture; SU 12.1 End-Posting Examination: Viva-Voce	OG 30.1- PCOS / Hirsutism - SGD	CM13.1 Pollution G; CM 7.8, Epi6 G D	OP 9.1 Extra ocular movements (DOAP) OP 9.2Heterotropia (SGD)	END posting exam	Bacterial infections 1; MI 1.1-L	PA 4.2 mediators of infl, L	PH1.63.1.64[clinical trials, drug regulations][S]
D-6	SATURDAY	PA 6.6 infarction, L	Zoonotic infections;MI 8.1-L	FM SGD MOOT COURT1.5			OG 35.4 Interpersonal and communicatio skills befitting a physician - SGD, SDI	CM19.4, Pop dynamics, S; CM 7.7 Epi 7 G D; FA	OP 9.4 Avoidable Blindness (L) NPCB / Vision 2020 (L)		Pandemic module 2.3	AETCOM 2.1 Communication4	2

5. INTEGRATION WEEK-DIABETES

D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM 1.10, 2.6, 2.9, General introduction to the posting ,Symptomatology & history taking in common Cardiovascular diseases M 1.10, 2.6History taking in a patient with Chest Pain and symptom analysis in cardiovascular diseases	Homeostasis Metabolic Changes in Injury; Lecture; SU 1.1 General Scheme of History Taking SGD,Taking a Good History; DOAP	OG 8.2 History taking in OBSTETRICS and OB 35.5 Obstetric formula,, EDC etc. SGD	OM11.1. Occupational , G; CMS5.1 Diet1 G	OP1.1Describe the physiology of vision – (L)	EN1.1 Anat Ext&ME(G), EN 2.1 History Ear (G),EN2.2 Head Lamp use(D)	PA 32.4 Classify & desc etiopathogenesis and pathology of DM, L			
D-2	TUESDAY				IM 9.4,14.7General examination- Build, Nourishment, Pallor, Icterus IM 1.1,1.13,1.14,2.6,2.7, 2.9History elicitation,documentation and relevant Physical examination in a case of acute coronary syndrome- General and systemic examination, sign elicitation	Metabolic Stress Response to Injury & Surgery; Lecture; SU 1.2 General Scheme of Physical Examination; SGD; Demonstration of Physical Examination; DOAP	OB 8.3 Examination of an obstetric patient and maternal and fetal well being DOAP +SGD	CM20.1 PHE, 5; CM 11.2, ES1, G;, CMS5.2 Diet 2 G	OP1.3Demonstrate the steps in performing visual acuity assessment for distance & near vision Colour Vision -DOAP	EN1.1 Anat in.Ear (G),EN2.3 Ear examn(D), EN2.4Tuning fork tests(D)	FM 1.7 L	Culture media & methods; MI 1.1- G PA 11.1genetics, PA 11.3 storage d/s, G PH 1.5 [ Pharmacodynamics] [G] Nonaligned sessions		
D-3	WEDNESDAY				IM 4.10, 12.7General examination - Cyanosis, Clubbing, Lymphadenopathy, Edema and Thyroid IM 1.10,1.15History taking, documentation and presenting a case of valvular heart disease and bedside demonstration of abnormal heart sounds and murmurs	Theatre Protocol & Safety; Aseptic Techniques, Sterilization & Disinfection; Lecture; SU 14.1 Case Taking: Swelling – History & Examn; Lecture/SGD; SU 18.3 Features of Common Swellings; Lecture/SGD; SU 18.3, Demonstration: Exmn of Swelling; DOAP; SU 18.3	OG 8.1 and OG 8.8 Ante natal care and ante natal investigations including USG -LECTURE	CM11.3 Occ prev, G; CM 5.4 Diet 3 G D	OP1.2Types of Refractive errors (L)	EN 1.1 Anat Nose(G), EN 2.1 History Nose(D), EN2.5 Nose & PNS Exam(D)	PH 1.36 [ Diabetes Mellitus] [L]			
D-4	THURSDAY				IM 1.11,1.12, 1.13, 1.14Normal arterial pulse, Blood pressure- method of clinical examination and common abnormalities IM 8.9,8.10,11.7,14.7History taking in a case of metabolic syndrome - Diabetes, Hypertension, Obesity -Risk factors for atherosclerosis	Shock, Principles of Resuscitation; Lecture; SU 2.1,2,Case Presentation: Swelling Demonstrate & Observe; Excision of Swelling; DOAP; SU 18.3 Seminar; Discussion & Doubt Clearing; SU 18.3	OG 6.1 Diagnosis of pregnancy- SGD and OG 8.6 Nutrition in pregnancy SGD	CM20.2 Outbreak, 5, CM11.4, Ergo, G; CMS5.3 Seminar PEM	OP2.1Lid swellings Cause Symptoms signs (L)	EN1.1 Anat,Pharynx(G), EN 2.1 History Throat(D), EN2.6 Throat examn(D),EN2.7 Neck examn(D),	Bacterial infections 2; MI 1.1-L	PH 1.36 [ Diabetes Mellitus] [L]	PA 32.4 lab features, complications & prog of DM, L	
D-5	FRIDAY				IM 1.11,1.12, 1.14Normal Jugular Venous Pulse and Examination of JVP and Common abnormalities IM 4.9,4.10History taking, documentation and presenting a case of fever- bedside demonstration of relevant physical examination	Demonstration: Exmn of Ulcer; DOAP; SU 5.2lecture/SGD; SU 5.1, 5.2 Seminar; Discussion & Doubt Clearing; SU 18.3	OG 7.4 Maternal changes in pregnancy - SGD	CM11.5 Occ prev, G; CMS5.4 Diet 4 D	OP2.2 Lid malformations (L)	EN 1.1 Anat PNS(G), EN2.8 Audiogram (G)	SDL Assignments	PA 28.7 glomerular manif of DM, L	PH 1.38 [steroids][L]	
D-6	SATURDAY	PA6.4 Thrombosis,L	Opportunistic & Transplant MI infections; MI 8.2- L	FM SGD MOOT COURT15,1,6								SDL assignments	FA - Formtive lassessment	

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WEEK-6 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM 1.11, 1.15Examination of Cardiovascular system - Percussion, AuscultationIM 3.4History elicitation, documentation and bed side presentation in a patient presenting with respiratory symptoms	Wound Healing; Lecture; SU 5.1, 5.3 Case Presentation: Ulcer Seminar; Discussion & Doubt Clearing; SU 5.2 Dressing a Wound; DOAP; SU 5.2, 17.7	OG 4.1 Development of fetus and placenta LECTURE	CM12.2, Elderly prob, G, CMS5.; CM17.5 PHC G visit	OP 3.4. 3.5Trachoma ( SGD),Vernal Conjunctivitis (SGD)	EN1.1 Phy hearing(G) EN2.9 radiology (G),EN2.10 Common ENT instruments(G)	PA 4.2 mediators of infl, G			
D-2	TUESDAY				IM 3.4, 3.5Symptomatology & history taking in common Respiratory diseasesIM 3.5bedside demonstration of physical examination of respiratory system	FIRST AID; DOAP; SU 14.3 Sutures, Knots & Needles; Lecture/SGD; SU 14.3 Demonstrate & Observe; Aseptic Techniques, Suturing Technique; DOAP; SU 14.4	OG 1.3 Demography and vital statistics still birth and abortions - SGD and OG 9.1 Early preg complications { miscarriages } SGD	CM20.3health event, 5; CM12.3 Elderly prev, G, CM 5.6 [seminar nutr. Prog]	OP3.6 Pticygium (L)	EN1.1 Phy Balance(G),EN4.1 Oitalgia (G),EN4.4 TM(D)	CM7.2 Suscept.host		Identification of bacteria & ABST; MI 1.1,1.6- G PA 6.7 infarction, D PH 1.6,1.7,3.4 [ADR, Pharmacovigilance][G]	
D-3	WEDNESDAY				Examination of Respiratory System- Inspection, palpationIM 1.8,1.9, 1.10History taking & demonstration of signs in a case of rheumatic heart disease and complications like Atrial fibrillation, pulmonary edema and/ or infective endocarditis	Hernia; Lecture; SU 28.1 Case Taking: Hernia – History & Examn; Lecture/SGD; SU 28.2 Demonstration: Exmn of Hernia; DOAP; SU 28.2 Inguino-Scrotal Swellings; Lecture; SU 28.1	OG 12.1, 12.3, 12.4 Medical disorders in pregnancy HTN, diabetes , heart disease - basics - SGD OG 9.3 acute abdomen in pregnancyincluding ectopic SGD	CM12.4 Elderly prob, G, CMS5.7, CM17.5 Subcentre G visit	OP4.1 Corneal Ulceration SGDOP 4.4 Corneal Edema (SGD)OP 4.5 Corneal Blindness (SGD)	EN 1.1 phy nose(G) EN4.3 ASOM (D) EN3.1 Otomicroscopy(G)	PH 1.38 [steroids][L]			
D-4	THURSDAY				Examination of respiratory system- Percussion, AuscultationIM 3.5History elicitation, documentation, presentation & demonstration of signs in a case of Pneumonia/consolidation	Thyroid Gland – Anatomy, Physiology, Hypo & Hyperthyroidism; Lecture; SU 22.1 Case Presentation: Hernia Seminar; Discussion & Doubt Clearing; SU 22.8 Case Taking: Thyroid Swelling – History & Examn; Lecture/SGD; SU 22.3	OG 9.4 GTD SGD and OG 9.5 Hyperemesis SGD	CM19.1, EML, 5; CM 13.1 Disaster, G; CMS5.8; CM 17.5 Anganwadi G visit	OP 4.6Keroplasty (L) OP 4.9 Eye Donation /eye Banking (SGD)	EN1.1PHY swallo/resp(G) EN4.5 OME (G)EN4.10 Myringotomy (G)	Overview of viral infections 1; MI 1.1-L	PH1.4 [Cholinergics][L]	PA 4.3 c/c infl, L	
D-5	FRIDAY				IM 5.6,16.4,5.10, 16.5Symptomatology & history taking in different types of Gastrointestinal diseases, Examination of abdomen IM 3.5, 5.1History elicitation, documentation, presentation & demonstration of signs in a case of Asthma/COPD *Self learning by students- Bilirubin metabolism and biochemical basis of hyperbilirubinemia	Thyroid Swellings – Benign & Malignant; Lecture; SU 22.2 Case Taking: Thyroid Swelling; DOAP; SU 22.3 Case Presentation: Thyroid Swelling Seminar; Discussion & Doubt Clearing; SU 22.3	OG 11.1 - Multiple pregnancy SGD OG 10.1 APH SGD	CM 13.3 Manmade disaster, G; CM6.1 Epi 1 G D	OP 3.8Foreign body Removal (DOAP) OP 3.9 Instillation of Drops (DOAP) OP 4.8	EN 4.2 Ext ear dis (G) EN4.6 Discharging ear (G) EN4.9 Syringing (D)			PA 5.1, repair, L	PH1.4 [AntiCholinergics][L]

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7	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM17.2,18.3,19.3symptomatology & history taking in common Neurological disorders - Stroke, epilepsy,migraine, peripheral neuropathyand myelopathyIM 3.5History elicitation, documentation, presentation & demonstration of signs in a case of pleural effusion/pneumothorax	Breast – Anatomy, Benign Breast Diseases; Lecture; SU 25.1,25.2 Case Taking: Breast Lump – History & Examination; Lecture/SGD; SU 25.5 Demonstration: Exmn of Breast & Axilla; DOAP; SU 25.5 Ethics in General Surgery; Lecture; AETCOM	OG 13.1 Normal labour - mechanism , stages and monitoring SGD and DOAP	OM13.4. National Disaster Authority, G; CM6.2 stat1 D	OP 6.6 Conditions affecting Anterior Chamber (L) OP 6.2ridgechis (SGD) OP 6.7 Depth of anterior chamber (SGD) OP 6.4 Hypopyon/Hyphaema (SGD)	EN1.1 Anat Mastoid(G) EN4.7 COM Mucosal (D) EN4.10 Myringoplasty(G)& EN4.11 Cor. Mastoidectomy (G)	PA 6.2 congestion,L			
D-2	TUESDAY				Examination of Higher mental functions and a brief description of common clinical situations affecting cognitionIM 6.5,10History elicitation, documentation, presentation & demonstration of signs in a case of Chronic liver disease, Cirrhosis & portal hypertension	Tumors of The Breast; Lecture; SU 25.3 Case Presentation: Breast Lump; Seminar; Discussion & Doubt Clearing; SU 25.5 Investigations: Thyroid & Breast Swellings; SGD; SU 22.3, 23.3	OG 14.2 Conduct of labour SGD and Skill lab training	CM 19.2 Essential medicine, 5; CM 14.1, Hosp waste G ; CM6.3 stat2 D	OP 6.1Granulomatous /Nongranulomatous Uveitis (SGD)OP 6.8Investigation for Uveitis	EN4.12 Hearing loss(G) EN4.8 COM squamous (G) EN4.11 R &MR Mastoidectomy(G)	FM Thanatology 2.1 L	Molecular methods,pathogenicity; MI 1.1- G PA6.1 edema-types & clinical correlation, G PH 1.37[sex hormones][G]		

