

Surgical Curriculum Manual

for undergraduates



DEPARTMENT OF SURGERY
SHALAMAR MEDICAL & DENTAL
COLLEGE
LAHORE
SHALIMAR LINK ROAD

Department of Surgery & Allied at Shalamar Medical & Dental College is committed to produce high standard medical graduates who can generate high quality patient care and employs all possible modalities to achieve this objective.



Surgical Curriculum Manual

Department of Surgery & Allied Shalamar Medical & Dental College

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Message from Chairman of the Department

Over the past years, the enduring clinical traditions of the Faculty of Surgery at Shalamar Medical & Dental College have not only been sustained but have also served as a source of inspiration for the Department of Surgery's mission. These objectives are dedicated to fulfilling the department's significant commitments to both the medical school and Surgical Education.

Medical education represents a nuanced blend of medical and professional learning. It involves mastering fundamental principles and theories while acquiring the necessary knowledge and experience for clinical practice. This education is tasked with conveying the ever-expanding realm of medical science and preparing individuals for a lifetime of competent and thoughtful patient interactions, especially in an era marked by rapid technological advancements and evolving societal needs.

In pursuit of these educational objectives, the Faculty of Surgery must strike a balance between conservatism and creativity. Preserving fundamental principles, such as a solid grasp of basic medical sciences, is universally acknowledged as essential. However, the landscape of medicine is evolving, necessitating a judicious approach to formal education duration, accommodating the growing number and complexity of specialized fields, and recognizing the diverse interests and talents among students. This requires continuous scrutiny and evaluation of our educational goals and processes.

The Surgery Curriculum is designed to offer students a clear and succinct overview of surgical teachings during the clinical phase of their studies at SMDC. This practical phase unfolds at Shalamar Teaching Hospital and Fauji Foundation Teaching Hospital. The Curriculum serves as a roadmap, delineating the extensive knowledge areas that students must master to achieve a comprehensive education in clinical surgery. It includes information on clinical attachments, lecture series, tutorials, exam timetables, and the academic calendar for the year.



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Medical Student Competencies and Overall Institutional Learning Objectives

Shalamar Medical & Dental College, Lahore has established a comprehensive set of competencies and institutional objectives prepare students for practicing medicine in the 21st century. The principles of surgical teaching stand on the general competencies and institutional learning objectives. The specific learning general and objective discussed in this manual associated with each competency and the cognitive domain (knowledge, skill, attitude/behavior) are being continually institutionalized.



The six general clinical competencies for medical students (identical to the general competences of postgraduate training) include

- Integration of the Basic Sciences in Medicine
- Integration of Clinical Knowledge and Skills to Patient Care
- Interpersonal and Communication Skills
- Professionalism
- Organization and Systems-Based Approach to Medicine
- Life Long Learning and Self-Improvement

As we progress through the basic science curriculum of medical school, we would periodically review these competencies and educational objectives. These provide valuable guidelines to organization of the knowledge, skills and attitudes we will teach during this phase of professional growth.

INTRODUCTION

The SMDC Department of Surgery is pleased to offer a clinical teaching curriculum which we promise will be challenging. The material that we will teach encompasses not only General Surgery, but also other surgical specialties.

Students in the core Surgery Rotations will acquire the knowledge and ability to recognize and assist in the treatment of disease during which surgery may play a role in a patient's treatment and recovery. Students will develop skills, knowledge and attitudes in pre-, intra-, and post-operative care of various surgical diseases.



Goals:

By the conclusion of the clinical rotations, students will be able to:

- 1. Diagnose, evaluate, and treat patients with surgical conditions taking into account,
- 2. Recognition of surgical problems.
- 3. Knowledge of appropriate surgical interventions and alternative treatment
- 4. Appropriate pre-operative surgical work up and preparation.
- 5. How to care for the patient in the immediate post-operative period.
- 6. How to recognize post-operative complications needing further surgical care.
- 7. Cost/risk/benefit, as it applies to patient care, and as it relates to appropriate monitoring and/or screening of surgical conditions.
- 8. Be aware of, understand and apply specific surgical protocols in the operating room; e.g., scrubbing, gowning, gloving, draping, and prepping.

Learning Objectives (Core Competencies):

A. Systems Based Practice

- 1. In general, to demonstrate knowledge of the health care system and to understand how to effectively use health care system resources to provide optimum patient care. Please find detailed learning objectives in **Appendix I.**
- 2. Specifically to demonstrate:
 - An understanding of what resources are appropriate.
 - A general concern for patients, as demonstrated in thoroughness of monitoring patients and attitudes toward record keeping.
 - Independent reading concerning problems seen (Problem Based Learning -PBL).

B. Professionalism

- 1. In general, to demonstrate a commitment to professional responsibilities and sensitivity to a diverse patient population.
- 2. Specifically to demonstrate:
 - Ability to relate and perform professionally in a working situation with other members of the Health Care Team.
 - An openness to recognize limitation by using resources referrals and consultation with supervising preceptor or others, when appropriate.
 - A constructively self-critical manner.
 - Ability to perform duties within a professional comportment encompassing such areas as attendance, dress code, and general demeanor.



C. Interpersonal Skills & Communication

- 1. In general, to demonstrate effective information exchange and teaming with patients, their families, and other health professionals.
- 2. Specifically to demonstrate:
 - A sensitivity to understand and relate to the emotional and social background of patients.
 - Good communication skills and rapport with patients, families, other health café professionals, staff, and supervisors.

D. Relationship (Patient) Centered Care

In general, to demonstrate care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health.

E. Practice Based Learning and Improvement

- 1. In general, to demonstrate appraisal and assimilation of scientific evidence, evaluation and improvement of patient care.
- 2. Specifically to demonstrate:
 - Ability to perform the admitting history and physical examination.



- Ability to participate in, and assume appropriate responsibility for, the daily care of the surgical patient, as determined by the preceptor.
- Ability to understand diagnostic procedures and incorporate these into patient management

We hope that after clinical rotations students will not only master the knowledge base that encompasses the "surgical diseases" but also appreciate the role of surgery in the overall care of the patient. The curriculum is



organized in several levels. The first is a scenario and problem based approach, where we will cover common surgical conditions encountered by all physicians, especially in primary care and emergency care. Students will encounter common surgical cases which will be the basis for weekly discussion groups, as well as serving as the test questions on the final oral examination. Students will be expected to master the historical and physical exam findings pertinent to each case, outline the differential diagnosis and outline a plan of treatment.

The second level is organized by organ system, disease process and specialty. A robust series of lectures, including subspecialty lectures is required to be attended throughout the curriculum. These are supplemented by modules available online.

A third level of instruction is potentially the most important—that of learning from patients, residents and attending surgeons. All three will challenge your knowledge base, preparation, decision making skills, coordination and stamina on a daily basis. Surgeons love to teach and an interested prepared student will receive a great amount of education while taking care of patients with experienced surgeons.

While we realize that most students will not pursue careers in surgery, all will require knowledge and experience to properly take care of their patients in whatever field they eventually practice. But some will gain or further an interest in surgery, whether it is in general surgery or one of the many surgical specialties.

The Department of Surgery is available for advice and to help interested students start their careers in the wonderful and rewarding calling of Surgery.

Overview of the Format & Content of Teaching

TEACHING FORMAT

The principal contribution of the Department is to teaching surgery for attainment of MBBS Diploma. However, it also contributes to other aspects of medical education in the 3rd, 4th and 5th year. Students attend clinical sessions in the wards and clinics related to the subjects they are studying.

The Department of Surgery also contributes to other programs at the request of other Faculties. The Department is responsible primarily for the



instruction of the undergraduate course in surgery for the Final Medical Examination (the program begins following the third year medical examination).

Students commence clinical rotations from 3rd year onwards. During this time, they rotate through various surgical consultant-led teams. They are encouraged to develop the skills of clinical history taking and physical examination by attending patients on the ward as well as taking part in the various other clinical and educational activities of the teams to which they are attached. Formal teaching consists of lectures, clinical demonstrations, tutorials, didactic, and bed side teaching.

The teaching settings that occur in the undergraduate teaching include the following:

Lectures

The formal lecture schedule is delivered throughout the curriculum on the core topics in Surgery. The lectures are designed to complement the basic sciences during first two years. The lectures cover the applied aspects of clinical anatomy and physiology by General Surgery, Orthopedic, Urology and Radiology Faculty members.

From 3rd year onwards the lectures begin in relation to clinical aspects of surgical teaching. General



surgery and subspecialties are involved in lecture taking to encompass the basic components of the general surgery and

surgical specialties. The lectures are designed in effort to complement the clinical teaching in the ward to meet the key learning objectives mentioned earlier.

Seminars – Case Scenarios

These lectures are delivered by Consultants within their own discipline and take the form of didactic lectures. The subject matter of the lecture is circulated in advance so the students can prepare it.

Clinico-Pathological Conference - Student Oriented

The primary objective of CPC is teaching of the 4rth & Final Year students. The attendance of these classes is mandatory and students are taught in an interactive sessions regarding common and rare surgical problems.

TEACHING ROUNDS

Bedside instruction is the basic element of teaching in the teaching rounds. The student meets the patient and learns to integrate the impressions that point to a diagnosis. Students learn that, through a rational evaluation of significant findings and an understanding of the mechanisms of the disease, a meaningful diagnosis can be made. Students learn to correlate the impressions of the physical examination and the history with simple, carefully evaluated laboratory tests that strengthen or modify their analysis of the patient's problems.

Through seminars, conferences, demonstrations, and lectures including ward rounds and clinical-pathological/radiological correlation discussions, emphasis returns to analysis of the mechanisms that express themselves as symptoms in the history and signs in the physical examination.

The student learns by participating, under close supervision, in all phases of the patient's care from admission to the hospital through final discharge and follow ups.

CLINICAL ATTACHMENT





Students in 3rd, Fourth and Fifth Year are assigned to all surgical teams for a certain period whereby they attend Outpatients, Theatre, Surgical Day Ward, ward rounds, case conferences and interdisciplinary meetings.

In these attachments, students are exposed to a wide spectrum of surgical diseases. By following patients through their initial presentation, they observe the evolution and resolution of surgical disease processes. Teaching at the bedside, in particular, brings students and patients together for their mutual benefit. The attachments give the students the opportunity to actively expand their knowledge, develop technical and clinical skills and initiate relationships with patients, residents, faculty and staff.

The Department of Surgery engages in an array of different teaching modalities ranging from conventional didactic lectures, patient oriented bedside tutorials and out-patient clinic to interactive problem-solving style discussions.



SKILLS

The following skills are taught as part of the undergraduate program.

Communication

Communication is clearly vital attribute for any doctor. The department of surgery encourages and teaches Communication skills and supports and subscribes to initiatives to improve communication skills in medical students and indeed as interns in their pre-registration year.

Presentation skills

Are developed throughout the course, both to small and large groups. The clinical examination section of the final

surgical examination requires the student to present their findings formally to their examiners, making it important for students to develop these skills.

Practical Skills such as hand scrubbing

Working in groups

Is a vital part of the practice of medicine, both in hospitals and in the community. All through their clinic attachments, students are attached to clinical teams and are encouraged to take part in team activities. They are also taught extensively about the modern multidisciplinary nature of surgical decision-making and therapy



ASSESSMENT OF EXAMINATION

Assessment of the performance is principally by examination both at the end of the Final Medical Examination, students are also assessed at the end of each rotation.

The following methods are used for the Final Medical Examinations

- Written examination
- MCQ (Single Best Answer)
- Case Scenarios and Principles
- OSPE 1 Clinical Skill (unmanned)
- OSPE 2 Clinical Skill (manned)
- Clinical Examination
- Continuous Assessment: clinical attachment, MCQ's, OSCE

Students Attendance

Student attendance is vital for clinical medicine modules and this is checked at all tutorial sessions. Students must attend at least 75% of their sessions to be allowed to sit their exams. The attendance of each student is also discussed with the clinical tutor. A written explanation of absence is encouraged for the students file.

Teaching Venues and Facilities

The undergraduate teaching is done at various venues listed here.

Specialty	OPD Teaching	ER Teaching	Inpatient Teaching	OR Teaching	Hospital Auditorium	College Auditorium
General Surgery	Room 4a, 4b, Breast Center	ER	MSW/ FSW	OR 4a, 5,6,7	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
Orthopedics	Outpatient Complex	ER	MSW/ FSW	OR 2	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
Urology	Outpatient Complex	ER	MSW/ FSW	OR 3	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
Anesthesia	Outpatient Complex	ER	MSW/ FSW	OR Complex	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
Plastic Surgery	Outpatient Complex	ER	MSW/ FSW	OR 6	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
Cardiovascular Surgery	Outpatient Complex	ER	MSW/ FSW	OR8	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
Radiology	Outpatient Complex	ER	MSW/ FSW	NA	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
Ophthalmology	Outpatient Complex	ER	MSW/ FSW	OR 2	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC
ENT & Head Neck Surgery	Outpatient Complex	ER	MSW/ FSW	OR 5	Tumor Board, Grand Rounds, M&M, Faculty Development	CPC



- The objective is complement the basic sciences by integrating and synchronizing the key clinical applications of the anatomy, physiology and biochemistry through applied aspect teaching.
- Mode of Teaching: Lectures

Year 2

- The objective is augment the basic sciences by integrating and synchronizing the key clinical applications of the anatomy, physiology and biochemistry through applied aspect teaching.
- Mode of Teaching: Lectures

Year 3

- Year III would commence with clinical teaching in wards. The students would learn how to
 interact with the patient, colleagues paramedics in an ethical and professional manner. They
 would also learn how to take history and conduct a meaningful clinical examination that would
 yield towards diagnosis making.
- Lectures, Scenario Based Learning, Didactic, Bedside teaching, Online Resources

Year 4

- Year IV would be used to teach core topics in General & Trauma Surgery, Orthopedics, Urology and Anesthesia and refine the clinical skills in wards. The students would rotate in General Surgery, Urology, Orthopedics, Anesthesia, Radiology for didactic and bedside teaching. They would also refine the way to take history and conduct a meaningful clinical examination that would yield towards diagnosis making.
- Lectures, Scenario Based Learning, Didactic, Bedside teaching, Online Resources



- Year V would be used to teach core topics in General & Trauma, Pediatric, Cardiovascular and Plastic Surgery, Orthopedics, Urology, Neurosurgery and Anesthesia and refine the clinical skills in wards. The students would rotate in General Surgery, Urology, Orthopedics, Anesthesia, Radiology for didactic and bedside teaching. They would also refine their diagnosis making and managment of the patients.
- Lectures, Scenario Based Learning, Didactic, Bedside teaching, Online Resources, Seminars

Overview of Key Learning Objectives and Mode of Teaching

Year Wise Surgery & Allied Rotation Plan

Hour Distribution according to PMDC Requirements

Programs	Rotation Plan	Year 1 Lectures	Year 1 Rotation	Year 2 Lectures	Year 2 Rotation	Year 3 Lectures	Year 3 Rotation	Year 4 Lectures	Year 4 Rotation	Year 5 Lectures	Year 5 Rotation	Total Hours
General Surgery	Y3, 6 wks rotation 3 at SMDC and 3 at FFH; Y4, 4 wks rotation; Y5, 8 wks rotation, Trauma Module , Revision Lectures	3	22	8	12	33	54	19	72	189	226	638
General Orthopedics	Y3 1 Wk rotation & Y4			2		1	10	18	30	9	30	100
Special Orthopedics	2 wk rotation and Y5 1 wk											0
Neurosurgery								5		5		10
Plastic Surgery	Y4, 1 wk rotation; Y5 1 wk rotation				4			6		10	35	55
Urology	Y3: 1 wk ; Y4 2 wk rotation			4			10	14	30	6		64
Cardiovascular Surgery	Y4, 1 wk rotation; Y5 1 wk rotation			2						5	20	27
Anesthesia &	Y4, 2 week rotation &					2		9		4	35	50
Critical Care	Y5 1 Wk Rotation											0
Radiology	Y3, 1 week rotation						6		18			24
Total		3	22	16	16	36	80	71	150	228	346	968

Learning Resources & Facilities at SMDC

Central Library & Departmental Library

Shalamar Medical & Dental College has large book and journal reserve for the help of the students. The students can benefit from the environment for their career enhancement. The central and departmental libraries are avaible for the student service.

Graduate Clinical Skill Lab

The department of Education has developed a Clinical Skill Lab. This skill lab has many manequins available for the student teaching on hand. The students learn basic surgical techniques which are importanat for the patient care. The students during their curriculum would visit the lab and wpuld benefit from it without harming the patients themselves.

Surgical Web Resources

A website is being launched with important scenario and problem based learning objective. The website would contain the links for various surgical clinical methods, tutorials, didactics, videos. Operative procedure videos to aid the student teaching. The website would also include Powerpoint Presentations for the student teaching.

Surgical Teaching Co-rdination Cell

A cell has been established in the PA's office to Chair of Surgery for coordination of the surgical teaching among different classes. The data and

processes are controlled from this cell and PA to HOD can be contacted in this regard.







Surgical Teaching Year 1 & 2



The objective is to complement the basic sciences by integrating and synchronizing the key clinical applications of the anatomy, physiology and biochemistry through applied aspect teaching. Department of General Surgery, Orthopedics, Radiology, Anesthesia, Cardiovascular Surgery and Urology Faculty members have been designated the lecture schedule designed to complement the basic science teaching in coordination with the basic science departments and Department of Medical Education. The first two years have integrated modular teaching system in which the Department of Surgery and Allied Specialties contribute to the PBL and other sessions as part of the integrated curriculum. For early clinical exposure the first year and second year students are rotated within all subspecialties.

The detail of lectures to be delivered has been attached in this manual at the end. (Appendix II, III).

During these years the students are tested with MCQ based assessment papers (Cognitive Domain) conducted throughout the year and the results are shared with Department of Medical Education and Student Affairs through the software.

Prof. Muaz ul Hassan and Dr Rizwan A Khan are responsible for ensuring the overall coordination and conduction of assessments during Year 1 & 2.

Mode of Teaching: Lectures (Cognitive Domain); Problem Based Learning

Surgical Teaching Year 3



In Third year of medical school, clinical teaching in surgery would commence. The aim is to provide medical students with exposure to common surgical problems, develop basic clinical skills appropriate for third year curriculum and to broaden their horizon about surgery and its subspecialties so that they can evaluate surgery as a future career.

Upon completion of the surgical rotation, following general objectives of clinical surgical teaching should be met by the student:

- a. Student is able to take meaningful clinical history and perform clinical examination.
- b. Demonstrate professional attitude and values towards colleagues and patients
- c. The above said objectives have to be correlated with clinical application of these modules.

The Department of General Surgery, Orthopedics, Radiology and Urology Faculty members have been designated lecture schedule (Appendix IV) designed to introduce basics of surgery in synchrony with basic sciences. The students are subdivided into batches and rotate for 8 weeks in Shalamar Teaching Hospital and Fauji Foundation Hospital (See Appendix V). The teaching would be done in Didactic sessions and bedside teaching with equal focus. The teaching modules for clinical teaching have been developed (See Below). Online Modules are also available at the website to complement the didactic and bedside teaching.

Shalamar Hospital

	Week 1	Week 2	Week 3	Week 4 (Orthopedics)
Monday	History Taking	Examination of Lump	History Taking of Thyroid Disease	History Taking in Orthopedics
Tuesday	History of Pain	Examination of Ulcer	Examination of Thyroid	Examination of Shoulder and Elbow Joint
Wednesday	History of Lump	History Taking of GIT	Examination of Neck Swellings	Examination of Knee Joint
Thursday	History of Ulcer	Examination of Abdomen	Ano-rectal Examination	Examination of Hip Joint
Friday	General Physical Examination	Symptoms of Ano-rectal Disease	History Taking & Examination of Breast	Examination of Spine

Fauji Foundation Hospital

	Week 1	Week 2	Week 3	Week 4 (Urology & Radiology)
Monday	History Taking	Examination of Lump	History & Examination of Salivary Glands	History of Urinary Symptoms
Tuesday	History of Pain	Examination of Ulcer	Assessment of Arterial System of Limbs	History of Urinary Symptoms
Wednesday	History of Lump	History Taking of GIT	Acute and Chronic Arterial Insufficiency	Examination of Urinary Tract
Thursday	History of Ulcer	Examination of Abdomen	Assessment of Venous Circulation of Limbs	Principles of X-rays
Friday	General Physical Examination	Symptoms of Ano-rectal Disease	History Taking and Examination of Hernia	Principles of Ultrasound

The detail of the student Batch rotating in clinical wards is attached here in Appendix VI. At the end of each rotation both at **Shalamar Teaching Hospital** and **Fauji Foundation Hospital**, an assessment of clinical skills would be conducted in the Department of Surgery.

The detail of lectures to be delivered has been attached in this manual at the end. (Appendix V).

During this year the students are tested for delivered lectures with MCQ based assessment papers (Cognitive Domain) conducted throughout the year and the results are shared with Department of Medical Education and Student Affairs through the software.

For the Online Modules (involving History Taking, Clinical Examination and Communication Skills), an OSPE is conducted (4 Stations) which would assess the Clinical Skills of the students through Cognitive, Psychomotor and Affective Domain. The OSPE has 30% Cognitive, 50% Psychomotor and 20% Affective domain. 10% would be reserved for attendance. The station detail for example has been given below:

Station 1 (30 Marks) (5 minutes) History Taking	Station 3 (20 Marks) (5 minutes) Communication Skills (Consenting, Counseling)
Station 2 (30 Marks) (5 minutes) Clinical Surgical Examination	Station 4 (20 Marks) (5 minutes) Static Station with Pictures, X-rays, Patients, for assessing the cognitive portion of teaching

Prof Tauseef Asghar is responsible for ensuring the overall coordination and conduction of assessments during Year 3.

Mode of Teaching: Lectures (Cognitive Domain)

Online Modules, Didactics & Bedside Teaching (Psychomotor & Affective Domain)

Surgical Teaching

Year 4



In fourth year of medical school teaching, clinical teaching in surgery would base on the foundation from Curriculum of third year. The aim is to provide medical students with enhanced exposure to common surgical problems, develop basic clinical skills appropriate for fourth year curriculum and to broaden their horizon about surgery and its subspecialties so that they can evaluate surgery as a future career.

Upon completion of the surgical rotation, following general objectives of clinical surgical teaching should be met by the student:

- a. Student is able to take meaningful clinical history and perform clinical examination leading to diagnosis making.
- b. Demonstrate and strengthen professional attitude and values towards colleagues and patients
- c. Identify the common surgical problems and construct appropriate diagnostic and brief management plan
- d. Identify the common surgical emergencies and acquire surgical consultation
- e. Learn to apply the principles of resuscitation to a patient with shock

Fourth Year Clinical Teaching would primarily comprise patient side teaching at C3 and above cognitive level, P1-3 Psychomotor skill level and A1-2 affective level. The teaching should be in form of didactic, bedside and case-based learning with eventual transformation to problem based learning (PBL).

Trauma Module is conducted through SeLMS for the fourth year students. A **Clinical Skill Competition** is arranged annually. All students are required to write down 20 histories and clinical examinations for various disorders.

General Surgery Rotation:

Six week rotation would be split into surgical units (3 weeks each). Prof. Tauseef Asghar from Surgical Unit 1 and Prof Maaz ul Hasan & Dr. Rizwan A Khan from Unit 2 would be responsible for the overall clinical teaching of the fourth year.

Following Core Topics need to be essentially covered in three weeks of general surgical rotation by Surgical Unit 1:

- 1. Examination of Swelling, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 2. Examination of Ulcer, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 3. Examination of Neck Swellings, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 4. Examination of Thyroid, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 5. Examination of Peripheral Neurovascular System, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 6. Examination of varicose veins & DVT, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 7. Examination of abdominal exam, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 8. Examination of Breast, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- Examination of Inguinoscrotal Area, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis
 Making
- 10. Examination of Perianal Area, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making

	4 th Year Teaching Unit 1									
	Session 1	Session 2								
	10:30-12:30	12:30-1:00								
	Surgical / Allied OPD	OPD Tutorial Room								
Monday	Prof. Tauseef Asghar	Prof. Tauseef Asghar								
Wednesday	Prof. Tauseef Asghar	Dr Ahsan Shafiq/ Prof Khwaja Azim								
Friday	Radiology Lecture Hall 2	Dr. Talat Waseem								
		4 th Year Teaching Unit 1								
	Session 1	Session 2								
	10:30-12:30	12:30-1:00								
	OT	OT								
Tuesday	Prof. Tauseef Asghar	Prof. Tauseef Asghar								
Thursday	Prof. Tauseef Asghar	Prof. Tauseef Asghar								

4 th Year Teaching Unit 2							
	Session 1	Session 2					
	10:30-12:30	12:30-1:00					
	Surgical Ward/ Allied OPD	OPD Tutorial Room					
Tuesday	Dr. Rizwan Khan	Prof. Hammad Rana					
Thursday	Dr. Rizwan Khan	Dr. Rizwan Khan					
		4 th Year Teaching Unit 2					
	Session 1	Session 2					
	10:30-12:30	12:30-1:00					
	OT	OT					
Monday	Dr. Rizwan Khan	Dr. Rizwan Khan					
Wednesday	Dr. Rizwan Khan	Dr. Rizwan Khan					
Friday							

^{*}MIT (Mode of Instruction in Teaching); **PST (Patient Side Teaching); ***MOA (Mode of Assessment)

Surgical Unit 1: Week 1									
	Session 1	(10:30 am-	12:30pm)		Session 2 (12:30-1:00 pm)				
	Venue	MIT*	Topic	MOA***	Venue	MIT			
Monday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditorium	Case Presentation			
Tuesday	Theater	Didactic	Introduction to operation theater environment (Preop, Postop, Theaters, CSSD, Administrative units)						
Wednesday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditorium	Peri-operative care: Case Presentation			
Thursday	Theater	Didactic	Preoperative Assessment & Pre	paration					
Friday	Lecture Hall # 2	Radiolog y- Lecture	Introduction to Radiology, chest Radiology	MCQs, OSCE	Hospital Auditorium	Journal Club/ Research Work			
Saturday	Holiday								

Surgical Unit 1: Week 2									
	Session 1	Session 1 (10:30 am- 12:30pm) Session 2 (12:30-1:00 pm)							
	Venue	MIT*	Topic	MOA**	Venue	MIT			
Monday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditoriu m	Case Presentation			
Tuesday	Theater	Didactic	Postoperative Care & Monitoring						

Wednesday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditoriu m	Perioperative care: Case Presentation
Thursday	Theater	Didactic	Operation Theater equipment (lig instruments, anesthesia machine,			roscopy
Friday	Lecture Hall # 2	Radiology- Lecture	CT-Brain-Emergent Pathologies	MCQs, OSCE	Hospital Auditoriu m	Journal Club/ Research Work
Saturday	Holiday					

Surgical Unit 1: Week 3								
	Session 1	(10:30 am- 12	Session 2 (12:30-1:00 pm)					
	Venue	MIT*	Topic	MOA**	Venue	MIT		
Monday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditoriu m	Case Presentation		
Tuesday	Theater	Didactic	Peri-operative care, Monitoring and	d handling i	issues			
Wednesday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditoriu m	Peri- operative care: Case Presentation		
Thursday	Theater	Didactic	Principles and Disinfection, Antise Operation theater	epsis and As	epsis and their	r Utility in		
Friday	Lecture Hall # 2	Radiology- Lecture	Abdominal Plain Radiography, KUB, Int-estinal Obstruction, Pneumoperitoneum	MCQs, OSCE	Hospital Auditoriu m	Journal Club/ Research Work		
Saturday	Holiday							

Following Core Topics need to be essentially covered and form the learning objectives in three weeks of general surgical rotation by Surgical Unit 2:

- 1. Examination of Neck Swellings, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 2. Examination of parotid & Submandibular Swellings, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 3. Examination of Abdominal Swellings and Masses, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 4. Examination of Inguinoscrotal Swellings, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 5. Examination of Peripheral Neurovascular System, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making

- 6. Examination of Diabetic Foot, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 7. Examination of abdominal exam, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 8. Examination of Breast, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 9. Examination of Acute Abdomen, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making
- 10. Examination of Perianal Area, Differential Diagnosis, Understanding Clinical Reasoning and Diagnosis Making.

*MIT (Mode of Instruction in Teaching); **PST (Patient Side Teaching); ***MOA (Mode of Assessment)

Surgical Unit 2: Week 1									
Surgical Unit	Session 1 Venue	(10·30 am- MIT*	12·30nm) Topic	MOA**	* Session 2 (Venue	(12·30-1·00 pm) MIT			
	Session 1	(10:30 am-	12:30pm)	,	Session 2 (12:	30-1:00 pm)			
	Venue	MIT*	Topic	MOA***	Venue u	MIT			
Monday	OPD	PST**	Case based Learning and Patient side Teaching o	MCQs, OSCE	Hospital Auditorium	Case Presentation			
Tuesday	Theater	Didactic	Aseptic Technique, Gloving & Go	wning					
Wednesday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital u Auditorium	Peri-operative care: Case Presentation			
Thursday	Theater	Didactic	Basic suturing Techniques & Hem	ostasis (P1 o	nly Observatio	on in Theater)			
Friday	Lecture Hall # 2 2	Radiolo gy- Lecture	Contrast Studies -GI th X-rays-Spine and Limb Fracture	MCQs, SOSCE ,	Hospital Auditorium	Journal Club/ Research Work			
Saturday	Holiday								
						Work			
Saturday	Holiday								

Surgical Unit 2: Week 3										
	Session 1	(10:30 am-	Session 2 (12	Session 2 (12:30-1:00 pm)						
	Venue	MIT*	Topic	MOA***	Venue	MIT				
Monday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditorium	Case Presentation				
Tuesday	Theater	Didactic	Theater Behaviors & Ethics							
Wednesday	OPD	PST**	Case based Learning and Patient side Teaching	MCQs, OSCE	Hospital Auditorium	Peri-operative care: Case Presentation				
Thursday	Theater	Didactic	Blood & Blood Products, indication	s of use, Adv	antages and D	isadvantages				
Friday	Lecture Hall # 2	Radiolo gy- Lecture	Anatomy & General Pathologies CT Head to Toes	MCQs, OSCE	Hospital Auditorium	Journal Club/ Research Work				

Saturday Holiday

Orthopedic Surgery Rotation:

Following are the topic need to essentially covered in 2 Weeks of Orthopedics Clinical Rotation.

1.	Examination of Shoulder of Shoulder	Understanding of clinical reasoning –Diagnosis Making
2.	Examination of Elbow	Understanding of clinical reasoning –Diagnosis Making
3.	Examination of Wrist/Hand	Understanding of clinical reasoning –Diagnosis Making
4.	Examination of Spine	Understanding of clinical reasoning –Diagnosis Making
5.	Examination of Hip	Understanding of clinical reasoning –Diagnosis Making
6.	Examination of Knee	Understanding of clinical reasoning –Diagnosis Making
7.	Examination of Ankle/Foot	Understanding of clinical reasoning –Diagnosis Making

Orthopedics: Week 1									
Session 1 (10:30 am-12:30pm) Session 2 (12:30-1:00 pm)									
Orthopedics: Week 2									
	Session 1	(10:30 am-1	2:30pm)		Session 2	2 (12:3	30-1:00 pm)		
	Venue	MIT*	Topic	MM O A * **	Venue	I MI	T		
Monday	OPD	PST	Examination of Spine	MCQs	OPD	suSar	me		
			(Dr.Usman Sarwar)	OSCE,					
Tuesday	OT	Didactic	Principles of ORIF	MC	CQs C	T	Same		
			(Dr.Usman Sarwar)	OSC	E,				
Wednesday	OPD	PST	Examination of Hip	MCQs	OPD	E	xam of Knee		
			(Dr.Muhammad Saleem)	OSCE					
Thursday	OT	Didactic	Principles of Debridement+ CT/MR	I Pts. MCC	Qs, OPD	Princ	ciples of		
			Dr,Muhammad Saleem)	OSC	E	W	ound Closure		
Friday	Lecture	Radiology-	MRI-Brain, Spine, MRCP, Pelvis		Hospital		Journal		
	Hall#	Lecture			Auditori	ım	Club/		
	2						Research		
							Work		
Saturday	Holiday								

Urology Rotation:

Urology: Week 1										
	Session 1	1 (10:30 am-	12:30pm)		Session 2 (1	Session 2 (12:30-1:00 pm)				
	Venue	MIT*	Topic	MOA**	Venue	MIT				
Monday	Theatr e	Didactic	Urology theatre equipment, Procedure	MCQ'S OSCE'S	GOT	Case Presentation				
Tuesday	OPD	PST	Bladder out let obstruction	MC OSC	•	Case				
			Presentation							

Wednesday	OPD	PST	Bladder tumor	MCQ'S OSCE'S	OPD	Case Presentation
Thursday	OPD	PST	Renal Stone, Common Urological Su Pre & Post Op Care Presentation	rgery MCQ OSC		Case
Friday	Lecture Hall # 2	Radiolog y-Lecture	Ultrasound-Hepatobiliary,KUB	MCQ'S OSCE'S	Hospital Auditoriu m	Journal Club/ Research Work
Saturday	Holiday					

Urology: We	Urology: Week 2									
	Session 1	(10:30 am- 12	2:30pm)		Session 2 (12:30-1:00 pm)					
	Venue	MIT*	Topic	MOA***	Venue	MIT				
Monday	OPD	PST	B.P.H	MCQ'S OSCE'S	OPD	Case Presentation				
Tuesday	OPD	PST	CA Prostate	MCQ'S OSCE'S	OPD	Case Presentation				
Wednesday	OPD	PST	UTI	MCQ'S OSCE'S	OPD	Case Presentation				
Thursday	Thearter	Didactic	Common Urological Surgeries	MCQ'S OSCE'S	OPD	Case Presentation				
Friday	Lecture Hall # 2	Radiology- Lecture	Interventional Radiology	MCQs, OSCE	Hospital Auditoriu m	Journal Club/ Research Work				
Saturday	Holiday									

Anesthesia Rotation:

Student should be able to have basic understanding of following Procedures:

- Airway, Chin Lift & Jaw Thrust with Mask holding, Triple Maneuver
- LMA insertion Attempt (Minimum Two), Intubation Attempt,
- Spinal Anesthesia (basics), Intravenous line insertion technique and practical.

