PEDIATRICS (CODE: PE)

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH / SH/P	Core Y/N	Objectives	Date	Time	Suggested Teaching Learning methods	Suggested Assessment methods	Number required to certify P	Vertical Integration
					PEDIATRICS						
Topic: Normal Growth and Development			**Number of competencies : (07)**						**Number of procedures that require certification: (02)**		
PE1.1	Define the terminologies Growth and development and discuss the factors affecting normal growth and development	K	KH	Y	At the end of the session the Phase III student must able to A)define growth& development B)define fators affecting normal growth and development. C)ist laws of growth and development D)list domains of development	01.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE1.2	Discuss and describe the patterns of growth in infants, children and adolescents	K	KH	Y	At the end of the session the Phase III student must able to A) discuss different tissues grow at different rates. B) discuss growth of body fat and muscle mass. C)describe skeletal growth and bone age estimation.	01.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE1.3	Discuss and describe the methods of assessment of growth including use of WHO and Indian national standards. Enumerate the parameters used for assessment of physical growth in infants, children and adolescents	K	KH	Y	At the end of the session the Phase III student must able tolist age dependent anthropometry. A)list age independent anthropometry. B)list parameters used for assessment of physical growth. C)define growth chart.	01.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE1.4	Perform Anthropometric measurements, document in growth charts and interpret	S	P	Y	At the end of the session the Phase III student must able to a) demonstrate anthropometric measurements in a given child. B) document in growth chart. C)interpret in growth chart.	05.04.22	9.30-10.30	Small group discussion	Document in Log book	3	
PE1.5	Define development and discuss the normal developmental mile stones with respect to motor, behaviour, social, adaptive and language	K	KH	Y	At the end of the session the Phase III student must able to- a)Define development. B) list developmental milestone in a two year child in all four domains. c)interpret the developmental age in a given child.	08.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE1.6	Discuss the methods of assessment of development	K	KH	Y	At the end of the session the Phase III student must able to A)discuss equipment used for development assessment. B)discuss method of assessment of development. C)-list assessment scale used for developmental surveillance. D)discuss development quotient..	08.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE1.7	Perform Developmental	S	P	N	At the end of the session the Phase III student must able to	-	-	Bedside clinics,	Document in Log book	3	

Topic: Common problems related to Growth			**Number of competenci es:(06)**						**Number of procedures that require certification: (NIL)**		
PE2.1	Discuss the etio-pathogenesis, clinical features and management of a child who fails to thrive	K	KH	Y	At the end of the session the Phase III student must able to a)define failure to thrive. B)describe causes of fails to thrive. C)discuss clinical features of fails to thrive. D)discuss management of failure to thrive.	15.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE2.2	Assessment of a child with failing to thrive including eliciting an appropriate history and examination	S	SH	Y	At the end of the session the Phase III student must able to A)perform history taking in a failure to thrive child. B) perform examination in the child with failing to thrive.	-	-	Bedside clinics	Skills Station		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE2.3	Counselling a parent with failing to thrive child	A/C	SH	Y	At the end of the session the Phase III student must able to A)council regarding dietary causes in failure to thrive child with charts. B) council regarding danger signs in failure to thrive child. C)council regarding prognosis in failure to thrive child.	22.10.21	9.30-10.30	OSPE	Document in Log book		AETCOM

PE2.4	Discuss the etio-pathogenesis, clinical features and management of a child with short stature	K	KH	Y	At the end of the session the Phase III student must able to A)list causes of short stature. B)discuss clinical features in short stature. C)describe management of short stature.	22.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE2.5	Assessment of a child with short stature: Elicit history, perform examination, document and present	S	SH	Y	At the end of the session the Phase III student must able to A)perform history taking in a given child. B)perform examination in a given child. C)document in growth chart of a given child.	-	-	Bedside clinics, Skill lab	Skill Assessment		
PE2.6	Enumerate the referral criteria for growth related problems	K	K	Y	At the end of the session the Phase III student must able to A)list referral criteria for growth related problems.	22.10.21	9.30-10.30	Small group discussion	Written/ Viva voce		

Topic: Common problems related to Development -1 (Developmental delay , Cerebral palsy)
Number of competencies:(08) Number of procedures that require certification : (NIL)

PE3.1	Define, enumerate and discuss the causes of developmental delay and disability including intellectual disability in children	K	K	Y	At the end of the session the Phase III student must able to A)define developmental delay. B)define intellectual disability. C)discuss causes of developmental delay. D)list the risk factors for developmental delay. E)describe intelligent quotient. F)list common presentations of intellectual disability by age.	29.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE3.2	Discuss the approach to a child with developmental delay	K	K	Y	At the end of the session the Phase III student must able to A)discuss developmental assessment. B)discuss investigation of a child with developmental delay. C)describe management of a child with developmental delay. D)discuss complication in a child with developmental delay.	29.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE3.3	Assessment of a child with developmental delay - Elicit document and present history	S	SH	Y	At the end of the session the Phase III student must able to A)present history in a given child. B)list severity of intellectual disability. C)apply developmental assessment in a given child. D)calculate developmental quotient. E)perform CNS examination in a given child.	-	-	Bedside clinics, Skills lab	Skill Assessment		

PE3.4	Counsel a parent of a child with developmental delay	S	SH	Y	At the end of the session the Phase III student must able to A) council parent with developmental delay child regarding dietary plan with chart. B) council parent with developmental delay child regarding investigation plan. C) council parent with developmental delay child regarding disease prognosis. D) council parent with developmental delay child regarding complications with flipchart.	-	-	DOAP session	Document in Log Book		
PE3.5	Discuss the role of the child developmental unit in management of developmental delay	K	K	N	At the end of the session the Phase III student must able to A)discuss investigation in developmental delay child B)list multidisciplinary treatment in developmental delay child. C)describe early stimulation . D)discuss treatment for complications in developmental delay child.	29.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
PE3.6	Discuss the referral criteria for children with developmental delay	K	K	Y	At the end of the session the Phase III student must able to A)list the referral criteria for developmental delay child.	29.10.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE3.7	Visit a Child Developmental Unit and observe its functioning	S	KH	Y	At the end of the session the Phase III student must able to A)Identify causes in child in developmental unit. B)observe functioning in developmental unit. C)document it in registers in developmental unit. D)document it in proformer in developmental unit.	29.10.21	9.30-10.30	Lecture, Small group discussion	Log book Entry		Community Medicine
PE3.8	Discuss the etio-pathogenesis, clinical presentation and multi-disciplinary approach in the management of Cerebral palsy	K	KH	Y	At the end of the session the Phase III student must able to A)define cerebral palsy. B)describe causes of cerebral palsy. C)discuss pathogenesis of cerebral palsy. D)discuss clinical features of cerebral palsy. E)discuss investigation of cerebral palsy. F)describe multidisciplinary approach in management of cerebral palsy. HGdiscuss prognosis of cerebral palsy.	05.11.21	9.30-10.30	Lecture, Small group, Bedside clinics	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
Topic: Common problems related to Development-2 (Scholastic backwardness, Learning Disabilities , Autism , ADHD)						**Number of competencies: (06)**				**Number of procedures that require certification:**	

PE4.1	Discuss the causes and approach to a child with scholastic backwardness	K	K	N	At the end of the session the Phase III student must able to A)discuss causes of scholastic backwardness. B)discuss risk factors of scholastic backwardness. C)describe management of a child with scholastic backwardness.	12.11.21	9.30-10.30	Lecture, Small group discussion	Written		
PE4.2	Discuss the etiology, clinical features, diagnosis and management of a child with Learning Disabilities	K	K	N	At the end of the session the Phase III student must able to A)define dyslexia. B)describe pathogenesis of learning disabilities. C)discuss clinical manifestation of learning disabilities. D)describe diagnosis of a child with learning disabilities. E)discuss management of learning disabilities. F)describe prognosis of learning disabilities.	12.11.21	9.30-10.30	Lecture, Small group discussion	Written		
PE4.3	Discuss the etiology, clinical features, diagnosis and management of a child with Attention Deficit Hyperactivity Disorder (ADHD)	K	K	N	At the end of the session the Phase III student must able to A)define ADHD. B)describe pathogenesis of ADHD. C)discuss clinical manifestation of ADHD. D)describe diagnosis criteria of a child with ADHD. E)discuss management of ADHD. F)describe prognosis of ADHD. G)Discuss differential diagnosis of ADHD.	19.11.21	9.30-10.30	Lecture, Small group discussion	Written		

PE4.4	Discuss the etiology, clinical features, diagnosis and management of a child with Autism	K	K	N	At the end of the session the Phase III student must able to A)define Autism. B)list pervasive developmental disorders. C)discuss clinical manifestation of Autism. D)describe diagnosis of a child with Autism. E)discuss management of Autism. F)describe prognosis of Autism.	19.11.21	9.30-10.30	Lecture, Small group discussion	Written		
PE4.5	Discuss the role of Child Guidance clinic in children with Developmental problems	K	K	N	At the end of the session the Phase III student must able to A)describe the developmental problems. B)list role of child guidance clinic in children with developmental problems.	19.11.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Psychiatry
PE4.6	Visit to the Child Guidance Clinic	S	KH	N	At the end of the session the Phase III student must able to A)identify developmental problems in child guidance clinic. B)observe functioning in child guidance clinic. C)document in registers of child guidance clinic. D)document it in proformer in child guidance clinic.	19.11.21	9.30-10.30	Lecture, Small group discussion	Document in Log Book		
Topic: Common problems related to behavior					**Number of competencies: (11)**					**Number of procedures that require certification: (NIL)**	

PE5.1	Describe the clinical features, diagnosis and management of thumb sucking	K	K	N	At the end of the session the Phase III student must able to A)describe clinical features of thumb sucking. B)discuss diagnosis of thumb sucking. C)describe management of thumb sucking. D)list sequelae associated with thumb sucking.	26.11.21	9.30-10.30	Lecture, Small group discussion	Written		
PE5.2	Describe the clinical features, diagnosis and management of Feeding problems	K	K	N	At the end of the session the Phase III student must able to A)describe clinical features of feeding problems. B)discuss diagnosis of feeding problems. C)describe management of feeding problems.	26.11.21	9.30-10.30	Lecture, Small group discussion	Written		
PE5.3	Describe the clinical features, diagnosis and management of nail biting	K	K	N	At the end of the session the Phase III student must able to A) describe clinical features of nail biting. B)discuss diagnosis of nail biting. C)describe management of nail biting.	26.11.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE5.4	Describe the clinical features, diagnosis and management of Breath Holding spells	K	K	N	At the end of the session the Phase III student must able to A) describe clinical features of breath holding spells. B)discuss diagnosis of breath holding spells. C)describe management of breath holding spells. D)list differential diagnosis for breath holding spells.	26.11.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE5.5	Describe the clinical features, diagnosis and management of temper tantrums	K	K	N	At the end of the session the Phase III student must able to A)describe clinical features of temper tantrums. B)discuss diagnosis of temper tantrums. C)describe management of temper tantrums.	26.11.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE5.6	Describe the clinical features, diagnosis and management of Pica	K	K	N	At the end of the session the Phase III student must able to A)describe clinical features of PICA. B)discuss diagnosis of PICA. C)describe management of PICA. D) discuss differential diagnosis of PICA.	26.11.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE5.7	Describe the clinical features, diagnosis and management of Fussy infant	K	K	N	At the end of the session the Phase III student must able to A)describe clinical features of fussy infant. B)discuss diagnosis of fussy infant. C)describe management of fussy infant.	26.11.21	9.30-10.30	Lecture, Small group discussion	Written		

PE5.8	Discuss the etiology, clinical features and management of Enuresis	K	K	N	At the end of the session the Phase III student must able to A)define enuresis. B)describe clinical features of enuresis. C)discuss etiology of enuresis. D)describe management of enuresis.	03.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE5.9	Discuss the etiology, clinical features and management of Encopresis	K	K	N	At the end of the session the Phase III student must able to A)define encopresis. B)describe clinical features of encopresis. C)discuss etiology of encopresis. D)describe management of encopresis.	03.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE5.10	Discuss the role of child guidance clinic in children with behavioural problems and the referral criteria	K	K	N	At the end of the session the Phase III student must able to A)describe behavioral problems. B)list role of child guidance clinic in children. C)enumerate the referral criteria for behavioral problems.	03.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE5.11	Visit to Child Guidance Clinic and observe functioning	K	KH	N	At the end of the session the Phase III student must able to A)-describe behavioral problem in child guidance clinic. B)observe functioning in child guidance clinic. C)document it in proformer in child guidance clinic.	03.12.21	9.30-10.30	Lecture, Small group discussion	Document in Log Book		
Topic: Adolescent Health & common problems related to Adolescent Health Number of competencies: (13) Number of procedures that require certification: (NIL)											

PE6.1	Define Adolescence and stages of adolescence	K	K	Y	At the end of the session the Phase III student must able to A)define adolescence. B)list stages of adolescence. C)describe Sexual maturity rating.	10.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE6.2	Describe the physical, physiological and psychological changes during adolescence (Puberty)	K	KH	Y	At the end of the session the Phase III student must able to A)describe the physical changes during adolescence. B) describe the physiological changes during adolescence. C) describe the psychological changes during adolescence.	10.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE6.3	Discuss the general health problems during adolescence	K	KH	Y	At the end of the session the Phase III student must able to A)discuss risk factors for adolescent health behaviors. B)discuss protective factors for adolescent health behaviors. C)list general health problems during adolescence.	10.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE6.4	Describe adolescent sexuality and common problems related to it	K	KH	N	At the end of the session the Phase III student must able to -describe adolescent sexuality. -list the stages of adolescent substance abuse. -describe common problems related adolescent sexuality. -discuss management of sexually transmitted infections.	10.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE6.5	Explain the Adolescent Nutrition and common nutritional problems	K	KH	Y	At the end of the session the Phase III student must able to -describe adolescent nutrition. -list common nutritional problems. -discuss nutritional programming.	10.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE6.6	Discuss the common Adolescent eating disorders (Anorexia Nervosa, Bulimia)	K	KH	N	At the end of the session the Phase III student must able to -define anorexia nervosa. -define bulimia. -discuss clinical features of anorexia nervosa. -discuss clinical features of bulimia. -describe complications of eating disorders. -list indications for hospitalization of patients with anorexia. -describe differential diagnosis of eating disorders. -discuss prognosis of eating disorders.	10.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE6.7	Describe the common mental health problems during adolescence	K	KH	Y	At the end of the session the Phase III student must able to -list common mental health problems. -describe recommendations for care in mental health. -discuss physical examination in screening procedure.	10.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE6.8	Respecting patient privacy and maintaining confidentiality while dealing with adolescence	A	SH	Y	At the end of the session the Phase III student must able to -respect the patient privacy. -maintain confidentiality while dealing with adolescence. -council regarding prevention of disease. -council regarding complication of disease.	-		Bedside clinics	Document in log book		
PE6.9	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	S	SH	Y	At the end of the session the Phase III student must able to -perform history taking in adolescent health check up. -perform SMR in a given adolescent. -perform growth assessment in adolescent. -document it in growth chart. -perform systemic exam. including thyroid and breast exam in a given adolescent. -document HEADSS screening of a given adolescent.	-		Bedside clinics	Skills station		
PE6.10	Discuss the objectives and functions of AFHS (Adolescent Friendly Health Services) and the referral criteria	K	K	N	At the end of the session the Phase III student must able to -discuss the objectives of AFHS. -discuss the functions of AHFS. -List referral criteria for AHFS.	17.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE6.11	Visit to the Adolescent Clinic	S	KH	Y	At the end of the session the Phase III student must able to -identify problems in adolescent child. -council regarding health care in adolescent child with flipchart. -council regarding common mental health problems. -council regarding complication associated with substance drug abuse with charts.	17.12.21	9.30-10.30	DOAP session	Document in Log Book		
PE6.12	Enumerate the importance of obesity and other NCD in adolescents	K	K	Y	At the end of the session the Phase III student must able to -define obesity. -discuss body mass index. -list the causes of obesity. -discuss comorbidities in obesity. -describe the traffic diet plan. -discuss prevention in obesity. -list risk factors in adolescent for NCD. -discuss intervention needed for NCD. -discuss the importance of other NCD in adolescent. -discuss management of risk factors for NCD.	17.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE6.13	Enumerate the prevalence and the importance of recognition of sexual drug abuse in adolescents and children	K	K	N	At the end of the session the Phase III student must able to -enumerate the prevalence of sexual drug abuse. -list stages of adolescent substance abuse. -enumerate domains of risk factors for substance abuse prevention. -enumerate domains of protective factors for substance abuse prevention. -enumerate most common toxic syndromes -describe the prevention of sexual drug abuse.	17.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
Topic: To promote and support optimal Breast feeding for Infants		**Number of competencies: (11)**								**Number of procedures that require certification : (01)**	
PE7.1	Awareness on the cultural beliefs and practices of breast feeding	K	K	N	At the end of the session the Phase III student must able toDiscuss the awareness on the cultural beliefs and practices on breast feeding	24.12.21	9.30-10.30	Lecture, Small group discussion	Viva		
PE7.2	Explain the physiology of lactation	K	KH	Y	At the end of the session the Phase III student must able toa)Discuss the role of prolactin b)Discuss the role of oxytocin c)Discuss the mechanism in process of lactation	24.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE7.3	Describe the composition and types of breast milk and discuss the differences between cow's milk and Human milk	K	KH	Y	At the end of the session the Phase III student must able toa)Describe about the composition and types of breast milk b)Discuss the differences between cows milk and human milk	24.12.21	9.30-10.30	Lecture, debate	Written/ Viva voce		Physiology
PE7.4	Discuss the advantages of breast milk	K	KH	Y	At the end of the session the Phase III student must able toDiscuss the advantages of breast milk	24.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE7.5	Observe the correct technique of breast feeding and distinguish right from wrong techniques	S	P	Y	At the end of the session the Phase III student must able toa)Explain the proper breastfeeding technique b)Differntiate right technique from the wrong ones	-		Bedside clinics, Skills lab	Skill Assessment	3	
PE7.6	Enumerate the baby friendly hospital initiatives	K	KH	Y	At the end of the session the Phase III student must able to Listout the key points in baby friendly hospirtal initiative.	24.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE7.7	Perform breast examination and identify common problems during lactation such as retracted nipples, cracked nipples, breast engorgement, breast abscess	S	SH	Y	At the end of the session the Phase III student must able toExamine the breast &identify the common feeding problems	-		Bedside clinics, Skill Lab	Skill Assessment		
PE7.8	Educate mothers on ante natal breast care and prepare mothers for lactation	A/C	SH	Y	At the end of the session the Phase III student must able to Explain mothers on antenatal breast care and prepare mothers for lactation	-		DOAP session	Document in Log Book		

PE7.9	Educate and counsel mothers for best practices in Breast feeding	A/C	SH	Y	At the end of the session the Phase III student must able to Compile the details needed to Educate and counsel mothers for best practices in Breast feeding	-		DOAP session	Document in Log Book		
PE7.10	Respects patient privacy	A	SH	Y	At the end of the session the Phase III student must able to Discuss about Respects of patient privacy	-		DOAP session	Document in Log Book		
PE7.11	Participate in Breast Feeding Week Celebration	A	SH	Y	At the end of the session the Phase III student must able to Discuss the importance of Breast Feeding Week Celebration	-		DOAP session	Document in Log Book		
Topic: Complementary Feeding				**Number of**					**Number of procedures that require certification: (NIL)**		
PE8.1	Define the term Complementary Feeding	K	K	Y	At the end of the session the Phase III student must able toDefine complimentary feeding	31.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE8.2	Discuss the principles, the initiation, attributes, frequency, techniques and hygiene related to Complementary Feeding including IYCF	K	KH	Y	At the end of the session the Phase III student must able toa)Define principles of complimentary feeding including iycf b)Discuss about initiation,attribution&frequency of complimentary feeding c)Explain the techniques used in complimentary feeding	31.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine

PE8.3	Enumerate the common complimentary foods	K	K	Y	At the end of the session the Phase III student must able toListout the common complimentary foods	31.12.21	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
PE8.4	Elicit history on the Complementary Feeding habits	S	SH	Y	At the end of the session the Phase III student must able toCompile all the history related to complimentary feeding habits asked to the mother	-		Bedside clinics, Skills lab	Skill Assessment		Community Medicine
PE8.5	Counsel and educate mothers on the best practices in Complimentary Feeding	A/C	SH	Y	At the end of the session the Phase III student must able toCompile the details needed to educate and counsel the mother on best ractices in complimentary feeding	-		DOAP session	Document in Log Book		Community Medicine
Topic: Normal nutrition, assessment and monitoring			**Numbcompetencies : (07)**						**Number of procedures that require certification : (NIL)**		
PE9.1	Describe the age related nutritional needs of infants, children and adolescents including micronutrients and vitamins	K	KH	Y	At the end of the session the Phase III student must able toa. Must be able to recall the Recommended daily allowance (RDA) of micronutrients b. Must be able to recall the Recommended daily allowance (RDA) of vitamins c. Must be able to describe at least 6 functions of the micronutrients d. Must be able to describe atleast 4 functions of vitamins	07.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Biochemistry

PE9.2	Describe the tools and methods for assessment and classification of nutritional status of infants, children and adolescents	K	KH	Y	At the end of the session the Phase III student must able toa. Must be able to identify tools for assessment of nutritional status of infants and children b. Must be able to name the classifications of nutritional status in children as per the WHO guidelines c. Must be able to employ the classification of nutritional status in infants, adolescents and children	07.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
PE9.3	Explains the Calorific value of common Indian foods	K	K	Y	At the end of the session the Phase III student must able toa. Must be able to list the calorific value of 10 common indian foods	07.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE9.4	Elicit document and present an appropriate nutritional history and perform a dietary recall	S	SH	Y	At the end of the session the Phase III student must able toa. Complete an appropriate nutritional history b. Expresses and Interpret an appropriate nutritional history and prepare a diet chart c. Apply dietary recall	-		Bedside clinic, Skills lab	Skill Assessment		Community Medicine
PE9.5	Calculate the age related calorie requirement in Health and Disease and identify gap	S	SH	Y	At the end of the session the Phase III student must able toa. Calculate calorie requirement appropriate for the age b. Identify calorie deficit c. Interpret calorie deficit	-		Bedside clinics, Small group discussion	Skill assessment		Community Medicine

PE9.6	Assess and classify the nutrition status of infants, children and adolescents and recognize deviations	S	SH	Y	At the end of the session the Phase III student must able toa. Must be able to assess the nutritional status of infants, children and adolescents b. Classify the nutritional status of infants, children and adolescents using WHO growth charts	-		Bedside clinic, Small group discussion	Skill Assessment		Community Medicine
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE9.7	Plan an appropriate diet in health and disease	S	SH	N	At the end of the session the Phase III student must able to to a. Describe a diet plan for a healthy child b. List a diet plan for a malnourished child	-		Bedside clinic, Small group discussion	Document in logbook		Community Medicine
Topic: Provide nutritional support , assessment and monitoring for common nutritional problems									**Number of competencies: (06)**		**Number of procedures that require**
PE10.1	Define and describe the etio-pathogenesis, classify including WHO classification, clinical features, complication and management of Severe Acute Malnourishment (SAM) and Moderate Acute Malnutrition (MAM)	K	KH	Y	At the end of the session the Phase III student must able to must be able to describe 6 etiological causes of malnutrition to describe the 3 diagnostic criteria for the diagnosis of SAM and MAM according to WHO Must be able to list the 10 steps in the management of a malnourished child	21.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry
PE10.2	Outline the clinical approach to a child with SAM and MAM	K	KH	Y	At the end of the session the Phase III student must able to list describe the steps involved in diagnosing and managing a case of SAM and MAM	21.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry

PE10.3	Assessment of a patient with SAM and MAM, diagnosis, classification and planning management including hospital and community based	S	SH	Y	At the end of the session the Phase III student must able to list the steps involved in assessing a patient of SAM/ MAM to plan the management and list the discharge criteria and list the rehabilitation plan for a SAM/MAM	-	9.30-10.30	Bedside clinics, Skills lab	Skill station		Physiology, Biochemistry
PE10.4	Identify children with under nutrition as per IMNCI criteria and plan referral	S	SH	Y	At the end of the session the Phase III student must able to recognize a child with undernutrition as per IMNCI criteria	-	9.30-10.30	DOAP session	Document in log book		Community Medicine
PE10.5	Counsel parents of children with SAM and MAM	S	SH	Y	At the end of the session the Phase III student must able to explain and discuss the condition of a SAM/ MAM patient to the family	-	9.30-10.30	Bedside clinic, Skills Station	Document in Log book		AETCOM
PE10.6	Enumerate the role of locally prepared therapeutic diets and ready to use therapeutic diets	K	K	N	At the end of the session the Phase III student must able to list at least 3 locally prepared therapeutic diets and briefly describe RUTF	21.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
Topic: Obesity in children					**Number of competencies: (06)**				**Number of procedures that require certification: (01)**		
PE11.1	Describe the common etiology, clinical features and management of obesity in children	K	KH	Y	At the end of the session the Phase III student must able tolist explain at least 8 causes of obesity and describe the clinical features and steps involved in the management of obesity in children	28.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry, Pathology
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE11.2	Discuss the risk approach for obesity and discuss the prevention strategies	K	KH	Y	At the end of the session the Phase III student must able todescribe the risks factors for obesity and chart a plan for the prevention of obesity	28.01.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology
PE11.3	Assessment of a child with obesity with regard to eliciting history including physical activity,	S	SH	Y	At the end of the session the Phase III student must able toelicit history with respect to physical activity and dietary recall in a case of obesity	-	9.30-10.30	Bedside clinics, Standardized patients	Document in log book		
PE11.4	Examination including calculation of BMI, measurement of waist hip ratio, identifying external markers like acanthosis, striae,	S	SH	Y	At the end of the session the Phase III student must able tomeasure and calculate BMI, Waist hip ratio list and identify at least 4 external markers associated with obesity	-	9.30-10.30	Bedside clinics, Standardized patients, Videos	Skills Station		
PE11.5	Calculate BMI, document in BMI chart and interpret	S	P	Y	At the end of the session the Phase III student must able to calculate and interpret BMI using WHO growth charts	-	9.30-10.30	Bedside clinics, Small group discussion	Document in log book	3	
PE11.6	Discuss criteria for referral	K	K	Y	At the end of the session the Phase III student must able to list and describe 4 criteria for referral in case of obesity	28.01.22	9.30-10.30	Small group discussion	Viva voce		

Topic: Micronutrients in Health and disease-1 (Vitamins ADEK, B Complex and C)
Number of competencies: (21) **Number of procedures that require certification: (NIL)**

PE12.1	Discuss the RDA, dietary sources of Vitamin A and their role in Health and disease	K	K	Y	At the end of the session the Phase III student must able to - State the RDA of Vitamin A - List at least 5 dietary sources of Vitamin A - Discuss the role of Vitamin A in our body for normal health - Describe the role of Vitamin A in relation to diseases - Identify all the dietary sources of Vitamin A from a given diet chart - Explain the role of Vitamin A in our body with the help of a flip chart	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE12.2	Describe the causes, clinical features, diagnosis and management of Deficiency / excess of Vitamin A	K	KH	Y	At the end of the session the Phase III student must able to - List at least 3 causes of deficiency of Vitamin A - Discuss the clinical features of deficiency of Vitamin A with the help of diagrams - Describe at least 3 investigations to diagnose Vitamin A deficiency - Describe the treatment of Vitamin A deficiency - List 3 causes of Vitamin A excess - Discuss the clinical features of Vitamin A excess - Describe 3 investigations to diagnose Vitamin A excess - Explain the treatment of Vitamin A excess -Explain the clinical features of Vitamin A deficiency using a flip chart - Recall the WHO classification of Vitamin A deficiency - Describe the clinical features of Vitamin A excess using the blackboard	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry

PE12.3	Identify the clinical features of dietary deficiency / excess of Vitamin A	S	SH	Y	At the end of the session the Phase III student must able to - Recognise the clinical features of Vitamin A deficiency in a given patient - Record the clinical features of the given patient with Vitamin A deficiency in their log book - Identify the clinical features of Vitamin A excess in a given spotter chart - Record the clinical features of Vitamin A excess in their log book	-		Bedside clinics, Small group discussion	Document in log book		Biochemistry
PE12.4	Diagnose patients with Vitamin A deficiency, classify and plan management	S	SH	N	At the end of the session the Phase III student must able to - Recognize the clinical features to diagnose Vitamin A deficiency in the given patient - Classify the given patient accurately as per WHO classification of Vitamin A deficiency - Develop the treatment plan for the given patient - Counsel the patient and their attenders regarding diet rich in Vitamin A with the help of a diet chart - Document all these details in their log book	-		Bedside clinics, Skill Station	Document in log book		Biochemistry
PE12.5	Discuss the Vitamin A prophylaxis program and their recommendations	K	K	Y	At the end of the session the Phase III student must able to - Describe the Vitamin A prophylaxis program - List at least 3 recommendations of Vitamin A prophylaxis program	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE12.6	Discuss the RDA, dietary sources of Vitamin D and their role in health and disease	K	K	Y	At the end of the session the Phase III student must able to - State the RDA of Vitamin D - List at least 5 dietary sources of Vitamin D - Discuss the role of Vitamin D in our body for normal health - Describe the role of Vitamin D in relation to diseases - Identify all the dietary sources of Vitamin D from a given diet chart - Explain the role of Vitamin D in our body with the help of a flip chart - Explain the role of Vitamin D in causing diseases with the help of the blackboard	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry

PE12.7	Describe the causes, clinical features, diagnosis and management of Deficiency / excess of Vitamin D (Rickets and Hypervitaminosis D)	K	KH	Y	At the end of the session the Phase III student must able to - List at least 5 causes of deficiency of Vitamin D - Discuss the clinical features of deficiency of Vitamin D - Draw a diagram depicting the clinical features of Rickets - List the types of Rickets - Describe at least 5 investigations to diagnose Vitamin D deficiency - Describe the treatment of Vitamin D deficiency - List 3 causes of Vitamin D excess - Discuss the clinical features of Vitamin D excess - Describe 3 investigations to diagnose Vitamin D excess - Explain the treatment of Vitamin D excess - Explain the clinical features of Vitamin D deficiency using a flip chart - Describe the clinical features of Vitamin D excess using the blackboard	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology
PE12.8	Identify the clinical features of dietary deficiency of Vitamin D	S	SH	Y	At the end of the session the Phase III student must able to - Identify the clinical features of rickets in a given patient - Record the details of the patient with rickets in their log book	04.02.22		Bedside clinics, Skills lab	Document in log book		Biochemistry, Physiology, Pathology

PE12.9	Assess patients with Vitamin D deficiency, diagnose, classify and plan management	S	SH	Y	At the end of the session the Phase III student must able to - Demonstrate all the signs of Vitamin D deficiency in the given patient - Identify at least 5 signs required to clinically diagnose Vitamin D deficiency - Classify the types of Vitamin D deficiency with the help of a flipchart - Formulate a treatment plan for the given patient with Vitamin D deficiency with the help of the blackboard	04.02.22	9.30-10.30	Bedside clinics	Document in log book		Biochemistry, Physiology, Pathology
PE12.10	Discuss the role of screening for Vitamin D deficiency	K	K	Y	At the end of the session the Phase III student must able to - List at least 3 benefits of screening for Vitamin D deficiency - Describe the ICD 10 screening for Vitamin D deficiency	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE12.11	Discuss the RDA, dietary sources of Vitamin E and their role in health and disease	K	K	N	At the end of the session the Phase III student must able to - State the RDA of Vitamin E - List at least 5 dietary sources of Vitamin E - Discuss the role of Vitamin E in our body for normal health - Describe the role of Vitamin E in relation to diseases - Identify all the dietary sources of Vitamin E from a given diet chart - Explain the role of Vitamin E in our body with the help of a flip chart	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry

PE12.12	Describe the causes, clinical features, diagnosis and management of deficiency of Vitamin E	K	KH	N	At the end of the session the Phase III student must able to- List at least 3 causes of deficiency of Vitamin E - Discuss the clinical features of deficiency of Vitamin E - Describe at least 3 investigations to diagnose Vitamin E deficiency - Describe the treatment of Vitamin E deficiency - Explain the clinical features of Vitamin E deficiency using a flip chart - Able to counsel the patient and their attenders regarding the diet rich in Vitamin E.	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE12.13	Discuss the RDA, dietary sources of Vitamin K and their role in health and disease	K	K	N	At the end of the session the Phase III student must able to - State the RDA of Vitamin K - List at least 5 dietary sources of Vitamin K - Discuss the role of Vitamin K in our body for normal health - Explain the role of universal Vitamin K administration in newborns - Describe the role of Vitamin K in relation to diseases - Identify all the dietary sources of Vitamin K from a given diet chart - Explain the role of Vitamin K in our body with the help of a flip chart	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology

PE12.14	Describe the causes, clinical features, diagnosis management and prevention of deficiency of Vitamin K	K	KH	N	At the end of the session the Phase III student must able to - List at least 5 causes of deficiency of Vitamin K - Discuss the clinical features of deficiency of Vitamin K - Describe at least 3 investigations to diagnose Vitamin K deficiency - Describe the treatment of Vitamin K deficiency - List at least 3 measures to prevent Vitamin K deficiency - Explain the clinical features of Vitamin K deficiency using a flip chart - Able to counsel the patient and their attenders regarding the diet rich in Vitamin K.	04.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Physiology, Pathology
PE12.15	Discuss the RDA, dietary sources of Vitamin B and their role in health and disease	K	K	Y	At the end of the session the Phase III student must able to - State the RDA of Vitamin B complex components - List at least 3 dietary sources of each type of Vitamin B - Discuss the role of Vitamin B in our body for normal health - Describe the role of Vitamin B in relation to diseases - Identify all the dietary sources of Vitamin B from a given diet chart - Explain the role of Vitamin B in our body with the help of a flip chart	11.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry

PE12.16	Describe the causes, clinical features, diagnosis and management of deficiency of B complex Vitamins	K	KH	Y	At the end of the session the Phase III student must able to - List at least 5 causes of deficiency of Vitamin B complex - Discuss the clinical features of deficiency of Vitamin B complex - Describe at least 3 investigations to diagnose Vitamin B deficiency - Describe the treatment of Vitamin B complex deficiency - List at least 3 measures to prevent Vitamin B deficiency - Explain the clinical features of Vitamin B complex deficiencies using a flip chart - Able to counsel the patient and their attenders regarding the diet rich in Vitamin B. - Able to identify the clinical features of Vitamin B component deficiency from the given spotter case chart	11.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE12.17	Identify the clinical features of Vitamin B complex deficiency	S	SH	Y	At the end of the session the Phase III student must able to - Identify the clinical features of Vitamin B complex deficiency in a given patient - List the features of Vitamin B deficiency in the given spotter chart	-	-	Bedside clinics, Skills lab	Document in log book		Biochemistry

PE12.18	Diagnose patients with Vitamin B complex deficiency and plan management	S	SH	Y	At the end of the session the Phase III student must able to - Demonstrate the features of Vitamin B complex deficiency in the given patient - Identify the type of Vitamin B complex deficiency - Formulate the treatment plan for the patient - To record the details in the log book	-	-	Bedside clinics, Skills lab	Document in log book		Biochemistry
PE12.19	Discuss the RDA , dietary sources of Vitamin C and their role in Health and disease	K	KH	N	At the end of the session the Phase III student must able to - State the RDA of Vitamin C - List at least 5 dietary sources of Vitamin C - Discuss the role of Vitamin C in our body for normal health - Describe the role of Vitamin C in relation to diseases - Identify all the dietary sources of Vitamin C from a given diet chart - Explain the role of Vitamin C in our body with the help of a flip chart	11.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry

PE12.20	Describe the causes, clinical features, diagnosis and management of deficiency of Vitamin C (scurvy)	K	KH	N	At the end of the session the Phase III student must able to - List at least 5 causes of deficiency of Vitamin C - Discuss the clinical features of deficiency of Vitamin C - Describe at least 3 investigations to diagnose Vitamin C deficiency - Describe the treatment of Vitamin C deficiency - List at least 3 measures to prevent Vitamin C deficiency - Explain the clinical features of Vitamin C deficiency using a flip chart - Counsel the patient and their attenders about diet to be followed	11.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE12.21	Identify the clinical features of Vitamin C deficiency	S	SH	N	At the end of the session the Phase III student must able to - Identify the clinical features of Vitamin C deficiency in a given patient - List the features of Vitamin C deficiency in the given spotter chart	-	-	Bedside clinics, Skill lab	Document in log book		Biochemistry
Topic: Micronutrients in Health and disease -2: Iron, Iodine, Calcium, Magnesium **Number of competencies: (14)** **Number of procedures that require certification: (NIL)**											
PE13.1	Discuss the RDA, dietary sources of Iron and their role in health and disease	K	K	Y	At the end of the session the Phase III student must able to a. Must be able to mention the RDA of iron b. Must be able to name 4 sources of iron c. Must be able to discuss the role of iron in health and disease	18.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Biochemistry

PE13.2	Describe the causes, diagnosis and management of Fe deficiency	K	KH	Y	At the end of the session the Phase III student must able to a. List the causes of Iron deficiency b. State four clinical features of iron deficiency c. Discuss tests for diagnosis of iron deficiency d. Explain the steps in management of iron deficiency	18.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Biochemistry
PE13.3	Identify the clinical features of dietary deficiency of Iron and make a diagnosis	S	SH	Y	At the end of the session the Phase III student must able to a. Describe atleast 3 clinical features of iron deficiency b. Employ the features to help in making a diagnosis	-		Bedside clinics, Skills lab	Document in log book		Pathology, Biochemistry
PE13.4	Interpret hemogram and Iron Panel	S	SH	Y	At the end of the session the Phase III student must able to a. List the types of anemia in children b. Describe a normal hemogram c. Calculate Mentzer index d. Summarise and interpret hemogram	-		Bedside clinic, Small group discussion	Skill Assessment		Pathology, Biochemistry
PE13.5	Propose a management plan for Fe deficiency anaemia	S	SH	Y	At the end of the session the Phase III student must able to a. List the severity of Fe deficiency anemia b. Design a management plan c. Formulate the required dosage in management	-		Bedside clinics, Skills lab	Skill Assessment		Pathology, Pharmacology
PE13.6	Discuss the National anaemia control program and its recommendations	K	K	Y	At the end of the session the Phase III student must able to a. Name the National anemia control program in India b. Discuss any 2 important recommendations in the programme c. Apply to treat patients	18.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Community Medicine

Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE13.7	Discuss the RDA , dietary sources of Iodine and their role in Health and disease	K	K	Y	At the end of the session the Phase III student must able to a. Must be able to mention the RDA of iodine b. Must be able to name 4 sources of iodine c. Must be able to discuss the role of iodine in health and disease	18.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE13.8	Describe the causes, diagnosis and management of deficiency of Iodine	K	KH	Y	At the end of the session the Phase III student must able to a. List the causes of Iodine deficiency b. State four clinical features of iodine deficiency c. Discuss tests for diagnosis of iodine deficiency d. Explain the steps in management of iodine deficiency	18.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE13.9	Identify the clinical features of Iodine deficiency disorders	S	SH	N	At the end of the session the Phase III student must able to a. Describe atleast 3 clinical features of iron deficiency b. Employ the features to help in making a diagnosis	18.02.22	9.30-10.30	Lecture, Bedside clinic	Written/ Viva voce		Biochemistry
PE13.10	Discuss the National Goiter Control program and their recommendations	K	K	Y	At the end of the session the Phase III student must able to a. Name the National goitre control program in India b. Discuss any 2 important recommendations in the programme c. Apply to treat patients	18.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Community Medicine

PE13.11	Discuss the RDA, dietary sources of Calcium and their role in health and disease	K	K	Y	At the end of the session the Phase III student must able to a. Must be able to mention the RDA of calcium b. Must be able to name 4 sources of calcium c. Must be able to discuss the role of calcium in health and disease	25.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE13.12	Describe the causes, clinical features, diagnosis and management of Ca Deficiency	K	KH	Y	At the end of the session the Phase III student must able to a. List the causes of calcium deficiency b. State four clinical features of calcium deficiency c. Discuss tests for diagnosis of calcium deficiency d. Explain the steps in management of calcium deficiency	25.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE13.13	Discuss the RDA, dietary sources of Magnesium and their role in health and disease	K	K	N	At the end of the session the Phase III student must able to a. Must be able to mention the RDA of Magnesium b. Must be able to name 4 sources of Magnesium c. Must be able to discuss the role of Magnesium in health and disease	25.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
PE13.14	Describe the causes, clinical features, diagnosis and management of Magnesium Deficiency	K	KH	N	At the end of the session the Phase III student must able to a. List the causes of magnesium deficiency b. State four clinical features of magnesium deficiency c. Discuss tests for diagnosis of magnesium deficiency d. Explain the steps in management of magnesium deficiency	25.02.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Biochemistry
Topic: Toxic elements and free radicals and oxygen toxicity		**Number of competencies: (05)**							**Number of procedures that require certification (NIL)**		

PE14.1	Discuss the risk factors, clinical features, diagnosis and management of Lead Poisoning	K	KH	N	At the end of the session the Phase IV student must able to a. List at least 4 Risk factors of lead poisoning b. Describe 8 Clinical features of lead poisoning c. Name 3 Diagnostic features of lead poisoning d. Describe the Management of Lead Poisoning	25.05.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		Pharmacology
PE14.2	Discuss the risk factors, clinical features, diagnosis and management of Kerosene ingestion	K	KH	N	At the end of the session the Phase IV student must able to a. List at least 4 Risk factors of kerosene ingestion b. Describe 8 Clinical features of kerosene ingestion c. Name 3 Diagnostic features of kerosene ingestion d. Describe the Management of kerosene ingestion	30.05.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
PE14.3	Discuss the risk factors, clinical features, diagnosis and management of Organophosphorous poisoning	K	KH	N	At the end of the session the Phase IV student must able to a. List at least 4 Risk factors of Organophosphorous poisoning b. Describe 8 Clinical features of Organophosphorous poisoning c. Name 3 Diagnostic features of Organophosphorous poisoning d. Describe the Management of Organophosphorous poisoning	30.05.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pharmacology
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE14.4	Discuss the risk factors, clinical features, diagnosis and management of paracetamol poisoning	K	KH	N	At the end of the session the Phase IV student must able to a. List at least 4 Risk factors of paracetamol poisoning b. Describe 8 Clinical features of paracetamol poisoning c. Name 3 Diagnostic features of paracetamol poisoning d. Describe the Management of paracetamol poisoning	01.06.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pharmacology
PE14.5	Discuss the risk factors, clinical features, diagnosis and management of Oxygen toxicity	K	KH	N	At the end of the session the Phase IV student must able to a. List at least 4 Risk factors of Oxygen toxicity b. Describe 8 Clinical features of Oxygen toxicity c. Name 3 Diagnostic features of Oxygen toxicity d. Describe the Management of Oxygen toxicity	06.06.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
Topic: Fluid and electrolyte balance					**Number of competencies:(07)**				**Number of procedures that require certification:(NIL)**		
PE15.1	Discuss the fluid and electrolyte requirement in health and disease	K	KH	Y	At the end of the session the Phase III student must able to a. Discuss the fluid requirement for a healthy child b. Discuss the electrolyte requirement for a healthy child	04.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE15.2	Discuss the clinical features and complications of fluid and electrolyte imbalance and outline the management	K	KH	Y	At the end of the session the Phase III student must able to a) Describe four clinical features of dehydration b) Describe four clinical features of hyponatremia c) Describe four clinical features of hypokalemia d) Describe six complications of severe dehydration e) Explain the management of severe dehydration f) Describe the management of hyponatremia g) Describe the management of hypokalemia	04.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE15.3	Calculate the fluid and electrolyte requirement in health	S	SH	Y	At the end of the session the Phase III student must able to a) Calculate the fluid requirement using Holiday Segar formula b) Calculate the electrolyte requirement for a healthy child c) Calculate electrolyte requirement in a child with dyselectrolytemia	-		Bedside clinics, Small group discussion	Skill Assessment		
PE15.4	Interpret electrolyte report	S	SH	Y	At the end of the session the Phase III student must able to a) Must be able to Interpret normal electrolyte report b) Must be able to Interpret abnormal electrolyte report	-		Bedside clinics, Small group discussion	Skill Assessment		
PE15.5	Calculate fluid and electrolyte imbalance	S	SH	Y	At the end of the session the Phase III student must able to a) Must be able to calculate fluid deficit b) Must be able to calculate	-		Bedside clinics, Small group discussion	Skill Assessment		

PE15.6	Demonstrate the steps of inserting an IV cannula in a model	S	SH	Y	At the end of the session the Phase III student must able to a) Must be able to simulate the steps of inserting an iv cannula	-	9.30-10.30	Skills Lab	mannequin		
PE15.7	Demonstrate the steps of inserting an interosseous line in a mannequin	S	SH	Y	At the end of the session the Phase III student must able to a) Must be able to simulate the steps of inserting interosseous line in a Mannequin	-	9.30-10.30	Skills Lab	mannequin		
					Topic: Integrated Management of Neonatal and Childhood Illnesses (IMNCI) Guideline				**Number of competencies:(03)**		**Number of procedures that require**
PE16.1	Explain the components of Integrated Management of Neonatal and Childhood Illnesses (IMNCI) guidelines and method of Risk stratification	K	KH	Y	At the end of the session the Phase III student must able to a) Define IMNCI b) Explain the rationale behind IMNCI c) Explain the components in young infants(0-2 months) & children (2months – 5 years) d) Describe the method of risk stratification	11.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE16.2	Assess children <2 months using IMNCI Guidelines	S	SH	Y	At the end of the session the Phase III student must able to a) Assess the given child < 2 months using IMNCI guidelines	11.03.22	9.30-10.30	DOAP session	Document in log Book		
PE16.3	Assess children >2 to 5 years using IMNCI guidelines and Stratify Risk	S	SH	Y	At the end of the session the Phase III student must able to a) Assess the child 2-5 years by using IMNCI guidelines & stratify risk	11.03.22	9.30-10.30	DOAP session	Document in log Book		

Topic: The National Health programs, NHM			**Number of competencies:(02)**						**Number of procedures that require certification: (NIL)**		
PE17.1	State the vision and outline the goals, strategies and plan of action of NHM and other important national programs pertaining to maternal and child health including RMNCH A+, RBSK, RKSK, JSSK mission Indradhanush and ICDS	K	KH	Y	At the end of the session the Phase III student must able to a) State the vision of NHM b) Define the goals of NHM c) Discuss the strategies of NHM d) Explain the plan of action of NHM e) State the vision of RMNCH A+ f) Discuss the strategies of RMNCH A+ g) Explain various intervention packages of RMNCH A+ h) State the vision of RBSK i) Discuss the plan of action of RBSK j) State the vision of JSSK k) Discuss the plan of action of JSSK l) State the vision of Mission Indradhanush m) Discuss the plan of Mission Indradhanush n) State the vision of RKSK o) Discuss the plan of action of RKSK p) State the vision of ICDS q) Discuss the plan of action of ICDS	08.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
PE17.2	Analyse the outcomes and appraise the monitoring and evaluation of NHM	K	KH	Y	At the end of the session the Phase III student must able to Debate - Analyse the outcomes of NHM Appraise on monitoring and evaluation of NHM	-		Debate	Written/ Viva voce		Community Medicine
Topic: The National Health Programs: RCH			**Number of competencies: (08)**						**Number of procedures that require certification: (NIL)**		

PE18.1	List and explain the components, plan, outcome of Reproductive Child Health (RCH) program and appraise its monitoring and evaluation	K	KH	Y	At the end of the session the Phase III student must able to a) Enlist the components of RCH programme b) Explain the plan and action of RCH programme c) Discuss the outcomes of RCH programme d) Discuss on monitoring and evaluation of RCH programme	08.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
PE18.2	Explain preventive interventions for child survival and safe motherhood	K	KH	Y	At the end of the session the Phase III student must able to a.Enumerate the components of CSSM b.Discuss preventive intervention	08.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
PE18.3	Conduct Antenatal examination of women independently and apply at-risk approach in antenatal care	S	SH	Y	At the end of the session the Phase III student must able to a. Conduct Antenatal examination on women independently b. Apply at risk approach in Antenatal care	-		Bedside clinics	Skill station		Community Medicine
PE18.4	Provide intra-natal care and conduct a normal delivery in a simulated environment	S	SH	Y	At the end of the session the Phase III student must able to a) Demonstrate provision of intranatal care b) Conduct a normal delivery in a given mannequin	-		DOAP session, Skills lab	Document in Log Book		Community Medicine
PE18.5	Provide intra-natal care and observe the conduct of a normal delivery	S	SH	Y	At the end of the session the Phase III student must able to a) Demonstrate provision of intranatal care b) Observe normal delivery in labour room	-		DOAP session	Document in Log Book		

Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE18.6	Perform Postnatal assessment of newborn and mother, provide advice on breast feeding, weaning and on family planning	S	SH	Y	At the end of the session the Phase III student must able to a) Perform postnatal assessment of a normal newborn b) Counsel mother on breast feeding techniques c) Counsel mother on advantages of breast feeding d) Counsel mother on weaning and complementary feeding e) Counsel mother on Family planning	-		Bed side clinics, Skill Lab	Skill Assessment		Community Medicine
PE18.7	Educate and counsel caregivers of children	A	SH	Y	At the end of the session the Phase III student must able to a.Educate on Exclusive breast feeding b Counsel on advantages of Breast FeedingEducate on Do's and Don't's in child care c. Educate on common social/food taboos	-	9.30-10.30	Postnatal ward, standardized patient	Skill Assessment		AETCOM
PE18.8	Observe the implementation of the program by visiting the Rural Health Centre	S	KH	Y	At the end of the session the Phase III student must able to a) Observe the implementation of all health programmes b) Document the various programme implemented in PHC	-		Bed side clinics, Skill Lab	Document in log book		Community Medicine

Topic: National Programs, RCH - Universal Immunizations program **Number of competencies: (16)** **Number of procedures that require certification: (01)**

PE19.1	Explain the components of the Universal Immunization Program and the National Immunization Program	K	KH	Y	At the end of the session the Phase III student must able to a) List out the components of universal immunization program b)Enumerate the components of national immunization program	03.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry
PE19.2	Explain the epidemiology of Vaccine preventable diseases	K	KH	Y	At the end of the session the Phase III student must able to a)Discuss the epidemiology of vaccine preventable diseases	03.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry
PE19.3	Vaccine description with regard to classification of vaccines, strain used, dose, route, schedule, risks, benefits and side effects, indications and contraindications	K	KH	Y	At the end of the session the Phase III student must able to a)List the vaccines according to their classification b)Discuss the strain used, dose and route used to administer vaccines c)Enumerate the benefits &risk factors following immunization d)Discuss the adverse effects following immunization e)Listout the indications &contraindications of every vaccine	03.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistry
PE19.4	Define cold chain and discuss the methods of safe storage and handling of vaccines	K	KH	Y	At the end of the session the Phase III student must able to a)Define cold chain b)Discuss the methods of safe storage &handling vaccines	06.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistr
PE19.5	Discuss immunization in special situations – HIV positive children, immunodeficiency, pre-term, organ transplants	K	KH	Y	At the end of the session the Phase III student must able to Discuss about vaccination in special situations	06.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Biochemistr

PE19.6	Assess patient for fitness for immunization and prescribe an age appropriate immunization schedule	S	P	Y	At the end of the session the Phase III student must able to a)Asses the patient for fitness for immunisation b)list an age appropriate schedule for the child	-	9.30-10.30	Out Patient clinics Skills lab	Skill Assessment	5	
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE19.7	Educate and counsel a patient for immunization	A/C	SH	Y	At the end of the session the Phase III student must able to a)Compile the details needed to educate and counsel the patient for immunization	-		DOAP session	Document in Log Book		
PE19.8	Demonstrate willingness to participate in the National and sub national immunisation	A	SH	Y	At the end of the session the Phase III student must able to Demonstrate the willingness to participate according to the immunization schedule	10.05.22	9.30-10.30	Lecture, Small group discussion	Document in Log Book		Community Medicine
PE19.9	Describe the components of safe vaccine practice – Patient education/ counselling; adverse	K	KH	Y	At the end of the session the Phase III student must able to List out the components of safe vaccine practice	10.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE19.10	Observe the handling and storing of vaccines	S	SH	Y	At the end of the session the Phase III student must able to Explain about handling &storage of vaccines	-		DOAP session	Written/ Viva voce		
PE19.11	Document Immunization in an immunization record	S	SH	Y	At the end of the session the Phase III student must able to Document immunization in immunisation record	-		Out Patient clinics, Skills lab	Skill assessment		

PE19.12	Observe the administration of UIP vaccines	S	SH	Y	At the end of the session the Phase III student must able to Demonstrate the technique of administration of UIP vaccines	-		DOAP session	Document in Log Book		Community Medicine
PE19.13	Demonstrate the correct administration of different vaccines in a mannequin	S	SH	Y	At the end of the session the Phase III student must able to Demonstarte the correct administration of different vaccines in mannequin	-		DOAP session	Document in Log Book		
PE19.14	Practice Infection control measures and appropriate handling of the sharps	S	SH	Y	At the end of the session the Phase III student must able to Explain the infection control measures &apropriate handling of sharps	-		DOAP session	Document in Log Book		
PE19.15	Explain the term implied consent in Immunization services	K	K	Y	At the end of the session the Phase III student must able to Discuss about the term implied consent in immunizaton services	10.05.22	9.30-10.30	Small group discussion	Written/ Viva voce		
PE19.16	Enumerate available newer vaccines and their indications including pentavalent pneumococcal, rotavirus, IE, typhoid	K	K	N	At the end of the session the Phase III student must able to List out the available newer vaccines and their indications	10.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

Topic: Care of the Normal New born, and High risk New born **Number of competencies: (20)** **Number of procedures that require certification: (NIL)**

Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE20.1	Define the common neonatal nomenclatures including the classification and describe the characteristics of a Normal Term Neonate and High Risk Neonates	K	KH	Y	At the end of the session the Phase IV student must able to a) Definitions for neonatal period, perinatal period, live births, still births, pre term, post term, LBW, VLBW, ELBW, AGA, SGA, LGA b) Describe the characteristics of term neonate. c) Define a high risk neonate and enlist the common newborn conditions requiring high risk follow up cases.	28.03.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE20.2	Explain the care of a normal neonate	K	KH	Y	At the end of the session the Phase IV student must able to a) Describe care of neonate at birth which includes five cleans, prevention of hypothermia, cleaning of the baby, clamping of the cord. b) Explain care of baby in the initial few hours after birth which includes recording of the baby, first examination to rule out congenital anomalies, initiation of breast feeding and administration of vitamin K. c) List the care of neonate beyond few hours after birth which includes the care of the cord, eyes, skin care, and posture of sleep.	28.03.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE20.3	Perform Neonatal resuscitation in a manikin	S	SH	Y	At the end of the session the Phase IV student must able to a) Enlist the equipments required to be kept for resuscitating a newborn in the labor room. b) Describe the steps of neonatal resuscitation correctly c) Enlist the indications of bag and mask ventilation and perform bag and mask properly. d) Enlist the indications for starting chest compressions and should be able to perform chest compressions in a proper manner e) Demonstrate the ventilation corrective steps to be taken if bag and mask ventilation is not showing significant improvement in the baby. f) Co-ordinate chest compression with bag and mask ventilation. g) Observe the method of endotracheal intubation and umbilical catheterization	30.03.23	2.30 to 4.30	DOAP session	Log book entry of Performance		
PE20.4	Assessment of a normal neonate	S	SH	Y	At the end of the session the Phase IV student must able to a) Show how to take anthropometric measurements in a neonate which includes measurement of head circumference, length, weight b) Record the vital signs in the neonate heart rate, respiratory rate, CFT, temperature c) Perform the general physical examination in neonate d) Evaluate the systemic examination in neonate which include examination of CVS, RS ,Abdomen, Musculoskeletal system, Neurological examination e) Assessment of gestational age by Ballard's scoring.	30.03.23	2.30 to 4.30	Bedside clinics, Skills lab	Skill Assessment		