**GMC KOLLAM**

D-3	WEDNESDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G, Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			Examination of cranial nerves 1 to 6 and common clinical scenarios affecting themIM18.3,18.4,18.5,18.7History elicitation, documentation, presentation & demonstration of signs in a case of stroke- Hemiplegia,Facial palsy, Aphasia	Salivary Gland Swelling & Other Neck Swellings; Lecture; SU 21.1 Case Taking: Salivary Gland, Other Neck Swellings; Lecture/SGD; SU 28.4,28.5,28.7History elicitation, documentation, presentation & demonstration of signs in a case of stroke- Hemiplegia,Facial palsy, Aphasia	OG 37.1 Cesarean section SGD, OG 19.1 Puerperium and OG 36.2 AN/PN/FW clinics SGD and site visit	CM 14.3 Hosp waste laws G; CM6.4, stat3 D	OP 7.1 Anatomy /metabolism lens (L)OP 7.2Cataract (SGD)	EN4.19 Vertigo (G) EN4.22 Nasal obstruction (D) EN4.23 DNE (D)	PH1.4 [AntiCholinergics][L]			Borreliosis; MI 8.1 - S
D-4	THURSDAY				Examination of cranial nerves 7 to 12 and common clinical scenarios affecting themIM9.3,9.4History elicitation, documentation, presentation & demonstration of relevant physical signs in a case of Anemia	Chronic Abdomen & Abdominal Mass; Lecture; SU 28.4 Case Taking: Abdominal Mass; Lecture/SGD; SU 28.9 Demonstration: Examn of Abdomen; DOAP; SU 28.18 Counselling & Consent in General Surgery; Lecture; AETCOM	OG 17.1 and OG 17.2 - Lactation - SGD and DOAP and Skill lab	CM 19.3 Counterfeit Med, S; CM 15.1 Mental health, G; CM6.4, stat4 D	OP 7.4Cataract surgery steps and complication (SGD)	EN 4.30 Epistaxis (G)& EN 4.13 ANP(D) EN4.23 DNS (D) EN4.24 Septoplasty (G)	Overview of viral infections 2; MI 1.1-L	PH 1.36 [Thyroid] [L]	PA 6.3 pathogenesis of septic shock, G	
D-5	FRIDAY				IM18.5, 19.4Examination of motor system - Bulk, Tone, Power & reflexes and clinical situations affecting these parametersIM25.5History elicitation, documentation, presentation & demonstration of signs in a case of hematological malignancies or a case of hepatosplenomegaly & lymphadenopathy	Skin & S/c Infections, Surgical Site Infections, Antibiotics; Lecture; SU 18.1, 6.1, 6.2 Case Presentation: Abdominal Lump; Seminar; Discussion & Doubt Clearing; SU 28.9 Demonstrate & Observe: Incision & Drainage; DOAP; SU 18.1	OG 16.1 PHH SGD and Skill lab	CM15.2 MH warning signs G; CM6.4, stat5 D	OP 7.5Team for cataract surgery (DOAP) OP 7.6 Informed consent / Counsel of patients (DOAP)	EN 4.27 Allergic Rhinitis(G) EN4.25 Nasal polyp(D) EN4.25 FESS (G)	Overview of viral infections 3; MI 1.1-L	PA 6.5 embolism, L	PH1.39 [contraception][L]	
					IM19.4Examination of Cerebellar signs and Gait and Common clinical situations affecting gait and balanceIM11.7,11.8History elicitation, documentation, presentation & demonstration of signs in a case of Chronic Diabetes Mellitus with long term complications		OG 22.1 vaginal discharge - physiological and pathological SGD	CM19.7, Sources stat, S; CM 15.3 MH prog., G; CM6.4, stat5 D	Normal fundus /features and technique of examination (L)(DOAP)					
D-6	SATURDAY	PA 15.1 Vit B12 & folate metb, G	Emerging & re-emerging infections, Bioterrorism; MI 8.4-L	FM SDL 1.8								4	5	
WEEK-8 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G, Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			Examination of sensory system and signs of meningeal irritation and Common causesand different patterns of sensory loss & Conditions producing meningism/MI10.1,10.7,10.12History elicitation, documentation, presentation & demonstration of signs in a case of Chronic kidney Failure	POAD & Gangrene; Lecture; SU 27.1, 27.4 Case Taking; POAD: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: POAD; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 2.1 Anatomy of FGT - Lecture and OG 31.1 supports of the uterus - Lecture	CM16.2 Planning cycle, G; CM 7.3, CM7.6 Epi2 G D	OP 8.1Vascular occlusions of retina (L)	EN1.1 Ana. Nasophx EN 4.25 Adenoid (D) EN4.40 Adenoectomy (G)	PA 13.3 anemia classf,L			
D-2	TUESDAY				IM17.4, 18.3Symptomatology, history taking and relevant physical examination in renal diseases- Acute Kidney Injury, Chronic Kidney DiseaseIM2.6,12.7History elicitation, documentation, presentation & demonstration of signs in a case of Thyrotoxicosis/hypothyroidism	Varicose Veins & DVT; Lecture; SU 27.6 Case Taking: Varicose Veins: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: Varicose Veins; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 3.1 pHYIOLOGY OF OVULATION - LECTURE with OG 28.3 ovulation - Lecture	CM18.1. International health, S; CM 16.3 Mx, G; CM7.5, Epi 3 G D	OP 8.4Treatment Modalities of Retinal diseases (L)	EN1.1 Ana.Tonsil EN 4.39 Tonsillitis (D) EN4.40 Tonsilectomy (G)	CM7.2 Causation	Lab diagnosis of viral infections; MI 1.1-G Normal flora; MI 1.1 - G PA 13.1 hematopoiesis & HME, S PH 1.37[anterior pituitary hormones][G]		
D-3	WEDNESDAY				IM 10.1, 10.7, 10.12Symptomatology, history taking and relevant physical examination in Rheumatological disorders- Seropositive and seronegative arthropathiesIM7.4,7.6,7.9,7.10History elicitation, documentation, presentation & demonstration of signs in a case of Rheumatoid arthritis/ SLE/other rheumatologic disorders	Scrotal Swellings; Lecture; SU 30.2, 30.3, 30.4, 30.5, 30.6 Case Taking: Scrotal & Inguinoscrotal Swellings; History & Exmn; Lecture/SGD; SU 30.2, 30.3, 30.4, 30.5, 30.6 Case Presentation: Scrotal & Inguinoscrotal Swellings; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 30.2, 30.3, 30.4, 30.5, 30.6	OG 23.1, 23.2 and 23.3 NORMAL and ABNORMAL puberty - Lecture	CM 16.4 health plan Ind, G; CM7.5, Epi4 G D	OP 8.2 Laser Therapy in Retina (SGD)(DOAP)	EN4.47Stridor (G) EN4.50 Tracheostomy(G)	PH1.41[Drugs acting on uterus][L]			
D-4	THURSDAY				IM 7.4, 7.6, 7.9, 7.10Common Acid Base Disturbances encountered in clinical practice and basic general approach to such situationsIM6.7History elicitation, documentation, presentation & demonstration of signs in a case of HIV-AIDS	Burns; Lecture; SU 4.1, 4.2 Skin Tumours; Lecture; SU 18.2 End-Posting Examination: OSCE	OG 35.1 History taking in gyne with clinical exam - SGD with SKILL LAB	CM 18.2 IHAgencies, S; CM3.4 Waste, G; CM7.5, Epi 5 G D	OP 8.5 Disease of Optic Nerve and Visual Pathway (SGD)OP 2.6Features of Types of Proptosis (SGD)	REVISION & DOUBT CLEARANCE	Overview of parasitic infections 1; MI 1.1-L	PH1.42,143 [ Introduction to antibiotics, rational use] [L]	PA14.1 iron metb, S	
D-5	FRIDAY				IM 11.7, 11.8Symptomatology , history taking and relevant physical examination in a case of Diabetes Mellitus and the long term complicationsIM19.3,19.4History elicitation, documentation, presentation & demonstration of signs in a case of Parkinsonism/ movement disorder	Nutrition in Surgical Patient; Lecture; SU 12.1 End-Posting Examination: Viva-Voce	OG 30.1 - PCOS / Hirsutism - SGD	CM13.1 Pollution G; CM 7.8, Epi6 G D	OP 9.1Extra ocular movements (DOAP) OP 9.2Heterotropia (SGD)	END posting exam	Overview of parasitic infections 2; MI 1.1-L	PA 14.2 HMA,L	PH1.42,143 [ Introduction to antibiotics, rational use] [L]	
D-6	SATURDAY	PA 21.1 hemostasis, S	Immunoprophylaxis; MI 1.9-L	FM SGD 2.2			OG 35.4 Interpersonal and communicatio skills befitting a physician - SGD, SDL	CM19.4, Pop dynamics, S; CM 7.7 Epi 7 G D	OP 9.4 Avoidable Blindness (L) NPCB / Vision 2020 (L)			AETCOM 2.4 Team 1	AETCOM 2.4 Team 2	
9	DAY						Surgery	O&G	CM	Ophth	ENT			
WEEK-1 D-1	MONDAY				IM 1.10, 2.6, 2.9, General introduction to the posting , Symptomatology & history taking in common Cardiovascular diseases! M 1.10, 2.6History taking in a patient with Chest Pain and symptom analysis in cardiovascular diseases	Homeostasis Metabolic Changes in Injury; Lecture; SU 1.1 General Scheme of History Taking SGD;Taking a Good History; DOAP	OG 8.2 History taking in OBSTETRICS and OB 35.5 Obstetric formula , EDC etc. SGD	CM11.1. Occupational , G; CMS.1 Diet1 G	OP1.1Describe the physiology of vision – (L)	EN1.1 Anat Ext&ME(G), EN 2.1 History Ear (G),EN2.2 Head Lamp use(D)	PA 15.2 macro anemia lab find, 15.3 blood pic,L			
D-2	TUESDAY				IM 9.4,14.7General examination- Build, Nourishment, Pallor, Icterus IM 1.1,1.13,1.14,2.6,2.7, 2.9History elicitation,documentation and relevant Physical examination in a case of acute coronary syndrome - General and systemic examination, sign elicitation	Metabolic Stress Response to Injury & Surgery; Lecture; SU 12.1 General Scheme of Physical Examination; SGD; Demonstration of Physical Examination; DOAP	OB 8.3 Examination of an obstetric patient and maternal and fetal well being DOAP +SGD	CM20.1 PHE, S; CM 11.2, ESI, G; CMS.2 Diet 2 G	OP1.3Demonstrate the steps in performing visual acuity assessment for distance & near vision Colour Vision - DOAP	EN1.1 Anat In.Ear (G),EN2.3 Ear examn(D), EN2.4Tuning fork tests(D)	FM Moment &mode of death2.5	Stool microscopy 1 & 2, Peripheral blood smear; MI 1.2- D PA13.2 anticoagulants,PA 13.4 investigation of anemia, G PH1.36(nosteoporosis)[G]		

**GMC KOLLAM**

D-3	WEDNESDAY	Clinical postings 4 Weeks each in Medicine,Surgery,O & G,Community Medicine,Ortho & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM 4.10, 12.7-General examination - Cyanosis, Clubbing, Lymphadenopathy, Edema and Thyroid IM 1.10.15History taking, documentation and presenting a case of valvular heart disease and bedside demonstration of abnormal heart sounds and murmurs	Theatre Protocol & Safety; Aseptic Techniques, Sterilization & Disinfection; Lecture; SU 14.1, Case Taking: Swelling - History & Examn; Lecture/SGD; SU 18.3 Features of Common Swellings; Lecture/SGD; SU 18.3, Demonstration: Exmn of Swelling; DOAP; SU 18.3	OG 8.1 and OG 8.8 Ante natal care and ante natal investigations including USG -LECTURE	CM11.3 Occ prev, G; CM 5.4 Diet 3 G D	OP1.2Types of Refractive errors (L)	,EN 1.1 Anat Nose(G), EN 2.1 History Nose(D), EN2.5 Nose & PNS Exam(D)	PH1.42,1.43 [ Introduction to antibiotics, rational use] [L]			GI infections due to enterobacteria ceae; MI 3.1 - S
D-4	THURSDAY				IM 1.11,1.12, 1.13, 1.14Normal arterial pulse, Blood pressure-method of clinical examination and common abnormalitiesIM 8.9.8,10.11,7.14.History taking in a case of metabolic syndrome - Diabetes, Hypertension, Obesity -Risk factors for atherosclerosis	Shock, Principles of Resuscitation; Lecture; SU 2.1,2.2,Case Presentation: Swelling, Demonstrate & Observe; Excision of Swelling; DOAP; SU 18.3 Seminar; Discussion & Doubt Clearing; SU 18.3	OG 6.1 Diagnosis of pregnancy- SGD and OG 8.6 Nutrition in pregnancy SGD	CM20.2 Outbreak, 5, CM11.4, Ergo, G; CMS.3 Seminar PEM	OP2.1Lid swellings Cause Symptoms signs (L)	EN1.1 Anat.Pharynx(G), EN 2.1 History Throat(D), EN2.6 Throat examn(D),EN2.7 Neck examn(D),	Overview of fungal infections; MI 1.1- L	PH1.42,1.43 [ Introduction to antibiotics, rational use] [L]	PA 15.4 Diff features of mega and non mega macro anemia, G	
D-5	FRIDAY				IM 1.11, 1.12, 1.14Normal Jugular Venous Pulse and Examination of JVP and Common abnormalities IM 4.9,4.10History taking, documentation and presenting a case of fever- bedside demonstration of relevant physical examination	Demonstration: Exmn of Ulcer; DOAP; SU 5.2Lecture/SGD; SU 5.1, 5.2 Seminar; Discussion & Doubt Clearing; SU 18.3	OG 7.4 Maternal changes in pregnancy - SGD	CM11.5 Occ prev, G; CMS.4 Diet 4 D	OP2.2 Lid malformations (L)	EN 1.1 Anat PNS(G), EN2.8 Audiogram (G)	Epidemiology of infectious diseases; MI 1.3- L	PA 16.1 classify hemolytic anemia, PA16.2, pathology of HA, L	PH1.42,1.43 [ Introduction to antibiotics, rational use] [L]	
					IM 1.11Examination of Cardiovascular system- Inspection, Palpation IM 1.11,1.13,1.14, 1.15 Bedside Demonstration of signs pertaining to General examination, vital signs and CVS - Revision * Self learning by students- Rheumatic fever, Diabetes, hypertension, obesity, dyslipidemia- criteria for diagnosis of each		OG 5.2 maternal high risk factors and verifying immunization status SGD and OG 5.1 Pre conceptional counseling SGD	CM12.1 Geriatric, G; CMS.4 Diet 5 D	OP2.3 Demonstrate regurgitation test, Epilation , (L),DOAP					
D-6	SATURDAY	PA 19.2 pathology of tuberculous LN, G	Environmental surveillance; MI 8.8- G	FM SGD 2.2_2,3							Pandemic module 2.4	AETCOM 2.4 Team 3	AETCOM 2.4 Team 4	

10. INTEGRATION WEEK-TUBERCULOSIS

10	MONDAY	Clinical postings 4 Weeks each in Medicine,Surgery,O & G,Community Medicine,Ortho & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM 1.11, 1.15Examination of Cardiovascular system - Percussion, AuscultationIM 3.4History elicitation, documentation and bed side presentation in a patient presenting with respiratory symptoms	Wound Healing; Lecture; SU 5.1, 5.3 Case Presentation: Ulcer Seminar; Discussion & Doubt Clearing; SU 5.2 Dressing a Wound; DOAP; SU 5.2, 17.7	OG 4.1 Development of fetus and placenta LECTURE	CM12.2, Elderly prob, G, CMS.5; CM17.5 PHC G visit	OP 3.4, 3.5Trachoma ( SGD),Vernal Conjunctivitis (SGD)	EN1.1 Phy hearing(G) EN2.9 radiology (G),EN2.10 Common ENT instruments(G)	PA 26.4 etiology & pathogenesis of TB, L			
D-2	TUESDAY				IM 3.4, 3.5Symptomatology & history taking in common Respiratory diseasesIM 3.5Bedside demonstration of physical examination of respiratory system	FIRST AID; DOAP; SU 17.1 Sutures, Knots & Needles; SU 17.2 Demonstrate & Observe; Aseptic Techniques, Suturing Technique; DOAP; SU 14.4	OG 1.3 Demography and vital statistics still birth and abortions - SGD and OG 9.1 Early preg complications ( miscarriages ) SGD	CM20.3health event, 5; CM12.3 Elderly prev, G, CM 5.6 (seminar nutr. Prog)	OP3.6 Ptterygium (L)	EN1.1 Phy Balance(G),EN4.1 Otagia (G),EN4.4 TM(D)	CM 1.3,1.4 Natural history of disease taking Tuberculosis as example		Acid fast staining 1; MI 1.2- D ; nonaligned session Lab diagnosis of TB; MI 6.3.1.2- D PA 19.3 TB LN, PA19.5 hogdkin lymphoma LN, G PH1.33[cough]](G)	
D-3	WEDNESDAY				Examination of Respiratory System- Inspection, palpationIM 1.8,1.9, 1.10History taking & demonstration of signs in a case of rheumatic heart disease and complications like Atrial fibrillation, pulmonary edema and/ or infective endocarditis	Hernia; Lecture; SU 28.1 Case Taking: Hernia - History & Examn; Lecture/SGD; SU 28.2 Demonstration: Exmn of Hernia; DOAP; SU 28.2 Inguino-Scrotal Swellings; Lecture; SU 28.1	OG 12.1, 12.3, 12.4 Medical disorders in pregnancy HTN, diabetes , heart disease - basics - SGD OG 9.3 acute abdomen in pregnancyincluding ectopic SGD	CM12.4 Elderly prob, G, CMS.7, CM17.5 Subcentre G visit	OP4.1 Corneal Ulceration SGDOP 4.4 Corneal Edema (SGD)OP 4.5 Corneal Blindness (SGD)	EN 1.1 phy nose(G) EN4.3 ASOM (D) EN3.1 Otomicroscopy(G)	PH 1.44 [TB-1st line][L]			
D-4	THURSDAY				Examination of respiratory system- Percussion, AuscultationIM 3.5History elicitation, documentation, presentation & demonstration of signs in a case of Pneumonia/consolidation	Thyroid Gland – Anatomy, Physiology, Hypo & Hyperthyroidism; Lecture; SU 22.1 Case Presentation: Hernia Seminar; Discussion & Doubt Clearing; SU 22.2 Case Taking: Thyroid Swelling – History & Examn; Lecture/SGD; SU 22.3	OG 9.4 GTD SDG and OG 9.5 Hyperemesis SGD	CM19.1, EML, 5; CM 13.1 Disaster, G; CMS.8; CM 17.5 Anganwadi G visit	OP 4.6Keratoplasty (L) OP 4.9 Eye Donation /eye Banking (SGD)	EN1.1PHY swallo/resp(G) EN4.5 OME (G)EN4.10 Myringotomy (G)	Tuberculosis; MI 6.1, 8.16 - L	PH 1.45 [drugs in DR TB] [L]	PA 26.4 Morphology and complic of TB, G	
D-5	FRIDAY				IM 5.6,16.4,5.10, 16.5Symptomatology & history taking in different types of Gastrointestinal diseases, Examination of abdomen IM 3.5 , 5.1 History elicitation, documentation, presentation & demonstration of signs in a case of Asthma/COPD *Self learning by students - Bilirubin metabolism and biochemical basis of hyperbilirubinemia	Thyroid Swellings – Benign & Malignant; Lecture; SU 22.2,2.4 Demonstration: Exmn of Thyroid Swelling; DOAP; SU 22.3 Case Presentation: Thyroid Swelling Seminar; Discussion & Doubt Clearing; SU 22.3	OG 10.11 -Multiple pregnancy SGD OG 10.1 APM SGD	CM 13.3 Manmade disaster, G; CM6.1 Epi 1 G D	OP 3.8Foreign body Removal (DOAP) OP 3.9 Instillation of Drops (DOAP) OP 4.8	EN 4.2 Ext ear dis (G) EN4.6 Discharging ear (G) EN4.5 Syringing (D)	Formative Assessment	PA 17.2 BMA & BM8, G Nonaligned session	PH1.15[Skeletal muscle relaxants][i] Nonaligned sesion	

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11	MONDAY	Clinical postings 4 Weeks each in Medicine,Surgery,O & G,Community Medicine,Ortho & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM17.2,18.3,19.3Symptomatology & history taking in common Neurological disorders - Stroke, epilepsy,migraine, peripheral neuropathyand myelopathyIM 3.5History elicitation, documentation, presentation & demonstration of signs in a case of pleural effusion/pneumothorax	Breast – Anatomy, Benign Breast Diseases; Lecture; SU 25.1,2.5 Case Taking: Breast Lump – History & Examination; Lecture/SGD; SU 25.5 Demonstration: Exmn of Breast & Axilla; DOAP; SU 25.5 Ethics in General Surgery; Lecture; AETCOM	OG 13.1 Normal labour - mechanism , stages and monitoring SGD and DOAP	CM13.4. National Disaster Authority, G; CM6.2 stat1 D	OP 6.6 Conditions affecting Anterior Chamber (L) OP 6.2Iridocyclitis (SGD) OP 6.7 Depth of anterior chamber (SGD) OP 6.4 Hyponym/Hyphaema (SGD)	EN1.1 Anat Mastoid(G) EN4.7 COM Mucosal (D) EN4.10 Myringoplasty(G)& EN4.11 Cor. Mastoidectomy (G)	PA16.4,Acq HA, L				
D-2	TUESDAY				Examination of Higher mental functions and a brief description of common clinical situations affecting cognitionIM 5.6,16.5History elicitation, documentation, presentation & demonstration of signs in a case of Chronic liver disease, Cirrhosis & portal hypertension	Tumors of The Breast; Lecture; SU 25.3 Case Presentation: Breast Lump; Seminar: Diagnosis & Doubt Clearing; SU 25.5 Investigations: Thyroid & Breast Swellings; SGD; SU 22.3, 25.3	OG 14.2. Conduct of labour SGD and Skill lab training	CM 19.2 Essential medicine, 5; CM 14.1, Hosp waste G ; CM6.3 stat2 D	OP 6.1Granulomatous /Nongranulomatous Uveitis (SGD)OP6.8Investigation for Uveitis	EN4.12 Hearing loss(G) EN4.8 COM squamosal (G) EN4.11 R &MR Mastoidectomy(G)			Mycology; MI 1.1,1.2- D, Candidiasis MI1.1- G PA 13.5, Bid pic anemia, PA 14.3, HMA PS PA 15.3, MacroP5, D PH 1.15,1.16 Skeletal muscle relaxants]](G)		
D-3	WEDNESDAY				Examination of cranial nerves 1 to 6 and common clinical scenarios affecting themIM 3.8,18.4,18.5,18.7History elicitation, documentation, presentation & demonstration of signs in a case of stroke- Hemiplegia,Facial palsy, Aphasia	Salivary Gland Swelling & Other Neck Swellings; Lecture; SU 21.1 Case Taking: Salivary Gland, Other Neck Swellings; Lecture/SGD; SU 21.1 Demonstration: Exmn of Neck Swellings & Salivary Glands; DOAP; SU 21.1 Acute Abdomen; Lecture; SU 28.3,28.15,29.4,29.5	OG 37.1 Cesarean section SGD OG 19.1 Puerperium and OG 36.2 AN/PN/FW clinics SGD and site visit	CM 14.3 Hosp waste laws G; CM6.4, stat3 D	OP 7.1Anatomy /metabolism lens (L)OP 7.2Cataract (SGD)	EN4.19 Vertigo (G) EN4.22 Nasal obstruction (D) EN3.2 DNE (D)	PH1.16[Autacoids][L]			Pertussis; MI 6.1- S	
D-4	THURSDAY				Examination of cranial nerves 7 to 12 and common clinical scenarios affecting themIM 3.9,18.4History elicitation, documentation, presentation & demonstration of relevant physical signs in a case of Anemia	Chronic Abdomen & Abdominal Mass; Lecture; SU 28.4 Case Taking: Abdominal Mass; Lecture/SGD; SU 28.9 Demonstration: Exmn of Abdomen; DOAP; SU 28.18 Counselling & Consent in General Surgery; Lecture; AETCOM	OG 17.1 and OG 17.2 - Lactation - SGD and DOAP and Skill lab	CM 19.3 Counterfeit Med, 5; CM 15.1 Mental health, G; CM6.4, stat4 D	OP 7.4Cataract surgery steps and complication (SGD)	EN 4.30 Epistaxis (G)& EN 2.13 ANP(D) EN4.23 DNS (D) EN4.24 Septoplasty (G)	Immunify;MI 1.7- L	PH1.16[Autacoids][L]	PA 16.3, Sickle cell and thal, G		

