

# **Timetable Template Year 2025-26 for Phase III Part I (Admission Batch 2023)**

|    | SUBJECT                        | COLOR CODE |
|----|--------------------------------|------------|
| 1. | Community Medicine             |            |
| 2. | Forensic Medicine & Toxicology |            |
| 3. | ENT                            |            |
| 4. | Ophthalmology                  |            |
| 5. | Medicine                       |            |
| 6. | Surgery                        |            |
| 7. | Obstetrics & Gynaecology       |            |
| 8. | Paediatrics                    |            |
| 9. | Orthopaedics                   |            |
| 10 | Holidays / Exams               |            |

| Linker    |                                 |
|-----------|---------------------------------|
| Cases     |                                 |
|           |                                 |
|           |                                 |
| Nesting   | VI means Vertical Integration   |
|           |                                 |
| Ob anim m |                                 |
| Sharing   | HI means Horizontal Integration |

Annual timetable
MBBS 2023 batch
Phase III part 1
Classes commence from 1st Sep 2025

University College of Medical Sciences and GTB Hospital, Delhi

Approved by the Curriculum Committee of UCMS and GTBH Delhi

Week 1

| Date          | 01/09/25   | 02/09/25  | 03/09/25   | 04/09/25   | 05/09/25    | 06/09/25   |
|---------------|--|---|--|--|-------------|--|
| Time Slot/Day | Monday   | Tuesday   | Wednesday  | Thursday   | Friday      | Saturday   |
| 9 am - 12 pm  |  |   | Clinical Po  | stings   |             |  |
| 12-1 pm       | LGT FMT FM 2.20, 2.21<br>Forensic Pathology- <i>Asphyxia –I</i>  | LGT CM<br>CM 2.5-poverty, social security,<br>relationship to health  | LGT FMT FM2.222.23Forensic pathology <i>Asphyxia -II</i>     | LGT Ophthal OP1.1,PY10.17, OP1.3 Physiology of Vision Assessment of Vision                               | EID-E-MILAD | LGT OBGY OG1.2 Perinatal Mortality and morbidity Horizontal integration - Community Medicine |
| 2-5 pm        | LGT Medicine (2 to 4) IM 26.1- Professional qualities of physician  LGT Ortho (4 to 5)  OR 2.1,2.2 Fracture of shoulder girdle | SGT Surgery SU7.1 Describe the planning and conduct of surgical audit | SGT Medicine IM 26.2, 26.6- Role of physician in health care | SGT Paeds Anomalies of Growth: Short stature, FTT, Abnormalities of head size and shape PE 2.1, 2.4, 2.6 | EID-E-MILAD |  |

| Date          | 08/09/25   | 09/09/25   | 10/09/25  | 11/09/25   | 12/09/25   | 13/09/25                                    |
|---------------|--|--|---|--|--|---|
| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday   | Friday   | Saturday                                    |
| 9 am - 12 pm  |  |  | Clinical  | Postings   |  |   |
| 12-1 pm       | LGT FMT FM2.222.23Forensic pathology <i>Asphyxia -III</i>  | LGT CM CM 4.1 health education with their advantages | LGT FMT FM 2.24 2.25 (VI<br>Surg) Forensic Pathology<br><b>Thermal Death</b> -I   | LGT Ophthal<br>OP1.2, 1.4<br>Refractive Errors<br>Refractive surgery | LGT ENT EN1.1 (VI Anatomy) AN40.1, AN40.2 AN40.3 Anatomy of Ear  | LGT OBGY<br>OG9.5<br>Hyperemesis Gravidarum |
| 2-5 pm        | LGT Medicine (2 to 4) IM 26.3- Role of maleficence  LGT Ortho (4 to 5) OR 2.4 Fracture shaft humerus | SGT OBGY<br>OG9.1<br>Abortion- Case scenario & Mx    | SGT FMT FM2.29, 2.30<br>Forensic Pathology<br>SGT FMT FM2.29, 2.30 (A)<br>Forensic Pathology<br>SGT FMT FM2.31,2.32 Forensic<br>Pathology | SGT Ortho<br>OR 11.1<br>Nerve injury                                 | SGT ENT  EN2.1, 2.2, 2.3, 2.4 2.8, 2.9, 3.1, 4.14, 4.15, 4.16, 4.17  (VI Physiology) PY10.15, 10.16  Clinical examination of ear and assessment of hearing |   |

| Date          | 15/09/25  | 16/09/25  | 17/09/25   | 18/09/25  | 19/09/25   | 20/09/25  |
|---------------|---|---|--|---|--|---|
| Time Slot/Day | Monday  | Tuesday   | Wednesday  | Thursday  | Friday   | Saturday  |
| 9 am - 12 pm  |   |   | Clinical   | Postings  |  |   |
| 12-1 pm       | LGT FMT FM 2.24 2.25 (VI<br>Surg) Forensic Pathology<br>Thermal Death-II  | LGT CM CM 4.2 Health education, promotion and counselling activities and Formative Assessment | LGT FMT FM 2.24 2.25 (VI<br>Surg) Forensic Pathology<br><b>Thermal Death</b> -III                                      | LGT Ophthal<br>OP 1.5<br>Strabismus & Amblyopia   | LGT ENT EN1.2, 2.1, 2.9, 4.3, 4.6,4.7, 4.10 PY 10.15, 10.16  Physiology of ear and assessment of vestibular function   | LGT OBGY OG9.4 Molar Pregnancy HORIZONTAL INTEGRATION- Radiodiagnosis |
| 2-5 pm        | LGT Medicine (2 to 4) IM 26.4- Role of autonomy  LGT Ortho (4 to 5) OR 2.3,2.4 Lateral condyle humerus fracture | SGT Surgery SU7.2  Describe the principles and steps of clinical research in General Surgery  | SGT Medicine IM 26.5, 26.7, 26.8, 26.9- Role of justice and beneficence and its medicolegal and socio-ethical aspects. | SGT Paeds Developmental delay and Red Alerts in Development including cerebral palsy PE 3.1, 3.2, 3.5, 3.6, 3.8, 30.10, 30.11 | SGT ENT  EN1.2, 2.1, 4.12, 2.9, 4.2, 2.4, 4.12, 4.13, 4.14, EN4.15  (VI Anatomy and HI Pediatrics) AN40.4, PE31.3  Hearing Loss (CHL+SNHL)+ Diseases of External Ear |   |

WEEK 4

| Date          | 22/09/25  | 23/09/25   | 24/09/25  | 25/09/25   | 26/09/25   | 27/09/25   |
|---------------|---|--|---|--|--|--|
| Time Slot/Day | Monday  | Tuesday  | Wednesday   | Thursday   | Friday   | Saturday   |
| 9 am - 12 pm  |   |  | Clinical  | Postings   |  |  |
| 12-1 pm       | SDL FMT FM2.18 Forensic Pathology  Regional injuries-I  | LGT CM CM 4.3 Evaluation of health promotion and activities and feedback of formative assessment | SDL FMT FM2.18 Forensic<br>Pathology<br><b>Regional injuries-II</b>   | LGT Ophthal OP 3.3, 3.4, 3.6, 3.7 Conjunctivitis, Trachoma,Pterygium & Symblephron | LGT ENT EN1.2, EN2.1, EN2.9 , EN 4.3 EN4.6, EN4.7, EN4.10  ASOM + CSOM (TTD) | LGT OBGY<br>OG12.2<br>Anemia in Pregnancy<br>Horizontal integration-<br>Medicine |
| 2-5 pm        | LGT Medicine (2 to 4) IM 26.10, 26.11, 26.12- Physician patient relationship, autonomy and its medicolegal and socio-ethical aspects.  LGT Ortho (4 to 5) OR 2.4 Fracture supracondylar humerus | SGT OBGY<br>OG9.3<br>Ectopic pregnancy- Case scenario<br>& Mx                                    | SGT FMT FM3.32 Clinical<br>Forensic Medicine<br>SGT FMT FM3.33 Clinical<br>Forensic Medicine<br>SGT FMT FM4.29 Medical<br>Jurisprudence (Medical Law and<br>ethics) | SGT Ortho OR 11.1 Nerve injuries upper limb OR 11.1 Nerve injuries lower limb      | SGT ENT EN 1.1, 1.2, 2.1, 2.8, 4.5 Eustachian tube and its disorders and OME |  |

| Date          | 29/09/25   | 30/09/25  | 01/10/25   | 02/10/25       | 03/10/25   | 04/10/25                                       |
|---------------|--|---|--|----------------|--|--|
| Time Slot/Day | Monday   | Tuesday   | Wednesday  | Thursday       | Friday   | Saturday                                       |
| 9 am - 12 pm  |  |   | Clinical   | Postings       |  |  |
| 12-1 pm       |  | LGT CM CM 9.7 Health statistics Sources of Vital statistics-census- SRS, NFHS, NSSO   | LGT FMT FM3.9, 3.10 (VI Surg,<br>Orth) Clinical Forensic<br>Medicine- <b>Firearms I</b>                              | GANDHI JAYANTI | LGT ENT EN 1.2, 2.2, 2.9, 4.6, 4.8, 4.11 CSOM (AAD)  | LGT OBGY OG10.1 APH(Placenta Previa, Abruptio) |
| 2-5 pm        | LGT Medicine (2 to 4) IM 26. 13, 26.14, 26.15- Decision making in emergency care and medicolegal and socio-ethical aspects in consent to surgical procedures  LGT Ortho (4 to 5) OR 2.5 Fracture both bone forearm | SGT Surgery SU8.1 Describe the principles of ethics as it pertains to General Surgery | SGT Medicine IM 26.16, 26.17, 26.18- issues of patient- physician relationship and physician- industry relationship. | GANDHI JAYANTI | SGT ENT EN 1.2, 2.1, 4.1, 4.19, 4.20, 4.21 Tinnitus, Vertigo and Otalgia And Meniere's disease |  |

| Date          | 06/10/25  | 07/10/25           | 08/10/25  | 09/10/25   | 10/10/25  | 11/10/25  |
|---------------|---|--------------------|---|--|---|---|
| Time Slot/Day | Monday  | Tuesday            | Wednesday   | Thursday   | Friday  | Saturday  |
| 9 am - 12 pm  |   |                    | Clinical  | Postings   |   |   |
| 12-1 pm       | LGT Surgery SU8.3 Discuss Medico-legal issues in surgical practice  | VALMIKI<br>JAYANTI | LGT FMT FM3.9, 3.10 (VI Surg,<br>Orth) Clinical Forensic<br>Medicine- <b>Firearms II</b>  | LGT Ophthal<br>OP 4.1,4.2,4.3<br>Corneal Ulcer, Keratitis and<br>corneal edema                   | LGT ENT EN1.2, EN2.1, EN2.9 Complications of CSOM   | LGT OBGY OG12.1 Hypertensive Disorders in Pregnancy (Gestational, chronic) Horizontal integration- Medicine |
| 2-5 pm        | LGT Medicine (2 to 4) IM 6.1, 6.2, 6.3- Acute HIV and opportunistic infections  VI- Microbiology  LGT Ortho (4 to 5) OR 2.5  Monteggia and Galleazzi fracture | VALMIKI<br>JAYANTI | SGT FMT FM14.16 Skills in<br>Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.17 Skills in<br>Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.22 Skills in Forensic<br>Medicine & Toxicology | SGT Paeds Fluid and Electrolytes Balance & Dyselectrolytemia – case-based approach PE 15.1, 15.2 | SGT ENT EN2.1,EN2.9,EN4.37, EN4.39, EN4.40, EN4.41  (VI Anatomy and HI Pediatrics) AN36.1, AN36.4, PE28.2, PE28.3  Tonsillitis and Head & Neck Space infections |   |

| Date          | 13/10/25   | 14/10/25   | 15/10/25  | 16/10/25   | 17/10/25  | 18/10/25  |
|---------------|--|--|---|--|---|---|
| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday   | Friday  | Saturday  |
| 9 am - 12 pm  |  |  | Clinical  | Postings   |   |   |
| 12-1 pm       | LGT Surgery SU9.1 Choose appropriate biochemical, microbiological, pathological, imaging investigations and interpret the investigative data in a surgical patient   | LGT CM CM 11.3 Occupational health hazards, their risk factors and preventive measures | LGT FMT<br>LGT FMT FM3.13, 3.14 (VI<br>OBGYN, Psy) Clinical Forensic<br>Medicine Sexual Offence | LGT Ophthal<br>OP 4.4<br>Dry Eye   | LGT ENT EN 1.1, 2.1, 4.18 Facial Nerve  | LGT OBGY OG12.1 Hypertensive Disorders in Pregnancy (Preeclampsia and eclampsia) Horizontal integration- Medicine |
| 2-5 pm        | LGT Medicine (2 to 4) IM 6.4, 6.5, 6.6- HIV pathophysiology and clinical features  VI- Pathology and Microbiology HI- Dermatology  LINKER CASE on HIV  LGT Ortho (4 to 5) OR 2.6  Fracture & complication of distal radius | SGT OBGY<br>OG 10.1,0G 10.2<br>APH- Case discussion &<br>Blood Transfusion             | SGT Medicine IM 6.16, 6.17, 6.18- Therapy in HIV  VI- Pharmacology and Pathology                | SGT Ortho OR 2.16 Open Fracture OR 2.15 Complications of fracture Linker case: Road traffic accident | SGT ENT EN2.9, EN4.31, EN4.37, EN4.48, EN4.49,  PE14.2, 28.8, 28.17  Emergencies in ENT and Trauma to Face & Neck |   |