PE20.5	Counsel / educate mothers on the care of neonates	A/C	SH	Y	At the end of the session the Phase IV student must able to a) Enlist the do`s and don'ts in newborn care b) Demonstrate the care of umbilicus, eye, skin	-		DOAP session	Log book documentation		
PE20.6	Explain the follow up care for neonates including Breast Feeding, Temperature maintenance, immunization, importance of growth monitoring and red flags	S	SH	Y	At the end of the session the Phase IV student must able to a) Perform the steps of latching of the baby to the breast and the proper positioning b) Demonstrate the steps required for maintenance of temperature c) Plot the anthropometric measurements of the neonate in the WHO growth chart d) Enlist the red flag sings in neonate that require immediate attention e) Explain the importance of immunization on follow up care of the neonate	-		DOAP session	Log book entry		
PE20.7	Discuss the etiology, clinical features and management of Birth asphyxia	K	KH	Y	At the end of the session the Phase IV student must able to a) Describe the common etiological factors for birth asphyxia b) Classify the clinical features of asphyxiated neonate based on Levine's staging c) Describe the appropriate management of an asphyxiated child in the labor room d) Enlist the complications of severe birth asphyxia in various organs e) Enumerate the post resuscitation management of an asphyxiated baby	04.04.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE20.8	Discuss the etiology, clinical features and management of respiratory distress in New born including meconium aspiration and transient tachypnoea of newborn	K	KH	Y	At the end of the session the Phase IV student must able to a) Enumerate the pulmonary and non-pulmonary causes of respiratory distress in a neonate b) Describe the etio-pathogenesis and role of surfactant for prevention of HMD in preterm neonate c) List the common clinical features of HMD d) Describe the common x- ray findings in HMD e) Discuss the management of HMD which includes the use of early CPAP and intra-tracheal surfactant therapy f) Discuss the prevention of HMD with antenatal steroid use g) Describe the clinical features and course of MAS h) Enlist the common complication of MAS i) To highlight the common x-ray findings in MAS j) Describe the management of neonate with MAS k) Describe the reasons for TTN in a neonate	06.04.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE20.9	Discuss the etiology, clinical features and management of Birth injuries	K	KH	Y	At the end of the session the Phase IV student must able to a) List the risk factors for birth injuries in a neonate b) Describe the various types of birth trauma in neonate c) Differentiate caput , cephalhematoma and subgaleal hematoma d) Distinguish Erb`s palsy from Klumpke`s palsy e) Describe the management of different types of birth injuries	11.04.23		Lecture, Small group discussion	Written/ Viva voce		

PE20.10	Discuss the etiology, clinical features and management of Hemorrhagic disease of New born	K	KH	Y	At the end of the session the Phase IV student must able to a) Differentiate the different types of HDN b) Describe the causes of HDN c) Describe the clinical presentation of different types of HDN d) Enlist the investigations in diagnosis of HDN e) Highlight the treatment of HDN	13.04.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE20.11	Discuss the clinical characteristics, complications and management of Low birth weight (preterm and Small for gestation)	K	KH	Y	At the end of the session the Phase IV student must able to a) Define preterm, late preterm , SGA ,LGA b) Define LBW, VLBW, ELBW babies c) Enlist the causes for preterm deliveries d) Describe the clinical characteristics of preterm baby e) Explain the complication of preterm baby in various organs f) Enlist the metabolic complication in prematurity g) Describe the management of a preterm baby h) Differentiate symmetrical from asymmetrical IUGR i) Describe the clinical characteristics of IUGR baby j) Discuss the management of IUGR babies k) Differentiate the complications of preterm Vs IUGR babies	18.04.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE20.12	Discuss the temperature regulation in neonates, clinical features and management of Neonatal Hypothermia	K	KH	Y	At the end of the session the Phase IV student must able to a) Describe the sources of heat loss and heat production in neonate b) Explain the factors for heat loss in LBW babies c) Define thermo neutral environment , cold stress , moderate hypothermia, severe hypothermia d) Elicit the measurement of temperature in neonate e) Explain the signs and symptoms of neonatal hypothermia f) Discuss the management of cold stress and severe hypothermia g) Discuss the steps to be taken in prevention of hypothermia in neonate	20.04.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE20.13	Discuss the temperature regulation in neonates, clinical features and management of Neonatal Hypoglycemia	K	KH	Y	At the end of the session the Phase IV student must able to a) Define hypoglycemia in a neonate b) Explain the causes of hypoglycemia in neonates c) Describe the clinical presentation of hypoglycemia in neonates d) Illustrate by a flow chart the steps in the management of neonatal hypoglycemia e) Define refractory hypoglycemia and explain its treatment modalities f) Describe the prevention of hypoglycemia in neonates	25.04.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE20.14	Discuss the etiology, clinical features and management of Neonatal hypocalcemia	K	KH	Y	At the end of the session the Phase IV student must able to a) Define neonatal hypocalcaemia b) Differentiate early from late onset hypocalcaemia c) Describe the clinical presentation of hypocalcaemia in a neonate d) Discuss the investigations required in diagnosis of hypocalcaemia in neonates e) Highlights the steps in the management of neonatal hypocalcaemia f) Discuss about the prevention of hypocalcaemia in a neonate	25.04.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE20.15	Discuss the etiology, clinical features and management of Neonatal seizures	K	KH	Y	At the end of the session the Phase IV student must able to a) Point out the etiology for seizures in neonate. b) Differentiate seizures from jitteriness in a neonate c) Discuss the clinical presentation of a neonatal seizure d) Describe the steps in the management of neonatal seizures e) List the prognosis by etiology and the type of seizures in neonate	27.04.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		

PE20.16	Discuss the etiology, clinical features and management of Neonatal Sepsis	K	KH	Y	At the end of the session the Phase IV student must able to a) Define early onset from late onset neonatal sepsis b) Describe the etiological agents for neonatal sepsis c) Summarize the clinical presentation of sepsis in neonate d) List the investigation required in diagnosis of sepsis in neonate e) Discuss the treatment of neonatal sepsis f) List the steps to take in prevention of neonatal sepsis	02.05.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE20.17	Discuss the etiology, clinical features and management of Perinatal infections	K	KH	Y	At the end of the session the Phase IV student must able to a) Describe the etiological agents for perinatal infection b) Describe the clinical presentation of TORCH infections in a child c) Bring out the necessary investigations required in establishing a diagnosis of perinatal infection d) List the steps in the management of perinatal infection e) Explain about prevention of perinatal infection	02.05.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE20.18	Identify and stratify risk in a sick neonate using IMNCI guidelines	S	SH	Y	At the end of the session the Phase IV student must able to a) Describe the important clinical signs and that classify a neonate into possible serial bacterial infection or local bacterial infection b) Enlist the treatment required in serial bacterial infection before proper referral as per IMNCI guidelines	04.05.23	2.30 to 4.30	DOAP session	Document in Log Book		

PE20.19	Discuss the etiology, clinical features and management of Neonatal hyperbilirubinemia	K	KH	Y	At the end of the session the Phase IV student must able to a) Explain the bilirubin metabolism b) Differentiate physiological jaundice from pathological jaundice c) Write down the causes for pathological jaundice in neonate d) Describe the assessment of jaundice by Krammer's criteria e) Discuss the steps in investigating a child with pathological jaundice f) Describe the clinical presentation of Kernicterus g) Enlist the important treatment modalities in managing a neonate with pathological jaundice which includes phototherapy exchange transfusion	09.05.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE20.20	Identify clinical presentations of common surgical conditions in the new born including TEF, esophageal atresia, anal atresia, cleft lip and palate, congenital diaphragmatic hernia and causes of acute abdomen	K	KH	Y	At the end of the session the Phase IV student must able to a) List the types of TEF and esophageal atresia b) Describe the clinical presentation of TEF c) List the investigations in establishing a diagnosis of TEF d) Enumerate the treatment of TEF e) Describe the clinical presentation of anal atresia f) List the treatment options for a neonate with anal atresia g) Describe the development of cleft lip and cleft palate h) Enlist the syndromes associated with cleft lip and palate i) Treatment of cleft lip and palate j) Describe the clinical presentation of CDH k) Describe the investigations required in establishing a diagnosis of CDH l) Enumerate the treatment of CDH m) Describe the causes of acute abdomen in a neonate n) Describe the clinical presentation of acute abdomen in a neonate	11.05.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
Topic: Genito-Urinary system				**Num**						**Number of procedures that require certification : (NIL)**	
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE21.1	Enumerate the etio-pathogenesis, clinical features, complications and management of Urinary Tract infection in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Define Urinary tract infection(UTI) in children. 2. List the etiology of Urinary tract infection(UTI). 3. Discuss the pathogenesis of Urinary tract infection(UTI) in children. 4. Enumerate the clinical features of Urinary tract infection(UTI). 5. Describe the complications of Urinary tract infection(UTI). 6. List the laboratory investigations for Urinary tract infection(UTI). 7. Discuss the treatment of Urinary tract infection(UTI) in children A) Interpret the laboratory investigations of a given patient to diagnose Urinary tract infection(UTI). B) Recognise the signs of Urinary tract infection(UTI) in a given patient	16.08.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology
PE21.2	Enumerate the etio-pathogenesis, clinical features, complications and management of acute post-streptococcal Glomerular Nephritis in children	K	KH	Y	At the end of the session the Phase III student must able to1. Define post streptococcal glomerulo nephritis in children. 2. List the etiology of post streptococcal glomerulo nephritis. 3. Discuss the pathogenesis of post streptococcal glomerulo nephritis. 4. Enumerate the clinical features of post streptococcal glomerulo nephritis 5. Describe the complications of post streptococcal glomerulo nephritis 6. List the laboratory investigations for post streptococcal glomerulo nephritis. 7. Discuss the treatment of post streptococcal glomerulo nephritis	19.08.22		Lecture, Small group discussion	Written/ Viva voce		Pathology

PE21.3	Discuss the approach and referral criteria to a child with Proteinuria	K	KH	Y	At the end of the session the Phase III student must able to 1. Define proteinuria in children. 2. Discuss the approach to proteinuria in children. 3. Eneumerate the causes of proteinuria. 4. List the referral criteria of child with proteinuria.a) Interpret the probable cause of proteinuria in a given case scenario. b) Explain the approach to proteinuria using a flip chart	23.08.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology
PE21.4	Discuss the approach and referral criteria to a child with Hematuria	K	KH	Y	At the end of the session the Phase III student must able to 1. Define hematuria in children. 2. Discuss the approach to hematuria in children. 3. Eneumerate the causes of hematuria. 4. List the referral criteria of child with hematuria. 5. Explain the complications of a child with hematuria. a) Interpret the probable cause of hematuria in a given case scenario. b) Explain the approach to hematuria using a flip chart.	19.08.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy

PE21.5	Enumerate the etio-pathogenesis, clinical features, complications and management of Acute Renal Failure in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Define ARF in children 2. List 10 etiologies of ARF in children 3. Discuss the pathogenesis of ARF in children. 4. Enumerate the clinical features of ARF 5. Recall the staging for ARF 6. Describe the complications of ARF 7. List the investigations of ARF 8. Discuss the treatment of ARF in children A) Explain the approach to a patient with ARF using a blackboard. B) Interpret the laboratory investigations of a given patient to diagnose ARF	26.08.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology
PE21.6	Enumerate the etio-pathogenesis, clinical features, complications and management of Chronic Renal Failure in Children	K	KH	Y	At the end of the session the Phase III student must able to 1. Define CRF in children 2. List 10 etiologies of CRF in children 3. Discuss the pathogenesis of CRF in children. 4. Enumerate the clinical features of CRF 5. Recall the staging for CRF 6. Describe the complications of CRF 7. List the investigations of CRF 8. Discuss the treatment of CRF in children C) Explain the approach to a patient with CRF using a blackboard. D) Interpret the laboratory investigations of a given patient to diagnose CRF	26.08.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology

PE21.7	Enumerate the etio-pathogenesis, clinical features, complications and management of Wilms Tumor	K	KH	Y	At the end of the session the Phase III student must able to 1. Describe the etiology of wilms tumor including genetic component. 2. Describe the pathogenesis of wilms tumor 3. List 7 clinical features of wimls tumor 4. Eneumerate the complications of wilms tumor. 5. Discuss the investigations for wilms tumor 6. Discuss the treatment of wilms tumor including prognosis a) Interpret the given case scenario, laboratory investigations to diagnose wilms tumor. b) Identify the syndromes associated with wilms tumor from given spotter chart.	26.08.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology
PE21.8	Elicit, document and present a history pertaining to diseases of the Genitourinary tract	S	SH	Y	At the end of the session the Phase III student must able to 1. Elicit the history pertaining to diseases of genitor urinary tract from a given patient 2. Record the history of patient 3. Present the elicited history to a faculty member	26.08.22	9.30-10.30	Bedside clinics, Skills lab	Skill Assessment		
PE21.9	Identify external markers for Kidney disease, like Failing to thrive, hypertension, pallor, Icthyosis, anasarca	S	SH	Y	At the end of the session the Phase III student must able to 1. List the markers of kidney disease in children from head to foot 2. Demonstrate the markers of kidney disease in vitals eg: hypertension 3. Identify the external features of kidney disease in a given patient	-		Bedside clinics, Skills lab	Document in log book		

PE21.10	Analyse symptom and interpret the physical findings and arrive at an appropriate provisional / differential diagnosis	S	SH	Y	At the end of the session the Phase III student must able to 1. Identify the symptoms of genitor urinary disease in a given patient 2. Demonstrate the clinical findings 3. List the differential diagnosis based on the symptoms and findings of the given patient	-		Bedside clinics, Skills lab	Log book		
PE21.11	Perform and interpret the common analytes in a Urine examination	S	SH	Y	At the end of the session the Phase III student must able to 1. Perform urine routine examination using appropriate reagents 2. Perform urine microscopic examination using a microscope 3. Interpret the common analytes in urine examination	-		Bedside clinics, Skills lab	Skill assessment		Biochemistry, Pathology
PE21.12	Interpret report of Plain X Ray of KUB	S	SH	Y	At the end of the session the Phase III student must able to 1. Identify the components of a normal plain X-ray KUB 2. Interpret the abnormalities in a plain X-ray KUB	-		Bedside clinics, Skills lab	Log book		Radiodiagnosis
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE21.13	Enumerate the indications for and Interpret the written report of Ultra sonogram of KUB	S	SH	Y	At the end of the session the Phase III student must able to 1. List 7 indications for USG KUB 2. Interpret the written report of USG of KUB	-		Bedside clinics, Skills lab	Log book		Radiodiagnosis

PE21.14	Recognize common surgical conditions of the abdomen and genitourinary system and enumerate the indications for referral including acute and subacute intestinal	S	SH	Y	At the end of the session the Phase III student must able to 1. List common surgical conditions of abdomen. 2. List common surgical conditions of genitor urinary system 3. Enumerate the surgical indications of referral	-		Bedside clinics, Skills lab	Log book assessment		
PE21.15	Discuss and enumerate the referral criteria for children with genitourinary disorder	S	SH	Y	At the end of the session the Phase III student must able to 1. List the referral criteria for children with genitor urinary disorder 2. Discuss the above criteria using a flipchart.	-		Bedside clinics, Skills lab	Log book assessment		
PE21.16	Counsel / educate a patient for referral appropriately	A/C	SH	Y	At the end of the session the Phase III student must able to 1. Educate the patient and their attenders regarding the disorders 2. Counsel them regarding the reason for referral .	-		DOAP session	Document in Log book		AETCOM

PE21.17	Describe the etiopathogenesis, grading, clinical features and management of hypertension in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Define hypertension in children 2. Describe the etiopathogenesis of hypertension 3. Recall the grading of hypertension 4. Discuss the clinical features 5. Enumerate the complications of hypertension 6. List the laboratory investigations for a child with hypertension 7. Discuss the treatment of hypertension a) Choose the appropriate BP cuff for a given patient b) Demonstrate the technique of recording BP in a given patient	30.08.22	9.30-10.30	Lecture, Small group discussion	Short notes		
Topic: Approach to and recognition of a child with possible Rheumatologic problem **Number of competencies: (03)**										**Number of procedures that require certification (NIL)**	
PE22.1	Enumerate the common Rheumatological problems in children. Discuss the clinical approach to recognition and referral of a child with Rheumatological problem	K	KH	Y	At the end of the session the Phase IV student must able to a)Enumerate the common Rheumatological problems in children b) Discuss the clinical approach to recognition and referral of a child with Rheumatological problem	17.01.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE22.2	Counsel a patient with Chronic illness	S	SH	N	At the end of the session the Phase IV student must able to Describe about Counselling a patient with Chronic illness	20.01.23	2.30 TO 4.30	Bedside clinics Skills lab	Log book		

PE22.3	Describe the diagnosis and management of common vasculitic disorders including Henoch Schonlein Purpura, Kawasaki Disease, SLE, JIA	K	K	N	At the end of the session the Phase IV student must able to a) Describe the diagnosis and management of Henoch Schonlein Purpura b) Describe the diagnosis and management Kawasaki Disease c) Describe the diagnosis and management of JIA d) Describe the diagnosis and management of SLE	20.01.23	2.30 TO 4.30	Lecture, Small group discussion	Written/ Viva voce		
Topic: Cardiovascular system- Heart Diseases					**Number of competencies: (18)**					**Number of procedures that require certification:(NIL)**	
PE23.1	Discuss the Hemodynamic changes, clinical presentation, complications and management of Acyanotic Heart Diseases –VSD, ASD and PDA	K	KH	Y	At the end of the session the Phase III student must able to a. Explain the hemodynamic changes in ASD,ASD and PDA b. Describe the 6 clinical features of VSD/ ASD/ PDA c. Enumerate complications of VSD,ASD,PDA d. Explain the medical and surgical management of VSD,ASD,PDA	05.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE23.2	Discuss the Hemodynamic changes, clinical presentation, complications and management of Cyanotic Heart Diseases – Fallot's Physiology	K	KH	Y	At the end of the session the Phase III student must able to a. a) Explain the hemodynamic changes in Cyanotic Heart Diseases –Fallot's Physiology (TOF) b) Describe the 6 clinical features of CHD-TOF c) Enumerate complications of CHD-TOF d) Explain the medical and surgical management of CHD-TOF e) Enumerate complications of CHD-TOF f) Explain the medical and surgical management of CHD-TOF g) Describe at least 6 clinical features and steps taken in the management of a cyanotic spell (K) (KH) (SH	08.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology
PE23.3	Discuss the etio-pathogenesis, clinical presentation and management of cardiac failure in infant and children	K	KH	Y	At the end of the session the Phase III student must able to a) Describe causes of cardiac failure in children b) Illustrate the clinical presentation of cardiac failure in children c) Explain the management strategies of cardiac failure in children (K) (KH)	12.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology

PE23.4	Discuss the etio-pathogenesis, clinical presentation and management of Acute Rheumatic Fever in children	K	KH	Y	At the end of the session the Phase III student must able to a) Describe the ethiopathogenesis of ARF b) Describe Modified Jones criteria c) List atleast 5 clinical features of ARF d) Explain the management of Acute Rheumatic Fever in children	15.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology
PE23.5	Discuss the clinical features, complications, diagnosis, management and prevention of Acute Rheumatic Fever	K	KH	Y	At the end of the session the Phase III student must able to a) Describe the clinical features of acute rheumatic fever b) Describe the complications of acute rheumatic fever c) List the management statergies d) Highlight the prevention of acute rheumatic fever.	15.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology
PE23.6	Discuss the etio-pathogenesis, clinical features and management of Infective endocarditis in children	K	KH	Y	At the end of the session the Phase III student must able to a) Describe the ethiopathogenesis of IE b) Describe Modified dukes criteria c) List atleast 5 clinical features of IE d) Explain the management of IE in children	12.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology, Microbiology
PE23.7	Elicit appropriate history for a cardiac disease, analyse the symptoms e.g. breathlessness, chest pain, tachycardia, feeding difficulty, failing to thrive,	S	SH	Y	At the end of the session the Phase III student must able to a) Demonstrate appropriate history for a cardiac disease b) Interpret symptomatology and cardinal complaints of cardiac conditions in children	-	9.30-10.30	Bedside clinics, Skills lab	Skill Assessment		

PE23.8	Identify external markers of a cardiac disease e.g. Cyanosis, Clubbing, dependent edema, dental caries, arthritis, erythema rash, chorea, subcutaneous nodules, Oslers node, Janeway lesions and document	S	SH	Y	At the end of the session the Phase III student must able to a) List at least 10 external markers of cardiac diseases in children b) Show atleast 5 external markers of cardiac diseases in children	-		Bedside clinics, Skills Lab	Skill Assessment		
PE23.9	Record pulse, blood pressure, temperature and respiratory rate and interpret as per the age	S	SH	Y	At the end of the session the Phase III student must able to	-		Bedside clinics, Skills lab	Skill Assessment		

PE23.10	Perform independently examination of the cardiovascular system – look for precordial bulge, pulsations in the precordium, JVP and its significance in children and infants, relevance of percussion in Pediatric examination, Auscultation and other	S	SH	Y	At the end of the session the Phase III student must able to a) State the steps in examination of the cardiovascular system b) Explain the significance of examination of the cardiovascular system c) Demonstrate precordial bulge, JVP, normal and abnormal auscultatory findings in cardiac examination. d) Recognize the importance of other system examination	-		Bedside clinics, Skills lab	Skill station		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE23.11	Develop a treatment plan and prescribe appropriate drugs including fluids in cardiac diseases, anti - failure drugs, and inotropic agents	S	SH	Y	At the end of the session the Phase III student must able to a) Describe a treatment plan in cardiac diseases b) List names of anti failure drugs with their mechanism of action and its indications c) Recall appropriate drug dosages,fluid and ionotropes	-		Bedside clinics, Skills lab	log book		
PE23.12	Interpret a chest X ray and recognize Cardiomegaly	S	SH	Y	At the end of the session the Phase III student must able to a) Interpret a normal chest xray b) recognize cardiomegaly in the chest X ray and list at least 4 differentials	-		Bedside clinics, Skills lab	Log book entry		Radiodiagnosis

PE23.13	Choose and Interpret blood reports in Cardiac illness	S	P	Y	At the end of the session the Phase III student must able to a) Name the blood investigations for cardiac diseases b) Interpret abnormalities in blood investigations for cardiac diseases	-		Bedside clinics, Small group discussion	Log book entry		
PE23.14	Interpret Pediatric ECG	S	SH	Y	At the end of the session the Phase III student must able to a)Recognise normal pediatric ECG b)Interpret ECG changes	-		Bedside clinics, Skills lab	Log book entry		
PE23.15	Use the ECHO reports in management of cases	S	SH	Y	At the end of the session the Phase III student must able to a) Interpret ECHO report b) Apply ECHO report in management of cases	-		Bedside clinics	Log book entry		Radiodiagnosis
PE23.16	Discuss the indications and limitations of Cardiac catheterization	K	K	N	At the end of the session the Phase III student must able to a) Define cardiac catheterization. b) List the indiacations for cardiac catherization. c) Discuss the limitations of cardiac catherization.	19.07.22	9.30-10.30	Small group discussion	Viva voce		
PE23.17	Enumerate some common cardiac surgeries like BT shunt, Potts and Waterston’s and corrective surgeries	K	K	N	At the end of the session the Phase III student must able to a) List names of atleast three common cardiac surgeries. b) Describe in detail atleast 2 corrective surgeries.	19.07.22	9.30-10.30	Small group discussion	Viva voce		

PE23.18	Demonstrate empathy while dealing with children with cardiac diseases in every patient encounter	A	SH	Y	At the end of the session the Phase III student must able to a) List the problems faced by the family of a child with cardiac disease. b) Demonstrate counseling a family of a child with a heart disease	19.07.22	9.30-10.30	Small group discussion	Document in Log Book		AETCOM
Topic: Diarrhoeal diseases and Dehydration			**Number of competenci**						**Number of procedures that require certification:(03)**		
PE24.1	Discuss the etio-pathogenesis, classification, clinical presentation and management of diarrheal diseases in children	K	KH	Y	At the end of the session the Phase III student must able to a)Discuss the etio-pathogenesis of diarrheal diseases in children b)Discuss the classification of diarrheal diseases in children c)Discuss the clinical presentation of diarrheal diseases in children d)Discuss the management of diarrheal diseases in children	22.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology
PE24.2	Discuss the classification and clinical presentation of various types of diarrheal dehydration	K	KH	Y	At the end of the session the Phase III student must able to a)Discuss the classification of various types of of diarrheal dehydration b) Discuss the clinical presentation of various types of of diarrheal dehydration	22.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE24.3	Discuss the physiological basis of ORT, types of ORS and the composition of various types of ORS	K	KH	Y	At the end of the session the Phase III student must able to a)Discuss the physiological basis of ORT b)Discuss the types of ORS c)Discuss the composition of various types of ORS	22.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE24.4	Discuss the types of fluid used in Paediatric diarrheal diseases and their composition	K	KH	Y	At the end of the session the Phase III student must able to Discuss the types of fluid used in Paediatric diarrheal diseases and their composition	22.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE24.5	Discuss the role of antibiotics, antispasmodics, anti-secretory drugs, probiotics, anti-emetics in acute diarrheal diseases	K	KH	Y	At the end of the session the Phase III student must able to a)Discuss the role of antibiotics in acute diarrheal diseases b)Discuss the role of antispasmodics in acute diarrheal diseases c)Discuss the role of anti-secretory drugs in acute diarrheal diseases d)Discuss the role of probiotics in acute diarrheal diseases e)Discuss the role of anti-emetics in acute diarrheal diseases	22.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology
PE24.6	Discuss the causes, clinical presentation and management of persistent diarrhoea in children	K	KH	Y	At the end of the session the Phase III student must able to a)Discuss the causes of persistent diarrhoea in children b)Discuss the clinical presentation of persistent diarrhoea in children c)Discuss the management of persistent diarrhoea in children	26.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology

PE24.7	Discuss the causes, clinical presentation and management of chronic diarrhoea in children	K	KH	Y	At the end of the session the Phase III student must able to a)Discuss the causes of chronic diarrhoea in children b)Discuss the clinical presentation of chronic diarrhoea in children c)Discuss the management of chronic diarrhoea in children	26.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE24.8	Discuss the causes, clinical presentation and management of dysentery in children	K	KH	Y	At the end of the session the Phase III student must able to a) Discuss the causes of dysentery in children b)Discuss the clinical presentation of dysentery in children c)Discuss the management of dysentery in children	26.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pharmacology, Microbiology
PE24.9	Elicit, document and present history pertaining to diarrheal diseases	S	SH	Y	At the end of the session the Phase III student must able to Elicit and present history pertaining to diarrheal diseases	-		Bedside clinics, Skills lab	Skill assessment		
PE24.10	Assess for signs of dehydration, document and present	S	SH	Y	At the end of the session the Phase III student must able to Demonstrate the assessment for signs of dehydration	-		Bedside clinics, Skills lab	Skill assessment		
PE24.11	Apply the IMNCI guidelines in risk stratification of children with diarrheal dehydration and refer	S	SH	Y	At the end of the session the Phase III student must able to Explain the modalities to refer a child with diarrhea based on risk factors according to imnci guidelines	-		Bedside clinics, Skills lab	Document in Log book		
PE24.12	Perform and interpret stool examination including Hanging Drop	S	SH	N	At the end of the session the Phase III student must able to Perform and interpret stool examination including Hanging Drop	-		Bedside clinics, Skills lab	Log book		Microbiology