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D-5	FRIDAY				IM18.5, 19.Examination of motor system - Bulk, Tone, Power & reflexes and clinical situations affecting these parameters!M25.5History elicitation, documentation, presentation & demonstration of signs in a case of hematological malignancies or a case of hepatosplenomegaly & lymphadenopathy	Skin & S/c Infections, Surgical Site Infections, Antibiotics; Lecture; SU 18.1, 6.1, 6.2 Case Presentation: Abdominal Lump; Seminar; Discussion & Doubt Clearing; SU 28.9 Demonstrate & Observe: Incision & Drainage; DOAP; SU 18.1	OG 16.1 PPH SGD and Skill lab	CM15.2 MH warning signs G; CM6.4, stat5 D	OP 7.5Team for cataract surgery (DOAP) OP 7.6 Informed consent / Counsel of patients (DOAP)	EN 4.2 Allergic Rhinitis(G) EN4.25 Nasal polyp(D) EN4.25 FESS (G)			PA17.1 Aplastic anemia, L	PH1.16[Autacoids][L]			
					IM19.4Examination of Cerebellar signs and Gait and Common clinical situations affecting gait and balance!M11.7.11.History elicitation, documentation, presentation & demonstration of signs in a case of Chronic Diabetes Mellitus with long term complications		OG 22.1 vaginal discharge - physiological and pathological SGD	CM19.7, Sources stat, S; CM 15.3 MH prog., G; CM6.4, stat6 D	Normal fundus /features and technique of examination (L)(DOAP)		Tetanus; MI 4.1						
D-6	SATURDAY	PA 16.3, Sickle cell and thal1&2, L	Ocular infections; MI 1.1-G	FM SGD 2.8									6	7			
12	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Mediilne,Surgery,O & G			Examination of sensory system and signs of meningeal irritation and Common causesand different patterns of sensory loss & Conditions producing meningism!M10.1,10.7,10.10.History elicitation, documentation, presentation & demonstration of signs in a case of Chronic kidney Failure	POAD & Gangrene; Lecture: SU 27.1, 27.4 Case Taking; POAD: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: POAD; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 2.1 Anatomy of FGT - Lecture and OG 31.1 supports of the uterus - Lecture	CM16.2 Planning cycle, G; CM 7.3, CM7.6 Epi2 G D	OP 8.1Vascular occlusions of retina (L)	EN1.1 Ana. Nasophx EN 4.25 Adenoid (D) EN4.40 Adenoectomy (G)	PA 18.1 WBC nonneop, L						
D-2	TUESDAY				IM17.4, 18.3Symptomatology, history taking and relevant physical examination in renal diseases- Acute Kidney Injury; Chronic Kidney Disease!M12.6,12.7History elicitation, documentation, presentation & demonstration of signs in a case of Thyrotoxicosis/hypothyroidism	Varicose Veins & DVT; Lecture; SU 27.6 Case Taking; Varicose Veins: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: Varicose Veins; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 3.1 pHYSIOLOGY OF OVULATION - LECTURE with OG 28.3 ovulation - Lecture	CM18.1. International health, S; CM 16.3 Mx, G; CM7.5, Epi 3 G D	OP 8.4Treatment Modalities of Retinal diseases (L)	EN1.1 Ana.Tonsil EN 4.39 Tonsilitis (D) EN4.40 Tonsillectomy (G)	CM1.5 Prevention, intervention	Hand hygiene & PPE; MI 8.7-D PA 16.5 PS diff HA, G Biomedical waste; MI 8.5,8.6 S PH1.12,2.4[Dose calculation][D]					
D-3	WEDNESDAY				IM 10.1, 10.7, 10.12Symptomatology, history taking and relevant physical examination in Rheumatological disorders- Seropositive and seronegative arthropathies!M7.4,7.6,9.7,10.History elicitation, documentation, presentation & demonstration of signs in a case of Rheumatoid arthritis/ SLE/other rheumatologic disorders	Scrotal Swellings; Lecture; SU 30.2, 30.3, 30.4, 30.5, 30.6 Case Taking Scrotal & Inguinoscrotal Swellings: History & Exmn; Lecture/SGD; SU 30.2, 30.3, 30.4, 30.5, 30.6 Case Presentation: Scrotal & Inguinoscrotal Swellings; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 30.2, 30.3, 30.4, 30.5, 30.6	OG 23.1, 23.2 and 23.3 NORMAL and ABNORMAL puberty - Lecture	CM 16.4 health plan Ind, G; CM7.5, Epi4 G D	OP 8.2 Laser Therapy in Retina (SGD)(DOAP)	EN4.47Stridor (G) EN4.50 Tracheostomy(G)	PH1.16[Autacoids][L]						
D-4	THURSDAY				IM 7.4, 7.6, 7.9, 7.10Common Acid Base Disturbances encountered in clinical practice and basic general approach to such situations!M6.7History elicitation, documentation, presentation & demonstration of signs in a case of HIV-AIDS	Burns; Lecture; SU 4.1, 4.2 Skin Tumours; Lecture; SU 18.2 End-Posting Examination: OSCE	OG 35.1 History taking in gyne with clinical exam - SGD with SKILL LAB	CM 18.2 I Agencies, S; CM3.4 Waste, G; CM7.5, Epi 5 G D	OP 8.5 Disease of Optic Nerve and Visual Pathway (SGD)OP 2.6Features of Types of Proptosis (SGD)	REVISION & DOUBT CLEARANCE	Antibody; MI 1.8-L	PH1.32 [Asthma][L]	PA 18.2 ac leukemia 2, L				
D-5	FRIDAY				IM 11.7, 11.8Symptomatology , history taking and relevant physical examination in a case of Diabetes Mellitus and the long term complications!M19.3,19.4History elicitation, documentation, presentation & demonstration of signs in a case of Parkinsonism/ movement disorder	Nutrition in Surgical Patient; Lecture; SU 12.1 End-Posting Examination: Viva-Voce	OG 30.1 - PCOS / Hirsutism - SGD	CM13.1 Pollution G; CM 7.8, Epi6 G D	OP 9.1Extra ocular movements (DOAP) OP 9.2Heterotropia (SGD)	END posting exam			PA 18.2 chronic leukemia, L	PH1.19[Opioids][L]			
D-6	SATURDAY	PA 16.3, Sickle cell and thal, L	Ear infections; MI 1.1-G	FM SGD 2.8			OG 35.4 Interpersonal and communicatio skills befitting a physician - SGD, SDL	CM19.4, Pop dynamics, S; CM 7.7 Epi 7 G D	OP 9.4 Avoidable Blindness (L) NPCB / Vision 2020 (L)		Antigen-antibody reaction 1; MI 1.8-L						
<b>FIRST INTERNAL ASSESSMENT</b>																	
13	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Mediilne,Surgery,O & G			IM 1.10, 2.6, 2.9, General introduction to the posting , Symptomatology & history taking in common Cardiovascular diseases!M 1.10, 2.6 History taking in a patient with Chest Pain and symptom analysis in cardiovascular diseases	Homeostasis Metabolic Changes in Injury; Lecture; SU 1.1 General Scheme of History Taking SGD,Taking a Good History; DOAP	OG 8.2 History taking in OBSTETRICS and OB 35.5 Obstetric formula , EDC etc. SGD	CM11.1. Occupational , G; CM5.1 Diet1 G	OP1.1Describe the physiology of vision – (L)	EN1.1 Anat Ext&ME(G), EN 2.1 History Ear (G),EN2.2 Head Lamp use(D)	PA21.2, ITP & hemophilia,1 L						
D-2	TUESDAY				IM 9.4,14.7General examination- Build, Nourishment, Palor, Icterus IM 1.11,13.1,14.2,6,2.7, 2.9History elicitation,documentation and relevant Physical examination in a case of acute coronary syndrome - General and systemic examination, sign elicitation	Metabolic Stress Response to Injury & Surgery; Lecture; SU 1.2 General Scheme of Physical Examination; SGD; Demonstration of Physical Examination; DOAP	OB 8.3 Examination of an obstetric patient and maternal and fetal well being DOAP+SGD	CM20.1 PHE, S; CM 11.2, ESI, G;; CMS 2 Diet 2 G	OP1.3Demonstrate the steps in performing visual acuity assessment for distance & near vision Colour Vision- DOAP	EN1.1 Anat In.Ear (G),EN2.3 Ear examn(D), EN2.4Tuning fork tests(D)			Antigen antibody reactions 1 & 2 demo; PA 18.2 ac & chr leukemia, G MI 1.8,8.15 - 5 PH1.19[Psychopharmacology][G]				
D-3	WEDNESDAY				IM 4.10, 12.7General examination - Cyanosis, Clubbing, Lymphadenopathy, Edema and Thyroid IM 1.10,1.15History taking, documentation and presenting a case of valvular heart disease and bedside demonstration of abnormal heart sounds and murmurs	Theatre Protocol & Safety; Aseptic Techniques, Sterilization & Disinfection; Lecture; SU 14.1.Case Taking: Swelling – History & Exmn; Lecture/SGD; SU 18.3, Features of Common Swellings; Lecture/SGD; SU 18.3, Demonstration: Exmn of Swelling; DOAP; SU 18.3	OG 8.1 and OG 8.8 Ante natal care and ante natal investigations including USG- LECTURE	CM11.3 Occ prev, G; CM 5.4 Diet 3 G D	OP1.2Types of Refractive errors (L)	,EN 1.1 Anat Nose(G), EN 2.1 History Nose(D), EN2.5 Nose & PNS Exam(D)	PH1.19[Opioids][L]			Biomedical Waste MI 8.5,8.6			
D-4	THURSDAY				IM 1.11,1.12, 1.13, 1.14Normal arterial pulse, Blood pressure- method of clinical examination and common abnormalities!M 8.9,8.10,11.7,14.7History taking in a case of metabolic syndrome - Diabetes, Hypertension, Obesity -Risk factors for atherosclerosis	Shock, Principles of Resuscitation; Lecture; SU 2.1,2.2.Case Presentation: Swelling, Demonstrate & Observe, Excision of Swelling; DOAP; SU 18.3 Seminar; Discussion & Doubt Clearing; SU 18.3	OG 2.1 Diagnosis of pregnancy- SGD and OG 8.6 Nutrition in pregnancy SGD	CM20.2 Outbreak, S, CM11.4, Ergo, G; CM5.3 Seminar PEM	OP2.1Lid swellings Cause Symptoms signs (L)	EN1.1 Anat.Pharynx(G), EN 2.1 History Throat(D),EN2.6 Throat examn(D),EN2.7 Neck examn(D),	Antigen-antibody reaction 2; MI 1.8-L	PH1.19[sedative hypnotics][L]	PA21.2, ITP & hemophilia,2 ,L				

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D-6	SATURDAY	PA 18.2 acute leukemia 1, L	Laboratory acquired infections; MI 1.1, 8.1- G	FM SGD 2.11									AETCOM 2.8 sick patient1	AETCOM 2.8 sick patient2	
	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Mediicine,Surgery,O & G		Examination of sensory system and signs of meningeal irritation and Common causeand different patterns of sensory loss & Conditions producing meningism/MI 1.1,10.7,10.12History elicitation, documentation, presentation & demonstration of signs in a case of Chronic kidney Failure	POAD & Gangrene; Lecture; SU 27 1, 27.4 Case Taking; POAD: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: POAD; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 2.1 Anatomy of FGT - <b>Lecture</b> and OG 31.1 supports of the uterus - <b>Lecture</b>	CM16.2 Planning cycle, G; CM 7.3, CM7.6 Epi2 G D	OP 8.1Vascular occlusions of retina (L)	EN1.1 Ana. Nasophx EN 4.25 Adenoid (D) EN4.40 Adenoidectomy (G)	PA 7.1 neoplasia gros & micros, diff b/w benign & malign, G					
D-2	TUESDAY			IM17.4, 18.3Symptomatology, history taking and relevant physical examination in renal diseases- Acute Kidney Injury, Chronic Kidney Disease/MI 2.6,12.7History elicitation, documentation, presentation & demonstration of signs in a case of Thyrotoxicosis/hypothyroidism	Varicose Veins & DVT; Lecture; SU 27 6 Case Taking; Varicose Vein: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: Varicose Veins; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 3.1 PHYSIOLOGY OF OVULATION - <b>LECTURE</b> with OG 28.3 ovulation - <b>Lecture</b>	CM18.1. International health, S; CM 16.3 Mx, G; CM7.5, Epi 3 G D	OP 8.4Treatment Modalities of Retinal diseases (L)	EN1.1 Ana.Tonsil EN 4.39 Tonsillitis (D) EN4.40 Tonsillectomy (G)	CM8.1-8.5 Small px, CP, L			Healthcare associated infections : MI 8.5,8.6,8.7-G; PA 22.2 comp testing, PA 16.7 crossmatch G PH1.22,1.23,5.5,5.6[drug dependence][G]		
D-3	WEDNESDAY			IM 10.1, 10.7, 10.12Symptomatology, history taking and relevant physical examination in Rheumatological disorders- Seropositive and seronegative arthropathies/MI 7.4,7.6,7.9,7.10History elicitation, documentation, presentation & demonstration of signs in a case of Rheumatoid arthritis/ SLE/other rheumatologic disorders	Scrotal Swellings; Lecture; SU 30 2, 30.3, 30.4, 30.5, 30.6 Case Taking; Scrotal & Inguinoscrotal Swellings: History & Exmn; Lecture/SGD; SU 30.2, 30.3, 30.4, 30.5, 30.6 Case Presentation: Scrotal & Inguinoscrotal Swellings; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 30.2, 30.3, 30.4, 30.5, 30.6	OG 23.1, 23.2 and 23.3 NORMAL and ABNORMAL puberty - <b>Lecture</b>	CM 16.4 health plan Ind, G; CM7.5, Epi4 G D	OP 8.2 Laser Therapy in Retina (SGD)/DOAP	EN4.47Stridor (G) EN4.50 Tracheostomy(G)	PH1.19(epilepsy)[L]				FA	
D-4	THURSDAY			IM 7.4, 7.6, 7.9, 7.10Common Acid Base Disturbances encountered in clinical practice and basic general approach to such situations/MI 6.7History elicitation, documentation, presentation & demonstration of signs in a case of HIV-AIDS	Burns; Lecture; SU 4.1, 4.2 Skin Tumours; Lecture; SU 18.2 End-Posting Examination: OSCE	OG 35.1 History taking in gyne with clinical exam - <b>SGD with SKILL LAB</b>	CM 18.2 IHAgencies, S; CM3.4 Waste, G; CM7.5, Epi 5 G D	OP 8.5 Disease of Optic Nerve and Visual Pathway (SGD)/OP 2.6Features of Types of Proptosis (SGD)	REVISION & DOUBT CLEARANCE	Components of immune system 2; MI 1.8- L		PH1.17[Local anaesthetics][L]	PA 7.3 carcinogenesis 1,L		
D-5	FRIDAY			IM 11.7, 11.11Symptomatology , history taking and relevant physical examination in a case of Diabetes Mellitus and the long term complications/MI 3.19.4History elicitation, documentation, presentation & demonstration of signs in a case of Parkinsonism/ movement disorder	Nutrition in Surgical Patient; Lecture; SU 12.1 End-Posting Examination: Viva-Voce	OG 30.1 - PCOS / Hirsutism - <b>SGD</b>	CM13.1 Pollution G; CM 7.8, Epi6 G D	OP 9.1 Extra ocular movements (DOAP) OP 9.2Heterotropia (SGD)	END posting exam			PA 7.3 carcinogenesis 2,G	PH1.18 [General Anaesthetics][L]		
						OG 35.4 Interpersonal and communicatio skills befitting a physician - <b>SGD, SDL</b>	CM19.4, Pop dynamics, S; CM 7.7 Epi 7 G D	OP 9.4 Avoidable Blindness (L) NPCB / Vision 2020 (L)		Immune response; MI 1.8- L					
D-6	SATURDAY	PA 21.1 n hemostasis, G	Choosing appropriate lab test; MI 8.13- G	FM SGD 2.14								AETCOM 2.8 sick patient3	10		
17	DAY					Surgery	O&G	CM	Ophth	ENT					
WEEK-1 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Mediicine,Surgery,O & G		IM 1.10, 2.6, 2.9, General introduction to the posting , Symptomatology & history taking in common Cardiovascular diseases/MI 1.10, 2.6History taking in a patient with Chest Pain and symptom analysis in cardiovascular diseases	Homeostasis Metabolic Changes in Injury; Lecture; SU 1.1 General Scheme of History Taking SGD,Taking a Good History; DOAP	OG 8.2 History taking in OBSTETRICS and OB 35.5 Obstetric formula , EDC etc. <b>SGD</b>	CM11.1. Occupational , G; CM5.1 Diet1 G	OP1.1Describe the physiology of vision – (L)	EN1.1 Anat Ext&ME(G), EN 2.1 History Ear (G),EN2.2 Head Lamp use(D)	PA 7.4 paraneop, PA 7.5 immune resp tumr, L					
D-2	TUESDAY			IM 9.14,17General examination- Build, Nourishment, Pallor, Icterus IM 1.11,1.13,1.14,2.6,2.7,2.9History elicitation,documentation and relevant Physical examination in a case of acute coronary syndrome - General and systemic examination, sign elicitation	Metabolic Stress Response to Injury & Surgery; Lecture; SU 1.2 General Scheme of Physical Examination; SGD; Demonstration of Physical Examination; DOAP	OB 8.3 Examination of an obstetric patient and maternal and fetal well being <b>DOAP+SGD</b>	CM20.1 PHE, S; CM 11.2, ESI, G; CMS.2 Diet 2 G	OP1.3Demonstrate the steps in performing visual acuity assessment for distance & near vision Colour Vision - DOAP	EN1.1 Anat In.Ear (G),EN2.3 Ear examn(D), EN2.4Tuning fork tests(D)				Respect for pt samples send to lab; PA 8.1 cytology role, PA 8.2 exfl cyto, G MI 8.11-0, Confidentiality of results; MI 8.14- D PH3.1,3.8,5.3,5.7[Prescription writing, communication][D]		
D-3	WEDNESDAY			IM 4.10, 12.7General examination - Cyanosis, Clubbing, Lymphadenopathy, Edema and Thyroid IM 1.10,1.15History taking, documentation and presenting a case of valvular heart disease and bedside demonstration of abnormal heart sounds and murmurs	Theatre Protocol & Safety; Aseptic Techniques, Sterilization & Disinfection; Lecture; SU 14.1,Case Taking; Swelling – History & Exmn; Lecture/SGD; SU 18.3 Swellings; Lecture/SGD; SU 18.3, Demonstration: Exmn of Swelling; DOAP; SU 18.3	OG 8.1 and OG 8.8 Ante natal care and ante natal investigations including USG - <b>LECTURE</b>	CM11.3 Occ prev, G; CM 5.4 Diet 3 G D	OP1.2Types of Refractive errors (L)	,EN 1.1 Anat Nose(G), EN 2.1 History Nose(D), EN2.5 Nose & PNS Exam(D)	PH1.18 [General Anaesthetics][L]				Viral Gastroenteritis MI 3.1	
D-4	THURSDAY			IM 1.11,1.12, 1.13, 1.14Normal arterial pulse, Blood pressure- method of clinical examination and common abnormalities/MI 8.9,8.10,11.7,14.7History taking in a case of metabolic syndrome - Diabetes, Hypertension, Obesity -Risk factors for atherosclerosis	Shock, Principles of Resuscitation; Lecture; SU 2.1,2.2,Case Presentation: Swelling, Demonstrate & Observe, Excision of Swelling; SU 18.3 Seminar, Discussion & Doubt Clearing; SU 18.3	OG 6.1 Diagnosis of pregnancy- <b>SGD</b> and OG 8.6 Nutrition in pregnancy <b>SGD</b>	CM20.2 Outbreak, S, CM11.4, Ergo, G; CMS.3 Seminar PEM	OP2.1Ili swellings Cause Symptoms signs (L)	EN1.1 Anat.Pharynx(G), EN 2.1 History Throat(D), EN2.6 Throat examn(D),EN2.7 Neck examn(D),	Hypersensitivity 1; MI 1.10-L			PH1.25[ antiplatelets][L]	PA 10.4 Bact inf, G	
D-5	FRIDAY			IM 1.11, 1.12, 1.14Normal Jugular Venous Pulse and Examination of JVP and Common abnormalities IM 4.9,4.10History taking, documentation and presenting a case of fever- bedside demonstration of relevant physical examination	Demonstration: Exmn of Ulcer; DOAP; SU 5.2lecture/SGD; SU 5.1, 5.2 Seminar, Discussion & Doubt Clearing; SU 18.3	OG 7.4 Maternal changes in pregnancy - <b>SGD</b>	CM11.5 Occ prev, G; CMS.4 Diet 4 D	OP2.2 Ld malformations (L)	EN 1.1 Anat PNS(G), EN2.8 Audiogram (G)				PA 10.4 viral inf and fungal G	PH1.25[ fibrinolytics,anticoagulants][L]	
				IM 1.11Examination of Cardiovascular system-Inspection, Palpation IM 1.11,1.13,1.14, 1.15 Bedside Demonstration of signs pertaining to General examination, vital signs and CVS - Revision *Self learning by students- Rheumatic fever, Diabetes, hypertension, obesity, dyslipidemia- criteria for diagnosis of each		OG 5.2 maternal high risk factors and verifying immunization status <b>SGD</b> and OG 5.1 Pre conceptional counseling <b>SGD</b>	CM12.1 Geriatric, G; CMS.4 Diet 5 D	OP2.3 Demonstrate regurgitation test, Epilation , (L),DOAP		Hypersensitivity 2; MI 1.10-L					