| Date          | 20/10/25 | 21/10/25   | 22/10/25  | 23/10/25  | 24/10/25  | 25/10/25   |
|---------------|----------|--|---|---|---|--|
| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday  | Friday  | Saturday   |
| 9 am - 12 pm  |          |  | Clinical  | Postings  |   |  |
| 12-1 pm       | DIWALI   | LGT CM CM 11.4 Describe the principles of ergonomics in health preservation                          | LGT FMT FM3.15, 3.16 (VI<br>OBGYN, Psy) Clinical Forensic<br><b>Unatural Sexual Offences</b>  | LGT Ophthal OP 4.5, 4.6, 9.4 Corneal Blindness Keratoplasty NPCB-VI   | LGT ENT EN 1.2, 2.1, 4.13 Otosclerosis  | LGT OBGY OG12.3 Diabetes in pregnancy HORIZONTAL INTEGRATION- MEDICINE |
| 2-5 pm        | DIWALI   | SGT Surgery SU10.1 Describe the principles of perioperative management of common surgical procedures | SGT FMT FM14.20 Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM14.12 Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM14.14 (B) Skills in<br>Forensic Medicine & Toxicology | SGT Paeds Micronutrients in Health and Disease – ( Iron, Iodine, Calcium, Zinc and Magnesium) PE 13.1, 13.2, 13.6 – 13.8, 13.10 – 13.14 | SGT ENT  EN1.1,EN1.2, EN3.4,EN3.6,EN4.36, EN4.38, EN4.49,EN4.52  (VI Anatomy) AN39.2  Anatomy of Esophagus and Salivary gland + Evaluation of dysphagia |  |

| Date          | 27/10/25   | 28/10/25  | 29/10/25  | 30/10/25  | 31/10/25  | 01/11/25                                    |
|---------------|--|---|---|---|---|---|
| Time Slot/Day | Monday   | Tuesday   | Wednesday   | Thursday  | Friday  | Saturday                                    |
| 9 am - 12 pm  |  |   | Clinical  | Postings  |   |   |
| 12-1 pm       | LGT Surgery SU11.1 Describe principles of Preoperative assessment.   | LGT CM CM 11.2 Describe the role, benefits and functioning of the employee's state insurance scheme | LGT FMT FM3.17, 3.18 (VI<br>OBGYN, Psy) Clinical Forensic<br>Medicine <b>Sexual Perversions</b>                 |   | LGT ENT  EN2.8,EN2.15, EN4.12 ( VI Physiology HI Community Medicine, Medicine) PY10.16, CM3.1, IM24.17, CM3.1, IM24.17  Deaf Child and Rehabilitation | LGT OBGY<br>OG 11.1<br>Multiple pregnancies |
| 2-5 pm        | LGT Medicine (2-4) IM 20.8, 20.9- Scorpian envenomation  VI- Forensic medicine and Pharmacology  LGT Ortho (4-5) OR 3.1 Acute and chronic osteomyelitis Linker case:Leprosy, HIV | SGT OBGY<br>Og 12.1<br>Hypertension in Pregnancy-case<br>discussion                                 | SGT Medicine IM 20.1, 20.3, 20.7 Clinical features of Snake envenomation VI- Forensic medicine and Pharmacology | SGT Ortho  OR 3.2,3.3 Septic arthritis  LINKER CASE: HIV, LEPROSY | SGT CM CM 10.4 Reproductive, maternal, newborn, child and adolescent (RMNCH+A) programme  |   |

| Date          | 03/11/25   | 04/11/25  | 05/11/25            | 06/11/25   | 07/11/25   | 08/11/25  |
|---------------|--|---|---------------------|--|--|---|
| Time Slot/Day | Monday   | Tuesday   | Wednesday           | Thursday   | Friday   | Saturday  |
| 9 am - 12 pm  |  |   | Clinical            | Postings   |  |   |
| 12-1 pm       | LGT Surgery SU11.2  Enumerate the principles of general, regional, and loca Anesthesia.  | LGT CM<br>CM 10.1<br>Reproductive Maternal and<br>fChild Health                         | .GURU NANAK JAYANTI | LGT Ophthal OP 6.1,6.2,6.3, 6.8 Iridocyclitis and Investigations in uveal disorders Systemic diseases associated with iridocyclitis                                | LGT ENT EN1.1, EN2.1, EN 3.2 (VI Anatomy) AN37.1, AN37.2 Anatomy of nose and PNS | LGT OBGY OG13.1 Induction & Augmentation of Labour (Formative assessment and feedback |
| 2-5 pm        | LGT Medicine (2-4) IM 10.1- AKI v/S CKD VI- Pathology  LGT Ortho (4-5) OR 3.1,4.1 Osteoarticular TB  Linker Case: Tuberculosis | SGT Surgery SU11.4 Enumerate the indications and principles of day care General Surgery | GURU NANAK JAYANTI  | SGT Paeds Approach to a child with fever and Diagnosis & Management of childhood TB  PE 34.14 – 34.16, 34.19, 34.20  PE 34.1 – 34.4, 34.13  HI- Pulmonary medicine | SGT CM CM 14.2 Hospital Waste management in GTB Hospital                         |   |

| Date          | 10/11/25   | 11/11/25  | 12/11/25   | 13/11/25   | 14/011/25   | 15/11/25   |
|---------------|--|---|--|--|---|--|
| Time Slot/Day | Monday   | Tuesday   | Wednesday  | Thursday   | Friday  | Saturday   |
| 9 am - 12 pm  |  |   | Clinical   | Postings   |   |  |
| 12-1 pm       | LGT Surgery SU11.5 Describe principles of providing post-operative pain relief and management of chronic pain.   | LGT CM<br>CM 10.2<br>Reproductive maternal and<br>Child Health  | LGT FMT FM3.22 (VI OBGYN) Clinical Forensic Medicine Impotency And Sterility Artificial Insemination   | LGT Ophthal OP 7.1 Lens-Surgical anatomy and metabolism        | LGT Paeds  Principles of Growth in Children and Assessment of physical growth and monitoring  PE 1.1, 1.2   | LGT ENT EN3.2, EN2.1, PY10.13 (VI physiology) Physiology of Nose and PNS |
| 2-5 pm        | LGT Medicine (2-4) IM 10.2, 10.3, 10.4- Pathophysiology of CKD  VI- Pathology  LGT Ortho (4-5) OR 10.1  Benign tumours of bone- clinicoradiological features and managemen | SGT OBGY<br>OG 12.2<br>Anaemia in pregnancy- case<br>discussion | SGT FMT FM14.10 Skills in<br>Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.14(A) Skills<br>in Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.15 (B) Skills in<br>Forensic Medicine & Toxicology | OR 4.1 Tuberculosis of hip and spine Linker case: Tuberculosis | Tuber  SGT CM  CM 19.4 Demonstrate understanding of mechanism of identifying and calculation of requirements of various medicines and essential medicine at primary health care |  |

| Date          | 17/11/25   | 18/11/25  | 19/11/25   | 20/11/25   | 21/11/25   | 22/11/25   |
|---------------|--|---|--|--|--|--|
| Time Slot/Day | Monday   | Tuesday   | Wednesday  | Thursday   | Friday   | Saturday   |
| 9 am - 12 pm  |  |   | Clinical   | Postings   |  |  |
| 12-1 pm       | LGT Surgery SU11.6 Describe Principles of safe General Surgery   | LGT CM<br>CM 10.3, CM 10.4<br>Reproductive maternal and<br>Child Health                           | LGT FMT FM3.19, 3.20 (VI<br>OBGYN) Clinical Forensic<br><b>Medicine Pregnancy &amp; Delivery</b> | LGT Ophthal OP 7.2, 7.4 Cataract-Etiopathogenesis, maturation and complications Cataract surgery and its complications | LGT Paeds  Principles of Development and Normal Developmental milestones  PE 1.5, 1.6        | LGT ENT EN 3.2, EN4.22, EN4.23, N4.24, EN4.27, EN4.28, EN4.29, N 1.2 AN37.3, PE28.1, PE31.1 Nasal obstruction and Rhinitis |
| 2-5 pm        | LGT Medicine (2-4) IM 10.5, 10.6, 10.7, 10.8- Stages of CKD and its etiology VI- Pathology  LGT Ortho (4-5) OR 10.1 Malignant tumours of bone- clinicoradiological features and management | SGT Surgery SU12.1  Enumerate the causes and consequences of malnutrition in the surgical patient |  | SGT Paeds Immunization - National Immunization schedule PE 19.1 – 19.3   | SGT CM CM 20.4 Demonstrate awareness about laws pertaining to practice of community medicine |  |

| Date          | 24/11/25   | 25/11/25   | 26/11/25  | 27/11/25                                 | 28/11/25   | 29/11/25   |
|---------------|--|--|---|--|--|--|
| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday                                 | Friday   | Saturday   |
| 9 am - 12 pm  |  |  | Clinical  | Postings                                 |  |  |
| 12-1 pm       | LGT Surgery Missed Lecture   | LGT CM CM 10.5 Reproductive maternal and Child Health            | LGT FMT FM3.24,3.25,3.27 (VI<br>OBGYN) Clinical Forensic<br>Medicine <b>Abortion- 1</b>   |  | LGT Paeds Clinical presentation and multi- disciplinary approach in cerebral palsy PE 3.8 HI- Ortho/ENT/Ophtha/PMR                               | LGT ENT  EN 3.2, EN 4.22 EN4.33 AN37.3, PE28.1, PE31.1, AN37.3, PE28.1 (VI Anatomy HI pediatrics)  Sinusitis and complications |
| 2-5 pm        | LGT Medicine (2-4) IM 10.11- Risk factors of CAD in CKD and dialysis  VI- Pathology  LGT Ortho (4-5) OR 7.1 Rickets and Osteomalacia | SGT OBGY<br>OG 12.3<br>Diabetes in pregnancy- case<br>discussion | SGT FMT FM14.11 Skills in<br>Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.15 (A) Skills<br>in Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.13 (B) Skills in<br>Forensic Medicine & Toxicology | SGT Ortho  OR 2.15  Compartment syndrome | SGT CM  CM 1.6 Describe and discuss the concepts, the principles of Health promotion and Education, IEC and Behavioral change communication (BCC |  |

| Date                       | 01/12/25 | 02/12/25 | 03/12/25    | 04/12/25 | 05/12/25 | 06/12/25 |
|----------------------------|----------|----------|-------------|----------|----------|----------|
| Time Slot/Day              | Monday   | Tuesday  | Wednesday   | Thursday | Friday   | Saturday |
| 9 am - 12 pm               |          |          | Clinical I  | Postings |          |          |
| 12-1 pm                    |          |          |             |          |          |          |
| 2-5 pm<br>(Mondays 2-4 pm) |          |          | TERM TEST 1 |          |          |          |

| Date                       | 08/12/25 | 09/12/25 | 10/12/25  | 11/12/25 | 12/12/25 | 13/12/25 |
|----------------------------|----------|----------|-----------|----------|----------|----------|
| Time Slot/Day              | Monday   | Tuesday  | Wednesday | Thursday | Friday   | Saturday |
| 9 am - 12 pm               |          |          | Clinical  | Postings |          |          |
| 12-1 pm                    |          |          |           | VACATION |          |          |
| 2-5 pm<br>(Mondays 2-4 pm) | IERM     | TEST 1   |           | VACATIOI |          |          |

| Date          | 15/12/25 | 16/12/25 | 17/12/25   | 18/12/25  | 19/12/25   | 20/12/25   |
|---------------|----------|----------|--|---|--|--|
| Time Slot/Day | Monday   | Tuesday  | Wednesday  | Thursday  | Friday   | Saturday   |
| 9 am - 12 pm  |          |          | Clinical   | Postings  |  |  |
| 12-1 pm       | VAOA     | ATION!   | LGT FMT FM 3.28 (VI OBGYN)  Abortion- II   | LGT Ophthal OP 8.1 Vascular occlusions of retina, Etiopathogenesis & Management | LGT Paeds Behavioural Disorders in Children and ADHD & Autism PE 5.1 – 5.10, 4.1 - 4.5 | LGT ENT EN2.1, EN 4.22; EN4.25 AN37.3, PE28.1, PE31.1, AN37.3, PE28.1 (VI Anatomy, HI Pediatrics) Nasal Polyposis and management |
| 2-5 pm        | VACA     | ATION    | SGT Medicine IM 10.28, 10.29, 10.30, 10.31- Indication of renal replacement therapy. | SGT Paeds Follow up of High Risk / Normal Newborn PE 20.1-6                     | SGT CM  CM 8.4 Measures to control disease epidemic (Consider Dengue here)             |  |

| Date          | 22/12/25  | 23/12/25   | 24/12/25  | 25/12/25  | 26/12/25   | 27/12/25   |
|---------------|---|--|---|-----------|--|--|
| Time Slot/Day | Monday  | Tuesday  | Wednesday   | Thursday  | Friday   | Saturday   |
| 9 am - 12 pm  |   |  | Clinical  | Postings  |  |  |
| 12-1 pm       | LGT Surgery SU12.2 Describe and discuss the methods of estimation and replacement of the fluid and electrolyte requirements in the surgical patient | LGT CM<br>CM 10.6<br>Reproductive maternal and<br>Child Health   | LGT FMT FM3.23,3.26 (VI<br>OBGYN) Clinical Forensic<br>Medicine Surrogacy And<br>Disputed Paternity                       | CHRISTMAS | LGT Paeds Adolescence: Changes, Behaviour & Assessment PE 6.1 – 6.7, 6.10, 6.13 HI- Psychiatry | LGT ENT EN1.1, EN2.1, 2.9, 4.32, 4.26, 4.40, AN 36.2, 37.4, (VII Anatomy)  Nasopharynx: Adenoids, Angiofibroma |
| 2-5 pm        | LGT Medicine (2-4) IM 10.26- Management of CKD  LGT Ortho (4-5) OR 7.1 Osteoporosis- causes, clinical features & management                         | SGT Surgery SU12.2  Describe and discuss the methods of estimation and replacement of the fluid and electrolyte requirements in the surgical patient | SGT FMT FM 14.5, 14.21<br>Skills in Forensic Medicine &<br>SGT FM14.13 (A) Skills in<br>Forensic Medicine &<br>Toxicology | CHRISTMAS | SGT CM CM 9.5 Describe the methods of population control                                       |  |