Student would be able to have the basic knowledge of:

- Basic Life Support
- General Anesthesia (Intravenous drugs, Intravenous Analgesics, Muscle relaxant &Local Anesthetics)
- Epidural Anesthesia, Spinal Anesthesia & Palpation of Vertebral column
- Basic Fluid Management & Arterial blood gases

Anesthesia	Week 1	
	Session 1 (10:30 am- 12:30pm)	Session 2 (12:30-1:00 pm)

	Venue	MIT*	Topic	MOA** *	Venue	MIT
Monday	ОТ	PST	Airway+ Chin Lift, Tripple Manouver (Prof.Muhammad Mubeen)	MCQs, OSCE	OT	Jaw Thrust with mask holding
Tuesday	OT	Didactic	General Anesthesia (Dr.Aamir Waseem)	MCQs OSCE	OT	Same
Wednesd ay	OT	Didactic	Basic Life Support (Dr.Aamir Bashir)	MCQs, OSCE	OT	Same
Thursday	ОТ	PST	IV Line Airways (Dr.Itrat Kazmi)	MCQs,	OT	Repeat
Friday	Lectur e Hall# 2	Radiolo gy- Lecture	CT- Trauma	MCQs, OSCE	Hospital Auditoriu m	Journal Club/ Research Work
Saturday	Holiday					

Anesthesia: Week 2								
	Session 1	(10:30 am-	12:30pm)		Session 2 (12	Session 2 (12:30-1:00 pm)		
	Venue	MIT*	Topic	MOA***	Venue	MIT		
Monday	OT	Didactic	Basic Fluid Management (Prof. M. Mubeen)	MCQs, OSCE	OT	Arterial blood gases		
Tuesday	OT	PST	Spinal Anesthesia Basic, of Spinal Anesthesia (Dr.Itrat Kazmi)	MCQs, OSCE	OT Vertel	Palpation oral column		
Wednesd ay	ОТ	PST	LMA, insertion attempt, intubation attempt (Dr.Aamir Waseem)	MCQs, OSCE	OT	Intravenous line insertion techniques & Practical		
Thursday	OT		Evaluation of Batch students					
Friday	Lecture Hall# 2	Radiolog y-Lecture	Ultrasound-Obs, Gynae, Small Parts	MCQs, OSCE	Hospital Auditorium	Journal Club/ Research Work		
Saturday	Holiday							

The detail of the student Batch rotating in clinical wards is attached here in Appendix VI. At the end of each rotation both at **Shalamar Teaching Hospital**, an assessment of clinical skills would be conducted in the Department of Surgery.

For the 4th Year Class a Trauma Module would be administered through SeLMS based on the basics of ATLS protocol, which would be combination of tutorial, didactic and psychomotor learning in single day with collaboration of the Anesthesia, Orthopedics and Surgery Department. The activity would end with an MCQ test which in the end would be part of the cumulative scoring in surgery.

The detail of lectures to be delivered has been attached in this manual at the end. (Appendix VII).

During this year the students are tested for delivered lectures with MCQ based assessment papers (Cognitive Domain) conducted throughout the year and the results are shared with Department of Medical Education and Student Affairs through the software.

For the Online Modules (involving History Taking, Clinical Examination and Communication Skills), an OSPE is conducted (10 Stations) which would assess the Clinical Skills of the students through Cognitive, Psychomotor and Affective Domain. The OSPE has 30% Cognitive, 50% Psychomotor and 20% Affective domain. 10% would be reserved for attendance. The station detail for example has been given below:

Station 1 Radiology Interactive	Station 2 Urology Interactive	Station 3 Orthopedics Interactive	Station 4 History Taking	Station 5 History Taking Interactive
Station 6 Abdominal Examination Interacive	Station 7 Neck Examination Interactive	Station 8 Examination of Lump Interactive	Station 9 Examination of Ulcer Interactive	Station 10 General Surgery Short Cases Interactive

Prof. Hammad Naeem Rana is responsible for ensuring the overall coordination and conduction of assessments during Year 4.

Mode of Teaching: Lectures (Cognitive Domain)

Online Modules, Didactics & Bedside Teaching (Psychomotor & Affective Domain)

Surgical Teaching

Year 5



In final year of medical school teaching, clinical teaching in surgery would base on the foundation from Curriculum of fourth year. The aim is to provide medical students with enhanced exposure to common surgical problems, develop basic clinical skills appropriate for final year curriculum and to broaden their horizon about surgery and its subspecialties so that they can evaluate surgery as a future career.

Upon completion of the surgical rotation, following general objectives of clinical surgical teaching should be met by the student:

- a. Student is able to take meaningful clinical history and perform clinical examination leading to diagnosis making.
- b. Demonstrate and strengthen professional attitude and values towards colleagues and patients
- c. Identify the common surgical problems and construct appropriate diagnostic and brief management plan
- d. Identify the common surgical emergencies and acquire surgical consultation
- e. Learn to apply the principles of resuscitation to a patient with shock

Final Year Clinical Teaching would primarily comprise patient side teaching at C3 (Bloom's Taxonomy) and above cognitive level, P1-3 Psychomotor skill level and A1-2 affective level. The teaching should be in form of didactic, bedside and case-based learning with eventual transformation to problem based learning (PBL).

The Department of General Surgery, Orthopedics, Radiology, Anesthesia, Cardiothoracic Surgery, Pediatric Surgery, Neurosurgery and Urology Faculty members have been designated the lecture schedule designed to introduce basics of surgery. Basics of clinical judgment and approaches to various common presentations of surgical problems would

be introduced. The students are subdivided into batches and rotate for 12 weeks in **Shalamar Teaching Hospital (See Appendix)**. The teaching would be done in Didactic sessions and bedside teaching with equal focus. The teaching modules for clinical teaching have been developed. Online Modules are also available at the website to complement the didactic and bedside teaching.

TraumaModule would be conducted on a selected day for the final year students. A **Clinical Skill Competition** would also be arranged. All students would be required to write down 20 histories and clinical examinations for various disorders. An online **Surgical Quiz of the Week** would be administered based on problem based learning.

The students would be exposed to Case Presentations, Journal Club in the Surgical Units on alternate days.

Following **Online Modules** would be developed which would be problem based and scenario-based learning modules for the overall surgical teaching to cover the core topics. These modules would be made available through a virtual learning environment.

- 1. Upper GI Bleed
- 2. Lower GI Bleed
- 3. Postoperative Respiratory Distress
- Management of Acute Revealed or Concealed Hemorrhage
- 5. Postoperative Fever
- 6. Pain Management
- 7. Acute intestinal Obstruction
- 8. Acute Abdomen-Peritonitis
- 9. Dealing with Head Injury
- 10. ABC of the Trauma patient
- 11. Obstructive Jaundice- Painful
- 12. Obstructive Jaundice- Painless
- 13. Dysphagia
- 14. Painful Defecation
- 15. Bleeding per Rectum
- 16. Gastric Outlet Obstruction
- 17. Carcinoma Breast Stage 1
- 18. Carcinoma Breast Stage 2
- 19. Carcinoma Breast Stage 3
- 20. Carcinoma Breast Stage 4
- 21. Carcinoma in Situ Breast
- 22. Colorectal Cancer
- 23. Ulcerative Colitis
- 24. Crohn's Disease
- 25. Pain Epigastrium
- 26. Pain Right Hypochondrium
- 27. Pain Right Ileac Fossa
- 28. Pain Periumblical region

- 29. Pain Hypogastric Region
- 30. Pain left Iliac Fossa
- 31. Pain Flank
- 32. Inguinoscrotal Swelling
- 33. Abdominal Mass
- 34. Blunt Abdominal Trauma

General Surgery Rotation:

12 weeks rotation would be split into two surgical units (6 weeks each). Final Year students would be taught in 4 sessions to encompass various dimensions of clinical teaching.

Here is the teaching roster for the final year students in Unit 1 & 2.

Final Year Teaching- OPD Days- Unit 1								
	Session 1	Session 2	Break	Session 3	Session 4			
	11:00-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00			
	Surgical OPD/ Ward, Presentations/ Journal Club/ Topic Presentations	Surgical OPD/ Ward		Surgical OPD/	College Skill Lab			
Monday	Prof. Khwaja Azim	Prof. Khwaja Azim		Prof Khwaja Azim	Dr. Roshan Butt			
Wednesday	Prof. Tauseef Asghar	Prof. Tauseef Asghar		Prof Tauseef Asghar	Dr. Roshan Butt			
Friday	Dr Talat Waseem	Dr. Talat Waseem		Dr Talat Waseem	Dr. Roshan Butt			

	Final Year Teaching- Theater Days- Unit 1					
	Session 1	Session 2	Break	Session 3	Session 4	
	11:00-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00	
	OT	OT		OT	OT	
Tuesday	Prof. Khwaja Azim	Dr Talat Waseem		Dr Ahsan Shafiq	Dr Ammara Younus	
Thursday	Prof. Khwaja Azim	Dr Talat Waseem		Dr Tatheer Abbas	Dr Ammara Younus	

Final Year Teaching- Evening Emergencies (Emergency Surgery)- Unit 1						
Monday	Tuesday	Wednesday	Thursday	Friday		
3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM		
Senior Registrar on Call	Senior Registrar on Call	Senior Registrar on Call	Senior Registrar on Call	Senior Registrar on Call		

Final Year Teaching- OPD Days- Unit 2						
	Session 1	Session 2	Break	Session 3	Session 4	
	10:30-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00	

	Surgical OPD/ Ward	Hospital Auditorium	MSW Demo/ Surgical OPD	College Skill Lab
Tuesday	Prof. Hammad Rana	Prof. Hammad Rana	Prof. Hammad Rana	Dr. Rooh ul Ain
Thursday	Prof. Hammad Rana	Prof. Hammad Rana	Prof. Hammad Rana	Dr. Rooh ul Ain

Final Year Teaching- Theater Days- Unit 2						
	Session 1	Session 2	Break	Session 3	Session 4	
	10:30-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00	
	OT	OT		OT	OT	
Monday	Prof. Hammad Rana	Prof. Hammad Rana		Prof. Hammad Rana	Prof. Hammad Rana	
Wednesday	Prof. Hammad Rana	Prof. Hammad Rana		Prof. Hammad Rana	Prof. Hammad Rana	
Friday	Prof. Hammad Rana	Prof. Hammad Rana		Prof. Hammad Rana	Prof. Hammad Rana	

Final Year Teaching- Evening Emergencies (Emergency Surgery)- Unit 2						
Monday	Tuesday	Wednesday	Thursday	Friday		
3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM		
Senior Registrar on	Senior Registrar on	Senior Registrar on	Senior Registrar on	Senior Registrar on		
Call	Call	Call	Call	Call		

For One month the students are rotated within different subspecialties (Plastic Surgery, Anesthesia and Critical care, Cardiovascular Surgery and Orthopedic Surgery).

Final Year Teaching- OPD Days- Allied Specialties (Anesthesia)							
	Session 1	Session 2	Break	Session 3	Session 4		
	10:30-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00		
	GOT	GOT		GOT	GOT		
Monday	Prof. Dr. M. Mubeen	Prof. Dr. M. Mubeen		Prof. Dr. M. Mubeen	Prof. Dr. M. Mubeen		
Tuesday	Dr. Ittrat Hussain Kazimi	Dr. Ittrat Hussain Kazimi		Dr. Ittrat Hussain Kazimi	Dr. Ittrat Hussain Kazimi		
Wednesday	Dr. Amir Bashir	Dr. Amir Bashir		Dr. Amir Bashir	Dr. Amir Bashir		
Thursday	Dr. Amir Waseem	Dr. Amir Waseem		Dr. Amir Waseem	Dr. Amir Waseem		

Friday	Prof. Dr. M. Mubeen	Prof. Dr. M. Mubeen		Prof. Dr. M. Mubeen	Prof. Dr. M. Mubeen		
Final Year Teaching- OPD Days- Allied Specialties(Orthopedic)							
	Session 1	Session 2	Break	Session 3	Session 4		
	10:30-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00		
	Ortho OPD	Ortho OPD		Ortho OPD	Ortho OPD		
Monday	Prof. Dr. M. Saleem	Prof. Dr. M. Saleem		Prof. Dr. M. Saleem	Prof. Dr. M. Saleem		
Tuesday	Dr. Muhammad Ali	Dr. Muhammad Ali		Dr. Muhammad Ali	Dr. Muhammad Ali		
Wednesday	Prof. Dr. M. Saleem	Prof. Dr. M. Saleem		Prof. Dr. M. Saleem	Prof. Dr. M. Saleem		
Thursday	Dr. Usman Sarwar	Dr. Usman Sarwar		Dr. Usman Sarwar	Dr. Usman Sarwar		
Friday	Dr. Muhammad Ali	Dr. Muhammad Ali		Dr. Muhammad Ali	Dr. Muhammad Ali		
	Final Year Teacl	ning- OPD Days- Allied	l Specialties (Cardiac Vascular Surgery)			
	Session 1	Session 2	Break	Session 3	Session 4		
	10:30-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00		
	Cardiac ICU	Cardiac ICU		Cardiac ICU	Cardiac ICU		
Monday	Dr Ahsan Arif	Dr Ahsan Arif		Dr Ahsan Arif	Dr Ahsan Arif		
Tuesday	Dr Ahsan Arif	Dr Ahsan Arif		Dr Ahsan Arif	Dr Ahsan Arif		
Wednesday	Dr Ahsan Arif	Dr Ahsan Arif		Dr Ahsan Arif	Dr Ahsan Arif		
Thursday	Dr Ahsan Arif	Dr Ahsan Arif		Dr Ahsan Arif	Dr Ahsan Arif		
Friday	Dr Ahsan Arif	Dr Ahsan Arif		Dr Ahsan Arif	Dr Ahsan Arif		
	Final Year	Teaching- OPD Days-	Allied Specia	lties (Plastic Surgery)			
	Session 1	Session 2	Break	Session 3	Session 4		
	10:30-12:30	12:30-1:00	1:00-2:00	2:00-3:00	3:00-4:00		
	Burn OPD	Burn OPD		Hashmat Affandi Ward	Hashmat Affandi Ward		
Monday	Dr Asif Zubair	Dr Asif Zubair		Dr Asif Zubair	Dr Asif Zubair		
Tuesday	Dr Asif Zubair	Dr Asif Zubair		Dr Asif Zubair	Dr Asif Zubair		
Wednesday	Dr Asif Zubair	Dr Asif Zubair		Dr Asif Zubair	Dr Asif Zubair		
Thursday	Dr Asif Zubair	Dr Asif Zubair		Dr Asif Zubair	Dr Asif Zubair		

Friday

Dr Asif Zubair

Dr Asif Zubair

Dr Asif Zubair

Dr Asif Zubair

Emergency Surgery Clinical Rotation for the Final Year Medical Students



Welcome to the 12-week Surgical Clinical Rotation in the Emergency Department at Shalamar Medical and Dental College in Lahore. This program is tailored for final-year medical graduates, providing a focused and intensive learning experience in General Surgery, Anesthesia, Orthopedics, Vascular Surgery, and Plastic Surgery. The rotation, conducted from 3:00 PM to 6:00 PM, Monday to Friday, is strategically designed to enhance your skills in managing critical surgical emergencies.

Learning Objectives:

1. Acute Abdomen:

- Recognize and evaluate patients with acute abdominal pain.
- Develop skills in history taking, physical examination, and diagnostic workup.

2. Intestinal Obstruction:

- Understand the etiology and clinical presentation of intestinal obstruction.
- Gain proficiency in the management, both conservative and surgical, of intestinal obstruction.

3. Trauma Surgery and Resuscitation:

• Acquire knowledge and skills in the initial management of trauma patients.

 Participate in trauma resuscitation scenarios and learn trauma surgical techniques.

4. Dealing with Head Injury and Spine Injury:

- Recognize and manage head and spine injuries in the emergency setting.
- Learn the principles of neurosurgical interventions in trauma cases.

5. Acute Limb Ischemia:

- Identify and manage cases of acute limb ischemia promptly.
- Understand the importance of vascular assessment and emergent interventions.

6. Acute Cholecystitis:

- Recognize the clinical features of acute cholecystitis.
- Learn about the indications and techniques for emergency cholecystectomy.

7. Dealing with Pneumothorax and Hemothorax:

- Develop skills in the assessment and management of chest injuries.
- Perform chest tube insertion for pneumothorax and hemothorax.

8. Dealing with Airway Compromise:

- Acquire proficiency in assessing and managing patients with compromised airways.
- Learn advanced airway management techniques.

9. Obstructed Hernia:

- Recognize and manage cases of obstructed hernia.
- Understand the principles of hernia reduction and emergency hernia repair.

10. Testicular Torsion:

- Identify and urgently manage testicular torsion cases.
- Learn the surgical techniques for detorsion and orchidopexy.

11. Urinary Retention:

- Recognize and manage acute urinary retention.
- Gain skills in urinary catheterization and bladder decompression.

12. Basics of Fracture Management:

- Understand the principles of fracture assessment and classification.
- Participate in the hands-on management of fractures in the emergency setting

Table of Specification:

Learning Objectives	Specialty	Modes of Instruction	Mode of Assessment	Faculty Responsible
1. Acute Abdomen	General Surgery	- Case-based discussions	- OSCE	Senior Registrar on Call
		- Practical simulations and workshops	- Case presentations	Senior Registrar on Call
		- Clinical rotations and observation	- Written examinations	Senior Registrar on Call
2. Intestinal Obstruction	General Surgery	- Didactic lectures and seminars	- Skills assessment	Senior Registrar on Call
		- Grand rounds and clinicalcase reviews	- Clinical logbook	Senior Registrar on Call
		- Interactive group activities and problem-solving	- OSCE	Senior Registrar on Call
3. Trauma Surgery and Resuscitation	General Surgery/ Anesthesia	- Case-based discussions	- Objective Structured Clinical Examination (OSCE)	Senior Registrar on Call
		- Clinical rotations and observation	- Case presentations	Senior Registrar on Call
		- Trauma resuscitation simulations	- Written examinations	
4. Head Injuryand Spine Injury	General Surgery/Ort hopedics	- Didactic lectures andseminars	- Skills assessment	Senior Registrar on Call
		- Grand rounds and clinicalcase reviews	- Clinical logbook	Senior Registrar on Call
		- Neurosurgical intervention simulations	- OSCE	Senior Registrar on Call
5. Acute Limb Ischemia	Vascular Surgery	- Case-based discussions	- Objective Structured Clinical Examination (OSCE)	Senior Registrar on Call
		- Practical simulations and workshops	- Case presentations	Senior Registrar on Call
		- Vascular assessment and intervention observation	- Written examinations	Senior Registrar on Call
6. Acute Cholecystitis	General Surgery	- Didactic lectures and seminars	- Skills assessment	Senior Registrar on Call
		- Rounds and clinical case reviews	- Clinical logbook	Senior Registrar on Call

		- Emergency cholecystectomy simulations	- OSCE	Senior Registrar on Call
7. Pneumothorax and Hemothorax	General Surgery	- Case-based discussions	- Objective Structured Clinical Examination (OSCE)	Senior Registrar on Call

		- Practical simulations and workshops	- Case presentations	Senior Registrar on Call
		- Chest tube insertion / simulations	- Written examinations	Senior Registrar on Call
8. Airway Compromise	Anesthesia	- Didactic teaching	- Skills assessment	Senior Registrar on Call
		- Airway management simulation and observation	- Clinical logbook	Senior Registrar on Call
		- Advanced airway management simulations	- OSCE	Senior Registrar on Call
9. Obstructed Hernia	General Surgery	- Case-based discussions	- Objective Structured Clinical Examination (OSCE)	Senior Registrar on Call
		- Practical simulations and clinical work	- Case presentations	Senior Registrar on Call
		- Emergency hernia repair simulations	- Written examinations	Senior Registrar on Call
10. Testicular Torsion	General Surgery/ Urology	- Didactic lectures and seminars	- Skills assessment	Senior Registrar on Call
		- Clinical rotations and observation	- Clinical logbook	Senior Registrar on Call
		- Testicular torsion management simulations	- OSCE	Senior Registrar on Call
11. Urinary Retention	General Surgery/ Urology	- Case-based discussions	- Objective Structured Clinical Examination (OSCE)	Senior Registrar on Call
		- Practical simulations and workshops	- Case presentations	Senior Registrar on Call
		- Urinary catheterization simulations	- Written examinations	Senior Registrar on Call
12. Basics of Fracture Management	Orthopedics	- Didactic lectures and seminars	- Skills assessment	Senior Registrar on Call
		- Clinical rotations and observation	- Clinical logbook	Senior Registrar on Call
		- Hands-on fracture management workshops	- OSCE	Senior Registrar on Call

Clinical Rotation Plan For all Batches

Day	Departme nt
Monday	S1
Tuesday	S2
Wednesd ay	S1
Thursday	S2
Friday	S1

[SURGICAL CURRICULUM MANUAL]

Final	Year Teaching- Evening	Emergencies (Emergen	cy Surgery)- Allied Spec	cialties
Monday	Tuesday	Wednesday	Thursday	Friday
3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM	3:00-6:00 PM
Senior Registrar on	Senior Registrar on	Senior Registrar on	Senior Registrar on	Senior Registrar on
Call	Call	Call	Call	Call

Following Core Topics need to be essentially covered in six weeks of general surgical rotation by Surgical Unit 1:

- Examination of Swelling, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 2. Examination of Ulcer, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- Examination of Neck Swellings, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 4. Examination of Thyroid, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 5. Examination of Peripheral Neurovascular System, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 6. Examination of varicose veins & DVT, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 7. Examination of abdominal exam, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 8. Examination of Breast, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 9. Examination of Inguinoscrotal Area, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 10. Examination of Perianal Area, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management

Following Core Topics need to be essentially covered and form the learning objectives in six weeks of general surgical rotation by Surgical Unit 2:

- 11. Examination of Neck Swellings, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 12. Examination of parotid & Submandibular Swellings, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 13. Examination of Abdominal Swellings and Masses, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management

[SURGICAL CURRICULUM MANUAL]

- 14. Examination of Inguinoscrotal Swellings, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 15. Examination of Peripheral Neurovascular System, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 16. Examination of Diabetic Foot, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 17. Examination of abdominal exam, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 18. Examination of Breast, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 19. Examination of Acute Abdomen, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management
- 20. Examination of Perianal Area, Differential Diagnosis, Understanding Clinical Reasoning, Diagnosis Making and Management

During the theater days, peri-operative care, Sterilization, CSSD, and Instrumentation would be covered apart from the operative clinical teaching.

In Skill Lab various psychomotor surgical skills would be practiced in a simulated environment.

The detail of the student Batch rotating in clinical wards is attached here in Appendix VIII. At the end of each rotation both at **Shalamar Teaching Hospital**, an assessment of clinical skills would be conducted in the Department of Surgery.

The detail of lectures to be delivered has been attached in this manual at the end. (Appendix XI).

During this year the students are tested for delivered lectures with MCQ based assessment papers (Cognitive Domain) conducted throughout the year and the results are shared with Department of Medical Education and Student Affairs through the software.

For the Online Modules (involving History Taking, Clinical Examination and Communication Skills), an OSPE is conducted (10 Stations) which would assess the Clinical Skills of the students through Cognitive, Psychomotor and Affective Domain. The OSPE has 30% Cognitive, 50% Psychomotor and 20% Affective domain. 10% would be reserved for attendance. The station detail for example has been given below:

Station 1	Station 2	Station 3	Station 4	Station 5
Radiology Interactive	Urology Interactive	Orthopedics Interactive	Anesthesia Interactive	History Taking Interactive
Station 6	Station 7	Station 8	Station 9	Station 10
Abdominal Examination Interactive	Neck Examination Interactive	Examination of Lump Interactive	Examination of Ulcer Interactive	General Surgery Short Cases Interactive

[SURGICAL CURRICULUM MANUAL]

Surgical Unit heads are responsible for ensuring the overall coordination and conduction of assessments during Year 5.

Mode of Teaching: Lectures (Cognitive Domain)

Online Modules, Didactics & Bedside Teaching (Psychomotor & Affective Domain)

Appendix I

Module/ System/ Organ	Topic	Subtopic	LEARNING OBJECTIVES	YEAR IN WHICH TO BE COVER ED	NAME OF MODULE IN WHICH TO BE COVERED	TEACHING / LE	ARNING STRA	ATEGY			ASSESSMENT N	SSESSMENT MODE					
				1	1	Lecture	Practical	Tutorial	Skills Lab	Clinical Rotation	Self Study	Other (Please specify)	MCQs	SEQs	OSPE	OSCE	Other (Please specify)
			Third Year														
			At the end of 3rd year student should be able to: Cognitive Domain														
General Surgery	Surgical Ethics	Basic Principles	describe the principles and ethics in the discipline of surgery	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Neck Swelling	Clinical Examination	describe various steps of clinical examination of neck swelling - Overview Lecture	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Neck Swelling Thyroid	Differential Diagnosis	differentiate various types of neck swellings on inspection- Overview Lecture	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Examinatio n	Clinical Examination	apply various steps of clinical examination for thyroid disorders	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Inguinal Hernia	Clinical Examination	describe various steps of clinical examination of an inguinal swelling	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Inguinosec rotal Swelling	Clinical Examination	recognize various types of inguinoscrotal swellings on clinical examination	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Abdominal Mass	Clinical Examination	describe the steps of examination for an abdominal mass	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Swelling and Ulcers	Clinical Examination	describe the steps of examination of swelling and an ulcer	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Breast Diseases	Clinical Examination	Describe steps of clinical examination of breast in order to identify the pathologies	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Breast Diseases	Differential Diagnosis	differentiate various problems of breast based on clinical findings	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Hemostasi s	Shock	describe the pathophysiology of shock	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Hemostasi s	Management of Shock	Develop a plan for initial management of shock	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Trauma	ATLS	describe the approach to a patient in surgical emergency	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Sterilizatio n	methods of sterilization	differentiate infection, disinfection and sterilization in field of surgery	3	Basics of Surgery	Flipped Class Room							MCQs	SEQs			
General Surgery	Infections	Skin Infection	describe clinical features of infection of the skin and subcutaneous tissue and its preliminary management	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Surgical site infections	Management	define the surgical site infection and methods of its prevention	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Inflammati on and infection	Pathophysiol ogy	describe the pathophysiology of inflammation in surgery	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			
General Surgery	Infections	Types and Management	define infection, enlist type of infection and their initial management	3	Basics of Surgery	Interactive Lecture							MCQs	SEQs			

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General		Types and	define, antisepsis, asepsis and health professional		Basics of	Interactive							
Surgery	Sepsis	Management	risk and to describe its clinical application	3	Surgery	Lecture				MCQs	SEQs		
		Pathophysiol											
General	Hemostasi s	ogy of	describe the pathophysiology and mechanism of	3	Basics of	Interactive Lecture				MCOs	SEO.		
Surgery		Hemostasis	hemostasis in surgery	3	Surgery					MCQs	SEQs		
General Surgery	Hemostasi	Principles of Hemostasis	describe principles of hemostasis in surgery	3	Basics of Surgery	Flipped Class Room				MCQs	SEQs		
	Blood and	clinical		3		Interactive				ivicus	3EQ\$		
General Surgery	products	application	enlist various blood products and their application in clinical setting	3	Basics of Surgery	Lecture				MCQs	SEQs		
	,	principles of			7 0 7								
General	Blood and	blood	describe the principles of blood transfusion and		Basics of	Interactive							
Surgery	products	transfusion	blood products	3	Surgery	Lecture				MCQs	SEQs		
		Complication											
General	Blood and	s of blood	describe the complications associated with		Basics of	Interactive							
Surgery	products	transfusion	transfusion of blood and its products	3	Surgery	Lecture				MCQs	SEQs		
General	Perioperati	Principles of perioperative	describe the basic principles of peri-operative care		Basics of	Flipped Class							
Surgery	ve Care	care	of a surgical patient	3	Surgery	Room				MCQs	SEQs		
		Mechanism			,								
General		of metabolic	describe the mechanisms and clinical application of		Basics of	Interactive							
Surgery	Trauma	response	metabolic response to trauma	3	Surgery	Lecture				MCQs	SEQs		
Anesthesi		Speciality of	summarize scope of specialty of anesthesia and its		Basics of	Interactive							
a	Anesthesia	Anesthesia	clinical applications	3	Surgery	Lecture				MCQs	SEQs		
			Psychomotor & Affective Domains										
					Clinical								
General		Ethics and	elicit consent for history and examination and		Rotation: General			Ambulato	OMP, Bedside				
Surgery	Ethics	Consent	ethics of clinical encounter	3	Surgery			ry Teaching	Teaching			OSCE	OSPE
,		History			Clinical			J	J				
		Taking for			Rotation:			Ambulato	OMP,				
General	History	surgical	elicit history taking for a surgical pathology		General			ry	Bedside				
Surgery	Taking	pathology	(information Seeking)	3	Surgery Clinical			Teaching	Teaching			OSCE	OSPE
					Rotation:			Ambulato	OMP,				
General	History	Swelling and			General			ry	Bedside				
Surgery	Taking	Ulcer	elicit history for a swelling and ulcer	3	Surgery			Teaching	Teaching			OSCE	OSPE
		Abdominal,			Clinical								
General	History	neck and	elicit history of abdominal, neck and extremity		Rotation: General			Ambulato ry	OMP,				
Surgery	Taking	extremity pathology	pathology	3	Surgery			Teaching	Bedside Teaching			OSCE	OSPE
,	General	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , ,		Clinical								
	physical				Rotation:			Ambulato	OMP,				
General	examinatio				General			ry	Bedside				
Surgery	n	Steps of GPE	perform general physical examination of the patient	3	Surgery			Teaching	Teaching			OSCE	OSPE
Clinical	examinatio				Clinical Rotation:			Ambulato	OMP,				
Examinati	n of	steps of	inspect a swelling according to the protocol of		General			ry	Bedside				
on	swelling	Inspection	clinical examination on a patient	3	Surgery			Teaching	Teaching			OSCE	OSPE
					Clinical								
Clinical Examinati	examinatio	stons of	palpate a swelling according to the protocol of		Rotation:			Ambulato	OMP,				
on	n of swelling	steps of Palpation	clinical examination	3	General Surgery			ry Teaching	Bedside Teaching			OSCE	OSPE
<u> </u>	3	. aipadon			Clinical							COCL	JU. 2
Clinical	examinatio				Rotation:			Ambulato	OMP,				
Examinati	n of	steps of	percuss a swelling according to the protocol of		General			ry	Bedside				
on	swelling	Percussion	clinical examination	3	Surgery			Teaching	Teaching			OSCE	OSPE
Clinical Examinati	examinatio n of	steps of	auscultate a swelling according to the protocol of		Clinical			Ambulato	OMP, Bedside				
on	swelling	Auscaltation	clinical examination	3	Rotation:			ry Teaching	Teaching			OSCE	OSPE
UII	awening	rascartation	Cirrical Charmination	3	Aotation.			reactiling	reactiling			UJCL	OJIL