D-6	SATURDAY	PA 21.3, diff platelet d/s frm clotting d/s, G	Vector borne infections; MI 1.8.1-G	FM SGD 2.17									11	12			
													18				
WEEK-2 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine,Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G	IM 1.11, 1.15 Examination of Cardiovascular system - Percussion, Auscultation IM 3.4 History elicitation, documentation and bed side presentation in a patient presenting with respiratory symptoms	Wound Healing; Lecture; SU 5.1, 5.3 Case Presentation: Ulcer Seminar; Discussion & Doubt Clearing; SU 5.2 Dressing a Wound; DOAP; SU 5.2, 17.7	OG 4.1 Development of fetus and placenta <b>LECTURE</b>	CM12.2, Elderly prob, G, CM5.5, CM17.5 PHC G visit	OP 3.4, 3.5 Trachoma ( SGD); Vernal Conjunctivitis ( SGD)	EN1.1 Pharyngitis(G) EN2.9 radiology (G), EN2.10 Common ENT instruments(G)	PA 10.4 protoz & helmin inf, S								
D-2	TUESDAY		IM 3.4, 3.5 Symptomatology & history taking in common Respiratory diseases IM 3.5 Bedside demonstration of physical examination of respiratory system	FIRST AID; DOAP; SU 17.1 Sutures, Knots & Needles; Lecture/SGD; SU 14.3 Demonstrate & Observe: Aseptic Techniques, Suturing Technique; DOAP; SU 14.4	OG 4.3 Demography and vital statistics: still birth and abortions - SGD and OG 9.1 Early preg complications ( miscarriages ) SGD	CM20.3 health event, S; CM12.3 Elderly prev, G, CM 5.6 (seminar nutr. Prog)	OP 3.6 Pterygium (L)	EN1.1 Pharyngitis(G), EN4.1 Otitis media (G), EN4.4 TM(D)	CM 8.1-8.5 MMR, L				Staphylococcal infections ; MI 4.2,4.3- G ; PA 8.3 cyto slide , DPH 1.35[Anemia][G]				
D-3	WEDNESDAY		Examination of Respiratory System- Inspection, palpation IM 1.8.1, 9.1, 10 History taking & demonstration of signs in a case of rheumatic heart disease and complications like Atrial fibrillation, pulmonary edema and/ or infective endocarditis	Hernia; Lecture; SU 28.1 Case Taking: Hernia - History & Exmn; Lecture/SGD; SU 28.2 Demonstration: Exmn of Hernia; DOAP; SU 28.2 Inguino-Scrotal Swellings; Lecture; SU 28.1	OG 12.1, 12.3, 12.4 Medical disorders in pregnancy HTN, diabetes, heart disease - basics - SGD OG 9.3 acute abdomen in pregnancy including ectopic SGD	CM12.4 Elderly prob, G, CM5.7, CM17.5 Subcentre G visit	OP 4.1 Corneal Ulceration SGD OP 4.4 Corneal Edema ( SGD ) OP 4.5 Corneal Blindness ( SGD )	EN 1.1 pharyngitis(G) EN4.3 ASOM (D) EN3.1 Otomicroscopy(G)	PH1.25[anticoagulants][L]								
D-4	THURSDAY		Examination of respiratory system- Percussion, Auscultation IM 3.5 History elicitation, documentation, presentation & demonstration of signs in a case of Pneumonia/consolidation	Thyroid Gland – Anatomy, Physiology, Hypo & Hyperthyroidism; Lecture; SU 22.1 Case Presentation: Hernia - History & Exmn; Lecture/SGD; SU 22.2 Case Presentation & Doubt Clearing; SU 28.2 Case Taking: Thyroid Swelling – History & Exmn; Lecture/SGD; SU 22.3	OG 9.4 GTD SGD and OG 9.5 Hyperemesis SGD	CM19.1, EML, S; CM 13.1 Disaster, G; CMS.8; CM 17.5 Anganwadi G visit	OP 4.6 Keratoconjunctivitis (L) OP 4.9 Eye Donation / eye Banking ( SGD )	EN 1.1 PHARYNGITIS(G) EN4.5 OME (G) EN4.10 Myringotomy (G)	Autoimmunity; MI 1.10-L				PA 9.1 mech immunity, PA 9.2 hypersens reac, S				
D-5	FRIDAY		IM 5.6,16.4,5.10, 16.5 Symptomatology & history taking in different types of Gastrointestinal diseases, Examination of abdomen IM 3.5, 5.1 History elicitation, documentation, presentation & demonstration of signs in a case of Asthma/COPD *Self learning by students- Bilirubin metabolism and biochemical basis of hyperbilirubinemia	Thyroid Swellings - Benign & Malignant; Lecture; SU 22.2,22.4 Demonstration: Exmn of Thyroid Swelling; DOAP; SU 22.3 Case Presentation: Thyroid Swelling Seminar; Discussion & Doubt Clearing; SU 22.3	OG 11.1 - Multiple pregnancy SGD OG 10.1 APH SGD	CM 13.3 Manmade disaster, G; CM6.1 Epi 1 G D	OP 3.8 Foreign body Removal (DOAP) OP 3.9 Instillation of Drops (DOAP) OP 4.8	EN 4.2 Ext ear dis (G) EN4.6 Discharging ear (G) EN4.9 Syringing (D)	PA 9.3 transplant rejn, L				PA 1.24[kidney][L]				
							19										
WEEK-3 D-1	MONDAY	Clinical postings 4 Weeks each in Medicine,Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G	IM17.2,18.3,19.35 Symptomatology & history taking in common Neurological disorders - Stroke, epilepsy,migraine, peripheral neuropathy and myelopathy IM 3.5 History elicitation, documentation, presentation & demonstration of signs in a case of pleural effusion/pneumothorax	Breast – Anatomy, Benign Breast Diseases; Lecture; SU 25.1,25.2 Case Taking: Breast Lump – History & Examination; Lecture/SGD; SU 25.5 Demonstration: Exmn of Breast & Axilla; DOAP; SU 25.6 Ethics in General Surgery; Lecture; AETCOM	OG 13.1 Normal labour - mechanism , stages and monitoring SGD and DOAP	CM13.4. National Disaster Authority, G; CM6.2 stat1 D	OP 6.6 Conditions affecting Anterior Chamber (L) OP 6.2 Iridocyclitis ( SGD ) OP 6.7 Depth of anterior chamber ( SGD ) OP 6.8 Hypopyon/Hyphema ( SGD )	EN1.1 Anorectal fistula(G) EN4.7 COM Mucosal (D) EN4.10 Myringoplasty(G)& EN4.11 Cor. Mastoidectomy (G)	PA 26.1 pneumonia and PA26.2 lung abscess, L								
D-2	TUESDAY		Examination of Higher mental functions and a brief description of common clinical situations affecting cognition IM 5.6,5.10 History elicitation, documentation, presentation & demonstration of signs in a case of Chronic liver disease, Cirrhosis & portal hypertension	Tumors of The Breast; Lecture; SU 25.3 Case Presentation: Breast Lump; Seminar; Discussion & Doubt Clearing; SU 25.5 Investigations: Thyroid & Breast Swellings; SGD; SU 22.3, 25.3	OG 14.2 Conduct of labour SGD and Skill lab training	CM 19.2 Essential medicine, S; CM 14.1, Hosp waste G ; CM6.3 stat2 D	OP 6.1 Granulomatous / Nongranulomatous Uveitis ( SGD ) OP 6.8 Investigation for Uveitis	EN4.12 Hearing loss(G) EN4.8 COM squamous (G) EN4.11 R & MR Mastoidectomy(G)	FM 2.21 L				Streptococcal infections ; MI 4.3-G ; PA 26.1 pneumonia, G PH3.1,3.8,5.3,5.7[Prescription writing, communication][D]				
D-3	WEDNESDAY		Examination of cranial nerves 1 to 6 and common clinical scenarios affecting them IM 3.8,4.18.4,18.5,18.7 History elicitation, documentation, presentation & demonstration of signs in a case of stroke- Hemiplegia,Facial palsy, Aphasia	Salivary Gland Swelling & Other Neck Swellings; Lecture; SU 21.1 Case Taking: Salivary Gland, Other Neck Swellings; Lecture/SGD; SU 21.1 Demonstration: Exmn of Neck Swellings & Salivary Glands; DOAP; SU 21.1 Acute Abdomen; Lecture; SU 28.3,28.15,29.4,29.5	OG 37.1 Cesarean section SGD OG 19.1 Puerperium and OG 36.2 AN/PN/FW clinics SGD and site visit	CM 14.3 Hosp waste laws G; CM6.4, stat3 D	OP 7.1 Anatomy / metabolism lens (L) OP 7.2 Cataract ( SGD )	EN4.19 Vertigo (G) EN4.22 Nasal obstruction (D) EN3.2 DNE (D)	PH1.26[RAAS][L]				Bacterial Pharyngitis MI 6.1				
D-4	THURSDAY		Examination of cranial nerves 7 to 12 and common clinical scenarios affecting them IM 3.9,4.18 History elicitation, documentation, presentation & demonstration of relevant physical signs in a case of Anemia	Chronic Abdomen & Abdominal Mass; Lecture; SU 28.4 Case Taking: Abdominal Mass; Lecture/SGD; SU 28.9 Demonstration: Exmn of Abdomen; DOAP; SU 28.18 Counselling & Consent in General Surgery; Lecture; AETCOM	OG 17.1 and OG 17.2 - Lactation - SGD and DOAP and Skill lab	CM 19.3 Counterfeit Med, S; CM 15.1 Mental health, G; CM6.4, stat4 D	OP 7.4 Cataract surgery steps and complication ( SGD )	EN 4.30 Epistaxis (G) EN 2.13 ANP(D) EN4.23 DNS (D) EN4.24 Septoplasty (G)	Immunodeficiency disorders; MI 1.10-L				PH1.28[angina][L]	PA 26.6 pleural dis, PA26.7 mesothelioma, G			
D-5	FRIDAY		IM18.5, 19.4 Examination of motor system - Bulk, Tone, Power & reflexes and clinical situations affecting these parameters IM 2.5 History elicitation, documentation, presentation & demonstration of signs in a case of hematological malignancies or a case of hepatosplenomegaly & lymphadenopathy	Skin & S/c Infections, Surgical Site Infections, Antibiotics; Lecture; SU 18.1, 6.1, 6.2 Case Presentation: Abdominal Lumps; Seminar; Discussion & Doubt Clearing; SU 28.9 Demonstrate & Observe: Incision & Drainage; DOAP; SU 18.1	OG 16.1 PPH SGD and Skill lab	CM15.2 MH warning signs G; CM6.4, stat5 D	OP 7.5 Team for cataract surgery (DOAP) OP 7.6 informed consent / Counsel of patients (DOAP)	EN 4.27 Allergic Rhinitis(G) EN4.25 Nasal polyp(D) EN4.25 FESS (G)					PH1.28[angina][L]				
			IM19.4 Examination of Cerebellar signs and Gait and Common clinical situations affecting gait and balance IM 11.7,11.8 History elicitation, documentation, presentation & demonstration of signs in a case of Chronic Diabetes Mellitus with long term complications		OG 22.1 vaginal discharge - physiological and pathological SGD	CM19.7, Sources stat, S; CM 15.3 MH prog., G; CM6.4, stat6 D	Normal fundus / features and technique of examination (L)(DOAP)		Transplant & cancer immunology; MI 1.11-L								
D-6	SATURDAY	PA 22.1 blood gp sys, S	Rational use of investigations; MI 8.13-G	FM 8.7 8.10 G									AETCOM 2.8 sick patient 4	AETCOM 2.8 sick patient 5			
							20. INTEGRATION WEEK -INFECTIVE ENDOCARDITIS										
WEEK-4 D-1	MONDAY				Examination of sensory system and signs of meningeal irritation and Common cause and different patterns of sensory loss & Conditions producing meningitis/ meningoencephalitis IM 1.1,10.7,10.12 History elicitation, documentation, presentation & demonstration of signs in a case of Chronic kidney Failure	POAD & Gangrene; Lecture; SU 27.1, 27.4 Case Taking; POAD; History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: POAD; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 2.1 Anatomy of FGT - Lecture and OG 31.1 supports of the uterus - Lecture	CM16.2 Planning cycle, G; CM 7.3, CM7.6 Epi2 G D	OP 8.1 Vascular occlusions of retina (L)	EN1.1 Ana. Nasopharynx EN 4.25 Adenoid (D) EN4.40 Adenolectomy (G)	PA 27.4 etiology, pathology and compli of rheumatic fever,L						