PE24.13	Interpret RFT and electrolyte report	S	SH	Y	At the end of the session the Phase III student must able to Explain how to Interpret RFT and electrolyte report	-		Bedside clinics, Small group discussion	Document in Log Book		
PE24.14	Plan fluid management as per the WHO criteria	S	SH	Y	At the end of the session the Phase III student must able to List out the fluid management as per the WHO criteria	-		Bedside clinics, Small group activity	Skills Station		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE24.15	Perform NG tube insertion in a manikin	S	P	Y	At the end of the session the Phase III student must able to Demonstrate NG tube insertion in a manikin	-		DOAP session	Document in Log book	2	
PE24.16	Perform IV cannulation in a model	S	P	Y	At the end of the session the Phase III student must able to Demonstrate IV cannulation in a model	-		DOAP session	Document in Log book	2	
PE24.17	Perform Interosseous insertion model	S	P	Y	At the end of the session the Phase III student must able to Demonstrate Interosseous insertion model	-		DOAP session	Document in Log book	2	
Topic: Malabsorption				**Number of**					**Number of procedures that require certification:(NIL)**		
PE25.1	Discuss the etio-pathogenesis, clinical presentation and management of Malabsorption in Children and its causes including celiac disease	K	KH	N	At the end of the session the Phase III student must able to 1. Discuss etio-pathogenesis of malabsorption 2. Discuss clinical presentation of malabsorption 3. List causes of malabsorption 4. List investigations for malabsorption 5. Discuss treatment for malabsorption	29.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology

Topic: Acute and chronic liver disorders				**Number of**	At the end of the session the Phase III student must able to					**Number of procedures that require certification: (NIL)**	
PE26.1	Discuss the etio-pathogenesis, clinical features and management of acute hepatitis in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Discuss etio-pathogenesis of acute hepatitis 2. Discuss clinical presentation of acute hepatitis 3. Describe management of acute hepatitis. 4. List complications of acute hepatitis.	02.08.22	9.30-10.30	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology
PE26.2	Discuss the etio-pathogenesis, clinical features and management of Fulminant Hepatic Failure in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Discuss etio-pathogenesis of fulminant hepatic failure 2. Discuss clinical presentation of fulminant hepatic failure 3. List investigations of fulminant hepatic failure 4. List treatment of fulminant hepatic failure	05.08.22	9.30-10.30	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology
PE26.3	Discuss the etio-pathogenesis, clinical features and management of chronic liver diseases in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Discuss etio-pathogenesis of chronic liver disease 2. Discuss clinical presentation of chronic liver disease 3. List management of chronic liver disease	05.08.22	9.30-10.30	Lecture, Small group activity	Written/ Viva voce		Pathology, Microbiology

PE26.4	Discuss the etio-pathogenesis, clinical features and management of Portal Hypertension in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Discuss etio-pathogenesis of portal hypertension 2. Discuss clinical features of portal hypertension 3. Describe management of portal hypertension 4. Draw a diagram of porto-systemic anastamosis	09.08.22	9.30-10.30	Lecture, Small group activity	Written/ Viva voce		Pathology
PE26.5	Elicit document and present the history related to diseases of Gastrointestinal system	S	SH	Y	At the end of the session the Phase III student must able to 1. Document history related to disease of GI system 2. Present history related to GI system	-		Bedside clinics, Skills lab	Skills Station		
PE26.6	Identify external markers for GI and Liver disorders e.g.. Jaundice, Pallor, Gynaecomastia, Spider angioma, Palmar erythema, Icthyosis, Caput medusa, Clubbing, Failing to thrive, Vitamin A and D deficiency	S	SH	Y	At the end of the session the Phase III student must able to 1. Identify external markers of GI & liver disorder 2. Grading of clubbing 3. Grade of vitamin A deficiency 4. Assess for pallor 5. Assess for jaundice. 6. List features of vitamin D deficiency	-		Bedside clinics, Skills lab	Skill Assessment		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE26.7	Perform examination of the abdomen, demonstrate organomegaly, ascites etc.	S	SH	Y	At the end of the session the Phase III student must able to 1. Perform examination of abdomen in a given child 2. Demonstrate organomegaly 3. Demonstrate fluid thrill 4. Demonstrate shifting dullness 5. Demonstrate puddle sign	-		Bedside clinics, Skills lab	Skill Assessment		
PE26.8	Analyse symptoms and interpret physical signs to make a provisional/ differential diagnosis	S	SH	Y	At the end of the session the Phase III student must able to 1. Analyse symptoms in a given child 2. Interpret physical signs to make provisional diagnosis 3. Interpret physical signs to make differential diagnosis	-		Bedside clinics, Skill lab	Skill Assessment		
PE26.9	Interpret Liver Function Tests, viral markers, ultra sonogram report	S	SH	Y	At the end of the session the Phase III student must able to 1. Interpret LFT 2. Interpret viral markers 3. Interpret ultrasonogram report	-		Bedside clinics, Skills lab	Skill Assessment		Pathology
PE26.10	Demonstrate the technique of liver biopsy in a Perform Liver Biopsy in a simulated environment	S	SH	Y	At the end of the session the Phase III student must able to 1. Demonstrate the technique of liver biopsy 2. Perform liver biopsy in a simulated environment	-		DOAP session	Document in log book		
PE26.11	Enumerate the indications for Upper GI endoscopy	K	K	N	At the end of the session the Phase III student must able to 1. List the indications for Upper GI Endoscopy 2. List the pre-requistes for Upper GI Endoscopy	09.08.22	9.30-10.30	Small group discussion	Viva voce		

PE26.12	Discuss the prevention of Hep B infection – Universal precautions and Immunisation	K	KH	Y	At the end of the session the Phase III student must able to 1. Discuss universal precautions for Hepatitis B infection 2. Discuss immunization for Hepatitis B infection	12.08.22	9.30-10.30	Lecture, Small group activity	Written/ Viva voce		Microbiology
PE26.13	Counsel and educate patients and their family appropriately on liver diseases	A/C	P	y	At the end of the session the Phase III student must able to 1. Counsel the patients on liver disease 2. Educate patients on complications of liver disease with chart 3. Educate patients on prognosis of the liver disease 4. Counsel their family appropriately on liver disease	-		Bedside clinics, Skills lab	Document in log book		
Topic: Pediatric Emergencies – Common Pediatric Emergencies		**Number of competencies: (35)**								**Number of procedures that require certification :(10)**	
PE27.1	List the common causes of morbidity and mortality in the under five children	K	K	Y	At the end of the session the Phase IV student must able to - Define under 5 mortality - List the common causes of morbidity in under 5 children - List the common causes of under 5 mortality - Explain the causes of Under 5 mortality with the help of a pie chart	16.05.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE27.2	Describe the etio-pathogenesis, clinical approach and management of cardiorespiratory arrest in children	K	KH	Y	At the end of the session the Phase IV student must able to - Define cardiorespiratory arrest in children - List 10 causes of cardiorespiratory arrest - Describe the etiopathogenesis of arrest - Draw a flowchart for approach to cardiorespiratory arrest - Discuss the management of arrest in children - Formulate the approach to a given case scenario with the help of a flip chart - List the stepwise management of cardiorespiratory arrest in children as per	18.05.23	2.30-4.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.3	Describe the etio-pathogenesis of respiratory distress in children	K	KH	Y	At the end of the session the Phase III student must able to - Define respiratory distress - List 10 causes of respiratory distress in children - Distinguish between type 1 and type 2 respiratory failure - Describe the etio-pathogenesis of respiratory distress - Identify the type of respiratory failure from the given case scenario	01.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE27.4	Describe the clinical approach and management of respiratory distress in children	K	KH	Y	At the end of the session the Phase III student must able to - List the clinical features of a patient with respiratory distress - Draw a flowchart for clinical approach to respiratory distress - Discuss the laboratory investigations for a child with respiratory distress - Describe the treatment for respiratory distress - Identify the signs of respiratory distress in a given patient - Identify the different types of oxygen delivery systems in the PICU	01.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.5	Describe the etio-pathogenesis, clinical approach and management of Shock in children	K	KH	Y	At the end of the session the Phase IV student must able to - Define shock in children - List the types of shock - List 5 causes of shock in children - Describe the etiopathogenesis of shock - Distinguish between the types of shock - Draw a flowchart for approach to shock - Discuss the investigations to be done for shock in children - Describe the treatment for shock - Formulate the approach to a given case scenario with the help of a flip chart - Identify the signs of shock in a given patient/scenario	23.05.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE27.6	Describe the etio-pathogenesis, clinical approach and management of Status epilepticus	K	KH	Y	At the end of the session the Phase IV student must able to - Define status epilepticus in children - List the different types of seizures - List 5 causes of status epilepticus in children - Describe the etiopathogenesis of status epilepticus - Draw a flowchart for approach to status epilepticus - Discuss the investigations to be done for status epilepicus in children - Draw the flowchart of status epilepticus treatment protocol - Formulate the approach to a given case scenario with the help of a flip chart - Identify the type of seizure in a given case scenario	07.02.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.7	Describe the etio-pathogenesis, clinical approach and management of an unconscious child	K	KH	Y	At the end of the session the Phase IV student must able to - Define coma in children - Discuss the Glasgow Coma Scale - List 10 causes of unconsciousness in children - Describe the etiopathogenesis of an unconscious child - Draw a flowchart for approach to unconscious child - Discuss the investigations to be done for a comatose child - Describe the treatment for an unconscious child - Formulate the approach to a given case scenario with the help of a flip chart - Assign the GCS score in a given case scenario	09.02.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		

PE27.8	Discuss the common types, clinical presentations and management of poisoning in children	K	KH	Y	At the end of the session the Phase IV student must able to - List 10 common types of poisoning in children - Describe the clinical presentations of the common types of poisonings - Discuss the investigations needed for the common types of poisonings - Describe the treatment of poisonings - Identify the type of poisoning based on a given case scenario - Draw the flowchart for approach to a case of unknown poisoning	25.05.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.9	Discuss oxygen therapy, in Pediatric emergencies and modes of administration	K	KH	Y	At the end of the session the Phase III student must able to - List at least 5 indications of oxygen therapy in children - Describe the various modes of oxygen administration - Define FiO2 - Recall the FiO2 provided by each type of oxygen delivery system - Explain the modes of administration of oxygen using a flip chart - Discuss the physiology of respiration using a diagram	01.07.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.10	Observe the various methods of administering Oxygen	S	KH	Y	At the end of the session the Phase III student must able to - Identify with 100% accuracy the types of oxygen delivery systems in the PICU - Explain the mechanism of action of a given oxygen delivery system - Document the types of oxygen systems in the PICU in their log books	01.07.22	9.30-10.30	Demonstration	Document in log book		

PE27.11	Explain the need and process of triage of sick children brought to health facility	K	KH	Y	At the end of the session the Phase IV student must able to - Describe triage of sick children - List the benefits of triage of sick children brought to the hospital - Describe the method/process of triage of sick children - Apply the triage process to a given case scenario - Draw the flowchart of Pediatric emergency triage as per WHO guidelines	08.06.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.12	Enumerate emergency signs and priority signs	K	KH	Y	At the end of the session the Phase IV student must able to - List 5 emergency signs in a sick child - List 5 priority signs - Discuss the significance of emergency signs - Enumerate the emergency and priority signs with the help of a mannequin	08.06.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.13	List the sequential approach of assessment of emergency and priority signs	K	KH	Y	At the end of the session the Phase IV student must able to - Draw the flowchart for approach to assessment of emergency signs - Explain the steps in approach to emergency and priority signs	08.06.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.14	Assess emergency signs and prioritize	S	SH	Y	At the end of the session the Phase IV student must able to - Identify the emergency signs in a given case scenario - Classify the given case into appropriate priority as per triage - List at least 7 emergency signs - Record the vital signs in a given patient	15.06.23	2.30 to 4.30	DOAP session, Skills lab	Skills Assessment		

PE27.15	Assess airway and breathing: recognise signs of severe respiratory distress. Check for cyanosis, severe chest indrawing, grunting	S	P	Y	At the end of the session the Phase IV student must able to - Demonstrate assessment of airway on the mannequin - Assess the breathing in a given patient - List the signs of severe respiratory distress - Identify the signs of severe distress in a given patient - Demonstrate the method to examine cyanosis - Identify grunting in a given patient - Explain the types of chest in drawing	15.06.23	2.30 to 4.30	DOAP session, Skills lab	Skills Assessment	3	
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE27.16	Assess airway and breathing. Demonstrate the method of positioning of an infant & child to open airway i n a simulated environment	S	P	Y	At the end of the session the Phase IV student must able to - Demonstrate the proper positioning of the child to open the airway using a mannequin - Explain the principle for placing in Rose position	15.06.23	2.30 to 4.30	DOAP session, Skills Lab	Skills Assessment	3	
PE27.17	Assess airway and breathing: administer oxygen using correct technique and appropriate flow rate	S	P	Y	At the end of the session the Phase IV student must able to - Identify the appropriate oxygen delivery mode for the given case scenario - Demonstrate the correct technique to administer oxygen - Interpret the required oxygen flow rate as per given case scenario - Demonstrate the correct technique to set the flow rate	15.06.23	2.30 to 4.30	DOAP session, Skills Lab	Skills Assessment	3	

PE27.18	Assess airway and breathing: perform assisted ventilation by Bag and mask in a simulated environment	S	P	Y	At the end of the session the Phase IV student must able to - List the indications for performing bag and mask ventilation - Demonstrate bag and mask ventilation on a mannequin - Identify the parts of the ambu bag	15.06.23	2.30 to 4.30	DOAP session, Skills lab	Skills Assessment	3	
PE27.19	Check for signs of shock i.e. pulse, Blood pressure, CRT	S	P	Y	At the end of the session the Phase IV student must able to - List the signs of shock in a child - Demonstrate the recording of pulse on a mannequin - Record the blood pressure with the help of a mannequin - Demonstrate CRT on a mannequin - Interpret shock based on vital signs in a given case scenario	15.06.23	2.30 to 4.30	DOAP session, Skills Lab	Skills Assessment	3	
PE27.20	Secure an IV access in a simulated environment	S	P	Y	At the end of the session the Phase IV student must able to - Secure an IV access using a mannequin in at least 3 pricks - List the common veins which can be used to secure IV access	15.06.23	2.30 to 4.30	DOAP session, Skills Lab	Skills Assessment	3	
PF27.21	Choose the type of fluid and calculate the fluid requirement in shock	S	P	Y	At the end of the session the Phase IV student must able to - Compare the composition of all types of IV fluids used in children - Choose the appropriate fluid for the given case scenario - Recall the formula to calculate fluid requirement - Draw the flowchart for management of shock - Calculate the fluid requirement for the given case scenario	15.06.23	2.30 to 4.30	DOAP session, Small group activity	Skills Assessment	3	

PE27.22	Assess level of consciousness & provide emergency treatment to a child with convulsions/ coma - Position an unconscious child - Position a child with suspected trauma - Administer IV/per rectal Diazepam for a convulsing child in a simulated environment	S	P	Y	At the end of the session the Phase IV student must able to - Recall the Glasgow Coma Scale accurately - Assign GCS score to the given case scenario - Demonstrate the appropriate positioning of an unconscious child using a mannequin - Demonstrate the proper position of a child with suspected trauma using a mannequin - Show the technique to administer per rectal Diazepam for a convulsing child using a mannequin - Secure IV line to administer IV Diazepam using a mannequin in at least 2 pricks - Administer Diazepam through the IV line for a convulsing child using a mannequin	15.06.23	2.30 to 4.30	DOAP session, Skills Lab	Skills Assessment	3	
PE27.23	Assess for signs of severe dehydration	S	P	Y	At the end of the session the Phase IV student must able to - List all the signs of severe dehydration as per IMNCI guidelines - Identify the signs of severe dehydration in a given patient - Differentiate between signs of no dehydration, some dehydration and severe dehydration using IMNCI guidelines	15.06.23	9.30-10.30	Bedside clinics, Skills lab	Skill station	3	

PE27.24	Monitoring and maintaining temperature: define hypothermia. Describe the clinical features, complications and management of Hypothermia	K	KH	Y	At the end of the session the Phase IV student must able to - Define hypothermia in children - Classify the degrees of hypothermia - Describe the clinical features of hypothermia - List at least 7 complications of hypothermia - Discuss the investigations to be done in a case of hypothermia - Explain the treatment of hypothermia - Demonstrate the wrapping of a child with hypothermia using a mannequin - Identify the signs of hypothermia in a given case scenario	13.06.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE27.25	Describe the advantages and correct method of keeping an infant warm by skin to skin contact	K	KH	Y	At the end of the session the Phase IV student must able to - List the benefits of skin to skin contact in infants - Explain the technique of skin to skin contact - Demonstrate the correct method of keeping an infant warm by skin to skin contact using a mannequin	13.06.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE27.26	Describe the environmental measures to maintain temperature	K	KH	Y	At the end of the session the Phase IV student must able to - Discuss the various factors in temperature control of children - Explain the role of environmental measures to maintain temperature - Demonstrate measures to maintain environmental temperature	13.06.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE27.27	Assess for hypothermia and maintain temperature	S	SH	Y	At the end of the session the Phase IV student must able to - Define hypothermia - Demonstrate the signs of hypothermia using a mannequin - Show the measures of temperature control using a mannequin - Demonstrate the use of radiant warmer	29.06.23	2.30 to 4.30	Skills lab	Skills Assessment		
PE27.28	Provide BLS for children in manikin	S	P	Y	At the end of the session the Phase IV student must able to - List the steps of BLS in children - Demonstrate the steps in airway management of children - Show the method of chest compressions using a mannequin - Demonstrate the use of AED device	29.06.23	2.30 to 4.30	Skills Lab		3	
PE.27.29	Discuss the common causes, clinical presentation, medico-legal implications of abuse	K	KH	Y	At the end of the session the Phase IV student must able to - List the common causes of child abuse - Enumerate the types of child abuse - Discuss the clinical presentation of child abuse - Identify the red flag signs to suspect abuse - Recall the child helpline number in India to report abuse - Describe the medico-legal implications of child abuse - Formulate an approach to child with abuse for their care and management using a blackboard	20.06.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE27.30	Demonstrate confidentiality with regard to abuse	A	SH	Y	At the end of the session the Phase IV student must able to - Explain the need for confidentiality with regard to abuse - Counsel a child with confidentiality using a standardised patient	22.06.23	2.30 to 4.30	Skills lab, standardized patients	Skills Station		
PE27.31	Assess child for signs of abuse	S	SH	Y	At the end of the session the Phase IV student must able to - Demonstrate the signs of abuse with the help of a mannequin - Document in their log book	22.06.23	2.30 to 4.30	DOAP session, Skills lab	Log book		
PE27.32	Counsel parents of dangerously ill / terminally ill child to break a bad news	S	SH	Y	At the end of the session the Phase IV student must able to - Counsel the parents about the current condition of a dangerously ill child using standardised patient - Counsel the parents about the prognosis and treatment of a dangerously ill child using standardised patient - Counsel the parents about the current condition of a terminally ill child using standardised patient - Counsel the parents about the palliative treatment options for a terminally ill child using standardised patient	22.06.23	2.30 to 4.30	DOAP session	Document in Log book		

PE27.33	Obtain Informed Consent	S	SH	Y	At the end of the session the Phase IV student must able to - Discuss the medico-legal aspects of informed consent taking - Demonstrate how to obtain written, informed consent from literate parents using standardised patient - Demonstrate how to obtain written, informed consent from illiterate parents using standardised patient	22.06.23	2.30 to 4.30	DOAP session	Document in Log book		
PE27.34	Willing to be a part of the ER team	A	SH	Y	At the end of the session the Phase IV student must able to - Explain the role of various members in the ER team - Agree to be a part of the ER team - Acknowledge the importance of measures taken by the ER team	22.06.23	2.30 to 4.30	DOAP session	Document in Log book		
PE27.35	Attends to emergency calls promptly	A	SH	Y	At the end of the session the Phase IV student must able to - Attends emergency calls immediately - Communicates the details of the emergency to other members of the ER team - Cooperates with other members of ER team	22.06.23	2.30 to 4.30	DOAP session	Document in Log Book		
Topic: Respiratory system				**Nu**					**Number of procedures that require certification: (NIL)**		

PE28.1	Discuss the etio-pathogenesis, clinical features and management of Naso pharyngitis	K	KH	Y	At the end of the session the Phase III student must able to 1. To know the various organisms that causes nasopharyngitis 2. To understand the pathogenesis and clinical features 3. To know the differential diagnosis and management. Vertical Integration : ENT.	10.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
PE28.2	Discuss the etio-pathogenesis of Pharyngo Tonsillitis	K	KH	Y	At the end of the session the Phase III student must able to 1. To understand the anatomy and physiology of pharynx and tonsils. 2. The pathophysiology of tonsillitis. 3. Clinical manifestation of pharyngotonsillitis. Vertical Integration : ENT.	10.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE28.3	Discuss the clinical features and management of Pharyngo Tonsillitis	K	KH	Y	At the end of the session the Phase III student must able to 1. Clinical manifestations of pharyngo tonsillitis 2. Indications of medical and surgical management Vertical Integration : ENT.	10.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT

PE28.4	Discuss the etio-pathogenesis, clinical features and management of Acute Otitis Media (AOM)	K	KH	Y	At the end of the session the Phase III student must able to 1. Etiology and various causative organisms. 2. Clinical manifestations 3. Indications for medical and surgical management. Vertical Integration : ENT.	10.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
PE28.5	Discuss the etio-pathogenesis, clinical features and management of Epiglottitis	K	KH	Y	At the end of the session the Phase III student must able to 1. Etiology and various causative organisms 2. Clinical features and management of epiglottitis. Vertical Integration : ENT	14.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
PE28.6	Discuss the etio-pathogenesis, clinical features and management of Acute laryngo- trachea-bronchitis	K	KH	Y	At the end of the session the Phase III student must able to 1. Etiology and various causative organisms 2. The clinical manifestations 3. Management of acute laryngotracheobronchitis. Vertical Integration : ENT	14.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
PE28.7	Discuss the etiology, clinical features and management of Stridor in children	K	KH	Y	At the end of the session the Phase III student must able to 1. Various causative factors for stridor in children 2. Clinical manifestations 3. Difference between supraglottic and infraglottic obstruction 4. Management of stridor in children	14.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
PE28.8	Discuss the types, clinical presentation, and management of foreign body aspiration in infants and children	K	KH	Y	At the end of the session the Phase III student must able to 1. The anatomy of pharynx and trachea 2. Clinical manifestation of foreign body in trachea and esophagus. 3. Training in emergency management	17.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT

PE28.9	Elicit, document and present age appropriate history of a child with upper respiratory problem including Stridor	S	SH	Y	At the end of the session the Phase III student must able to 1. Knowledge of the anatomy of upper respiratory system. 2. Description of symptoms in rhinitis ,nasopharyngitis ,epiglottitis 3. Complication of each disorder.	-		Bedside clinics, skill lab	Skill Assessment		ENT
PE28.10	Perform otoscopic examination of the ear	S	SH	Y	At the end of the session the Phase III student must able to 1. Difference between surgical and diagnostic otoscopy 2. How to use the diagnostic otoscopy? Demonstration 3. Useful in diagnosing AOM 4. Tympanic membrane mobility assessment.	-		DOAP session	Skills Assessment		ENT
PE28.11	Perform throat examination using tongue depressor	S	SH	Y	At the end of the session the Phase III student must able to 1. Pharynx – pooling of saliva – bulbar palsy – gag reflex 2. Fauces- lateral wall of pharynx – erythema of fauces tonsillitis ,pharyngitis. 3. Tonsils – size,white patch ,petechiae For diagnosis of diphtheria , candidiasis, streptococcal tonsillitis.	-		DOAP session	Skills Assessment		ENT
PE28.12	Perform examination of the nose	S	SH	Y	At the end of the session the Phase III student must able to 1. For diagnosis of choanal atresia – prescence of bony or membranous septum. 2. Diagnosis of septal deviation 3. Perforation of nasal septum 4. Hypertrophy of inferior turbinate. 5. Prescence of nasal polyp.	-		DOAP session	Skills Assessment		ENT

PE28.13	Analyse the clinical symptoms and interpret physical findings and make a provisional / differential diagnosis in a child with ENT symptoms	S	SH	Y	At the end of the session the Phase III student must able to 1. Knowledge regarding the anatomy of URT and the surrounding structures. 2. To understand the physical findings in relation to the anatomy involved 3. Suggest appropriate management	-		Bedside clinics	Skills Assessment		
PE28.14	Develop a treatment plan and document appropriately in a child with upper respiratory symptoms	S	SH	Y	At the end of the session the Phase III student must able to 1. Rhinitis- antihistamines , topical nasal decongestants 2. Sinusitis- antibiotics ,analgesics, anti-inflammatory. If not responding to medical therapy – surgery 3. Pharyngitis- viral – symptomatic management Bacterial – (evidence of high grade fever with significant lymphadenopathy) antibiotics+ Analgesics +anti-Inflammatory 4. Tonsillitis – Medical management Surgical management – recurrent tonsillitis , chronic lymphadenopathy. - Not responding to medical therapy	-		Bedside clinics	Skills Assessment		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE28.15	Stratify risk in children with stridor using IMNCI guidelines	S	SH	Y	At the end of the session the Phase III student must able to 1. To know the difference between stridor due to supraglottic and infraglottic obstruction. 2. To know the difference between benign condition like congenital laryngeal stridor and those which require surgery like laryngeal cyst and extrinsic obstruction like vascular rings	-		Bedside clinics	Log book documentation		
PE28.16	Interpret blood tests relevant to upper respiratory problems	S	SH	N	At the end of the session the Phase III student must able to 1. To interpret the significance of eosinophilia,serum IgE, leucocytosis in relation to clinical symptoms	14.06.22		Bedside clinics, Small group discussion	Log book		
PE28.17	Interpret X-ray of the paranasal sinuses and mastoid; and /or use written report in case of management Interpret CXR in foreign body aspiration and lower respiratory tract infection, understand the significance of thymic	S	SH	Y	At the end of the session the Phase III student must able to 1. To understand the normal radiological features of paranasal sinuses and mastoid 2. To know the radiological findings in foreign body aspiration and other LRTI. 3. To understand the benign nature of thymic shadow which is frequently misinterpreted.	17.06.22		Bedside clinics, Small group discussion	Skills Assessment		ENT, Radiodiagnosis

PE28.18	Describe the etio-pathogenesis, diagnosis, clinical features, management and prevention of lower respiratory infections including bronchiolitis, wheeze associated LRTI Pneumonia and empyema	S	SH	Y	At the end of the session the Phase III student must able to 1. Understanding the anatomy of lower respiratory tract. 2. Pathology of various LRTI like bronchiolitis , wheezing bronchiolitis,bronchopneumonia. 3. Management of each condition	21.06.22 24.06.22		Bedside clinics, Small group discussion, Lecture	Skill Assessment/ Written/ Viva voce		
PE28.19	Describe the etio-pathogenesis, diagnosis, clinical features, management and prevention of asthma in children	S	SH	Y	At the end of the session the Phase III student must able to 1. Understanding the anatomy and pathophysiology of bronchial asthma 2. Concept of spirometry 3. Management of both acute and chronic asthma 4. Demonstration of various preventive medications. Vertical integration: Respiratory Medicine	28.06.22		Bedside clinics, Small group discussion, Lecture	Skill Assessment/ Written/ Viva voce		Respiratory Medicine
PE28.20	Counsel the child with asthma on the correct use of inhalers in a simulated environment	S	SH	Y	At the end of the session the Phase III student must able to 1. Bronchial asthma ,COPD 2. Inhalation technique-synchronisation with inspiratory phase. 3. Usage of spacer along with inhaler in very young children 4. Swish and Spit technique for steroid inhalational therapy.	28.06.22		Bedside clinics, Small group discussion, Lecture	Skills Assessment/ Written/ Viva voce		Respiratory Medicine
Topic: Anemia and other Hemato-oncologic disorders in children		**Number of competencies: (20)**								**Number of procedures that require certification: (NIL)**	

