**PHASE II TIME TABLE - TEMPLATE**

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| **TIME** |  **8-9** | **9-12** | **1-2** | **2-3** | **3-4** |
| **MON** | **PATHOLOGY** | **CP** | **PATHOLOGY** | **SGD/DOAP** |
| **TUE** | **PHARMACOLOGY** | **CP** | **MICROBIOLOGY** | **SGD/DOAP** |
| **WED** | **MICROBIOLOGY** | **CP** | **PATHOLOGY** | **SGD/DOAP** |
| **THURS** | **FM** | **CP** | **PHARMACOLOGY** | **PHARMACOLOGY** | **Formative assessment****PA/Micro/PH/FM/SPM/Clinical** |
| **FRI** | **CLINICAL THEORY** **GM/GS,O and G** | **CP** |  **-** | **1,2,3 WEEK – SPM****4 - PA/MICRO/PH** | **SDL Rotation****PH/PA/MICRO** |
| **SAT** | **MICRO/PH/PA** | **Integrated sessions** | **CLINICAL THEORY** | **1,2,3 WEEK - AETCOM****4 WEEK - SPM Practical** |

**PHASE II TIME TABLE – WEEK 1**

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| **TIME** | **9-12** |
| **THURS** | **CP-General Medicine – 3 hours**IM1.10 Elicit document and present an appropriate history that will establishthe diagnosis, cause and severity of heart failure including:presenting complaints, precipitating and exacerbating factors, riskfactors exercise tolerance, changes in sleep patterns, featuressuggestive of infective endocarditisBedside clinic |
| **FRIDAY** | **HOLIDAY** |
| **SAT** |  |

**PHASE II TIME TABLE – WEEK 2**

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| **TIME** | **9-12** |
| **MON** | **CP-General Medicine – 3 hours**IM1.11 Perform and demonstrate a systematic examination based on thehistory that will help establish the diagnosis and estimate its severityincluding: measurement of pulse, blood pressure and respiratoryrate, jugular forms and venous pulses, peripheral pulses,conjunctiva and fundus, lung, cardiac examination includingpalpation and auscultation with identification of heart sounds andmurmurs, abdominal distension and splenic palpationBedside clinic |
| **TUE** | **CP****General Medicine – 3 hours**IM1.12 Demonstrate peripheral pulse, volume, character, quality andvariation in various causes of heart failureBedside clinic**CP - General Medicine – 3 hours**IM1.13 Measure the blood pressure accurately, recognise and discussalterations in blood pressure in valvular heart disease and othercauses of heart failure and cardiac tamponadeBedside clinic |
| **WED**  |
| **THURS** | **CP - General Medicine – 3 hours**IM1.14 Demonstrate and measure jugular venous distension S Bedside clinic |
| **FRI** | **CP - General Medicine – 3 hours**IM1.15 Identify and describe the timing, pitch quality conduction andsignificance of precordial murmurs and their variationsBedside clinic |
| **SAT** |  |

**TIME TABLE – WEEK 3**

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| **TIME** | **9-12** |
| **MON** | **CP - General Medicine – 3 hours**IM1.16 Generate a differential diagnosis based on the clinical presentationand prioritise it based on the most likely diagnosis of Heart FailureBedside clinic |
| **TUE** | **CP - General Medicine – 3 hours**IM1.17 Order and interpret diagnostic testing based on the clinical diagnosis including 12 lead ECG, Chest radiograph, blood culturesBedside clinic |
| **WED** | **CP - General Medicine – 3 hours**IM1.18 Perform and interpret a 12 lead ECG Bedside clinic |
| **THURS** | **CP - General Medicine – 3 hours**IM3.4 Elicit document and present an appropriate history including theevolution, risk factors including immune status and occupational risk of PneumoniaBedside clinic |
| **FRI** | **CP -General Medicine – 3 hours**IM3.5 Perform, document and demonstrate a physical examinationincluding general examination and appropriate examination of thelungs that establishes the diagnosis, complications and severity ofPneumonia Bedside clinic |
| **SAT** |  |

**TIME TABLE – WEEK 4**

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| **TIME** | **9-12** |  |
| **MON** | **CP - General Medicine – 3 hours**IM3.6 Generate document and present a differential diagnosis based onthe clinical features, and prioritise the diagnosis based on thepresentationBedside clinic |
| **TUE** | **CP - General Medicine – 3 hours**IM3.7 Order and interpret diagnostic tests based on the clinicalpresentation including: CBC, Chest X ray PA view, Mantoux, sputumgram stain, sputum culture and sensitivity, pleural fluid examinationand culture, HIV testing and ABGBedside clinic |
| **WED** | **CP -General Medicine – 3 hours**IM3.8 Demonstrate in a mannequin and interpret results of an arterialblood gas examinationBedside clinic |
| **THURS** | **CP -General Medicine – 3 hours**IM3.9 Demonstrate in a mannequin and interpret results of a pleural fluidaspirationDOAP session |
| **FRI** | **CP -General Medicine – 3 hours**IM3.10 Demonstrate the correct technique in a mannequin and interpretresults of a blood cultureDOAP session |
| **SAT** | **Holiday -Mahanavami** |

**TIME TABLE – WEEK 5**

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| **TIME** | **9-12** |
| **MON** | **Holiday-pooja** |
| **TUE** | **CP -General Medicine – 3 hours**IM3 11 enumerate the indications further testing IM3.11 Describe and for including HRCT, Viral cultures, PCR and specialised testingBedside clinic  |
| **WED** | **CP - General Medicine – 3 hours**IM3.12 Select, describe and prescribe based on the most likely aetiology,an appropriate empirical antimicrobial based on the pharmacologyand antimicrobial spectrumBed side clinic |
| **THURS** | **Holiday-Nabidinam** |
| **FRI** | **CP – General Medicine – 3 hours**IM3.13 Select, describe and prescribe based on culture and sensitivityappropriate empaling antimicrobial based on the pharmacology andantimicrobial spectrum.Bedside clinic |
| **SAT** |  |