| Date          | 29/12/25   | 30/12/25   | 31/12/25  | 01/01/26  | 02/01/26   | 03/01/26  |
|---------------|--|--|---|---|--|---|
| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday  | Friday   | Saturday  |
| 9 am - 12 pm  |  |  | Clinical  | Postings  |  |   |
| 12-1 pm       | LGT Surgery SU12.3 Discuss the nutritional requirements of surgical patients, the methods of providing nutritional support and their complications   | LGT CM<br>CM 10.7<br>Reproductive maternal and<br>Child Health         | LGT FMT FM2.27, 2.28 (VI<br>Peds) Forensic Pathology.<br>Infanticide-I                                    | LGT Ophthal OP 8.2, 8.4 Diabetic retinopathy, Hypertensive retinopathy and management | LGT Paeds IYCF Concepts, Breastfeeding: physiology & its role in child nutrition PE 7.1 – 7.4, 7.6 | LGT ENT EN2.1, 4.34, AN 37.2, 37.3 (VI Anatomy) Ca Nose & PNS |
| 2-5 pm        | LGT Medicine (2-4) IM 15.1, 15.2, 15.3- Etiology and management of Upper GI Bleed  VI- Pathology and physiology HI- General surgery  LGT Ortho(4-5) OR 12. Clubfoot/CTEV- pathoanatomy, clinical features and management | SGT OBGY OG11.1 Multiple pregnancies(MCMA, MCDA,DCDA)- case discussion | SGT Medicine IM 15.12- Indication of blood transfusion and mismatch BT  VI- pathology HI- General surgery | SGT Ortho OR 2.15 Malunion and non union  | SGT CM CM 7.4-7.8 Epidemiological indicators, methods  |   |

| Date          | 05/01/26   | 06/01/26   | 07/01/26   | 08/01/26   | 09/01/26  | 10/01/26                                 |
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| Time Slot/Day | Monday   | Tuesday  | Wednesday  | Thursday   | Friday  | Saturday                                 |
| 9 am - 12 pm  |  |  | Clinical   | Postings   |   |  |
| 12-1 pm       | LGT Surgery SU13.1 Describe the immunological basis of organ transplantation   | LGT CM<br>CM 10.8<br>Reproductive maternal and<br>Child Health   | LGT FMT FM2.28, 3.29 (VI<br>Anatomy, Peds) Forensic<br>Pathology & Clinical Forensic<br><b>Infanticide-II</b>  | LGT Ophthal Op 8.2, 8.4 Retinal Detachment types & various surgical management   | LGT Paeds Nutrition: Concept of balanced Diet & age-wise requirements and Complementary feeding PE 9.1 - 9.3 PE 8.1 – 8.3 | LGT OBGY OG16.3 Fetal growth restriction |
| 2-5 pm        | LGT Medicine  (2-4)  IM 15.11- Therapy of acute blood loss in upper GI Bleed  VI- Pathology HI- General surgery  Formative assessment-1  LGT Ortho  (4-5)  Formative Assessment and feedback | SGT Surgery SU13.2 Discuss the Principles of immunosuppressive therapy. Enumerate Indications, describe surgical principles, management of organ transplantation | SGT FMT FM 14.5,4.14, 4.15, 6.1,6.2,6.3 (B) Skills in Forensic Medicine & Toxicology & Forensic Laboratory investigation in medical legal practice  SGT FMT FM 3.8 (B) Clinical Forensic Medicine  SGT FMT FM 14.5, 4.14, 4.15, 6.1,6.2,6.3 (A) Skills in Forensic Medicine & Toxicology, Medical Jurisprudence (Medical Law and ethics) & Forensic Laboratory investigation in medical legal practice | SGT Paeds  Essential Newborn care including prevention & management of hypothermia and hypoglycemia  PE 20.1, 20.2, 20.9, 20.10, 20.12, 20.13, 20.20  Gestation assessment of a neonate PE 20.11 | SGT CM  CM 7.9 Describe and demonstrate the application of computers in epidemiology                                      |  |

| Date          | 12/01/26  | 13/01/26  | 14/01/26   | 15/01/26   | 16/01/26   | 17/01/26   |
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| Time Slot/Day | Monday  | Tuesday   | Wednesday  | Thursday   | Friday   | Saturday   |
| 9 am - 12 pm  |   |   | Clinical   | Postings   |  |  |
| 12-1 pm       | LGT Surgery SU13.3 Discuss the legal and ethical issues concerning organ donation | LGT CM<br>CM 10.9<br>Reproductive maternal and<br>Child Health<br>(Formative Assessment)                      | LGT FMT FM2.28, 3.29 (VI<br>Anatomy, Peds) Forensic<br>Pathology & Clinical Forensic<br><b>Infanticide-III</b>                   | LGT CM<br>CM 14.1, CM 14.3<br>Hospital Waste Management<br>(Feedback of FA)                      | LGT Paeds Vitamin deficiencies in children PE 12.1, 12.2, 12.5 – 12.7, 12.11 – 12.16, 12.19, 12.20                       | LGT OBGY<br>OG16.1, 26.2<br>Post partum hemorrhage |
| 2-5 pm        | SGT Ophthal   | SGT OBGY<br>OG12.7<br>HIV in Pregnancy (screening, risk<br>factors& management of mother<br>and baby)-Seminar | SGT Medicine IM 15.10, 15.14- Indication of endoscopy and role of Vasopressor in UGI Bleed  VI- Pharmacology HI- General surgery | SGT Paeds  Neonatal Jaundice  PE 20.19  Neonatal seizures including hypocalcemia PE 20.14, 20.15 | SGT CM  CM 3.4 Describe the concept of solid waste, human excreta and sewage disposal (Revision of models and specimens) |  |

| Date          | 19/01/26   | 20/01/26  | 21/01/26   | 22/01/26  | 23/01/26  | 24/01/26                                |
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| Time Slot/Day | Monday   | Tuesday   | Wednesday  | Thursday  | Friday  | Saturday                                |
| 9 am - 12 pm  |  |   | Clinical   | Postings  |   |   |
| 12-1 pm       | LGT Surgery SU14.2 Describe Surgical approaches, incisions and the use of appropriate instruments in Surgery in general. | LGT CM CM 8.1, 8.3 Epidemiology of communicable and non-communicable diseases-Tuberculosis VI Med, Peds  LINKER CASE - Tuberculosis | LGT FMT FM9.1, 9.2 (VI Pharma,<br>Med) Toxicology : <b>Corrosives &amp;</b><br><b>Phosphorus</b> | LGT CM CM 8.1, CM 8.3 Epidemiology of communicable and non-communicable diseases-Tuberculosis VI Med, Peds HI Micro, Path  LINKER CASE - Tuberculosis | LGT Paeds Malnutrition in children: Diagnosis, Classification & Management PE 10.1, 10.2, 10.6  | LGT OBGY<br>OG 19.1<br>Puerperal Sepsis |
| 2-5 pm        | SGT Ophthal OP 8.5 Diseases of Optic nerve and visual pathway  | SGT Surgery SU14.3 Describe the materials and methods used for surgical wound closure and anastomosis (sutures, knots and needles)  |  | SGT Paeds Perinatal infections PE 20.17   | SGT CM  CM 5.17 Ability to counsel mothers on breast feeding with focus on attachment to breast and correct position of the newborn  CM 5.18 Ability to counsel mothers on complementary feeding using National guidelines while being sensitive of cultural and socioeconomic influences |   |

| Date          | 26/01/26     | 27/01/26  | 28/01/26  | 29/01/26  | 30/01/26  | 31/01/26   |
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| Time Slot/Day | Monday       | Tuesday   | Wednesday   | Thursday  | Friday  | Saturday   |
| 9 am - 12 pm  |              |   | Clinical  | Postings  |   |  |
| 12-1 pm       | REPUBLIC DAY | LGT CM<br>CM 8.2, 8.3<br>Epidemiology of communicable<br>and non-communicable<br>diseases-Measles<br>VI Med, Peds | LGT FMT FM9.5, 9.6 (VI<br>Pharma, Med) <b>Agriculture</b><br><b>Poisons I</b>   | LGT CM CM 8.2, 8.3, 8.5 Epidemiology of communicable and non-communicable diseases-HIV VI Med, Peds HI Micro LINKER CASE - HIV  | LGT Paeds Vaccination in special situation (HIV, immunodeficiency, preterm, organ transplant, after blood products, splenectomized children, adolescent, travelers) PE 19.5 | LGT OBGY<br>OG 21.1<br>POP & Non Steroidal Contraceptives<br>HORIZONTAL-CM |
| 2-5 pm        | REPUBLIC DAY | SGT OBGY<br>OG12.6<br>Fetal growth restriction-<br>seminar  | SGT Medicine IM- 15.15, 15.16- Acid peptic disease and management with Indication of endoscopy  VI- Pharmacology and Microbiology HI- General Surgery | SDL Paeds  Vaccines beyond National immunization schedule, components of safe vaccine practice – Patient education/counseling; adverse events following immunization, safe injection practices, documentation, and medicolegal implications  Safe storage and handling of vaccines PE 19.5, 19.9, 19.15 | SGT CM  CM 5.19 Assess the nutritional content of processed foods learning to understand labels, and empower patients to make informed nutritional decisions                |  |

| Date          | 02/02/26  | 03/02/26  | 04/02/26  | 05/02/26   | 06/02/26   | 07/02/26  |
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| Time Slot/Day | Monday  | Tuesday   | Wednesday   | Thursday   | Friday   | Saturday  |
| 9 am - 12 pm  |   |   | Clinical  | Postings   |  |   |
| 12-1 pm       | LGT Surgery SU15.1 Describe classification of hospital waste and appropriate methods of disposal. | LGT CM CM 8.2, 8.3, 8.5 Epidemiology of communicable and non-communicable diseases-NCDs and NPNCD VI Med, Peds LINKER CASE - Diabetes | LGT FMT FM9.5, 9.6 (VI<br>Pharma, Med)<br><b>Agriculture Poisons II</b>   | LGT CM CM 8.2, 8.3, 8.5 Epidemiology of communicable and non-communicable diseases-NCDs and NPNCD VI Med, Peds  LINKER CASE - Diabetes | LGT Paeds<br>Malaria<br>PE 34.18   | LGT OBGY OG 21.1 Long Acting Reversible Contraceptives & Newer Contraceptives HORIZONTAL-CM |
| 2-5 pm        | SGT Ophthal PY10.18, AN 30.5 Lesions of Visual pathway and associated tumours                     | SGT Surgery SU17.2  Demonstrate the steps in Basic Life Support.  Transport of injured patient in a simulated environment             | SGT FMT FM 7.1 (B) Emerging technologies in Forensic Medicine  SGT FMT FM 14.19 Skills in Forensic Medicine & Toxicology  SGT FMT FM 7.1 (A) Emerging technologies in Forensic Medicine | SDL Ortho OR 1.5,13.1 Dislocation of joints  Linker case: Road traffic accident  | SGT CM  First Formative Assessment of SGT conducted till date during phase 3, part 1 |   |

| Date                       | 09/02/26   | 10/02/26  | 11/02/26  | 12/02/26  | 13/02/26  | 14/02/26   |
|----------------------------|--|---|---|---|---|--|
| Time Slot/Day              | Monday   | Tuesday   | Wednesday   | Thursday  | Friday  | Saturday   |
| 9 am - 12 pm               |  |   | Clinical  | Postings  |   |  |
| 12-1 pm                    | LGT Surgery SU17.3 Describe the Principles in management of mass casualties            | LGT CM CM 8.2, 8.3, 8.5 Epidemiology of communicable and non-communicable diseases-NCDs and NPNCD LINKER CASE VI Med, Peds HI Micro | LGT FMT<br>CNS Depressant   | LGT CM CM 8.2, 8.3, 8.5 Epidemiology of communicable and non-communicable diseases-NCDs and NPNCD LINKER CASE VI Med, Peds HI Micro | LGT Paeds Enteric fever PE 34.17  | LGT OBGY<br>0G21.1<br>Female sterlization<br>HORIZONTAL-CM |
| 2-5 pm<br>(Mondays 2-4 pm) | SGT Ophthal OP 9.5 Ocular trauma & its management Chemical Injury & ocular emergencies | SGT OBGY<br>OG13.2<br>Preterm Labor &<br>PROM-case discussion&<br>Mx  | SGT Medicine IM 8.1- Epidemiology,etiology and prevalence of HTN VI- Pathology and Physiology | SDL Paeds<br>National Health programs<br>PE 17.1, 17.2, 18.1-18.8<br>VI- Community Medicine   | SGT CM  CM 10.5 Assess the child age 2 months to 5 years as per IMNCI guidelines and classify |  |

| Date          | 16/02/26  | 17/02/26  | 18/02/26   | 19/02/26  | 20/02/26  | 21/02/26   |
|---------------|---|---|--|---|---|--|
| Time Slot/Day | Monday  | Tuesday   | Wednesday  | Thursday  | Friday  | Saturday   |
| 9 am - 12 pm  |   |   | Clinical   | Postings  |   |  |
| 12-1 pm       | LGT Surgery SU17.4 Describe Pathophysiology, mechanism of head injuries                                 | LGT CM CM 8.2, 8.3, 8.5 Epidemiology of communicable and non-communicable Diseases-blindness and NPCBVI VI Med, Peds HI Micro | LGT FMT Deliriant Poison   | LGT CM<br>CM 12.1-12.4<br>Geriatric Services                                    | LGT Paeds<br>Dengue Fever & Chikungunya<br>PE 34.18                                     | LGT OBGY<br>OG20.1<br>Second Trimester MTP<br>HORIZONTAL-COMMUNITY<br>MEDICINE |
| 2-5 pm        | SGT Ophthal OP 2.1, 4.7 Eyelid Anatomy and Common Abnormalities of Eyelid, Tarsorrhaphy & Lid surgeries | SGT Surgery SU17.5 Describe clinical features for neurological assessment and GCS in head injuries                            | SGT FMT FM 14.16 Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM 14.17 (B) Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM 14.17 (A) Skills in<br>Forensic Medicine & Toxicology | SDL Ortho OR14.1,14.2 Splintage of fractures Linker case: Road traffic accident | SGT CM  CM 9.2 Conduct Demographic Survey, compute and interpret Demographic indicators |  |