D-2	TUESDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM17.4, 18.3Symptomatology, history taking and relevant physical examination in renal diseases- Acute Kidney Injury, Chronic Kidney DiseaseIM12.6,12.7History elicitation, documentation, presentation & demonstration of signs in a case of Thyrotoxicosis/hypothyroidism	Varicose Veins & DVT; Lecture; SU 27.6 Case Taking: Varicose Veins: History & Examn; Lecture/SGD; SU 27.2 Case Presentation: Varicose Veins; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 3.1 pHYSIOLOGY OF OVULATION - LECTURE with OG 28.3 ovulation - Lecture	CM18.1. International health, S; CM 16.3 Mx, G; CM7.5, Epi 3 G D	OP 8.4Treatment Modalities of Retinal diseases (L)	EN1.1 Ana.Tonsil EN 4.39 Tonsillitis (D) EN4.40 Tonsillectomy (G)	CM 8.1-5 Influenza, SARS, L, Nonaligned session	Gram staining 2;MI 1.2- D Sepsis, CRBSI, RF, IE; MI 2.3,8.15- D PH3.1,3.2[Prescription writing, audit][D]		
D-3	WEDNESDAY				IM 10.1, 10.7, 10.12Symptomatology, history taking and relevant physical examination in Rheumatological disorders- Seropositive and seronegative arthropathiesIM7.4,7.6,7.9,10History elicitation, documentation, presentation & demonstration of signs in a case of Rheumatoid arthritis/ SLE/other rheumatologic disorders	Scrotal Swellings; Lecture; SU 30.2, 30.3, 30.4, 30.5, 30.6 Case Taking: Scrotal & Inguinoscrotal Swellings- History & Examn; Lecture/SGD; SU 30.2, 30.3, 30.4, 30.5, 30.6 Case Presentation: Scrotal & Inguinoscrotal Swellings; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 30.2, 30.3, 30.4, 30.5, 30.6	OG 23.1, 23.2 and 23.3 NORMAL and ABNORMAL puberty - Lecture	CM 16.4 health plan Ind, G; CM7.5, Epi4 G D	OP 8.2 Laser Therapy in Retina (SGD)(DOAP)	EN4.47Stridor (G) EN4.50 Tracheostomy(G)	PH1.29[Heart failure][L]			
D-4	THURSDAY				IM 7.4, 7.6, 7.9, 7.10Common Acid Base Disturbances encountered in clinical practice and basic general approach to such situationsIM6.7History elicitation, documentation, presentation & demonstration of signs in a case of HIV-AIDS	Burns; Lecture; SU 4.1, 4.2 Skin Tumours; Lecture; SU 18.2 End-Posting Examination: OSCE	OG 35.1 History taking in gyne with clinical exam - SGD with SKILL LAB	CM 18.2 IHAgencies, S; CM3.4 Waste, G; CM7.5, Epi 5 G D	OP 8.5 Disease of Optic Nerve and Visual Pathway (SGD)OP 2.6Features of Types of Proptosis (SGD)	REVISION & DOUBT CLEARANCE	Infective endocarditis, ARF; MI 2.1,2,2-L	PH1.29[Heart failure][L]	PA 27.4 morphology of RHD,G	
D-5	FRIDAY				IM 11.7, 11.8Symptomatology , history taking and relevant physical examination in a case of Diabetes Mellitus and the long term complicationsIM19.3,19.4History elicitation, documentation, presentation & demonstration of signs in a case of Parkinsonism/ movement disorder	Nutrition in Surgical Patient; Lecture; SU 12.1 End-Posting Examination: Viva-Voce	OG 30.1 - PCOS / Hirsutism - SGD	CM13.1 Pollution G; CM 7.8, Epi6 G D	OP 9.1Extra ocular movements (DOAP) OP 9.2Heterotropia (SGD)	END posting exam	Formative Assessment	PA 27.6 etiology , gross & micros of lt, G	PH1.27[ Hypertension][L] Nonaligned session	
							OG 35.4 Interpersonal and communicatio skills befitting a physician - SGD, SDL	CM19.4. Pop dynamics, S; CM 7.7 Epi 7 G D	OP 9.4 Avoidable Blindness (L) NPCB / Vision 2020 (L)		Bloodstream infections; MI 2.1,2,2, 2.4 - L			
D-6	SATURDAY	PA 22.4 TTD, PA 22.6 autologous,L	Enteric fever 1;MI 3.3- L Enteric fever 2;MI 3.3- L	AETCOM 2.2 (2HRS)Bioethics							AETCOM 2.8 sick patient 6	13		

21	MONDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G													
D-2	TUESDAY				IM 1.10, 2.6, 2.9, General introduction to the posting , Symptomatology & history taking in common Cardiovascular diseases IM 1.10, 2.6History taking in a patient with Chest Pain and symptom analysis in cardiovascular diseases	Homeostasis Metabolic Changes in Injury; Lecture; SU 1.1 General Scheme of History Taking SGD,Taking a Good History; DOAP	OG 8.2 History taking in OBSTETRICS and OB 35.5 Obstetric formula , EDC etc. SGD	CM11.1. Occupational , G; CMS.1 Diet1 G	OP1.1Describe the physiology of vision - (L)	EN1.1 Anat Ext&ME(G), EN 2.1 History Ear (G),EN2.2 Head Lamp use(D)	PA 19.1 LNE, G				
D-3	WEDNESDAY				IM 9.4,14.7General examination- Build, Nourishment, Pallor, Icterus IM 1.11,1.13,1.14,2.6,2.7,2.9History elicitation,documentation and relevant Physical examination in a case of acute coronary syndrome - General and systemic examination, sign elicitation	Metabolic Stress Response to Injury & Surgery; Lecture; SU 1.2 General Scheme of Physical Examination; SGD; Demonstration of Physical Examination; DOAP	OB 8.3 Examination of an obstetric patient and maternal and fetal well being DOAP+SGD	CM20.1 PHE, S; CM 11.2, ESL, G;, CMS.2 Diet 2 G	OP1.3Demonstrate the steps in performing visual acuity assessment for distance & near vision Colour Vision - DOAP	EN1.1 Anat.In.Ear (G),EN2.3 Ear examn(D), EN2.4Tuning fork tests(D)	Fm 2.2 I		Sterilization & disinfection; PA 26.5 occup lung dis, G MI 1.5 - G, CSSD visit; MI 1.5 - G PH1.27, 4.2 [effects of drugs on BP- CAL][D]		
D-4	THURSDAY				IM 4.10, 12.7General examination - Cyanosis, Clubbing, Lymphadenopathy, Edema and Thyroid IM 1.10,1.13History taking, documentation and presenting a case of valvular heart disease and bedside demonstration of abnormal heart sounds and murmers	Theatre Protocol & Safety; Aseptic Techniques, Sterilization & Disinfection; Lecture; SU 14.1 Case Taking: Swelling - History & Examn; Lecture/SGD; SU 18.3 Features of Common Swellings; Lecture/SGD; SU 18.3, Demonstration: Examn of Swelling; DOAP; SU 18.3	OG 8.1 and OG 8.8 Ante natal care and ante natal investigations including USG - LECTURE	CM11.3 Occ prev, G; CM 5.4 Diet 3 G D	OP1.2Types of Refractive errors (L)	,EN 1.1 Anat Nose(G), EN 2.1 History Nose(D), EN2.5 Nose & PNS Exam(D)	PH1.27[ Hypertension][L]		Vulvo vaginitis MI 7.2		
D-5	FRIDAY				IM 1.11,1.12, 1.13, 1.14Normal arterial pulse, Blood pressure- method of clinical examination and common abnormalitiesIM 8.9,10,11,7.14.7History taking in a case of metabolic syndrome - Diabetes, Hypertension, Obesity - Risk factors for atherosclerosis	Shock, Principles of Resuscitation; Lecture; SU 2.1,2,Case Presentation: Swelling, Demonstrate & Observe; Excision of Swelling; DOAP; SU 18.3 Seminar; Discussion & Doubt Clearing; SU 18.3	OG 6.1 Diagnosis of pregnancy- SGD and OG 8.6 Nutrition in pregnancy SGD	CM20.2 Outbreak, S, CM11.4, Ergo, G; CMS.3 Seminar PEM	OP2.1Lid swellings Cause Symptoms signs (L)	EN1.1 Anat.Pharynx(G), EN 2.1 History Throat(D),EN2.6 Throat examn(D),EN2.7 Neck examn(D),	Sterilization & disinfection; MI 1.4 - L	PH1.30[Arrhythmia][L]	PA 27.1 arterisc & atherosc, L		
D-6	SATURDAY	PA 7.2 molecular bs 1 ,L	VHF; MI 1.1- L	FM 11.12.1 G			OG 7.4 Maternal changes in pregnancy - SGD	CM11.5 Occ prev, G; CMS.4 Diet 4 D	OP2.2 Lid malformations (L)	EN 1.1 Anat PNS(G), EN2.8 Audiogram (G)		PA 27.3 arterisc & atherosc, G	PH1.30[Arrhythmia][L]		

D-1	MONDAY				IM 1.11, 1.15Examination of Cardiovascular system - Percussion, AuscultationIM 3.4History elicitation, documentation and bed side presentation in a patient presenting with respiratory symptoms	Wound Healing; Lecture; SU 5.1, 5.3 Case Presentation: Ulcer Seminar; Discussion & Doubt Clearing; SU 5.2 Dressing a Wound; DOAP; SU 5.2, 17.7	OG 4.1 Development of fetus and placenta LECTURE	CM12.2, Elderly prob, G, CMS.5; CM17.5 PHC G visit	OP 3.4, 3.5Trachoma ( SGD),Vernal Conjunctivitis (SGD)	EN1.1 Phy hearing(G) EN2.9 radiology (G),EN2.10 Common ENT instruments(G)	PA 27.2 aneurysm, PA 27.9 cardiomyo, PA27.10 syphilis CVS, G				
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D-2	TUESDAY		IM 3.4, 3.5Symptomatology & history taking in common Respiratory diseasesIM 3.5Beside demonstration of physical examination of respiratory system	FIRST AID; DOAP; SU 17.1 Sutures, Knots & Needles; Lecture/SGD; SU 14.3 Demonstrate & Observe: Aseptic Techniques, Suturing Technique; DOAP; SU 14.4	OG 1.3 Demography and vital statistics still birth and abortions - SGD and OG 9.1 Early preg complications ( miscarriages ) SGD	CM20.3health event, S; CM12.3 Elderly prev, G, CM 5.6 (seminar nutr. Prog)	OP3.6 Ptcrystium (L)	EN1.1 Phy Balance(G),EN4.1. Otagia (G),EN4.4 TM(D)	CM 8.1-8.5 DP & MM, L	Staphylococcal, streptococcal, anaerobic infections; MI 4.1,4.3, PA 19.6 Splenomegaly, G, 19.7 splenomeg, D 8.15, 1.2 - D PH1.34[antidiarrhoeals][G]		
D-3	WEDNESDAY	Clinical postings 4 Weeks each in Medicine Surgery,O & G,Community Medicine,Opthal & ENT & 25 Hrs of Lectures in Mediicine,Surgery,O & G	Examination of Respiratory System- Inspection, palpationIM 1.8,1.9, 1.10History taking & demonstration of signs in a case of rheumatic heart disease and complications like Atrial fibrillation, pulmonary edema and/ or infective endocarditis	Hernia; Lecture; SU 28.1 Case Taking: Hernia - History & Exmn; Lecture/SGD; SU 28.2 Inguino-Scrotal Swellings; Lecture; SU 28.1	OG 12.1, 12.3, 12.4 Medical disorders in pregnancy HTN, diabetes, heart disease - basics - SGD Demonstration: Exmn of Hernia; DOAP; SU OG 9.3 acute abdomen in pregnancyincluding ectopic SGD	CM12.4 Elderly prog, G, CM5.7, CM17.5 Subcentre G visit	OP4.1 Corneal Ulceration SGDOP 4.4 Corneal Edema (SGD)OP 4.5 Corneal Blindness (SGD)	EN 1.1 phy nose(G) EN4.3 ASOM (D) EN3.1 Otomicroscopy(G)	PH1.31[Dyslipidemia][L]			
D-4	THURSDAY		Examination of respiratory system- Percussion, AuscultationIM 5.3History elicitation, documentation, presentation & demonstration of signs in a case of Pneumonia/consolidation	Thyroid Gland – Anatomy, Physiology, Hypo & Hyperthyroidism; Lecture; SU 22.1 Case Presentation: Hernia Seminar; Discussion & Doubt Clearing; SU 22.2 Case Taking: Thyroid Swelling – History & Exmn; Lecture/SGD; SU 22.3	OG 9.4 GTD SGD and OG 9.5 Hyperemesis SGD	CM19.1, EML, 5; CM 13.1 Disaster, G; CM5.8; CM 17.5 Anganwadi G visit	OP 4.6Keratoplasty (L) OP 4.9 Eye Donation/eye Banking (SGD)	EN1.1PHY swallo/resp(G) EN4.5 OME (G)EN4.10 Myringotomy (G)	Gas gangrene; MI 4.1- G	PH1.31[Dyslipidemia][L]	PA 28.2 normal histology, PA28.2 renal failure,G	
D-5	FRIDAY		IM 5.6,16.4,5.10, 16.5Symptomatology & history taking in different types of Gastrointestinal diseases, Examination of abdomen IM3.5 , 5.1History elicitation, documentation, presentation & demonstration of signs in a case of Asthma/COPD *Self learning by students - Bilirubin metabolism and biochemical basis of hyperbilirubinemia	Thyroid Swellings – Benign & Malignant; Lecture; SU 22.2,22.4 Demonstration: Exmn of Thyroid Swelling; DOAP; SU 22.3 Case Presentation: Thyroid Swelling Seminar; Discussion & Doubt Clearing; SU 22.3	OG 11.1 - Multiple pregnancy SGD OG 10.1 APH SGD	CM 13.3 Manmade disaster, G; CM6.1 Epi 1 G D	OP 3.8Foreign body Removal (DOAP) OP 3.9 Instillation of Drops (DOAP) OP 4.8	EN 4.2 Ext ear dis.(G) EN4.6 Discharging ear (G) EN4.9 Syringing (D)		PA28.3 ARF, PA 28.4 CRF, G	PH1.34[antiemetics][L]	
23												
D-1	MONDAY		IM17.2,18.3,19.35ymptomatology & history taking in common Neurological disorders - Stroke, epilepsy,migraine, peripheral neuropathyand myelopathyIM3.5History elicitation, documentation, presentation & demonstration of signs in a case of pleural effusion/pneumothorax	Breast - Anatomy, Benign Breast Diseases; Lecture; SU 25.1,25.2 Case Taking: Breast Lump - History & Examination; Lecture/SGD; SU 25.5 Demonstration: Exmn of Breast & Axilla; DOAP; SU 25.5 Ethics in General Surgery; Lecture; AETCOM	OG 13.1 Normal labour - mechanism , stages and monitoring SGD and DOAP	CM13.4. National Disaster Authority, G; CM6.2 stat1 D	OP 6.6 Conditions affecting Anterior Chamber (L) OP 6.2Iridocyclitis (SGD) OP 6.7 Depth of anterior chamber (SGD) OP 6.4 Hyponyon/Hyphaema (SGD)	EN1.1 Anat Mastoid(G) EN4.7 COM Mucosal (D) EN4.10 Myringoplasty(G)& EN4.11 Cor. Mastoidectomy (G)	PA 28.5 glomerulonep, PA 28.6 IgA neph, L			
D-2	TUESDAY		Examination of Higher mental functions and a brief description of common clinical situations affecting cognitionIM5.6,5.10History elicitation, documentation, presentation & demonstration of signs in a case of Chronic liver disease, Cirrhosis & portal hypertension	Tumors of The Breast; Lecture; SU 25.3 Case Presentation: Breast Lump; Seminar; Discussion & Doubt Clearing; SU 25.5 Investigations: Thyroid & Breast Swellings; SGD; SU 22.3, 25.3	OG 14.2 Conduct of labour SGD and Skill lab training	CM 19.2 Essential medicine, S; CM 14.1, Hosp waste G ; CM6.3 stat2 D	OP 6.1Granulomatous /Nongranulomatous Uveitis (SGD)OP 6.8Investigation for Uveitis	EN4.12 Hearing loss(G) EN4.8 COM squamosal (G) EN4.11 R & MR Mastoidectomy(G)	Fm 2.2 SGD	Anthrax, non venereal treponematoses; MI 4.3, 1.19 G, Actinomycosis, Nocardiosis; PA 23.1 urine analysis, D MI 4.3, 8.13-G PH2.2,5.1ORS-preparation, communication][D]		
D-3	WEDNESDAY			Examination of cranial nerves 1 to 6 and common clinical scenarios affecting themIM18.3,18.4,18.5,18.7History elicitation, documentation, presentation & demonstration of signs in a case of stroke- Hemiplegia,Facial palsy, Aphasia	Salivary Gland Swelling & Other Neck Swellings; Lecture; SU 21.1 Case Taking: Salivary Gland, Other Neck Swellings; Lecture/SGD; SU 21.1 Demonstration: Exmn of Neck Swellings & Salivary Glands; DOAP; SU 21.1 Acute Abdomen; Lecture; SU 28.3,28.15,29.4,29.5	OG 37.1 Cesarean section SGD OG 19.1 Puerperium and OG 36.2 AN/PN/FW clinics SGD and site visit	CM 14.3 Hosp waste laws G; CM6.4, stat3 D	OP 7.1Anatomy /metabolism lens (L)OP 7.2Cataract (SGD)	EN4.19 Vertigo (G) EN4.22 Nasal obstruction (D) EN3.2 DNE (D)	PH1.34[antiemetics][L]		
D-4	THURSDAY			Examination of cranial nerves 7 to 12 and common clinical scenarios affecting themIM9.3,9.4History elicitation, documentation, presentation & demonstration of relevant physical signs in a case of Anemia	Chronic Abdomen & Abdominal Mass; Lecture; SU 28.4 Case Taking: Abdominal Mass; Lecture/SGD; SU 28.9 Demonstration: Exmn of Abdomen; DOAP; SU 28.18 Counselling & Consent in General Surgery; Lecture; AETCOM	OG 17.1 and OG 17.2 - Lactation - SGD and DOAP and Skill lab	CM 19.3 Counterfeit Med, S; CM 15.1 Mental healthh, G; CM6.4, stat4 D	OP 7.4Cataract surgery steps and complication (SGD)	EN 4.30 Epistaxis (G)& EN 2.13 ANP(D) EN4.23 DNS (D) EN4.24 Septoplasty (G)	Non sporing anaerobes; MI 4.1-G	PH 1.34[Acid peptic disease][L]	PA 28.14 renal tumr, PA28.16 urothe tumr, L
D-5	FRIDAY			IM18.5, 19.4Examination of motor system - Bulk, Tone, Power & reflexes and clinical situations affecting these parametersIM25.5History elicitation, documentation, presentation & demonstration of signs in a case of hematological malignancies or a case of hepatosplenomegaly & lymphadenopathy	Skin & S/c Infections, Surgical Site Infections, Antibiotics; Lecture; SU 18.1, 6.1, 6.2 Case Presentation: Abdominal Lump; Seminar; Discussion & Doubt Clearing; SU 28.9 Demonstrate & Observe: Incision & Drainage; DOAP; SU 18.1	OG 16.1 PPH SGD and Skill lab	CM15.2 MH warning signs G; CM6.4, stat5 D	OP 7.5Team for cataract surgery (DOAP) OP 7.6 informed consent / Counsel of patients (DOAP)	EN 4.27 Allergic Rhinitis(G) EN4.25 Nasal polyp(D) EN4.25 FESS (G)		PA 28.14 renal tumr, G	PH 1.34[Acid peptic disease][L]
				IM19.4Examination of Cerebellar signs and Gait and Common clinical situations affecting gait and balanceIM11.7,11.8History elicitation, documentation, presentation & demonstration of signs in a case of Chronic Diabetes Mellitus with long term complications		OG 22.1 vaginal discharge - physiological and pathological SGD	CM19.7, Sources stat, S; CM 15.3 MH prog., G; CM6.4, stat6 D	Normal fundus /features and technique of examination (L)(DOAP)		Viral exanthems 1; MI 4.3- L		
D-6	SATURDAY	PA 7.2 molecular bs 2, L	Malaria 1; MI 2.5,8.16-L	FM 13.1 13.2 G							AETCOM2.5 bioethics 3	AETCOM2.5 bioethics 4
24												
D-1	MONDAY			Examination of sensory system and signs of meningeal irritation and Common causesand different patterns of sensory loss & Conditions producing meningism/MI10.1,10.7,10.12History elicitation, documentation, presentation & demonstration of signs in a case of Chronic kidney Failure	POAD & Gangrene; Lecture; SU 27.1, 27.4 Case Taking: POAD: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: POAD; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 2.1 Anatomy of FGT - Lecture and OG 31.1 supports of the uterus - Lecture	CM16.2 Planning cycle, G; CM 7.3, CM7.6 Epi2 G D	OP 8.1Vascular occlusions of retina (L)	EN1.1 Ana. Nasophx EN 4.25 Adenoid (D) EN4.40 Adenoectomy (G)	PA 34.1 SCC , PA 34.2 BCC, PA34.3 melanoma, L		
D-2	TUESDAY			IM17.4, 18.3Symptomatology, history taking and relevant physical examination in renal diseases- Acute Kidney Injury, Chronic Kidney DiseaseIM2.6,12.7History elicitation, documentation, presentation & demonstration of signs in a case of Thyrotoxicosis/hypothyroidism	Varicose Veins & Ivt; Lecture; SU 27.6 Case Taking: Varicose Veins: History & Exmn; Lecture/SGD; SU 27.2 Case Presentation: Varicose Veins; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 27.2	OG 3.1 pHYLOGY OF OVULATION - LECTURE with OG 28.3 ovulation - Lecture	CM18.1. International health, S; CM 16.3 Mx, G; CM7.5, Epi 3 G D	OP 8.4Treatment Modalities of Retinal diseases (L)	EN1.1 Ana.Tonsil EN 4.39 Tonsillitis (D) EN4.40 Tonsillectomy (G)	CM 8.1-8.5 ARI , Nipah, L	Parasitic infections of skin,soft tissue ; MI 4.2,4.3- G; PA 34.4 Skin tumr, D PH1.34[laxatives, IBD][G]	
D-3	WEDNESDAY			IM 10.1, 10.7, 10.12Symptomatology, history taking and relevant physical examination in Rheumatological disorders- Seropositive and seronegative arthropathiesIM7.4,7.6,7.9,7.10History elicitation, documentation, presentation & demonstration of signs in a case of Rheumatoid arthritis/SLE/other rheumatologic disorders	Scrotal Swellings; Lecture; SU 20.2, 30.3, 30.4, 30.5, 30.6 Case Taking: Scrotal & Inguinoscrotal Swellings; History & Exmn; Lecture/SGD; SU 20.2, 30.3, 30.4, 30.5, 30.6 Case Presentation: Scrotal & Inguinoscrotal Swellings; Seminar & DOAP; Discussion, Demonstration & Doubt Clearing; SU 20.5	OG 23.1, 23.2 and 23.3 NORMAL and ABNORMAL puberty - Lecture	CM 16.4 health plan Ind, G; CM7.5, Epi4 G D	OP 8.2 Laser Therapy in Retina (SGD)?(DOAP)	EN4.47Stridor (G) EN4.50 Tracheostomy(G)	PH1.47[Antimalarial drugs][L]		FA