**Time table – week 6**

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| **TIME** |  |
| **MON** | **CP - General Medicine – 3 hours**IM3.14 Perform and interpret a sputum gram stain and AFB DOAP session |
| **TUE** | **CP – General Surgery 3 hours****Communicate and counsel patients and families about the treatment and prognosis of shock demonstrating empathy and care. DOAP****SU 2.3** |
| **WED** | **CP - General Surgery 3 hours****9-11 Communicate the results of surgical investigations and counsel the****patient appropriately SU 9.3 DOAP 2 hours** **11-12 Describe the steps and obtain informed consent in a simulated****Environment SU 10.2 DOAP 1 hour** |
| **THURS** | **CP - General Surgery****Perform basic surgical Skills such as First aid including suturing and minor surgical procedures in simulated environment****DOAP( 3 hours) SU 10.4** |
| **FRI** | **CP - General Surgery** **Demonstrate maintenance of an airway in a mannequin or****Equivalent DOAP (3 hours) SU 11.3** |
| **SAT** |  |

**Time table – week 7**

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| **TIME** | **CP - General Surgery** **Observe common surgical procedures and assist in minor surgical****procedures; Observe emergency lifesaving surgical procedures.****DOAP (3 hours) SU 10.3** |
| **MON** | **CP – General surgery****Counsel patients and family/ friends for blood transfusion and blood****donation.DOAP (3 hours) SU 3.3** |
| **TUE** | **CP – General Surgery****Communicate and counsel patients and families on the outcome****and rehabilitation demonstrating empathy and care. SU 4.4****Small group****Discussion (1 hour)** **Role play (2 hours)** |
| **WED** | **CP - General Surgery** **Counsel patients and relatives on organ donation in a simulated****Environment.DOAP 3 hours SU 13.4** |
| **THURS** | **CP - General Surgery** **Demonstrate the techniques of asepsis and suturing in a simulated****Environment. DOAP (3 hours)****SU 14.4** |
| **FRI** | **CP - General Surgery** **Demonstrate the techniques of asepsis and suturing in a simulated****Environment. DOAP (3 hours)****SU 14.4** |
| **SAT** | **Holiday** |

**TIME TABLE – WEEK 8**

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| **TIME** | **9-12** |
| **MON** | **CP - General Surgery** **Demonstrate the steps in Basic Life Support.****Transport of injured patient in a simulated environment.DOAP (3 hours)****SU 17.2** |
| **TUE** | **CP - General Surgery** **Demonstrate Airway maintenance. Recognize and manage tension****pneumothorax, hemothorax and flail chest in simulated environment. DOAP (3 hours) SU 17.10** |
| **WED** | **CP - General Surgery** **Clinical examination of surgical****patient including swelling and order relevant investigation for****diagnosis. Describe and discuss appropriate treatment plan.****Bedside clinic (2 hours) Small****group discussion (1 hour) SU 18.3** |
| **THURS** | **CP - General Surgery** **examination of****thyroid swellings and discus the differential diagnosis and their****management****Bedside clinics (3 hours)** **SU 22.3** |
| **FRI** | **CP - General Surgery** **Counsel the patient and obtain informed consent for treatment of****malignant conditions of the breast. DOAP (3 hours) SU 25.4** |
| **SAT** |  |

**TIME TABLE WEEK 9 /AITO Week/ HIV**

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| **TIME** | **9-12** |
| **MON** | **CP - General Surgery** **palpate the breast for breast****swelling in a mannequin or equivalent.DOAP (3 hours) SU 25.5**  |
| **TUE** | **CP - General Surgery** **Correct examination of the vascular system and****enumerate and describe the investigation of vascular disease. DOAP (3 hours) SU 27.2** |
| **WED** | **CP - General Surgery** **Demonstrate the correct examination of the lymphatic system****DOAP (3 hours)****SU 27.8** |
| **THURS** | **CP – General Surgery** **Demonstrate the correct technique to examine the patient with****hernia and identify different types of hernias bedside clinic (3 hours) SU 28.2** |
| **FRI** | **SPORTS** |
| **SAT** |  |

**TIME TABLE WEEK 10**

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| **TIME** | **9-12** |
| **MON** | **CP –General Surgery****Examination of a patient with****disorders of the stomach Bedside clinic (3 hours) 28.9** |
| **TUE** | **CP-General Surgery** **Demonstrate a digital rectal examination of the prostate in a****mannequin or equivalent DOAP (3 hours) SU 29.1** |
| **WED** | **CP-OG** **OG2.1- SGD****Describe and discuss the development and anatomy of the female****reproductive tract, relationship to other pelvic organs, applied****anatomy as related to Obstetrics and Gynaecology.** |
| **THURS** | **CP - OG – 3 hours****OG4.1- SGD****Describe and discuss the basic embryology of fetus, factors****influencing fetal growth and development, anatomy and physiology****of placenta, and teratogenesis** |
| **FRI** | **CP - OG** **OG14.1-DOAP****Enumerate and discuss the diameters of maternal pelvis and types** |
| **SAT** |  |

**Time table week - 11**

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| **TIME** | **9-12** |
| **MON** | **PERIODIC ASSESSMENT-NO CLASS** |
| **TUE** |
| **WED** |
| **THURS** | **CP - OG 3hrs****AN49.1-DOAP****Describe & demonstrate the Superficial & Deep perineal pouch****(boundaries and contents)** |
| **FRI** | **CP - OG 3HRS****AN49.2-DOAP****Describe & identify Perineal body** |
| **SAT** |  |