	1			General				
Clinical Examinati	examinatio n of	Differential Diagnosis of	differentiate different type of swellings according to	Surgery Clinical Rotation: General	Ambulato ry	OMP, Bedside		
On Clinical Examinati	Swellings Examinatio n of Ulcers	Swellings Inspection of ulcer	inspect an ulcer according to the protocol of clinical examination	3 Surgery Clinical Rotation: General Surgery	Teaching Ambulato ry Teaching	OMP, Bedside	OSCE	OSPE
On Clinical Examinati on	Examinatio n of Ulcers	palpation of ulcer	palpate an ulcer according to the protocol of clinical examination	3 Surgery Clinical Rotation: General 3 Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	Examinatio n of Ulcers	differential diagnosis of ulcers	diagnose various types of ulcer based on clinical examination	Clinical Rotation: General Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	Examinatio n of thyroid	differential diagnosis of thyroid	perform clinical examination for thyroid disorders	Clinical Rotation: General Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of neck swellings	steps of examination	perform clinical examination for neck swellings	Clinical Rotation: General 3 Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of abdominal mass	steps of examination	perform clinical examination for abdominal mass	Clinical Rotation: General 3 Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of abdominal hernia	steps of examination	perform clinical examination for abdominal hernias	Clinical Rotation: General 3 Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of venous system	vericose veins/ DVT	perform clinical examination for venous disorders	Clinical Rotation: General Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of lymphatic system	Lymphedema /lymphangiti s	perform clinical examination for lymphatic disorders	Clinical Rotation: General Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of breast	steps of examination	perform clinical examination for breast	Clinical Rotation: General Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of peripheral arteries	acute and chronic ischemia	perform clinical examination for peripheral arterial disease	Clinical Rotation: General Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Clinical Examinati on	examinatio n of peripheral veins	vericose veins/DVT	perform clinical examination for peripheral venous disease	Clinical Rotation: General 3 Surgery	Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE
Musculos		History of		Clinical	Ambulato	OMP,		
keletal System Musculos	History Taking Clinical	Orthopedic pathology Examination	elicit the history of an orthopedic patient	Rotation: 3 Orthopedics Clinical	ry Teaching Ambulato	Bedside Teaching OMP,	OSCE	OSPE
keletal System	Examinatio n	of kness and hip joint	perform clinical examination of normal and pathologic knee and hip joint	Rotation: 3 Orthopedics	ry Teaching	Bedside Teaching	OSCE	OSPE

ĺ		examination										
		of shoulder										
Musculos	Clinical	and			Clinical		A	mbulato	OMP,			
keletal	Examinatio	hand/foot	perform clinical examination of normal and		Rotation:		ry		Bedside			
System	n	joints	pathologic shoulder and hand/foot joint	3	Orthopedics			eaching	Teaching		OSCE	OSPE
Musculos	Clinical				Clinical		A	mbulato	OMP,			
keletal	Examinatio	examination	Perform clinical examination of normal and		Rotation:		ry	/	Bedside			
System	n	of spine	pathologic spine	3	Orthopedics		Te	eaching	Teaching		OSCE	OSPE
		history of			Clinical		Δ	mbulato	OMP,			
Urinary	History	diseases of			Rotation:		ry		Bedside			
System	taking	urology	elicit the history of a urologic patient	3	Urology			eaching	Teaching		OSCE	OSPE
-,	Clinical	Examination	ende are motory or a arologic patient	-	Clinical			mbulato	OMP,			00.2
Urinary	examinatio	of urethra	evaluate a patient with bladder outlet		Rotation:							
System	n	and prostate	obstruction/BPH	3			ry	eaching	Bedside Teaching		OSCE	OSPE
System	11	and prostate	Obstruction/ BFT1	3	Urology						OSCL	USFL
Union	Climinal	Unio a m.			Clinical			mbulato	OMP,			
Urinary	Clinical	Urinary		_	Rotation:		ry		Bedside		0005	OCDE
System	evaluation	stones	evaluate a patient with urinary stones	3	Urology			eaching	Teaching		OSCE	OSPE
					Clinical		Α	mbulato	OMP,			
Urinary	Clinical	UTI and			Rotation:		ry		Bedside			
System	evaluation	causes	evaluate a patient with urinary tract infections	3	Urology		Te	eaching	Teaching		OSCE	OSPE
		urinary										
		retention			Clinical							
Urinary	History	and D.	elicit the history of patient with urinary retention		Rotation:							
System	taking	Diagnosis	and discuss its etiology	3	Urology							
		Hematuria										
		and			Clinical							
Urinary	History	Differential	elicit history of patient with hematuria and discuss		Rotation:							
System	taking	diagnosis	its etiology	3	Urology							
. ,	,	Flank pain	01									
		and			Clinical							
Urinary	History	differential										
System	taking		olicit history taking of a nationt with flank pain	3	Rotation:							
Зузсенн	taking	diagnosis	elicit history taking of a patient with flank pain	3	Urology				21.12			
					Clinical			mbulato	OMP,			
Urinary			recognize the differential utility of various		Rotation:		ry		Bedside			
System			modalities in urology	3	Urology		- 10	eaching	Teaching		OSCE	OSPE
Radiologic					Clinical							
al imaging		application			Rotation:							
technique	Types of	and	summarize radiological imaging (X-ray/US/CT/MRI)		Applied							
s	imaging	limitations	principles, application and limitations	3	Radiology		т	utorial	OMP		OSCE	OSPE
Radiologic					Clinical				5		3332	1
al imaging		Indications			Rotation:							
	Types of		enlist indications of radiological imaging in various									
technique		for various	parts of the body	3	Applied		т.	utorial	OMP		OSCE	OSPE
S D-di-li-	imaging	body parts	parts of the body	3	Radiology			utOffdf	UIVIP		USCE	USPE
Radiologic					Clinical							
al imaging		Identify			Rotation:							
technique	Types of	anatomical	identity anatomical structures in radiological		Applied							
S	imaging	structures	studies	3	Radiology		T	utorial	OMP		OSCE	OSPE
Radiologic					Clinical							
al imaging					Rotation:							
technique		CT scan in			Applied							
S	CT Scan	actue trauma	identity acute emergency conditions in CT head	3	Radiology		T	utorial	OMP		OSCE	OSPE
Radiologic					Clinical							
al imaging					Rotation:							
technique		anatomy of	identify normal chest radiographic anatomy and		Applied							
S	X-ray	chest on xray	enlist common pathologies	3	Radiology		т	utorial	OMP		OSCE	OSPE
Radiologic	,	Anatomy of			Clinical				5		3332	1
		abdomen on										
al imaging technique	Types of		identify normal abdominal radiographic anatomy		Rotation:							
technique		Xray, CT and MRI	and enlist common pathologies?	3	Applied Radiology		т.	utorial	OMP		OSCE	OSPE
\$	imaging								UNVIP			

Radiologic					Clinical								
al imaging		Anatomy of			Rotation:								
technique		Limbs on	identify normal extremity radiographic anatomy		Applied								
S	Xray	Xray	and enlist common pathologies	3	Radiology			Tutorial	OMP			OSCE	OSPE
	7	7		<u> </u>	Clinical			14101141	0.1			0002	00. 2
Radiologic													
al imaging					Rotation:								
technique		Ultrasound	identify normal ultrasound (Abdomen/Obs)		Applied								
S	Ultrasound	abdomen	anatomy and enlist common pathologies	3	Radiology			Tutorial	OMP			OSCE	OSPE
			Cognitive Domain										
											+		
			At The end of Fourth Year the student should be										
			able to:										
Fluid,													
Electrolyt													
es and	Fluid				Section 3:								
Acid Base	Imbalanac	Fluid			Basics of	Interactive							
Balance	e	Management	describe fluid management in a surgical patient	4	Surgery	Lecture				MCQs	SEQs		
	+ ~		and the state of t	· ·	30.5c.y						5245		
Fluid,													
Electrolyt													
es and					Section 3:								
Acid Base	Electrolyte		interpret electrolyte imbalance in a a surgical		Basics of	Flipped Class							
Balance	Imbalance		patient	4	Surgery	Room				MCQs	SEQs		
Fluid,													
Electrolyt													
es and	Arterial				Section 3:								
		A =: -! = -: = /A II ==											
Acid Base	blood	Acidosis/Alka	analyze ABGs and form the basis of acid base		Basics of	Interactive							
Balance	gases	losis	disorder management	4	Surgery	Lecture				MCQs	SEQs		
					Section 3:								
	Types of	Enteral	describe various means of enteral nutritional		Basics of	Flipped Class							
Nutrition	Nutrition	Nutrition	support in a surgical patient	4	Surgery	Room				MCQs	SEQs		
		Parenteral			Section 3:								
	Types of	Nutrition and	describe parenteral nutritional support and its		Basics of	Interactive							
Nutrition	Nutrition	application	practical application in a surgical patient	4	Surgery	Lecture				MCQs	SEQs		
					Section 3:								
Wound	Wound		describe the mechanism of wound healing and its		Basics of	Interactive							
care	healing	mechanism	clinical application	4	Surgery	Lecture				MCQs	SEQs		
carc	ricaling	mechanism	cimical application	-		Lecture				IVICQS	JLQS		
					Section 3:	l							
Wound	Wound	management	describe the management of wound and wound		Basics of	Interactive							
care	healing	of wound	care	4	Surgery	Lecture				MCQs	SEQs		
					Section 3:								
			summarize the cellular and tissue diagnosis in		Basics of	Interactive							
			surgery	4	Surgery	Lecture				MCQs	SEQs		
	1		01	<u> </u>		2000.0					5245		
Minimal		basic of			Section 3:								
invasive	Laproscop	laproscopic	describe the basics of laparoscopy and laparoscopic		Basics of	Interactive							
surgery	у	surgery	surgery	4	Surgery	Lecture				MCQs	SEQs		
Musculos		, , , , , , , , , , , , , , , , , , ,			Section 3:								
	Imaging	Role of	identify and explain the role of imaging modalities			Interactive							
keletal	1.156			4	Basics of					MCOs	SEO		
system	modalities	imaging	in orthopedic surgery	4	Surgery	Lecture				MCQs	SEQs		
		Knotting,											
Basic		suturings,			Section 3:								
Surgical	Skill	intrumentati	describe various basic surgical skills for a medical		Basics of	Interactive							
skills	acqusition	ons etc	graduate	4	Surgery	Lecture				MCQs	SEQs		
	<u> </u>	-											
	1	-											
	Approach				Section 4:								
Trauma	to trauma	Assessment			Trauma	Interactive							
Surgery	patient	by ATLS	describe the approach to a patient with trauma	4	Surgery	Lecture				MCQs	SEQs		
Jui Pci y	patient	~,	describe the approach to a patient with trauffd	-	Juigery	LCCCOTC				IVICQS	JLUS		

Part														
Transport AIS			Steps of			Section 4								
Support Answer Management of a trauma patient A Support Section Answer Answe	Trauma			enlist the steps of primary survey in assessment and			Interactive							
Trumb Providing Providin	Surgery	ATLS		management of a trauma patient	4	Surgery	Lecture				MCQs	SEQs		
Trumb Providing Providin			Steps of			Section 4:								
Answering Answ	Trauma			enlist the steps of secondary survey in assessment			Interactive							
Tamen Super ACCE Section of Tamen Super ACCE Section ACCES SECTION ACCE SECTION ACCE SECTION ACCE SECTION ACCE SECTION ACCES SECTION ACCE SECTION ACCE SECTION ACCES SECTION ACCES SECTIO	Surgery	ATLS	-		4	Surgery	Lecture				MCQs	SEQs		
Tourname		Prehospita												
Signate Sign		1				Section 4:								
Surgery Surg														
Traing Suprise Supri	Surgery	nt	ABCDE	patient	4	Surgery	Lecture				MCQs	SEQs		
Sugery S			Assessment			Section 4:								
National Surgery Tournal S														
Trauma Abdommal and Abdommal a	Surgery	trauma	management	abdominal trauma	4	Surgery	Lecture				MCQs	SEQs		
Sugery Traums			Assessment			Section 4:								
Tourna Surgery (Taluma) Absorberd (Surgery (Taluma)) Absorberd (Surgery (Taluma) Absorberd (Surgery (Taluma)) Absorberd (Surgery (T	Trauma	Abdominal		describe the assessment and management of			Interactive							
Trauma	Surgery	trauma	management	penetrating abdominal trauma	4	Surgery	Lecture				MCQs	SEQs		
Surgery Troum Management Anterior														
Head and and management of sorgery troum management of the special plays of the special play of the specia				=							MCO-	CEO-		
Troums and growth the hold injury with the hold inj	Surgery	trauma	_	extremity trauma	4		Lecture				IVICQS	SEQS		
Surgery Trauma management The find injury Surgery Section Section Surgery Section Sect	Trauma	Head		describe the initial assessment and management of			Interactive							
Sine Surgery Spring Surgery Su					4						MCOs	SEOs		
Signery trauma management of the spine injury management of th			_	and an analysis of the second	•							5245		
Skin Ulces of skin ulcers of their clinical spiritude of t	Trauma	Spine		describe the initial assessment and management of			Interactive							
Assessment of Ucers of sists ubers of secrible the approach to a patient with skin uber of Ucers of substances of Ucers of specific and of Ucers and of Ucers and Skin Ucers of Skin Ucers of Ucers application of Ucers ap	Surgery	trauma	management	the spine injury	4	Surgery	Lecture				MCQs	SEQs		
Assessment of Ucers of sists ubers of secrible the approach to a patient with skin uber of Ucers of substances of Ucers of specific and of Ucers and of Ucers and Skin Ucers of Skin Ucers of Ucers application of Ucers ap														
Sian Ulcers of skin ukers of ulcer and their clinical application of ulcer and their clinical management of ulcer and their clinical application of ulcer and their clinical management of ulcer and their clinical application of ulcer and their clinical management of ulcer and their clinical management of ulcer and their clinical application of ulcer and their clinical management of ulcer and their clinical application of ulcer and their clinical management of ulce						Section 5:								
Skin Ulcers of ulcer and their clinical application custate their clinical application evaluate evalua						Cutaneous								
Skin Ullers application described the interior components of an ulcer and to the interior components of an ulcer and to the interior application application application of the interior components of an ulcer and to the interior application of the interior components of an ulcer and to the interior application of the interior components of an ulcer and to the interior components of the interior c	Skin	Ulcers		describe the approach to a patient with skin ulcer	4	Lesions	Lecture				MCQs	SEQs		
Skin Ulcers application evaluate the different components of an ulcer and to Lesions Ulcerus														
Sin Ulces appliction evaluate their clinical application 4 Lesions Lecture				anliet the different companents of an ulcar and to			Interactive							
Cutaneous clinical management their clinical management clinical clinical clinical management clinical managem	Skin	Hicars			1						MCOs	SEOs		
Cutaneous Clinical lesions management tectric clinical management management clinical management discribe their clicial management discribe thei	JKIII	OICCIS	аррисског	evaluate their connect approaches.	-		2000.0				IVICQS	JEQ3		
Skin Lesions Management		Cutaneous	Clinical	identify various cutaneous lesions and describe			Interactive							
Clinical management Clinical applications Clinical management Clinical management Clinical management Clinical management Clinical applications Clinical management Clinical applications Clinical management Clinical managem	Skin	lesions	management		4		Lecture				MCQs	SEQs		
Melanoma management Clinical managemen						Section 5:								
Musculos keletal System Fractures Fractures fractures of fractures of fracture and enlist classification of types of keletal System Fractures Fractures Fractures Fractures Fractures of fracture and enlist classification of types of keletal System Fractures of fracture and enlist classification of types of keletal System Fractures of fracture and enlist classification of types of keletal System Fractures of fracture and enlist classification of types of keletal System Fractures of fracture and enlist classification of types of fracture healing and factors responsible for it enlist the principles of fracture management of System Fractures of fracture and enlist the principles of fracture management plan of the process and develop a management of Section 6: Interactive Lecture Interactive Interactive Lecture Interactive Interactive Lecture Interactive Lecture Interactive Lecture Interactive Lecture Interactive Interactive Lecture Interactive Lecture Interactive Interactive Lecture Interactive Interactive Lecture Interactive Lecture Interactive Interactive Interactive Interactive Lecture Interactive Inter			Clinical	identify type of melanoma and describe their		Cutaneous	Interactive							
keletal System s application applications summarize the scope of orthopedics and its clinical system system system system shaped application applications summarize the scope of orthopedics and its clinical applications applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics lecture section 6: Interactive section 6: In	Skin	Melanoma	management	clinical management	4	Lesions	Lecture				MCQs	SEQs		
keletal System s application applications summarize the scope of orthopedics and its clinical system system system system shaped application applications summarize the scope of orthopedics and its clinical applications applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics and its clinical applications summarize the scope of orthopedics lecture section 6: Interactive section 6: In														
System s application applications 4 Orthopedics Lecture Musculos keletal Fractures Fra		-	au											
Musculos keletal System Fractures Fractures fractures and enlist classification of types of fracture healing and factors responsible for Healing of System Fractures fractures of fractures of fractures fractures fractures of												CEO		
keletal System Fractures F		S	application	applications	4	Orthopeaics	Lecture				IVICUS	SEQs		
Fractures Fractures Fracture			Types of	define fracture and enlist classification of types of		Section 6:	Interactive							
Musculos keletal System Fractures of fractures of fracture and management System Fractures of fractures and develop a management System Fractures of fracture and System Fractures of fracture and System Fractures of fracture and of fractures of fracture		Fractures			4						MCQs	SEOs		
Musculos keletal System Fractures of fractures enlist the principles of fracture management System Fractures of fractures and develop a management System Fractures of fracture management System Fractures of fractures of fractures and develop a management of Musculos keletal System Fractures of fractures of fractures and develop a management of Rusculos keletal System Fractures of fracture and fracture and management of Rusculos keletal System Fractures of fracture and fracture and selectal System Fractures of fracture and management of Rusculos keletal System Fractures of fracture and fracture and management of Rusculos keletal System Fractures and develop a management of Section 6: Interactive Lecture Interactive Intera	-,					p c a . c a								
Musculos keletal System Fractures Fractures Fractures of fracture enlist the principles of fracture management System Fractures Fractures Fractures of fracture and management plan Classify open fractures and develop a management plan of Section 6: Interactive Lecture Interactive Lecture Interactive Lecture Interactive Lecture Interactive Interactive Lecture Interactive Intera														
keletal System Fractures F														
Musculos keletal System Fractures of fractures of fracture and fracture and System Fractures management System Fractures of fracture and skeletal System Fractures management of Section 6: Interactive Lecture Musculos keletal System Fractures management of Section 6: Interactive Lecture Musculos keletal System Fractures management of Section 6: Interactive Lecture Musculos itis, Assessment Rheumatoi and describe the assessment and initial management of Section 6: Interactive Interac			Healing of											
keletal System Fractures of fractures of fractures of fracture management of fracture manag		Fractures	fractures	responsible for it	4	Orthopedics	Lecture				MCQs	SEQs		
System Fractures of fractures enlist the principles of fracture management 4 Orthopedics Lecture						6 11 6								
Musculos keletal System Fractures management of Section 6: Orthopedics Lecture		Eracturas		anlist the principles of fracture management	4						MCOs	CEOs		
keletal System Fractures management plan classify open fractures and develop a management plan Section 6: Orthopedics Lecture Musculos keletal Rheumatoi and classify open fractures and develop a management plan Section 6: Interactive Lecture MCQs SEQs SEQs SEQs SEQs SEQs SEQs SEQs SE		rractures		emist the principles of fracture management	4	Orthopeaics	Lecture				IVICUS	SEUS		
System Fractures management plan 4 Orthopedics Lecture MCQs SEQs MCQs Osteoarthr itis, Assessment Rheumatoi and describe the assessment and initial management of Section 6: Interactive				classify onen fractures and develop a management		Section 6:	Interactive							
Osteoarthr itis, Assessment Rheumatoi and describe the assessment and initial management of Section 6: Interactive		Fractures			4						MCQs	SEOs		
Musculos itis, Assessment keletal Rheumatoi and describe the assessment and initial management of Section 6: Interactive	-,													
keletal Rheumatoi and describe the assessment and initial management of Section 6: Interactive	Musculos		Assessment											
System d arthritis management osteoarthritis and rheumatoid arthritis 4 Orthopedics Lecture MCQs SEQs														
	System	d arthritis	management	osteoarthritis and rheumatoid arthritis	4	Orthopedics	Lecture				MCQs	SEQs		

ı	Seronegati	Ī										
	ve,											
	seropositiv											
Musculos	е	Dathonhysiol	ovalain caranagative and caranacitive inflammatory		Soction 6:	Interactive						
keletal System	arthropath ies	Pathophysiol ogy	explain seronegative and seropositive inflammatory arthropathies	4	Section 6: Orthopedics	Interactive Lecture				MCQs	SEQs	
System	acute and	о Б у	aranopaanes	4	Orthopedies	Lecture				IVICQS	JLQS	
Musculos	chronis	Differentiate										
keletal	arthropath	and steps of	differentiate acute and chronic septic arthropathies		Section 6:	Interactive						
System	ies	management	and describe steps of their management	4	Orthopedics	Lecture				MCQs	SEQs	
Musculos	Metabolic	Assessment										
keletal	bone	and	assess metabolic bone disorder and formulate a	4	Section 6:	Interactive				N4CO-	CEO-	
System	disorder Benign and	management	management plan	4	Orthopedics	Lecture				MCQs	SEQs	
Musculos	malignant		enlist common benign and malignant bone									
keletal	bone	Principle of	neoplasms and describe principles of their		Section 6:	Interactive						
System	neoplasm	management	management	4	Orthopedics	Lecture				MCQs	SEQs	
Musculos												
keletal	Low	Causes and	enlist causes of low backache and describe the		Section 6:	Interactive						
System	backache	management	steps of its management	4	Orthopedics	Lecture				MCQs	SEQs	
Musculos	Club foot, developme											
keletal	ntal	Clinical	summarize club foot and developmental dysplasia		Section 6:	Interactive						
System	dysplasia	implication	and its clinical implications	4	Orthopedics	Lecture				MCQs	SEQs	
		Pathology										
Musculos	osteoarthri	and modern										
keletal	tis of hip	treatment	describe pathology of osteoarthritis of hip and knee		Section 6:	Interactive						
System	and knee	options	and summarize modern treatment options	4	Orthopedics	Lecture				MCQs	SEQs	
Musculos	Fracture of	Assessment and	assess fracture of clavicle and formulate a		Section 6:	Interactive						
keletal System	clavicle	management	management plan	4	Orthopedics	Lecture				MCQs	SEQs	
	Fracture of			-								
Musculos keletal	neck of	Classification and	describe classification of fractures of neck of femur		Section 6:	Interactive						
System	femur	management	and describe its management options	4	Orthopedics	Lecture				MCQs	SEQs	
Musculos	Fracture of				·							
keletal	elbow and	Management	describe fractures of elbow and wrist and enlist the		Section 6:	Interactive						
System	wrist	options	management options	4	Orthopedics	Lecture				MCQs	SEQs	
Musculos		Assessment										
keletal	Polytraum a	and	summarize the assessment and initial management of a polytrauma patient	4	Section 6:	Interactive				MCQs	SEQs	
System Musculos	а	management Assessment	от а ротустаціна расіент	4	Orthopedics	Lecture				ivicus	3EQS	
keletal	Pelvic	and	summarize the assessment and initial management		Section 6:	Interactive						
System	fractures	management	of pelvic fractures	4	Orthopedics	Lecture				MCQs	SEQs	
		Classify and										
1		discuss										
Urinary	Renal	dignostic	Classify Renal trauma grades and Discus Diagnostic	4	Section 7:	Interactive				MCOs	CEO-	
System	trauma	workup	workup	4	Urology	Lecture				MCQs	SEQs	
Urinary	Renal	Assessment and	Assessment and Initial management of a patient		Section 7:	Interactive						
System	trauma	management	with Renal trauma	4	Urology	Lecture				MCQs	SEQs	
		-										
Urinary	Ureteric	Etiology and	Enlist Etiology and Describe management of a		Section 7:	Interactive						
System	trauma	management	patient with Ureteric trauma	4	Urology	Lecture				MCQs	SEQs	
		Classify and										
Urinary	Bladder	discuss	Classify Bladder Trauma and Describe its		Section 7:	Interactive						
System	trauma	management	management	4	Urology	Lecture				MCQs	SEQs	
Urinary	Urethral	Mechanism	Explain mechanism of Urethral injury and Describe		Section 7:	Interactive						
System	injury	and management	its management	4	Urology	Lecture				MCQs	SEQs	
Urinary	Hydroneph	Explain the			Section 7:	Interactive					J.Q.	
System	rosis	etiology	Define Hydronephrosis and Explain its Etiology	4	Urology	Lecture				MCQs	SEQs	
3,300111	. 5515	25,01067	Series 1.74. Onephil osis and Explain its Etiology	_	0.01069	Lecture					JEQJ	

1	Urinary	I											
Urinary	tract	types of	Enlist Types of Upper urinary tract infections and		Section 7:	Interactive							
System	infection	upper UTI	Describe workup	4	Urology	Lecture				MCQs	SEQs		
	Urinary												
Urinary	tract	types of	Enlist Types of Lower urinary tract infections and		Section 7:	Interactive							
System	infection	lower UTI	Describe workup	4	Urology	Lecture				MCQs	SEQs		
	Infections												
	of testes	Enlist and	5 11 11 6 11 6 11 1 1 1 1 1 1 1 1 1 1 1		6 11 7								
Urinary	and	describe the	Enlist infections of Testes and scrotum and Describe		Section 7:	Interactive				MCO-	CEO-		
System	scrotum	workup	workup	4	Urology	Lecture				MCQs	SEQs		
	Bladder	Etiology and											
Urinary	outlet obstructio	diagnostic	Explain Etiology of Bladder outlet Obstruction and		Section 7:	Interactive							
System	n	workup	describe Diagnostic workup	4	Urology	Lecture				MCQs	SEQs		
37510111	Acute	womap	describe Bragnostie Werkap	1	0.0.087	Lecture				Wicqs	JEQJ		_
Urinary	urinary		Define Acute urinary retention and Explain its Initial		Section 7:	Interactive							
System	retention	Management	Management	4	Urology	Lecture				MCQs	SEQs		
Urinary	Bladder	Diagnostic	Classify Bladder Tumors and describe its workup		Section 7:	Interactive							
System	tumors	workup	for Diagnosis	4	Urology	Lecture				MCQs	SEQs		
		Enlist and	3										
Urinary	Kidney	Diagnostic			Section 7:	Interactive							
System	tumors	workup	Enlist Kidney Tumors and explain diagnostic workup	4	Urology	Lecture				MCQs	SEQs		
Urinary	Prostate	Diagnostic	, , ,		Section 7:	Interactive							
System	tumors	workup	Explain diagnostic workup of Prostate Tumors	4	Urology	Lecture				MCQs	SEQs		
		Classification	,										
		and											
Urinary	Renal	diagnostic	Classify Renal stones and Describe diagnostic		Section 7:	Interactive							
System	stones	workup	workup	4	Urology	Lecture				MCQs	SEQs		
		Investigation											
Urinary	Acute	s and	Explain Investigations of Acute Renal colic and		Section 7:	Interactive							
System	renal colic	management	Describe initial management	4	Urology	Lecture				MCQs	SEQs		
		Classification											
	51 11	and			6 .: 7								
Urinary	Bladder	diagnostic	Classify Bladder stones and describe Investigations		Section 7:	Interactive				MCO-	CEO-		
System	stones	workup	for Diagnosis	4	Urology	Lecture				MCQs	SEQs		
Urinary	Urinary	Laboratory investigation	Enlist Laboratory Investigations for Urology patients		Section 7:	Interactive							
System	diseases	s and analysis	and Describe analysis	4	Urology	Lecture				MCQs	SEQs		
37510111	uiseases	Radiological	and Describe analysis	1	0.0.087	Lecture				Wicqs	JEQJ		_
Urinary	Urinary	investigation	Enlist Radiologic Investigations for Urology patients		Section 7:	interactive							
System	diseases	s and analysis	and Describe analysis	4	Urology	Lecture				MCQs	sEQs		
· ·		, , , , , ,	,		3,								
		C											
Anesthesi	ICU and	Componenet	enlist components of intensive care unit and high		Section 8:	Interactive							
a	HDU	s and functioning	dependency unit and explain their functioning	4	Anesthesia	Lecture				MCQs	SEQs		
	7.50	Diagnosis	and and explain their failetoining		coc.icoid	2000.0					3243		_
Anesthesi	Anaphylact	and	summarize pathophysiology, diagnosis and		Section 8:	Interactive							
a	ic shock	management	management of anaphylactic shock	4	Anesthesia	Lecture				MCQs	SEQs		
	Monitering	-											
	an												
Anesthesi	anesthetiz	Various	summarize various modalities for monitoring an		Section 8:	Interactive							
а	ed patient	modalities	anesthetized patient	4	Anesthesia	Lecture				MCQs	SEQs		
		Indications											
		and methods											
A! :	11	of	describe to disease and a state of the state of		Cartia C	Internal C							
Anesthesi	Local anesthesia	administerin	describe indications and methods of administering	4	Section 8:	Interactive				MCOs	CEO-		
а	anestnesia	g	local anesthesia	4	Anesthesia	Lecture				MCQs	SEQs		
		Indications and methods											
		of											
Anesthesi	Neuroaxial	administerin	summarize the indications and methods for		Section 8:	Interactive							
a	blocks	g	administering neuroaxial blocks	4	Anesthesia	Lecture				MCQs	SEQs		
			0			-							

1	1	Components											
		and stages of											
Anesthesi	General	general	summarize the various components and stages of		Section 8:	Interactive							
а	anesthesia	anesthesia	general anesthesia	4	Anesthesia	Lecture				MCQs	SEQs		
	Post	Enlist											
A + l :	operative	Complication			C+: O-								
Anesthesi	complicati	s and	enlist various complications of patient in postoperative setting and explain their recognition		Section 8: Anesthesia	Interactive Lecture				1400-	CEO-		
a	on	recognition	postoperative setting and explain their recognition	4	Allestilesia	Lecture				MCQs	SEQs		
Anesthesi		Components and	enlist the components of CSSD, and describe its		Section 8:	Interactive							
a	CSSD	functioning	functioning	4	Anesthesia	Lecture				MCQs	SEQs		
	333	rancasing	Terrocustum 6	1	7.11.056110510	Leota.c					5245		
					Section 9:								
Trauma	Head				Neurosurger	Interactive							
Surgery	Trauma	Assessment	describe the assessment of head injury	4	у	Lecture				MCQs	SEQs		
					Section 9:								
Trauma	Head				Neurosurger	Interactive							
Surgery	Trauma	Management	describe the management of head injury	4	У	Lecture				MCQs	SEQs		
		Assessment			Section 9:								
Trauma	Spine	and	describe the assessment and management of spine	4	Neurosurger	Interactive				MCOs	CEO-		
Surgery	Trauma	management	injury	4	Soution C:	Lecture				MCQs	SEQs		
Neuro	Brain	Enlist various tumors and	enlist various brain tumors and explain basic		Section 9: Neurosurger	Interactive							
Surgery	Tumors	management	principles of their management	4	v	Lecture				MCQs	SEQs		
5 8 7		management	Franchist Control Management	1	,						5245		
			Psychomotor and Affective Domain										
			1 Sycholitotol and Affective Dollham										
	General				Clinical								
Clinical	Physical	Pathologic			Rotation:			Ambulato	OMP,				
Examinati	Examinatio	findings and	recognize pathologic findings of a general physical		General			ry	Bedside				
on	n	diagnosis	examination and reason to reach a diagnosis	4	Surgery			Teaching	Teaching			OSCE	OSPE
					Clinical								
Clinical	Examinatio				Rotation:			Ambulato	OMP,				
Examinati	n of	Clinical	recognize and clinically reason a clinical finding of a		General			ry	Bedside				
on	swelling	Diagnosis	swelling in order to make a diagnosis	4	Surgery			Teaching	Teaching			OSCE	OSPE
Clinical	Examinatio				Clinical			Ambulato	ONAD				
Examinati	n of		palpate and clinically reason a clinical finding of a		Rotation: General			ry	OMP, Bedside				
on	swelling	Palpation	swelling in order to make a diagnosis	4	Surgery			Teaching	Teaching			OSCE	OSPE
					Clinical			3	- caraming				
Clinical	Examinatio	Percussion	percuss and auscultate and clinically reason a		Rotation:			Ambulato	OMP,				
Examinati	n of	and	clinical finding of a swelling in order to make a		General			ry	Bedside				
on	swelling	auscultation	diagnosis	4	Surgery			Teaching	Teaching			OSCE	OSPE
					Clinical								
Clinical	Examinatio	Difforontial	differentiate different type of any live and		Rotation:			Ambulato	OMP,				
Examinati on	n of swelling	Differential Diagnosis	differentiate different type of swellings and clinically reason	1	General			ry Teaching	Bedside Teaching			OSCE	OSPE
UII	2MCIIIIR	Diagiliosis	Chilically (Casot)	4	Surgery Clinical			reacilling	reacriling			USCE	USPE
Clinical					Rotation:			Ambulato	OMP,				
Examinati	Examinatio	Clinical	recognize and clinically reason a clinical finding of		General			ry	Bedside				
on	n of ulcer	Diagnosis	an ulcer in order to make a diagnosis	4	Surgery			Teaching	Teaching			OSCE	OSPE
					Clinical								
Clinical					Rotation:			Ambulato	OMP,				
Examinati	Examinatio	Types of	clinically reason various types of ulcer based on		General			ry	Bedside				
on	n of ulcer	ulcers	clinical examination	4	Surgery			Teaching	Teaching			OSCE	OSPE
Clinical	Eveneir+i-				Clinical			A make . I = + =	OMB				
Clinical Examinati	Examinatio n of	Clinical	perform clinical examination of a thyroid swelling,		Rotation: General			Ambulato	OMP, Bedside				
on	thyroid	Diagnosis	clinically reason and diagnose a disorder	4	Surgery			ry Teaching	Teaching			OSCE	OSPE
<u> </u>	,		, , , , , , , , , , , , , , , , , , , ,		Clinical				· cac.iiiig			COCL	55. 2
Clinical	Examinatio	Clinical			Rotation:			Ambulato	OMP,				
Examinati	n	findings and	differentiate and clinically reason clinical findings		General			ry	Bedside				
on	ofswelling	diagnosis	neck swellings	4	Surgery			Teaching	Teaching			OSCE	OSPE