**GMC KOLLAM**

D-4	THURSDAY	Medicine,Opthal & ENT & 25 Hrs of Lectures in Medicine,Surgery,O & G			IM 7.4, 7.6, 7.9, 7.10 Common Acid Base Disturbances encountered in clinical practice and basic general approach to such situationsIM 6.7 history elicitation, documentation, presentation & demonstration of signs in a case of HIV-AIDS	Burns; Lecture: SU 4.1, 4.2 Skin Tumours; Lecture; SU 18.2 End-Posterior Examination: OSC	OG 35.1 History taking in gyne with clinical exam - SGD with SKILL LAB	CM 18.2 IHA Agencies, S; CM 3.4 Waste, G; CM 7.5, Epi 5 G D	OP 8.5 Disease of Optic Nerve and Visual Pathway (SGD)OP 2.6 Features of Types of Proptosis (SGD)	REVISION & DOUBT CLEARANCE	Viral exanthems 2; MI 4.3- L	PH1.47[Antimalarial drugs][L]	PA 29.3 BPH, PA29.4 ca prost, PA29.5 prostatitis, L	
D-5	FRIDAY				IM 11.7, 11.8 Symptomatology , history taking and relevant physical examination in a case of Diabetes Mellitus and the long term complicationsIM 19.3,19.4History elicitation, documentation, presentation & demonstration of signs in a case of Parkinsonism/ movement disorder	Nutrition in Surgical Patient; Lecture; SU 12.1 End-Posterior Examination: Viva-Voce	OG 30.1 - PCOS / Hirsutism - SGD	CM13.1 Pollution G; CM 7.8, Epi6 G D	OP 9.1 Extra ocular movements (DOAP) OP 9.2 Heterotropia (SGD)	END posting exam		PA 29.4 tests of ca prostate , G	PH1.47[antiprotozoal drugs][L]	
							OG 35.4 Interpersonal and communicatio skills befitting a physician - SGD, SDL	CM19.4, Pop dynamics, S; CM 7.7 Epi 7 G D	OP 9.4 Avoidable Blindness (L) NPCB / Vision 2020 (L)		Superficial & subcutaneous fungal infections; MI 4.3,8.15- G			
D-6	SATURDAY	PA 9.4 autoimm, PA 9.7 others, L	Visceral leishmaniasis, trypanosomiasis; MI2.5, 8.16- L	FM 14.7 S								AETCOM2.5 bioethics 5	14	
<b>SECOND INTERNAL ASSESSMENT</b>														
25	DAY				Paed	Ortho	Resp med	Psy	RD	Dermat				
WEEK-1 D-1	MONDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology			P E1.1Growth Definition, Factors affecting GP E1.2patterns in growth GP E1.3.assessment of growthGP E1.4anthropometryG	OR 2.1Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of ClavicleLecture, Small Group Discussion, Bed Side Clinic	CT 1.1, 1.2 epidemiology of TB,pathogenesis and natural history of TB 1 HR G CT 1.5 History discussion on TB G 2 HR	PS1.1to1.4 Rapport, Empathy, Confidentiality, News breaking Alcohol and Substance Use Disorders LGDB	RD1.1 and RD1.12 radiation and radiation protection and effects of radiation in pregnancy K KH Y Lecture,Demonstration	DR9.1 G	PA 27.5 risk fact , etiopathology, pathophysio of IHD, L			
D-2	TUESDAY				P E1.5normal development - definitionGP E1.7perform development assessmentGP E5.11visit to cdcG	OR2.2Describe and discuss the mechanism of Injury, clinical features, Investigations and plan management of fractures of proximal HumerusLecture, Small Group Discussion, Bed Side Clinic	CT 1.3, 1.4, TB Co-infection with HIV, and comorbid DM 1 HR G CT 1.6, 1.15 Clinical examination in TB and sequelae 2 HR	PS3.1&3.6 Introduction to Psychiatry and Etiology LGDB	RD1.2 history and radiological equipments S SH Y Lecture,Demonstration	DR9.1 G	Fungal infections of skin,soft tissue ; MI 4.3 - G; PA 27.8 Interpret abn in cardiac fn in ACS, D PH1.55[national health programmes][G]			
D-3	WEDNESDAY				P E5.11visit to cdrGP F6.1adolescence - definition stagesGP E6.2physiologic changes in adolescenceGP E7.1breast feeding - practicesG	OR2.3Select, prescribe and communicate appropriate medications for relief of joint PainLecture, Small Group Discussion, Bed Side Clinic	CT 1.11,1.14 interpret pleural fluid results,ATT 1HR G CT 1.8 Differential diagnosis 2 HR G	PS3.2,3.3, 3.4 & 3.5 history Taking & MSE LGDB	RD1.3 ENT K/S SH Y Lecture,Demonstration	DR9.2 G	PH 1.28[MI][S]			
D-4	THURSDAY				P E7.2physiology of lactationGP E7.3composition of breast milkGP E7.4advantages of breast feedingGP E7.5Techniques of breast feedingGP E7.6bfhiG	OR2.4Investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neurovascular deficit.Lecture, Small Group Discussion, Bed Side Clinic	CT 1.16,1.17 Chemoprophylaxis TB, cure and drug resistant TB 1HR G CT 2.8 history taking in OAD 2 HR G	PS3.7,3.8 & 3.9 Organic Disorders Delirium and Dementia LGDB	RD1.4 and RD1.13Ob & Gy and PC & PNDT Act K/S SH Y Lecture,Demonstration	DR9.3	Rickettsial infections;MI 1.1- L	PH1.49[anticancer][L]	PA 27.5 gross & microsc , tests and compli of IHD, G	
D-5	FRIDAY				P E8.1complimentary feeding- definitonGP E8.2lycfGP E8.3common complimentary foodsGP E8.4complimentary feeding habitsG	OR2.5Describe and discuss the aetiopathogenesis, clinical features, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injuryLecture, Small Group Discussion, Bed Side Clinic	CT 2.1,2,2.2,3 OAD, risk factors and causes 1 HR G, CT 2.4,2.5,2.6 respiratory failure, AE COPD 1 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS3.11 Risk to self and others LGDB	RD1.5 internal medicine K/S SH Y Lecture,Demonstration	DR9.4 G	SDL Cost of 5 most commonly used drugs in MI . Interview one MI patient on cost incurred for drugd	Formative assessment	PH1.49[anticancer][L]	
								PS4.1 to 4.7 Alcohol and Substance Use Disorders LGDB	RD1.6 surgery K/S SH Y Lecture,Demonstration		Infective syndromes of hepatobilary 2; MI 3.7- L			
D-6	SATURDAY	PA 9.5 SLE, G	GI infective syndromes; MI 3.1- L	FM 21.2 21.5 G								AETCOM2.5 bioethics 6	15	
26	MONDAY				P E8.5counselling GP E9.1,2age related nutritional needs, assessment of nutritionGP E9.3,9.4,9 Caloric values, dietary recording, calorie calculationG	OR2.6Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radiusLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PSS.1 to 5.6	RD1.7 Pediatrics K/S SH Y Lecture,Demonstration	DR9.5 G	PA 29.2 ca penis, G			
D-2	TUESDAY				P E9.6, classify nutritional statusGP E9.7plan dietG	OR2.7Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instabilityLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS 6.1 to 6.7	RD1.8 malignancies K/S SH Y Lecture,Demonstration	DR9.5 G	CM 8.1-8.5 TB, L	Enteric fever, scrub typhus; PA 30.4 classif of ovarian tmr, G MI 3.4, 8.15 - D, Brucellosis, leptospirosis ; MI 8.1- D; PA 30.4 classif of ovarian tmr, G PH1.47[Anthelmintic drugs][G]		

**GMC KOLLAM**

D-3	WEDNESDAY	Clinical postings 8-12 2 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology			P E19.1Universalo immunizaiton programGP E19.3vaccine descriptionGP E19.4cold chainG	OR2.8Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patientLecture, Small Group Discussion, Bed Side Clinic	CT 2.10 clinical discussion differential diagnosis 2 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS 7.1 to PS7.7	RD1.9 Interventional Radiology K KH Y Lecture,Demonstration	DR9.6 G	PH1.49[anticancer][L]			PA 21.1hemostasis, S	
D-4	THURSDAY				P E19.1observe and handling vaccineGP E19.11documentation of immunization recordGP E19.12observe administration of vaccineGP E20.1newborn definition, nomenclaturesG	OR2.9Describe and discuss the mechanism of injury, Clinical features, Investigations and principle of management of acetabular fractureLecture, Small Group Discussion, Bed Side Clinic	CT 2.13 diagnostic work up based on etiology 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 8.1 to PS8.7	RD1.10Emergency Radiology and miscellaneous K KH Y Lecture, Demonstration	DR9.7 G	Malaria 2,Babesiosis; MI 2.5,8,16-L	PH1.50[immunomodulators][L]	PA 30.1 epidem of ca cerv, G		
D-5	FRIDAY				P E20.2care of normal newbornGP E20.4assessment of normal newbornGP E20.5counsel mother of normal newbornG	OR2.10Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femurLecture, Small Group Discussion, Bed Side Clinic	CT 2.15 generate a differential diagnosis 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 9.1 to 9.7	RD1.11preparation K KH Y Lecture, Demonstration K KH Y Lecture, Demonstration	DR9.8 G		PA 30.3 ca cerv, PA 30.6 cervicitis, G	PH1.50[immunomodulators][L]		
27	MONDAY				P E1.1Growth Definition, Factors affecting GP E1.2patterns in growth GP E1.3.assessment of growthGP E1.4anthropometryG	OR 2.10describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of ClavicleLecture, Small Group Discussion, Bed Side Clinic	CT 1.1, 1.2 epidemiology of TB,pathogenesis and natural history of TB 1 HR G CT 1.5 History discussion on TB G 2 HR	PS1.1to1.4 Rapport, Empathy, Confidentiality, News breaking Alcohol and Substance Use Disorders LGDB	RD1.1 and RD1.12 radiation and radiation protection and effects of radiation in pregnancy K KH Y Lecture,Demonstration	DR9.1 G	PA 30.4 ovarian tmr, L				
D-2	TUESDAY				P E1.5normal development - definitionGP E1.7.perform development assessmentGP E5.11visit to cdcG	OR2.2Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fractures of proximal HumerusLecture, Small Group Discussion, Bed Side Clinic	CT 1.3, 1.4, TB Co-infection with HIV, and comorbid DM 1 HR G CT 1.6, 1.15 Clinical examination in TB and sequelae 2 HR	PS3.1&3.6 Introduction to Psychiatry and Etiology LGDB	RD1.2 history and radiological equipments 5 SH Y Lecture,Demonstration	DR9.1 G		Gram staining 3:MI 1.2-D Malaria, Leishmaniasis, filariasis; MI 2.6 - D PA 30.8 adenomyosis, G PH1.47[Anthelmintic drugs][G]			
D-3	WEDNESDAY				P E5.11visit to cdcGP E6.1adolescence - defintion stagesGP E6.2physiologic changes in adolescenceGP E7.1breast feeding - practicesG	OR2.3Select, prescribe and communicate appropriate medications for relief of joint PainLecture, Small Group Discussion, Bed Side Clinic	CT 1.11,1.14 interpret pleural fluid results,ATT 1HR G CT 1.8 Differential diagnosis 2 HR G	PS3.2,3.3, 3.4 & 3.5 history Taking & MSE LGDB	RD1.3 ENT K/S SH Y Lecture,Demonstration	DR9.2 G		PH1.60,1.59[Pharmacogenomics,FDC][G]			
D-4	THURSDAY				P E7.2physiology of lactationGP E7.3composition of breast milkGP E7.4advantages of breast feedingGP E7.5Techniques of breast feedingGP E7.6bfhiG	OR2.4Investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neuromotoric deficit.Lecture, Small Group Discussion, Bed Side Clinic	CT 1.16,1.17 Chemoprophylaxis TB, cure and drug resistant TB 1HR G CT 2.8 history taking in OAD 2 HR G	PS3.7,3.8 & 3.9 Organic Disorders Delirium and Dementia LGDB	RD1.4 and RD1.13Ob & Gy and PC & PNDT Act K/S SH Y Lecture,Demonstration	DR9.3		Systemic mycoses ; MI 1.1- G	PH1.60,1.59[Pharmacogenomics,FDC][G]	PA 31.1 benign BB, PA 31.4 gymast, L	
D-5	FRIDAY				P E8.1complimentary feeding- definitonGP E8.2)ycfGP E8.3common complimentary foodsGP E8.4complimentary feeding habitsG	OR2.5Describe and discuss the aetiopathogenesis, clinical features, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injuryLecture, Small Group Discussion, Bed Side Clinic	CT 2.1,2.2,2.3 OAD, risk factors and causes 1 HR G, CT 2.4,2.5,2.6 respiratory failure, AE COPD 1 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS3.11 Risk to self and others LGDB	RD1.5 internal medicine K/S SH Y Lecture,Demonstration	DR9.4 G			PA 31.1 FA & phylloides, G	PH1.60,1.59[Pharmacogenomics,FDC][G]	
D-6	SATURDAY	PA 11.2 tmr infancy & childhd, L	Vibrio,Aeromonas; MI 3.1-L	PH1.53[chelating agents][S]				PS4.1 to 4.7 Alcohol and Substance Use Disorders LGDB	RD1.6 surgery K/S SH Y Lecture,Demonstration		Bacterial lobar pneumonia 1 MI 6.1		AETCOM.2.6 bioethics 1	16	
28	MONDAY				P E8.5counselling GP E9.1,9.2age related nutritional needs, assessment of nutritionGP E9.3,9.4,9.5caloric values, dietary recording, calorie calculationG	OR2.6Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radiusLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS5.1 to 5.6	RD1.7 Pediatrics K/S SH Y Lecture,Demonstration	DR9.5 G	PA 31.2 ca breast, L				
D-2	TUESDAY				P E9.6, classify nutritional statusGP E9.7plan dietG	OR2.7Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instabilityLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS 6.1 to 6.7	RD1.8 malignancies K/S SH Y Lecture,Demonstration	DR9.5 G	CM 8.1-8.5 Polio		Dysentery; MI 3.2 - D Diarrhoea; ; MI 3.2 - D PA 31.3 ca breast, D PH3.5[P drugs][D]		
D-3	WEDNESDAY				P E19.1Universalo immunizaiton programGP E19.3vaccine descriptionGP E19.4cold chainG	OR2.8Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patientLecture, Small Group Discussion, Bed Side Clinic	CT 2.10 clinical discussion differential diagnosis 2 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS 7.1 to PS7.7	RD1.9 Interventional Radiology K KH Y Lecture,Demonstration	DR9.6 G		PH1.53[chelating agents][S] Revision			
D-4	THURSDAY				P E19.1observe and handling vaccineGP E19.11documentation of immunization recordGP E19.12observe administration of vaccineGP E20.1newborn definition, nomenclaturesG	OR2.9Describe and discuss the mechanism of injury, Clinical features, Investigations and principle of management of acetabular fractureLecture, Small Group Discussion, Bed Side Clinic	CT 2.13 diagnostic work up based on etiology 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 8.1 to PS8.7	RD1.10Emergency Radiology and miscellaneous K KH Y Lecture, Demonstration	DR9.7 G	Intestinal protozoan infections MI 3.1- L	PH1.56[geriatric &paediatric pharmacology][S]	PA 32.1 thyr swellings, PA 32.2 thyrotoxicosis, L		