**Time table – week 12**

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| **TIME** | **9-12** |
| **MON** | **CP - OG – 3 hours****AN53.1- DOAP****Identify & hold the bone in the anatomical position, Describe thesalient features, articulations & demonstrate the attachments of****muscle groups** |
| **TUE** | **CP - OG – 3 hours****AN53.2- DOAP****Demonstrate anatomical position of bony pelvis & show boundaries****of pelvic inlet, pelvic cavity, pelvic outlet** |
| **WED** | **CP - OG – 3 hours****AN53.3- SGD****Define true pelvis and false pelvis and demonstrate sexdetermination in male & female bony pelvis** |
| **THURS** | **CP - OG – 3 hours****OG14.1-DOAP****Enumerate and discuss the diameters of maternal pelvis and types** |
| **FRI** | **CP - OG – 3 hours****OG17.1 -SGD/Seminar****Describe and discuss the physiology of lactation** |
| **SAT** |  |

**TIME TABLE – WEEK 13**

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| **TIME** | **9-12** |
| **MON** | **CP - OG – 3 hours****OG22.1 - SGD****Describe the clinical characteristics of physiological vaginal discharge** |
| **TUE** | **CP - OG – 3 hours****OG23.1-SGD****Describe and discuss the physiology of puberty, features of abnormal puberty, common problems and their management** |
| **WED** | **CP - OG – 3 hours****OG6.1- Bedside clinics****Describe, discuss and demonstrate the clinical features of****pregnancy, derive and discuss its differential diagnosis, elaborate****the principles underlying and interpret pregnancy tests.** |
| **THURS** | **CP -OG – 3 hours****OG8.1-Bedside clinics****Enumerate, describe and discuss the objectives of antenatal care,****assessment of period of gestation; screening for high-risk factors.** |
| **FRI** | **Holiday** |
| **SAT** |  |

**TIME TABLE –WEEK 14 - AITO - Tuberculosis**

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| **TIME** | **9-12** |
| **MON** | **CP - OG – 3 hours****OG8.2****- Bedside clinics****Elicit document and present an obstetric history including menstrual****history, last menstrual period, previous obstetric history, comorbid****conditions, past medical history and surgical history** |
| **TUE** | **CP - OG – 3 hours****OG35.5-Bedside clinics****Determine gestational age, EDD and obstetric formula** |
| **WED** | **CP - OG – 3 hours****OG8.3- Bedside clinic****Describe, demonstrate, document and perform an obstetrical****examination including a general and abdominal examination and****clinical monitoring of maternal and fetal well-being** |
| **THURS** | **CP - OG – 3 hours****OG8.5-DOAP****Describe and demonstrate pelvic assessment in a model** |
| **FRI** | **CP - OG – 3 hours****OG8.6-DOAP****Assess and counsel a patient in a simulated environment regarding****appropriate nutrition in pregnancy** |
| **SAT** |  |

**TIME TABLE – WEEK 15**

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| **TIME** | **9-12** |
| **MON** | **CP – OG – 3 hours****OG 3.1 Physiology of Ovulation, Menstruation, Fertilization, implantation, gametogenesis SGD** |
| **TUE** | **CP – Pediatrics – 3 hours****PE 1.5 Define development and discuss the normal developmental mile****stones with respect to motor, behaviour, social, adaptive and****language****Small group discussion (2hrs)****PE 3.3 Assessment of a child with developmental delay - Elicit document****and present history****bed side clinics(1hr)** |
| **WED** | **CP - Pediatrics – 3 hours****PE 1.6 Discuss the methods of assessment of development****Small group discussion(1hr)****PE 1.7 Perform Developmental assessment and interpret****Bedside clinics(1hr)****PE 3.4 Counsel a parent of a child with developmental delay****DOAP session(1hr)** |
| **THURS** | **CP - Pediatrics – 3 hours****PE 2.1 Discuss the etio-pathogenesis, clinical features and management of****a child who fails to thrive****Small group discussion(1hr)****PE 2.2 Assessment of a child with failing to thrive including eliciting an****appropriate history and examination****Bed side clinics(2hr)** |
| **FRI** | **CP - Pediatrics – 3 hours****Pe 2.3 Counselling a parent with failing to thrive child****OSPE (1hr)****PE2.4 Discuss the etio-pathogenesis, clinical features and management of****a child with short stature****Small Group discussion(2hr)** |
| **SAT** |  |

**TIME TABLE WEEK 16**

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| **TIME** | **9-12** |
| **MON** | **CP - Pediatrics – 3 hours****PE 2.5 Assessment of a child with short stature:****Elicit history, perform examination, document and present****Bed side clinics(2hr)****PE 2.6 Enumerate the referral criteria for growth related problems****Small group discussion(1hr)** |
| **TUE** | **CP - Pediatrics – 3 hours****PE 6.8 Respecting patient privacy and maintaining confidentiality while****dealing with adolescence****Bed side clinics(1hr)****PE 6.9 Perform routine Adolescent Health check up including eliciting****history, performing examination including SMR (Sexual Maturity****Rating), growth assessments (using Growth charts) and systemic****exam including thyroid and Breast exam and the HEADSS****screening****Bed side clinics(1hr)****PE 6.11 Visit to the Adolescent Clinic(1hr) DOAP** |
| **WED** | **CP - Pediatrics – 3 hours****PE 7.5 Observe the correct technique of breast feeding and distinguish right from wrong techniques****Bed side clinics(1hr)****PE 7.7 Perform breast examination and identify common problems during****lactation such as retracted nipples, cracked nipples, breast****engorgement, breast abscess****Bed side clinics(1hr)** **PE 7.8 Educate mothers on ante natal breast care and prepare mothers for****Lactation****PE 7.9 Educate and counsel mothers for best practices in Breast feeding****PE 7.10 Respects patient privacy****DOAP session(1hr)** |
| **THURS** | **CP - Pediatrics – 3 hours****PE 8.4 Elicit history on the Complementary Feeding habits****Bed side clinics(1hr)****PE 8.5 Counsel and educate mothers on the best practices in****Complimentary Feeding****DOAP session(1hr)****PE 9.4 Elicit document and present an appropriate nutritional history and perform a dietary recall****PE 9.5 Calculate the age related calorie requirement in Health and****Disease and identify gap****Bed side clinics(1hr)** |
| **FRI** | **CP - Pediatrics – 3 hours****PE 9.6 Assess and classify the nutrition status of infants, children and****adolescents and recognize deviations****Bed side clinics(2hrs)****PE 9.7 Plan an appropriate diet in health and disease****Bed side clinics(1hr)** |
| **SAT** |  |