PE29.1	Discuss the etio-pathogenesis, clinical features, classification and approach to a child with anaemia	K	KH	Y	At the end of the session the Phase III student must able to 1. Understanding the concept of anemia. 2. To know the difference between iron deficiency anaemia and hemolytic anemia and other types. 3. Laboratory parameters for the diagnosis of anaemia.	13.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology
PE29.2	Discuss the etio-pathogenesis, clinical features and management of Iron Deficiency anaemia	K	KH	Y	At the end of the session the Phase III student must able to 1. Etiology and pathogenesis of iron deficiency anemia 2. Clinical manifestations of iron deficiency anemia 3. Indications of oral iron therapy , parenteral iron therapy and blood component therapy.	13.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE29.3	Discuss the etiopathogenesis, clinical features and management of VIT B12, Folate deficiency anaemia	K	KH	Y	At the end of the session the Phase III student must able to 1. Biochemical functions of vitamin B12 ,folic acid 2. Clinical features of megaloblastic anemia 3. Laboratory parameters of megaloblastic anemia. 4. Management of B12, folate deficiency and daily requirements.	17.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology

PE29.4	Discuss the etio-pathogenesis, clinical features and management of Hemolytic anemia, Thalassemia Major, Sickle cell anaemia, Hereditary spherocytosis, Auto-immune hemolytic anaemia and hemolytic uremic syndrome	K	KH	Y	At the end of the session the Phase III student must able to 1. Biochemical and genetic abnormalities in various types of haemolytic anemia 2. Management of various types of haemolytic anaemia	20.05.22 24.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology
PE29.5	Discuss the National Anaemia Control Program	K	KH	Y	At the end of the session the Phase III student must able to 1. Antenatal iron supplementation programme 2. Pediatric iron supplementation programme.	13.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Community Medicine
PE29.6	Discuss the cause of thrombocytopenia in children: describe the clinical features and management of Idiopathic Thrombocytopenic Purpura (ITP)	K	KH	N	At the end of the session the Phase III student must able to 1. Structure and function of platelets 2. Difference between qualitataive and quantitative deficiency of platelets. 3. Clinical manifestations and management of idiopathic thrombocytopenic purpura. Vertical integration :Pathology	27.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology

PE29.7	Discuss the etiology, classification, pathogenesis and clinical features of Hemophilia in children	K	KH	N	At the end of the session the Phase III student must able to 1. Coagulation factors and coagulation cascade 2. Clinical manifestation of factor VIII deficiency. 3. Laboratory diagnosis of haemophilia 4. Management of haemophilia. Vertical integration :Pathology	27.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology
PE29.8	Discuss the etiology, clinical presentation and management of Acute Lymphoblastic Leukemia in children	K	KH	N	At the end of the session the Phase III student must able to 1. Genetic mutations and immune phenotyping in acute lymphoblastic leukaemia. 2. Clinical manifestations of acute lymphoblastic leukaemia. 3. Laboratory parameters in ALL. 4. Management of ALL in children.	31.05.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology
PE29.9	Discuss the etiology, clinical presentation and management of lymphoma in children	K	KH	N	At the end of the session the Phase III student must able to 1. Prevalence and etiology of lymphoma. 2. To differentiate between hodgkins and non-hodgkins lymphoma. 3. Staging and classification of lymphoma 4. Management of lymphoma in children.	03.06.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Pathology
PE29.10	Elicit, document and present the history related to Hematology	S	SH	Y	At the end of the session the Phase III student must able to 1. Functions of various blood components 2. Manifestations of deficiency of each component 3. Appropriate management of each disorder.	-		Bedside clinics, Skills lab	Skills Station		

PE29.11	Identify external markers for hematological disorders e.g.. Jaundice, Pallor, Petechiae purpura, Ecchymosis, Lymphadenopathy,	S	SH	Y	At the end of the session the Phase III student must able to 1. Demonstration in the child the various clinical signs ,jaundice,pallor,petechiae,purpura,ecchymosis 2. Using the charts and photograph for demonstration if available.	-		Bedside clinics, Skills lab	Skill assessment		
PE29.12	Perform examination of the abdomen, demonstrate	S	SH	Y	At the end of the session the Phase III student must able to	-		Bedside clinics, Skills lab	Skill assessment		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE29.13	Analyse symptoms and interpret physical signs to make a provisional/ differential diagnosis	S	SH	Y	At the end of the session the Phase III student must able to 1.Discussing the approach based on symptomatology and signs LFT- liver function 1. CBC, peripheral smear ,Hb electrophoresis- hemolytic anaemia	-		Bedside clinics, Skill lab	Skill assessment		
PE29.14	Interpret CBC, LFT	S	SH	Y	At the end of the session the Phase III student must able to 1. Biochemical and physiological aspects of various blood components 2. Interpretation of abnormalities in blood component values. 3. Biochemical functions of liver 4. Interpretation of LFT- liver function tests. Vertical intergration: Biochemistry, Pathology.	-		Bedside clinics, Skills lab	Skill assessment		

PE29.15	Perform and interpret peripheral smear	S	SH	Y	At the end of the session the Phase III student must able to 1. Demonstration of doing a peripheral smear. 2. Thick and thin smear for malaria 3. Diagnostic criteria for IDA- iron deficiency anaemia –megaloblastic anaemia on peripheral smear.	-		DOAP session	Document in log book		
PE29.16	Discuss the indications for Hemoglobin electrophoresis and interpret report	K	K	N	At the end of the session the Phase III student must able to 1. Various types of haemoglobin. 2. Haemoglobin disorders in diseases like alpha-thalassemia , beta-thalassemia. Vertical intergration : Biochemistry.	07.06.22	9.30-10.30	Small group discussion	Viva voce		Biochemistry
PE29.17	Demonstrate performance of bone marrow aspiration in manikin	S	SH	Y	At the end of the session the Phase III student must able to 1. Indicatons for bone marrow aspiration Hematological malignancies Pancytopenia with megaloblastic anaemia 2. sites chosen :upper end of tibia , iliac crest. 3. Administration of local anesthesia and preparation 4. Preparation of slide Horizontal integration: Pathology	-		Skills lab	Document in log Book		
PE29.18	Enumerate the referral criteria for Hematological conditions	S	SH	Y	At the end of the session the Phase III student must able to 1. Anemia- Iron deficiency anaemia ,haemolytic , megaloblastic. 2.Thrombocytopenia,leucopenia,leucocytosis.	07.06.22	9.30-10.30	Bedside clinics, Small group activity	Viva voce		

PE29.19	Counsel and educate patients about prevention and treatment of anemia	A/C	SH	Y	At the end of the session the Phase III student must able to 1. Knowledge regarding the iron rich foods. 2. Clinical manifestations and complications of various types of anemia. 3. Management of different types of anaemia.	-		Bedside clinics, Skills lab	Document in log book		
PE29.20	Enumerate the indications for splenectomy and precautions	K	K	N	At the end of the session the Phase III student must able to 1. Difference between splenomegaly and hyperspleenism 2. Indications of spleenectomy 3. Complications of spleenectomy 4. Vaccination strategies for prevention of complications.	07.06.22	9.30-10.30	Small group Activity	Viva voce		
Topic: Systemic Pediatrics-Central Nervous system			**Number of competencis: (23)**						**Number of procedures that require certification:(NIL)**		
PE30.1	Discuss the etio-pathogenesis, clinical features , complications, management and prevention of meningitis in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Anatomy of the brain,CSF circulation and vascular supply. 2. Pathologic changes in bacterial and viral infections 3. Clinical features and complications 4. Management – role of antibiotics and supportive measures 5. Preventive strategies by using vaccination Horizontal integration: Microbiology	24.01.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology

PE30.2	Distinguish bacterial, viral and tuberculous meningitis	K	KH	Y	At the end of the session the Phase IV student must able to 1. Knowledge of the various causative oraganisms causing meningitis – bacteria ,virus and Mycobacterium tuberculosis. 2. Clinical presentation of bacterial , viral and tubercular meningitis 3. Management according to the etiology.	24.01.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology
PE30.3	Discuss the etio-pathogenesis, classification, clinical features, complication and management of Hydrocephalus in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. CSF circulation and CSF production 2. Difference between obstructive and communicating hydrocephalus. 3. Clinical manifestations of hydrocephalus 4. Complications of hydrocephalus 5. Medical and surgical management of hydrocephalus	27.01.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE30.4	Discuss the etio-pathogenesis, classification, clinical features, and management of Microcephaly in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Timing of sutural fusion 2. Difference between primary and secondary microcephaly. 3. Craniosynostosis and management 4. Management of microcephaly	27.01.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		

PE30.5	Enumerate the Neural tube defects. Discuss the causes, clinical features, types, and management of Neural Tube defect	K	KH	Y	At the end of the session the Phase IV student must able to 1. Embryology of neural tube formation 2. Specific clinical features of - anencephaly, encephalocele, myelomeningocele, spina bifida 3. Management of each condition 4. Antenatal detection 5. Preventive strategies by folic acid supplementation.	30.01.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE30.6	Discuss the etio-pathogenesis, clinical features, and management of Infantile hemiplegia	K	KH	Y	At the end of the session the Phase IV student must able to 1. Anatomy and blood supply of the brain 2. Predisposing conditions of thrombo embolism 3. CT scan, MRI,MRV ,MRA findings 4. Management and preventive strategies.	02.02.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE30.7	Discuss the etio-pathogenesis, clinical features, complications and management of Febrile seizures in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Age group and clinical presentation of febrile seizures 2. Difference between typical and atypical febrile seizures 3. Complications of febrile seizures 4. Indications for intermittent and continuous prophylaxis.	07.02.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE30.8	Define epilepsy. Discuss the pathogenesis, clinical types, presentation and management of Epilepsy in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Definition of epilepsy.Difference between convulsions, seizures and epilepsy. 2. Neurophysiological basis of epilepsy. 3. Classification of seizure disorder and clinical features of each type. 4. Management modalities of different seizure types and syndromic epilepsy.	14.02.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE30.9	Define status Epilepticus. Discuss the clinical presentation and management	K	KH	Y	At the end of the session the Phase IV student must able to 1. Definition of status epilepticus 2. Clinical presentation of status epilepticus 3. Management and prevention	07.02.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE30.10	Discuss the etio-pathogenesis, clinical features and management of Mental retardation in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Enumerating the various causes – genetic, endocrine, metabolic, neurodegenerative 2. Intelligence quotient assessment 3. To differentiate between preventable and other causes of mental retardation.	21.02.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE30.11	Discuss the etio-pathogenesis, clinical features and management of children with cerebral palsy	K	KH	Y	At the end of the session the Phase IV student must able to 1. Antepartum, intrapartum and postpartum causes of cerebral palsy. 2. Classification and clinical features of each type of cerebral palsy 3. Multidisciplinary management of cerebral palsy .	21.02.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		

PE30.12	Enumerate the causes of floppiness in an infant and discuss the clinical features, differential diagnosis and management	K	KH	Y	At the end of the session the Phase IV student must able to 1. Description of floppy infant 2. Classification based on various levels of involvement 3. Management of floppy infant.	16.02.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE30.13	Discuss the etio-pathogenesis, clinical features, management and prevention of Poliomyelitis in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Microbiology of enterovirus – mode of entry and pathogenesis 2. Clinical features of spinal polio , bulbar polio, bulbospinal polio. 3. Management of non-paralytic and paralytic polio 4. Preventive strategies – oral polio, injectable polio. 5. Pulse polio immunisation.	16.02.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology
PE30.14	Discuss the etio-pathogenesis, clinical features and management of Duchene muscular dystrophy	K	KH	Y	At the end of the session the Phase IV student must able to 1. Understanding the concept of myopathy ,neuropathy and dystrophy 2. Clinical features of different types of myopathy 3. Clinical manifestations of Duchene muscular dystrophy and becker's dystrophy. 4. Management of Duchene muscular dystrophy.	16.02.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		

PE30.15	Discuss the etio-pathogenesis, clinical features and management of Ataxia in children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Understanding the anatomy and physiology of cerebellum and extra pyramidal system. 2. Clinical features of ataxia 3. Testing for cerebellar functions 4. Medical management of ataxia in children	23.02.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE30.16	Discuss the approach to and management of a child with headache	K	KH	Y	At the end of the session the Phase IV student must able to 1. Enumerate the various causes of headache – migraine , vascular , infective , refractory error , psychogenic. 2. XRAY , CT ,MRI – role in the diagnosis 3. Management of different types of headache.	23.02.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE30.17	Elicit document and present an age appropriate history pertaining to the CNS	S	SH	Y	At the end of the session the Phase IV student must able to 1. ONSET – acute, subacute, chronic 2. Precipitating factors 3. Course of illness 4. History related to higher functions 5. History related to cranial nerve involvement 6. History related to motor system ,sensory system ,cerebellum, autonomic functions.	-		Bedside clinics, Skills lab	Skill Assessment		

PE30.18	Demonstrate the correct method for physical examination of CNS including identification of external markers. Document and present clinical findings	S	SH	Y	At the end of the session the Phase IV student must able to 1. General Examination: general appearance – neurocutaneous markers Consciousness and mental state Nutritional status 2. Head to toe examination 3. CNS examination – higher functions - Appearance and behaviour - Speech and language - Cranial nerve examination - Motor system ,reflexes - Sensory system , cerebellum	-		Bedside clinics, Skills lab	Skill Assessment		
PE30.19	Analyse symptoms and interpret physical findings and propose a provisional / differential diagnosis	S	SH	Y	At the end of the session the Phase IV student must able to 1. Acute – vascular – infantile hemiplegia 2. Subacute – infective meningitis / neurodegenerative disorders.	-		Bedside clinics, Skills lab	Skill Assessment		
PE30.20	Interpret and explain the findings in a CSF analysis	S	SH	Y	At the end of the session the Phase IV student must able to 1. Based on macroscopic appearance 2. Based on biochemical analysis 3. Based on cell count Vertical integration: Microbiology.	24.01.23		Small group discussion	Log book		Microbiology
PE30.21	Enumerate the indication and discuss the limitations of EEG, CT, MRI	K	K	N	At the end of the session the Phase IV student must able to 1. Role of EEG, CT, MRI in seizure disorder - Intracranial neoplasm - Structural malformation - Thromboembolism disorders	-		Bedside clinics	Log book		
PE30.22	Interpret the reports of EEG, CT, MRI	S	SH	Y	At the end of the session the Phase IV student must able to Horizontal integration with Neurologist and Radiologist.	-		Bedside clinics, Skills lab	Log book		Radiodiagnosis

PE30.23	Perform in a mannequin lumbar puncture. Discuss the indications, contraindication of the procedure	S	SH	Y	At the end of the session the Phase IV student must able to 1. Demonstration of the procedure – lumbar puncture 2. Indications – meningitis – pyogenic and tuberculous 3. Contraindications – poor general condition	-		Bedside clinics, Skills lab	Skill Assessment		
Topic: Allergic Rhinitis , Atopic Dermatitis, Bronchial Asthma , Urticaria Angioedema		**Number of competencies: (12)**							**Number of procedures that require certification: (NIL)**		
PE31.1	Describe the etio-pathogenesis, management and prevention of Allergic Rhinitis in Children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Basis of allergic disorders 2. Symptoms and signs of allergic rhinitis 3. Symptomatic management 4. Prevention	03.01.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		ENT
PE31.2	Recognize the clinical signs of Allergic Rhinitis	S	SH	Y	At the end of the session the Phase IV student must able to Examination of the nose , throat, and sinuses for clinical signs. - pale nasal mucosa - congested nasal turbinates - Mucoid rhinorrhea - Conjunctival itching - Eosinophilia in the nasal smear	05.01.23	2.30 to 4.30	Bedside clinics' Skill Lab	Skill Assessment		ENT
PE31.3	Describe the etio-pathogenesis, clinical features and management of Atopic dermatitis in Children	K	KH	Y	At the end of the session the Phase IV student must able to 1. Etiopathogenesis – genetic factors , immunological factors. 2. Clinical Features – infantile pattern , childhood pattern. 3. Management – importance of breast feeding.	03.01.23	9.30-10.30	Lecture Small group discussion	Written/ Viva voce		ENT

Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE31.4	Identify Atopic dermatitis and manage	S	SH		At the end of the session the Phase IV student must able to 1. Demonstration of atopic dermatitis in patients along with visual aids like charts and photos 2. Erythematous papulovesicles over the face 3. Dry lichenified, crusted plaques.	05.01.23	2.30 to 4.30	Bedside clinics Skills lab	Skill Assessment		Dermatology , Venereology & Leprosy
PE31.5	Discuss the etio-pathogenesis, clinical types, presentations, management and prevention of childhood Asthma	K	KH	Y	At the end of the session the Phase IV student must able to 1. Anatomy of the bronchial tree 2. Pathological changes in bronchial asthma 3. Clinical types of bronchial asthma and its varied presentation. 4. Management of acute and chronic asthma. 5. Preventive strategies. Horizontal integration : Pulmonary medicine	10.01.23	9.30-10.30	Lecture Small group discussion	Written/ Viva voce		
PE31.6	Recognise symptoms and signs of Asthma	S	SH	Y	At the end of the session the Phase IV student must able to 1. History taking pertaining to asthma 2. Family history of asthma and other allergic disorders 3. Role of clinical examination 4. Role of spirometry	12.01.23	2.30 to 4.30	Bedside clinic, Small group activity	Skill Assessment		

PE31.7	Develop a treatment plan for Asthma appropriate to clinical presentation & severity	S	SH	Y	At the end of the session the Phase IV student must able to - Acute exacerbations - Intermittent chronic asthma - Chronic persistent asthma - Role of beta agonists, systemic steroids theophylline , magnesium sulphate ,inhalational therapy.	12.01.23	2.30 to 4.30	Bedside clinic, Small group activity	Skill Assessment		
PE31.8	Enumerate criteria for referral	K	KH	Y	At the end of the session the Phase IV student must able to 1. Signs of respiratory distress not responding to nebulised salbutamol 2. Presence of cyanosis 3. Very young children 4. Need for mechanical ventilation	12.01.23	2.30 to 4.30	Bedside clinic, Small group activity	Written/ Viva voce		
PE31.9	Interpret CBC and CX Ray in Asthma	S	SH	Y	At the end of the session the Phase IV student must able to 1. Absolute eosinophil count – significance in distinguishing between allergic , vasomotor , or infective etiology. 2. Chest Xray findings: -bilateral symmetric air trapping -patches of atelectasis -bronchial cuffing – edema fluid in perivascular and peribronchial interstitial space.	12.01.23	2.30 to 4.30	Bedside clinic, Small group activity	Skill Assessment		

PE31.10	Enumerate the indications for PFT	K	K	N	At the end of the session the Phase IV student must able to 1. Age group : 5-7 years 2. Require co-operation of the patient 3. Differentiation between restrictive and obstructive lung disease. 4. Quantifying the degree of lung dysfunction Horizontal integration: Pulmonary Medicine	12.01.23	2.30 to 4.30	Bedside clinic, Small group activity	Viva voce		
PE31.11	Observe administration of Nebulisation	S	SH	Y	At the end of the session the Phase IV student must able to 1. Principle of nebuliser 2. Dose of nebulising solution depending on age 3. Total fill volume – 3.5 ml 4. Less effective than MDI with spacer due to large particle size.	12.01.23	2.30 to 4.30	DOAP session	Document in log book		
PE31.12	Discuss the etio-pathogenesis, clinical features and complications and management of Urticaria Angioedema	K	KH	Y	At the end of the session the Phase IV student must able to 1. Etiology of acute urticaria and chronic urticaria 2. Diagnostic testing for urticaria and angioedema 3. Treatment of urticaria and angioedema 4. Complications of urticaria and angioedema	03.01.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
Topic: Chromosomal Abnormalities				**Numb er of comp**	At the end of the session the Phase IV student must able to					**Number of procedures that require certification: (NIL)**	

PE32.1	Discuss the genetic basis, risk factors, complications, prenatal diagnosis, management and genetic counselling in Down's Syndrome	K	KH	Y	At the end of the session the Phase IV student must able to - Describe the Genetic basis of Down's syndrome - Enumerate the Risk factors for Down's syndrome - Explain the clinical features ofDown's syndrome - Discuss the complications of Down'ssyndrome - Explain prenatal diagnostic techniques - Discuss the management of Down's syndrome - Explain the prognosis of Down's syndrome - Discuss Genetic counselling in Down's syndrome	16.03.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	At the end of the session the Phase IV student must able to			**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE32.2	Identify the clinical features of Down's Syndrome	S	SH	Y	At the end of the session the Phase IV student must able to -clinical features in a given Down's patient/ clinical images	16.03.23	2.30 to 4.30	Bedside clinics, Skills lab	log book		General Medicine
PE32.3	Interpret normal Karyotype and recognize Trisomy 21	S	SH	Y	At the end of the session the Phase IV student must able to - Read and Interpret normal karyotype - Recognise Down's syndrome karyotype in a given lab report	16.03.23	2.30 to 4.30	Bedside clinics, Skills lab	Log book		

PE32.4	Discuss the referral criteria and Multidisciplinary approach to management	K	KH	Y	At the end of the session the Phase IV student must able to - Enumerate the complications in Down syndrome - Explain comorbid conditions in Down's syndrome - Discuss the causes of death in Down syndrome - Discuss referral criteria - Discuss the multidisciplinary approach to management	16.03.23	2.30 to 4.30	Lecture, Small group discussion	Written/ Viva voce		
PE32.5	Counsel parents regarding 1. Present child 2. Risk in the next pregnancy	A/C	SH	N	At the end of the session the Phase IV student must able to - Regarding the natural history in Down' syndrome - Need for regular follow up - Need for regular screening of comorbid conditions - Risk in next pregnancy - Prenatal diagnosis and indications for MTP	16.03.23	2.30 to 4.30	Bedside clinics, Skills lab	Log book		
PE32.6	Discuss the genetic basis, risk factors, clinical features, complications, prenatal diagnosis, management and genetic counselling in Turner's Syndrome	K	KH	N	At the end of the session the Phase IV student must able to - Describe the Genetic basis of Turner's syndrome - Enumerate the Risk factors for Turner's syndrome - Explain the clinical features of Turner's syndrome - Discuss the complications of Turner's syndrome - Explain prenatal diagnostic techniques - Discuss the management of Turner syndrome - Explain the prognosis of Turner's syndrome - Explain the chances of pregnancy in Turner's syndrome - Discuss Genetic counselling in Turner's syndrome	21.03.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		General Medicine, Obstetrics & Gynaecology

PE32.7	Identify the clinical features of Turner Syndrome	S	SH	N	At the end of the session the Phase IV student must able to -clinical features in a given Turner's syndrome patient/ clinical images	23.03.23	2.30 to 4.30	Bedside clinics, Skills lab	Log book		General Medicine
PE32.8	Interpret normal Karyotype and recognize the Turner Karyotype	S	SH	N	At the end of the session the Phase IV student must able to - Read and Interpret normal karyotype - Recognise Turner syndrome karyotype in a given lab report	23.03.23	2.30 to 4.30	Bedside clinics, Skills lab	log book		General Medicine, Obstetrics & Gynaecology
PE32.9	Discuss the referral criteria and multidisciplinary approach to management of Turner Syndrome	K	KH	N	At the end of the session the Phase IV student must able to- Enumerate the complications in Turner syndrome - Explain comorbid conditions in Turner syndrome - Discuss the causes of death in Turner syndrome - Discuss referral criteria - Discuss the multidisciplinary approach to management	21.03.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE32.10	Counsel parents regarding 1. Present child 2. Risk in the next pregnancy	A/C	SH	N	At the end of the session the Phase IV student must able to - Regarding the natural history in Turner syndrome - Need for regular follow up - Need for regular screening of comorbid conditions - Risk in next pregnancy - Prenatal diagnosis and indications for MTP	23.03.23	2.30 to 4.30	Bedside clinics, Skills lab	Log book		

PE32.11	Discuss the genetic basis, risk factors, complications, prenatal diagnosis, management and genetic counselling in Klineferlter Syndrome	K	KH	Y	At the end of the session the Phase IV student must able to - Describe the Genetic basis of Klinefelter syndrome - Enumerate the Risk factors forKlinefelter syndrome - Explain the clinical features of Klinefelter syndrome - Discuss the complications ofKlinefelter syndrome - Explain prenatal diagnostic techniques - Discuss the management of Klinefelter syndrome - Explain the prognosis of Klinefelter syndrome - Discuss Genetic counselling in Klinefelter syndrome	21.03.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		General Medicine
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE32.12	Identify the clinical features of Klineferlter Syndrome	S	SH	N	At the end of the session the Phase IV student must able to - clinical features in a given Klinefelter syndrome patient/ clinical images	23.03.23	2.30 to 4.30	Bedside clinics, Skills lab	Log book		General Medicine
PE32.13	Interpret normal Karyotype and recognize the Klineferlter Karyotype	S	SH	N	At the end of the session the Phase IV student must able to - Read and Interpret normal karyotype - Recognise Klinefelter syndrome karyotype in a given lab report	23.03.23	2.30 to 4.30	Bedside clinics, Skills lab	Log book		General Medicine
Topic: Endocrinology				**N u**					**Number of procedures that require certification: (02)**		

PE33.1	Describe the etio-pathogenesis clinical features, management of Hypothyroidism in children	K	KH	Y	At the end of the session the Phase IV student must able to - Describe the physiology of thyroid hormones - Enlist etiology of Congenital hypothyroism - Enlist etiology of Acquired hypothyroism - List the clinical features of Congenital hypothyroism - List the clinical features of Acquired hypothyroism - Enumerate the investigations - Discuss the management of congenital and acquired hypothyroidism - Describe the preventive measures of IDD	28.02.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE33.2	Recognize the clinical signs of Hypothyroidism and refer	S	SH	Y	At the end of the session the Phase IV student must able to - Recognise the clinical signs of hypothyroidism - Discuss the indications for referral	02.03.23	2.30 to 4.30	Bedside clinics, Skill Lab	Skill Assessment		
PE33.3	Interpret and explain neonatal thyroid screening report	S	SH	Y	At the end of the session the Phase IV student must able to - Analyse neonate TFT - Explain the management if abnormal	02.03.23	2.30 to 4.30	Bedside clinics, Small group discussion	Skill Assessment		

PE33.4	Discuss the etio-pathogenesis, clinical types, presentations, complication and management of Diabetes mellitus in children	K	KH	Y	At the end of the session the Phase IV student must able to - Discuss the etio-pathogenesis of Diabetes mellitus - Classify into different clinical types - Discuss the clinical presentations - Enumerate criteria for diagnosis - Describe the features of different insulin preparations - Discuss different insulin regimens - Explain sick day care - Counsel on Diet and follow up - Counsel on site and technique of administration of Insulin - List acute and chronic complications - Define DKA - Explain pathophysiology of DKA - Discuss management of DKA	07.03.23	9.30-10.30	Lecture, Small group discussions	Written/ Viva voce		
PE33.5	Interpret Blood sugar reports and explain the diagnostic criteria for Type 1 Diabetes	S	SH	Y	At the end of the session the Phase IV student must able to - Interpret blood sugar reports - Explain the diagnostic criteria for Type 1 Diabetes mellitus	09.03.23	2.30 to 4.30	Bedside clinic, small group activity	Skill Assessment		
PE33.6	Perform and interpret Urine Dip Stick for Sugar	S	P	Y	At the end of the session the Phase IV student must able to - Able to perform urine dipstick test - Explain the rationale behind the test - Interpret the report	09.03.23	2.30 to 4.30	DOAP session	Skill Assessment	3	Biochemistry
PE33.7	Perform genital examination and recognize Ambiguous Genitalia and refer appropriately	S	SH	Y	At the end of the session the Phase IV student must able to - Explain normal male and female genitalia - Perform genital examination appropriately - Recognise ambiguous genitalia in the given clinical images/ patient	-	9.30-10.30	Bedside clinic Skills lab	Skill Assessment		