| Date          | 23/02/26  | 24/02/26   | 25/02/26   | 26/02/26   | 27/02/26  | 28/02/26                             |
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| Time Slot/Day | Monday  | Tuesday  | Wednesday  | Thursday   | Friday  | Saturday                             |
| 9 am - 12 pm  |   |  | Clinical   | Postings   |   |                                      |
| 12-1 pm       | LGT Surgery SU17.6 Chose appropriate investigations and discuss the principles of management of head injuries | LGT CM<br>CM 16.1, 16.2<br>Health planning and<br>management                     | LGT FMTSpinal & Peripheral<br>Nerve Poisons                                    | LGT CM<br>CM 16.3, 16.4<br>Health planning and<br>management                 | '[<br>LGT Paeds<br>Diphtheria, Pertussis, Tetanus<br>PE 34.16                                     | LGT OBGY<br>OG23.1<br>Normal Puberty |
| 2-5 pm        | SGT Ophthal<br>OP 2.4, 2.7<br>Orbital Cellulitis, Orbital<br>tumors   | SGT OBGY OG 34.4,33.3 D&C, EA-ECC, paps smear, VIA,VILI,cervical biopsy- Seminar | SGT Medicine<br>IM 8.2- Pathophysiology of HTN<br>VI- Pathology and Physiology | SDL Paeds Assessment of Breastfeeding & Special Situations PE 7.1 – 7.4, 7.6 | SGT CM  CM 2.3 Demonstrate the assessment of barriers to good health and health seeking behaviour |                                      |

| Date          | 02/03/26   | 03/03/26 | 04/03/26   | 05/03/26   | 06/03/26   | 07/03/26                               |
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| Time Slot/Day | Monday   | Tuesday  | Wednesday  | Thursday   | Friday   | Saturday                               |
| 9 am - 12 pm  |  |          | Clinical   | Postings   |  |  |
| 12-1 pm       | LGT Surgery SU17.7  Describe the clinical features of soft tissue injuries and discuss the principles of management. | HOLI     | LGT FMT FM9.3 (VI Pharma,<br>Med) Toxicology:<br><b>Metallic Poison-I</b>  | LGT CM<br>CM 17.1, 17.2<br>Health care of the community                                | LGT Paeds Mumps, Measles and Rubella, Chickenpox PE 34.15  | LGT OBGY<br>OG23.1<br>Abnormal Puberty |
| 2-5 pm        | SGT Ophthal OP 2.5, 2.6 Differential diagnosis of Proptosis, Thyroid eye disease, Cavernous sinus thrombosis         | HOLI     | SGT FMT 14.2,14.18 Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM 14.15 (B) Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM 14.15 (A) Skills in<br>Forensic Medicine & Toxicology | SDL Orth APPROACH FOR ASSESSMENT OF TRAUMA PATIENT  LINKER CASE: ROAD TRAFFIC ACCIDENT | SGT CM  CM 5.2 Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method |  |

| Date          | 09/03/26   | 10/03/26   | 11/03/26  | 12/03/26  | 13/03/26  | 14/03/26                               |
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| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday  | Friday  | Saturday                               |
| 9 am - 12 pm  |  |  | Clinical  | Postings  |   |  |
| 12-1 pm       | LGT Surgery SU17.8 Describe the pathophysiology of chest injuries.   | LGT CM<br>CM 17.3, 17.4<br>Health care of the community  | LGT FMTLGT FMT FM9.3 (VI<br>Pharma, Med) Toxicology:<br><b>Metallic Poison-II</b>         | LGT CM<br>CM 17.5<br>Health care of the community | LGT Paeds<br>HIV in children<br>PE 19.5                 | LGT OBGY<br>OG 22<br>Vaginal Discharge |
| 2-5 pm        | SGT FMT FM 14.4 Skills in Forensic Medicine & Toxicology  SGT FMT FM 14.14 Skills in Forensic Medicine & Toxicology  SGT FMT FM 14.12 (B) Skills in Forensic Medicine & Toxicology | SGT Surgery SU17.9  Describe the clinical features and principles of management of chest injuries. | SGT Medicine<br>IM 8.3, 8.4- Classification of HTN<br>and genetic basis.<br>VI- Pathology | SDL FMT FM 2.18<br>forensic pathology             | SGT CM CM 6.1 Formulate a research question for a study |  |

| Date          | 16/03/26  | 17/03/26  | 18/03/26   | 19/03/26  | 20/03/26  | 21/03/26    |
|---------------|---|---|--|---|---|-------------|
| Time Slot/Day | Monday  | Tuesday   | Wednesday  | Thursday  | Friday  | Saturday    |
| 9 am - 12 pm  |   |   | Clinical   | Postings  |   |             |
| 12-1 pm       | LGT Surgery SU16.1 Minimally invasive General Surgery: Describe indications advantages and disadvantages of Minimally invasive General Surgery  | LGT CM<br>CM 19.1-19.3<br>Essential Medicine  | LGT FMT FM9.3 (VI Pharma, Med)<br>Toxicology:<br><b>Metallic Poison-III</b>  | LGT CM CM 20.1, 20.2 Recent advances in community medicine      | LGT Paeds<br>Intestinal Parasites<br>PE 34.19, 34.20  | EID-UL-FITR |
| 2-5 pm        | SGT FMT FM 14.5, 14.3 Skills in Forensic Medicine & Toxicology  SGT FMT FM 14.9 Skills in Forensic Medicine & Toxicology  SGT FMT FM 14.6. 14.17 Skills in Forensic Medicine & Toxicology | SGT OBGY OG 22.2 Vaginal Discharge ( mx of common causes and syndromic approach)- Seminar | SGT FMT FM 14.13 Skills in Forensic Medicine & Toxicology  SGT FMT FM 14.5 Skills in Forensic Medicine & Toxicology  SGT FMT FM 14.4, 14.11 Skills in Forensic Medicine & Toxicology | SDL FM2.26,3.21 Forensic Pathology & Clinical Forensic Medicine | SGT CM  CM 6.2 Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data | EID-UL-FITR |

| Date                       | 23/03/26  | 24/03/26  | 25/03/26   | 26/03/26                                       | 27/03/26  | 28/03/26  |
|----------------------------|---|---|--|--|-----------|---|
| Time Slot/Day              | Monday  | Tuesday   | Wednesday  | Thursday                                       | Friday    | Saturday  |
| 9 am - 12 pm               |   |   | Clinical   | Postings                                       |           |   |
| 12-1 pm                    | LGT Surgery SU18.1 Describe the pathogenesis, clinical features and management of various cutaneous and subcutaneous infections.          | LGT CM CM 20.3, 20.4 Recent advances in community medicine  | LGT FMT FM9.4 (VI Pharma, Med)<br>Toxicology<br>Ethyl & Methyl Alcohol -I                | LGT CM<br>CM 13.1-13.4<br>Disaster management  | RAM NAVMI | LGT OBGY<br>OG 24.1<br>Abnormal Uterine Bleeding<br>(Fibroid) |
| 2-5 pm<br>(Mondays 2-4 pm) | SGT FMT FM2.29, 2.30 Forensic<br>Pathology<br>SGT FMT FM2.29, 2.30 (A)<br>Forensic Pathology<br>SGT FMT FM2.31,2.32 Forensic<br>Pathology | SGT Surgery SU18.2  Classify skin tumors. Differentiate different skin tumors and discuss their management. | SGT Medicine IM 8.5- Difference between Primary and secondary hypertension VI- Pathology | SDL FMTFM9.4 (VI<br>Pharma, Med)<br>Toxicology | RAM NAVMI |   |

| Date          | 30/03/26  | 31/03/26        | 01/04/26  | 02/04/26                                    | 03/04/26    | 04/04/26   |
|---------------|---|-----------------|---|---|-------------|--|
| Time Slot/Day | Monday  | Tuesday         | Wednesday   | Thursday                                    | Friday      | Saturday   |
| 9 am - 12 pm  |   |                 | Clinical  | Postings                                    |             |  |
| 12-1 pm       | LGT Surgery<br>Missed Lecture   | MAHAVIR JAYANTI | LGT FMT FM9.4 (VI Pharma, Med)<br>Toxicology<br>Ethyl & Methyl Alcohol -II  | LGT CM<br>CM 8.1<br>JE, Dengue, Chikungunya | GOOD FRIDAY | LGT OBGY OG 28.1 Infertility (clinical history& examination) |
| 2-5 pm        | SGT FMT FM3.32 Clinical<br>Forensic Medicine  SGT FMT FM3.33 Clinical<br>Forensic Medicine  SGT FMT FM4.29 Medical<br>Jurisprudence (Medical Law<br>and ethics) | MAHAVIR JAYANTI | SGT FMT FM14.16 Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM14.17 Skills in<br>Forensic Medicine & Toxicology<br>SGT FMT FM14.22 Skills in Forensic<br>Medicine & Toxicology | SDL FMTFM9.4 (VI Pharma,<br>Med) Toxicology | GOOD FRIDAY |  |

| Date          | 06/04/26 | 07/04/26 | 08/04/26    | 09/04/26 | 10/04/26 | 11/04/26 |
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| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday | Friday   | Saturday |
| 9 am - 12 pm  |          |          | Clinical I  | Postings |          |          |
| 12-1 pm       |          |          |             |          |          |          |
| 2-5 pm        |          |          | TERM TEST 2 |          |          |          |

| Date          | 13/04/26  | 14/04/26   | 15/04/26  | 16/04/26   | 17/04/24   | 18/04/26   |
|---------------|---|--|---|--|--|--|
| Time Slot/Day | Monday  | Tuesday  | Wednesday   | Thursday   | Friday   | Saturday   |
| 9 am - 12 pm  |   |  | Clinical  | Postings   |  |  |
| 12-1 pm       | LGT Surgery SU20.1 Describe etiopathogenesis of oral cancer symptoms and signs of oropharyngeal cancer. | LGT CM CM 6.2 Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data | LGT FMT FM9.4 (VI Pharma, Med)<br>Toxicology<br>Ethyl & Methyl Alcohol -III   | LGT CM  CM 6.3 Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs | LGT Paeds Low Birth weight: definition, complications & Management PE 20.11  | LGT OBGY<br>OG28.1<br>Infertility(investigation &<br>management) |
| 2-5 pm        | SDL CM<br>CM 19.3<br>Counterfeit Medicines and<br>prevention  | SGT OBGY OG 24.1 Abnormal Uterine BLEEDING Case and management   | SGT FMT FM14.20 Skills in<br>Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.12 Skills in<br>Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.14 (B) Skills in<br>Forensic Medicine & Toxicology | SDL FM2.26,3.21 Forensic Pathology & Clinical Forensic Medicine  | SGT CM  CM 6.3 Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs |  |

| Date          | 20/04/26   | 21/04/26  | 22/04/26  | 23/04/26                                      | 24/04/26   | 25/04/26                         |
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| Time Slot/Day | Monday   | Tuesday   | Wednesday   | Thursday                                      | Friday   | Saturday                         |
| 9 am - 12 pm  |  |   | Clinical  | Postings                                      |  |                                  |
| 12-1 pm       | LGT Surgery SU20.2 Enumerate the appropriate investigations and discuss the principles of treatment of oropharyngeal cancers | LGT CM<br>CM 8.1<br>Malaria   | LGT FMT FM5.1,3.30, 3.31 (VI<br>Psy)  FORENSIC PSYCHIATRY- I  | LGT CM<br>CM 8.3<br>Filariasis, Leishmaniasis | LGT Paeds Temperature regulation in neonate and management of neonatal hypothermia PE 20.12  | LGT OBGY<br>OG 32.1<br>Menopause |
| 2-5 pm        | SDL CM<br>CM 19.3<br>Counterfeit Medicines and<br>prevention   | SGT Surgery SU19.1 Describe the etiology and classification of cleft lip and palate | SGT Medicine<br>IM 8.6- Hypertensive emergency<br>and urgency | SDL FMT FM 2.18<br>forensic pathology         | SGT CM  CM 6.3 Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study Designs |                                  |

| Date          | 27/04/26   | 28/04/26  | 29/04/26  | 30/04/26  | 01/05/26       | 02/05/26                                |
|---------------|--|---|---|---|----------------|---|
| Time Slot/Day | Monday   | Tuesday   | Wednesday   | Thursday  | Friday         | Saturday                                |
| 9 am - 12 pm  | Clinical Postings  |   |   |   |                |   |
| 12-1 pm       | LGT Surgery SU19.2 Describe the Principles of reconstruction of cleft lip and palate | LGT CM<br>CM 8.3<br>Rabies                                      | LGT FMT FM5.1,3.30, 3.31 (VI<br>Psy)  FORENSIC PSYCHIATRY- II   | LGT CM<br>CM 17.1 Tribal Health                                 | BUDHHA PURNIMA | LGT OBGY<br>OG 9.3<br>Ectopic Pregnancy |
| 2-5 pm        | SDL CM<br>CM 20.4<br>Laws related to practice of<br>Comm Med                         | SGT OBGY OG 27.4,27.3 Pelvic inflammatory disease &STD- Seminar | SGT FMT FM14.10 Skills in Forensic Medicine & Toxicology  SGT FMT FM14.14(A) Skills in Forensic Medicine & Toxicology  SGT FMT FM14.15 (B) Skills in Forensic Medicine & Toxicology | SDL FM2.26,3.21 Forensic Pathology & Clinical Forensic Medicine | BUDHHA PURNIMA |   |