**TIME TABLE - WEEK 17**

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| **TIME** | **9-12** |
| **MON** | **CP – Pediatrics 3 hours****PE 10. 3Assessment of a patient with SAM and MAM, diagnosis,****classification and planning management including hospital and****community based intervention, rehabilitation and prevention** **Bed side clinics(1hr)****PE 10.4 Identify children with under nutrition as per IMNCI criteria and plan referral****DOAP session(1hr)****PE 10.5 Counsel parents of children with SAM and MAM****Bed side clinics****Assessment by skill station(1hr)** |
| **TUE** | **CP – SPM – 3 Hours**CM 6.5 9-10.Orientation on clinical posting & Introduction to epidemiology - Interactive lecture10-11.Incidence & prevalence(DOAP)11-12.Introduction to heath education and allocation of health education topics (SGD**)** |
| **WED** | **CP – SPM – 3 Hours****CM6.2 Research methodology,study designs,writing a protocol.(SGD – 3 hours)** |
| **THURS** | **CP – SPM – 3 Hours****CP CM7.5****Case- Control study(DOAP)** |
| **FRI** | **CP – SPM – 3 Hours****CP - CM7.5****Cohort Study(DOAP)** |
| **SAT** |  |

**TIME TABLE – WEEK 18 – AITO WEEK – Ischemic heart disease**

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| **TIME** | **9-12** |
| **MON** | **CP - SPM 3hrs****CM6.3****9-10 Literature search(Demonstration)****10-12 Journal article allocation & reading a journal article(DOAP)** |
| **TUE** | **Holiday** |
| **WED** | **CP - SPM 3hrs****CM5.2****Briefing on Family Health Study & Diet Survey(Interactive lecture and SGD)** |
| **THURS** | **CP - SPM 3hrs****CM5.2 Family Health Study & Diet Survey(Field Visit)** |
| **FRI** |  |
| **SAT** |  |

**TIME TABLE – WEEK 19**

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| **TIME** | **9-12** |
| **MON** | **1st SESSIONALS-NO CP** |
| **TUE** |
| **WED** |
| **THURS** | **CP -SPM 3hrs****CM5.2****Family Health Study & Diet Survey(Field Visit** |
| **FRI** | **CP - SPM – 3 Hours CM6.2****9-10 -Vital statistics(Interactive lecture)****10-12 – Exercises on Vital Statistics(DOAP)** |
| **SAT** |  |

**TIME TABLE – WEEK 20**

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| **TIME** | **9-12** |
| **MON** | **CP - SPM 3hrs****CM6.2****Data analysis(SGD)** |
| **TUE** | **CP CM6.23hrs****Data Presentation(SGD)** |
| **WED** | **CP – CP – SPM – 3 Hours****CM6.2****Selection of project topic for small groups and finalizing the protocol (SGD)** |
| **THURS** | **CP – CP – SPM – 3 Hours** **CM6.2****Proforma preparation & presentation (SGD)** |
| **FRI** | **CP – CP – SPM – 3 Hours****CM6.3****Journal articles presentation & critical appraisal of the articles****(SGD)** |
| **SAT** | **HOLIDAY** |

**Time table - Week 21**

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| **TIME** | **9-12** |
| **MON** | **CP -SPM 3hrs****CM6.2** **Final protocol presentation(SGD)** |
| **TUE** | **CP - SPM – 3 Hours****CM4.2,4.3****Health education presentation in the department(Demonstration)** |
| **WED** | **CP - SPM – 3 Hours****CM4.2,4.3****Health education presentation in the community(Field Visit)DOAP** |
| **THURS** | **CP - SPM – 3 Hrs****CM12.1,12.2,12.3****Visit to S.S Samiti (Centre for destitutes)SGD** |
| **FRI** | **CP -SPM – 3 Hours****CM3.2****Visit to water purification plant****DOAP** |
| **SAT** |  |

**Time table - week 22**

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| **TIME** | **9-12** |
| **MON** | **CP – SPM – 3 hours****End Posting evaluation****(Written,Viva voce & skill assessment)** |
| **TUE** | **CP – Orthopedics-3hrs** **9-10 Major Joint dislocations OR 1.5 Bedside Clinic****10-11 Closed reduction shoulder / hip /knee OR 1.6 DOAP****11-12 Fracture of clavicle , proximal humerus, humerus Shaft OR 2.1,2.2,2.4 Bedside clinic** |
| **WED** | **CP - Orthopedics – 3 hours****9-10 Forearm fractures, facture distal end of radius OR 2.5, 2.6 Bedside clinic****10 – 11 Spine injuries OR 2.8 Bedside clinic****11-12****Pelvic injuries and Mx of hemodynamic instability OR 2.7, 2.9 Bedside clinic** |
| **THURS** | **CP - Orthopedics – 3 hours****9-10 Fracture of proximal femur OR 2.10 Bedside clinic****10-11 Gracture of shaft of femur, patella fracture OR 2.11, 2.12 Bedside clinic****11-12 Compartment syndrome, VIC – Case discussion OR 2.11 Bedside clinic** |
| **FRI** | **CP - Orthopedics – 3 hours****9-10 Ankle fractures, Fracture of calcaneum, Foot OR 2.13, 2.14 Bedside clinic****10-11 Open fractures and management**Mal-union and non union of fractures OR 2.15, 2.16 Bedside clinic11-12 Mal-united distal radius fracture: Case discussionOR 2.15 Bedside clinic |
| **SAT** |  |