PE33.8	Define precocious and delayed Puberty	K	KH	Y	At the end of the session the Phase IV student must able to - Explain physiology of puberty - Describe SMR - Define precocious puberty - Enlist etiology ofprecocious puberty - Discuss clinical approach to precocious puberty - Discuss management of precocious puberty - Define delayed puberty - Enlist etiology of delayed puberty - Discuss clinical approach to delayed puberty - Discuss management of delayed puberty	14.03.23	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE33.9	Perform Sexual Maturity Rating (SMR) and interpret	S	SH	Y	At the end of the session the Phase IV student must able to - Perform SMR assessment in a given child - Interpret the stage of SMR in a given child	-		Bedside clinics Skills Lab	Skill Assessment		
PE33.10	Recognize precocious and delayed Puberty and refer	S	SH	Y	At the end of the session the Phase IV student must able to - Recognise Precocious puberty in a given child/ clinical image - Recognise delayed puberty in a given child/ clinical image	-		Bedside clinics Skills Lab	log book		

PE33.11	Identify deviations in growth and plan appropriate referral	S	P	Y	At the end of the session the Phase IV student must able to - Identify deviation from normal growth - Indications for referral	-		Bedside clinics Skills Lab	log book	2	
Topic:Vaccine preventable Diseases - Tuberculosis			**Number of competencies: (20)**						**Number of procedures that require certification: (03)**		
PE34.1	Discuss the epidemiology, clinical features, clinical types, complications of Tuberculosis in Children and Adolescents	K	KH	Y	At the end of the session the Phase III student must able to - Discuss epidemiology of TB - Describe the etio-pathogenesis of TB - Explain differences of peditriac TB from Adult TB - Classify the clinical types - Define Presumptive TB suspect - Define Presumptive Extrapulmonary TB - Define Presumptive Drug resistant TB - Describe the clinical features of pulmonary TB - Describe the clinical features lymph node TB - Describe the clinical features of pleural TB - Describe the clinical features of abdominal TB - Describe the clinical features of TB meningitis - Discuss the complications of various forms of TB	25.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology

PE34.2	Discuss the various diagnostic tools for childhood tuberculosis	K	KH	Y	At the end of the session the Phase III student must able to - Enumerate various diagnostic modalities in diagnosis of TB - Explain Tuberculin skin test (TST) - Interpret TST - Describe steps in sputum smear examination by Zeihl-Neelson method - Enumerate CXR findings in TB - Discuss newer diagnostic tools like CB-NAAT, LPA, Liquid cultures - Discuss the limitations of culture - Describe CSF findings in TB meningitis - Describe CT Brain findings in TB meningitis - Describe Pleural fluid findings in Pleural TB	25.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology
PE34.3	Discuss the various regimens for management of Tuberculosis as per National Guidelines	K	KH	Y	At the end of the session the Phase III student must able to- Draw algorithm for diagnosis of Pulmonary TB - Define default, failure and relapse - Define MDR and XDR TB - Classify into different category as per RNTCP - Enumerate Diagnostic regimen for Drug sensitive TB - Enumerate diagnostic regimen for MDR/XDR TB - Enlist first line and second line drugs - Discuss the adverse drug reactions of ATT drugs - List the indication for steroids in TB - Discuss DOTS	25.03.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology

PE34.4	Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Program	K	KH	Y	At the end of the session the Phase III student must able to - Describe the objectives of RNTCP - Describe the outcome of RNTCP - Enumerate the different preventive strategies - Explain environmental/ personal protective measures - Explain indications for isoniazid preventive therapy - Discuss BCG	25.03.22		Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology
PE34.5	Able to elicit, document and present history of contact with tuberculosis in every patient encounter	S	SH	Y	At the end of the session the Phase III student must able to - Define a contact with TB - Elicit and present history of contact in every patient	-		Bedside clinics, Skill lab	Skill Assessment		
PE34.6	Identify a BCG scar	S	P	Y	At the end of the session the Phase III student must able to - Explain the steps of administration of BCG Vaccine - Enumerate the events in the formation of BCG Scar - Identify the scar in a given patient	-		Bedside clinics, Skills lab	Skill Assessment	3	Microbiology
PE34.7	Interpret a Mantoux test	S	P	Y	At the end of the session the Phase III student must able to - Explain steps of mantoux - Read and interpretmantoux reaction - Demonstrate the method of interpretation in a given patient - Explain false positive and negative mantoux	-		Bedside clinics Skills lab	Skill assessment	3	Microbiology

PE34.8	Interpret a Chest Radiograph	S	SH	Y	At the end of the session the Phase III student must able to - Read a normal chest xray - Read the abnormal findings and given xray - Analyse the etiology of abnormal xrays	-		Bedside clinics Skills lab	Skill assessment		Radiodiagnosis
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PE34.9	Interpret blood tests in the context of laboratory evidence for tuberculosis	S	SH	N	At the end of the session the Phase III student must able to - Interpret blood test of a given TB patient	15.04.22	9.30-10.30	Bedside clinics, Small group discussion	log book		Microbiology
PE34.10	Discuss the various samples for demonstrating the organism e.g. Gastric Aspirate, Sputum , CSF, FNAC	K	KH	Y	At the end of the session the Phase III student must able to - Discuss the method of collection of Gastric aspirate - Discuss the limitations of Gastric aspirate sample - Discuss method of collection of induced sputum - Discuss the CSF findings in TB meningitis - Discuss FNAC findings in Lymph node TB	15.04.22	9.30-10.30	Bedside clinics, Small group discussion	Written/ Viva voce		Microbiology
PE34.11	Perform AFB staining	S	P	Y	At the end of the session the Phase III student must able to- demonstrate steps of AFB staining - interpret under microscope	-		DOAP session	Log book/Journal	3	Microbiology

PE34.12	Enumerate the indications and discuss the limitations of methods of culturing M.Tuberculii	K	KH	Y	At the end of the session the Phase III student must able to - Enlist the various culture medias for M.Tb - Enumerate the indications for cuture - Discuss the limitations	15.04.22		Small group discussion	Written/ Viva voce		Microbiology
PE34.13	Enumerate the newer diagnostic tools for Tuberculosis including BACTEC CBNAAT and their indications	K	K	N	At the end of the session the Phase III student must able to - Enumerate newer diagnostic tools for TB - Explain CBNAAT - Discuss advantages of CBNAAT - Explain Line Probe Assay (LPA) - Discuss advantages of LPA - Discuss newer culture media - Discuss the indications for each tool	15.04.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		
PE34.14	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of fever in children	K	KH	Y	At the end of the session the Phase III student must able to - Define fever - Enumerate different causes of fever in children - Describe etio-pathogenesis of fever - Discuss the clinical features - Discuss fever without focus - Define fever of unknown origin - Discuss etiology of fever of unknown origin - Describe the complications of fever - Explain the management of fever	19.04.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology

PE34.15	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with exanthematous illnesses like Measles, Mumps, Rubella & Chicken pox	K	KH	Y	At the end of the session the Phase III student must able to - Define fever - Enumerate different causes of fever in children - Describe etio-pathogenesis of measles - Discuss the clinical features of measles - Discuss the complications of measles - Explain the management of measles - Discuss the prevention of measles - Describe etio-pathogenesis of mumps - Discuss the clinical features of mumps - Discuss the complications of mumps - Explain the management of mumps - Discuss the prevention of mumps - Describe etio-pathogenesis of rubella - Discuss the clinical features of rubella - Discuss the complications of rubella - Explain the management of rubella - Discuss the prevention of rubella - Describe etio-pathogenesis of varicella - Discuss the clinical features of varicella - Explain the management of varicella - Discuss the prevention of varicella - Describe congenital varicella	19.04.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology

PE34.16	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Diphtheria, Pertussis, Tetanus.	K	KH	Y	At the end of the session the Phase III student must able to - Define fever - Enumerate different causes of fever in children - Describe etio-pathogenesis of diptheria - Discuss the clinical features of diphtheria - Discuss the complications of diptheria - Explain the management of diptheria - Discuss the prevention of diphtheria - Describe etio-pathogenesis of Pertussis - Discuss the clinical features of Pertussis - Discuss the complications of pertussis - Explain the management of Pertussis - Discuss the prevention of Pertussis - Describe etio-pathogenesis of tetanus - Discuss the clinical features of tetanus - Explain the management of tetanus - Discuss the prevention of tetanus	22.04.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology
PE34.17	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Typhoid	K	KH	Y	At the end of the session the Phase III student must able to - Define fever - Enumerate different causes of fever in children - Describe etio-pathogenesis of typhoid - Discuss the clinical features of typhoid - Discuss the complications of typhoid - Explain the management of typhoid - Discuss the prevention of typhoid	26.04.22		Lecture, Small group discussion	Written/ Viva voce		Microbiology
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**	**Objectives**	**Date**	**Time**	**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

PE34.18	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Dengue, Chikungunya and other vector born diseases	K	KH	Y	At the end of the session the Phase III student must able to - Define fever - Enumerate different causes of fever in children - Describe etio-pathogenesis of Dengue - Discuss the clinical features of Dengue - Discuss the complications of Dengue - Explain the WHO management guidelines of dengue - Discuss the prevention of Dengue - Describe etio-pathogenesis of Chickungunya - Discuss the clinical features ofChickungunya - Discuss the complications of Chickungunya - Explain the management of Chickungunya	26.04.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology

PE34.19	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of children with Common Parasitic infections, malaria, leishmaniasis, filariasis, helminthic infestations, amebiasis, giardiasis	K	KH	Y	At the end of the session the Phase III student must able to - Define fever - Enumerate different causes of fever in children - Describe etio-pathogenesis of malaria - Discuss the clinical features of malaria - Discuss the complications of malaria - Explain the management of malaria - Discuss the prevention of malaria - Describe etio-pathogenesis of leishmaniasis - Discuss the clinical features of leishmaniasis - Discuss the complications of leishmaniasis - Explain the management of leishmaniasis - Discuss the prevention of leishmaniasis - Describe etio-pathogenesis of filariasis - Discuss the clinical features of filariasis - Discuss the complications of filariasis - Explain the management of filariasis - Describe etio-pathogenesis of helminthic infestations - Discuss the clinical features of	29.04.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology
PE34.20	Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Ricketsial diseases	K	KH	Y	At the end of the session the Phase III student must able to - Define fever - Enumerate different causes of fever in children - Describe etio-pathogenesis of ricketsial diseases - Discuss the clinical features ofricketsial diseases - Discuss the complications of ricketsial diseases - Explain the management of ricketsial diseases - Discuss the prevention of ricketsial diseases	29.04.22	9.30-10.30	Lecture, Small group discussion	Written/ Viva voce		Microbiology

Topic: The role of the physician in the community			**Number of competencies**							**Number of procedures that require certification : (NIL)**	
PE35.1	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as they pertain to health care in children (including parental rights and right to refuse treatment)	K	KH	Y	At the end of the session the Phase IV student must able to 1 Identify, discuss and defend medicolegal, socio-cultural and ethical issues as they pertain to health care in children (including parental rights and right to refuse treatment)	27.06.23	9.30-10.30	Small group discussion	Written/ Viva voce		
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH- Shows how, P- performs indepe **Column F: DOAP session – Demonstrate, Observe, Assess, Perform.** **Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation**										
Integration											
					Human Anatomy						
AN25.4	Describe embryological basis of: 1) atrial septal defect, 2)ventricular septal	K	KH	Y	**Objectives**	**Date**	**Time**	Lecture	Written/ Viva voce		General Medicine, Pediatrics
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
AN25.5	Describe developmental basis of congenital anomalies, transposition of great	K	KH	Y				Lecture	Written/ Viva voce		General Medicine, Pediatrics
AN25.9	Demonstrate surface marking of lines of pleural reflection, Lung borders and fissures,	K/S	SH	Y				Practical	Viva voce/ skill assessment		General Medicine, Pediatrics
AN63.2	Describe anatomical basis of congenital	K	KH	N				Lecture	Written		Pediatrics

AN64.3	Describe various types of open neural tube defects with its embryological basis	K	KH	N				Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics
AN74.1	Describe the various modes of inheritance with examples	K	KH	Y				Lecture	Written		General Medicine, Pediatrics
AN74.2	Draw pedigree charts for the various types of inheritance & give	K	KH	Y				Lecture	Written		General Medicine, Pediatrics
AN74.4	Describe the genetic basis & clinical features of Achondroplasia, Cystic	K	KH	N				Lecture	Written		General Medicine, Pediatrics
AN75.1	Describe the structural and numerical chromosomal	K	KH	Y				Lecture	Written		Pediatrics
AN75.2	Explain the terms mosaics and chimeras with example	K	KH	N				Lecture	Written		Pediatrics
AN75.3	Describe the genetic basis & clinical features of Prader Willi	K	KH	N				Lecture	Written		Pediatrics
AN75.4	Describe genetic basis of variation;	K	KH	Y				Lecture	Written		Pediatrics
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
AN75.5	Describe the principles of genetic counselling	K	KH	Y				Lecture	Written		Pediatrics, Obstetrics & Gynaecolog
Physiology											
PY11.6	Describe physiology of Infancy	K	KH	N				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PY11.9	Interpret growth charts	K	KH	Y				Small group teaching	Practical/OSPE/ Viva voce		Pediatrics

PY11.10	Interpret anthropometric assessment of infants	K	KH	Y				Small group teaching	Practical/OSPE/Viva voce		Pediatrics
Biochemistry											
BI5.3	Describe the digestion and absorption of dietary proteins	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
BI5.4	Describe common disorders associated with protein	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
BI7.3	Describe gene mutations and basic mechanism of	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
BI7.4	Describe applications of recombinant DNA technology, PCR in the	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine
BI8.1	Discuss the importance of various dietary components and	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics,
BI8.2	Describe the types and causes of protein energy malnutrition	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics,
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
BI8.5	Summarize the nutritional importance of commonly used items of food including	K	KH	Y				Lecture , Small group discussion	Written/ Viva voce		Community Medicine, General Medicine,
BI10.5	Describe antigens and concepts involved in vaccine development	K	KH	Y				Lecture , Small group discussion	Written/ Viva voce		Pathology, Pediatrics, Microbiology
Pathology											

PA12.2	Describe the pathogenesis of disorders caused by	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Biochemistry, Pediatrics
PA21.2	Classify and describe the etiology, pathogenesis and	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PA28.12	Define, classify and describe the genetics, inheritance etiology, pathogenesis, pathology, laboratory, urinary findings	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics
PA28.14	Classify and describe the etiology, genetics, pathogenesis, pathology, presenting	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PA31.4	Enumerate and describe the etiology, hormonal dependency	K	KH	N				Lecture, Small group discussion	Written/ Viva voce		Pediatrics, General Medicine
PA35.2	Classify and describe the etiology, genetics, pathogenesis, pathology, presentation	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
					Microbiology						
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
MI1.8	Describe the mechanisms of immunity and response	K	KH	Y				Lecture	Written/ Viva voce		Pediatrics
MI1.9	Discuss the immunological basis of vaccines and describe	K	KH	Y				Lecture	Written/ Viva voce		Paediatrics

MI1.10	Describe the immunological mechanisms in immunological disorder	K	KH	Y				Lecture	Written/ Viva voce		Paediatrics
MI3.1	Enumerate the microbial agents causing diarrhea and dysentery. Describe the	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Paediatrics
MI3.2	Identify the common etiologic agents of diarrhea and dysentery	S	SH	Y				DOAP session	Skill assessment		General Medicine, Paediatrics
MI5.1	Describe the etiopathogenesis, clinical course and	K	KH	Y				Lecture	Written/ Viva voce		General Medicine, Paediatrics
MI5.2	Describe the etiopathogenesis, clinical course and	K	KH	Y				Lecture	Written/ Viva voce		General Medicine, Paediatrics
MI5.3	Identify the microbial agents causing meningitis	S	SH	Y				DOAP session	Skill assessment		General Medicine, Paediatrics
					Pharmacology						
PH1.12	Calculate the dosage of drugs using appropriate formulae for an individual patient,	K/S	SH	Y				Lecture, practical	Written/ Viva voce		Pediatrics, General Medicine
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
PH1.43	Describe and discuss the rational use of antimicrobials	K	KH	Y				Lecture	Written/ Viva voce		General Medicine Pediatrics
PH1.56	Describe basic aspects of Geriatric and Pediatric pharmacology	K	KH	Y				Lecture	Written/ Viva voce		Pediatrics

PH2.4	Demonstrate the correct method of calculation of drug dosage in patients	S	SH	Y				DOAP sessions	Skills assessment		Pharmacology, General Medicine
					Community Medicine						
CM3.3	Describe the aetiology and basis of water borne diseases /jaundice/hepatitis/	K	KH	Y				Lecture, Small group discussion, DOAP	Written/ Viva voce		Microbiology, General Medicine, Pediatrics
CM5.1	Describe the common sources of various nutrients and special nutritional	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics
CM5.2	Describe and demonstrate the correct method of performing a nutritional	S	SH	Y				DOAP session	Skill Assessment		General Medicine, Pediatrics
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM,	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics
CM5.4	Plan and recommend a suitable diet for the individuals and families based on local	S	SH	Y				DOAP session	Skill Assessment		General Medicine, Pediatrics
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
CM5.5	Describe the methods of nutritional surveillance, principles of nutritional education	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics
CM5.6	Enumerate and discuss the National Nutrition Policy, important national nutritional	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics

CM5.8	Describe and discuss the importance and methods of food	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
CM6.1	Formulate a research question for a study	K	KH	Y				Small group, Lecture	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics
CM6.2	Describe and discuss the principles and demonstrate the methods of collection,	S	SH	Y				Small group discussion, Lecture, DOAP	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics
CM6.3	Describe, discuss and demonstrate the application of elementary statistical	S	SH	Y				Small group discussion, Lecture, DOAP	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics
CM6.4	Enumerate, discuss and demonstrate common sampling techniques, simple	S	SH	Y				Small group discussion, Lecture, DOAP	Written/ Viva voce/ Skill Assessment		General Medicine, Pediatrics
CM8.1	Describe and discuss the epidemiological and control measures including the use of	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics
CM8.3	Enumerate and describe disease specific National	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics
CM8.4	Describe the principles and enumerate the measures to control a	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		General Medicine, Pediatrics
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
CM8.5	Describe and discuss the principles of planning, implementing and	K	KH	Y				Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility	S	SH	Y				Lecture, Small group discussion, DOAP	Skill assessment		Obstetrics & Gynaecology, Pediatrics

CM10.1	Describe the current status of Reproductive, maternal, newborn and Child Health	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics
CM10.2	Enumerate and describe the methods of screening high risk groups and common	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics
CM10.3	Describe local customs and practices during pregnancy, childbirth, lactation and child	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics
CM10.4	Describe the reproductive, maternal, newborn & child health (RMCH); child	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		Obstetrics & Gynaecology, Pediatrics
CM10.5	Describe Universal Immunization Program; Integrated Management of	K	KH	Y				Small group discussion, Lecture	Written/ Viva voce		Pediatrics
Forensic Medicine & Toxicology											
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

FM1.9	Describe the importance of documentation in medical practice in regard to medicolegal examinations, Medical Certificates and medicolegal reports especially – maintenance of patient case records, discharge summary, prescribed registers to	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Radiodiagnosis, General Surgery, General Medicine, Paediatrics
FM2.27	Define and discuss infanticide, foeticide and stillbirth	K	KH	Y				Lecture, Small group discussions	Written/ Viva voce		Pediatrics
FM2.28	Describe and discuss signs of intrauterine death, signs of live birth, viability of foetus, age	K	KH	Y				Lecture, Small group discussions, Autopsy, DOAP	Written/ Viva voce/ OSCE		Pediatrics, Human Anatomy
FM3.29	Describe and discuss child abuse and battered baby	K	K/KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
Dermatology, Venereology & Leprosy											
DR5.1	Describe the etiology, microbiology, pathogenesis, natural	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
DR5.2	Identify and differentiate scabies from other lesions	S	SH	Y				Bedside clinic	Skill assessment		Pediatrics
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

DR5.3	Enumerate and describe the pharmacology,	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
DR6.1	Describe the etiology, pathogenesis and diagnostic features of	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
DR6.2	Identify and differentiate	S	SH	Y				Bedside clinic	Skill assessment		Pediatrics
DR7.1	Describe the etiology, microbiology, pathogenesis, clinical	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
DR8.1	Describe the etiology, microbiology, pathogenesis, clinical presentations and	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
DR17.1	Enumerate and identify the cutaneous findings in vitamin A deficiency	K/S	SH	Y				Lecture, Small group discussion, Bedside	Skill assessment/ Viva voce		General Medicine, Pediatrics, Biochemistr
DR17.2	Enumerate and describe the various skin changes in Vitamin B complex	K	KH	Y				Lecture	Written/ Viva voce		General Medicine, Pediatrics, Biochemistr
DR17.3	Enumerate and describe the various changes in Vitamin C deficiency	K	KH	Y				Lecture	Written/ Viva voce		General Medicine, Pediatrics,
DR17.4	Enumerate and describe the various changes in Zinc deficiency	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		General Medicine, Pediatrics, Biochemistr
Anesthesiology											
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**

AS2.1	Enumerate the indications, describe the steps and demonstrate in a	S	SH	N				DOAP session	Skill assessment		General Medicine, Pediatrics
Psychiatry											
PS14.1	Enumerate and describe the magnitude and etiology of	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PS14.2	Enumerate, elicit, describe and document clinical features in patients with	S	SH	Y				Bedside clinic, DOAP session	Skill assessment		Pediatrics
PS14.3	Describe the treatment of stress related disorders including	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PS14.4	Demonstrate family education in a patient with psychiatric disorders occurring in	S	SH	Y				Bedside clinic, DOAP session	Skill assessment		Pediatrics
PS14.5	Enumerate and describe the pharmacologic basis and side effects of	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PS15.1	Describe the aetiology and magnitude of mental retardation	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PS15.2	Describe and discuss intelligence quotient and its measurement	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics
PS15.3	Elicit and document a history and clinical examination and	K/S	SH	Y				Bedside clinic, DOAP	Skill assessment		Pediatrics
PS15.4	Describe the psychosocial interventions and	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Pediatrics

Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
					General Medicine						
IM23.1	Discuss and describe the methods of nutritional assessment	K	KH	Y				Lecture, Small group discussions	Written/ Viva voce		Physiology, Biochemistry
IM23.2	Discuss and describe the causes and consequences of protein caloric	K	KH	Y				Lecture, Small group discussions	Written/ Viva voce		Physiology, Biochemistry
IM23.3	Discuss and describe the aetiology, causes, clinical manifestations, complications,	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry
IM23.4	Enumerate the indications for enteral and parenteral nutrition in critically ill patients	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry
					Obstetrics & Gynocology						
OG1.2	Define and discuss perinatal mortality and morbidity including	K	KH	Y				Lecture, Small group discussion	Short notes		Community Medicine
OG18.1	Describe and discuss the assessment of maturity of the newborn, diagnosis of	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		
OG18.2	Demonstrate the steps of neonatal resuscitation in a	S	SH	Y				DOAP session	Skill assessment		
OG18.3	Describe and discuss the diagnosis of birth asphyxia	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		

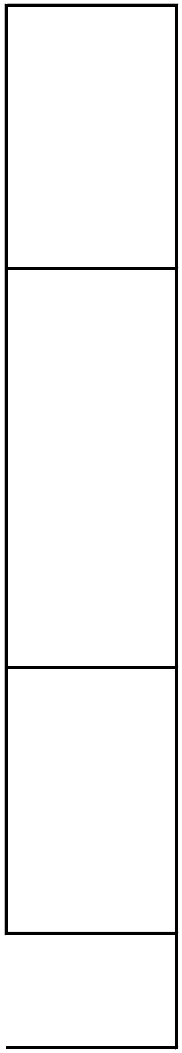
OG18.4	Describe the principles of resuscitation of the newborn and	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH / SH/P**	**Core Y/N**				**Suggested Teaching Learning methods**	**Suggested Assessment methods**	**Number required to certify P**	**Vertical Integration**
Physical Medicine & Rehabilitation											
PM3.1	Describe and discuss the clinical features, types, evaluation,	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		Human Anatomy
PM3.2	Recognize, describe and discuss the spectrum of multiple	K	KH	Y				Lecture, Small group discussion	Written/ Viva voce		
PM3.3	Recognize, describe and discuss the role of special education in	K	K	Y				Lecture, Small group discussion	Written/ Viva voce		
PM3.4	Demonstrate spasticity, rigidity and dystonia in children with cerebral palsy	S	SH	Y				DOAP session, Small group discussion	Skill assessment		
PM3.5	Enumerate the indications and describe the therapies for spasticity including	K	KH	Y				Lecture, Small group discussion			Pharmacology
PM3.6	Enumerate the indications and describe prevention of joint subluxations and	K	KH	Y				DOAP session, Small group discussion,			
PM3.7	Enumerate the first aid measures to be used in patients with seizures	K	K	Y				Lecture, Small group discussion	Written/ Viva voce		
.	and role of common modalities (moist heat, ultrasound, Short wave diathermy)							, discussion			

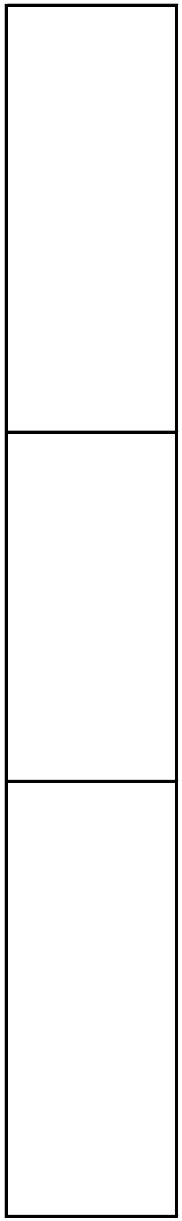
Horizontal Integration

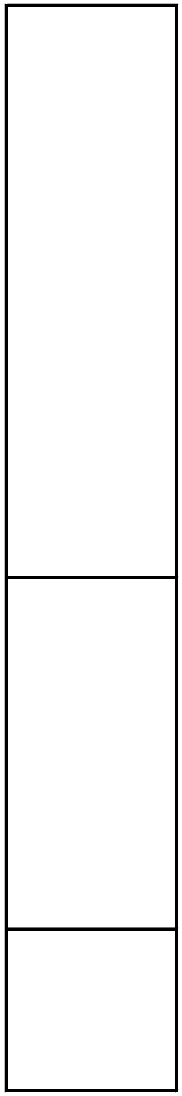
Psychiatry

Psychiatry
Psychiatry

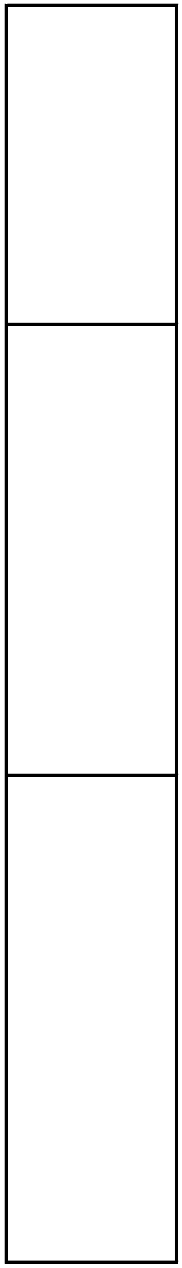
Horizontal Integration

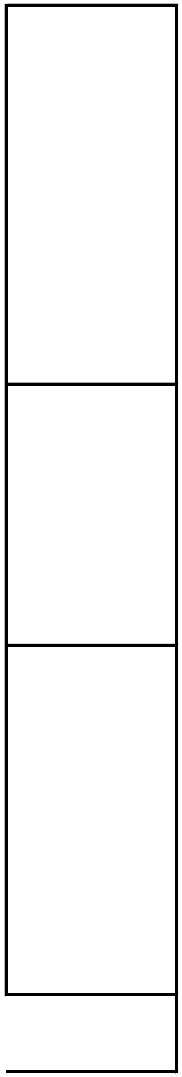






Physical Medicine & Rehabilitation
Horizontal Integration





Psychiatry

Horizontal Integration
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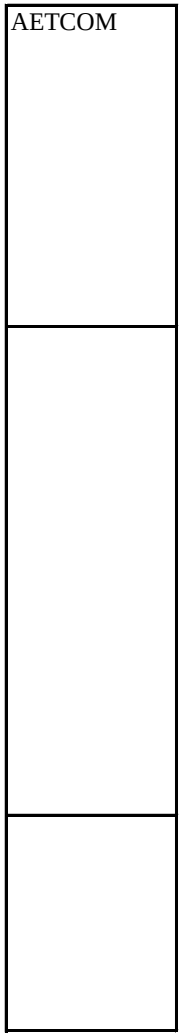
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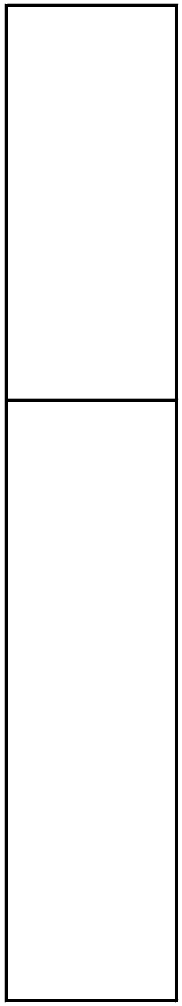