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Clinical		Pathologic			Clinical	Ambulato	ONAD		
Examinati	Abdominal	Pathologic findings and	recognize pathologic findings of an abdominal mass		Rotation:	Ambulato	OMP, Bedside		
on	mass	diagnosis	and reason to reach a diagnosis	4	General Surgery	ry Teaching	Teaching	OSCE	OSPE
011	111000	alagnosis	and reason to reason a diagnosis	_	Clinical	reaching	reacting	OSCE	031 E
Clinical		Pathologic			Rotation:	Ambulato	OMP,		
Examinati	Abdominal	findings and	recognize pathologic findings of an abdominal		General	ry	Bedside		
on	hernia	diagnosis	hernia and reason to reach a diagnosis	4	Surgery	Teaching	Teaching	OSCE	OSPE
			, , , , , , , , , , , , , , , , , , ,		Clinical				
Clinical	Extremity	Pathologic			Rotation:	Ambulato	OMP,		
Examinati	venous	findings and	recognize pathologic findings of a extremity venous		General	ry	Bedside		
on	pathology	diagnosis	pathology and reason to reach a diagnosis	4	Surgery	Teaching	Teaching	OSCE	OSPE
	, , , , , , , , , , , , , , , , , , , ,				Clinical				
Clinical	Extremity	Pathologic	recognize pathologic findings of a extremity		Rotation:	Ambulato	OMP,		
Examinati	lymphatic	findings and	lymphatic pathology and reason to reach a		General	ry	Bedside		
on	pathology	diagnosis	diagnosis	4	Surgery	Teaching	Teaching	OSCE	OSPE
	, , , , , , , , , , , , , , , , , , , ,				Clinical				
Clinical		Pathologic			Rotation:	Ambulato	OMP,		
Examinati	Examinatio	findings and	recognize pathologic findings of a breast pathology		General	ry	Bedside		
on	n of breast	diagnosis	and reason to reach a diagnosis	4	Surgery	Teaching	Teaching	OSCE	OSPE
					Clinical		I succession of the succession		
Clinical	Extremity	Pathologic			Rotation:	Ambulato	OMP,		
Examinati	arterial	findings and	recognize pathologic findings of a extremity arterial		General	ry	Bedside		
on	pathology	diagnosis	pathology and reason to reach a diagnosis	4	Surgery	Teaching	Teaching	OSCE	OSPE
	patriology	u.ug.rosis			Clinical	- caariing	1 cao.m.g	0002	00.2
					Rotation:	Ambulato	OMP,		
Surgical		Confidentialit	exhibit the professionalism to respect privacy of the		General	ry	Bedside		
Ethics	Ethics	v	patient	4	Surgery	Teaching	Teaching	OSCE	OSPE
201100	Etilies	Maintinance	patient	-	Clinical	reacting	reacting	OSCE	031 E
		of			Rotation:	Ambulato	OMP,		
Surgical		Confidentialit	exhibit the professionalism to maintain		General		Bedside		
Ethics	Ethics	V	confidentiality of the patient	4	Surgery	ry Teaching	Teaching	OSCE	OSPE
20.1103	Luncs	У	dominationary or the patient	-	Clinical	reacting	reacting	OSCE	031 L
			interview a national and attendent magningfully to			Ambulato	OMP,		
Surgical			interview a patient and attendant meaningfully to gather pertinent info about patient and disease		Rotation:				
Ethics	Ethics	Counselling	condition	4	General Surgery	ry Teaching	Bedside Teaching	OSCE	OSPE
201100	Etilies	counselling	Condition	-	Surgery	reaching	reacting	OSCE	031 E
				1			+ + +		
	1				Clinical	Ambulata	0.10		
Curgical	1		elicit consent for history and examination of a		Rotation:	Ambulato	OMP,		
Surgical Ethics	Cthics.	Consont	patient with burns	4	Plastic	ry Tooching	Bedside	OCCE	OCDE
EUTICS	Ethics	Consent	patient with burns	4	Surgery	Teaching	Teaching	OSCE	OSPE
		Extent of							
		burn, rule of			Clinical				
Plastic	1	nine, Lund	calculate the extent of burn applying rule of nine,		Rotation:	Ambulato	OMP,		
	Burns	and Broder's	Lund and Broder's Chart	4	Plastic	ry Toaching	Bedside	OCCE	OCDE
Surgery	Burns	Chart	Lunu and broder 5 Chart	4	Surgery	Teaching	Teaching	OSCE	OSPE
	1	Dogras - : - d			Clinical	Ambulata	0.40		
Diagtic	Evami+i-	Degree and	diagnosa dagraa and danth of house bookings		Rotation:	Ambulato	OMP,		
Plastic	Examinatio	depth of	diagnose degree and depth of burn by clinical	4	Plastic	ry	Bedside	0005	OCDE
Surgery	n of Burns	burns	examination	4	Surgery	Teaching	Teaching	OSCE	OSPE
	1	Classificated			Clinical	Ambulata	0.10		
DI+i		Classify and			Rotation:	Ambulato	OMP,		
Plastic	Tissue	enlist their	classify various tissue flaps and enlist their clinical	4	Plastic	ry Topobing	Bedside	0005	OCDE
Surgery	Flaps	clinical utility	utility	4	Surgery	Teaching	Teaching	OSCE	OSPE
	.								
Musculos	Clinical				Clinical	Ambulato	OMP,		
	Examinatio		perform clinical examination on an orthopedic		Rotation:	ry	Bedside		
keletal		1	patient	4	Orthopedics	Teaching	Teaching	OSCE	OSPE
keletal Surgery	n		P		· · · · · · · · · · · · · · · · · · ·				
Surgery		Fracture of							
Surgery Musculos	Clinical	neck of	perform clinical examination on a patient with		Clinical	Ambulato	OMP,		
Surgery				4		Ambulato ry Teaching	OMP, Bedside Teaching	OSCE	OSPE

Musculos		Diagnosis			Clinical			Ambulato	l lo	MP,			
keletal		and	diagnose a pathology of hip joint and develop a		Rotation:			ry		edside			
Surgery	Hip joint	management	management plan	4	Orthopedics			Teaching	T	eaching		OSCE	OSPE
Musculos		Diagnosis			Clinical			Ambulato	0	MP,			
keletal		and	diagnose a pathology of knee joint and develop a		Rotation:			ry		edside			
Surgery	Knee joint	management	management plan	4	Orthopedics			Teaching	T	eaching		OSCE	OSPE
Musculos		Diagnosis			Clinical			Ambulato	0	MP,			
keletal		and	diagnose a pathology of ankle joint and develop a		Rotation:			ry		edside			
Surgery	Ankle Joint	management	management plan	4	Orthopedics			Teaching		eaching		OSCE	OSPE
Musculos		Diagnosis			Clinical			Ambulato		MP,			
keletal	Shoulder	and .	diagnose a pathology of shoulder joint and develop	١.	Rotation:			ry		edside		0005	OCDE
Surgery	Joint	management	a management plan	4	Orthopedics			Teaching		eaching		OSCE	OSPE
Musculos	Elbow	Diagnosis	diagnose a pathology of elbow joint and develop a		Clinical			Ambulato		MP,			
keletal Surgery	Joint	and	management plan	4	Rotation: Orthopedics			ry Teaching		edside eaching		OSCE	OSPE
Musculos	JOHIC	management	management plan	-	Clinical		+	Ambulato		MP,		OSCL	USFL
keletal		Diagnosis and	diagnose a pathology of wrist joint and develop a		Rotation:					edside			
Surgery	Wrist Joint	management	management plan	4	Orthopedics			ry Teaching		eaching		OSCE	OSPE
Musculos		Diagnosis			Clinical			Ambulato		MP,			
keletal		and	diagnose a pathology of hand and develop a		Rotation:			ry		edside			
Surgery	Hand	management	management plan	4	Orthopedics			Teaching		eaching		OSCE	OSPE
Musculos		Diagnosis			Clinical			Ambulato		MP,			
keletal		and	diagnose a pathology of foot and develop a		Rotation:			ry		edside			
Surgery	Foot	management	management plan	4	Orthopedics			Teaching		eaching		OSCE	OSPE
					Clinical								
	Peripheral	Acute and	perform clinical examination of ischemic limb and		Rotation:			Ambulato	0	MP,			
Vascular	Arterial	chronic limb	differentiate between acute and chronic ischemic		Cardiovascul			ry	В	edside			
System	system	ischemia	limb	4	ar Surgery			Teaching	T	eaching		OSCE	OSPE
					Clinical								
					Rotation:			Ambulato	0	MP,			
Vascular	Acute limb		develop a management plan for acute ischemic		Cardiovascul			ry		edside			
System	ischemia	Management	limb	4	ar Surgery			Teaching	T	eaching		OSCE	OSPE
	Characia				Clinical			A I 4					
\/l	Chronic		dala		Rotation:			Ambulato		MP,			
Vascular	limb ischemia	Managamant	develop a management plan for chronic ischemic limb	1	Cardiovascul			ry Teaching		edside eaching		OCCE	OSPE
System	iscrienna	Management	IIIIII	4	ar Surgery Clinical		-	reacrining	- ''	eaciiiig		OSCE	USPE
		Management according to			Rotation:			Ambulato		MP,			
Vascular	Vericose	SEEP	diagnose varicose veins and develop a management		Cardiovascul			ry		edside			
System	veins	Classification	plan according to SEEP classification	4	ar Surgery			Teaching		eaching		OSCE	OSPE
,	-				Clinical								
		Indications			Rotation:			Ambulato	0	MP,			
Vascular	Amputatio	and types of	enlist the indications of amputations and describe		Cardiovascul			ry		edside			
System	ns	amputations	various types of amputations	4	ar Surgery			Teaching		eaching		OSCE	OSPE
					Clinical								
					Rotation:			Ambulato	0	MP,			
Vascular	Aortic		summarize the presentation of aortic aneurysm and		Cardiovascul			ry	В	edside			
System	aneurysm	Management	develop an initial management plan	4	ar Surgery			Teaching	T	eaching		OSCE	OSPE
					Clinical								
	Vascular				Rotation:			Ambulato	_	MP,			
Vascular	pathology		diagnose a vascular pathology of foot and develop a		Cardiovascul			ry		edside			0000
System	of foot	Management	management plan	4	ar Surgery			Teaching	T	eaching		OSCE	OSPE
					Clinical			Ambulata		A 4 D			
Vaccular	Lymphatic		diagnose a lymphatic nathology and symmetrics		Rotation:			Ambulato		MP,			
Vascular System	Lymphatic pathology	Management	diagnose a lymphatic pathology and summarize a management plan accordingly	1	Cardiovascul			ry Teaching		edside eaching		OSCE	OSPE
System	patriology	ivianagement	management plan accordingly	4	ar Surgery Clinical			reactining	1	cacining		USCE	USPE
					Rotation:			Ambulato		MP,			
								, unbulato		,			
Vascular		Steps of	diagnose a case of DVT and enlist steps of					rv	D	edside			
Vascular System	DVT	Steps of management	diagnose a case of DVT and enlist steps of management	4	Cardiovascul ar Surgery			ry Teaching		edside eaching		OSCE	OSPE

Periopera tive Care Periopera tive Care Periopera tive Care	Infection control Anesthesia		exhibit basic sterilization and infection control protocol in clinical encounters	4	Clinical Rotation: Anesthesia		Ambulato ry	OMP, Bedside			
Periopera tive Care Periopera	control			4			.,	Deaside			
Periopera tive Care	Anesthesia		•		Allestilesia		Teaching	Teachin	t l	OSCE	OSPE
tive Care Periopera	Anesthesia				Clinical		Ambulato	OMP,	,		
Periopera	Anesthesia		elicit preoperative anesthetic evaluation of a		Rotation:		ry	Bedside			
		Evaluation	surgical patient	4	Anesthesia		Teaching	Teachin		OSCE	OSPE
		Drugs and	<u> </u>								
		steps of			Clinical		Ambulato	OMP,			
tive Care		General	summarize pharmacologic drugs and steps and		Rotation:		ry	Bedside			
	Anesthesia	Anesthesia	general anesthesia	4	Anesthesia		Teaching	Teachin	,	OSCE	OSPE
		steps of bag			Clinical		Ambulato	OMP,			
Periopera		mask	enlist the steps of bag mask ventilation in an		Rotation:		ry	Bedside			
tive Care	Anesthesia	ventilation	anesthetized patient	4	Anesthesia		Teaching	Teachin	5	OSCE	OSPE
					Clinical		Ambulato	OMP,			
Periopera		acute pain	recognize, assess and formulate a treatment plan		Rotation:		ry	Bedside			
tive Care	Anesthesia	management	for acute pain	4	Anesthesia		Teaching	Teachin	S	OSCE	OSPE
		techniques of			Clinical		Ambulato	OMP,			
Periopera		laryngeal	summarize the techniques of laryngeal mask airway		Rotation:		ry	Bedside			
tive Care	Anesthesia	mask airway	within OT setting	4	Anesthesia		Teaching	Teachin	5	OSCE	OSPE
ļ		BLS and									
		cardiopulmo			Clinical		Ambulato	OMP,			
Periopera		nary	summarize the steps of basic life support and		Rotation:		ry	Bedside			
tive Care	Anesthesia	resusitation	cardiopulmonary resuscitation	4	Anesthesia		Teaching	Teachin	3	OSCE	OSPE
ļ					Clinical						
Periopera		steps of IV	summarize the steps of iv cannulation and		Rotation:						
tive Care	Anesthesia	cannulation	demonstrate IV cannulation on a mannequin	4	Anesthesia	Skill Lab	Practical				OSPE
	Fluid	Types of IV			Clinical						
Periopera	manageme	fluids and	summarize various types of IV fluids and their		Rotation:	Skill Lab,					
tive Care	nt	clinical use	clinical use	4	Anesthesia	OT	Practical				OSPE
		Lower			Clinical		Ambulato	OMP,			
Urinary	History	urinary	elicit the history of lower urinary symptoms and		Rotation:		ry	Bedside			
System	Taking	symptoms	correlate with pathology	4	Urology		Teaching	Teachin	5	OSCE	OSPE
		Bladder									
ļ		outlet									
ļ	Clinical	obstruction	Perform clinical examination of a patient with		Clinical		Ambulato	OMP,			
Urinary	Examinatio	and	bladder outlet obstruction/BOO and formulate		Rotation:		ry	Bedside			
System	n	management	management plan	4	Urology		Teaching	Teachin	5	OSCE	OSPE
		Urinary tract			Clinical		Ambulato	OMP,			
Urinary	History	stones and	Demonstrate the Clinical History taking of a patient		Rotation:		ry	Bedside			
System	Taking	investigation	with urinary tract stones and investigate	4	Urology		Teaching	Teachin	,	OSCE	OSPE
	Urinary	Assessment	, ,		Clinical		Ambulato	OMP,	,		
Urinary	tract	and	assess the patient with stone disease and formulate		Rotation:		ry	Bedside			
System	stones	management	a management plan	4	Urology		Teaching	Teachin		OSCE	OSPE
		Common			0,						
ļ	Radiologic	pathologies			Clinical		Ambulato	OMP,			
Urinary	al imaging	on xray, IVP			Rotation:		ry	Bedside			
System	techniques	and CT	recognize common pathologies on x-ray, IVP and CT	4	Urology		Teaching	Teachin	5	OSCE	OSPE
	Acuto	Assassment			Clinical		Ambulato	OMP			
Urinary	Acute urinary	Assessment and	assess a patient with acute urinary retention and		Clinical Rotation:		Ambulato	OMP,			
System	retention	management	formulate a management plan	4	Urology		ry Teaching	Bedside Teachin	,	OSCE	OSPE
эузил П	reterration	Assessment	Torridate a management plan	-	Clinical		Ambulato	OMP,	·	UJCL	031 L
Urinary		and	assess a patient with hematuria and formulate a		Rotation:		ry	Bedside			
System	Hematuria	management	management plan	4	Urology		Teaching	Teachin	,	OSCE	OSPE
-,	·······································	Assessment			Clinical		Ambulato	OMP,	,	JJJL	55. 2
Urinary		and	assess a patient with flank pain and formulate a		Rotation:		ry	Bedside			
System	Flank pain	management	management plan	4	Urology		Teaching	Teachin	,	OSCE	OSPE
-,	uiik puiil	anagement		_	Clinical		Ambulato	OMP,)	JJCL	331 L
					Rotation:		ry	Bedside			
				4	Urology		Teaching	Teachin		OSCE	OSPE
								. 3001111			
			Final Vaca								
			Final Year								

			By the end of the Year 5, the student should be able to:										
Gastroint estinal System	Esophegea I Disorders	Surgical anatomy and investigation	describe the surgical anatomy and investigations for esophageal disorders	5	Section 10: Esophageal Disorders	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Esophegea I Disorders	Assessment and management of benign disorders	summarize the assessment and management of benign esophageal disorders	5	Section 10: Esophageal Disorders	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Esophegea I Disorders	enlist functional disorders, and achalasia cardia	enlist various functional disorders of the esophagus and explain achalasia cardia	5	Section 10: Esophageal Disorders	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Esophegea I Disorders	Investigation s for Dysphagia, staging of CA esophagus	advise appropriate investigations for dysphagia and staging of esophageal cancer	5	Section 10: Esophageal Disorders	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Esophegea I Disorders	Management options for CA esophagus	summarize management options for esophageal cancer	5	Section 10: Esophageal Disorders	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Esophegea I Disorders	Assessment and management of esophageal leak	describe the assessment and management of esophageal leak	5	Section 10: Esophageal Disorders	Interactive Lecture				MCQs	SEQs		
	Thyroid												
Endocrine System	and Parathyroi d gland	Surgical anatomy and physiology	summarize the surgical anatomy and physiology of thyroid and parathyroid gland	5	Section 11: Endocrine Surgery	Interactive Lecture				MCQs	SEQs		
Endocrine System	Thyroid gland	Biochemical and radiological investigation s	apply appropriately biochemical and radiological investigations for diagnosing thyroid disorder	5	Section 11: Endocrine Surgery	Interactive Lecture				MCQs	SEQs		
Endocrine System	Thyroid gland	Clinical features of hypothyroidi sm and management	evaluate clinical features of hypothyroidism and enlist options of management	5	Section 11: Endocrine Surgery	Interactive Lecture				MCQs	SEQs		
Endocrine System	Thyroid gland	Graves's disease and management	describe the diagnosing features of Grave's disease and summarize the management options	5	Section 11: Endocrine Surgery	Interactive Lecture				MCQs	SEQs		
Endocrine System	Thyroid gland	Assessment and management of throid nodules	summarize the assessment and management of thyroid nodules	5	Section 11: Endocrine Surgery	Interactive Lecture				MCQs	SEQs		
Endocrine System	Thyroid gland	Assessment and management of thyroid cancer	explain the assessment and management of thyroid cancer	5	Section 11: Endocrine Surgery	Interactive Lecture				MCQs	SEQs		
Endocrine System	Parathyroi d gland	Subtypes of MEN syndrome, investigation s and treatment	differentiate among subtypes of MEN syndrome, order appropriate investigation and enlist treatment options	5	Section 11: Endocrine Surgery	Interactive Lecture				MCQs	SEQs		

1 1		Surgical											
		anatomy and			Section 11:								
Endocrine	Parathyroi	physiology +	summarize surgical anatomy and physiology of		Endocrine	Interactive							
System	d gland	investigation	parathyroid gland and its relevant investigations	5	Surgery	Lecture				MCQs	SEQs		
		Primary											
		hyperparathy											
		roidism,											
		hypercalcemi	analyze differentials of hypercalcemia, diagnose		Section 11:								
Endocrine	Parathyroi	a and	primary hyperthyroidism and enlist management		Endocrine	Interactive							
System	d gland	treatment	options	5	Surgery	Lecture				MCQs	SEQs		
		Assessment											
		and											
		management											
		of secondary			Section 11:								
Endocrine	Parathyroi	parathyroidis	describe the assessment and management of		Endocrine	Interactive							
System	d gland	m	secondary hyperparathyroidism	5	Surgery	Lecture				MCQs	SEQs		
		Surgical			Section 11:								
Endocrine	Adrenal	anatomy and	summarize the surgical anatomy and physiology of		Endocrine	Interactive							
System	glands	physiology	adrenal gland	5	Surgery	Lecture				MCQs	SEQs		
		surgical											
		management											
		of Conn's											
		disease +	recognize incidentilomas radiologically and		Section 11:								
Endocrine	Adrenal	incidentiloma	summarize surgical management of Conn's		Endocrine	Interactive							
System	glands	S	syndrome	5	Surgery	Lecture				MCQs	SEQs		
		Cushing's											
		disease											
		management											
		+ causes of			Section 11:								
Endocrine	Adrenal	central	enlist causes of central obesity and manage		Endocrine	Interactive							
System	glands	obesity	Cushing's disease	5	Surgery	Lecture				MCQs	SEQs		
		Surgical											
		assessment											
		and											
		management											
		for			Section 11:								
Endocrine	Adrenal	pheochromo	summarize the surgical assessment and		Endocrine	Interactive							
System	glands	cytoma	management options of Pheochromocytoma	5	Surgery	Lecture				MCQs	SEQs		
		Preparation											
		of a case of			Section 11:								
Endocrine	Adrenal	pheopchrom	describe the preparation of a case of		Endocrine	Interactive							
System	glands	ocytoma	pheochromocytoma	5	Surgery	Lecture				MCQs	SEQs		
		Assessment											
		and											
_ , ,		management			Section 11:								
Endocrine		of ovarian	summarize the assessment and management of	_	Endocrine	Interactive				1460	CEC		
System	Ovaries	cancer	Ovarian cancer	5	Surgery	Lecture				MCQs	SEQs		
Fodo:		Surgical	heinfith a surgical anatomy and about the		Section 11:	Interactive							
Endocrine	T	anatomy and	brief the surgical anatomy and physiology of	_	Endocrine	Interactive				MCO	CEC		
System	Testes	physiology	testicles	5	Surgery	Lecture				MCQs	SEQs		
		Management											
Fada :		of benign	diamand and and and and and and and and and		Section 11:	latara e							
Endocrine	T	testicular	diagnose and enlist management options for benign	_	Endocrine	Interactive				MCO	CEC		
System	Testes	disorders	testicular disorders	5	Surgery	Lecture				MCQs	SEQs		
		Assessment											
		and .											
Fodo		management	summaring the assessment and assessment		Section 11:	Interestive							
Endocrine	Tostos	of testicular	summarize the assessment and management of	_	Endocrine	Interactive				MCOs	CEC-		
System	Testes	cancer	testicular cancer	5	Surgery	Lecture				MCQs	SEQs		
	Head and	assessment			Section 12:								
Head and	neck	and	summarize basic principles of assessment and		Head & Neck	Interactive							
Neck	cancers	management	management of head & Neck Cancers	5	Surgery	Lecture				MCQs	SEQs		

ı	ī	l	I					ı	l	i	ı			
		investigation												
		and .												
		management			Section 12:									
Head and		of tongue	differentiate and investigate various tongue ulcers		Head & Neck	Interactive								
Neck	Tongue	ulcers and CA tongue	and summarize management options for CA Tongue	5	Surgery	Lecture					MCQs	SEQs		
NCCK	Benign	torigue	and summarize management options for ex rongue	3	Section 12:	Lecture					ivicus	SEUS	-	
Head and	disorders		summarize benign disorders of the neck and their		Head & Neck	Interactive								
Neck	of neck	Management	management options	5	Surgery	Lecture					MCQs	SEQs		
IVCCK	Benign	ivianagement	management options	-	Juigery	Lecture					IVICQS	JEQJ		
	salivary	Assessment			Section 12:									
Head and	gland	and	describe the assessment and management of		Head & Neck	Interactive								
Neck	tumors	management	benign salivary gland tumors	5	Surgery	Lecture					MCQs	SEQs		
	Malignant		0 70		G- /							,		
	Salivary	Assessment			Section 12:									
Head and	gland	and	explain the assessment and management of		Head & Neck	Interactive								
Neck	tumors	management	malignant salivary gland tumors	5	Surgery	Lecture					MCQs	SEQs		
					Section 13:									
		Assessment			Clinical									
Trauma	Trauma	and	summarize the assessment and management of		Aspects of									
Surgery	patient	management	trauma patient- Scenario based learning	5	Trauma	SBL					MCQs	SEQs		
					Section 13:									
	1	Assessment			Clinical									
Trauma	Chest	and	summarize the assessment and management of		Aspects of									
Surgery	Trauma	management	chest trauma patient- Scenario based learning	5	Trauma	SBL					MCQs	SEQs		
					Section 13:									
		Assessment			Clinical									
Trauma	Abdominal	and	summarize the assessment and management of		Aspects of									
Surgery	Trauma	management	abdominal trauma patient- Scenario based learning	5	Trauma	SBL					MCQs	SEQs		
					Section 13:									
_		Assessment			Clinical									
Trauma	Pelvic	and .	summarize the assessment and management of	_	Aspects of	CDI					1460	650		
Surgery	Trauma	management	pelvic trauma patient- Scenario based learning	5	Trauma	SBL					MCQs	SEQs		
		Accocomont	summarize the assessment and management of		Section 13:									
Trauma	Neurologic	Assessment and	summarize the assessment and management of neurological trauma patient- Scenario based		Clinical									
Surgery	al Trauma	management	learning	5	Aspects of Trauma	SBL					MCQs	SEQs		
Surgery	arriadina	management	icarining	,	Section 13:	JDL					ivicus	JLQ3		
		Assessment			Clinical									
Trauma	Extremity	and	summarize the assessment and management of		Aspects of									
Surgery	Trauma	management	extremity trauma patient- Scenario based learning	5	Trauma	SBL					MCQs	SEQs		
22 62 7			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,											
					Section 14:								-	
Periopera	Perioperati				Perioperative	Interactive								
tive Care	ve care	Principles	summarize the principles of perioperative care	5	Care	Lecture					MCQs	SEQs		
	1	Classification	, , , , , , , , , , , , , , , , , , , ,		Section 14:									
Periopera	Preoperati	according to	classify pre operative patients according to ASA		Perioperative	Interactive								
tive Care	ve patient	ASA scoring	scoring	5	Care	Lecture					MCQs	SEQs		
					Section 14:									
Periopera	Preoperati	Risk	measure Risk Assessment For Pre Operative		Perioperative	Interactive								
tive Care	ve patient	assessment	Patients	5	Care	Lecture					MCQs	SEQs		
	1	Preoperative												
	1	measures for												
. .		uncommon			Section 14:									
Periopera tivo Coro	Preoperati	clinical	summarize preoperative measures for uncommon	_	Perioperative	Interactive					MCO	CEC		
tive Care	ve patient	scenarios	clinical scenarios	5	Care	Lecture					MCQs	SEQs		
Periopera	Surgical		describe the principles and the process of consent		Section 14:	Interactive								
tive Care	Ethics	Consent	taking for surgical procedures	5	Perioperative Care	Lecture					MCQs	SEQs		
LIVE COILE	Lunes		taking for surgical procedures	3	Care	Lecture					ivicus	JLUS		
	1	WHO patient safety			Section 14:									
Periopera	Preoperati	checklist and	recognize the value of WHO patient safety checklist		Perioperative	Interactive								
tive Care	ve patient	its utility	and summarize its clinical utility	5	Care	Lecture					MCQs	SEQs		
30.0				_	30.0							52.00		

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Porionora	Antibiotic	Role and	explain the role and clinical utility of antibiotic		Section 14:	Interactive							
Periopera tive Care	prophylaxs is	utility	prophylaxisis	5	Perioperative	Lecture				MCQs	SEQs		
tive care	15		propriyiaxisis	3	Care	Lecture				IVICQS	SEUS		
		High risk											
		patients,	annoning high viels and for developing DVT and		C+: 14.								
Periopera	DVT and	thromboemb	recognize high risk patients for developing DVT and		Section 14:	Interactive							
tive Care	VTE	olism	VTE and initiate venous thrombo-embolism	5	Perioperative Care	Lecture				MCQs	SEQs		
tive care	VIL	prophylaxsis	prophylaxis	3	Care	Lecture				ivicus	SEUS		
		Process of			6 11 44								
Dorionoro	Drooporati	tranfering	summaring the process of nations transfer 9		Section 14:	Interactive							
Periopera	Preoperati	and	summarize the process of patient transfer &	_	Perioperative	Interactive				****	CE O		
tive Care	ve patient	positioning	positioning (pre-operative to post-operative)	5	Care	Lecture				MCQs	SEQs		
					Section 14:								
Postopera	Postoperat	5		_	Perioperative	Interactive				****	CE O		
tive Care	ive patient	Principles	summarize the principles of post operative care	5	Care	Lecture				MCQs	SEQs		
		Principles of			Section 14:								
Surgical	Surgical	documentati	describe principles of documentation within	_	Perioperative	Interactive				****	CEO.		
Audit	Audit	on	surgical discipline	5	Care	Lecture				MCQs	SEQs		
		Principles of			Section 14:								
Periopera		pain .	summarize principles of pain assessment within	_	Perioperative	Interactive				1460	CEC.		
tive Care	Pain	management	perioperative setting	5	Care	Lecture				MCQs	SEQs		
		Pharmacologi			6								
		cal options			Section 14:								
Periopera		for pain	enlist pharmacological options for pain		Perioperative	Interactive							
tive Care	Pain	control	management	5	Care	Lecture				MCQs	SEQs		
		fluid											
Fluid and	Fluid	compartmen			Section 14:								
Electrolyt	manageme	ts and clinical	summarize body fluid compartments, third spacing		Perioperative	Interactive							
es	nt	implications	and their clinical implications	5	Care	Lecture				MCQs	SEQs		
		Enlist											
		replacement											
Fluid and	Fluid	fluids and			Section 14:								
Electrolyt	manageme	their	enlist common replacement fluids along with their		Perioperative	Interactive							
es	nt	composition	composition	5	Care	Lecture				MCQs	SEQs		
Fluid and	Fluid				Section 14:								
Electrolyt	manageme	Maintenance	calculate maintenance fluids in post-operative		Perioperative	Interactive							
es	nt	fluids	patients	5	Care	Lecture				MCQs	SEQs		
Fluid and	Electrolyte				Section 14:								
Electrolyt	S	steps of	interpret electrolyte imbalance & enlist		Perioperative	Interactive							
es	imbalance	management	management steps	5	Care	Lecture				MCQs	SEQs		
Gastroint					Section 14:								
estinal		Principles of			Perioperative	Interactive							
Surgery	Endoscopy	Endoscopy	summarize principles of endoscopy in GI surgery	5	Care	Lecture				MCQs	SEQs		
	Diagnostic												
	and												
Gastroint	therapeuti				Section 14:								
estinal	c .		enlist indications of diagnostic and therapeutic		Perioperative	Interactive							
Surgery	Endoscopy	Indications	endoscopy	5	Care	Lecture				MCQs	SEQs		
Gastroint		Complication			Section 14:								
estinal		s and	enlist complications of endoscopy and summarize		Perioperative	Interactive							
Surgery	Endoscopy	management	steps of initial management	5	Care	Lecture				MCQs	SEQs		
Gastroint	I links.	G-4			Section 15:	lasta ara atib a							
estinal	History	Gastrointesti	summarize salient points for meaningful history of a	_	Gastrointesti	Interactive				MCO	CEC		
System	Taking	nal disorders	patient with gastrointestinal disorder	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint	Clinical				Section 15:								
estinal	Examinatio	Hernia	diagnose a hernia swelling and demonstrate		Gastrointesti	Interactive							
System	n and tests	Swelling	confirmatory clinical tests for hernia	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint		Types,			Section 15:								
estinal		diagnosis and	enlist different types of Hernia, their diagnosis and		Gastrointesti	Interactive							
System	Hernia	management	relevant management	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint			•		Section 15:								
estinal		Complication	explain complications of hernia and respective		Gastrointesti	Interactive							
System	Hernia	s and	management plan	5	nal Surgery	Lecture				MCQs	SEQs		
			O	_	5. 1								

		respective											
		management											
Gastroint estinal		Management options for			Section 15: Gastrointesti	Interactive							
System	Hernia	hernia	enlist management options for hernias	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint estinal	Inguinal	Anatomy of Inguinal canal, mechanism of hernia	describe surgical anatomy inguinal canal, mechanism of hernia development and its clinical		Section 15: Gastrointesti	Interactive							
System	hernia	development	manifestations	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint estinal System	Groin Hernia	Preoperative assessment	summarize specifics of pre operative assessment for patients with groin hernia	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Peritoneal cavity	Anatomy of peritoneal cavity and its layers	summarize surgical anatomy of peritoneal cavity, and its layers and their clinical implications	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Peritonitis	Assessment and management	explain the assessment and initial management of a patient with peritonitis	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Peritonitis	Types of Peritonitis	classify diffent types of peritonitis and their clinical implications	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Peritonitis	Causes of peritonitis	enlist causes of peritonitis	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Peritonitis	Clinical features and treatment of peritonitis	describe clinical features, diagnosis and initial treatment of peritonitis	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Peritonium	Tumors of peritonium	enlist various tumors of peritoneum, and their clinical implications	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Mesenteri c Ischemia	Steps of management	diagnose a patient with mesenteric ischemia and enlist steps of management	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Mesentery	Inflammatory conditions	enlist inflammatory conditions of mesentery	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint		Mesenteric cyst, pelvic cyst or cyst of	distinguish mesenteric cyst from the cyst of pelvic		Section 15: Gastrointesti	Interactive							
estinal System Gastroint	Cyst	retroperitone al origin	or retroperitoneal origin	5	nal Surgery Section 15:	Lecture				MCQs	SEQs		
estinal System	Mesenteri c lesion	Clinical presentation	summarize clinical presentation of mesenteric lesions	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Retroperit oneal space	Anatomy	summarize surgical anatomy of retroperitoneal space	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Retroperit onium	Surgical conditions	summarize important surgical conditions affecting retroperitoneum	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	Stomach	Surgical anatomy	describe surgical anatomy of stomach and their clinical value	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint estinal System	GIT	Localize proxima/dist al gastric units	localize proximal / distal gastric units and their clinical implications	5	Section 15: Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		