**Time table – Week 23**

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| **TIME** | **9-12** |
| **MON** | **SECOND PERIODIC ASSESSMENT-NO CP** |
| **TUE** |
| **WED** |
| **THURS** | **CP - Orthopedics – 3 hours****9-10 Joint aspiration****Arthrotomy****Incision and drainage****OR 3.2, 3.3 DOAP****10-11** Bone and joint infectionOR 3.1 Small group discusssion11-12 Chronic osteomyelitis- Case discussion OR3.1 Small group discussion |
| **FRI** | **CP - Orthopedics – 3 hours****9-10 CTEV, DDH****OR 12.1 Small group discussion****10-11** Cerebral palsy, Polio OR 8.1, 9.1 Small group discussion11-12 Poliomyelitis- Case discussionOR 9.1 Small group discussion |
| **SAT** |  |

Time table – week 24 – AITO week- Organ transplantation - FM

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| **TIME** | **9-12** |
| **MON** | **CP - Orthopedics – 3 hours****9-10 Metabolic bone disorders OR 7.1 Small group discussion****10-11** Inflammatory joint disordersOR 5.1 Bedside clinic11-12 Rheumatoid arthritis- Case discussion**OR 5.1 Bedside clinic** |
| **TUE** | **CP - Orthopedics – 3 hours****9-10 Management of joint pain OR 2.3 Bedside clinic****10-11** Degenerative spine conditionOR 6.1 Small group discussion11-12 Lumbar spondylosis- Case discussion OR 6.1 Small group discussion  |
| **WED** | **CP - Orthopedics – 3 hours****9-10 Peripheral nerve injuries****OR 11.1 Small group discussion****10-11** Claw hand and wrist drop- Case discussionOR 11.1 **Small group discussion**11-12 Foot drop- Case discussion OR 11.1 **Small group discussion** |
| **THURS** | **CP – Orthopedics – 3 hours****9-10 Resuscitation of polytrauma patient****OR 13.2 Small group discussion**Plaster, Splint, Traction OR 13.1 Small group discussion11-12 Strapping for shoulder and clavicle fracturesOrthopaedic procedure consentOR 14.2 **Small group discussion** |
| **FRI** | **ENT** EN 1.1 Anatomy SGD (2hrs)EN 2.1 , EN 2.2 EN 2.3 , EN 3.1 EN 4.1 History, Us of head lamp, Otoscopy, Otalgia (Bedside-1hr) |
| **SAT** | **HOLIDAY** |

TIME TABLE - WEEK 25

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| **TIME** | **9-12** |
| **MON** | **CP-ENT**EN 1.1 – 1.2 Physiology of Ear Lecture(1hr)EN 2.4 (Tuning fork tests – DOAP 1 Hour EN 2.8, 4.16 pure tone audiogram & impedance audiogram EN 4.17 indications and interpret the results of an audiogram(Bedside Clinics 1 hour) |
| **TUE** | **ENT**EN 4.5 – History and clinical features OME – Small Group Discussion (1hr)EN 4.13 - Otosclerosis– SGD (1hr)EN 4.14 - Sudden Sensorineural Hearing Loss – Small Group Discussion (1hr) |
| **WED** | **CP – ENT**EN 4.12 - Hearing loss– Bedside (1hr)EN 4.15 - Noise Induced Hearing Loss – SGD (1/2hr)EN 4.18 - Facial Nerve palsy– SGD (1hr)EN 4.2 diseases of the external Ear - Small group discussion (½ hr) |
| **THURS** | **CP – ENT**EN 4.3 ASOM (Bedside clinics)EN 4.4 tympanic membrane and its mobility (DOAP)EN 4.6 discharging ear (Bedside clinics) |
| **FRI** | EN 4.19 – DOAP Vertigo (1hr)EN 4.20 - Meniere’s disease DOAP (1hr)EN 4.21 - of Tinnitus – SGD 1hr) |
| **SAT** |  |

Time table – Week 26

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| **TIME** | **9-12** |
| **MON** | **CP - ENT**EN 2.15 - National programs for prevention of deafness DOAP (1 hr)EN 4.7, EN 4.8 CSOM (Bedside clinics 1 hour)EN 4.9, 4.10, 2.10, 2.14 syringing wax, Myringotomy, Myringoplasty, Instruments in ENT, Topical Medicines (DOAP) |
| **TUE** | CP-ENTEN 4.53 – HIV manifestations in ENT– SGD (1hr)EN 4.11, ENT 3.4 - mastoidectomy foreign bodies (DOAP)EN 2.9, 2.11 - Investigations relevant to the ENT disorders , malignant & pre- malignant ENT diseases – SGD (1 hour) |
| **WED** | **CP – ENT**EN 1.1, 1.2 Anatomy& Physiology of Nose – SGD (1hr)EN 2.5, 3.2 - examination of the nose &Para-nasal sinuses including the use of nasal speculum, Nasal Endoscopy (DOAP)EN 4.22 - Nasal Obstruction – Small group discussion (1hr) |
| **THURS** | **CP-ENT** EN 4.23 – DNS SGD(1hr)EN 4.24 - septoplasty - DOAPEN 4.25 - Nasal Polyps– Bedside (1hr) |
| **FRI** | **CP - ENT** EN 4.27 - Allergic Rhinitis Bedside– (1hr)EN 4.28 - Vasomotor Rhinitis – bedside (1hr)EN 4.29, EN 4.33 - Acute & ChronicRhinosinusitis– DOAP (1hr |
| **SAT** |  |