Psychiatry
Obstetrics & Gynaecology
Horizontal Integration

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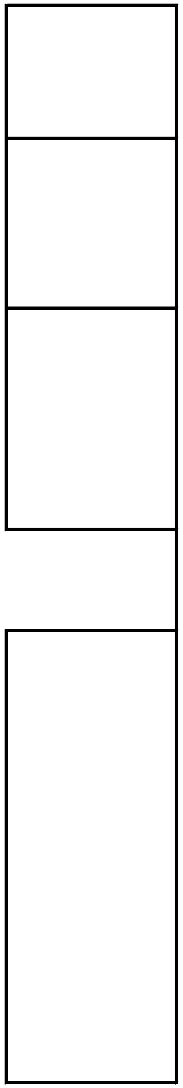
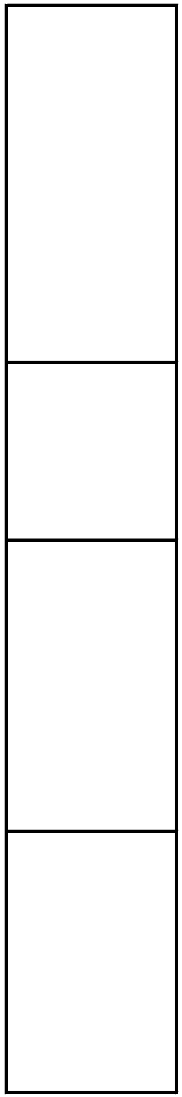
Horizontal Integration





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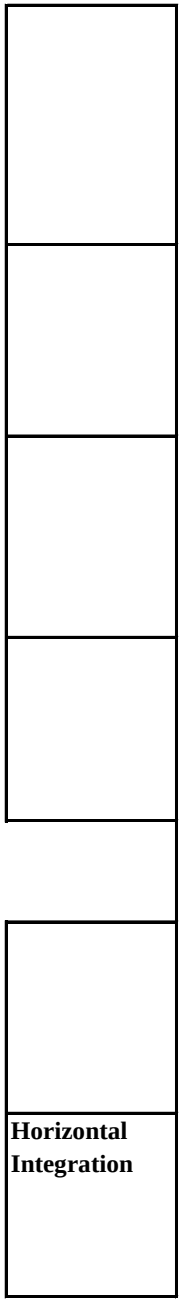
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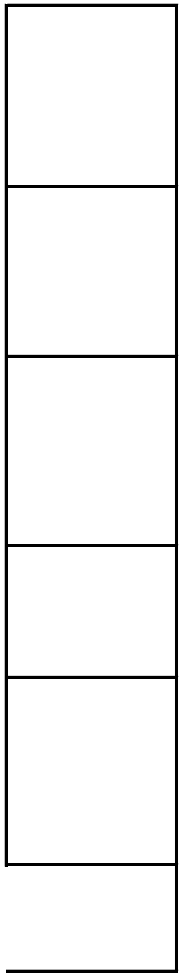

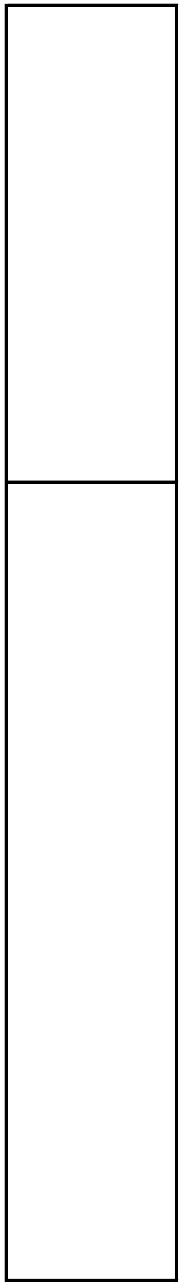

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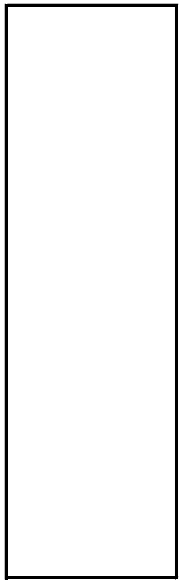

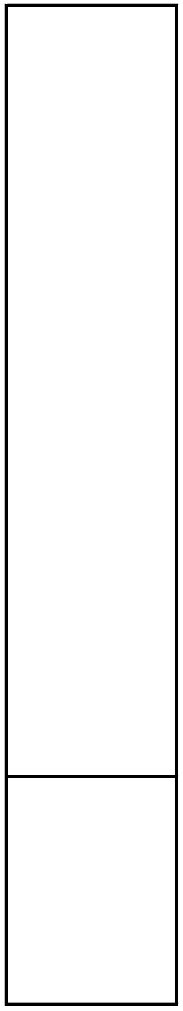

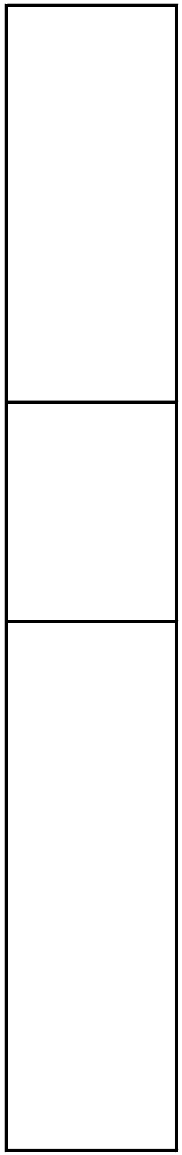

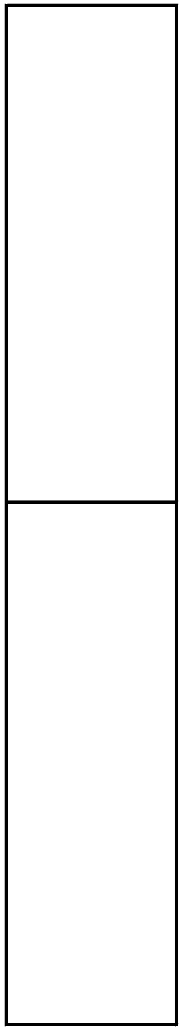

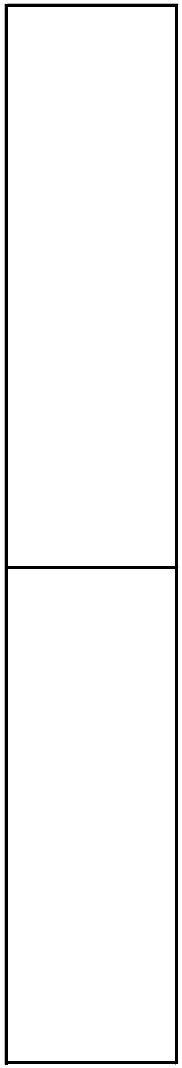

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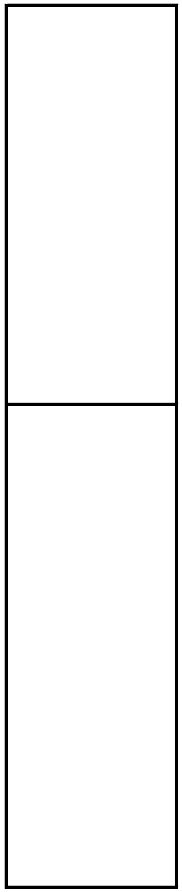

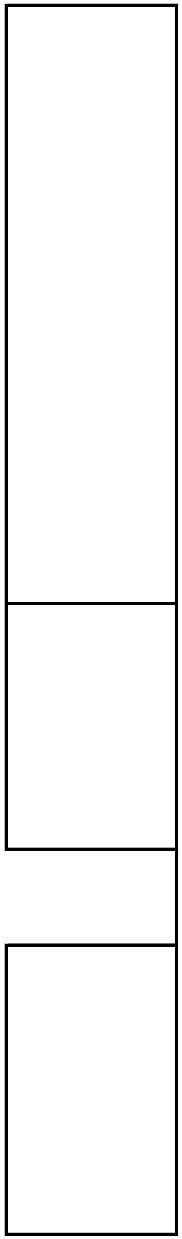

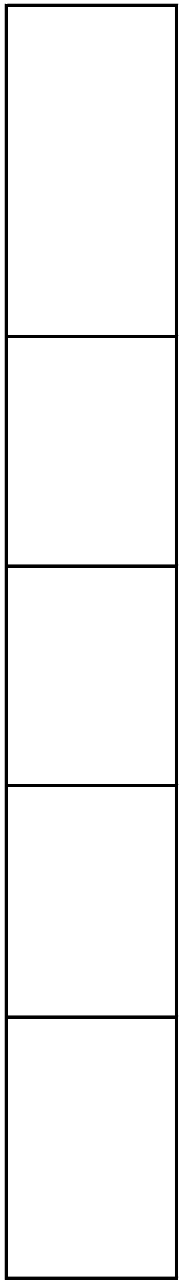

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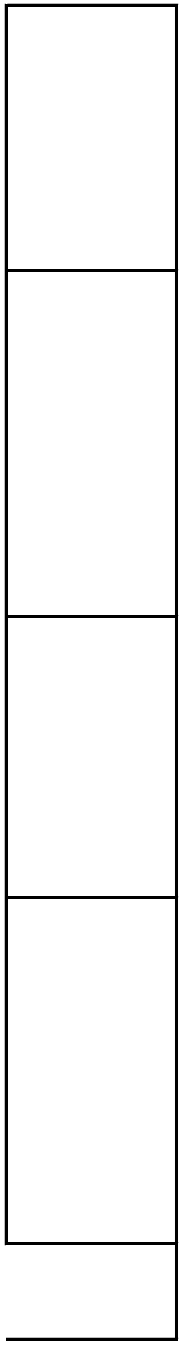
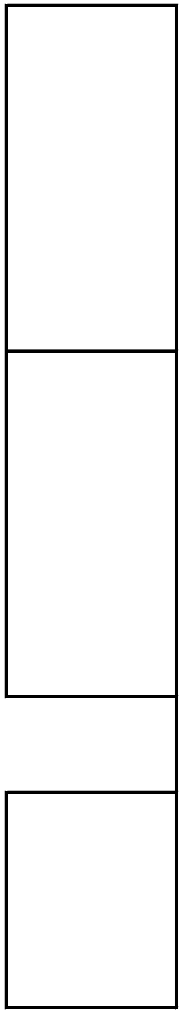
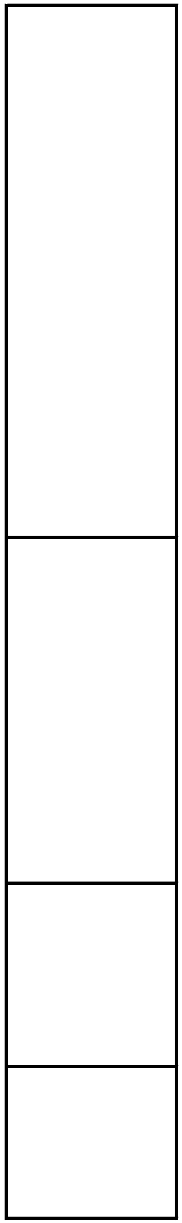


General Medicine
Horizontal Integration





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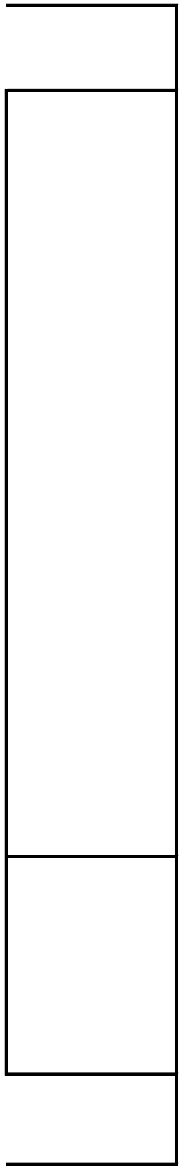

Obstetrics & Gynaecology
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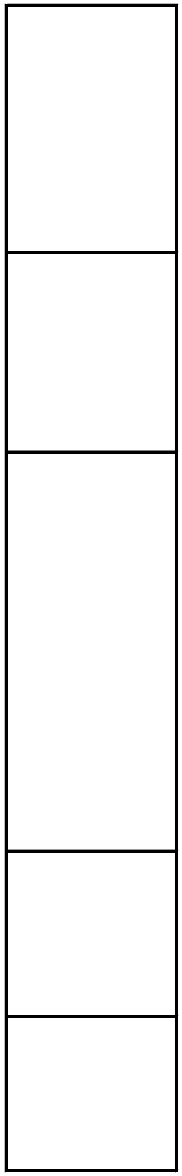
Horizontal Integration
Obstetrics & Gynaecology
Obstetrics & Gynaecology



Horizontal Integration
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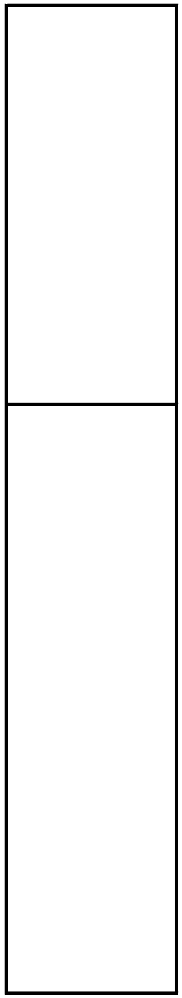
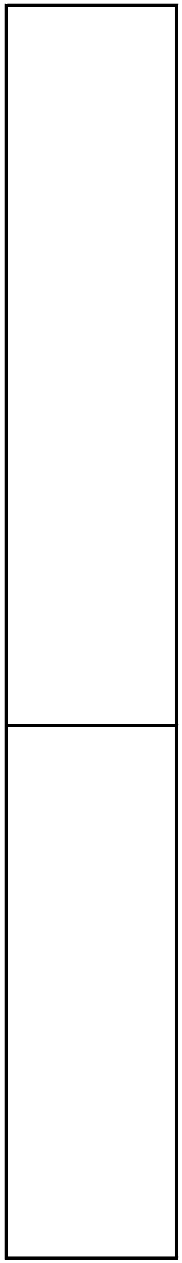
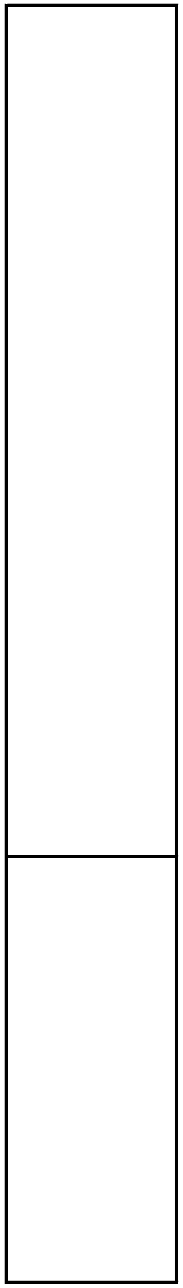
Horizontal Integration





Obstetrics &
Gynaecology



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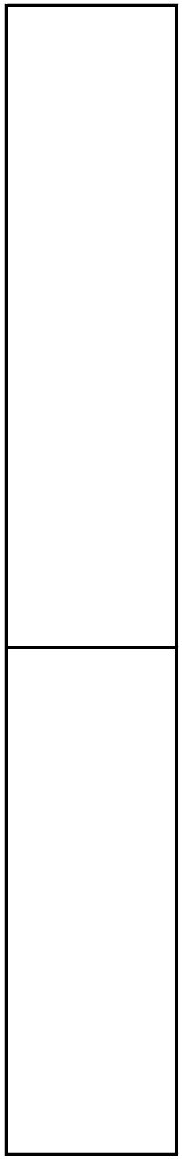

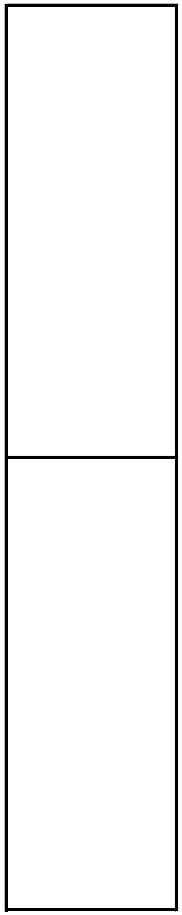

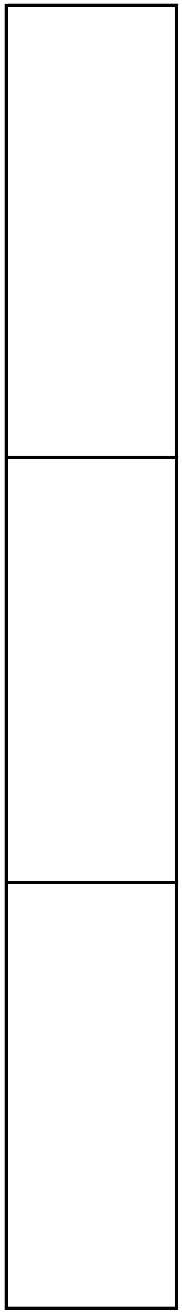

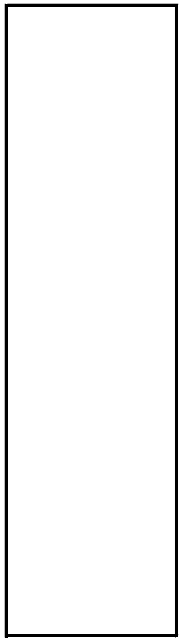

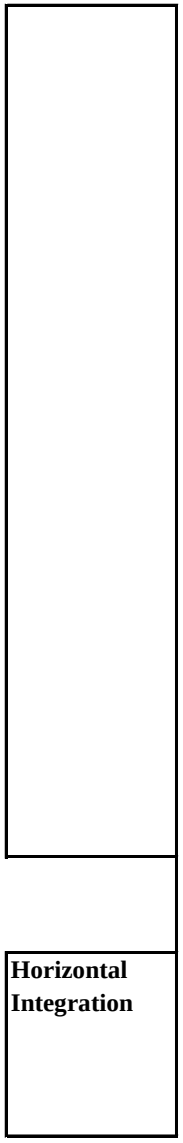
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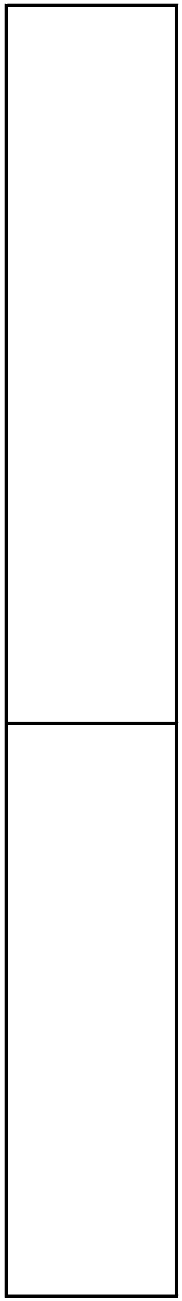
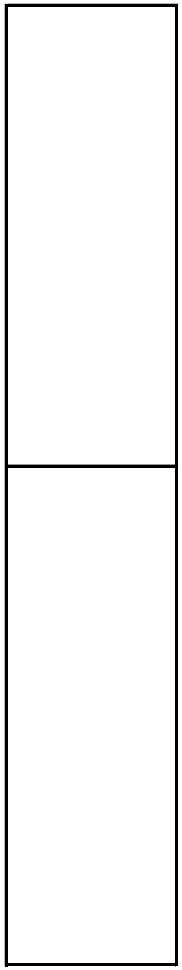
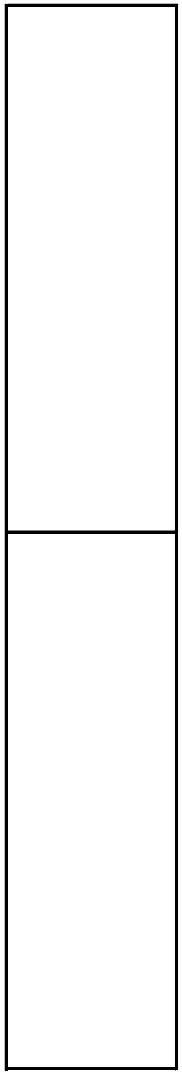


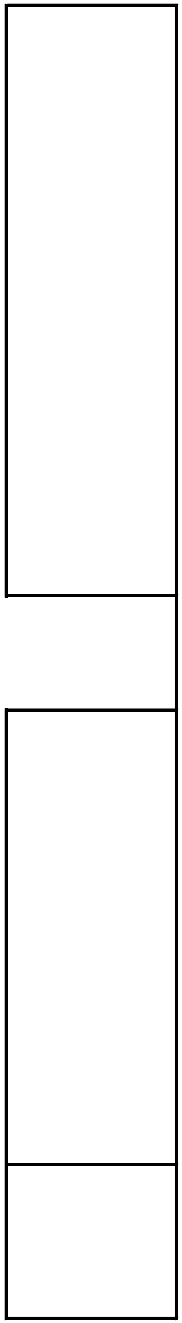


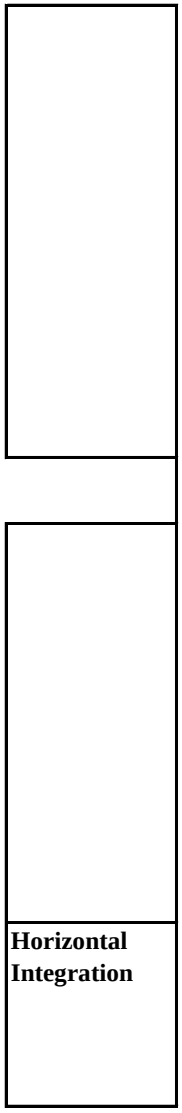


General
Surgery

Horizontal Integration

General Surgery

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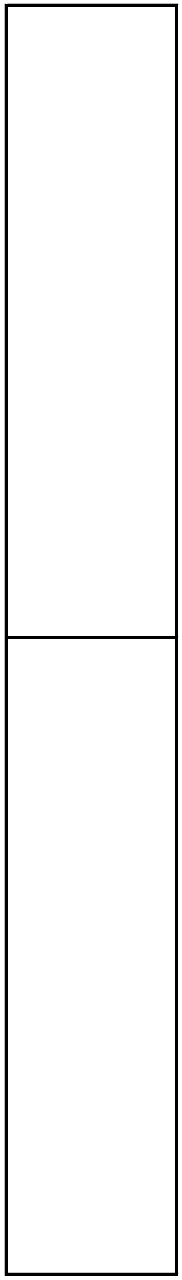

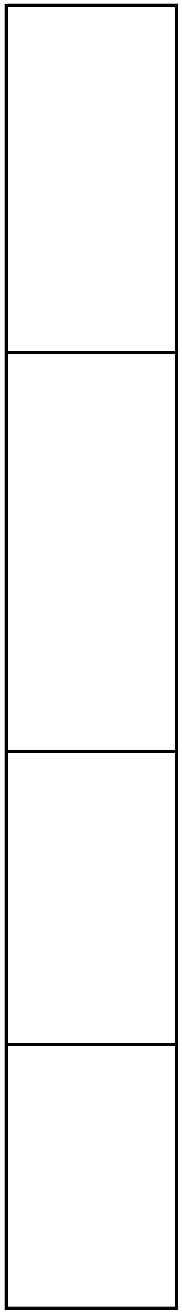

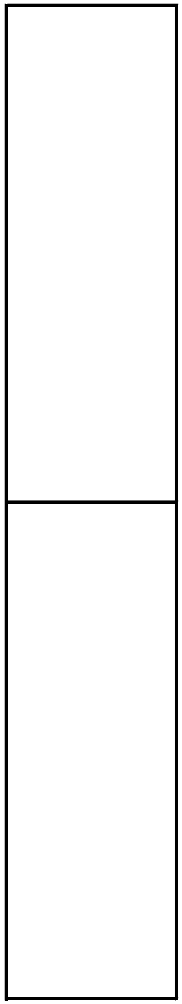

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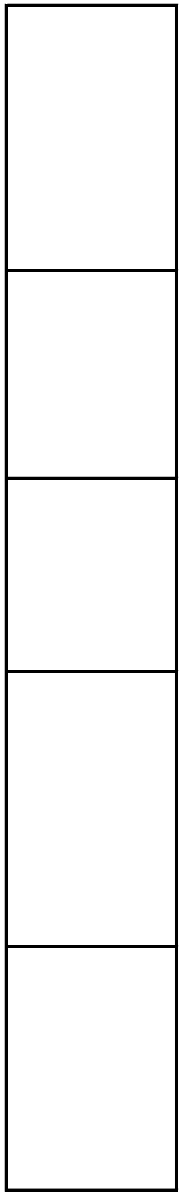

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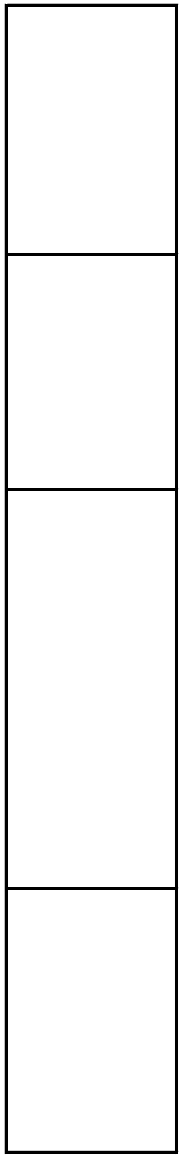

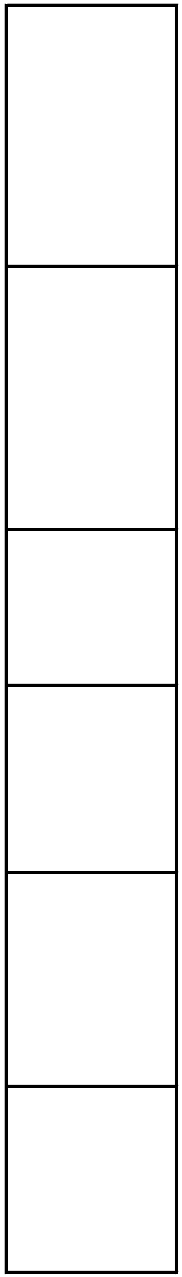

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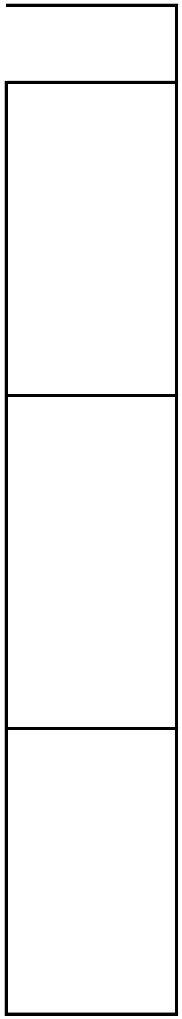