Gastroint		Physiology			Section 15:								
estinal		relevent to		_	Gastrointesti	Interactive							
System	Stomach	surgery	explain physiology of stomach relevant to surgery	5	nal Surgery Section 15:	Lecture				MCQs	SEQs		
Gastroint estinal		Investigation s for gastric	enlist various investigations for the diagnosis of		Gastrointesti	Interactive							
System	Stomach	disorders	gastric disorder	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint		GERD and its			Section 15:	Internative							
estinal System	Stomach	pathophysiol ogy	explain GERD and its pathophysiology	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint	Storilacii	Diagnosis	explain delta una la paulophysiology	,	Section 15:	20000.0				ivicas	JEQJ		
estinal	Hiatal	and	summarize clinical manifestations, diagnosis and		Gastrointesti	Interactive							
System	hernia	treatment	treatment options for hiatal hernia	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint		Diagnosis			Section 15:								
estinal	Acid peptic	and	summarize clinical manifestations, diagnosis and		Gastrointesti	Interactive							
System	disease	treatment	treatment options for acid peptic disease	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint	Ci	Diagnosis			Section 15:	I							
estinal System	Carcinoma Stomach	and treatment	summarize clinical manifestations, diagnosis and treatment options for carcinoma stomach	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint	Storridon	treatment	a catherine options for cardinating stemach	,	Section 15:	20000.0				ivicas	JEQJ		
estinal	Small and	Anatomy and	describe surgical anatomy and physiology of small		Gastrointesti	Interactive							
System	large Gut	physiology	and large gut	5	nal Surgery	Lecture				MCQs	SEQs		
	Meckel diverticulu												
	m,												
	duodenal		summarize clinical overview of meckels diverticulum, Duoderal Atresia, Small Bowel Atresia										
Gastroint	and small	Clinical	diverticularit, budderar Arcesia, Sinan bower Arcesia		Section 15:	Interactive							
estinal System	bowel atresia	overview		5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint	Hirshsprun	Evaluation			Section 15:					eqs	0240		
estinal	gs's	and	evaluate a patient with chronic constipation due to		Gastrointesti	Interactive							
System	disease	management	hirshsprung's disease and summarize management	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint	Inflammat	6			Section 15:								
estinal System	ory Bowel Disease	Surgical aspects	describe an overview of surgical aspects of inflammatory bowel disease	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint	Intestinal	investigation	recognize a patient with Intestinal Obstruction,		Section 15:	200tai c				eqs	5245		
estinal	obstructio	s and	order appropriate investigations and start initial		Gastrointesti	Interactive							
System	n	management	treatment	5	nal Surgery	Lecture				MCQs	SEQs		
	Small and												
Gastroint	large bowel	differentiate			Section 15:								
estinal	obstructio	the	differentiate between Small & Large bowel		Gastrointesti	Interactive							
System	n	obstruction	Intestinal Obstruction	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint	Intestinal		initiate a management plan for the nations with		Section 15:	Interactive							
estinal System	obstructio n	Management	initiate a management plan for the patient with intestinal obstruction	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint		Diagnosis			Section 15:						0243		
estinal	Ischemic	and	describe clinical manifestation , diagnosis &		Gastrointesti	Interactive							
System	Colitis	treatment	treatment of Ischemic Colitis	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint	Pseudome	Diagnosis			Section 15:								
estinal	mbranous	and	describe clinical manifestation , diagnosis &		Gastrointesti	Interactive							
System	colitis	treatment	treatment of pseudomembranous colitis	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint estinal		Diagnosis and	describe clinical manifestation , diagnosis &		Section 15: Gastrointesti	Interactive							
System	Amebiasis	treatment	treatment of Amebiasis	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint	Altered	Assessment	assess a patient with altered bowel habits,		Section 15:								
estinal	bowel	and	investigate appropriately and develop a		Gastrointesti	Interactive							
System	habits	management	management plan	5	nal Surgery	Lecture				MCQs	SEQs		
Gastroint	Small bowel	Enlist and	enlist small bowel tumors and summarize		Section 15: Gastrointesti	Interactive							
estinal System	tumors	management	management of the tumors	5	nal Surgery	Lecture				MCQs	SEQs		
,			J		01						. ~		

Gastroint					Section 15:							
estinal					Gastrointesti	Interactive						
System	Appendix	Anatomy	describe clinically relevant anatomy of appendix	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint					Section 15:	Interactive						
estinal System	Appendix	Physiology	summarize the pathophysiology of appendix	5	Gastrointesti nal Surgery	Lecture				MCQs	SEQs	
System	Аррения	differentiate	summarize the pathophysiology of appendix	3	Harburgery	Lecture				IVICQS	JEQJ	
Gastroint		from pain in			Section 15:							
estinal	Appendicit	lower	differentiate appendicitis from another conditions		Gastrointesti	Interactive						
System	is	abdomen	causing pain in lower abdomen	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint		Diagnosis			Section 15:							
estinal	Appendicit is	and steps of	diagnose appendicitis and enlist steps of the	_	Gastrointesti	Interactive				MCO-	CEO-	
System Gastroint	15	management Steps of	management	5	nal Surgery Section 15:	Lecture				MCQs	SEQs	
estinal	Appendicit	appendecto			Gastrointesti	Interactive						
System	is	my	summarize the steps appendectomy	5	nal Surgery	Lecture				MCQs	SEQs	
		Complication										
		s appendicitis										
Gastroint		and			Section 15:							
estinal	Appendicit	appendecto	summarize complication of appendicitis and	_	Gastrointesti	Interactive				MCO-	CEO-	
System	is	my	appendectomy	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint estinal					Section 15: Gastrointesti	Interactive						
System	Rectum	Anatomy	describe surgical anatomy of rectum	5	nal Surgery	Lecture				MCQs	SEQs	
		Etiology and										
Gastroint		risk factors			Section 15:							
estinal		for CA	describe etiological & associated risk factors for CA		Gastrointesti	Interactive						
System	Rectum	rectum	Rectum	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint	Colorectal	Diagnosis	diagnose a case of colorectal cancer and investigate		Section 15:	Interactive						
estinal System	cancer	and investiations	appropriately	5	Gastrointesti nal Surgery	Lecture				MCQs	SEQs	
Gastroint		WHO and	The state of		Section 15:							
estinal	Colorectal	DUKES	summarize W.H.O classification & DUKES		Gastrointesti	Interactive						
System	cancer	classification	classification for colorectal cancer	5	nal Surgery	Lecture				MCQs	SEQs	
		TNM										
Gastroint	Calarastal	classification	summarina TNIA Classification of colorastal conser		Section 15:	Interactive						
estinal System	Colorectal cancer	and management	summarize TNM Classification of colorectal cancer and its impact on management	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs	
Gastroint	carreer	Diagnosis	und its impact on management		Section 15:	Lecture				Wicco	JEQJ	
estinal	Rectal	and	describe presentation, diagnosis and treatment		Gastrointesti	Interactive						
System	prolapse	treatment	options of rectal prolapse	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint		Presentation			Section 15:							
estinal	Solitary	and	describe the presentation of solitary rectal ulcer		Gastrointesti	Interactive						
System	rectal ulcer	management	and enlist management options	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint		Tumors and			Section 15:							
estinal	Anal CI	their	classify tumors of anal canal and their management	_	Gastrointesti	Interactive				MCOs	CFC-	
System Gastroint	Anal Canal	management Manifestatio	options	5	nal Surgery Section 15:	Lecture				MCQs	SEQs	
estinal	Hemorrhoi	n &	summarize clinical manifestation & treatments of		Gastrointesti	Interactive						
System	ds	treatment	hemorrhoids	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint		Manifestatio			Section 15:							
estinal	Anal	n &	summarize clinical manifestation & treatment of		Gastrointesti	Interactive						
System	Fissure	treatment	Anal Fissure	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint	Doringal	Manifestatio	summariza clinical manifestation 9 treatment		Section 15:	Interactive						
estinal System	Perianal abscess	n & treatment	summarize clinical manifestation & treatment perianal Abscess	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs	
Gastroint	4000000	Manifestatio	periorial ribbeess	,	Section 15:	Lecture				141003	JLQS	
estinal	Fistula in	n &	summarize clinical manifestation & treatment		Gastrointesti	Interactive						
System	Ano	treatment	Fistula in Ano	5	nal Surgery	Lecture				MCQs	SEQs	
Gastroint		Manifestatio			Section 15:							
estinal	Pilonidal	n &	summarize clinical manifestation & treatment		Gastrointesti	Interactive						
System	sinus	treatment	Pilonidal sinus	5	nal Surgery	Lecture				MCQs	SEQs	

Gastroint	Intra	I			Section 15:								
estinal	epithelial				Gastrointesti	Interactive							
System	neoplasia	describe	describe anal intra epithelial neoplasia	5	nal Surgery	Lecture				MCQs	SEQs		
	Non												
Gastroint	malignant				Section 15:								
estinal System	stricture of anal canal	Explain	explain non Malignant Strictures of anal canal	5	Gastrointesti nal Surgery	Interactive Lecture				MCQs	SEQs		
Gastroint	Malignant	Ехріаііі	explain non Manghant Strictures of anal canal	3	Section 15:	Lecture				ivicus	SEUS		
estinal	stricture of				Gastrointesti	Interactive							
System	anal canal	Classify	define classify malignant tumors of anal canal	5	nal Surgery	Lecture				MCQs	SEQs		
Surgical					Section 15:								
emergenc		Goals and	summarize goals and process of triage in surgical	_	Gastrointesti	Interactive							
У	Triage	process	emergency	5	nal Surgery	Lecture				MCQs	SEQs		
		Diamonia			C+i 1C-								
Breast		Diagnosis and	describe clinical presentation Diagnosis &		Section 16: Breast	Interactive							
Surgery	Mastitis	treatment	treatment of mastitis	5	Surgery	Lecture				MCQs	SEQs		
		Diagnosis			Section 16:								
Breast	Breast	and	describe clinical presentation Diagnosis &		Breast	Interactive							
Surgery	abscess	treatment	treatment of breast abscess	5	Surgery	Lecture				MCQs	SEQs		
Breast	Mammary duct	Diagnosis and	describe clinical presentation Diagnosis &		Section 16: Breast	Interactive							
Surgery	ectasia	treatment	treatment of mammary duct ectasia	5	Surgery	Lecture				MCQs	SEQs		
	non		·		<u> </u>								
	proliferativ												
	e				C+: 1C-								
Breast	fibrocystic changes of				Section 16: Breast	Interactive							
Surgery	breast	Enlist	enlist non proliferative fibrocystic changes of breast	5	Surgery	Lecture				MCQs	SEQs		
22827	proliferativ				23827								
	e												
	fibrocystic												
Proact	changes of				Section 16:	Interactive							
Breast Surgery	breast Explain	Explain	explain proliferative diseases of breast	5	Breast Surgery	Interactive Lecture				MCQs	SEQs		
ou.ge.y	Fibroaden	Explain	explain promerative discuses of Stease		ou.ge.y	Ecotar c				eqs	5245		
	ma and	Differentiate			Section 16:								
Breast	duct	and	differentiate between Fibrodenoma & duct		Breast	Interactive							
Surgery	papilloma	management	papilloma and summarize their management	5	Surgery	Lecture				MCQs	SEQs		
Breast					Section 16: Breast	Interactive							
Surgery	CA Breast	Risk factors	enlist Common Risk Factors for CA breast	5	Surgery	Lecture				MCQs	SEQs		
					Section 16:								
Breast	Breast				Breast	Interactive							
Surgery	mass	Workup	describe work up for breast mass	5	Surgery	Lecture				MCQs	SEQs		
Broast	Breast	Triple	apply Triple Assessment modality for breast		Section 16:	Interactive							
Breast Surgery	Disease	assesment	disease	5	Breast Surgery	Lecture				MCQs	SEQs		
J- /					Section 16:								
Breast		Classify and	classify CA Breast, explain staging of CA breast		Breast	Interactive							
Surgery	CA breast	staging TNM	according to TNM classification	5	Surgery	Lecture				MCQs	SEQs		
Breast		Management			Section 16:	Interactive							
Surgery	CA Breast	plan	formulate the management plan for CA breast	5	Breast Surgery	Lecture				MCQs	SEQs		
22.60.1	2	No. ann.			761								
					Section 17:								
Pediatric		Differential	enlist differential diagnosis of intestinal obstruction		Pediatric	Interactive							
Surgery	GIT	Diagnosis	in pediatric population	5	Surgery	Lecture				MCQs	SEQs		
		Diagnosis											
		and	1 1 10 10 10		Section 17:								
Pediatric	Urogenital	Treatment of Wilms tumor	describe Wilms's Tumor, clinical presentation, diagnosis & treatments	5	Pediatric	Interactive Lecture				MCQs	SEQs		
Surgery	Urogenital	vviiiiis tumor	ulagilosis & treatilients	5	Surgery	Lecture				IVICUS	SEUS		

r	i	1			ı								
		Diagnosis and											
		Treatment of			Section 17:								
Pediatric		Neuroblasto	describe neuroblastoma, clinical presentation,		Pediatric	Interactive							
Surgery	CNS	ma	diagnosis & treatments	5	Surgery	Lecture				MCQs	SEQs		
7		Diagnosis			0807								
		and											
		Treatment of			Section 17:								
Pediatric		Choledochal	describe choledochal cyst, clinical presentation,		Pediatric	Interactive							
Surgery	GIT	cyst	diagnosis & treatments	5	Surgery	Lecture				MCQs	SEQs		
		Diagnosis											
		and											
		Treatment of			Section 17:								
Pediatric		Hypospadias	differentiate between clinical presentation of		Pediatric	Interactive							
Surgery	Urogenital	& Epispadias	Hypospadias & epispadias	5	Surgery	Lecture				MCQs	SEQs		
			describe pathology of metabolic response to		Section 18:								
Trauma	Metabolic	Pathophysiol	trauma		Miscellaneou	Interactive							
Surgery	Response	ogy	uauma	5	s Surgery	Lecture				MCQs	SEQs		
	Hormones												
1	&		enumerate hormones and inflammatory mediators										
1_	inflammat		involved in mrt		Section 18:								
Trauma	ory	Enumerate		_	Miscellaneou	Interactive				NACO-	CEC		
Surgery	mediators	mediators		5	s Surgery	Lecture				MCQs	SEQs		
Trauma		Importance	describe importance of most in interesting cone of		Section 18:	Interactive							
	MRT	of MRT in	describe importance of mrt in intensive care setting	5	Miscellaneou	Lecture				MCOs	CEO ₂		
Surgery	IVIKI	ICU		3	s Surgery	Lecture				MCQs	SEQs		
Wound	Surgical	Differentiate	To differentiate between various types of surgical		Section 18:	Interactive							
Care	wounds	types	wounds	5	Miscellaneou s Surgery	Lecture				MCQs	SEQs		
Care	woulds	types		,	Section 18:	Lecture				IVICQS	JLQS	-	
Wound	Wound	Pathophysiol	To describe pathology of wound healing		Miscellaneou	Interactive							
Care	healing	ogy	To describe patriology of wound nearing	5	s Surgery	Lecture				MCQs	SEQs		
	0	Factors		1	J J J J J J J J J J J J J J J J J J J								
		affecting	enumerate various factors which affect wound		Section 18:								
Wound	Wound	wound	healing		Miscellaneou	Interactive							
Care	healing	healing		5	s Surgery	Lecture				MCQs	SEQs		
		Hypertrophie	differentiate between boundaries decreed		Section 18:								
Wound		d scar vs	differentiate between hypertrophied scar and keloid		Miscellaneou	Interactive							
Care	Scars	Keloid	kelola	5	s Surgery	Lecture				MCQs	SEQs		
					Section 18:								
Wound	Surgical		enumerate types of surgical wounds		Miscellaneou	Interactive							
Care	wounds	Enlist types		5	s Surgery	Lecture				MCQs	SEQs		
	Sepsis,												
	SIRS,		differentiate sepsis, SIRS, Severe Sepsis and										
	Multiogran	D:((Multiorgan Dysfunction (MODS)		Section 18:								
Infoctions	dysfunctio	Differentiate		_	Miscellaneou	Interactive				MCOs	CEO-		
Infections	n Callulata	types		5	s Surgery	Lecture				MCQs	SEQs		
	Cellulitis,												
	abcess,		differentiate specific infections like cellulitis,		Section 18:								
	tetanus,		abscess; tetanus and gas gangrene		Miscellaneou	Interactive							
Infections	gas gangrene	Differentiate		5	s Surgery	Lecture				MCQs	SEQs		
meedons	Buribiciic	Sincicidate		+	Section 18:					····cas	JEQJ		
General	Day case		define Day case surgery		Miscellaneou	Interactive							
Surgery	surgery	Describe	22 207 0000 00.80.7	5	s Surgery	Lecture				MCQs	SEQs		
					Section 18:								
General	Day case		identify cases suitable for day case surgery		Miscellaneou	Interactive							
Surgery	surgery	Identify cases	,	5	s Surgery	Lecture				MCQs	SEQs		
	-	Early	describe and consultant.		Section 18:								
General	Day case	Complication	describe early complications associated with day		Miscellaneou	Interactive							
Surgery	surgery	S	cases	5	s Surgery	Lecture				MCQs	SEQs		
			describe importance and stone of starilization and		Section 18:								
General	Sterilizatio	steps and	describe importance and steps of sterilization and disinfection		Miscellaneou	Interactive							
Surgery	n and	importance	distriction	5	s Surgery	Lecture				MCQs	SEQs		

	disinfectio												
	n General				Section 18:								
General Surgery	operation theatre	enumerate components	enumerate various components of operation theatre and their utility	5	Miscellaneou s Surgery	Interactive Lecture				MCQs	SEQs		
Surgical	Gowning and	technique and	describe importance and technique of OT dress; gowning and gloving in operation theatre		Section 18: Miscellaneou	Interactive							
skills	gloving	importance	gowing and gloving in operation arease	5	s Surgery	Lecture				MCQs	SEQs		
Waste managem ent	Waste disposal	various steps	enumerate various steps of OT waste disposal in the hospital	5	Section 18: Miscellaneou s Surgery	Interactive Lecture				MCQs	SEQs		
Minimal	Laproscop	hasis	describe the basic principles of laparoscopic surgery		Section 18:	Interactive							
Invasive Surgery	Laproscop y	basic principles	describe the basic principles of laparoscopic surgery	5	Miscellaneou s Surgery	Interactive Lecture				MCQs	SEQs		
Minimal Invasive	Laproscop		identify cases suitable for laparoscopic surgery		Section 18: Miscellaneou	Interactive							
Surgery	у	Identify cases		5	s Surgery	Lecture				MCQs	SEQs		
Minimal		components of	identify various components of languages onic tralley		Section 18:								
Invasive Surgery	Laproscop y	laproscopic trolley	identify various components of laparoscopic trolley	5	Miscellaneou s Surgery	Interactive Lecture				MCQs	SEQs		
54.85.7	,												
Hepatobili		Segments of liver and	describe various segments of liver with arterial		Section 19:								
ary	1 horas	blood supply	supply and venous drainage	_	Hepatobiliary	Interactive				NACO-	CEO-		
System	Liver	of liver Hematologic		5	Surgery	Lecture				MCQs	SEQs		
Hepatobili		al & Radiological	enumerate hematological and radiological		Section 19:								
ary		investigation	investigations of liver and biliary system		Hepatobiliary	Interactive							
System	Liver	s Grading and		5	Surgery	Lecture				MCQs	SEQs		
Hepatobili		mechanism	describe grading and mechanism of liver trauma		Section 19:								
ary System	Liver	of liver trauma		5	Hepatobiliary Surgery	Interactive Lecture				MCQs	SEQs		
Hepatobili		Identify liver	identify liver injuries in national processing in ED		Section 19: Hepatobiliary	Interactive							
ary System	Liver	trauma in ER	identify liver injuries in patients presenting in ER	5	Surgery	Lecture				MCQs	SEQs		
		Diagnosis and											
Hepatobili		management	describe diagnosis of liver injuries and their management		Section 19:								
ary System	Liver	of liver injuries		5	Hepatobiliary Surgery	Interactive Lecture				MCQs	SEQs		
Hepatobili	Trauma	damage control	describe the concept of damage control surgery		Section 19:	Interactive							
ary System	Surgery	surgery	describe the concept of damage control surgery	5	Hepatobiliary Surgery	Lecture				MCQs	SEQs		
Hepatobili	Gall Bladder &		describe the surgical anatomy of gall bladder and		Section 19:								
ary	Biliary	Anatomi	biliary passages along with anatomical variations	5	Hepatobiliary	Interactive				MCQs	SEOs		
System	passages Gall	Anatomy		3	Surgery	Lecture				IVICUS	SEQS		
Hepatobili ary	Bladder & Biliary	Investigation	enumerate investigates of gall bladder and biliary passages		Section 19: Hepatobiliary	Interactive							
System	passages	S	passages	5	Surgery	Lecture				MCQs	SEQs		
Hepatobili ary		Echinococcus	describe the life cycle of echinococcus		Section 19: Hepatobiliary	Interactive							
System	Liver	infection	,	5	Surgery	Lecture				MCQs	SEQs		
		Diagnosis and	enumerate clinical features, diagnosis and										
Hepatobili ary		management of hydatid	treatment of hydatid cyst of liver		Section 19: Hepatobiliary	Interactive							
System	Liver	cyst		5	Surgery	Lecture				MCQs	SEQs		

1 1	Gall												
Hepatobili	Bladder &		describe risk factors associated with gallstones		Section 19:								
ary	Biliary	Risk factors	describe risk factors associated with galistories		Hepatobiliary	Interactive							
System	passages	of gall stones		5	Surgery	Lecture				MCQs	SEQs		
Hepatobili	Gall Bladder &	Clinical	enumerate various clinical presentations of		Section 19:								
ary	Biliary	presentation	gallstones		Hepatobiliary	Interactive							
System	passages	of gall stone	8	5	Surgery	Lecture				MCQs	SEQs		
	Gall	Biliary colic,											
Hepatobili	Bladder &	acute and	diagnose patient with biliary colic, acute and		Section 19:								
ary	Biliary	chronic	chronic cholecystitis	_	Hepatobiliary	Interactive				NACO-	CEO-		
System	passages Gall	cholecystitis		5	Surgery	Lecture				MCQs	SEQs		
Hepatobili	Bladder &				Section 19:								
ary	Biliary	Complication	describe various complications of gallstones		Hepatobiliary	Interactive							
System	passages	of gallstones		5	Surgery	Lecture				MCQs	SEQs		
		indications of											
		laproscopic	differentiate between laparoscopic and open										
Hepatobili	Cholecyste	vs open	cholecystectomy; their indications and complications		Section 19: Hepatobiliary	Interactive							
ary System	ctomy	cholecystect omy	complications	5	Surgery	Lecture				MCQs	SEQs		
-,	Gall	,			0- /								
Hepatobili	Bladder &		describe features and diagnosis of obstructive		Section 19:								
ary	Biliary	Obstructive	jaundice		Hepatobiliary	Interactive							
System	passages	jaundice		5	Surgery	Lecture				MCQs	SEQs		
Hepatobili	Gall		anumerate various treatment entions available for		Section 19:								
ary	Bladder & Biliary	treatment for	enumerate various treatment options available for common bile duct stones		Hepatobiliary	Interactive							
System	passages	CBD stones	common site duct stories	5	Surgery	Lecture				MCQs	SEQs		
,	Gall												
Hepatobili	Bladder &		describe periampullary carcinoma it's diagnosis and		Section 19:								
ary	Biliary	Periampullar	management		Hepatobiliary	Interactive							
System	passages	y carcinoma		5	Surgery	Lecture				MCQs	SEQs		
Hepatobili	Clinical		diagnose patient with obstructive jaundice on		Section 19:								
ary System	Examinatio n	Obstructive jaundice	history and clinical examination	5	Hepatobiliary	Interactive Lecture				MCQs	CEO ₂		
System	Gall	Tumors of		5	Surgery	Lecture				ivicus	SEQs		
Hepatobili	Bladder &	Bile ducts,	enumerate various tumors of bile ducts their types		Section 19:								
ary	Biliary	diagnosis and	diagnosis and management		Hepatobiliary	Interactive							
System	passages	management		5	Surgery	Lecture				MCQs	SEQs		
		Physiology			Section 20:								
Endocrino		and	enumerate physiology of pancreas and it's		Pancreatic &	Interactive							
Endocrine System	Pancreas	investigation s	investigations	5	Spleen Surgery	Interactive Lecture				MCQs	SEQs		
-,		mechanism			Section 20:						02.00		
		and grading	describe the mechanism and grading of pancreatic		Pancreatic &								
Endocrine		of panceatic	trauma		Spleen	Interactive							
System	Pancreas	trauma		5	Surgery	Lecture				MCQs	SEQs		
		causes of			Section 20:								
Endocrine		causes of acute	enumerate causes of acute pancreatitis		Pancreatic & Spleen	Interactive							
System	Pancreas	pancreatitis		5	Surgery	Lecture				MCQs	SEQs		
·		clinical			- · ·								
		feature and	describe clinical features and diagnosis of acute		Section 20:								
1		diagnosis of	pancreatitis		Pancreatic &								
Endocrine	Dancroas	acute		5	Spleen	Interactive Lecture				MCQs	SEQs		
System	Pancreas	pancreatitis Differential		3	Surgery Section 20:	recture				ivicus	3EQS		
		diagnosis of	differentiate acute pancreatitis from other causes		Pancreatic &								
Endocrine		acute	of acute abdomen		Spleen	Interactive							
System	Pancreas	pancreatitis		5	Surgery	Lecture				MCQs	SEQs		
Endocrine		management	describe the management of acute pancreatitis and		Section 20:	Interactive							
System	Pancreas	of acute	it's complications	5	Pancreatic &	Lecture				MCQs	SEQs		

an	ancreatitis											
	nd its			Spleen Surgery								
l cc	omplication			Surgery								
s												
				Section 20:								
	Diagnosis of	describe clinical features and diagnosis of chronic		Pancreatic &								
	hronic	pancreatitis		Spleen	Interactive							
	ancreatitis		5	Surgery	Lecture				MCQs	SEQs		
	ndications			Section 20:								
	nd	describe ERCP it's indications and complications		Pancreatic &								
	omplication		_	Spleen	Interactive					650		
System Pancreas s c	of ERCP		5	Surgery	Lecture				MCQs	SEQs		
CI	Clinical			Section 20: Pancreatic &								
	eatures of	enumerate clinical features of CA pancreas		Spleen	Interactive							
	A pancreas		5	Surgery	Lecture				MCQs	SEQs		
	Diagnosis		_	Section 20:								
	nd			Pancreatic &								
	reatment of	describe diagnosis and treatment of CA pancreas		Spleen	Interactive							
System Spleen CA	A pancreas		5	Surgery	Lecture				MCQs	SEQs		
				Section 20:								
		describe surgical anatomy of spleen		Pancreatic &								
· ·	natomy of	describe surgical allatority of spiceri		Spleen	Interactive							
System Spleen sp	pleen		5	Surgery	Lecture				MCQs	SEQs		
				Section 20:								
Luman kastin		enumerate the functions of spleen		Pancreatic &								
	unctions of pleen	•	5	Spleen	Interactive Lecture				MCOs	SEQs		
System Spleen sp	pieeri		5	Surgery	Lecture				MCQs	SEUS		
	rauma vs	differentiate between trauma and elective		Section 20: Pancreatic &								
_	lective	splenectomy		Spleen	Interactive							
	plenectomy	spicificationity	5	Surgery	Lecture				MCQs	SEQs		
, spream ap	,		_	Section 20:								
				Pancreatic &								
Lymphatic Inc	ndications of	enumerate indications of splenectomy		Spleen	Interactive							
System Spleen sp	plenectomy		5	Surgery	Lecture				MCQs	SEQs		
				Section 20:								
	Complication	enlist complications of splenectomy		Pancreatic &								
	of	ambi compileations of spicification,	_	Spleen	Interactive							
System Spleen sp	plenectomy		5	Surgery	Lecture				MCQs	SEQs		
	cope and			Section 21:								
	linical	summarize the scope of cardiovascular surgery and	_	Cardiovascul	Interactive				MCO-	CEC.		
, , ,	pplication	its clinical applications	5	ar Surgery	Lecture				MCQs	SEQs		
	ssessment	assess a patient acute ischemic limb and devise an		Section 21:	Interactive							
	nd nanagement	initial management plan	5	Cardiovascul ar Surgery	Lecture				MCQs	SEQs		
	ssessment		3	Section 21:						3243		
	nd	assess a patient chronic ischemic limb and devise an		Cardiovascul	Interactive							
	nanagement	initial management plan	5	ar Surgery	Lecture				MCQs	SEQs		
	ssessment			Section 21:								
	nd	assess a patient with ruptured aortic aneurysm and		Cardiovascul	Interactive							
	nanagement	devise an initial management plan	5	ar Surgery	Lecture				MCQs	SEQs		
	ssessment	• •		Section 21:								
	nd	assess a patient with varicose veins and devise an		Cardiovascul	Interactive							
		initial management plan	5	ar Surgery	Lecture				MCQs	SEQs		
				Section 22:								
	cope and	summarize the scope of plastic surgery and its		Plastic	Interactive							
Surgery Surgery ap	pplication	applications	5	Surgery	Lecture				MCQs	SEQs		

•							•	•						
		Assessment												
		of Extent and												
		degree of			Section 22:									
Plastic		skin burn and	describe the assessment of extent and degree of	_	Plastic	Interactive								
Surgery	Burns	management	skin burn and its initial management	5	Surgery	Lecture					MCQs	SEQs		
					Section 22:									
Plastic		Types and	describe different types of skin grafting and its		Plastic	Interactive								
Surgery	Skin grafts	applications	applications	5	Surgery	Lecture					MCQs	SEQs		
					Section 22:									
Plastic		Types and	describe different types of wounds and their		Plastic	Interactive								
Surgery	Wound	management	respective management	5	Surgery	Lecture					MCQs	SEQs		
		Priniciples of												
Fluid and	Fluid	fluid			Section 23:									
Electrolyt	Managem	management	summarize the principles of fluid management in		Anesthesia	Interactive								
es	ent	in ICU	ICU setting	5	/ICU Care	Lecture					MCQs	SEQs		
		principles												
		and												
		strategies of			Section 23:									
Periopera		pain	describe the principles and strategies of pain		Anesthesia	Interactive								
tive Care	Pain	management	management	5	/ICU Care	Lecture					MCQs	SEQs		
		Steps of			Section 23:									
Anesthesi	Regional	regional			Anesthesia	Interactive								
a	Anesthesia	anesthesia	summarize the steps of regional anesthesia	5	/ICU Care	Lecture					MCQs	SEQs		
		Role of												
		anesthetist in			Section 23:									
Anesthesi		Disaster	describe the role of anesthetist in disaster		Anesthesia	Interactive								
a	Anesthesia	management	management	5	/ICU Care	Lecture					MCQs	SEQs		
		-												
		Assessment			Section 24:									
Urinary	Urological	and	describe the assessment and management of		Advanced	Interactive								
System	trauma	management	urological trauma	5	Urology	Lecture					MCQs	SEQs		
-,		Assessment		-	Section 24:						Wicqs	JEQJ		
Urinary	Renal	and	summarize the assessment and management of		Advanced	Interactive								
System	Tumors	management	renal tumors	5	Urology	Lecture					MCQs	SEQs		
System	14111013	Assessment	Tenar camors		Section 24:	Lecture					Wicqs	JEQJ		
Urinary	Bladder	and	describe the assessment and management of		Advanced	Interactive								
System	Trauma	management	bladder tumors	5	Urology	Lecture					MCQs	SEQs		
System	Traditia	Assessment	Sidder tarriors	-	Section 24:	Lecture					Wicqs	JEQJ		
Urinary	Prostatic	and	summarize the assessment and management of		Advanced	Interactive								
System	pathology	management	prostatic pathologies	5	Urology	Lecture					MCQs	SEQs		
System	patriology		prostate patriologies	3		Lecture					IVICQS	JEQJ		_
		Assessment			Section 24:									
Urinary	Urological	and	summarize the assessment and management of		Advanced	Interactive								
System	disorder	management	urological disorders in pediatric population	5	Urology	Lecture					MCQs	SEQs		
					Section 25:									
Central		Steps and			Clinical									
Nervous	Neuromon	clinical	summarize the steps of neuromonitoring and their		Neurosurger	Interactive								
System	itring	implication	clinical implications	5	У	Lecture					MCQs	SEQs		
					Section 25:									
Central	Extradural,	Assessment			Clinical									
Nervous	subdural	and	assess and manage a patient with extradural and		Neurosurger	Interactive								
System	hematoma	management	subdural hematoma	5	У	Lecture					MCQs	SEQs		
					Section 25:									
Central		Assessment			Clinical									
Nervous	Hydroceph	and			Neurosurger	Interactive								
System	alous	management	assess and manage a patient with hydrocephalous	5	У	Lecture					MCQs	SEQs		
					Section 25:									
Central	Cervical	Assessment			Clinical									
Nervous	spine	and	assess a patient with cervical spine injury and		Neurosurger	Interactive								
System	injury	management	develop initial management plan	5	У	Lecture					MCQs	SEQs		
Central		Assessment												
Nervous	Brain	and	assess a patient brain tumor, and summarize its		Section 25:	Interactive								
System	tumors	management	clinical implications	5	Clinical	Lecture					MCQs	SEQs		