| Date          | 04/05/26  | 05/05/26   | 06/05/26  | 07/05/26   | 08/05/26   | 09/05/26                                  |
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| Time Slot/Day | Monday  | Tuesday  | Wednesday   | Thursday   | Friday   | Saturday                                  |
| 9 am - 12 pm  |   |  | Clinical  | Postings   |  |   |
| 12-1 pm       | LGT Surgery SU21.1 Describe surgical anatomy of the salivary glands, pathology, and clinical presentation of disorders of salivary glands | LGT CM<br>CM 8.3<br>Polio  | LGT FMT FM 10.1 (VI Med)<br>Toxicology :<br><b>Pharmaceutical</b><br><b>Toxicology/Cardiac Poison</b> | LGT CM<br>CM 7.1, 7.2<br>Epidemiology            | LGT Paeds<br>Birth asphyxia and HIE<br>PE 20.7<br>HI- Obs & Gynae  | LGT OBGY<br>OG 27.1<br>Genital infections |
| 2-5 pm        | SDL CM CM 20.4 Laws related to practice of Comm Med   | SGT Surgery SU21.2 Enumerate the appropriate investigations and describe the Principles of treatment of disorders of salivary glands | SGT Medicine<br>IM 8.7- Secondary HTN<br>VI- Pathology  | SDL Surgery<br>Urinary catheterization (Group I) | SGT CM  CM 6.4 Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion Formative Assessment |   |

| Date          | 11/05/26   | 12/05/26   | 13/05/26  | 14/05/26  | 15/05/26  | 16/05/26                                 |
|---------------|--|--|---|---|---|--|
| Time Slot/Day | Monday   | Tuesday  | Wednesday   | Thursday  | Friday  | Saturday                                 |
| 9 am - 12 pm  |  |  | Clinical  | Postings  |   |  |
| 12-1 pm       | LGT Surgery AN20.4  Explain anatomical basis of enlarged inguinal lymph nodes. | LGT CM<br>CM 7.3<br>Epidemiology                 | LGT FMT FM11.1, 12.1 (VI Med) Toxicology: Biotoxicology & Toxicology: Sociomedical  | LGT CM<br>CM 7.4<br>Epidemiology                  | LGT Paeds<br>Neonatal sepsis<br>PE 20.16  | LGT OBGY<br>OG 30.1<br>PCOS & H irsutism |
| 2-5 pm        | SDL CM<br>CM 13.1-13.5<br>Disaster Management                                  | SGT OBGY OG32.2 Postmenopausal bleeding(seminar) | SGT FMT FM14.11 Skills in<br>Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.15 (A) Skills<br>in Forensic Medicine &<br>Toxicology<br>SGT FMT FM14.13 (B) Skills in<br>Forensic Medicine & Toxicology | SDL Surgery<br>Urinary catheterization (Group II) | SGT CM  CM 6.4 Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion |  |

| Date          | 18/05/26   | 19/05/26  | 20/05/26   | 21/05/26  | 22/05/26  | 23/05/26                                     |
|---------------|--|---|--|---|---|--|
| Time Slot/Day | Monday   | Tuesday   | Wednesday  | Thursday  | Friday  | Saturday                                     |
| 9 am - 12 pm  |  |   | Clinical   | Postings  |   |  |
| 12-1 pm       | LGT Surgery AN20.5 Explain anatomical basis of varicose veins and deep vein thrombosis | LGT CM<br>CM 7.5<br>Epidemiology  | LGT FMT FM13.1,13.2 (VI Med) Toxicology : Environmental Toxicology &Occupational hazards Asphyxiants | LGT CM<br>CM 7.5<br>Epidemiology                      | LGT Paeds<br>Bleeding in a neonate<br>PE 20.10  | LGT OBGY<br>OG 18.4<br>Neonatal resucitation |
| 2-5 pm        | SDL CM<br>CM 13.1-13.5<br>Disaster Management  | SGT Surgery OR1.1 Describe and discuss the principles of pre-hospital care and casuality management of a trauma victim including principles of triage | SGT Medicine<br>IM 8.8- Target organ damage in<br>HTN<br>VI- Pathology<br>Formative assessment-2     | SDL Surgery<br>Urinary catheterization (Group<br>III) | SGT CM  Second Formative assessment of SGT topics covered after the First formative assessment during phase 3, part 1 |  |

| Date          | 25/05/26  | 26/05/26                              | 27/05/26    | 28/05/26   | 29/05/26  | 30/05/26                                    |
|---------------|---|---------------------------------------|-------------|--|---|---|
| Time Slot/Day | Monday  | Tuesday                               | Wednesday   | Thursday   | Friday  | Saturday                                    |
| 9 am - 12 pm  |   |                                       | Clinical    | Postings   |   |   |
| 12-1 pm       | LGT Surgery PM5.1 Enumerate the indications and describe the principles of amputation | LGT CM<br>CM 7.6<br>Epidemiology      | EID-UL-ZUHA | LGT CM<br>CM 7.7<br>Epidemiology                                     | LGT Paeds Etiology, clinical features and management of neonatal seizure PE 20.15 | LGT OBGY<br>OG33.4<br>Uterovaginal Prolapse |
| 2-5 pm        | SDL CM<br>Assessment and Feedback   | SGT OBGY OG 21.1 Female Contraception | EID-UL-ZUHA | SDL OBGY OG1.1  Maternal mortality & survey of etiologies state wise | SDL ENT EN 1.2, 2.13, 4.30 Epistaxis  |   |

| Date          | 01/06/26   | 02/06/26   | 03/06/26   | 04/06/26   | 05/06/26  | 06/06/26  |
|---------------|--|--|--|--|---|---|
| Time Slot/Day | Monday   | Tuesday  | Wednesday  | Thursday   | Friday  | Saturday  |
| 9 am - 12 pm  |  |  | Clinical   | Postings   |   |   |
| 12-1 pm       | LGT Surgery RT4.8 Describe oncological emergencies and palliative care | LGT CM<br>CM 7.8.7.9<br>Epidemiology   | LGT FMT FM13.1,13.2 (VI Med) Toxicology: Environmental Toxicology &Occupational hazards AsphyxiantsII                  | LGT CM CM 6.4 Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion | LGT Paeds<br>Respiratory Distress in a newborn<br>PE 20.8 | LGT OBGY OG 33.4 Overview of Gynecological cancer & Cervical Screening (Formative assessment and feedback |
| 2-5 pm        | SDL Medicine<br>Approach to HIstory taking                             | SGT Surgery RT1.3 Enumerate, describe and discuss and classify staging of cancer (AJCC, FIGO etc.) | SGT FMT FM 14.5, 14.21<br>Skills in Forensic Medicine &<br>SGT FM14.13 (A) Skills in Forensic<br>Medicine & Toxicology | SDL OBGY OG 20.1 Recent MTP Act amendments: its advantages & disadvantages - approx 3 groups   | SDL ENT En 1.2, 2.1, 4.22, 4.23 Diseases of nose          |   |

**WEEK 41** 

| Date          | 08/06/26  | 09/06/26  | 10/06/26  | 11/06/26   | 12/06/26  | 13/06/26   |
|---------------|---|---|---|--|---|--|
| Time Slot/Day | Monday  | Tuesday   | Wednesday   | Thursday   | Friday  | Saturday   |
| 9 am - 12 pm  | AETCOM Ophthal AETCOM 3.1 OPH Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, non-judgmental and empathetic manner | AETCOM Ophthal AETCOM 3.2 OPH  Demonstrate an understanding of the implications and the appropriate procedure and response to be followed in the event of medical error | AETCOM Ophthal OP6.10 Counsel patients with conditions of the iris and anterior chamber about their diagnosis, therapy and prognosis in an empathetic manner in a simulated environment | AETCOM 3.3 ENT Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, non-judgmental and empathetic manner | AETCOM 3.3 ENT Identify, discuss and defend, medico-legal, socio-cultural and ethical issues as they pertain to consent for surgical procedures   | AETCOM 3.3C FM administer informed consent and appropriately address patient queries to a patient undergoing a surgical procedure in a simulated environment |
| 12-1 pm       | LGT Surgery RT1.1 Describe and discuss definition of radiation, mechanism of action of radiation, types of radiation  | LGT CM CM 6.5 use of statistical software for the data analysis   | MISSED CLASS  | LGT CM CM 6.6 descriptive statistics of a given data-set and interpret   | LGT Paeds Congenital malformations in a newborn PE 20.20  | MISSED CLASS   |
| 2-5 pm        | SDL Medicine Approach to general physical examination   | SDL Ophthal  Eye donation and counselling   |   |  | SDL ENT EN 1.1, 1.2, 4.36, 2.9 Diseases of salivary glands +/- AETCOM Administer informed consent and appropriately address patient queries to a patient undergoing a surgical procedure in a simulated environment |  |

| Date          | 15/06/26   | 16/06/26   | 17/06/26   | 18/06/26     | 19/06/26                                     | 19/06/26     |
|---------------|--|--|--|--------------|--|--------------|
| Time Slot/Day | Monday   | Tuesday  | Wednesday  | Thursday     | Friday                                       | Saturday     |
| 9 am - 12 pm  | AETCOM 3.4 FM identify, discuss and defend medicolegal, socio-culture and ethical issues as it pertains to confidentiality in patient care | AETCOM 3.4 FM identify, discuss and defend medicolegal, socio-culture and ethical issues as it pertains to confidentiality in patient care |  |              | MISSED CLASS                                 | MISSED CLASS |
| 12-1 pm       | MISSED CLASS   | MISSED CLASS   | MISSED CLASS   | MISSED CLASS | MISSED CLASS                                 | MISSED CLASS |
| 2-5 pm        | SDL Medicine Approach to systemic examination  | SDL Ophthal Counselling for Cataract surgery   | SGT FMT FM 14.5,2.32,2.33, 2.34, 2.35 (HI CM) (VI Med) Skills in Forensic Medicine & Toxicology & Forensic Pathology  SGT FMT FM 3.8 (A) Clinical Forensic Medicine  SGT FMT FM 14.19 (B) Skills in Forensic Medicine & Toxicology | MISSED CLASS | SDL Ophthal Counselling for Cataract surgery |              |

#### WEEK 43 TO WEEK 46

| Date          |        |         | 22/06/26 T |          |        |          |
|---------------|--------|---------|------------|----------|--------|----------|
| Time Slot/Day | Monday | Tuesday | Wednesday  | Thursday | Friday | Saturday |
| 9 am - 12 pm  |        |         |            |          |        |          |
| 12-1 pm       |        |         |            |          |        |          |
|               |        |         | ELECTIVES  |          |        |          |
| 2-5 pm        |        |         |            |          |        |          |

|               |        |         | WEEN 41     |            |        |          |
|---------------|--------|---------|-------------|------------|--------|----------|
| Date          |        |         | 20/07/26 To | O 25/07/26 |        |          |
| Time Slot/Day | Monday | Tuesday | Wednesday   | Thursday   | Friday | Saturday |
| 9 am - 12 pm  |        |         |             |            |        |          |
| 12-1 pm       |        |         |             |            |        |          |
|               |        |         |             |            |        |          |
|               |        |         | VACATION    |            |        |          |
|               |        |         | VACATION    |            |        |          |
| 2-5 pm        |        |         |             |            |        |          |
|               |        |         |             |            |        |          |
|               |        |         |             |            |        |          |
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|               |        |         |             |            |        |          |
|               |        |         |             |            |        |          |
|               |        |         |             |            |        |          |

#### **WEEK 48 TO WEEK 52**

| Date          |        |         | 27/07/26 T    | O 29/08/26 |        |          |
|---------------|--------|---------|---------------|------------|--------|----------|
| Time Slot/Day | Monday | Tuesday | Wednesday     | Thursday   | Friday | Saturday |
| 9 am - 12 pm  |        |         |               |            |        |          |
| 12-1 pm       |        |         |               |            |        |          |
|               |        |         | SENT UP & PRO | F. EXAM    |        |          |
| 2-5 pm        |        |         |               |            |        |          |

## **Clinical Postings day-wise competencies - Phase III Part I**

### **Paediatrics**

#### Phase III, part 1 Clinical Posting

Total duration of posting 24 days, 3 hours per day (excluding Sundays)

Posting will be in two parts (3 weeks + 1 week). There shall be an assessment after each part

Total Duration of posting ~ 21 working days x 3 hours = 63 hours (42 Paediatrics + 21 Hours Neonatology).

The competencies to be covered are as detailed in the Table below.

Each class must have 1 hour of orientation/discussion followed by demonstration/bedside teaching/hands-on. In this Professional primary focus should be on system based - history and clinical examination.

Try to cover a variety of cases, rather than repeating the same type of cases.