 Time table - Week 27

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| **TIME** | **9-12** |
| **MON** | **CP - ENT** EN 4.30 - Epistaxis – Bedside clinics (1hr)EN 4.31 - Trauma to the face & neck - SGD (1hr)EN 4.32 - Nasopharyngeal Angiofibroma–DOAP(1hr) |
| **TUE** | **CP - ENT** EN 4.34 - Tumors ofMaxilla– DOAP (1hr)EN 4.35 - Tumors ofNasopharynx–DOAP Lecture (1hr)EN 4.36 - diseases of the Salivaryglands – DOAP (1hr) |
| **WED** | **CP - ENT** EN 1.1, 1.2 Anatomy & Physiology of Pharynx - SGD(1hr) EN 4.26 - Management of Adenoids – SGD (1/2hr)EN 2.6 - Examining the throat ,use of a tongue depressor - DOAPEN 4.37 - Ludwig’sangina– DOAP (1/2hr) |
| **THURS** | **CP - ENT** EN 4.39 - Acute & Chronic Tonsillitis– Bedside (1hr)EN 4.40 - tonsillectomy / adenoidectomy – DOAP (1 hour)EN 4.41 - Acute & chronic Pharyngeal abscesses DOAP (1/2hr)EN 2.7 - laryngeal crepitus - DOAP (1/2 hour) |
| **FRI** | **HOLIDAY** |
| **SAT** |  |

WEEK 28

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| **TIME** | **9-12** |
| **MON** | **CP - ENT** EN 1.1, 1.2 Anatomy & Physiology of Larynx, Esophagus - SGD (1hr) EN 4.42 - hoarseness ofvoice– Bedside Clinics (1hr)EN 3.3 - Rigid/Flexible Laryngoscopy– DOAP (1 hour) |
| **TUE** | **CP - ENT** EN 4.43 Acute & ChronicLaryngitis - DOAP (1hr)EN 4.44 - Lesions of the vocalcord– DOAP (1hr)EN 4.45 - Vocal cordpalsy– DOAP (1hr) |
| **WED** | **CP – ENT**EN 4.46 - Malignancy of the Larynx &Hypopharynx– DOAP (1hr)EN 4.48 - management of Airway Emergencies – DOAP (1hr)EN 4.47 Stridor– SGD (1/2 hr)EN 4.49 - foreign bodies in the air & food passages – SGD (1/2hr) |
| **THURS** | **CP - ENT** EN 4.50,4.51 -Tracheostomy procedure & care of Patient- DOAP(1hr)EN 2.13 - ENT emergencies in a simulated environment DOAP(1hr)En 4.52,4.38 - Diseases ofOesophagus,Dysphagia – SGD (1hr) |
| **FRI** | **CP – ENT** EN 2.12 - Informed consent & Patient counselling -Bedside (1hr)EN 3.5 -Surgical procedures in ENT– DOAP (1hr)EN 3.6 - emergency procedures in ENT – DOAP(1hr) |
| **SAT** |  |

WEEK 29 – AITO – DIABETES MELLITUS - SPM

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| **TIME** | **9-12** |
| **MON** | **CP – Ophthalmology –** AN41.1 Parts and layers of eyeballSGD – 1 ourOP1.3 visual acuity assessment , the pin hole test and the menace and blink reflexes (DOAP – 2 hours) |
| **TUE** | **CP - Ophthalmology –**OP2.1, 2.2 common conditions of the lid and adnexa (SGD 1 hour, DOAP 2 hours) |
| **WED** | **HOLIDAY** |
| **THURS** | **CP -Ophthalmology –**OP2.3 Clinical procedures performed in the lidDOAP 3 hours |
| **FRI** | **CP - Ophthalmology –** OP3.1, 3.2 Red eye History taking, Examination DOAP 3 hours |
| **SAT** |  |

WEEK 30

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| **TIME** | **9-12** |
| **MON** | **CP - Ophthalmology –**OP3.8, 4.8 foreign body from the eye , cornea in a simulated environment DOAP – 2 hoursOP3.9 instillation of eye drops in a simulated environment DOAP 1 hour |
| **TUE** | **CP - Ophthalmology** OP6.6 common clinical conditions affecting the anterior chamber**Bedside 2 hours****DOAP 1 hours** |
| **WED** | **CP - Ophthalmology –** OP6.10 Counsel patients with conditions of the iris and anterior chamber **DOAP – 3 hours** |
| **THURS** | **CP -Ophthalmology** OP7.2 cataract SGD 3 hours |
| **FRI** | **CP - Ophthalmology –**OP7.3 ocular examination in a patient with a cataract**DOAP – 3 hours** |
| **SAT** |  |

Week 31

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| **TIME** | **9-12** |
| **MON** | **SESSIONAL EXAMS-NO CP** |
| **TUE** |
| **WED** |
| **THURS** |
| **FRI** |
| **SAT** | **Holiday** |

Week 32

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| **TIME** | **9-12** |
| **MON** | **CP – Ophthalmology**OP7.5 To participate in the team for cataract surgery DOAP session**3 Hours** |
| **TUE** | **CP - Ophthalmology** OP7.6 Administer informed consent and counsel patients for cataract surgery in a simulated environment DOAP 3 hours |
| **WED** | **CP - Ophthalmology –** **OP 7.4** extracapsular cataract extraction surgery.DOAP – 2 hoursSGD – 1 hour |
| **THURS** | **CP - Ophthalmology –** IM24.15 vision and visual loss in the elderly SGD – 3 hours |
| **FRI** | **CP - Ophthalmology** **OP 2.6 Proptosis SGD (3 hours)** |
| **SAT** |  |