System diso Gastroint estinal Upp System diso Gastroint estinal Low System diso Trauma Surgery Trau Breast Breas Surgery diso Ingu Gastroint estinal Peri System Diso Pediatric Surgery diso Vascular Vasc	ndocrine isorders pper GI isorders ower GI isorders rauma reast isorders aguinoscr tal & erinanal isorder ediatric urgical isorders	Assessment and management	describe assessment and management of a patient with endocrine disorder describe assessment and management of a patient with upper GI disorder describe assessment and management of a patient with Lower GI disorder describe assessment and management of a patient with trauma describe assessment and management of a patient with breast disorder describe assessment and management of a patient with breast disorder	5 5 5 5	Section 26: Revision Symposia Section 26:	Interactive Lectures Interactive Lectures Interactive Lectures Interactive Lectures Interactive Lectures				MCQs MCQs MCQs	SEQs SEQs SEQs		
System diso Gastroint estinal Upp System diso Gastroint estinal Low System diso Trauma Surgery Trau Breast Breas Surgery diso Ingu Gastroint estinal Peri System Diso Pediatric Surgery diso Vascular Vasc	ndocrine isorders pper GI isorders ower GI isorders rauma reast isorders aguinoscr tal & erinanal isorder ediatric urgical isorders	and management Assessment and management	with endocrine disorder describe assessment and management of a patient with upper GI disorder describe assessment and management of a patient with Lower GI disorder describe assessment and management of a patient with trauma describe assessment and management of a patient with breast disorder describe assessment and management of a patient with breast disorder	5 5 5	Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia	Interactive Lectures Interactive Lectures Interactive Lectures Interactive Lectures				MCQs MCQs	SEQs SEQs		
System diso Gastroint estinal Upp System diso Gastroint estinal Low System diso Trauma Surgery Trau Breast Breas Surgery diso Ingu Gastroint estinal Peri System Diso Pediatric Surgery diso Vascular Vasc	ndocrine isorders pper GI isorders ower GI isorders rauma reast isorders aguinoscr tal & erinanal isorder ediatric urgical isorders	and management Assessment and management	with endocrine disorder describe assessment and management of a patient with upper GI disorder describe assessment and management of a patient with Lower GI disorder describe assessment and management of a patient with trauma describe assessment and management of a patient with breast disorder describe assessment and management of a patient with breast disorder	5 5 5	Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia	Interactive Lectures Interactive Lectures Interactive Lectures Interactive Lectures				MCQs MCQs	SEQs SEQs		
estinal System diso Gastroint estinal Low System diso Trauma Surgery Trau Breast Breas Gastroint estinal Cotal estinal Peri System Disc Pediatric Surgery diso Vascular Vasc	pper GI isorders ower GI isorders rauma reast isorders iguinoscr tal & erinanal isorder ediatric urgical isorders	and management Assessment and management	with upper GI disorder describe assessment and management of a patient with Lower GI disorder describe assessment and management of a patient with trauma describe assessment and management of a patient with breast disorder describe assessment and management of a patient	5 5	Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia	Interactive Lectures Interactive Lectures Interactive Lectures				MCQs	SEQs		
Gastroint estinal Low System diso Trauma Surgery Trau Breast Breast Surgery diso Gastroint otal estinal Peri System Diso Pediatric Surgery diso Vascular Vascular	ower GI isorders rauma reast isorders nguinoscr tal & erinanal isorder ediatric urgical isorders	Assessment and management	describe assessment and management of a patient with Lower GI disorder describe assessment and management of a patient with trauma describe assessment and management of a patient with breast disorder describe assessment and management of a patient	5 5	Section 26: Revision Symposia Section 26: Revision Symposia Section 26: Revision Symposia	Interactive Lectures Interactive Lectures				MCQs	SEQs		
System diso Trauma Surgery Trau Breast Breast Surgery diso Gastroint otal estinal Peri System Diso Pediatric Surgery diso Vascular Vascu	rauma reast isorders nguinoscr tal & erinanal isorder ediatric urgical isorders	management Assessment and management Assessment and management Assessment and management Assessment and management Assessment and management	with Lower GI disorder describe assessment and management of a patient with trauma describe assessment and management of a patient with breast disorder describe assessment and management of a patient	5	Symposia Section 26: Revision Symposia Section 26: Revision Symposia	Interactive Lectures Interactive							
Surgery Trau Breast Breas Surgery diso Gastroint estinal Peri System Disc Pediatric surg Surgery diso Vascular Vasc	reast isorders nguinoscr tal & erinanal isorder ediatric urgical isorders	and management Assessment and management Assessment and management Assessment and management Assessment and management	with trauma describe assessment and management of a patient with breast disorder describe assessment and management of a patient	5	Revision Symposia Section 26: Revision Symposia	Lectures Interactive				MCOs	SEQs		
Surgery diso Gastroint otal estinal Peri System Diso Pediatric Surgery diso Vascular Vascu	reast isorders aguinoscr tal & erinanal isorder ediatric urgical isorders	and management Assessment and management Assessment and and management and	with breast disorder describe assessment and management of a patient		Revision Symposia								
Gastroint otal estinal Peri System Disco Pediatric Surgery disco Vascular Vascu	nguinoscr tal & erinanal isorder ediatric urgical isorders	Assessment and management Assessment and	describe assessment and management of a patient			Lectures				MCQs	SEQs		
estinal Peri System Disc Pediatric surg Surgery disc Vascular Vasc	erinanal isorder ediatric urgical isorders	and management Assessment and								WicQs	31.03		
Pediatric surg Surgery diso	urgical isorders	and		5	Revision Symposia	Interactive Lectures				MCQs	SEQs		
Vascular Vasc			describe assessment and management of a patient with pediatric surgical disorder	5	Section 26: Revision Symposia	Interactive Lectures				MCQs	SEQs		
Surgery Disc		Assessment and management	describe assessment and management of a patient with vascular disorder	5	Section 26: Revision Symposia	Interactive Lectures				MCQs	SEQs		
	epatobili	Assessment and	describe assessment and management of a patient	3	Section 26: Revision	Interactive				Wices	3LQ3		
	-	management	with hepatobiliary disorder	5	Symposia	Lectures				MCQs	SEQs		
	urgical	Assessment and management	describe assessment and management of a patient with common surgical short cases	5	Section 26: Revision Symposia	Interactive Lectures				MCQs	SEQs		
	. 0	Radiological perspective	describe radiological perspective of common surgical conditions	5	Section 26: Revision Symposia	Interactive Lectures				MCQs	SEQs		
			Psychomotor and Affective Domain		, ,								
Physical Physical Examinati Exam	xaminatio	Recognise patyhological	recognize pathologic findings of a general physical	_	Clinical Rotation: General			Ambulato ry	OMP, Bedside			0555	OCDE
on n		findings Diagnosis	examination and reason to reach a diagnosis	5	Surgery Clinical Rotation:			Teaching Ambulato	Teaching OMP,			OSCE	OSPE
General Surgery Swe		and management	diagnose a swelling and develop a management plan	5	General Surgery			ry Teaching	Bedside Teaching			OSCE	OSPE
General Necl	eck	Diagnosis and	diagnose a neck swelling and devise a management	5	Clinical Rotation: General			Ambulato ry	OMP, Bedside			OSCE	OSDE
		Diagnosis	plan	3	Surgery Clinical Rotation:			Teaching Ambulato	OMP,			OSCE	OSPE
		and management	diagnose an extremity swelling and develop a management plan	5	General Surgery			ry Teaching	Bedside Teaching			OSCE	OSPE
General Surgery Swe		Types and treatment	differentiate different type of swellings and discuss treatment options	5	Clinical Rotation: General Surgery			Ambulato ry Teaching	OMP, Bedside Teaching			OSCE	OSPE
General Surgery Ulce		Types and treatment	differentiate different types of ulcers and devise a management plan accordingly	5	Clinical Rotation: General Surgery			Ambulato ry Teaching	OMP, Bedside Teaching			OSCE	OSPE

ı		1			Clinical						
		Diagnosis			Rotation:		Ambulato	OMP,			
General	Malignant	and	to diagnose malignant ulcer and discuss its		General		ry	Bedside			
Surgery	Ulcers	management	management options	5	Surgery		Teaching	Teaching		OSCE	OSPE
		Assessment,			Clinical						
Endocrine	Primary	investigate	to assess a case primary thyrotoxicosis, order		Rotation:		Ambulato	OMP,			
System	Thyrotoxic osis	and management	appropriate investigations and formulate a management plan	5	General Surgery		ry Teaching	Bedside Teaching		OSCE	OSPE
System	0313	Assessment,	management plan	,	Clinical		reacting	reacting		OSCL	OJFL
		investigate	to diagnose a thyroid disorder, order relevant		Rotation:		Ambulato	OMP,			
Endocrine		and	investigations and formulate initial management		General		ry	Bedside			
System	Thyroid	management	plan	5	Surgery		Teaching	Teaching		OSCE	OSPE
		Assessment,			Clinical						
	6 17	investigate	assess a solitary nodule of thyroid, order		Rotation:		Ambulato	OMP,			
Endocrine	Solitary nodules	and	appropriate clinical investigations and formulate a management plan	5	General		ry	Bedside		OSCE	OSPE
System	Tiodules	management	ппападетент ріап	5	Surgery		Teaching	Teaching		USCE	USPE
		Assessment, investigate	assess a multinodular goiter, order appropriate		Clinical Rotation:		Ambulato	OMP,			
Endocrine	Multinodul	and	clinical investigations and formulate a management		General		ry	Bedside			
System	ar goitre	management	plan	5	Surgery		Teaching	Teaching		OSCE	OSPE
	Submandi				Clinical						
	bular and	Assessment, investigate	differentiate various submandibular and parotid		Rotation:		Ambulato	OMP,			
Endocrine	parotid	and	swellings, order relevant investigations and and		General		ry	Bedside			
System	swellings	management	formulate a treatment plan	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical						
		Diagnosis			Rotation:		Ambulato	OMP,			
General	Abdominal	and	diagnose an abdominal mass and develop relevant	_	General		ry	Bedside			
Surgery	mass	treatment	treatment strategy	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical		A la la	ONAR			
Hepatobili ary	History				Rotation: General		Ambulato ry	OMP, Bedside			
System	Taking	Biliary Colic	Elicit history of patient with biliary colic	5	Surgery		Teaching	Teaching		OSCE	OSPE
,		,	, , , , , , , , , , , , , , , , , , , ,		Clinical		, i				
Hepatobili	Clinical				Rotation:		Ambulato	OMP,			
ary	Examinatio				General		ry	Bedside			
System	n	Biliary Colic	Perform examination of biliary colic patient	5	Surgery		Teaching	Teaching		OSCE	OSPE
	CI :				Clinical			0145			
Hepatobili	Chronic	Differential	Diagnose chronic cholecystitis and enlist differential		Rotation: General		Ambulato	OMP,			
ary System	cholecystit is	Diagnosis	diagnosis	5	Surgery		ry Teaching	Bedside Teaching		OSCE	OSPE
3,512	.5				Clinical		readining			0002	00. 2
Hepatobili	Chronic				Rotation:		Ambulato	OMP,			
ary	cholecystit				General		ry	Bedside			
System	is	Management	Discuss management of chronic cholecystitis	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical			0140			
Hepatobili	History	Acute			Rotation:		Ambulato	OMP,			
ary System	Taking	Cholecystitis	Elicit history of patient with acute cholecystitis	5	General Surgery		ry Teaching	Bedside Teaching		OSCE	OSPE
		3.10.00931113	2		Clinical					UJCL	551 L
Hepatobili	Clinical				Rotation:		Ambulato	OMP,			
ary	Examinatio	Acute	perform clinical examination on a patient with		General		ry	Bedside			
System	n	Cholecystitis	acute cholecystitis	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical						
Hepatobili	Acute	Difforontial	Diagnose case of acute cheles estitic and anlist		Rotation:		Ambulato	OMP,			
ary System	Cholecystit is	Differential Diagnosis	Diagnose case of acute cholecystitis and enlist differential diagnosis	5	General Surgery		ry Teaching	Bedside Teaching		OSCE	OSPE
Зузсени	i3	Diagnosis	unici critiai diagnosis	,	Clinical		reaching	reactiling		UJCE	UJFE
Hepatobili	Acute				Rotation:		Ambulato	OMP,			
ary	Cholecystit				General		ry	Bedside			
System	is	Management	formulate management plan of acute cholecystitis	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical						
Hepatobili					Rotation:		Ambulato	OMP,			
ary	History	Obstructive	Flight history of nations with the state of the last	_	General		ry Toaching	Bedside		OSCE	OCDE
System	Taking	Jaundice	Elicit history of patient with obstructive jaundice	5	Surgery		Teaching	Teaching		OSCE	OSPE

Hepatobili	Clinical				Clinical Rotation:		Ami	oulato	OMP,		
ary	Examinatio	Obstructive	perform clinical examination of patient having		General		ry	54.4.5	Bedside		
System	n	Jaundice	obstructive jaundice	5	Surgery			ching	Teaching	OSCE	OSPI
		Diagnosis			Clinical						
Hepatobili	Objection and the	and enlist	Diagram and a falsakon akina ian ondia and a aliak		Rotation:			oulato	OMP,		
ary	Obstructiv e Jaundice	common	Diagnose case of obstructive jaundice and enlist common causes of this condition	5	General		ry	ching	Bedside Teaching	OSCE	OCD
System	e Jauriuice	causes	common causes of this condition	5	Surgery Clinical		Tea	criirig	reaching	OSCE	OSP
Hepatobili	Clinical	Percuss			Rotation:		Δml	oulato	OMP,		
ary	Examinatio	distended	palpate distended gall bladder and demonstrate		General		ry	Julato	Bedside		
System	n	gall bladder	Courvoisier's Law	5	Surgery			ching	Teaching	OSCE	OSP
					Clinical						
Hepatobili	Common				Rotation:		Aml	oulato	OMP,		
ary	bile duct		formulate a management plan for common bile		General		ry		Bedside		
System	stones	Management	duct stones	5	Surgery		Tea	ching	Teaching	OSCE	OSP
					Clinical						
Hepatobili	History	Acute			Rotation:			oulato	OMP,		
ary System	Taking	pancreatitis	Elicit history of patient with acute pancreatitis	5	General Surgery		ry Tea	ching	Bedside Teaching	OSCE	OSPI
эузил	10111115	Diagnosis	Endenistory or patient with acute pancieatus		Clinical		Tea	cini's	reactiling	OSCE	USPI
Hepatobili	Acute	and			Rotation:		Aml	oulato	OMP,		
ary	Pancreatiti	investigation	Diagnose acute pancreatitis and orders appropriate		General		ry		Bedside		
System	S	s	investigations	5	Surgery			ching	Teaching	OSCE	OSPI
					Clinical						
Hepatobili	Acute				Rotation:		Ami	oulato	OMP,		
ary	Pancreatiti		formulate a management plan for acute		General		ry		Bedside		
System	S	Management	pancreatitis	5	Surgery		Tea	ching	Teaching	OSCE	OSPI
					Clinical						
Hepatobili	Gall stones		davalan a managamant plan for gall stone		Rotation:			oulato	OMP,		
ary System	Pancreatiti s	Management	develop a management plan for gall stone pancreatitis	5	General Surgery		ry	ching	Bedside Teaching	OSCE	OSPI
Зузсен	3	ivialiagement	participation	,	Clinical		100	Cillia	reaching	OSCE	USFL
Hepatobili					Rotation:		Δml	oulato	OMP,		
ary	History	Pseudocyst			General		ry	Juliuco	Bedside		
System	Taking	Pancreas	Elicit history of patient of pseudo cyst of pancreas	5	Surgery			ching	Teaching	OSCE	OSPI
					Clinical						
Hepatobili		Diagnosis			Rotation:		Ami	oulato	OMP,		
ary	Pseudocyst	and	Diagnose pseudocyst of pancreas and formulate a		General		ry		Bedside		
System	Pancreas	management	management plan	5	Surgery		Tea	ching	Teaching	OSCE	OSPE
		Assessment,			Clinical						
Hepatobili	Culonomos	investigate	assess a patient with splenomegaly, order		Rotation:			oulato	OMP,		
ary	Splenomeg aly	and	appropriate investigations and formulate a	5	General		ry	ching	Bedside Teaching	OSCE	OSPE
System	ary	management	management plan	,	Surgery Clinical		Tea	Lining	reactility	USCE	USPE
		Diagnosis			Rotation:		Ami	oulato	OMP,		
General		and			General		ry		Bedside		
Surgery	Hernia	treatment	diagnose hernia and enlist its treatment options	5	Surgery			ching	Teaching	OSCE	OSPI
					Clinical						
	Extremity	Diagnosis			Rotation:		Aml	oulato	OMP,		
Vascular	venous	and	diagnose extremity venous pathology and develop a		General		ry		Bedside		
System	pathology	management	management plan	5	Surgery		Tea	ching	Teaching	OSCE	OSP
	Fortune 22	Diame :			Clinical				0145		
Vascular	Extremity	Diagnosis	diagnose extremity lymphatic pathology and		Rotation:			oulato	OMP,		
System	lymphatic pathology	and management	develop a management plan	5	General Surgery		ry Tea	ching	Bedside Teaching	OSCE	OSP
0,500111	Patriology	management	action a management plan	,	Clinical		Tea	cini's	reactiling	USCE	038
		Diagnosis			Rotation:		Ami	oulato	OMP,		
Breast	Breast	and	diagnose a breast pathology and discuss its		General		ry	Julato	Bedside		
Surgery	pathology	management	management options	5	Surgery			ching	Teaching	OSCE	OSP
'		<u> </u>			Clinical						
	Extremity	Diagnosis			Rotation:		Aml	oulato	OMP,		
Vascular	arterial	and	diagnose extremity arterial pathology and develop		General		ry		Bedside		
System	pathology	management	treatment plan	5	Surgery			ching	Teaching	OSCE	OSI

İ	İ	Exhibit the			Clinical							
		effective			Rotation:			Ambulato	OMP,			
Surgical Ethics	Breaking Bad News	communicati on skills	exhibit the effective communications skills for breaking a bad news	5	General Surgery			ry Teaching	Bedside Teaching		OSCE	OSPE
	Bud Hells	OTTSKIIS	Discussing a sea news	1	Clinical			reacting	reacting		OSCE	031 E
Curried					Rotation:			Ambulato	OMP,			
Surgical Ethics	Counseling	Demonstrate	demonstrate skills to effectively counsel a patient	5	General Surgery			ry Teaching	Bedside Teaching		OSCE	OSPE
			, , , , , , , , , , , , , , , , , , , ,		Clinical			0				
Surgical	Clinical		demonstrate skills to resolve clinical conflicts within		Rotation:			Ambulato	OMP,			
Ethics	Conflicts	Demonstrate	surgical domain	5	General Surgery			ry Teaching	Bedside Teaching		OSCE	OSPE
					Clinical			Ţ				
Clinical Examinati	Breast Examinatio		perform clinical examination on a mannequin of		Rotation: General							DOPS,
on	n	Perform	breast	5	Surgery	Practical	Skill Lab					OSPE
					Clinical							
Clinical Examinati	Rectal Examinatio				Rotation: General							DOPS,
on	n	Perform	perform per rectal examination on a mannequin	5	Surgery	Practical	Skill Lab					OSPE
CI: :					Clinical							
Clinical Examinati	Examinatio n of		perform examination stomas on a mannequin and		Rotation: General							DOPS,
on	stomas	Perform	discuss its indications and complications	5	Surgery	Practical	Skill Lab					OSPE
	N/				Clinical							
Surgical	IV cannulatio				Rotation: General							DOPS,
Skills	n	Perform	perform IV cannulation on a mannequin	5	Surgery	Practical	Skill Lab					OSPE
					Clinical Rotation:							
Surgical	Lumber				General							DOPS,
Skills	Puncture	Perform	perform lumber puncture on a mannequin	5	Surgery	Practical	Skill Lab					OSPE
					Clinical Rotation:							
Surgical	NG				General							DOPS,
Skills	insertion	Perform	perform NG Insertion on a mannequin	5	Surgery	Practical	Skill Lab					OSPE
	Foley's				Clinical Rotation:							
Surgical	Catheteriz				General							DOPS,
Skills	ation	Perform	perform Foley's Catheterization on a mannequin	5	Surgery	Practical	Skill Lab					OSPE
					Clinical Rotation:							
Surgical					General							DOPS,
Skills	Knot Tying	Perform	perform knot tying on a model	5	Surgery	Practical	Skill Lab					OSPE
					Clinical Rotation:							
Surgical	Chest				General							DOPS,
Skills	Intubation	Perform	perform chest intubation	5	Surgery Clinical	Practical	Skill Lab					OSPE
					Rotation:							
Surgical	C	Danfam		_	General	Dunation	CL:III.					DOPS,
Skills	Suturing	Perform	perform suturing on a model	5	Surgery	Practical	Skill Lab					OSPE
					Clinical							
Trouver	Curais-1				Rotation:			Ambulato	OMP,			
Trauma Surgery	Surgical Emergency	Assessment	assess a patient with trauma in surgical emergency	5	Emergency Surgery			ry Teaching	Bedside Teaching		OSCE	OSPE
J- /	J. 17				Clinical							
Trauma			perform a triage of the nationts based on soverity		Rotation:			Ambulato	OMP,			
Trauma Surgery	Triage	Perform	perform a triage of the patients based on severity of the injuries	5	Emergency Surgery			ry Teaching	Bedside Teaching		OSCE	OSPE
	<u> </u>				Clinical							
Trauma		Assessment	access a nationt with trauma and dovolon a plan for		Rotation:			Ambulato	OMP,			
	Trauma	resusitation	resuscitation of the patient	5				ry Teaching	Teaching		OSCE	OSPE
	Triage Trauma	Assessment and plan for	of the injuries assess a patient with trauma and develop a plan for		Surgery Clinical			Teaching Ambulato ry	Teaching		OSCE	

ı	i	İ									
		Assessment			Clinical Rotation:		Ambulato	OMP,			
Trauma	Pneumoth	and	assess a patient with pneumothorax and describe a		Emergency		ry	Bedside			
Surgery	orax	Management	management plan	5	Surgery		Teaching	Teaching		OSCE	OSPE
		Assessment			Clinical						
Conoral	Dain Lawer	and	assass a nationt with pain laws abdaman and		Rotation:		Ambulato	OMP,			
General Surgery	Pain Lower abdomen	investigation	assess a patient with pain lower abdomen and make a plan to investigate appropriately	5	Emergency Surgery		ry Teaching	Bedside Teaching		OSCE	OSPE
Surgery	abdomen	Assessment	make a plan to investigate appropriately	3	Clinical		reaching	reactiling		USCE	USPE
		and			Rotation:		Ambulato	OMP,			
General		investigation	assess a patient with peritonitis in emergency,		Emergency		ry	Bedside			
Surgery	Peritonitis	S	make a plan to investigate appropriately	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical						
Conoral		Managamant	davaler an initial management plan for a nations		Rotation:		Ambulato	OMP,			
General Surgery	Peritonitis	Management plan	develop an initial management plan for a patient with peritonitis	5	Emergency Surgery		ry Teaching	Bedside Teaching		OSCE	OSPE
Surgery	1 CHOING	pian	Withperitorius	-	Clinical		reacting	reacting		OSCL	031 L
	Intestinal		assess a patient with intestinal obstruction,		Rotation:		Ambulato	OMP,			
General	obstructio		differentiate between small and large gut		Emergency		ry	Bedside			
Surgery	n	Assessment	obstruction	5	Surgery		Teaching	Teaching		OSCE	OSPE
		Advise			Clinical						
General	Intestinal	appropriate	advise appropriate investigations for patient with		Rotation:		Ambulato	OMP,			
Surgery	obstructio n	investigation	intestinal obstruction	5	Emergency		ry Teaching	Bedside Teaching		OSCE	OSPE
Suigery	"	S			Surgery Clinical		reactiffig	reactiling		OJCL	O3i L
	Intestinal				Rotation:		Ambulato	OMP,			
General	obstructio	Management	develop a plan of initial and definitive management		Emergency		ry	Bedside			
Surgery	n	plan	of a patient with intestinal obstruction	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical						
		6			Rotation:		Ambulato	OMP,			
Surgical	Counsellin	Steps of Counselling	describe the steps of counseling a patient and	-	Emergency		ry	Bedside		OSCE	OCDE
Ethics	g	counselling	attendants about the severity of condition	5	Surgery		Teaching	Teaching		OSCE	OSPE
]				Clinical Rotation:		Ambulato	OMP,			
Surgical	Trauma	dynamics of	describe the dynamics of working within teams in		Emergency		ry	Bedside			
Ethics	Room	team work	emergency room environment	5	Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical						
		Assessment			Rotation:		Ambulato	OMP,			
Urinary	Urinary	and	to assess a patient with urinary retention and	_	Emergency		ry	Bedside			
System	retention	Management	describe the steps of initial management	5	Surgery		Teaching	Teaching		OSCE	OSPE
Musculos		Accoccment			Clinical		Ambulato	OMP,			
keletal		Assessment and initial	to assess a patient with fracture, describe initial		Rotation: Emergency		ry	Bedside			
System	Fractures	management	management options and involve orthopedics team	5	Surgery		Teaching	Teaching		OSCE	OSPE
	İ	Assessment,			Clinical						
		investigation	to assess a patient with abdominal trauma,		Rotation:		Ambulato	OMP,			
Trauma	Abdominal	s and	investigate appropriately and describe initial	_	Emergency		ry	Bedside		0000	000=
Surgery	Trauma	management	management	5	Surgery		Teaching	Teaching		OSCE	OSPE
	Control		to assess a patient with neurosurgical trauma,		Clinical		Ambulata	OMB			
Neuro	Central Nervous	Neurology	describe the steps of initial management and		Rotation: Emergency		Ambulato ry	OMP, Bedside			
Surgery	System	team	involving neuro team	5	Surgery		Teaching	Teaching		OSCE	OSPE
- '	<u> </u>				Clinical		, i	Ü			
]		to assess a pregnant female with lower abdominal		Rotation:		Ambulato	OMP,			
Gyneacol	Gyneacolo	Gyneacology	pain, order appropriate investigations and involve		Emergency		ry	Bedside			
ogy	gy	team	gynae team	5	Surgery		Teaching	Teaching		OSCE	OSPE
]				Clinical		Ambulata	OMP			
]				Rotation: Emergency		Ambulato ry	OMP, Bedside			
]			5	Surgery		Teaching	Teaching		OSCE	OSPE
					<i>J</i> ,						
					Clinical						
]	assessment			Rotation:		Ambulato	OMP,			
	Inhalationa	and initial	perform assessment of inhalational burn and		Plastic		ry	Bedside			
Burns	l burns	management	formulate initial management plan	5	Surgery		Teaching	Teaching		OSCE	OSPE

Plastic		Calculate fluid			Clinical Rotation: Plastic		Ambulato ry	OMP, Bedside			
Surgery	Burns	requirement	calculate fluid management of a burn patient	5	Surgery		Teaching	Teaching		OSCE	OSPE
Plastic Surgery	Burns	Initial Management	perform initial management of burns like deroofing of the blisters	5	Clinical Rotation: Plastic Surgery		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Clinical Examinati on	Examinatio n of wounds	Perform	perform thorough clinical examination of wound	5	Clinical Rotation: Plastic Surgery		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Plastic Surgery	Skin grafting	Types and their applications	differentiate different types of skin grafting and their respective applications	5	Clinical Rotation: Plastic Surgery		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Plastic Surgery	Flaps	Types and their utility	classify various types of flaps and reason their clinical utility	5	Clinical Rotation: Plastic Surgery		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Surgical Ethics	Counsellin g of burn patient	Perform	Perform counseling of a burn patient	5	Clinical Rotation: Plastic Surgery		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
		Perform									
Musculos keletal	Osteoarthr itic knee joint	assessment and plan initial	perform assessment of osteoarthritic knee joint and formulate initial management plan	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
System	Joint	management Perform	Torridate initial management plan	5	Orthopedics		reacrining	reacting		USCE	USPE
Musculos keletal System	Sports injury of knee joint	assessment and plan initial management	perform assessment of sports injury of knee joint and formulate initial management plan	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Musculos keletal System	Osteoarthi ritic hip joint	Perform assessment and plan initial management	perform assessment of osteoarthritic hip joint and formulate initial management plan	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Musculos keletal System	Sports injury of hip joints	Perform assessment and plan initial management	perform assessment of sports injury of hip joint and formulate initial management plan	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Musculos keletal System	osteoarthir itic shoulder joint	Perform assessment and plan initial management	perform assessment of osteoarthritic shoulder joint and formulate initial management plan	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Musculos keletal System	sports injury of shoulder joint	Perform assessment and plan initial management	perform assessment of sports injury of shoulder joint and formulate initial management plan	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Trauma Surgery	Polytraum a patient	Perform assessment	perform clinical assessment of a polytrauma patient	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE
Musculos keletal System	Cast	Describe steps of application	describe steps of cast application	5	Clinical Rotation: Specialized Orthopedics		Ambulato ry Teaching	OMP, Bedside Teaching		OSCE	OSPE