#### **Table 1: 3 week posting (Pediatrics)**

| S.No. | Competency (No.)   | Objective  |
|-------|--|--|
| 1     | Recapitulation of competencies learnt in 2 <sup>nd</sup> | 1. Description of various components of history and their importance   |
|       | Professional including                                   | 2. Discuss the importance of different components  |
|       |  | 3. Common symptoms in children – fever, rash, pain, diarrhea, vomiting, cough, poor feeding.   |
| 2.    | Nutritional Assessment of a Child (PE 8.4, 8.5, PE       | Elicit, document and present an appropriate nutritional history and perform a dietary recall   |
|       | 9.4, 9.5, 9.7)   | 2. Calculate the gap (deficit) between recommended intake of calorie and protein and actual intake                                       |
|       |  | 3. Plan an age-appropriate diet for a healthy child of different age groups, and child with under nutrition/ over nutrition.             |
|       |  | 4. Feeding counseling of the mother  |
| 3.    | Anthropometry and its Interpretation                     | Discuss and describe the patterns of growth in infants, children and adolescents.  |
|       | (PE 1.1 - 1.4, 1.7, 9.6, 11.3 - 11.5)                    | 2. Perform anthropometric measurements in children and plot.   |
|       |  | 3. Interpret the anthropometric measurement data by plotting in appropriate WHO growth charts for children of all age groups and gender. |
|       |  | 4. Calculate BMI, document in BMI chart and interpret  |
|       |  | 5. Assess nutritional status from anthropometric parameters for children of all age groups.  |
|       |  | 6. Classify the type and degree of under nutrition using the WHO charts.   |
|       |  | 7. Identify over nutrition (overweight and obesity) by using WHO charts  |
| 3     | Developmental history in a Child (PE 1.5, 1.7, 3.3,      | 1. Elicit developmental history from a parent/caretaker and  |
|       | 3.7)   | 2. Perform Developmental assessment in infants and children and interpret the findings.  |
|       |  | 3. Elicit development history and interpret in a child with developmental delay.   |
|       |  | 4. Visit a Child Developmental Unit and Observe its functioning  |
|       |  |  |

| 4 | Adolescent Health (PE 6.8, 6.9, 6.11, 33.9, 33.10, 33.11) | Adolescent Health & common problems related to adolescent health  1. Respecting patient privacy and maintaining confidentiality while dealing with adolescence.  2. Perform routine Adolescent Health checkup 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.  3. Recognize precocious and delayed Puberty and refer  4. Identify deviations in growth and plan appropriate referral  5. Visit to the Adolescent Clinic   |
|---|---|--|
| 5 | Abdominal system I  | Anemia and other Hemato-oncologic disorders in children  |
|   | (PE 29.10 – 29.13, 29.18, 29.19)                          | <ol> <li>Elicit, document and present the history related to anemia and other Hemato-oncological manifestations</li> <li>Identify external markers for hematological disorders e.g. Jaundice, Pallor, Petechiae, Purpura, Ecchymosis, Lymphadenopathy, bone tenderness, loss of weight, Mucosal and large joint bleed.</li> <li>Identify the clinical features of dietary deficiency of Iron and make a diagnosis</li> <li>Perform examination of the abdomen, demonstrate Organomegaly.</li> <li>Analyze symptoms and interpret physical signs to make a provisional /differential diagnosis.</li> </ol>  |
| 6 | Abdominal system III (PE 24.9-24.11, 24.13, 24.14,        | Diarrheal diseases and dehydration   |
|   | 27.23)  | 1. Elicit document and present the history related to diarrheal diseases and dehydration.  |
|   | Skill assessment  | <ol> <li>Assess for signs of dehydration, document and present</li> <li>Apply risk stratification of children with diarrheal dehydration as per IMNCI guidelines.</li> <li>Examine and identify features suggestive of other systemic involvement in a case of diarrhea.</li> <li>Interpret RFT and electrolyte report</li> <li>Plan fluid management as per the WHO criteria</li> </ol>   |
| 7 | Respiratory system (PE 28.9, 28.13-20, 31.4,              | Elicit, document and present age-appropriate history of a child with upper respiratory problem including Stridor   |
|   | 31.7,31.11, 34.5)<br>Skill assessment                     | <ol> <li>Analyze the clinical symptoms and interpret physical findings and make a provisional / differential diagnosis in a child with ENT symptoms</li> <li>Develop a treatment plan and document appropriately in a child with upper respiratory symptoms</li> <li>Stratify risk in children with stridor using IMNCI guidelines</li> <li>Interpret blood tests relevant to upper respiratory problems</li> <li>Interpret X-ray of the paranasal sinuses and mastoid; and /or use written report in case of management</li> <li>Interpret CXR in foreign body aspiration and lower respiratory tract infection, understand the significance of thymic shadow in pediatric chest X-rays</li> <li>Describe the etio-pathogenesis, diagnosis, clinical features, management and prevention of lower respiratory infections including bronchiolitis, wheeze associated LRTI Pneumonia, and empyema</li> <li>Describe the etio-pathogenesis, diagnosis, clinical features, management and prevention of asthma in children</li> <li>Counsel the child with asthma on the correct use of inhalers in a simulated environment</li> <li>Able to elicit, document and present history of contact with tuberculosis</li> </ol> |

| 10 | Cardiovascular System<br>(PE 23.7 – 23.15, 23.18)                                  | <ol> <li>Elicit appropriate history for a cardiac disease, analyze the symptoms e.g. breathlessness, chest pain, tachycardia, feeding difficulty, failing to thrive, reduced urinary output, swelling, syncope, cyanotic spells, Suck rest cycle, frontal swelling in infants.</li> <li>Identify external markers of a cardiac disease e.g. Cyanosis, Clubbing, dependent edema, dental caries, arthritis, erythema rash, chorea, subcutaneous nodules, Osler node, Janeway lesions and document</li> <li>Record pulse, blood pressure, temperature and respiratory rate and interpret as per the age</li> <li>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 system examination and document</li> <li>Check for signs of shock i.e. pulse, blood pressure, CRT</li> <li>Check for signs of CHF.</li> <li>Develop a treatment plan and prescribe appropriate drugs including fluids in cardiac diseases, anti -failure drugs, and inotropic agents</li> <li>Interpretation of blood reports, chest x ray and pediatric ECGUse the ECHO reports in management of cases</li> </ol> |
|----|--|--|
| 11 | Central Nervous system (PE 30.17 - 30.21)  | <ol> <li>Elicit, document and present an age-appropriate history pertaining to the CNS</li> <li>Demonstrate the correct method for physical examination of CNS including identification of external markers. Document and present clinical findings</li> <li>Analyse symptoms and interpret physical findings and propose a provisional / differential diagnosis</li> <li>Interpret and explain the findings in a CSF analysis</li> <li>Enumerate the indication and discuss the limitations of EEG, CT, MRI</li> <li>Interpret the reports of EEG, CT, MRI</li> </ol>   |
| 12 | Abdominal system (PE 21.8, 21.9, 21.13, 21.14, 21.16 26.5)                         | <ol> <li>Elicit, document and present a history pertaining to diseases of the Genitourinary tract</li> <li>Elicit document and present the history related to diseases of Gastrointestinal system</li> <li>Analyze symptom and interpret the physical findings and arrive at an appropriate provisional differential diagnosis</li> <li>Enumerate the indications for and Interpret the written report of Ultra sonogram of KUB</li> <li>Recognize common surgical conditions of the abdomen and genitourinary system and enumerate the indications for referral including acute and subacute intestinal obstruction, appendicitis, pancreatitis, perforation intussusception, Phimosis, undescended testis, Chordee, hypospadias, Torsion testis, hernia Hydrocele, Vulval Synechiae</li> <li>Counsel / educate a patient for referral appropriately</li> </ol>   |
| 13 | Skill lab / assessment (PE 15.6, 15.7, 24.15 -24.17, 30.23, 26.10, 19.3, 19.10-13) | <ol> <li>Demonstration of common pediatric procedures and instruments – Iv cannulation, intraosseous line, NG tube insertion, BMA/BMB, Lumbar puncture, Liver biopsy etc.</li> <li>Vaccines and National immunization schedule</li> </ol>  |
| 14 | Skill lab<br>(P.E 28.17, 23.14, 23.12)   | X-Ray, ECG and drugs   |
| 15 | End of posting Assessment - Theory   | Assessment of competencies in Pediatrics + Feedback  |
| 16 | End of posting Assessment - Practical  | Assessment of competencies in Pediatrics + Feedback  |

**Table 2: 1 week posting (Neonatology)** 

| _ |   | ,  |
|---|---|--|
| 1 | Neonatal resuscitation & Care around birth (PE 18.6, 18.7, 20.2, PE 20.3) | <ol> <li>Steps of neonatal care</li> <li>Demonstration steps of neonatal resuscitation in a manikin</li> </ol>   |
|   |   | 3. Demonstration of PPV through Bag and mask in a manikin  |
|   |   | 4. Demonstration of placement of orogastric tube during prolonged PPV in a manikin   |
|   |   | 5. Demonstrate the 'thumb technique' and 'two finger technique' of providing chest compression in a manikin.   |
|   |   | 6. Visit to a baby corner in labor room  |
|   |   | 7. Steps of essential newborn care   |
|   |   | 8. Observation of early establishment of breast feeding  |
|   |   | 9. Observation of methods of keeping the baby warm - KMC care  |
|   |   | 10. Perform Postnatal assessment of newborn and mother, provide advice on breastfeeding, weaning and on family planning  |
|   |   | Educate and counsel caregivers of children   |
|   |   |  |
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| 2 | Assessment of a normal neonate (PE 18.6, 18.7, 20.4)                      | 1. Elicit the relevant general, antenatal, natal and postnatal history of the mother   |
|   |   | 2. Demonstrate the touch method of assessment of temperature in a newborn.   |
|   |   | 3. Demonstrate the method of recording axillary and rectal temperature in a neonatal manikin.  4. Demonstrate the counting of HP, PP, CPT in a newhorm                                 |
|   |   | <ol> <li>Demonstrate the counting of HR, RR, CRT in a newborn.</li> <li>Measure weight, length, head circumference and chest circumference in a neonate/manikin accurately.</li> </ol> |
|   |   | 6. Demonstrate gestational assessment by physical and neurological criteria in a neonate.  |
|   |   | 7. Elicit common neonatal reflexes like rooting, sucking, grasp, and Moro's reflex correctly.  |
|   |   | 8. Demonstrate a head to toe examination of the neonate.   |
|   |   | Demonstrate a relevant systemic examination of a neonate   |
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| 3 | Feeding of a neonate – Term/ preterm (PE 7.5 – 7.11)                            | To promote and support optimal Breastfeeding for Infants  1. Observe the correct technique of breastfeeding and distinguish right from wrong technique 2. Perform breast examination and identify common problems during lactation such as retracted nipples, cracked nipples, breast engorgement, breast abscess 3. Educate mothers on ante natal breast care and prepare mothers for lactation 4. Educate and counsel mothers for best practices in Breastfeeding 5. Respects patient privacy 6. Observe feeding of a preterm/LBW neonate- Tube feeding/ Katori spoon feeding Participate in Breastfeeding Week Celebration |
|---|---|---|
| 4 | Identify and stratify risk in a sick neonate using IMNCI guidelines (PE 20. 18) | <ol> <li>Identify possible serious bacterial infection/jaundice and stratify the sick neonate as per IMNCI.</li> <li>Identify and stratify dehydration in a sick neonate with diarrhea as per IMNCI.</li> <li>Assess breastfeeding and check for signs of good attachment to the breast in a neonate.</li> <li>Interpret and classify the neonate based on weight for age z scores weight categories accurately.</li> </ol>   |
| 5 | Counsel/educate mothers on the care of neonates (PE 20.5)                       | <ol> <li>Counsel mothers using the GALPAC technique (Greet, Ask, Listen, Praise, Advise, Check for understanding) appropriately.</li> <li>Educate mothers regarding care of the eyes, skin and cord stump of the neonate.</li> <li>Educate the mother for prevention of infections.</li> <li>Counsel the mothers about the importance of exclusive breastfeeding appropriately</li> <li>Explain to the mother the importance of frequent breastfeeding including night feeds.</li> <li>Educate the mother regarding common lactation problems</li> </ol>  |
| 6 | End of posting Assessment - Practical   | Assessment of competencies in Pediatrics + Feedback   |

# Department - Community Medicine

| Day | Competencies  |  |
|-----|---|--|
| 1   | CM 2.1, 2.2, 3.3,3.4,3.5,5.1,5.7  |  |
| 2   | CM 10.6 Enumerate and describe various family planning methods, their advantages and shortcomings  CM 5.2 Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method.  CM 5.5 Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio-cultural factors. |  |
| 3   | CM 2.1 Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community   |  |
| 4   | CM 2.2 Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status   |  |
|     | CM 2.3 Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior  CM 3.2 Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting   |  |
|     | CM 3.4 Describe the concept of solid waste, human excreta and sewage disposal  CM 3.5 Describe the standards of housing and the effect of housing on health   |  |
|     | CM 5.1 Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions  |  |
|     | CM 5.4 Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment CM 5.7 Describe food hygiene  |  |

| 5  | CM 10.6 Enumerate and describe various family planning methods, their advantages and shortcomings  CM 5.2 Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method.  CM 5.5 Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio-cultural factors. |
|----|---|
| 6  | CM 2.1 Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community  CM1.4 Describe and discuss the natural history of disease  |
| 7  | CM 8.1 Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases  CM 8.2 Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for non-communicable diseases  |
| 8  | CM 2.1 Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community  CM2.3 Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behaviour   |
| 9  | CM 2.1 Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community   |
| 10 | CM 2.1 Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community  CM2.3 Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behaviour   |
| 11 | CM 2.1 Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community  CM2.3 Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behaviour   |
| 12 | CM 10.5 Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs  |

| 13 | CM 10.5 Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs  CM 14.1 Define and classify hospital waste  |
|----|---|
| 14 | CM 8.1 Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases  |
| 15 | CM 7.2 Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable and noncommunicable diseases   |
| 16 | CM 10.3 Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices  CM 5.1 Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions  |
|    | CM 5.4 Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment   |
| 17 | CM 10.3 Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices  CM 5.1 Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions  CM 5.3 Define and describe common nutrition related health disorders (including macroPEM, Micro-iron, Zn, iodine, Vit. A), their control and management |
| 18 | CM 4.2 Describe the methods of organizing health promotion and education and counselling activities at individual family and community  Settings  |
| 19 | Assessment OSPE   |
| 20 | Assessment Family discussion, Viva  |
| 21 | Feedback, Logbook compiling   |

## Clinical posting Competencies of Obstetrics and Gynecology(PHASE 3 PART 1)

| COMPETENCIES TO BE COVERED IN UNIT POSTING |   |  |
|--|---|--|
| OMPETENCY No.                              | TOPIC / COMPETENCY  | Learning objective   |
| G8.2<br>Vard/OPD)                          | Obstetric History taking  Elicit, document and present an obstetric history including menstrual history, previous obstetric history, comorbid conditions, past medical history and surgical history | Elicit and present detailed obstetric history, past obstetric history, personal history.     Dietary history including calculation of calories and protein intake     Elicit and present past history of medical and surgical illness, family history.   |
| G8.3<br>Vard/OPD)                          | Obstetric Examination  Describe, demonstrate, document and perform an obstetrical examination including general and abdominal examination and clinical monitoring of maternal and fetal well being  | Describe and demonstrate detailed general physical examination of mother.  Describe and show detailed obstetrical examination  Demonstrate auscultation of fetal heart sounds.   |
| G8.4<br>Vard/OPD)                          | Antenatal maternal and fetal monitoring  Describe and demonstrate the clinical monitoring of maternal and fetal well being  | <ul> <li>Show how to examine the vitals (pulse rate, blood pressure, and respiratory rate), pedal oedema, and discharge per vaginum.</li> <li>Demonstrate examination of cardiovascular and respiratory system.</li> <li>Interpret normal and abnormal findings</li> <li>Show how to counsel for DFMC</li> </ul> |
| G10.1<br>Vard/OPD)                         | Case Presentation- APH  Define, classify and describe the aetiology, pathogenesis, clinical features, ultrasonography, differential diagnosis and management of antepartum haemorrhage in pregnancy | Discuss causes of antepartum haemorrhage.  Discuss the workup of a woman with APH  Describe the clinical assessment and management protocol of a woman with APH  |