D-5	FRIDAY		P E20.2 care of normal newbornGP E20.4 assessment of normal newbornGP E20.5 counsel mother of normal newborn	OR2.10 Describe and discuss the aetiology, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femurLecture, Small Group Discussion, Bed Side Clinic	CT 2.15 generate a differential diagnosis 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 9.1 to 9.7	RD1.11 preparation K KH Y Lecture, Demonstration K KH Y Lecture, Demonstration	DR9.8 G			PA32.3 hypothy, G	PH1.62[Antiseptics, Disinfectants][G]	
										Intestinal cestode infections 1; MI 3.1 - G			
D-6	SATURDAY	PA 36.1 retinoblastoma, G	Intestinal nematode infections 1;MI 3.1- L	22,23							AETCOM2.6 bioethics 2	AETCOM2.6 bioethics 3	
29	MONDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology	P E1.1Growth Definition, Factors affecting GP E1.2patterns in growth GP E1.3.assessment of growthGP E1.4anthropometryG	OR2.1Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of ClavicleLecture, Small Group Discussion, Bed Side Clinic	CT 1.1, 1.2 epidemiology of TB,pathogenesis and natural history of TB 1 HR G CT 1.5 History discussion on TB G 2 HR	PS1.1to1.4 Rapport, Empathy, Confidentiality, News breaking Alcohol and Substance Use Disorders LGDB	RD1.1 and RD1.12 radiation and radiation protection and effects of radiation in pregnancy K KH Y Lecture,Demonstration	DR9.1 G		PA 32.1 thy swelling ( tumours), L			
D-2	TUESDAY		P E1.5normal development - definitionGP E1.7.perform development assessmentGP E5.11visit to cdcG	OR2.2Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fractures of proximal HumerusLecture, Small Group Discussion, Bed Side Clinic	CT 1.3, 1.4, TB Co-infection with HIV, and comorbid DM 1 HR G CT 1.6, 1.15 Clinical examination in TB and sequelae 2 HR	PS3.1&3.6 Introduction to Psychiatry and Etiology LGDB	RD1.2 history and radiological equipments 5 SH Y Lecture,Demonstration	DR9.1 G			FN SGD 3.3 FM Ballistics 3.9,10 L	Gram staining 4;MI 1.2- D Helicobacter, Campylobacter, C difficile; MI 3.6.3.1 - G PA 32.1 thy swelling ( tumours), G PH1.12,2,4[Dose calculation][D]	
D-3	WEDNESDAY		P E5.11visit to cdcGP E6.1adolescence - defintionGP E6.2physiologic changes in adolescenceGP E7.1breast feeding - practicesG	OR2.3Select, prescribe and communicate appropriate medications for relief of joint PainLecture, Small Group Discussion, Bed Side Clinic	CT 1.11,1.14 interpret pleural fluid results,ATT 1HR G CT 1.8 Differential diagnosis 2 HR G	PS3.2,3, 3, 3 & 3.5 history Taking & MSE LGDB	RD1.3 ENT K/S SH Y Lecture,Demonstration	DR9.2 G		PH3.3[critical evaluation drug literature][G]			
D-4	THURSDAY		P E7.2physiology of lactationGP E7.3composition of breast milkGP E7.4advantages of breast feedingGP E7.5Techniques of breast feedingGP E7.6bfhiG	OR2.4Investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neuromuscular deficit.Lecture, Small Group Discussion, Bed Side Clinic	CT 1.16,1.17 Chemoprophylaxis TB, cure and drug resistant TB 1HR G CT 2.8 history taking in OAD 2 HR G	PS3.7,3.8 & 3.9 Organic Disorders Delirium and Dementia LGDB	RD1.4 and RD1.13Ob & Gy and PC & PNDT Act K/S SH Y Lecture,Demonstration	DR9.3		Intestinal cestode infections 2; MI 3.1 - G	PH3.3[critical evaluation drug literature][G]	PA 32.9 adr tmr,L	
D-5	FRIDAY		P E8.1complimentary feeding- definitonGP E8.2ycfGP E8.3common complimentary foodsGP E8.4complimentary feeding habitsG	OR2.5Describe and discuss the aetiology, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injuryLecture, Small Group Discussion, Bed Side Clinic	CT 2.1,2.2,2.3 OAD, risk factors and causes 1 HR G, CT 2.4,2.5,2.6 respiratory failure, AE COPD 1 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS3.11 Risk to self and others LGDB	RD1.5 internal medicine K/S SH Y Lecture,Demonstration	DR9.4 G			PA 24.1 oral ca and salivary tmr, L	PH3.3[critical evaluation drug literature][G]	
						PS4.1 to 4.7 Alcohol and Substance Use Disorders LGDB	RD1.6 surgery K/S SH Y Lecture,Demonstration			Intestinal cestode, trematode infections; MI 3.2,1 - D			
D-6	SATURDAY	PA 26.3 OAD & bronchiectasis G	Infective syndromes of hepatobiliary 1; MI 3.7- L	PH1.56[geriatric & paediatric pharmacology][S] Revision							AETCOM2.6 bioethics 4	17	
<b>30. INTEGRATION WEEK- HEPATITIS</b>													
30	MONDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology	P E8.5counselling GP E9.1,9.2age related nutritional needs, assessment of nutritionGP E9.3,9.4,9.5caloric values, dietary recording, calorie calculationG	OR2.6Describe and discuss the aetiology, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radiusLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS5.1 to 5.6	RD1.7 Pediatrics K/S SH Y Lecture,Demonstration	DR9.5 G		PA 25.3 etiopathogenesis of viral & toxic hepatitis, L			
D-2	TUESDAY		P E9.6, classify nutritional statusGP E9.7plan dietG	OR2.7Describe and discuss the aetiology, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instabilityLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS 6.1 to 6.7	RD1.8 malignancies K/S SH Y Lecture,Demonstration	DR9.5 G		CM 3.3 ADD, Cholera L SDI Prevention of water borne diseases including Hepatitis A		Stool microscopy-3; MI 1.2- D Acid fast staining-4; MI 1.2- D PA 25.6 interpret LFT and viral hepatitis serology panel, D PH1.8 [drug interaction][G]	
D-3	WEDNESDAY		P E19.1Universal immunization programGP E19.3vaccine descriptionGP E19.4cold chainG	OR2.8Describe and discuss the aetiology, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patientLecture, Small Group Discussion, Bed Side Clinic	CT 2.10 clinical discussion differential diagnosis 2 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS 7.1 to PS7.7	RD1.9 Interventional Radiology K KH Y Lecture,Demonstration	DR9.6 G		PH3.7[essential medicine list][G]			
D-4	THURSDAY		P E19.1observe and handling vaccineGP E19.1documentation of immunization recordGP E19.2observe administration of vaccineGP E20.1newborn definition, nomenclaturesG	OR2.9Describe and discuss the mechanism of injury, Clinical features, Investigations and principle of management of acetabular fractureLecture, Small Group Discussion, Bed Side Clinic	CT 2.13 diagnostic work up based on etiology 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 8.1 to PS8.7	RD1.10Emergency Radiology and miscellaneous K KH Y Lecture, Demonstration	DR9.7 G		Viral hepatitis; MI 3.8,8.15 - G	PH3.7[essential medicine list][G]	PA 25.3 Distinguish causes of hepatitis based on clinical & lab features, complic & conseque , L	

D-5	FRIDAY	P E20.2 care of normal newbornGP E20.4 assessment of normal newbornGP E20.5counsel mother of normal newbornG	OR2.10Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femurLecture, Small Group Discussion, Bed Side Clinic	CT 2.15 generate a differential diagnosis 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 9.1 to 9.7	RD1.11preparation K KH Y Lecture,Demonstration K KH Y Lecture, Demonstration	DR9.8 G		Formative Assessment	PA 32.5 hyperparathyroidism, 5, Nonaligned session	PH3.7[essential medicine list][G] Nonaligned session		
31	MONDAY	P E1.1Growth Definition, Factors affecting GP E1.2patterns in growth GP E1.3.assessment of growthGP E1.4anthropometryG	OR 2.1Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of ClavicleLecture, Small Group Discussion, Bed Side Clinic	CT 1.1, 1.2 epidemiology of TB,pathogenesis and natural history of TB 1 HR G CT 1.5 History discussion on TB G 2 HR	PS1.1to1.4 Rapport, Empathy, Confidentiality, News breaking Alcohol and Substance Use Disorders LGDB	RD1.1 and RD1.12 radiation and radiation protection and effects of radiation in pregnancy K KH Y Lecture,Demonstration	DR9.1 G		PA 24.1 oral ca and salivary tmr, G				
D-2	TUESDAY	P E1.5normal development - definitionGP E1.7perform development assessmentGP E5.11visit to cdcG	OR2.2Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fractures of proximal HumerusLecture, Small Group Discussion, Bed Side Clinic	CT 1.3, 1.4, TB Co-infection with HIV, and comorbid DM 1 HR G CT 1.6, 1.15 Clinical examination in TB and sequela 2 HR	PS3.1&3.6 Introduction to Psychiatry and Etiology LGDB	RD1.2 history and radiological equipments S SH Y Lecture,Demonstration	DR9.1 G		CM 8.1,8.5		Stool microscopy-3; MI 1.2- D Acid fast staining-4; MI 1.2- D PH1.53.1.61 [Vaccines, neutraceuticals][G]		
D-3	WEDNESDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology	P E5.11visit to cdcGP E6.1adolescence - definition stagesGP E6.2physiologic changes in adolescenceGP E7.1breast feeding - practicesG	OR2.3Select, prescribe and communicate appropriate medications for relief of joint PainLecture, Small Group Discussion, Bed Side Clinic	CT 1.11 ,1.14 interpret pleural fluid results,ATT 1HR G CT 1.8 Differential diagnosis 2 HR G	PS3.2,3.3, 3.4 & 3.5 istory Taking & MSE LGDB	RD1.3 ENT K/S SH Y Lecture,Demonstration	DR9.2 G		PH1.58 Ocular medicines][G]			
D-4	THURSDAY	P E7.2physiology of lactationGP E7.3composition of breast milkGP E7.4advantages of breast feedingGP E7.5Techniques of breast feedingGP E7.6bfhiG	OR2.4Investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neuromuscular deficit.Lecture, Small Group Discussion, Bed Side Clinic	CT 1.16,1.17 Chemoprophylaxis TB, cure and drug resistant TB 1HR G CT 2.8 history taking in OAD 2 HR G	PS3.7,3.8 & 3.9 Organic Disorders Delirium and Dementia LGDB	RD1.4 and RD1.13Ob & Gy and PC & PNDT Act K/S SH Y Lecture,Demonstration	DR9.3		Infective syndromes of respiratory tract; MI 6.1-L	PH1.58 Ocular medicines][G]	PA 24.2 peptic ulcer, L		
D-5	FRIDAY	P E8.1complimentary feeding- definitonGP E8.2lycfGP E8.3common complimentary foodsGP E8.4complimentary feeding habitsG	OR2.5Describe and discuss the aetiopathogenesis, clinical features, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injuryLecture, Small Group Discussion, Bed Side Clinic	CT 2.1,2.2,2.3 OAD, risk factors and causes 1 HR G, CT 2.4,2.5,2.6 respiratory failure, AE COPD 1 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS3.11 Risk to self and others LGDB	RD1.5 internal medicine K/S SH Y Lecture,Demonstration	DR9.4 G			PA 10.4 protor & helmin inf, S	PH1.58 Ocular medicines][G]		
D-6	SATURDAY	PA 26.6 lung tumours, L	Ulcerative genital disease; MI 7.1,7.2-L	PH1.34[G/T][S]									
32	MONDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology	P E8.5counselling GP E9.1,9.2age related nutritional needs, assessment of nutritionGP E9.3,9.4,9.Scaloric values, dietary recording, calorie calculationG	OR2.6Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radiusLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS5.1 to 5.6	RD1.7 Pediatrics K/S SH Y Lecture,Demonstration	DR9.5 G		PA 28.7 lupus neph, PA 28.12 cystic d/s, L			
D-2	TUESDAY	P E9.6, classify nutritional statusGP E9.7plan dietG	OR2.7Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instabilityLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS 6.1 to 6.7	RD1.8 malignancies K/S SH Y Lecture,Demonstration	DR9.5 G		CM3.3 Typhoid, FP, L		URTI agents- MI 6.2 - D Throat swab gram staining; MI 6.2- D PH1.55.3[national health programmes-NCD][G]		
D-3	WEDNESDAY	P E19.1Universal immunization programGP E19.3vaccine descriptionGP E19.4cold chainG	OR2.8Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patientLecture, Small Group Discussion, Bed Side Clinic	CT 2.10 clinical discussion differential diagnosis 2 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS 7.1 to PS7.7	RD1.9 Interventional Radiology K KH Y Lecture,Demonstration	DR9.6 G		PH1.57[dermatology][G]				
D-4	THURSDAY	P F19.1observe and handling vaccineGP E19.11documentation of immunization recordGP E19.12observe administration of vaccineGP E20.1newborn definition, nomenclaturesG	OR2.9Describe and discuss the mechanism of injury, Clinical features, investigations and principle of management of acetabular fractureLecture, Small Group Discussion, Bed Side Clinic	CT 2.13 diagnostic work up based on etiology 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 8.1 to PS8.7	RD1.10Emergency Radiology and miscellaneous K KH Y Lecture, Demonstration	DR9.7 G		Bacterial lobar pneumonia 2 MI 6.1	PH1.57[dermatology][G]	PA 29.1 testicular tumr, L		
D-5	FRIDAY	P E20.2care of normal newbornGP E20.4 assessment of normal newbornGP E20.5counsel mother of normal newbornG	OR2.10Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femurLecture, Small Group Discussion, Bed Side Clinic	CT 2.15 generate a differential diagnosis 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 9.1 to 9.7	RD1.11preparation K KH Y Lecture,Demonstration K KH Y Lecture, Demonstration	DR9.8 G			PA 30.2 ca endo, L	PH1.57[dermatology][G]		
SATURDAY	PA 19.4 Hogkin ds, L	Coronavirus; MI 6.1-L	PH1.63,1.64[clinical trials, drug regulations][S] Revision						Myxovirus 2; MI 6.1-L				