1	1	I			Clinical						
Musculos		Describe			Rotation:		Ambulato	OMP,			
keletal		steps of			Specialized		ry	Bedside			
System	Sling	application	describe steps of sling application	5	Orthopedics		Teaching	Teaching		OSCE	OSPE
					Clinical						
Musculos	Traction of	Perform and			Rotation:		Ambulato	OMP,			
keletal	distal	describe	perform traction of distal extremity and describe its		Specialized		ry	Bedside			
System	extremity	indications	indications	5	Orthopedics		Teaching	Teaching		OSCE	OSPE
		Perform									
		assessment			Clinical			0140			
Musculos	Snino	and plan	norform clinical assessment of a nationt with spine		Rotation:		Ambulato	OMP,			
keletal System	Spine injury	initial management	perform clinical assessment of a patient with spine injury and develop an initial management plan	5	Specialized Orthopedics		ry Teaching	Bedside Teaching		OSCE	OSPE
System	injury	Perform	injury and develop an initial management plan	3	Orthopedics		reaching	reaching		USCE	USPE
		assessment			Clinical						
Musculos	Cervical	and plan			Rotation:		Ambulato	OMP,			
keletal	spine	initial	perform assessment of patient with cervical spine		Specialized		ry	Bedside			
System	injury	management	injury and develop initial management plan	5	Orthopedics		Teaching	Teaching		OSCE	OSPE
-		-			Clinical						
Musculos	1	Perform			Rotation:		Ambulato	OMP,			
keletal		radiological	perform basic radiological assessment of a patient		Specialized		ry	Bedside			
System	Fractures	assessment	with fracture	5	Orthopedics		Teaching	Teaching		OSCE	OSPE
		Perform			Clinical						
	1	assessment			Rotation:		Ambulato	OMP,			
Vascular	Venous	and enlist	perform assessment for venous access and enlist		Cardiovascul		ry	Bedside			
System	access	options	the options for venous access	5	ar Surgery		Teaching	Teaching		OSCE	OSPE
		Perform									
		assessment									
		and describe			Clinical						
		indications of			Rotation:		Ambulato	OMP,			
Vascular	Acute limb	embolectom	perform assessment for acute ischemic limb and	_	Cardiovascul		ry	Bedside		0005	OCDE
System	ischemia	У	summarize the indications of embolectomy	5	ar Surgery		Teaching	Teaching		OSCE	OSPE
					Clinical		Ambulata	OMAD			
Vascular	Vascular	various options and	summarize various vascular bypass options and		Rotation: Cardiovascul		Ambulato	OMP,			
System	bypass	grafts	grafts	5	ar Surgery		ry Teaching	Bedside Teaching		OSCE	OSPE
-,	Vascular	B. u. to	8.5	1	ur surgery		reaching	rederining		OSCE	031 L
	steal										
	phenomen										
	on and				Clinical						
	Raynaud's				Rotation:		Ambulato	OMP,			
Vascular	phenomen		describe vascular steal phenomenon, Raynaud's		Cardiovascul		ry	Bedside			
System	on	Describe	phenomenon and disease	5	ar Surgery		Teaching	Teaching		OSCE	OSPE
	1				Clinical						
	l <u>.</u> .				Rotation:		Ambulato	OMP,			
Vascular	Burger's	Plan .			Cardiovascul		ry	Bedside		,	
System	Disease	management	formulate a management plan for Burger's disease	5	ar Surgery		Teaching	Teaching		OSCE	OSPE
	1				Clinical		A mala ul = t =				
Vaccular	1	Indications	summarize the indications and assessment at a set		Rotation:		Ambulato	OMP,			
Vascular	CARG	Indications	summarize the indications and procedural steps of	5	Cardiovascul		ry Teaching	Bedside		OSCE	OSDE
System	CABG	and steps	CABG	3	ar Surgery		Teaching	Teaching		OSCE	OSPE
	Perioperati ve care in				Clinical Rotation:		Ambulato	OMP,			
Vascular	Cardiac				Cardiovascul		ry	Bedside			
System	ICU	Summarize	summarize perioperative care within cardiac ICU	5	ar Surgery		Teaching	Teaching		OSCE	OSPE
.,		,			Clinical					3002	
	1	Diagnosis			Rotation:		Ambulato	OMP,			
Vascular	1	and	summarize the steps of diagnosing VTE and its		Cardiovascul		ry	Bedside			
System	VTE	management	management	5	ar Surgery		Teaching	Teaching		OSCE	OSPE
· ·	Carotid,	Presentation			Clinical						
	Intestinal	and	describe the presentation of carotid, intestinal and		Rotation:		Ambulato	OMP,			
Vascular	and renal	investigation	renal artery stenosis and investigating them		Cardiovascul		ry	Bedside			
System	artery	s	appropriately	5	ar Surgery		Teaching	Teaching		OSCE	OSPE
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ı	Neck,	I			ı						ı		
	chest and				Clinical								
	extremity	Assessment			Rotation:				Ambulato	OMP.			
Vascular	vascular	and initial	summarize the assessment and initial management		Cardiovascul				ry	Bedside			
System	injury	management	of neck, chest and extremity vascular injury	5	ar Surgery				Teaching	Teaching		OSCE	OSPE
		_											
	WHO				Clinical				Ambulato	OMP,			
Periopera	patient		to summarize the components of WHO patient		Rotation:				ry	Bedside			
tive Care	Safety List	Components	safety checklist in perioperative setting	5	Critical Care				Teaching	Teaching		OSCE	OSPE
	Infection	'											
	control				Clinical				Ambulato	OMP,			
Periopera	protocol in	Describes the			Rotation:				ry	Bedside			
tive Care	ICU	process	apply infection control protocols in ICU setting	5	Critical Care				Teaching	Teaching		OSCE	OSPE
	ABGs and	Priciples and			Clinical				Ambulato	OMP,			
Periopera	Acid Base	interpretatio	summarize the principles of ABGs analysis and to		Rotation:				ry	Bedside			
tive Care	Disorder	n	interpret acid base disorder	5	Critical Care				Teaching	Teaching		OSCE	OSPE
	Non				Clinical				Ambulato	OMP,			
Periopera	Invasive	Steps and	summarize the steps of noninvasive ventilation and		Rotation:				ry	Bedside			
tive Care	Ventilation	Indications	its indications	5	Critical Care				Teaching	Teaching		OSCE	OSPE
					Clinical				Ambulato	OMP,			
Periopera	Invasive	Decribe		_	Rotation:				ry	Bedside		05.05	OCDE
tive Care	Ventilation	modes	describe modes of invasive ventilation	5	Critical Care				Teaching	Teaching		OSCE	OSPE
	Nutritional				Clinical				Amahudata	OMP,			
Periopera	requireme nt in ICU				Rotation:				Ambulato rv	Bedside			
tive Care	patient	Calculate	calculate nutritional requirements of an ICU patient	5	Critical Care				Teaching	Teaching		OSCE	OSPE
tive care	patient	Culculate	calculate natificational requirements of an reo patient		Clinical				Ambulato	OMP,		OSCE	031 2
Periopera	Ventilated	Steps of	summarize the steps of management of a ventilated		Rotation:				ry	Bedside			
tive Care	patient	management	patient	5	Critical Care				Teaching	Teaching		OSCE	OSPE
	-	-			Clinical				Ambulato	OMP,			
Periopera	BLS in				Rotation:				ry	Bedside			
tive Care	collapsed	Steps	summarize the steps of BLS in a collapsed patient	5	Critical Care				Teaching	Teaching		OSCE	OSPE
					Clinical				Ambulato	OMP,			
Periopera	Criteria of			_	Rotation:				ry	Bedside			
tive Care	admission	Enlist Criteria	to enlist the criteria of admission in an ICU	5	Critical Care				Teaching	Teaching		OSCE	OSPE
		Pathophysiol			Clinical				Ambulato	OMP,			
Periopera tive Care	Septic shock	ogy and	summarize the pathophysiology and management of septic shock	5	Rotation:				ry Tanahina	Bedside		OSCE	OSPE
tive care	SHOCK	management	of septic shock	3	Critical Care				Teaching	Teaching		USCE	USPE
					Clinical				Ambulato	OMP,			
Periopera	Inotrope		to recognize the indications of inotrope use and the	_	Rotation:				ry	Bedside			
tive Care	use	Indications	summarize their use in ICU setting	5	Critical Care				Teaching	Teaching		OSCE	OSPE
Porionora	Brain	Enlist the			Clinical				Ambulato	OMP,			
Periopera tive Care	Death	criteria	to enlist the criteria of brain death	5	Rotation: Critical Care				ry Teaching	Bedside Teaching		OSCE	OSPE
and durc	2001	Enlist rapid	to construction of brain acaus		Clinical				Ambulato	OMP,		OJCL	031 L
Periopera	Critically ill	sequence	to enlist the rapid sequence induction of critically ill		Rotation:				ry	Bedside			
tive Care	patient	induction	patient	5	Critical Care				Teaching	Teaching		OSCE	OSPE
					Clinical				Ambulato	OMP,			
Periopera	Critically ill	Summarize			Rotation:				ry	Bedside			
tive Care	patient	the process	to summarize the process of critically ill patient	5	Critical Care				Teaching	Teaching		OSCE	OSPE
		Pathophysiol			Clinical				Ambulato	OMP,			
Periopera		ogy and	describe the pathophysiology of ARDS and		Rotation:				ry	Bedside			
tive Care	ARDS	management	summarize steps of its management	5	Critical Care				Teaching	Teaching		OSCE	OSPE
Curried	Drooking	Fligit the	to oligit the process of officializatively broadings		Clinical				Ambulato	OMP,			
Surgical Ethics	Breaking bad nows	Elicit the	to elicit the process of effectively breaking a bad	_	Rotation:			skill Lab	ry Toaching	Bedside		OCCE	OSPE
EUHCS	bad news	process	news	5	Critical Care		S	KIII Lab	Teaching	Teaching		OSCE	USPE

Appendix II

	NORMAL STRUCTURE											
	Theory											
	SPECIFIC LEARNING OUTCOMES	DISCIPLINE	ТОРІС									
CODE	GROSS ANATOMY	TOTAL HOUR	RS = 14									
CV-A- 001	Justify the clinical picture of superior mediastinum syndrome anatomically	Integrate with Surgery	Mediastinum									
CV-A- 002	Describe the surgical significance of pericardial sinus	Integrate with Surgery	Pericardium									
CV-A- 003	Identify the salient features of heart and great vessels on CT/ MRI	Integrate with Radiology	Heart									
CV-A-	Describe the surgical importance of pericardial		Pericardial sinus									
004	sinus	Surgery										
CV-A-	Discuss the anatomical principles of Varicose											
005	Veins	Surgery	Varicose Veins									
CV-A-	Discuss the anatomical principles of Varicose											
005	Veins	Surgery	Varicose Veins									

	NORMAL FUNCTION											
	Theory											
CODE	MEDICAL PHYSIOLOGY	Total Hours = 7	5									
	SPECIFIC LEARNING OBJECTIVES	DISCIPLINE	TOPIC									
CV-P- 026	Identify various symptoms and signs of DVT	General Medicine, Surgery	Venous thrombo- embolism									
	Identify various symptoms and signs of pulmonary embolism											

Outline management strategies	
Justify the clinical picture of superior mediastinum syndrome anatomically	Superior mediastinum Syndrome

	NORMAL STRUCTURE										
	Theory										
CODE	SPECIFIC LEARNING OUTCOMES	DISCIPLINE	TOPIC								
	GROSS ANATOMY	TOTAL HOUR	S =30								
Re-A- 003	Describe the anatomical correlates of Thoracic inlet syndrome & Thoracic outlet syndrome	Integrate with Surgery	Thoracic Cavity								
Re-A- 004	Describe the anatomical correlates of supernumerary cervical rib.	Integrate with Surgery	Rib Cage								
Re-A- 005	Describe the anatomical correlates of intercostal incisions	Integrate with Surgery	Intercostal space								
Re-A- 007	Describe the anatomical correlates of median sternotomy.	Integrate with Surgery	Sternum								
	Describe the presentation of sternal fractures and correlate it anatomically	Integrate with Orthopedics									
Re-A- 014	Describe the anatomical correlates of chest tube intubation	Integrate with surgery	Lungs								
Re-P- 020	Enlist the causes of Pneumothorax	Surgery	Pneumothorax								
	Describe the signs and symptoms of Pneumothorax										
Re-P- 021	Enlist the causes of Pleuritis		Pleuritis								
Re-P- 028	Describe ABC in a trauma patient	Surgery	First Aid in Surgical Patients								

1st Year (Lecture Hall No 4, 2nd floor)

sr	Name	Time	Date	Facilitator
1	Superior mediastinum syndrome	08:00 to 09:00	12.10.23	Dr Maaz Ul Hassan
2	Pneumothorax and pleuritis	9:00 to 10:00	09.11.2023	Dr Maaz Ul Hassan
3	First aid (ABC) in trauma	08:00 to 09:00	14.11.2023	Dr Rizwan Ahmad Khan

First Year Clinical Rotation Schedule Surgery & Allied

No of stu	idents	9	9	9	8	8	8	8	8	8
<u>Days</u>	Date	A1	A2	A3	A4	A5	A6	A7	A8	A9
1	TBD	Anesth	Ortho	Cardio	Plastic	Urology	Gyne 1	Gyne 2	S1	S2
2	TBD	S2	Anesth	Ortho	Cardio	Plastic	Urology	Gyne 1	Gyne 2	S1
<u>3</u>	TBD	S1	S2	Anesth	Ortho	Cardio	Plastic	Urology	Gyne 1	Gyne 2
4	TBD	Gyne 2	S1	S2	Anesth	Ortho	Cardio	Plastic	Urology	Gyne 1
<u>5</u>	TBD	Gyne 1	Gyne 2	S1	S2	Anesth	Ortho	Cardio	Plastic	Urology
<u>6</u>	TBD	Urology	Gyne 1	Gyne 2	S1	S2	Anesth	Ortho	Cardio	Plastic
7	TBD	Plastic	Urology	Gyne 1	Gyne 2	S1	S2	Anesth	Ortho	Cardio
8	TBD	Cardio	Plastic	Urology	Gyne 1	Gyne 2	S1	S2	Anesth	Ortho
9	TBD	Ortho	Cardio	Plastic	Urology	Gyne 1	Gyne 2	S1	S2	Anesth

RESPIRATORY-I Module Committee

	Name	Department	Ext
Module Leader:	Dr. Kiran Namoos	BIOCHEMISTRY	454
Member:	Dr. Amber Ilyas	ANATOMY	309
Member:	Dr. Aasia Kanwal	PHYSIOLOGY	403

YEAR COMMITTEE FIRST YEAR 22-2023

Chair Person	Prof. Dr. Anila Jaleel
Members:	Dr. Maazul Hassan
	Dr. Ambreen Khalid
	Dr. M. Ashar Waheed Khan
	Dr. M. Luqman Farrukh Nagi
	Dr. Maria Shireen
	Dr. Khalid Mahmood Cheema
	Dr. Sarosh Saleem
	Dr. Uzma Waseem
	Dr Safana Sadaf
	Dr Alia Shabbir
Co-opted Members:	CR & GR

Mentors List 1st Year 2022-23

Group	Name	Roll No
Group - 1	Prof. Saad Bashir Malik	01-10,
Group - 2	Dr. Maryam Riaz Tarar	11-20,
Group - 3	Dr. Samar Asim	21-30
Group - 4	Dr. Sadaf Saleem Uppal	31-40
Group - 5	Prof. Adeela Shahid	41-50
Group - 6	Dr. Saadia Shahzad	51-60
Group - 7	Dr. Saleem uz Zaman Adhami	61-70
Group - 8	Dr. Rizwan Ahmad Khan	71-80
Group - 9	Dr. M Kashif Butt	81-90
Group - 10	Dr. Nausheen Saeed	91-100
Group - 11	Prof. Dr. Abdul Karim	101-110
Group - 12	Dr. Uzma Sarwar	111-120
Group - 13	Dr. Asher Waheed	121-130
Group - 14	Dr. Ambreen Khalid	131-140
Group - 15	Dr. Sundus Iftikhar	141-151

Module: CVS 9th - 13th Oct 2023 Week 7 Peripheral arterial diseases

Day	8:00 - 9:00	9:00 - 10:00	15 min	10:15 - 11:15	11:15 - 12:15	12::	L5 - 1:15	45 min	2:00 - 3:00	3:00 -	4:00
Monday	Hyperlipidemia I Biochemistry Dr. Haleema	HTN, heart failure & Valvular heart diseases Cardiology Dr. Mohsin Abbas		Circulatory Shock& Its Types-II Physiology Dr. Hina	Hyperlipidemia II Biochemistry Dr. Haleema	factors M	tions for Risk Ianagement-II nity Medicine Luqman		Infarction; types, causes & pathophysiolog y of shock Pathology Dr. Naureen Saeed	English Batch A	SDL Batch B & C
Tuesday	Posterior Mediastinum-II GROSS ANATOMY	Peripheral arterial diseases & venous thromboembolis m Medicine Dr. Iffat Aqeel		BIOCHEMIST	Personal, psychosocial & vocational issues Behavioral Sciences/C.M Ms. Mariam			Anti-Anginal Drugs Pharmacology Prof. Shabbir Bhatti	English Batch B	SDL Batch A & C	
Wednesda	PHYSIOLOGY TUTORIAL			Pericardial, myocardial & endocardial diseases	BIOCHEMIST RY	PHYSI OL OGY	ANATOMY		Posterior Mediastinum-	English Batch	SDL
У				Cardiology Dr. M. Usman	Interpretation of Lab reports Batch B	JVP Batch C	Ospe Gross Anatomy		IIIGROSS ANATOMY	С	Batch A & B
Thursday	Superior mediastinum syndrome Surgery Prof. Maaz ul Hassan	Development of Venous system-II (Embryology) ANATOMY Dr. Sarah Khalid		CT/MRI of heart & great vessels, cardiac catheterization Radiology Dr. Usman Farooq	Interpretation of Lab reports Batch C	JVP Batch A	Ospe Gross Anatomy		Circulatory Shock & Its Types- II Physiology Dr. Hina I	Develop argun Bioethio LDr. Sa	nent cs/PER

Module: MSK 7th - 11th Aug2023 Week 6

				0							
Day	8:00 - 9:00	9:00 - 10:00	15 min	10:15 - 11:15	11:15 - 12	:15	12	2:15 - 1:15	45 min	2:00 - 3:00	3:00 - 4:00
Monday	Anterior Compartment of Thigh-I (Demo/Dissectio n)	Biochemistry		Embryology- Anomalies of Musculoskeletal System (Dr. Sarah Khalid) Community medicine			Anterior Con Thigh-II (Dem	npartment of o/Dissection)			
Tuesday	NMJ Blockers &S timulators Dr. Hina Physiology	Adductor Canal (Demo/Dissection)		Psychosocial impact of diseases & its management Behave science				Medial compar (Demo/D	_		
Wednesda	Physiolog	ology Tutorial		Histology- Cartilage I	Anatomy practical	_	chem actical	Clinical rotation III ORTHO		Gluteal region	
У	i nysiolog	sy ratorial		(Dr.Uzma Waseem)	Cartilage					(Demo/Dissection)	
Thursday	Hip Joint-I (Demo/Dissectio n)	Biochemistry		Embryology- Development of Limbs (Dr. Sarah Khalid)	Cartilage					Hip Jo (Demo/D	
Friday	Smooth muscle features and types Dr. Hina Physiology	Cartilage growth & repair Patho		Electrical activity of Smooth muscles Dr. Hina Physiology	Cartilage					Posterior Con Thigh (Demo	npartment of n/Dissection)

Appendix III

	2nd Year MBBS Planner 2023-2024								
	Lecture Hall No 3								
sr	Name / topic	Date	Time						
1	Peptic Ulcer Disease / Dr Sadaf Ishaque	23-06-2023	8:00 - 9:00						
2	Abdominal Hernias / Dr Sadaf Ishaque	18-08-2023	8:00 - 9:00						

	Clinical Rotation (Abdominal quadrants & Incisions) (Skill Lab)									
sr	Name	Date	Time							
1	Dawood Arshad	31-07-2023	02:00-03:00							
2	Dr Rooh ul Ain	1/8/2023	02:00-03:00							
3	Dr Akif Munir	3/8/2023	02:00-03:00							
4	Dr Amarah	4/8/2023	02:00-03:00							

	Clinical Rotation (inguinal Hernias)(Skill Lab)								
sr	Name	Date Time							
1	Dr Dawood Arshad	7/8/2023	02:00-03:00						
2	Dr Rooh ul Ain	8/8/2023	02:00-03:00						
3	Dr Amara Younus	9/8/2023	02:00-03:00						
4	Dr Dawood Arshad	11/8/2023	02:00-03:00						

	2nd Year MBBS Planner 2023-2024									
	Lecture Hall No 3									
sr	Name	Presenter	Date	Day	Time					
1	Spinal injuries and Spinal Shock	Dr Usman Sarwar	9/5/2023	Tuesday	9:00 - 10:00					
2	Assessment of Peripheral Neuropathy	Dr Muhammad Ali	12/5/2023	Friday	8:00 - 9:00					
3	Assessment of Peripheral Neuropathy	Dr Rizwan Ahmad Khan	19-05-2023	Friday	8:00 - 9:00					

	2nd Year MBBS Planner 2023-2024									
	Lecture Hall No 3									
sr	Name Presenter Date Day Time									
1	Renal Ureteric calculi	Prof Irfan Nazir	1/9/2023	Friday	9:00 - 10:00					
2	Urological Tumors	Dr Shahid Ali	5/9/2023	Tuesday	8:00 - 9:00					
3	Urinary Retention	Prof Irfan Nazir	15-09-2023	Friday	8:00 - 9:00					
4	Haematuria	Dr Farooq Hameed	21-09-2023	Thursday	8:00 - 9:00					

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Module Coordinator:

Week 1	Week 1 Second Year 2023							Date: 06-03-2023 to 10-03-2023						
Day	8:00 - 9:00	9:00 - 9:55	9:5 5 - 10: 15	10:15 - 11:10	11:10 - 12:05	12:15 - 01:20	1:20 - 02:00	2:00 - 04:00						
								Anatomy	Physio	Biochem (2-3) DSL (3-4)	skills lab (2-3 English (3-4)			
Monday	Monday Assessment Anatomy			Assessment Anatomy			L	Batch A Salivary glands	Batch B VII Cranial nerve	Batch C Estimation of serum Calcium	ENT Batch D VII Cranial nerve & Bells palsy			
Tuesday	Assessment Physiology		Assessment Physiology		· · · · · · · · · · · · · · · · · · ·		Asses	Assessment Physiology			Batch B	Batch C VII Cranial nerve	Batch D Estimation of serum Calcium	ENT Batch A VII Cranial nerve & Bells palsy
Wednesday	Assessmen	t Biochemistry	BREAK	Assessment Biochemistry		LUNCH/PRAYER BREAK	Batch C	Batch D VII Cranial nerve	Batch A Estimation of serum Calcium	ENT Batch B VII Cranial nerve nerve & Bells palsy				
Thursday	Classification of Hormone Biochemistr Dr. Sadaf	s cranial nerve		synthesis of	Adrenal cortical hormones Physiology Oral cavity, tongue & palate Demo /dissection			Batch D	Batch A VII Cranial nerve	Batch B Estimation of serum Calcium	ENT Batch C VII Cranial nerve nerve & Bells palsy			
Friday	Medicine CLINICAL	Surgery Thyroid Goiter Dr Rooh ul Ain		Functions of Aldosterone Physiology Prof. Adeela	Hormones Signaling Biochemist y Dr. Sada	r 8" & 12th cranial	2:30 - 3:15 Islamiat		8 th & 12th cranial Islamiat Self stud		Self study			

Module Coord	linator:																		
Week 2	Second Year 2023 lecture hall 3							Date: 13-03-2023 to 17-03-2023											
Day	8:00 - 9:00	9:00 - 9:55	9:5 5 - 10: 15	10:15 - 11:10	11:10 - 12:05	12:05 - 01:20	1:20 - 02:0 0	2:00 - 04:00											
	Microscopic	Functions of		ADH and Growth	Nose & 1st	Nose & 1st					Anatomy	Physio	Biochem (2-3) DSL (3-4)	skills lab (2-3 English (3-4 LH 3)					
Monday	anatomy of pituitary Dr. Uzma	cortisol Physiology Prof. Adeela		hormone Biochemistry Dr. Sadaf Cranial nerve Demo/Dissecti on	PBL		Batch A pituitary gland	Batch B Colour Vision	Batch C Estimation of serum uric acid	Eye CN III, IV, VI Batch D									
Tuesday	Adrenal Cortical Hormone Biochemistry Dr. Sadaf	Conns Syndrome Physiology Prof. Adeela	TEA BREAK					_	-	7	-	Tutorial Physiolo	pgy	Community medicine	LUNCH	Batch B	Batch C Colour Vision	Batch D Estimation of serum uric acid	Eye III, IV, VI CN Batch A
Wednesday	Behavioral sciences	Addison's disease, Cushing's synd Physiology Prof. Adeela		Adrenal Cortical Hormone Biochemistry Dr Sadaf	Pteryopalatin e fossa & paranasal sinuses Demo/Dissec tion	Insulin synthesis, release Physiology Prof. Adeela	LUNCH/PRAYER BREAK	Batch C	Batch D Colour Vision	Batch A Estimation of serum uric acid	Eye III, IV, VI CN Batch B								
Thursday	Developmen t of pituitary gland	Functions of insulin Physiology Prof. Adeela		Biochemistry Tutorial	Cervica vertebrace hyoid be	Cervical vertebrae & hyoid bone Demo/Dissec tion	ΔK		Batch A Colour Vision	Batch B Estimation of serum uric acid	Eye CN III, IV, VI Batch C								
Friday	Medicine CLINICAL	Surgery Solitary Nodule thyroid Dr Rooh Ul Ain		Adrenal Medulla Biochemistry Dr Sadaf	Medulla Deep cervochemistry Demo/D				- 3:15 miat	3:15-									

Module Coordina	ator:										
Week 3				Second		Date: 20-03-2023 to 24-03-2023					
Day	8:00 - 9:00	9:00 - 9:55	9:5 5 - 10: 15	10:15 - 11:10	11:10 - 12:05	12:05 - 01:20	1:20 - 02:00		2:00	- 04:00	
				Microscopic anatomy of thyroid &	Insulin and Glucagon			Anatomy	Physio	Biochem (2-3) DSL (3-4)	skills lab (2-3 English (3-4) LH3
Monday	SUBS	TAGE 2		parathyroid DR. UZMA	Biochemistry Dr. Sadaf	PBL		Batch A thyroid & parathyroid gland	Batch B	Batch C Revision	EYE Light reflex Batch D
Tuesday	Diabetes Mellitus Biochemistr Y Dr. Sadaf	Functions of insulin Physiology Prof. Adeela	_	Tutorial Physic	blogy	Community medicine	LUNCH,	Batch B	Batch C	Batch D Revision	EYE Light reflex Light reflex Batch A
Wednesday	Developme nt of thyroid & parathyroid	Glucagon, Glucose regulation Physiology Prof. Adeela	TEA BREAK	Tutorial Biochemistry Dr. Sadaf	Posterior triangl 11 th cranial nerv Demo/Dissection	re e	LUNCH/PRAYER BREAK	Batch C	Batch D	Batch A Revision	EYE Light reflex Light reflex Batch B
Thursday	PAKIS	AN DAY		PAKISAN DAY			AK		PAKISA	AN DAY	
				ED1		C 1 0		2:30	- 3:15	3:15-	4:00
Friday	Medicine CLINICA L	BEHAVIORA L SCIENCES CLINICAL		Thyroid Hormone Biochemistry Dr Sadaf	Anterior triangl Submandibular Demo/Dissection	region		Batch D	Batch A Practical Test 1	Batch B Revision	Light reflex Batch C

MODULE 2 : ENDOCRINE

Module Coordinator:

Week 4				Second Year 2	2022			Data: 27 02	-2023 to 31-03-2		
Day	8:00 - 9:00	9:00 - 9:55	9:5 5 - 10: 15	10:15 - 11:10	11:10 - 12:05	12:05 - 01:20	1:2 0 - 02: 00	2:00 - 04:00		023	
	Microsco		TEA BREAK				LUNCH/	Anatomy	Physio	Biochem	skills lab (2-3 English (3-4)
Monday	pic anatomy of adrenal & pancreas Dr. Uzma	Parathyroid Hormone Biochemistry Dr. Sadaf	EAK	DM Physiology Prof. Adeela	Developmen t of adrenal pancreas Prof. Sarah	PBL	LUNCH/PRAYER BREAK	Batch A Adrenal	Batch B Physiology Tutorial	Batch C Practical Test 1	SURGERY Thyroid gland Dr Dawood Arshad Batch D
Tuesday	CLINICA L	Hyper & Hypoglycemia Physiology Prof. Adeela		Tutorial Physic	blogy	Community medicine		Batch B Adrenal	Batch C Physiology Tutorial	Batch D Practical Test 1	SURGERY Thyroid gland Dr Rooh ul ain Batch A

Wednesda y	Thyroid Hormone Physiology Dr. Hina	Tutorial Biochemistry	MOA of thyroid hormone Physiology Dr. Hina	Pharynx Demo/Dissect	ion	Batch C Adrenal	Batch D Physiology Tutorial	Batch A Practical Test 1	Thyroid gland Dr Amara Batch B
Thursday	11 th &10 th Cranial nerves	Actions of thyroid hormone Physiology Dr. Hina	Purine Metabolism 1 Biochemistry Dr. Sadaf	Behavioral sciences	Larynx Demo/Dissec tion	Batch D Adrenal	Batch A Physiology Tutorial	Batch B Practical Test 1	SURGERY Thyroid gland Dr Atif Batch C

Module Coordinator Dr. Sadaf Saleem Uppal

Total hours Biochemistry = Lec & Tut = 18; pract: 6; total: 24

Module Exam: SEQs: 35, MCQs: 45, Viva: 20 (Total: 100)

MODULE 3:	NEUROSCIE	NCE									
Module Coord	linator:										
Week 1				Second Year 2	2023			Date: 10-04-	2023 to 14-04	-2023	
Day	8:00 - 9:00	9:00 - 9:55	9:55 - 10:15	10:15 - 11:10	11:10 - 12:05	12:05 - 01:20	1:20 - 02:00	2:00 - 04:00			
			TEA BREAK				LUNCH/PRAYER	Anatomy	Physio	Biochem	skills lab (2- 3 English (3- 4)
Monday	Assessmer Physiology		X	Assessment Pl	hysiology		RAYER BREAK	Batch A SPINAL CORD	Batch B	Batch C	Batch D
Tuesday	Assessme Anatomy	nt		Assessment A	natomy			Batch B SPINAL CORD	Batch C	Batch D	Batch A
Wednesday	Assessmen Biochemist			Assessment B	iochemistry			Batch C SPINAL CORD	Batch D	Batch A	Batch B
Thursday								Batch D SPINAL CORD	Batch A	Batch B	Batch C
Friday								2:30 - 3:15		3:15-4:00	
iliday								Islamiat			

Appendix IV

3rd Year Lecture 2023 (Lecture Hall 1)

Sr	Topic	Date	
1	Peri operative Care of Surgical Patient (Prof Khawja M Azim)	15-02-2023	
2	Surgical Ethics (Prof Khawja M Azim)	22-02-2023	
3	Shock & Pathophysiogy (Prof Khawja M Azim)	01-03-2023	
4	Types of Shock & Management of Shock (Prof Khawja M Azim)	08-03-2023	
5	Sterilization & Disinfection (Prof Khawja M Azim)	15-03-2023	
6	Approach to Surgical patient in Emergency (Dr Tariq Saeed)	22-03-2023	
7	Wound Healing (Dr Tariq Saeed)	29-03-2023	
8	Wound Healing and Wound Care (Dr Tariq Saeed)	05-04-2023	
9	Basic Surgical Skills and Anastmosis (Dr Tariq Saeed)	12-04-2023	
10	Cellular and Tissue Diagnosis in Surgery (Dr Tariq Saeed)	19-04-2023	
11	Revision Lecture	26-04-2023	
12	Inflammations and Infection 1 (Prof Humad Naeem Rana)	10-05-2023	
13	Inflammation and Infection 2 (Prof Humad Naeem Rana)	17-05-2023	12:30-1:30
14	Hemorrhage & Hemostasis -Pathology (Prof Humad Naeem Rana)	24-05-2023	
16	Hemorrhage & Hemostasis - Clinical Applications (Prof Humad Naeem Rana)	31-05-2023	
17	Introduction to Laparoscopy (Dr Rizwan Ahmad Khan)	07-06-2023	
18	Surgical aspect of Arterial Disease (Dr Rizwan Ahmad Khan)	14-06-2023	
19	Metabolic Response to Trauma (Dr Rizwan Ahmad Khan)	21-06-2023	
20	Surgical aspect of Venous Disease (Dr Rizwan Ahmad Khan)	26-07-2023	
21	Fluid & Electrolyte Balance-1 (Dr Talat Waseem)	02-08-2023	
22	Fluid & Electrolyte Balance-2 (Dr Talat Waseem)	09-08-2023	
23	Acid Base Balance (Dr Talat Waseem)	16-08-2023	
24	Nutritional Support-Enteral Dr Talat Waseem)	23-08-2023	
25	Nutritional Support-Parenteral Dr Talat Waseem)	30-08-2023	
26	Surgery Assessment	06-09-2023	

27	Infection of Skin & subcutaneous Tissues (Dr Maaz ul Hassan)	13-09-2023	
29	Blood Products (Dr Maaz ul Hassan)	27-09-2023	
30	Surgical Site Infection & Prevention (Dr Maaz ul Hassan)	04-10-2023	
31	Principles of Transfusion (Dr Aamir Waseem)	11-10-2023	
32	Complications of Blood Transfusion (Dr Amir Bahsir)	18-11-2023	
33	Imaging Modalities in Orthopedics Dr. Muhammad Ali	25-11-2023	11:30-12:30
34	Anti-sepsis, Asepsis and Health Care Personnel at risk (Dr Sadaf Ishaq)	01-11-2023	11:30-12:30
35	Revision Lecture	08-11-2023	11:30-12:30
36	Surgery Assessment	15-11-2023	11-30-12:30