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| OG12.1<br>(Ward/OPD) | Case Presentation- Preeclampsia  Define, classify and describe the etiology and pathophysiology, early detection, investigations; principles of management of hypertensive disorders of pregnancy and eclampsia, complications of eclampsia.                          | Define and classify hypertensive disorders in pregnancy.      Discuss the investigations and their relevance in hypertension in      Pregnancy.      Discuss the management of a case of preeclampsia.  |
|----------------------|---|---|
| OG12.2<br>(Ward/OPD) | Case Presentation- Anaemia  Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of anemia in pregnancy                  | <ul> <li>Define and classify anaemia in pregnancy.</li> <li>Discuss the clinical presentation and examination of a woman with anaemia in pregnancy.</li> <li>Enumerate investigations of anaemia during pregnancy and their relevance.</li> <li>Describe the management of anaemia during pregnancy and labor.</li> </ul>                                       |
| OG12.3<br>(Ward/OPD) | Case Presentation- GDM Diabetes  Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of diabetes in pregnancy | <ul> <li>Define diabetes in pregnancy.</li> <li>List screening methods for gestational diabetes mellitus.</li> <li>Discuss clinical features and diagnosis of diabetes in pregnancy</li> <li>Discuss investigations to be done in pregnant woman with diabetes in pregnancy.</li> <li>Discuss glucose monitoring of a case of diabetes in pregnancy.</li> </ul> |
| OG22.2<br>(OPD)      | Vaginal Discharge  Describe and discuss the etiology (with special emphasis on Candida, T. vaginalis, bacterial vaginosis), characteristics, clinical diagnosis, investigations, genital hygiene,   | Discuss the characteristics, clinical diagnosis, investigations of pathological vaginal discharge     Discuss the Genital hygiene     Discuss the management of common causes of vaginal discharge and the syndromic management   |
| OG28.1<br>(Ward/OPD) | Infertility  Describe and discuss the common causes, pathogenesis, clinical features, differential diagnosis; investigations; principles of management of infertility – methods of tubal patency, ovulation induction, assisted reproductive techniques               | Discuss the causes of male & female Infertility     Discuss the investigations of Infertility   |

| OG31.1<br>(Ward/OPD) | Uterovaginal prolapse  Describe and discuss the etiology, classification, clinical features, diagnosis, investigations, principles of management and preventive aspects of prolapse of uterus   | Define pelvic organ prolapse and discuss its aetiology     Describe classification of prolapse     Describe & discuss the clinical features of UV Prolapse  |  |
|----------------------|---|---|--|
| OG33.3<br>(OPD)      | Ca Cervix Screening  Describe and demonstrate the screening for cervical cancer in a simulated environment  | Describe the methods of VIA, VILI & Pap Smear   |  |
| OG34.4<br>(OT)       | Operative Gynaecology  Operative Gynaecology: Understand and describe the technique and complications: Dilatation & Curettage (D&C); EA-ECC; cervical biopsy; abdominal hysterectomy; myomectomy, surgery for ovarian tumours; staging laparotomy; vaginal hysterectomy including pelvic floor repair; Fothergill's operation, Laparoscopy; hysteroscopy; management of postoperative complications | Enumerate the indications of Dilatation & Curettage     Describe the steps of Dilatation & Curettage     Enumerate the complications of D&C and describe their management     Enumerate the indications of endometrial aspiration and endocervical curettage     Enumerate the methods of cervical biopsy and their indications |  |
|                      |   | LABOUR ROOM COMPETENCIES  |  |
| OG13.2               | PTLP,PROM, Postdatism  Define, describe the causes, pathophysiology, diagnosis, investigations and management of preterm labor, PROM and postdated pregnancy  | Define Preterm labour, PROM Enumerate the causes of preterm labour and factors predisposing to it     List the clinical features suggestive of PTL and PROM     Enumerate the Investigations to be advised in PROM     Discuss the monitoring in a case of PPROM and Management of     PPROM                                    |  |

| OG13.4          | Labour and Abortion  Demonstrate the stages of normal labor in a simulated environment / mannequin and counsel on methods of safe abortion   | <ul> <li>Define the stages of Labour, Demonstrate the mechanism of normal labour on dummy and pelvis</li> <li>Explain the cervical changes in the first stage of labour</li> <li>List the prerequisites before Pelvic examination on simulation</li> <li>Explain the methods of safe abortion</li> <li>Demonstrate the pre and post abortion counselling</li> </ul> |
|-----------------|--|---|
| OG13.3, OG35.13 | ARM  Observe/ assist in the performance of an artificial rupture of membranes  Demonstrate the Correct technique to perform Artificial rupture of membranes in a simulated /supervised environment   | Enumerate the indications of ARM     Enumerate the complications of ARM and their management     Explain how to perform ARM   |
| OG13.5          | Vaginal delivery  Observe and assist the conduct of a normal vaginal delivery  | Observe and assist the conduct of a normal vaginal delivery in labour room  |
| OG15.1          | Operative Obstetrics- Enumerate and desribe the indications and steps of common obstetric procedures, technique and complications: Episiotomy, vacuum extraction, low forceps, Caesarean section, assissted breech delivery, external cephalic version, cervical cerclage          | Enumerate and describe the indications and steps of common obstetric procedures     Describe the steps of mediolateral episiotomy   |
| OG15.2, 35,14   | Operative Obstetrics  Observe and assist in the performance of an episiotomy and demonstrate the correct suturing technique of an episiotomy in a simulated environment.  Observe/assist in operative obstetric cases including CS, Forceps, vacuum extraction and breech delivery | Observe and assist in the performance of an episiotomy     Demonstrate the correct suturing technique of episiotomy in a simulated environment     Observe the steps of lower segment Cesarean section  |
| OG16.1          | PPH Enumerate and discuss causes, prevention, diagnosis, management,   | Discuss PPH drill     Discuss oxytocics   |

|         | appropriate use of blood and blood<br>products in postpartum hemorrhage | Discuss use of blood and blood products in PPH  |
|---------|---|---|
| OG35.17 | Urinary Catheterization   | Enumerate the indication of urinary catheterisation   |
|         |   | Identify different types of urinary catheters and their indications                                     |
|         | Demonstrate the correct technique of                                    | Enumerate steps of insertion of foley's catheter  |
|         | urinary catheterisation in a simulated/<br>supervised environment       | Demonstrate supervised insertion of foley's catheter  |
| OG35.14 | Episiotomy  | Demonstrate the Correct technique to perform and suture episotomy in a simulated/supervised environment |

## Clinical posting Dermatology- Phase III Part I

|       | Competencies   |
|-------|--|
| DAY   |  |
|       | DR1.2 Identify and grade the various common types of acne  |
| Day 1 | DR1.1 Enumerate the causative and risk factors of acne   |
|       | DR1.3 Describe the treatment and preventive measures for various kinds of Acne   |
| Day 2 | DR3.1 Identify and distinguish psoriatic lesions from other cause  |
|       | DR3.2 Demonstrate the grattage test  |
|       | DR3.3 Enumerate the indications for and describe the various modalities of Treatment   |
|       | DR4.1 Identify and distinguish lichen planus lesions from other causes   |
| Day 3 | DR4.2 Enumerate and describe the treatment modalities for lichen planus  |
|       | DR9.1 Classify describe the epidemiology etiology microbiology,pathogenesis,clinical presentations and diagnostic features of Leprosy  |
| Day 4 | DR9.6 Describe the treatment of Leprosy based on the WHO guidelines  |
|       | DR9.4 Enumerate, describe and identify lepra reactions and supportive measures and therapy of lepra reactions  |
|       | DR9.5 Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for various classes of leprosy based on national guideline |
|       | DR9.7 Enumerate and describe the complications of leprosy and its management, including understanding disability and stigma.   |
|       | DR9.2 Demonstrate (and classify based on) the clinical features of leprosy including an appropriate neurologic examination   |
| Day 5 | DR9.3 Enumerate the indications and observe the performance of a slit skin smear in patients with leprosy  |

| Day 6  | DR10.1 Identify and classify syphilis based on the presentation  DR10.3 Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for syphilis  DR10.4 Describe the prevention of congenital syphilis  |
|--------|--|
| Day 7  | DR10.2 Identify spirochete in a dark ground microscopy (DOAP session)  DR10.5 Counsel in a non-judgemental and empathetic manner patient on prevention of sexually transmitted disease   |
| Day 8  | DR10.11 Describe the etiology, diagnostic and clinical features and management of gonococcal and non-gonococcal urethritis  DR10.12 Describe the etiology, diagnostic and clinical features and management of vaginal discharge  |
| Day 9  | DR10.6 Describe the etiology, diagnostic and clinical features of nonsyphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)  DR10.7 Identify and differentiate based on the clinical features non-syphilitic sexually transmitted genital ulcer diseases (chancroid, donovanosis and LGV)  DR10.8 Enumerate the indications and describe the pharmacology, indications and adverse reactions of drugs used in the nonsyphilitic sexually transmitted diseases (chancroid, donovanosis and LGV)  DR 10.9 Describe etiology, clinical features and management of herpes genitalis |
| Day 10 | DR 11.1 Describe the etiology, pathogenesis and clinical features of the dermatologic manifestations of HIV and its complications including opportunistic infections and IRIS  DR 11.2 Describe cutaneous manifestations of HIV  DR 11.3 Enumerate indications and describe the pharmacology, administration and adverse effects of pharmacotherapies for dermatologic lesions in HIV  |
| Day 11 | Formative assessment and feedback  |