Week 33

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| **TIME** | **9-12** |
| **MON** | **CP - Ophthalmology** OP8.3 correct technique of a fundus examination Small group discussion – 3 hours |
| **TUE** | **CP - Ophthalmology** OP8.4 treatment modalities in management of diseases of the retina**SGD 3 hours** |
| **WED** | **Holiday Ramzan** |
| **THURS** | **CP – Ophthalmology**OP8.5 diseases of the optic nerve and visual pathwaySGD – 3 hours |
| **FRI** | **CP - Ophthalmology** OP9.1 examine extra ocular movements DOAP – 3 HOURS |
| **SAT** |  |

Week 34

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| **TIME** | **9-12** |
| **MON** | **CP - Ophthalmology** OP4.10 Counsel patients and family about eye donation in a simulated environment DOAP 3 hours |
| **TUE** | **CP – Ophthalmology** **OP 4.5, 4.6 Corneal blindness Keratoplasty** **SGD** |
| **WED** | **CP-Respiratory Medicine****CT 1.5 History taking and documentations - Respiratory symptoms (1 hour Bedside)****CT 1.6 General examination and Examination of chest (Bedside 2 hours)** |
| **THURS** | **CP-Respiratory Medicine****CT 1.8 Differential diagnosis based on clinical history chest symptoms****(Bedside – 1 HOUR)****CT1.7, 1.9 Interpretation of diagnostic test, Perform and interpret Mantoux (DOAP 1 hours)** |
| **FRI** | **CP-Respiratory Medicine 3hrs****CT 1.11 (Skill assessment 2 hours )Pleural fluid aspiration****CT 1.12 Indications for serology, PCR, Culture sensitivity (1 hour SGD)** |
| **SAT** |  |

Week 35

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| **TIME** | **9-12** |
| **MON** | **CP-Respiratory Medicine 3hrs****CT 1.2 SGD 1 hour****Microbiology of TB bacillus Clinical evolution and history of TB** **CT 1.3 SGD 1 hour TB and HIV, Comorbid conditions like DM** **CT 1.4 SGD 1 hour Drug resistance** |
| **TUE** | **CP-Respiratory Medicine 3hrs****CT 1.13 SGD BCG Vaccination (30 mts)****CT 1.15 DOTS (Bedside 1 hour)****CT 1.16 Chemoprophylaxis in TB (Bedside 1 hour)****CT 1.17 (SGD 30 mts) TB cure and resistance** |
| **WED** | **CP-Respiratory Medicine 3hrs****CT 2.8 Obstructive airway disease history and documentation (1 hour bedside)****CP-Respiratory Medicine 3hrs****CT 2.9 Systemic examination (1 hour Bedside)****CT 2.10 (Bedside 1 hour) Differential diagnosis based on clinical features** |
| **THURS** | **CP-Respiratory Medicine 3hrs****CT 2.11 , CT 2.12 PFT (Bedside 2 hours)****CT 2.22 Demonstrate and counsel use of inhalers (1 hour DOAP)** |
| **FRI** | **CP-Respiratory Medicine 3hrs****CT 2.1, 2.2, 2.3 Obstructive airway disease epidemiology and causes (SGD 1 hour)****CT 2.6 Exacerbation of obstructive airway disease – Environmental factors (1 hour)****CT 2.7 Allegic and Non allergic precipitants ( SGD 1 hour)** |
| **SAT** |  |

Week 36

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| **TIME** | **9-12** |
| **MON** | **3rd PERIODICASSESSMENT-NO CP** |
| **TUE** |
| **WED** |
| **THURS** | **CP-Respiratory Medicine 3hrs****2.14 Indication and nterpretation of ABG, Chest Xray, Pulse oximetry (SGD 1 hour)****CT 2.16Treatment of obstructive airway disease – Bronchodilators (SGD 1 hour)****2.17 Vaccination on OAD (SGD 1 hour)** |
| **FRI** | **CP-Respiratory Medicine 3hrs****CP – Respiratory Medicine****CT 2.4 Hypoxia, Hypercapneia SGD (1 hour)****CT 2.20 Treatment of obstructive airway disease –Oxygen therapy (SGD 2 hours)** |
| **SAT** |  |

Week 37

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| **TIME** | **9-12** |
| **MON** | **CP – Psychiatry – 3 hours****9-10 am** **PS1.1 Establish rapport and empathy with patients** **DOAP session****10-11 am** **PS1.3 Demonstrate breaking of bad news in a simulated environment** **DOAP session** **11-12 am****PS1.4 Describe and demonstrate the importance of confidentiality in patient encounters****DOAP session** |
| **TUE** | **CP Psychiatry – 3 hours****9-12 am****PS3.3 Elicit, present and document a history in patients presenting with a****mental disorder****Bedside clinic, DOAP session** |
| **WED** | **CP Psychiatry – 3 hours****9-12 am****PS3.5 Perform, demonstrate and document a mental status examination** **Bedside clinic, DOAP session** |
| **THURS** | **CPPsychiatry – 3 hours****9-12 am****PS4.2 Elicit, describe and document clinical features of alcohol and****substance use disorders****Bedside clinic, DOAP session** |
| **FRI** | **CP Psychiatry – 3 hours****9-12 am****PS5.2 Enumerate, elicit, describe and document clinical features, of SCZ****Bedside clinic, DOAP session** |
| **SAT** | **Holiday** |

Week 38

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| **TIME** | **9-12** |
| **MON** | **CP Psychiatry – 3 hours****9-12 am****PS6.2 Enumerate, elicit, describe and document clinical features in****patients with depression****Bedside clinic, DOAP session** |
| **TUE** | **CPPsychiatry – 3 hours****9-12 am****PS7.2 Enumerate, elicit, describe and document clinical features in****patients with bipolar disorders****Bedside clinic, DOAP****Session** |
| **WED** | **CPPsychiatry – 3 hours****9-12 am****PS8.2 Enumerate, elicit, describe and document clinical features in****patients with anxiety disorders****Bedside clinic, DOAP session** |
| **THURS** | **CPPsychiatry – 3 hours****9-12 am****PS9.2 Enumerate, elicit, describe clinical patients with stress related disorders** **Bedside clinic, DOAP session** |
| **FRI** | **CP – Psychiatry – 3 hours****9-12 am****Skill Assessment** |
| **SAT** |  |