D-6													AETCOM2.7 bioethics 1	19					
33	MONDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology	P E1.1Growth Definition, Factors affecting GP E1.2patterns in growth GP E1.3.assessment of growthGP E1.4anthropometryG	OR 2.1Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of ClavicleLecture, Small Group Discussion, Bed Side Clinic	CT 1.1, 1.2 epidemiology of TB,pathogenesis and natural history of TB 1 HR G CT 1.5 History discussion on TB G 2 HR	PS1.1to1.4 Rapport, Empathy, Confidentiality, News breaking Alcohol and Substance Use Disorders LGDB	RD1.1 and RD1.12 radiation and radiation protection and effects of radiation in pregnancy K KH Y Lecture,Demonstration	DR9.1 G	PA 30.1 ca cerv; PA 30.6 cervicitis, L										
D-2	TUESDAY		P E1.5normal development - definitionGP E1.7perform development assessmentGP E5.11visit to cdcG	OR2.2Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fractures of proximal HumerusLecture, Small Group Discussion, Bed Side Clinic	CT 1.3, 1.4, TB Co-infection with HIV, and comorbid DM 1 HR G CT 1.6, 1.15 Clinical examination in TB and sequela 2 HR	PS3.1&3.6 Introduction to Psychiatry and Etiology LGDB	RD1.2 history and radiological equipments S SH Y Lecture,Demonstration	DR9.1 G	CM 8.1,8.5	Sputum gram staining: MI 6.3-D Fungal infections of respiratory tract; MI 6.2,6.3- D PH1.51[ecopharmacology][G]									
D-3	WEDNESDAY		P E5.11visit to cdcGP E6.1adolescence - definition stagesGP E6.2physiologic changes in adolescenceGP E7.1breast feeding - practicesG	OR2.3Select, prescribe and communicate appropriate medications for relief of joint PainLecture, Small Group Discussion, Bed Side Clinic	CT 1.11,1.14 interpret pleural fluid results,ATT 1HR G CT 1.8 Differential diagnosis 2 HR G	PS3.2,3.3, 3.4 & 3.5 history Taking & MSE LGDB	RD1.3 ENT K/S SH Y Lecture,Demonstration	DR9.2 G	PH1.52[ Poisoning][G]										
D-4	THURSDAY		P E7.2physiology of lactationGP E7.3composition of breast milkGP E7.4advantages of breast feedingGP E7.5Techniques of breast feedingGP E7.6bfhiG	OR2.4Investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neuromuscular deficit.Lecture, Small Group Discussion, Bed Side Clinic	CT 1.16,1.17 Chemoprophylaxis TB, cure and drug resistant TB 1HR G CT 2.8 history taking in OAD 2 HR G	PS3.7,3.8 & 3.9 Organic Disorders Delirium and Dementia LGDB	RD1.4 and RD1.13Ob & Gy and PC & PNDT Act K/S SH Y Lecture,Demonstration	DR9.3	Parasitic infections of respiratory tract;MI 6.1,6.2- G	PH1.52[ Poisoning][G]	PA14.1 iron metb, S								
D-5	FRIDAY		P E8.1complimentary feeding- definitonGP E8.2lycfGP E8.3common complimentary foodsGP E8.4complimentary feeding habitsG	OR2.5Describe and discuss the aetopathogenesis, clinical features, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injuryLecture, Small Group Discussion, Bed Side Clinic	CT 2.1,2.2,2.3 OAD, risk factors and causes 1 HR G, CT 2.4,2.5,2.6 respiratory failure, AE COPD 1 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS3.11 Risk to self and others LGDB	RD1.5 internal medicine K/S SH Y Lecture,Demonstration	DR9.4 G	PA 30.9 endo hyper L	PH1.52[ Poisoning][G]									
D-6	SATURDAY	PA 19.4 NHL, L	Bacterial meningitis; MI 5.1-L	24,25					Infective syndromes of CNS; MI 5.1,5.2- L				AETCOM2.7 bioethics 2	AETCOM2.7 bioethics 3					
34	MONDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology	P E8.5counselling GP E9.1,9.2age related nutritional needs, assessment of nutritionGP E9.3,9.4,9.Scaloric values, dietary recording, calorie calculationG	OR2.6Describe and discuss the aetopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radiusLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS5.1 to 5.6	RD1.7 Pediatrics K/S SH Y Lecture,Demonstration	DR9.5 G											
D-2	TUESDAY		P E9.6, classify nutritional statusGP E9.7plan dietG	OR2.7Describe and discuss the aetopathogenesis, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instabilityLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS 6.1 to 6.7	RD1.8 malignancies K/S SH Y Lecture,Demonstration	DR9.5 G	CMB.1-8.5 VBD-1, L	Gram staining 5; MI 1.2- D Laboratory diagnosis of pyogenic meningitis; MI 5.3,8.15 - D PH9.3[critical evaluation drug literature][G]									
D-3	WEDNESDAY		P E19.1Universal immunization programGP E19.3vaccine descriptionGP E19.4cold chainG	OR2.8Describe and discuss the aetopathogenesis, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patientLecture, Small Group Discussion, Bed Side Clinic	CT 2.10 clinical discussion differential diagnosis 2 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS 7.1 to PS7.7	RD1.9 Interventional Radiology K KH Y Lecture,Demonstration	DR9.6 G	PH3.5[P drugs][G]										
D-4	THURSDAY		P F19.1observe and handling vaccineGP E19.11documentation of immunization recordGP E19.12observe administration of vaccineGP E20.1newborn definition, nomenclaturesG	OR2.9Describe and discuss the mechanism of injury, Clinical features, investigations and principle of management of acetabular fractureLecture, Small Group Discussion, Bed Side Clinic	CT 2.13 diagnostic work up based on etiology 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 8.1 to PS8.7	RD1.10Emergency Radiology and miscellaneous K KH Y Lecture, Demonstration	DR9.7 G	Viral meningitis & myelitis; MI 5.1,8.16-	PH3.5[P drugs][G]	PA 4.2 mediators of infl S								
D-5	FRIDAY		P E20.2care of normal newbornGP E20.4assessment of normal newbornGP E20.5counsel mother of normal newbornG	OR2.10Describe and discuss the aetopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femurLecture, Small Group Discussion, Bed Side Clinic	CT 2.15 generate a differential diagnosis 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 9.1 to 9.7	RD1.11preparation K KH Y Lecture,Demonstration K KH Y Lecture, Demonstration	DR9.8 G	PA 7.3 carcinogenesis 2 ,S PH3.5[P drugs][G]										
35. INTEGRATION WEEK -LEPROSY																			
D-1	MONDAY		P E1.1Growth Definition, Factors affecting GP E1.2patterns in growth GP E1.3.assessment of growthGP E1.4anthropometryG	OR 2.1Describe and discuss the mechanism of Injury, clinical features, investigations and plan management of fracture of ClavicleLecture, Small Group Discussion, Bed Side Clinic	CT 1.1, 1.2 epidemiology of TB,pathogenesis and natural history of TB 1 HR G CT 1.5 History discussion on TB G 2 HR	PS1.1to1.4 Rapport, Empathy, Confidentiality, News breaking Alcohol and Substance Use Disorders LGDB	RD1.1 and RD1.12 radiation and radiation protection and effects of radiation in pregnancy K KH Y Lecture,Demonstration	DR9.1 G	PA 10.3 pathogenesis and pathology of leprosy, L										

D-2	TUESDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology			P E1.5normal development - definitionGP E1.7perform development assessmentGP E5.11visit to cdcG	OR2.2Describe and discuss the mechanism of injury, clinical features, investigations and plan management of fractures of proximal HumerusLecture, Small Group Discussion, Bed Side Clinic	CT 1.3, 1.4, TB Co-infection with HIV, and comorbid DM 1 HR G CT 1.6, 1.15 Clinical examination in TB and sequele 2 HR	PS3.1&3.6 Introduction to Psychiatry and Etiology LGDB	RD1.2 history and radiological equipments S SH Y Lecture,Demonstration	DR9.1 G		FM SGD 3.11 Nonaligned session ; SDL - Assignment Autopsy findings in a leprosy patient	Lab diagnosis of aseptic meningitis; MI5.3,8.15-D, Fungal infections of CNS MI 5.1,5.2- G PA 10.3 microscopy of tubercloid & lepromatous leprosy, G PH 1.6,1.7,3.4 [ADR, Pharmacovigilance-revision][G]		
D-3	WEDNESDAY				P E5.11visit to cdcGP E6.1adolescence - definition stageGP E6.2physiologic changes in adolescenceGP E7.1breast feeding - practicesG	OR2.3Select, prescribe and communicate appropriate medications for relief of joint PainLecture, Small Group Discussion, Bed Side Clinic	CT 1.11,1.14 interpret pleural fluid results,ATT 1HR G CT 1.8 Differential diagnosis 2 HR G	PS3.2,3.3, 3.4 & 3.5 history Taking & MSE LGDB	RD1.3 ENT K/S SH Y Lecture,Demonstration	DR9.2 G		PH1.46[leprosy][L]			
D-4	THURSDAY				P E7.2physiology of lactationGP E7.3composition of breast milkGP E7.4advantages of breast feedingGP E7.5techniques of breast feedingGP E7.6bfhiG	OR2.4Investigations and principles of management of fracture of shaft of humerus and intercondylar fracture humerus with emphasis on neurovascular deficit Lecture, Small Group Discussion, Bed Side Clinic	CT 1.16,1.17 Chemoprophylaxis TB, cure and drug resistant TB 1HR G CT 2.8 history taking in OAD 2 HR G	PS3.7,3.8 & 3.9 Organic Disorders Delirium and Dementia LGDB	RD1.4 and RD1.13Ob & Gy and PC & PNND Act K/S SH Y Lecture,Demonstration	DR9.3		Other viral encephalitis; MI 5.2- L	PH1.34[GIT][S] Revision	SDL	
D-5	FRIDAY				P E8.1complimentary feeding- definitonGP E8.2lycfGP E8.3common complimentary foodsGP E8.4complimentary feeding habitsG	OR2.5Describe and discuss the aetiopathogenesis, clinical features, mechanism of injury, investigation & principles of management of fractures of both bones forearm and Galeazzi and Monteggia injuryLecture, Small Group Discussion, Bed Side Clinic	CT 2.1,2,2.2,2.3 OAD, risk factors and causes 1 HR G, CT 2.4,2,2.6 respiratory failure, AE COPD 1 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS3.11 Risk to self and others LGDB	RD1.5 internal medicine K/S SH Y Lecture,Demonstration	DR9.4 G			Formative Assessment	PH1.34[GIT][S]	
								PS4.1 to 4.7 Alcohol and Substance Use Disorders LGDB	RD1.6 surgery K/S SH Y Lecture,Demonstration			Infective syndromes of urinary tract 1; MI 7.3-G			
D-6	SATURDAY	PA 27.3 heart failure, G	Leprosy;MI 4.3,8,16- L	26,27								AETCOM2.7 bioethics 4	20		
D-1	MONDAY	Clinical postings 8-12 weeks each in Paediatrics ,Ortho,Pulmonary,Psychiatry,Radiodiagnosis&Dermatology			P E8.5counselling GP E9.1,9.2age related nutritional needs, assessment of nutritionGP E9.3,9.4,9.Scaloric values, dietary recording, calorie calculationG	OR2.6Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of distal radiusLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS5.1 to 5.6	RD1.7 Pediatrics K/S SH Y Lecture,Demonstration	DR9.5 G					
D-2	TUESDAY				P E9.6, classify nutritional statusGP E9.7plan dietG	OR2.7Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of pelvic injuries with emphasis on hemodynamic instabilityLecture, Small Group Discussion, Bed Side Clinic	CT 2.9 Consolidation, pleural effusion and PTX 3 HR G	PS 6.1 to 6.7	RD1.8 malignancies K/S SH Y Lecture,Demonstration	DR9.5 G		CM8.1-8.5 VBD-2, L	Stool microscopy- MI 1.2- D UTI chart discussion; MI 7.3- G PH3.6[Drug information from pharmaceuticals][G]		
D-3	WEDNESDAY				P E19.1Universal immunization programGP E19.3vaccine descriptionGP E19.4cold chainG	OR2.8Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of spine injuries with emphasis on mobilisation of the patientLecture, Small Group Discussion, Bed Side Clinic	CT 2.10 clinical discussion differential diagnosis 2 HR G CT 2.9 Consolidation, pleural effusion and PTX 1 HR G	PS 7.1 to PS7.7	RD1.9 Interventional Radiology K KH Y Lecture,Demonstration	DR9.6 G		PH1.11,4.1,5.1[ routes of drug administration-revision ] [D]			
D-4	THURSDAY				P E19.1observe and handling vaccineGP E19.11documentation of immunization recordGP E19.12observe administration of vaccineGP E20.1newborn definition, nomenclaturesG	OR2.9Describe and discuss the mechanism of injury, Clinical features, investigations and principle of management of acetabular fractureLecture, Small Group Discussion, Bed Side Clinic	CT 2.13 diagnostic work up based on etiology 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 8.1 to PS8.7	RD1.10Emergency Radiology and miscellaneous K KH Y Lecture, Demonstration	DR9.7 G		Urethritis; MI 7.2-G	PH1.11,4.1,5.1[ routes of drug administration-revision ] [D]	PA 32.5 hyperparathyroidism, S, Nonaligned session	
D-5	FRIDAY				P E20.2care of normal newbornGP E20.4assessment of normal newbornGP E20.5counsel mother of normal newbornG	OR2.10Describe and discuss the aetiopathogenesis, mechanism of injury, clinical features, investigations and principles of management of fractures of proximal femurLecture, Small Group Discussion, Bed Side Clinic	CT 2.15 generate a differential diagnosis 2 HR G CT 2.14 ABG, chest Xray 1 HR G	PS 9.1 to 9.7	RD1.11preparation K KH Y Lecture,Demonstration K KH Y Lecture, Demonstration	DR9.8 G		Lab diagnosis of STI; MI 7.1,7.2- G	28	PH1.11,4.1,5.1[ routes of drug administration-revision ] [D]	
D-6	SATURDAY	PA 27.7 pericardial lesions, G	Rabies, HSV encephalitis; MI 5.2-L	ATECOM (2HRS)2.3 Rights								AETCOM2.7 bioethics 5	21		

D-1	MONDAY	Rational use of investigations; MI 8.13- G	PA 24.2 peptic ulcer, L	PH 1.3 ,2.1.5.2[ Drug formulations & drug delivery systems] [G] Revision			Amoebiasis, giardiasis, coccidian parasites; MI 3.2, 1.2- D	PH1.19[Psychopharmacology][G] Revision	
D-2	TUESDAY	Brucellosis;MI 8.1- G	PA 28.7 lupus neph, PA 28.12 cystic d/s, L	PH1.11,2.1,2.3[ routes of drug administration ] [G] Revision			PA 32.1 thyro swellings, G	PH1.20,1.21[Alcohol][G] Revision	
D-3	WEDNESDAY	Intestinal protozoan infections 2; MI 3.1- G	PA 29.1 testicular tumr, L	PH1.11,4.1.5.1[ routes of drug administration ] [G] Revision			Stool microscopy-4; Mi 1.2- D	PH1.55,5.4[national health programmes][G] Revision	
D-4	THURSDAY	Intestinal trematode infections 1; MI 3.1 - G	PA 30.2 ca endo, PA 30.9 endo hyper, L	PH 1.4[ Pharmacokinetics] [G] Revision			PA 28.15 thrombotic angiopathy, G	PH1.22,1.23,5.5,5.6[drug dependence][G] Revision	
D-5	FRIDAY	Intestinal trematode infections 2; MI 3.1 - G	PA 30.1 ca cerv,	PH 1.5 [ Pharmacodynamics] [G] Revision			Atypical pneumonia 2; Mi 6.1 - G	PH3.1,3.8,5.3,5.7[Prescription writing, communication][D] Revision	
D-6	SATURDAY	Stool microscopy-4; Mi 1.2- D	PA 30.5 GTT, L	PH 1.6,1.7,3.4 [ADR, Pharmacovigilance][G] Revision			PA 15.1 Vit B12 & folate metab, G	PH 1.35[Anemia][G] Revision	
								PH3.1,3.2[Prescription writing, audit][D] Revision	

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D-1	MONDAY	PA 30.6 cervicitis, L	Non tubercular mycobacteria; MI 6.1- G	PH 1.37[sex hormones][G] Revision			Food poisoning; MI 3.5- G	PH1.27, 4.2 [effects of drugs on BP- CAL][D] Revision	
D-2	TUESDAY	PA 24.3 peptic microsc, G	Non fermenting GNB; MI 6.1,6.3,4.3- G	PH 1.37[anterior pituitary hormones][G] Revision			PA 31.1 FA & phylloides, G	PH1.34[antidiarrhoeals][G] Revision	
D-3	WEDNESDAY	PA 28.13 obst uropathy G	Fungal infections of respiratory tract;MI 6.1,6.2- G	PH1.36[osteoporosis][G] Revision			Intestinal protozoan infections 3; MI 3.1- G	PH1.47[Anthelmintic drugs][G] Revision	
D-4	THURSDAY	PA 29.1 Seminoma G	Influenza; MI 6.2,6.3 - G	PH1.33[cough][G] Revision			PA 27.5 gross & microsc , tests and compli of IHD, G	PH1.55[national health programmes [S] Revision	
D-5	FRIDAY	PA 30.7 endometriosis, G	Parasitic infections of CNS 1;MI 5.1,5.2- G	PH 1.15,1.16[ Skeletal muscle relaxants][G] Revision			Covid 19; MI 6.2,6.3 - G	PH1.34[laxatives, IBD] [S] Revision	
D-6	SATURDAY	PA 31.2 prog fact of Ca breast - G	Infective syndromes of urinary tract 2; MI 7.3-G	PH1.12,2.4[Dose calculation][G] Revision			PA 27.1 arterisc & atherosc, G	PA 32.6 pancr tumr, G	

THIRD INTERNAL ASSESSMENT

UNIVERSITY EXAM

UNIVERSITY EXAM

[COLOUR CODING AS PER IT IS DEPICTED IN THE ABOVE TIME TABLE]	
	Practical Session
	Pathology
	L
	G
	Microbiology
	L
	G
	Forensic
	Medicine
	Surgery
	O & G
	Community Medicine
	Ophthal
	ENT
	AETCOM
	SPORTS
	Dermatology
	Radiodiagnosis
	Paediatrics
	Assessment

SUBJECTS	LECTURE- HRS	PRACTICAL / SDG	SELF DIRECTED LEARNING-SDL HRS	TOTAL HRS	Deficiency
Pathology	80	138	12	230	0
Pharmacology	80	138	12	230	0
Microbiology	70	110	10	290	0
Community Medicine	20	30	10	60	0
Forensic Medicine	15	30	5	50	0
Medicine	25			25	0
O & G	25			25	0
Surgery	25			25	0
AETCOM				27	0
Sports				28	0

Clinical postings: 4 Weeks each in Medicine,Surgery,O & G,Community Medicine,Ophthal & ENT & 25 hrs of Lectures in Medicine,Surgery,O & G

Clinical postings: 8-12 weeks each in Paediatrics,Ortho,Pulmonary,Psychiatry,Radiodiagnosis & Dermatology

L  
S  
G  
D  
  
LECTURE  
SDL  
SDG  
DOAP  
  
FA  
Formative Assessment