## MBBS Phase III Part 1 General Surgery Clinical Competency

| Describe and demandance the content constitution of surgical patient merbrang seeding and order relevant investigation for diagnosis. Describe and discuss appropriate centional plan.  2. Consist the patient and obtain information of surgical patient merbrang seedings and order relevant investigation for diagnosis. Describe and discuss appropriate centional plan.  2. Consist the patient and obtain information of the levest for located for board seedings and order relevant investigation for diagnosis. Describe and discuss appropriate containing plan.  3. Consist the patient the correct experimental containing to pulpate the feest fee board for board seedings of the control of the surgical policy of the patients of the correct the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of the correct experimentation of the levestid control of the patients of t | S.No. | Competency  |  |
|--|-------|---|--|
| Social the patients and obtain informed consent for treatments of muligrant conditions of the breast  Demonstrate the context technique to palpete the breast for breast several information of the varieties system and enumerate and describe the investigation of socialar disease  Demonstrate the context examination of the varieties system and enumerate and describe the investigation of socialar disease  Demonstrate the context examination of the lymphatic system  Describe and demonstrate boundaries, flour, not and contents of feneral relangle  Explain anatomical basis of Proos aboves & Fermand horize  Describe anatomical basis of social convex injury during global intramuscular injections  Explain the anatomical basis of rendelenting sign  Explain the anatomical basis of rendelenting sign  Herrify & demonstrate pulpation of secure unjury during global intramuscular injections  Herrify & demonstrate pulpation of secure (terrural, preplical, durialis pedis, post tibial), Mid inguiral point, Surface projection of femoral nerve, Suphenous, opening, Scinic, ribial, common personal & deep personal nerve, grow and analysis of post and Method for surgical referral  Lie Enumerate the indicators and Method for surgical referral  Elicit, procent and document an appropriate circular surface analysis in a patient undergoing Surgery as it pertains to a prosperative anaesthetic evaluation  Demonstrate the indicators and depondent sessing for patients undergoing Surgery  Choose and interpret appropriate besting for patients undergoing Surgery  Determine the readiness for General Surgery in a patient based on the prosperative evaluation  Describe the common complications measurement by patients in the recovery near, their recognition and principles of management  | 1.    | Demonstrate Airway maintenance. Recognize and manage tension pneumothorax, hemothorax and flail chest in simulated environment.   |  |
| Demonstrate the correct technique to palpate the breast for beast swelling in a manacquia or equivalent  Demonstrate the correct examination of the vascular system and examerate and describe the investigation of vascular disease  Demonstrate the correct examination of the lymphatic system  Describe and demonstrate boundaries, floor, roof and comeras of femoral triangle  Explain anatomical basis of Pous abscess & Femoral hernia  Describe anatomical basis of Pous abscess & Femoral hernia  Describe anatomical basis of relatic nerve injury during glated intransacular injections  Lixplain the anatomical basis of food drop  Explain the anatomical basis of food drop  Lixplain the anatomical basis of for dro  | 2.    | Describe and demonstrate the clinical examination of surgical patient including swelling and order relevant investigation for diagnosis. Describe and discuss appropriate treatment plan. |  |
| 5. Demonstrate the correct examination of the lymphatic system  7. Describe and demonstrate the correct examination of the lymphatic system  8. Explain anatomical basis of Poas absense & Fernaral hernia  9. Describe and demonstrate homodaries, floor, runf and contents of fernoral viangle  10. Explain anatomical basis of Poas absense & Fernaral hernia  11. Explain the anatomical basis of front drup  12. Identify & demonstrate palquirium of vessels (fernoral, proplical, dursalis pedis, post tibial), Mid inguinal point, Surface projection of: femoral nerve, Supherous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, great and small supherous veits  13. Enumerate the indications and Method for surgical referral  14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate besting for patients undergoing General Surgery  16. Choose and interpet appropriate besting for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps' techniques involved in common blocks used in Surgery(including brachial pleaus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management  | 3.    | Counsel the patient and obtain informed consent for treatment of malignant conditions of the breast   |  |
| 6. Demonstrate the correct examination of the lymphatic system  7. Describe and demonstrate boundaries, floor, roof and contents of femoral triangle  8. Explain anatomical basis of Posus abscess & Femoral bernia  9. Describe anatomical basis of Sciatic nerve injury during glotted intramuscular injections  10. Explain the anatomical basis of Sciatic nerve injury during glotted intramuscular injections  11. Explain the anatomical basis of frendelenbarg sign  11. Explain the anatomical basis of foot drop  12. Identify & demonstrate palpation of vessels (femoral, pophical, dorsalis pedis, post tibial), Mid inquiral point, Surface projection off, femoral nerve, Suphenous opening, Sciatic, (fibial, common peroneal & deep peroneal nerve, great and small suphenous veins  13. Enumerate the indications and Method for surgical referral  14. Elicii, present and document an appropriate bistory including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate lesting for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brackful plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 4.    | Demonstrate the correct technique to palpate the breast for breast swelling in a mannequin or equivalent  |  |
| Describe and demonstrate boundaries, floor, roof and contents of femoral triangle  8. Explain anatomical basis of Psoas abscess & Femoral hemia  9. Describe anatomical basis of sciatic nerve injury during gluteal intranuscular injections  10. Explain the anatomical basis of Trendelenburg sign  11. Explain the anatomical basis of foot drop  12. Identify & demonstrate pulpation of vessels (femoral, popliteal, donatils pedis, post tibial), Mid inguinal point, Surface projection of: femoral nerve, Suphenous opening. Sciutic, tibial, common peroneal & deep peroneal nerve, great and small suphenous veins  13. Enumerate the indications and Method for surgical referral  14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it portains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and stepse techniques involved in common Nocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 5.    | Demonstrate the correct examination of the vascular system and enumerate and describe the investigation of vascular disease   |  |
| 8. Explain anatomical basis of Psoas abscess & Femoral herria  9. Describe anatomical basis of sclaric nerve injury during glucal intramuscular injections  10. Explain the anatomical basis of foot drop  11. Fixplain the anatomical basis of foot drop  12. Identify & demonstrate palpation of vessels (femoral, popliteal, dorsalis pedis, post tibial), Mid inguinal point, Surface projection of femoral nerve, Saphenous opening, Sciatic, (tibial, common peroneal & deep peroneal nerve, great and small suphenous veins  13. Enumerate the indications and Method for surgical referral  14. Ellicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the recidiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 6.    | Demonstrate the correct examination of the lymphatic system   |  |
| 9. Describe anatomical basis of sciatic nerve injury during glutcal intramuscular injections  10. Explain the anatomical basis of Trendelenburg sign  11. Explain the anatomical basis of foot drop  12. Identify & demonstrate palpation of vessels (femoral, popliteal, dorsalis pedis, post tibial), Mid inguinal point, Surface projection of: femoral nerve, Suphenous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, greet and small suphenous veins  13. Enumerate the indications and Method for surgical referral  14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps' techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 7.    | Describe and demonstrate boundaries, floor, roof and contents of femoral triangle   |  |
| 10. Explain the anatomical basis of Trendelenburg sign  11. Explain the anatomical basis of foot drop  12. Identify & demonstrate palpation of vessels (femoral, popliteal, dorsalis pedis, post tibial), Mid inguinal point, Surface projection of: femoral nerve, Saphenous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, great and small saphenous veins  13. Faumerate the indications and Method for surgical referral  14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 8.    | Explain anatomical basis of Psoas abscess & Femoral hernia  |  |
| 11. Explain the anatomical basis of foot drop  12. Identify & demonstrate palpation of vessels (femoral, popliteal, dorsalis pedis, post tibial), Mid inguinal point, Surface projection of: femoral nerve, Saphenous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, great and small suphenous veins  13. Enumerate the indications and Method for surgical referral  14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 9.    | Describe anatomical basis of sciatic nerve injury during gluteal intramuscular injections   |  |
| 12. Identify & demonstrate palpation of vessels (femoral, popliteal, dorsalis pedis, post tibial), Mid inguinal point, Surface projection of: femoral nerve, Saphenous opening, Sciatic, tibial, common peroneal & deep peroneal nerve, great and small saphenous veins  13. Enumerate the indications and Method for surgical referral  14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management  | 10.   | Explain the anatomical basis of Trendelenburg sign  |  |
| great and small saphenous veins  13. Enumerate the indications and Method for surgical referral  14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management  | 11.   | Explain the anatomical basis of foot drop   |  |
| 14. Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation  15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 12.   |   |  |
| 15. Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 13.   | Enumerate the indications and Method for surgical referral  |  |
| 16. Choose and interpret appropriate testing for patients undergoing Surgery  17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 14.   | Elicit, present and document an appropriate history including medication history in a patient undergoing Surgery as it pertains to a preoperative anaesthetic evaluation                  |  |
| 17. Determine the readiness for General Surgery in a patient based on the preoperative evaluation  18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 15.   | Demonstrate and document an appropriate clinical examination in a patient undergoing General Surgery  |  |
| 18. Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)  19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management  | 16.   | Choose and interpret appropriate testing for patients undergoing Surgery  |  |
| 19. Describe the common complications encountered by patients in the recovery room, their recognition and principles of management   | 17.   | Determine the readiness for General Surgery in a patient based on the preoperative evaluation   |  |
|  | 18.   | Observe and describe the principles and steps/ techniques involved in common blocks used in Surgery(including brachial plexus blocks)   |  |
| 20. Describe the principles of fluid therapy in the preoperative period  | 19.   | Describe the common complications encountered by patients in the recovery room, their recognition and principles of management  |  |
|  | 20.   | Describe the principles of fluid therapy in the preoperative period   |  |

| 21. | 21. Enumerate blood products and describe the use of blood products in the preoperative period |  |
|-----|--|--|
| 22. | Describe the role of communication in patient safety   |  |

## **DEPARTMENT OF ENT**

| Day | COMPETENCIES  |  |  |
|-----|---|--|--|
| 1   | EN 4.4  |  |  |
|     | Otoscopy  |  |  |
| 2   | EN2.1   |  |  |
|     | History taking  |  |  |
| 3   | EN 2.3  |  |  |
|     | Clinical examination using bull's eye lamp                            |  |  |
| 4   | EN 2.8, 4.17  |  |  |
|     | Audiometry  |  |  |
| 5   | EN 2.5 4.22, 4.25, 4.26, 4.27, 4.28, 4.29, 4.30, 4.33 Nose case       |  |  |
| 6   | EN 4.39, EN4.39,  |  |  |
|     | Case presentation (oral cavity)                                       |  |  |
|     | Elicit document and present a correct history, demonstrate and        |  |  |
|     | describe the clinical features, choose the correct investigations and |  |  |
|     | describe the principles of management of Acute & Chronic Tonsillitis. |  |  |
| 7   | EN 4.4, 4.1, 4.2, 4.3, 4.5, 4.7, 4.8, 4.12                            |  |  |
|     | Ear case  |  |  |
| 8   | EN 2.4  |  |  |
|     |   |  |  |

|    | Tuning fork tests  |  |  |
|----|--|--|--|
| 9  | EN 2.9   |  |  |
|    | X-RAYS   |  |  |
| 10 | EN 2.10  |  |  |
|    | Instruments + scopies( DNE, laryngoscopies, bronchoscope, esophagoscope)   |  |  |
| 11 | EN 4.38, 4.42, 4.49  |  |  |
|    | Case presentation (Larynx)   |  |  |
| 12 | EN 2.13, 4.48  |  |  |
|    | Tracheostomy   |  |  |
| 13 | Case presentation (Ear)  |  |  |
| 14 | EN 2.14, 13, 4.9   |  |  |
|    | Techniques of nasal packing/foreign body/wax removal/medicine instillation |  |  |
| 15 | Case presentation (Nose)   |  |  |
| 16 | EN 2.7   |  |  |
|    | Examination of neck/thyroid  |  |  |
| 17 | Case presentation (Larynx)   |  |  |
| 18 | Methods of examination   |  |  |
| 19 | Case presentation (oral cavity/oropharynx)                                 |  |  |
| 20 | EN2.12,  |  |  |
|    | Counsel and administer informed consent to patients and their              |  |  |
|    | families in a simulated environment.                                       |  |  |
|    |  |  |  |
| 21 | Ward leaving examination/ Feedback   |  |  |
|    | Log book compiling   |  |  |

# Clinical Postings day-wise competencies - Phase III Part I Department -**Orthopaedics**

| DAY   | COMPETENCY  |
|-------|---|
| Day 1 | Topic – Overview of Fractures   |
|       | OR 2.3 History taking in case of fractures  |
|       | OR 2.5-2.13 Relevant clinical examination and investigations                              |
| Day 2 | TOPIC –Overview of fractures  |
|       | OR 2.1-2.14 Management of different fractures   |
| Day 3 | TOPIC – Overview of fractures   |
|       | OR 2.15 Plan and interpret complications of fractures and open fractures                  |
| Day 4 | TOPIC – Overview of fractures   |
|       | OR 2.15 History taking, clinical exam and approach in non union and malunion of fractures |
| Day 5 | TOPIC – Infections  |
|       | OR 3.1 Diagnosis and clinical features of bone and joint infections                       |
| Day 6 | TOPIC – Infections  |
|       | OR3.1 History taking and clinical exam in acute and chronic osteomyelitis                 |

| Day 7  | TOPIC – Infections  |
|--------|---|
|        | OR 3.1,4.1 Diagnosis, clinical features, history and examination of osteoarticular tuberculosis especially hip joint    |
| Day 8  | TOPIC – Infections  |
|        | OR 4.1 Relevant history and examination of tuberculosis of spine  |
| Day 9  | TOPIC – Infections  |
|        | OR 3.2,3.3 – Video demonstration and discussion on joint aspiration, drainage of abscess, arthrotomy and sequestrectomy |
| Day 10 | TOPIC – Degenerative disorders  |
|        | OR 6.1 Relevant history and examination of PIVD, cervical and lumbar spondylosis  |
| Day 11 | TOPIC – Metabolic bone disorders  |
|        | OR 7.1 Etiology , clinical features, history taking and clinical exam of rickets, osteoporosis                          |
| Day 12 | TOPIC – Bone tumours  |
|        | OR 10.1 Clinical features , history taking and examination of benign tumours  |
| Day 13 | TOPIC – Bone tumours  |
|        | OR 10.1 Clinical features , history taking and examination of malignant tumours   |
| Day 14 | TOPIC – Peripheral nerve injury   |

|        | OR 11.1 Relevant history and clinical examination of nerve injuries-upper limb  |  |
|--------|---|--|
| Day 15 | TOPIC – Peripheral nerve injury   |  |
|        | OR 11.1 Relevant history and clinical examination of nerve injuries- lower limb |  |
| Day 16 | Topic – Congenital disorders  |  |
|        | OR 12.1 Relevant history and clinical examination of club foot                  |  |
| Day 17 | Topic – Splints and tractions   |  |
|        | OR 13.1   |  |
| Day 18 | Radiological examination  |  |
| Day 19 | Orthopaedic implants and instruments  |  |
| Day 20 | Formative assesement-Ward leaving   |  |

# General medicine clinical posting schedule for 4 weeks (3+1) Phase 3 part 1 MBBS - 2023 batch

## 1) <u>TABLE- A-</u> 1- 3 week

| DAY    | COMPETENCY                 | TOPIC   |
|--------|----------------------------|---|
| Day-1  | IM- 1.10, 1.11             | Cardiovascular system- History taking and examination               |
| Day-2  | IM- 1.16                   | Cardiovascular system- Differential diagnosis and discussion        |
| Day-3  | IM- 1.17                   | Cardiovascular system- Workup and investigations                    |
| Day-4  | IM- 1.12,1.13, 1.14, 1.15  | Demonstrate- Heart sounds, JVP, B.P. and Pulse in OPD               |
| Day-5  | IM- 3.4, 3.5               | Respiratory system History taking and examination                   |
| Day-6  | IM- 3.5                    | Respiratory system Differential diagnosis and discussion            |
| Day-7  | IM- 3.7                    | Respiratory system- Workup and investigations including chest Xrays |
| Day-8  | IM- 14.8, 14.9             | Obesity- Workup and Diagnosis in OPD                                |
| Day-9  | IM- 5.9, 5.10              | Abdomen History taking and examination                              |
| Day-10 | IM- 5.11                   | Abdomen- Differential diagnosis and discussion                      |
| Day-11 | IM- 5.12                   | Abdomen- Workup and investigations                                  |
| Day-12 | IM- 9.4, 9.5, 9.6          | Anemia- presenting complaints and brief examination in OPD          |
| Day-13 | IM- 18.3, 18.4             | Central Nervous system History taking and examination               |
| Day-14 | IM- 18.5                   | Central Nervous system- Differential diagnosis and discussion       |
| Day-15 | IM- 18.9, 18.10            | Central Nervous system- Workup and investigations                   |
| Day-16 | IM- 18.6                   | Distinguish UMN V/S LMN in OPD                                      |
| Day-17 | IM- 18.7                   | Speech Disorder in OPD  |
| Day-18 | IM- 12.6, 12,7, 12.8, 12.9 | Thyroid- Presenting complaints and Diagnosis                        |
| Day-19 | IM- 1.18                   | ECG   |
| Day-20 |                            | Drugs, Instruments  |
| Day-21 |                            | Assessment and feedback   |

## 2) Table- B- 4th week

| DAY   | COMPETENCY           | TOPIC   |
|-------|----------------------|---|
| Day-1 | IM- 4.9,4.10         | Fever - Case history and discussion               |
| Day-2 | IM- 4.11, 4.12       | Fever- workup and investigations                  |
| Day-3 | IM- 7.11, 7.12, 7.13 | Rheumatoid Arthritis- case history and discussion |
| Day-4 | IM- 7.14, 7.15       | Rheumatoid Arthritis- Workup and investigations   |
| Day-5 | IM- 11.7, 11.8       | Diabetes- Case history and discussion             |
| Day-6 | IM- 11.10, 11.11     | Diabetes- Workup and investigations               |
| Day-7 |                      | Assessment and feedback                           |

k-A-Mar J

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