Week 39

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| **TIME** | **9-12** |
| **MON** |  **CP-RADIODIAGNOSIS-3hrs****RD 1.1, 1.2 Radiation protection, Equipments (doap 1 HOUR) 1.11 DOAP(1 hour) Common imaging procedures****1.12 , 1.13 DOAP (1 hour) Radiation exposure, PC-PNDT** |
| **TUE** | **CP-RADIODIAGNOSIS-3hrs** **Common radiological investigations CT and Chest X ray RD 1.5, AN 25.7 DOAP (1 hour)****IM 3.7, IM 3.11, IM 6.12 DOAP (1 hour)****PE 34.8, PE 23.13 DOAP (1 hour)**  |
| **WED** | **CP-RADIODIAGNOSIS-3hrs** **IM 1.19, PE 23.16 CVS – 2D Echo (Bedside 1 hour),****1M 3.11, PE 23.13 HRCT (DOAP 2 hours)** |
| **THURS** | **CP-RADIODIAGNOSIS-3hrs** **RD 1.4, AN 51.2 Investigations and findings in OBG , Pelvis Imaging (Bedside – 1 hour) SU 25.3, Breast (Bedside 1 hour)** **OG 9.4 GTD (DOAP 1 hour)** |
| **FRI** | **CP-RADIODIAGNOSIS-3hrs** **Investigations and findings in surgery, pediatrics, Medicine \_ Malignancy (1 hour)****RD 1.1 Bedside Emergency radiology (1 hour)****IM 13.12 Chest X ray, Mammogram, Biopsy (Bedside) 1 hour** |
| **SAT** |  |

Week 40

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| **TIME** | **9-12** |
| **MON** | **CP-RADIODIAGNOSIS-3hrs** **IM 10.19 Renal ultrasound, PE 21.13 Ultrasound KUB (I hour – Bedside)****IM 18.9 Diagnostic and Imaging test DOAP (1 hour)****PE 21.12 Xray, KUB – DOAP (1 hour)** |
| **TUE** | **CP-RADIODIAGNOSIS-3hrs** **Neurosystem Head and Neck****DOAP (1 HOUR) PE 30.23 Interpretation of CT, MRIAN 43.8 , 43.9 Carotid and vertebral angiogram****DOAP (1 hour) AN RD 1.3, ENT investigations and Interpretation (1 hour)****DOAP (1 hour) AN 43.7 Skull, C spine, PNS** **PE 28.17 PNS Xray, Chest Xray for foreign body aspiration**  |
| **WED** | **CP-RADIODIAGNOSIS-3hrs** **AN 13.4 DOAP Upper limb – Views (1 hour)****AN 20.6 DOAP Lower limb views (1 hour)****IM 7.18, IM 19.7 Movement disorders and X ray Joints DOAP (1 hour)** |
| **THURS** | **CP-RADIODIAGNOSIS-3hrs** **AN 25.8, AN 51.1, Barium swallow, Cross section in transpyloric plane****AN 54.1, 54.2, 54.3 X ray abdomen Barium studies, CT Abdomen, MRI, IVU HSG – DOAP (1 hour)****IM 5.13, MRCP, RD 1.9 Interventional radiology DOAP (1 hour)**  |
| **FRI** | **CP-RADIODIAGNOSIS-3hrs** **FM 1.9 DOAP Documentation – 3 hours** |
| **SAT** |  |

 Week 41

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| **TIME** | **9-12** |
| **MON** | **CP – Dermatology – 3 hours****DR 1.2 Identify and grade the various common types of acne. Bedside Clinic** |
| **TUE** | **CP– Dermatology – 3 hours****9-11 DR3.1 Identify and distinguish psoriatic lesion from other causes.(2 hoursBedside Clinic)****(11-12) DR 3.2 Demonstrate grattage test – Bedside clinic** |
| **WED** | **CP– Dermatology – 3 hours****9 – 11 DR 4.1 Identify and distinguish LP lesion from other causes (bedside clinic)** **(11-12)- DR 4.2****Enumerate and describe the treatment modalities of LP****SGD** |
| **THURS** | **CP– Dermatology – 3 hours****9-12 DR 5.2 Identify and differentiate Scabies from other lesions in adults and children – Bedside clinics** |
| **FRI** | **CP– Dermatology – 3 hours (9-12)****DR 6.2 Identify and differentiate pediculosis from other skin lesions in adults and children – Bedside clinics** |
| **SAT** |  |

Week 42

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| **TIME** | **9-12** |
| **MON** | **CP– Dermatology – 3 hours (9-12) DR 9.2 Demonstrate and Classify based on the clinical features of Leprosy including neurological Examination – Bedside clinics** |
| **TUE** | **CP– Dermatology – 3 hours****DR 9.3 Indications and performance of slit skin smear in patients with leprosy ( Bedside clinics – 2 hours****DOAP – 1 hour)** |
| **WED** | **CP– Dermatology – DR 10.1 Identify Atopic Dermatitis and Manage( 3 hours – Bedside clinics)** |
| **THURS** | **CP– Dermatology – 3 hours****9-11 am ,DR 13.1****Distinguish bullae from Vescicles (Bedside clinics -2 hours)****11-12,DR13.2 Demonstrate the Tzanck test, Nicolsky sign and bulla spread sign (1 Hour bedside clinic)** |
| **FRI** | **CP – Dermatology – 3 hours****9-11 (2 hours) DR 12.2 IIdentify Eczema and differentiate it from Lichenification and changes of ageing - Bedside clinics****11-12 ( 1 hour) DR 12.6 Identify and distinguish exfoliative dermatitis from other skin lesions – bedside clinics** |
| **SAT** |  |