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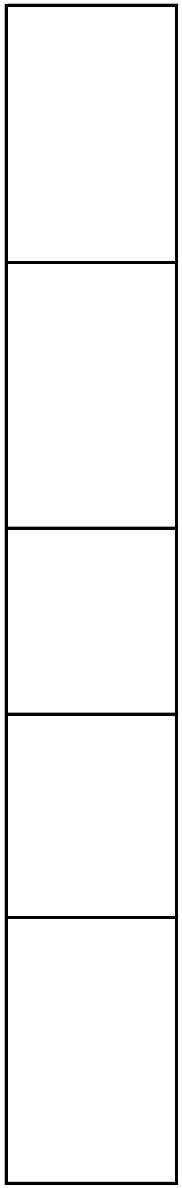
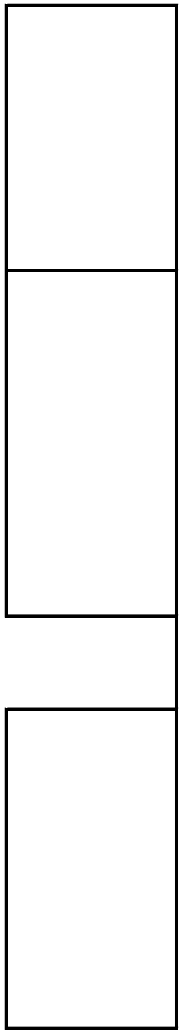
Horizontal Integration





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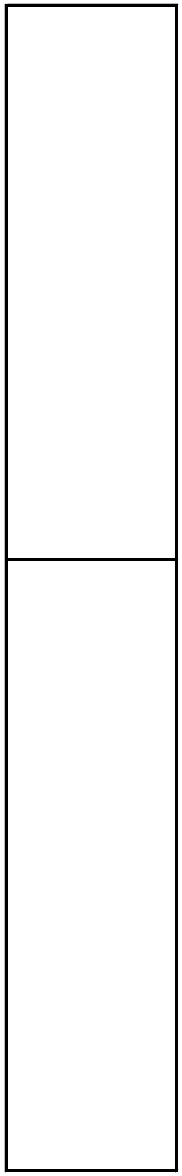
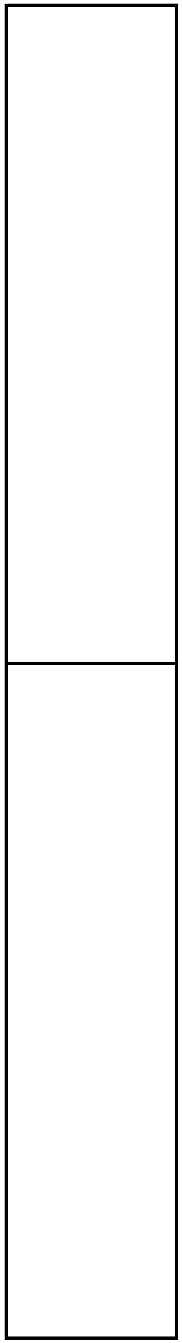
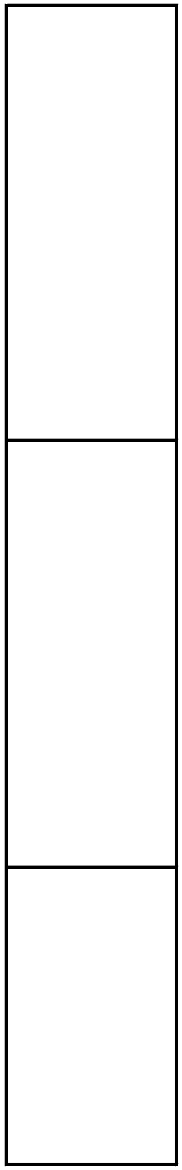
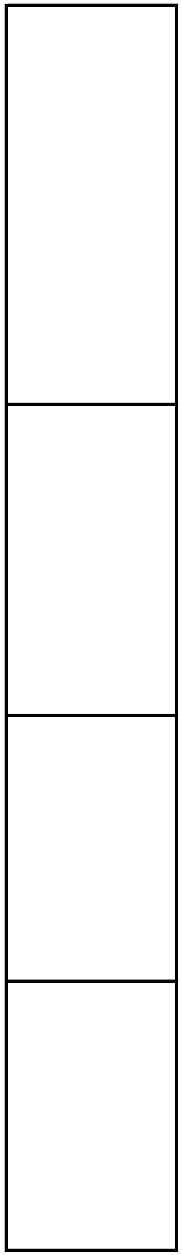
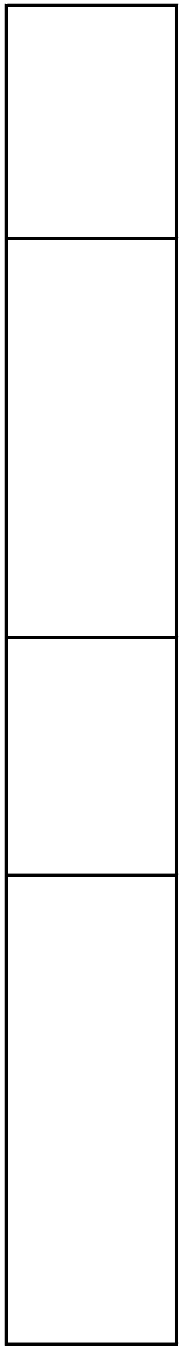


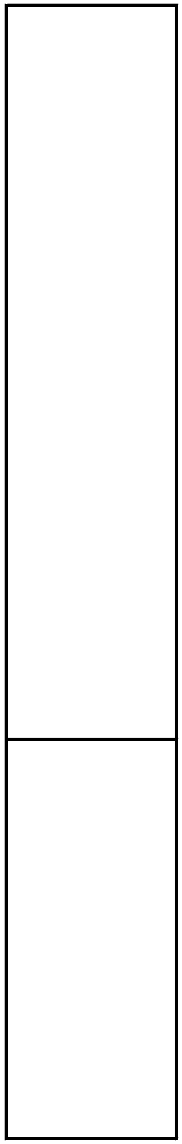






Horizontal Integration





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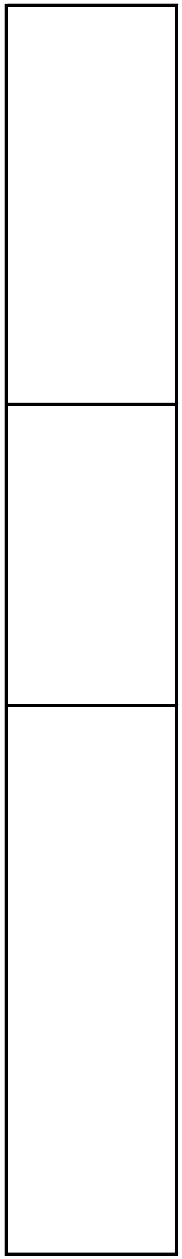

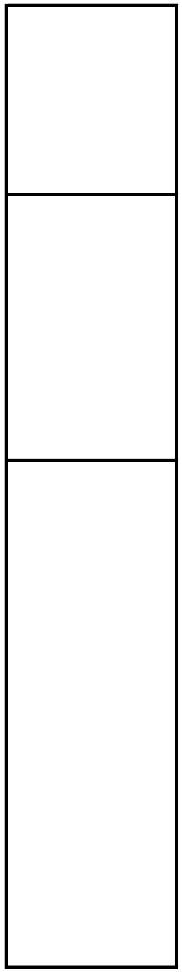

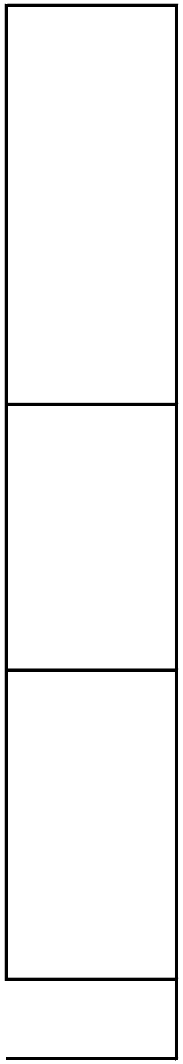

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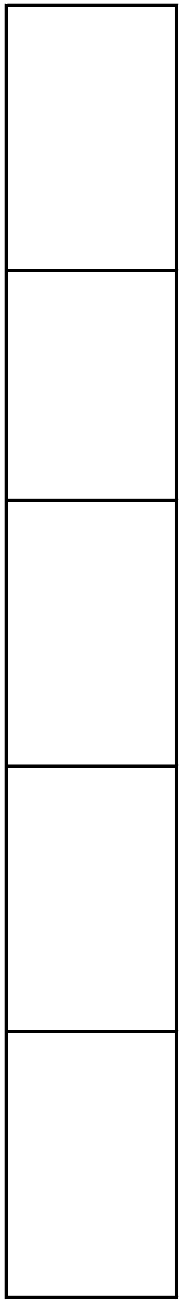

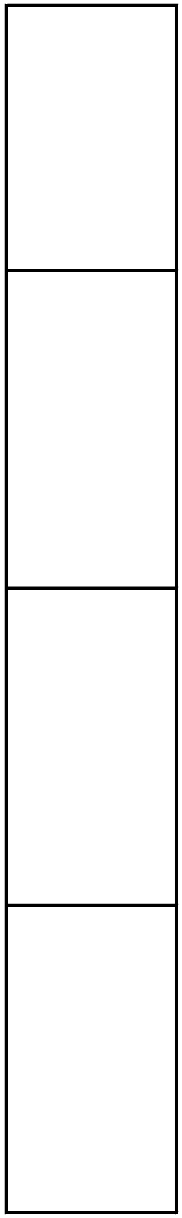

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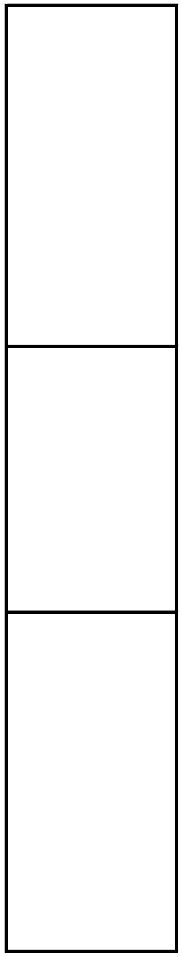

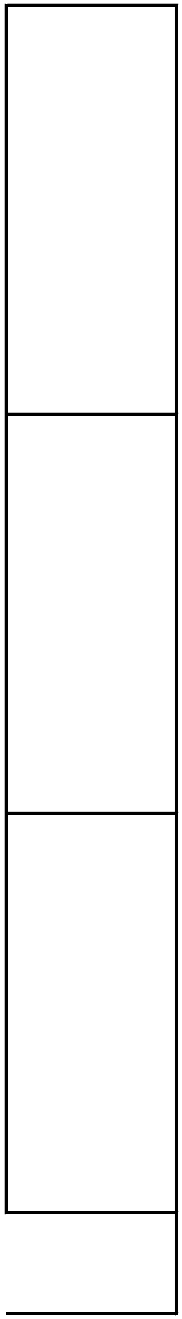

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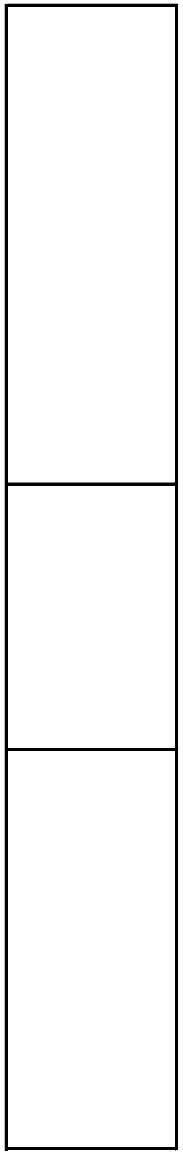

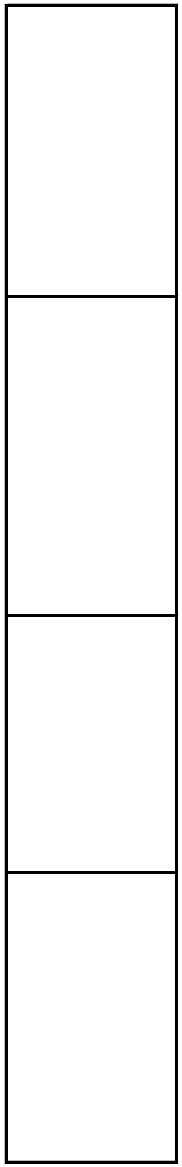

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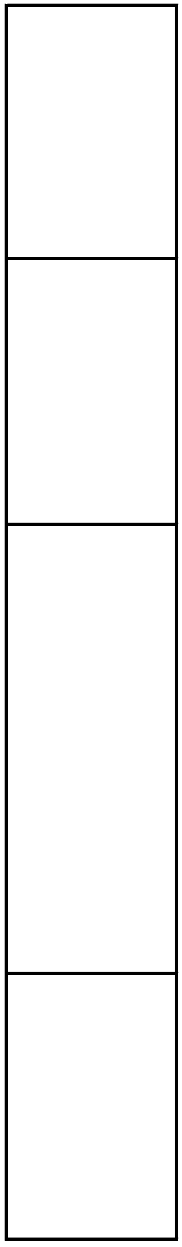

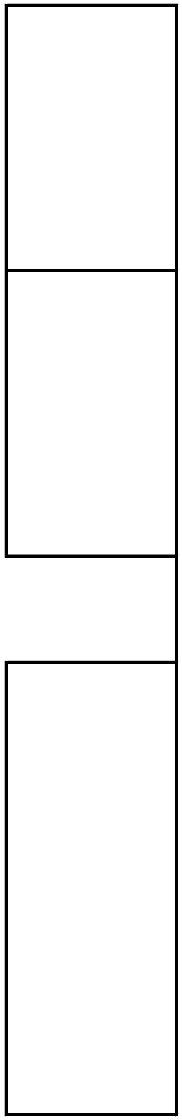

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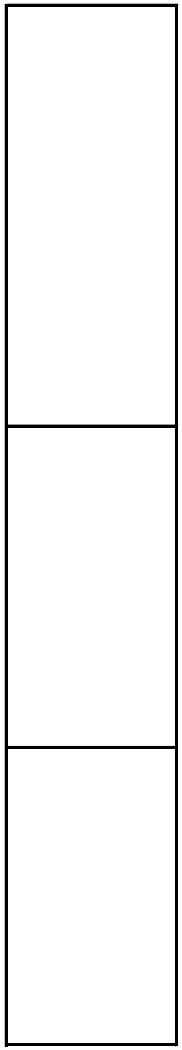

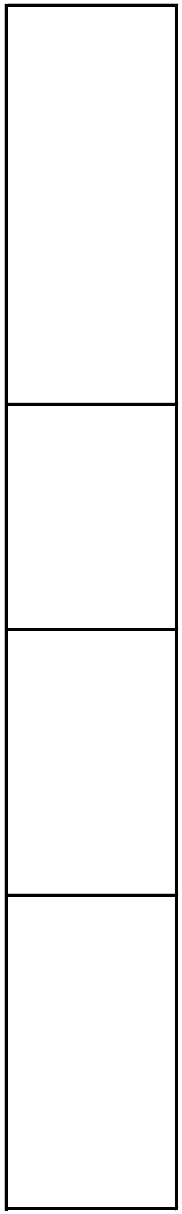

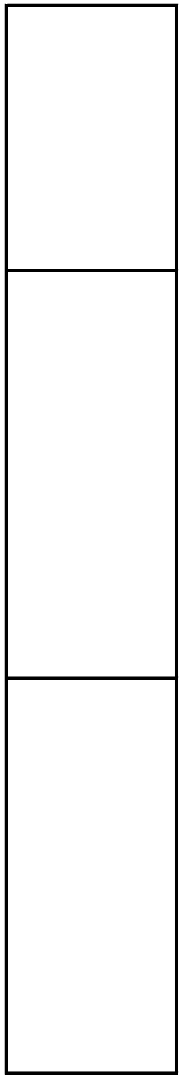

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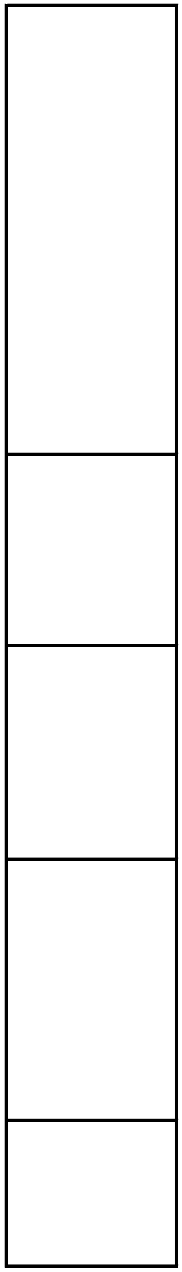

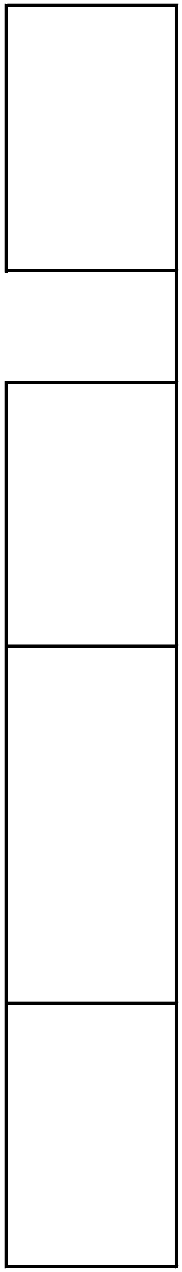

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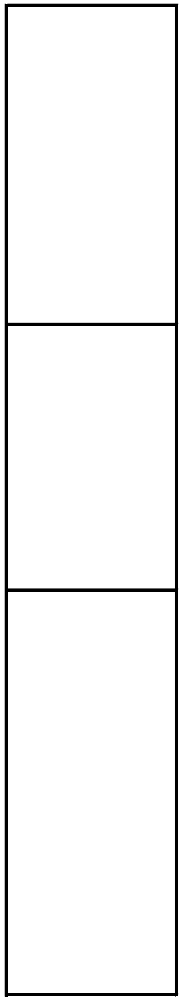
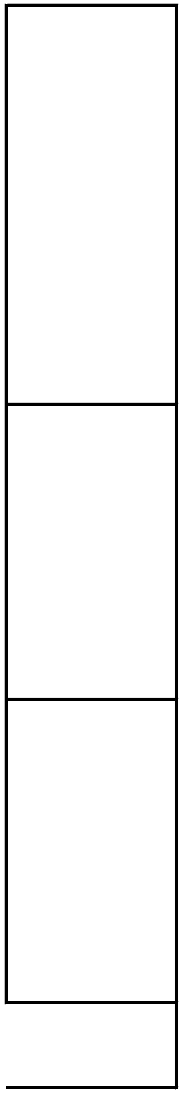
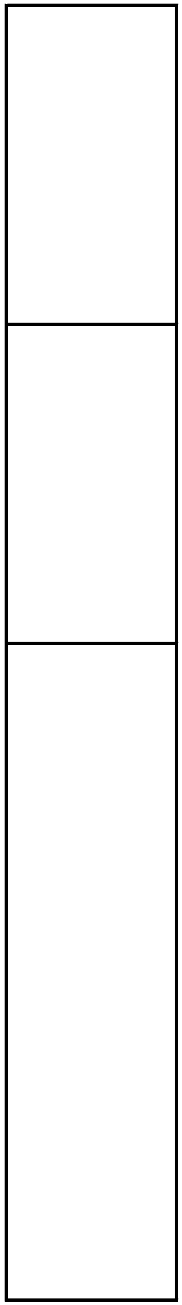


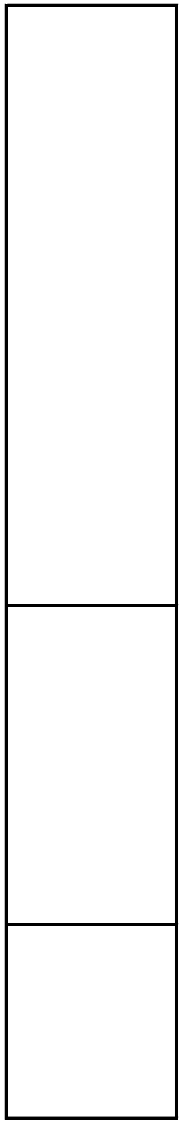


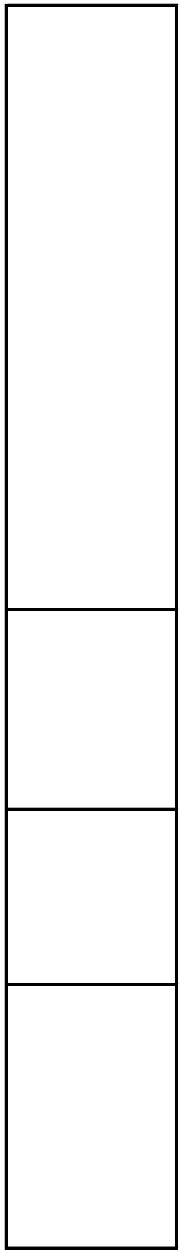
Horizontal Integration
General Medicine



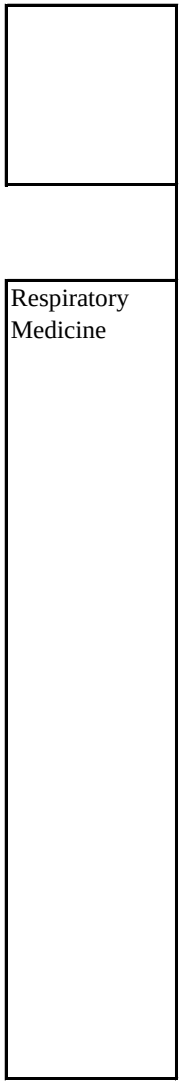
General Medicine, Obstetrics & Gynaecology

Horizontal Integration





Horizontal Integration

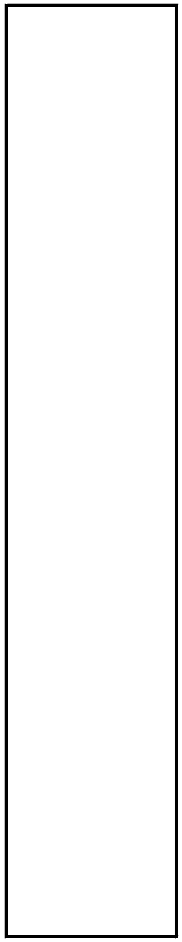

Respiratory
Medicine

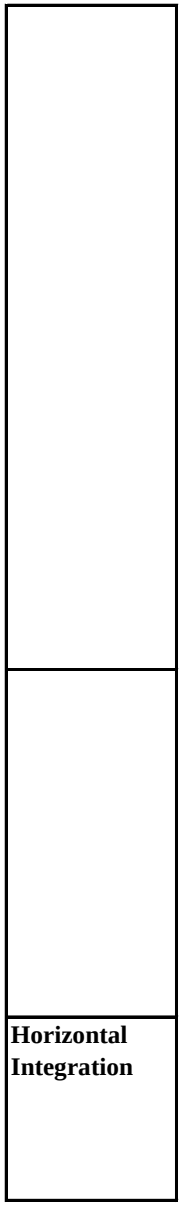
Respiratory Medicine
Respiratory Medicine

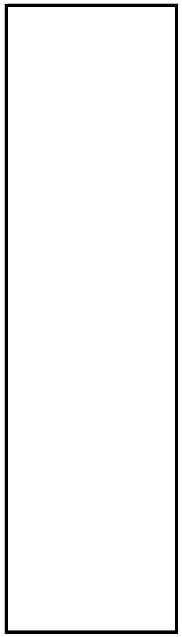
Respiratory Medicine
Respiratory Medicine
Respiratory Medicine
Respiratory Medicine

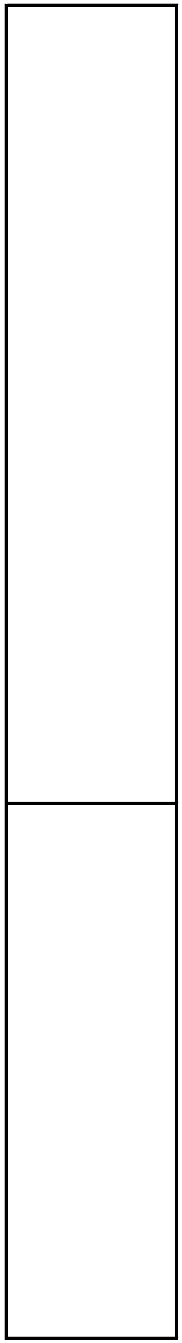
Respiratory Medicine
Horizontal Integration
Respiratory Medicine
Respiratory Medicine
Respiratory Medicine

Respiratory Medicine




Horizontal
Integration





endently,
Physiology
Horizontal Integration
Physiology
Physiology
Physiology

Horizontal Integration

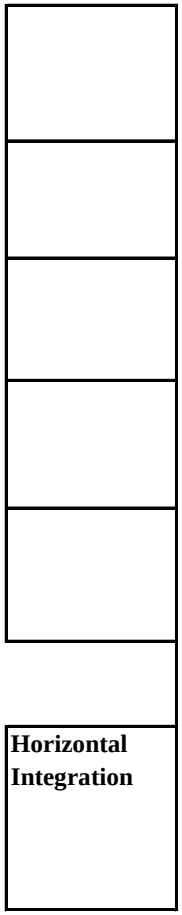
Horizontal Integration

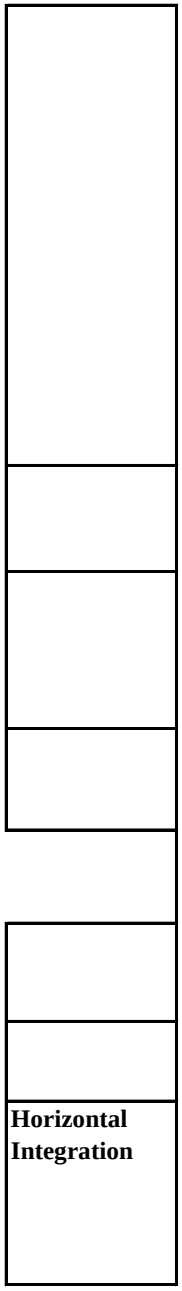
Horizontal Integration
Pathology

Pathology
Pathology
Pathology
Horizontal Integration
Microbiology

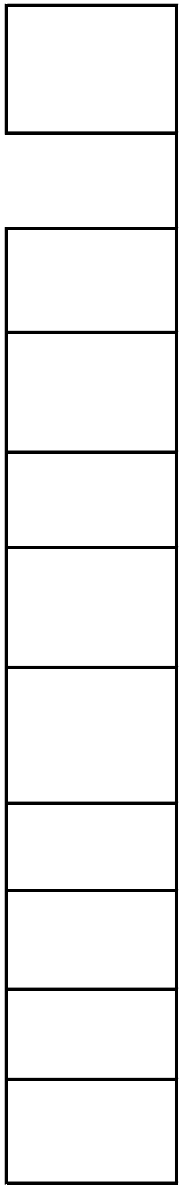
Horizontal Integration

Microbiology, Pathology
Horizontal Integration


Horizontal
Integration


Horizontal
Integration

Pharmacology
Microbiology
Microbiology
Microbiology
Horizontal Integration



Horizontal Integration
Pediatrics
Pediatrics
Pediatrics
Pediatrics
Pediatrics
Pediatrics
Pediatrics
Pediatrics

Pediatrics **20**
Horizontal Integration
Pediatrics
Pediatrics
Pediatrics
Pediatrics
Pediatrics, Orthopedics
Pediatrics
Pediatrics