Appendix V

Shalamar Medical & Dental College Clinical Rotation - 3rd year MBBS 2022 - 2023

Batches		,	A	В			С	D		
	S	Sub Batches	A1	A2	B1	В2	C1	C2	D1	D2
Weeks	Days	Date	2021001 to 2021021	2021022 to 2021041	2021042 to 2021062	2021063 to 2021083	2021084 to 2021103	2021104 to 2021123	2021124 to 202143	2021144 to 2021155 All Old Roll No.
1	5	13° Feb - 17° Feb 2023	Med SMDC	Med SMDC	Surg-SMDC	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology	ENT FFH	EYE
2	5	20° Feb - 24° Feb 2023	Med SMDC	Med SMDC	Surg-SMDC	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology	ENT FFH	EYE
3	5	27th Feb - 03rd Mar 2023	Med SMDC	Med SMDC	Surg-SMDC/Sub Specialty	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology	EYE	Peads FFH
4	5	06 th Mar - 10 th Mar 2023	Med SMDC	Med SMDC	Surg-SMDC/Sub Specialty	Surg-FFH	Gynae FFH/ Self-Study	Gynae SMDC/ Self- Study	EYE	Peads FFH
5	5	13 th Mar - 17 th Mar 2023	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC	Gynae FFH/ Self-Study	Gynae SMDC/ Self- Study	B. Science	Peads FFH
6	5	20 th Mar - 24 th Mar 2023	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC	Gynae FFH/ Self-Study	Gynae SMDC/ Self- Study	B. Science	Peads FFH
7	5	27 th Mar - 31 th Mar 2023	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC/Sub Specialty	Dermatology	Gynae FFH/ Self-Study	Peads FFH	ENT FFH
8	5	03 rd Apr - 07 th Apr 2023	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC/Sub Specialty	Dermatology	Gynae FFH/ Self-Study	Peads FFH	ENT FFH
9	5	10° Apr - 14° Apr 2023	Surg-SMDC	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology	Dermatology	Gynae FFH/ Self-Study	Peads FFH	B. Science
10	5	17 th Apr - 21 th Apr 2023	Surg-SMDC	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology	ENT FFH	EYE	Peads FFH	B. Science
11	5	24 th Apr - 28 th Apr 2023	Surg-SMDC/Sub Specialty	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology	ENT FFH	EYE	Med SMDC	Med SMDC
12	5	01* May - 05" May 2023	Surg-SMDC/Sub Specialty	Surg-FFH	Gynae FFH/ Self-Study	Gynae SMDC/ Self- Study	EYE	Peads FFH	Med SMDC	Med SMDC
13	5	08* May - 12* May 2023	Surg-FFH	Surg-SMDC	Gynae FFH/ Self-Study	Gynae SMDC/ Self- Study	EYE	Peads FFH	Med SMDC	Med SMDC
14	5	15* May - 19* May 2023	Surg-FFH	Surg-SMDC	Gynae FFH/ Self-Study	Gynae SMDC/ Self- Study	B. Science	Peads FFH	Med SMDC	Med SMDC
15	5	22 [™] May - 26 [®] May 2023	Surg-FFH	Surg-SMDC/Sub Specialty	Dermatology	Gynae FFH/ Self- Study	B. Science	Peads FFH	Med SMDC	Med SMDC
16	5	29 th May - 02 nd June2023	Surg-FFH	Surg-SMDC/Sub Specialty	Dermatology	Gynae FFH/ Self- Study	Peads FFH	ENT FFH	Med SMDC	Med SMDC
17	5	05° June - 09° June 2023	Gynae SMDC/ Self- Study	Dermatology	Dermatology	Gynae FFH/ Self- Study	Peads FFH	ENT FFH	Med SMDC	Med SMDC
18	5	12* June - 16* June 2023	Gynae SMDC/ Self- Study	Dermatology	ENT FFH	EYE	Peads FFH	B. Science	Med SMDC	Med SMDC
19	5	19 th June - 23 rd June 2023	Gynae SMDC/ Self- Study	Dermatology	ENT FFH	EYE	Peads FFH	B. Science	Surg-SMDC	Surg-FFH
20-23	20	26* June - 21* July 2023				Summer	r Break			
24	5	24° July - 28° July 2023	Gynae FFH/ Self- Study	Gynae SMDC/ Self- Study	EYE	Peads FFH	Med SMDC	Med SMDC	Surg-SMDC	Surg-FFH
25	5	31° July - 04" Aug 2023	Gynae FFH/ Self- Study	Gynae SMDC/ Self- Study	EYE	Peads FFH	Med SMDC	Med SMDC	Surg-SMDC/Sub Specialty	Surg-FFH
26	5	07" Aug - 11" Aug 2023	Gynae FFH/ Self- Study	Gynae SMDC/ Self- Study	B. Science	Peads FFH	Med SMDC	Med SMDC	Surg-SMDC/Sub Specialty	Surg-FFH
27	5	14 th Aug - 19 th Aug 2023	Dermatology	Gynae FFH/ Self- Study	B. Science	Peads FFH	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC

		Batches		4	ı	3		С	ı	D
	9	Sub Batches	A1	A1 A2 B1 B2		C1	C2	D1	D2	
Weeks	Days	Date	2021001 to 2021021	2021022 to 2021041	2021042 to 2021062	2021063 to 2021083	2021084 to 2021103	2021104 to 2021123	2021124 to 202143	2021144 to 2021155 All Old Roll No.
28	5	21" Aug - 25" Aug 2023	Dermatology	Gynae FFH/ Self- Study	Peads FFH	ENT FFH	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC
29	5	28" Aug - 01" Sep 2023	Dermatology	Gynae FFH/ Self- Study	Peads FFH	ENT FFH	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC/Sub Specialty
30	5	04 th Sep - 08 th Sep 2023	ENT FFH	EYE	Peads FFH	B. Science	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC/Sub Specialty
31	5	11 th Sep - 15 th Sep 2023	ENT FFH	EYE	Peads FFH	B. Science	Med SMDC	Med SMDC	Gynae SMDC/ Self- Study	Dermatology
32	5	18 th Sep - 22 rd Sep 2023	EYE	Peads FFH	Med SMDC	Med SMDC	Surg-SMDC	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology
33	5	25" Sep - 29" Sep 2023	EYE	Peads FFH	Med SMDC	Med SMDC	Surg-SMDC	Surg-FFH	Gynae SMDC/ Self- Study	Dermatology
34	5	02 nd Oct - 06 th Oct 2023	B. Science	Peads FFH	Med SMDC	Med SMDC	Surg-SMDC/Sub Specialty	Surg-FFH	Gynae FFH/ Self- Study	Gynae SMDC/ Self-Study
35	5	09" Oct - 13" Oct 2023	B. Science	Peads FFH	Med SMDC	Med SMDC	Surg-SMDC/Sub Specialty	Surg-FFH	Gynae FFH/ Self- Study	Gynae SMDC/ Self-Study
36	5	16 th Oct - 20 th Oct 2023	Peads FFH	ENT FFH	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC	Gynae FFH/ Self- Study	Gynae SMDC/ Self-Study
37	5	23 rd Oct - 27 th Oct 2023	Peads FFH	ENT FFH	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC	Dermatology	Gynae FFH/ Self- Study
38	5	30th Oct - 03rd Nov 2023	Peads FFH	B. Science	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC/Sub Specialty	Dermatology	Gynae FFH/ Self- Study
39	5	06 th Nov - 10 th Nov 2023	Peads FFH	B. Science	Med SMDC	Med SMDC	Surg-FFH	Surg-SMDC/Sub Specialty	Dermatology	Gynae FFH/ Self- Study
40	5	13 th Nov - 17 th Nov 2023				Self-S	tudy		•	

Note: ENT FFH Batch will attend the clinical rotation every Wednesday and Friday at ENT Department SMDC. Clinical Rotation batch of Gynae/Obs will attend the rotation for 90 mints and remaining 30 mints are of self-study.

No of Days in a week = 5 No of hours to attend per day = 2 No of hours completed by one student per week: $5_X2 = 10$ hours

Total No of academic weeks of Clinical Rotation including Academics breaks = 40 Weeks

Appendix VI

		By 4th Yr Committee Chair Prof. Dr. Sania Shuja																	
Weeks	Dates			BAT	CH A	НА				BAT	СН В					BAT	CH C		
		A1	A2	A3	A4	A5	A6	B1	B2	В3	B4	B5	В6	C1	C2	СЗ	C4	C5	C6
1	27 Mar to 31 Mar	M1	M1	M1	M2	M2	M2	S1	S1-S2	S2	Orth	Uro	Psyc	Peads	Ob/Gyn	Eye	Eye	ENT	ENT
2	3 April to 7 April	M1	M1	M1	M2	M2	M2	S1	S1-S2	S2	Orth	Uro	Psyc	Ob/Gyn	Peads	Eye	Eye	ENT	ENT
3	10 April to 14 April	M1	M1	M1	M2	M2	M2	S1	S1-S2	S2	Psyc	Orth	Uro	Peads	Ob/Gyn	Eye	Eye	ENT	ENT
4 & 5	17 April to 28 April						ACA	DEMIC	BREA	K (17 th .	April to	28 th A	pril 20	23)					
6	1" May to 5 May				M2	M2	M2	S2	S1-S2	S1	Psyc	Orth	Uro	Ob/Gyn	Peads	Eye	Eye	ENT	ENT
7	8 May to 12 May	Elec	tive Rot	tation	M2	M2	M2	S2	S1-S2	S1	Uro	Psyc	Orth	Eye	Eye	ENT	ENT	Peads	Ob/Gyn
8	15 May to 19 May	4	4 Week	S	M2	M2	M2	S2	S1-S2	S1	Uro	Psycs	Orth	Eye	Eye	ENT	ENT	Ob/Gyn	Peads
9	22 May to 26 May				M1	M1	M1	Orth	Uro	Psyc	S1	S1-S2	S2	Eye	Eye	ENT	ENT	Peads	Ob/Gyn
10	29 May to 2 June	M1	M1	M1				Orth	Uro	Psyc	S1	S1-S2	S2	Eye	Eye	ENT	ENT	Ob/Gyn	Peads
11	5 June to 9 June	M1	M1	M1	Elec	tive Ro	tation	Psyc	Orth	Uro	S1	S1-S2	S2	ENT	ENT	Peads	Ob/Gyn	Eye	Eye
12	12 June to 16 June	M1	M1	M1		4 Week	s	Psyc	Orth	Uro	S2	S1-S2	S1	ENT	ENT	Ob/Gyn	Peads	Eye	Eye
13	19 June to 23 June	M2	M2	M2				Uro	Psyc	Orth	S2	S1-S2	S1	ENT	ENT	Peads	Ob/Gyn	Eye	Eye
14 & 15	26 June to 7 July						A	CADEM	IC BREA	AK (26 th	June t	to 7 th Ju	ıly 202	3)					
16	10 July to 14 July	M2	M2	M2	M1	M1	M1	Uro	Psyc	Orth	S2	S1-S2	S1	ENT	ENT	Ob/Gyn	Peads	Eye	Eye
17	17 July to 21 July	Peads	Ob/Gyn	Eye	Eye	ENT	ENT	M1	M1	M1	M2	M2	M2	S1	S1-S2	S2	Orth	Uro	Psyc
18	24 July to 28 July	Ob/Gyn	Peads	Eye	Eye	ENT	ENT	M1	M1	M1	M2	M2	M2	S1	S1-S2	S2	Orth	Uro	Psyc
19	31 July to 4 Aug	Peads	Ob/Gyn	Eye	Eye	ENT	ENT	M1	M1	M1	M2	M2	M2	S1	S1-S2	S2	Psyc	Orth	Uro
20	7 Aug to 11 Aug	Ob/Gyn	Peads	Eye	Eye	ENT	ENT	M1	M1	M1	M2	M2	M2	S2	S1-S2	S1	Psyc	Orth	Uro
21	14 Aug to 18 Aug	Eye	Eye	ENT	ENT	Peads	Ob/Gyn				M2	M2	M2	S2	S1-S2	S1	Uro	Psyc	Orth
22	21 Aug to 25 Aug	Eye	Eye	ENT	ENT	Ob/Gyn	Peads	Elec	tive Rot	tation	M2	M2	M2	S2	S1-S2	S1	Uro	Psyc	Orth
23	28 Aug to 1" Sep	Eye	Eye	ENT	ENT	Peads	Ob/Gyn] 4	4 Week	s	M1	M1	M1	Orth	Uro	Psyc	S1	S1-S2	S2
24	4 Sep to 8 Sep	Eye	Eye	ENT	ENT	Ob/Gyn	Peads				M1	M1	M1	Orth	Uro	Psyc	S1	S1-S2	S2
25	11 Sep to 15 Sep	ENT	ENT	Peads	Ob/Gyn	Eye	Eye	M1	M1	M1				Psyc	Orth	Uro	S1	S1-S2	S2
26	18 Sep to 22 Sep	ENT	ENT	Ob/Gyn	Peads	Eye	Eye	M1	M1	M1	Elec	tive Rot	ation	Psyc	Orth	Uro	S2	S1-S2	S1
27	25 Sep to 29 Sep	ENT	ENT	Peads	Ob/Gyn	Eye	Eye	M2	M2	M2		Week:	S	Uro	Psyc	Orth	S2	S1-S2	S1
28	2 nd Oct to 6 Oct	ENT	ENT	Ob/Gyn	Peads	Eye	Eye	M2	M2	M2				Uro	Psyc	Orth	S2	S1-S2	S1
29	9 Oct to 13 Oct	S1	S1-S2	S2	Orth	Uro	Psyc	Peads	Ob/Gyn	Eye	Eye	ENT	ENT	Floo	tive Rot	tation	M2	M2	M2
30	16 Oct to 20 Oct	S1	S1-S2	S2	Orth	Uro	Psyc	Ob/Gyn	Peads	Eye	Eye	ENT	ENT		Week:		M2	M2	M2
31	23 Oct to 27 Oct	S1	S1-S2	S2	Psyc	Orth	Uro	Peads	Ob/Gyn	Eye	Eye	ENT	ENT		+ week	S	M2	M2	M2

			By 4 th Yr Committee Chair Prof. Dr. Sania Shuja																	
Weeks	Dates			BATO	CH A					BAT	СН В					BAT	TCH C			
		A1	A2	A3	A4	A5	A6	B1	B2	В3	B4	B5	В6	C1	C2	C3	C4	C5	C6	
32	30 Oct to 3 rd Nov	S2	S1-S2	S1	Psyc	Orth	Uro	Ob/Gyn	Peads	Eye	Eye	ENT	ENT				M2	M2	M2	
33	6 Nov to 10 Nov	S2	S1-S2	S1	Uro	Psyc	Orth	Eye	Eye	ENT	ENT	Peads	Ob/Gyn	M1	M1	M1				
34	13 Nov to 17 Nov	S2	S1-S2	S1	Uro	Psyc	Orth	Eye	Eye	ENT	ENT	Ob/Gyn	Peads	M1	M1	M1	Elec	tive Rot	tation	
35	20 Nov to 24 Nov	Orth	Uro	Psyc	S1	S1-S2	S2	Eye	Eye	ENT	ENT	Peads	Ob/Gyn	M1	M1	M1	4	Week:	s	
36	27 Nov to 1" Dec	Orth	Uro	Psyc	S1	S1-S2	S2	Eye	Eye	ENT	ENT	Ob/Gyn	Peads	M1	M1	M1				
37	4 Dec to 8 Dec	Psyc	Orth	Uro	S1	S1-S2	S2	ENT	ENT	Peads	Ob/Gyn	Eye	Eye	M1	M1	M1	M2	M2	M2	
38	11 Dec to 15 Dec	Psyc	Orth	Uro	S2	S1-S2	S1	ENT	ENT	Ob/Gyn	Peads	Eye	Eye	M1	M1	M1	M2	M2	M2	
39	18 Dec to 23 Dec	Uro	Psyc	Orth	S2	S1-S2	S1	ENT	ENT	Peads	Ob/Gyn	Eye	Eye	M2	M2	M2	M1	M1	M1	
40	25 Dec to 29 Dec	Uro	Psyc	Orth	S2	S1-S2	S1	ENT	ENT	Ob/Gyn	Peads	Eye	Eye	M2	M2	M2	M1	M1	M1	

Note: see next page

- 1. Students on Clinical rotations in Medicine will go to Shalamar Hospital on Mondays, Tuesdays & Wednesdays and will go to FFH on Thursdays & Fridays.
- 2. Students on Clinical rotations in Surgery Sub Specialties will go to Radiology Department on Fridays.
- 3. Please pay attention that during General Surgery rotation students will go for 3 weeks each in S1 & S2 as indicated. Also 2nd and 5th batches of A , B & C will split in two with first half going to S1 & second half to S2 as indicated by "-" in the specified boxes.
- 4. Elective rotation is indicated as "ELECTIVE ROTATION 4 WEEKS". Please ask for additional information to Medical Education.

Reviewed by: Dr. Mehroosh Shakeel (Assistant Prof)

Approved by: **Dr. Sania Shuja** (HOD Pathology) Chairperson 4th Year Committee

Appendix VII

Fourth year Lecture List Surgery & Allied 2022-2023

Date	Time	Days	Topi c	Teacher
28-03-2023	8:00 to 8:50	Tuesday	Fluid Management in a Surgical Patient	Prof Khawaja M Azim
30-03-2023	12:30 - 1:20	Thursday	Laparoscopy and laparoscopic surgery	Prof Asghar Ali
04-04-2023	8:00 to 8:50	Tuesday	Electrolyte imbalance in a surgical patient	Prof Khawaja M Azim
06-04-2023	12:30 - 1:20	Thursday	Approach to a patient in surgical emergency Analysis of ABGs and basics of acid base disorder	Prof Asghar Ali
11-04-2023	8:00 to 8:50	Tuesday	management	Prof Maaz UI Hassan
13-04-2023	12:30 - 1:20	Thursday	Basic surgical skills for medical Graduate: An overview	Prof Asghar Ali
18-04-2023	8:00 to 9:00	Tuesday	Break	
20-04-2023	1:20 to 2:10	Thursday	Break	
25-04-2023	8:00 to 9:00	Tuesday	Break	
27-04-2023	1:20 to 2:10	Thursday	Break Autorition in a Surgical national Entered putritional	
02-05-2023	8:00 to 9:00	Tuesday	Nutrition in a Surgical patient: Enteral nutritional support	Prof Maaz UI Hassan
04-05-2023	1:20 to 2:10	Thursday	Annual Debates and Declamation	
09-05-2023	8:00 to 9:00	Tuesday	Parenteral nutritional support and its practical application	Prof Maaz UI Hassan
11-05-2023	1:20 to 2:10	Thursday	Introduction to Orthopedics and its Scope	Dr Muhammad Saleem
16-05-2023	8:00 to 9:00	Tuesday	Cellular and Tissue Diagnosis	Dr Rizwan Ahmad Khan
18-05-2023	1:20 to 2:10	Thursday	Classification of types of fractures, fracture healing and factors responsible for it	Dr Muhammad Saleem
23-05-2023	8:00 to 9:00	Tuesday	Principles of fracture management & Fracture Tibia	Dr Muhammad Saleem
25-05-2023	1:20 to 2:10	Thursday	Wound healing/Care and its clinical application	Prof Humad Naeem Rana
30-05-2023	8:00 to 9:00	Tuesday	Pre Operative Assessment	Dr Amir Bashir
01-06-2023	1:20 to 2:10	Thursday	Compartment syndrome	Prof. M.A Wajid
06-06-2023	8:00 to 9:00	Tuesday	Indications and methods of administering local anesthesia	Prof Muhammad Mubeen
08-06-2023	1:20 to 2:10	Thursday	Club foot and developmental dysplasia Hip	Dr Muhammad Saleem
13-06-2023	8:00 to 9:00	Tuesday	Indications and methods for administering neuroaxial blocks	Dr Itrat Kazmi
15-06-2023	1:20 to 2:10	Thursday	Open fractures and their Management	Dr Usman Sarwar
20-06-2023	8:00 to 9:00	Tuesday	Surgery Assessment-I	Dr Maaz ul Hassan

22-06-2023	1:20 to 2:10	Thursday	Osteoarthritis and Rheumatoid Arthritis	Prof. M.A Wajid
27-06-2023	8:00 to 9:00	Tuesday	Summar Break	
29-06-2023	1:20 to 2:10	Thursday	Summar Break	
04-07-2023	8:00 to 9:00	Tuesday	Summar Break	
06-07-2023	1:20 to 2:10	Thursday	Summar Break	
11-07-2023	8:00 to 9:00	Tuesday	Components and stages of general anesthesia with monitoring	Dr Amir Bashir
13-07-2023	1:20 to 2:10	Thursday	Seronegative and seropositive inflammatory arthropathies	Dr. Imran
18-07-2023	8:00 to 9:00	Tuesday	Postoperative care unit	Dr Itrat Kazmi
20-07-2023	1:20 to 2:10	Thursday	Acute and chronic septic arthropathies	Dr Usman Sarwar
25-07-2023	8:00 to 9:00	Tuesday	CSSD and its functioning	Prof Muhammad Mubeen
27-07-2023	1:20 to 2:10	Thursday	Ashura	
01-08-2023	8:00 to 9:00	Tuesday	ICU & HDU Setting	Dr Amir Waseem
03-08-2023	1:20 to 2:10	Thursday	Overview of metabolic bone disorders	Prof. M.A Wajid
08-08-2023	8:00 to 9:00	Tuesday	Anaphylactic shock	Dr Amir Waseem
10-08-2023	1:20 to 2:10	Thursday	Arts Gala + Film Festival	
15-08-2023	8:00 to 9:00	Tuesday	Anesthesia Lecture Assessment	Prof Muhammad Mubeen
17-08-2023	1:20 to 2:10	Thursday	Benign and Malignant Bone Neoplasms	Dr Ali Shiekh
22-08-2023	8:00 to 9:00	Tuesday	Approach to a patient with trauma	Dr Talat Waseem
24-08-2023	1:20 to 2:10	Thursday	Low back pain/Neck pain management	Dr Imran Manzoor
29-08-2023	8:00 to 9:00	Tuesday	Management of a trauma patient	Dr Talat Waseem
31-08-2023	1:20 to 2:10	Thursday	Pathology of osteoarthritis of hip and knee	Dr Usman Sarwar
05-09-2023	8:00 to 9:00	Tuesday	Secondary survey in assessment and trauma patient	Dr Talat Waseem
07-09-2023	1:20 to 2:10	Thursday	Fracture of clavicle & Humerus	Dr Ali Shiekh
12-09-2023	8:00 to 9:00	Tuesday	Prehopsital management of a trauma patient	Dr Talat Waseem
14-09-2023	1:20 to 2:10	Thursday	Fractures of neck of femur & Shaft	Dr Muhammad Saleem
19-09-2023	8:00 to 9:00	Tuesday	Blunt abdominal trauma	Dr Talat Waseem
21-09-2023	1:20 to 2:10	Thursday	Fractures of elbow and wrist	Dr Ali Shiekh

26-09-2023	8:00 to 9:00	Tuesday	Penetrating abdominal trauma	Dr Talat Waseem
28-09-2023	1:20 to 2:10	Thursday	12 [™] Rabi ul Awal	
03-10-2023	8:00 to 9:00	Tuesday	Extremity trauma	Dr Talat Waseem
05-10-2023	1:20 to 2:10	Thursday	Assessment and Management of spine injury 1	Prof Tariq Salahudin
10-10-2023	8:00 to 9:00	Tuesday	Head injury- Initial Support	Dr Talat Waseem
12-10-2023	1:20 to 2:10	Thursday	Assessment and Management of spine injury 2	Prof Tariq Salahudin
17-10-2023	8:00 to 9:00	Tuesday	Spine injury- Initial Support	Dr Talat Waseem
19-10-2023	1:20 to 2:10	Thursday	Brain Tumors	Prof Tariq Salahudin
24-10-2023	8:00 to 9:00	Tuesday	Renal stones and Acute Renal colic	Dr Irfan Nazir
26-10-2023	1:20 to 2:10	Thursday	Closing Ceremony Annual Sports	
31-10-2023	8:00 to 9:00	Tuesday	Kidney Tumors	Dr Shahid Ali
02-11-2023	1:20 to 2:10	Thursday	Head injury: Neurosurgical Perspective	Prof Tariq Salahudin
07-11-2023	8:00 to 9:00	Tuesday	Testicular Torsion & Varicocolies	Dr Irfan Nazir
09-11-2023	1:20 to 2:10	Thursday	Head injury: Neurosurgical Perspective- Management	Prof Tariq Salahudin
13/11/2023	8:00 to 9:00	Monday	Approach to a patient with skin ulcer &Differnetials of an Ulcer	Dr Rizwan Ahmad Khan
14-11-2023	8:00 to 9:00	Tuesday	Etiology of Bladder outlet Obstruction	Dr Irfan Nazir
16-11-2023	1:20 to 2:10	Thursday	Polytrauma patient & pelvic fractures	Prof. M.A Wajid
20/11/2023	8:00 to 9:00	Monday	Common Cutaneous and Subcutaneous Lesions	Dr Rizwan Ahmad Khan
21-11-2023	8:00 to 9:00	Tuesday	Bladder Tumors	Dr Irfan Nazir
23-11-2023	1:20 to 2:10	Thursday	Orthopedics Assessment	Dr Muhammad Saleem
27/11/2023	8:00 to 9:00	Monday	Assesment and Overview of Melanoma Managment	Dr Rizwan Ahmad Khan
28-11-2023	8:00 to 9:00	Tuesday	Prostate Tumors	Dr Shahid Ali
30-11-2023	1:20 to 2:10	Thursday	Renal trauma grades, Renal trauma, Etiology and Ureteric trauma	Dr Irfan Nazir
12.04.2023	8:00 to 9:00	Monday	Assessment Surgery-II	Dr Rizwan Ahmad Khan
05-12-2023	8:00 to 9:00	Tuesday	Truma (Assessment)	Dr Talat Waseem
07-12-2023	1:20 to 2:10	Thursday	Bladder Trauma & Urethral injury	Dr Irfan Nazir
12-12-2023	8:00 to 9:00	Tuesday	Bladder stones	Dr Farooq Ahmed

14-12-2023	1:20 to 2:10	Thursday	Upper urinary & Lower urinary tract infections	Dr Shahid Ali
19-12-2023	8:00 to 9:00	Tuesday	Infection of Testes & Scrotum	Dr Farooq Ahmed
21-12-2023	1:20 to 2:10	Thursday	Hydronephrosis & Etiology	Dr Farooq Ahmed
26-12-2023	8:00 to 9:00	Tuesday	Laboratory Investigations & Radiologic Investigations	Dr Farooq Ahmed
28-12-2023	1:20 to 2:10	Thursday	Urology Assessment	Dr Irfan Nazir

Appendix VIII

	Final Year Clinical Rotation Schedule 2022																		
	GROUPS	Δ					E	3				С							
S.NO		A1	A2	АЗ	Α4	A5	А6	B1	В2	В3	В4	В5	В6	C1	C2	сз	C4	C5	C6
1	6TH March 23 to 10th March 23	G1	G1	G2	G2	Р	Р	M	М	М	М	М	М	S	S	S	S	s	S
2	13TH March 23 to 17th March 23	G1	G1	G2	G2	Р	Р	M	М	М	М	М	M	s	s	s	s	s	s
3	20TH March 23 to 24th March 23	G1	G1	G2	G2	Р	Р	M	М	М	M	M	M	s	s	s	S	s	s
4	27TH March 23 to 31st March 23	G1	G1	G2	G2	Р	Р	M	М	M	M	М	M	S	S	S	S	s	S
5	3rd April 23 to 7th April 23	G2	G2	Р	Р	G1	G1	M	М	М	M	M	M	S	S	S	S	S	S
6	10TH April 23 to 14th April 23	G2	G2	Р	Р	G1	G1	M	М	M	M	M	M	S	S	S	S	S	S
7	17TH April 23 to 21st April23	G2	G2	Р	Р	G1	G1	M	М	M	M	M	M	S	S	S	S	S	S
8	24TH April 23 to 28th April23	G2	G2	Р	Р	G1	G1	M	M	M	M	M	M	S	S	S	S	S	S
9	01st May 23 to 05th May 23	Р	Р	G1	G1	G2	G2	M	M	M	M	M	M	S	S	S	S	S	S
10	8th May 23 to 12th May 23	Р	Р	G1	G1	G2	G2	M	M	M	M	M	M	S	S	S	S	S	S
11	15th May 23 to 19th May 23	Р	Р	G1	G1	G2	G2	M	M	M	M	M	M	S	S	S	S	S	S
12	22nd May 23 to 26th May 23	Р	Р	G1	G1	G2	G2	M	M	M	M	M	M	S	S	S	S	S	S
13	29th May 23 to 2nd June 23							_		Academ	ic Break			•	ı			1	
14	5th June 23 to 9th June 23	M	M	M	М	M	M	S	S	S	S	S	S	G1	G1	G2	G2	Р	Р
15	12th June 23 to 16th June 23	M	М	М	М	М	М	S	S	S	S	S	S	G1	G1	G2	G2	Р	Р
16	19th June 23 to 23rd June 23	M	M	M	M	M	М	s	S	S	S	S	S	G1	G1	G2	G2	Р	Р
17	26th June 23 to 30th June 23		•					•						•	•	•	•	•	
18	3rd July 23 to 7th July 23									C	u Dua -!								
19	10th July 23 to 14th July 23		Summer Break																
20	17th July 23 to 21st July 23																		
21	24th July 23 to 28th July 23	M	M	M	M	M	M	S	S	S	S	S	S	G1	G1	G2	G2	Р	Р
22	31st July 23 to 4th Aug 23	M	М	M	М	M	M	S	S	S	S	S	S	G2	G2	Р	Р	G1	G1
23	7th Aug 23 to 11th Aug 23	M	М	M	М	M	M	S	S	S	S	S	S	G2	G2	Р	Р	G1	G1
24	14th Aug 23 to 18th Aug 23	M	М	M	М	M	М	S	S	S	S	S	S	G2	G2	Р	Р	G1	G1

25	21st Aug 23 to 25th Aug 23	М	М	М	М	М	М	s	s	s	s	S	S	G2	G2	Р	Р	G1	G1
26	28th Aug 23 to 1st Sep 23	М	М	М	М	М	М	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2
27	4th Sep 23 to 8th Sep 23	М	М	M	М	М	M	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2
28	11th Sep 23 to 15th Sep 23	М	M	M	М	М	M	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2
29	18th Sep 23 to 22nd Sep 23	M	M	М	M	М	M	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2
30	25th Sep 23 to 29th Sep 23	S	S	S	S	S	S	G1	G1	G2	G2	Р	Р	M	M	M	M	M	M
31	2nd Oct 23 to 6th Oct 23	S	S	S	S	S	S	G1	G1	G2	G2	Р	Р	M	M	M	М	M	M
32	9th Oct 23 to 13th Oct 23	S	S	S	S	S	S	G1	G1	G2	G2	Р	Р	M	M	M	М	M	M
33	16th Oct 23 to 20th Oct 23	S	S	S	S	S	S	G1	G1	G2	G2	Р	Р	М	M	M	M	M	M
34	23rd Oct 23 to 27th Oct 23	S	S	S	S	S	S	G2	G2	Р	Р	G1	G1	М	М	M	M	M	M
35	30th Oct 23 to 3rd Nov 23	S	S	S	S	S	S	G2	G2	Р	Р	G1	G1	M	M	M	M	M	M
36	6th Nov 23 to 10th Nov 23	S	S	S	S	S	S	G2	G2	Р	Р	G1	G1	M	M	M	M	M	M
37	13th Nov 23 to 17th Nov 23	S	S	S	S	S	S	G2	G2	Р	Р	G1	G1	М	M	M	M	M	M
38	20th Nov 23 to 24th Nov 23	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2	M	M	M	M	M	M
39	27th Nov 23 to 1st Dec 23	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2	М	M	M	M	M	M
40	4th Dec 23 to 8th Dec 23	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2	M	M	M	M	M	M
41	11th Dec 23 to 15th Dec 23	S	S	S	S	S	S	Р	Р	G1	G1	G2	G2	М	М	M	M	M	M

PREP LEAVE FOR SEND UPS

Medicine	М
Surgery	S
	G1
Obs. & Gynae	G2
Pediatrics	Р

Appendix IX

Final year Lecture List Surgery & Allied Department Wise

Venue: Lecture Hall#6, Faculty Building, Eye Department

				· · · · · · · · · · · · · · · · · · ·	are only 2 on one, 2, 2 of or one.	
serial NO#	Lec No.	Day	Date	Time	Topic	Consultant
			Gen	eral Surgery Prof	. Khawaja M Azim (Final Year)	
1	1	Monday	06/03/2023	(8:00AM- 9:00AM)	Surgical Anatomy & Investigations of Esophagus	Prof Khawaja M Azim
2	2	Monday	13/03/2023	(8:00AM- 9:00AM)	Benign Neoplasm of Esophagus	Prof Khawaja M Azim
3	3	Monday	20/03/2023	(8:00AM- 9:00AM)	Functional Disorders of Esophagus- Achalasia	Prof Khawaja M Azim
4	4	Monday	27/03/2023	(8:00AM- 9:00AM)	CA Esophagus- Investigations	Prof Khawaja M Azim
5	5	Monday	03/04/2023	(8:00AM- 9:00AM)	CA Esophagus- Management	Prof Khawaja M Azim
6	6	Monday	10/04/2023	(8:00AM- 9:00AM)	Esophageal Trauma & perforation	Prof Khawaja M Azim
7	7	Monday	17/04/2023	(8:00AM- 9:00AM)	Surgical Anatomy of Thyroid Gland	Prof Khawaja M Azim
8	8	Monday	08/05/2023	(8:00AM- 9:00AM)	Hypothyroidism	Prof Khawaja M Azim
9	9	Monday	15/05/2023	(8:00AM- 9:00AM)	Graves Disease	Prof Khawaja M Azim
10	10	Monday	22/05/2023	(8:00AM- 9:00AM)	Solitary Thyroid Nodule & Multinodular Goiter	Prof Khawaja M Azim
11	11	Monday	29/05/2023	(8:00AM- 9:00AM)	CA thyroid: Investigation & Managment	Prof Khawaja M Azim
12	12	Monday	05/06/2023	(8:00AM- 9:00AM)	Thyroid related Syndromes: MEN	Prof Khawaja M Azim
13	13	Monday	12/06/2023	(8:00AM- 9:00AM)	Surgical Anatomy & Investigations of Parathyroid Gland	Prof Khawaja M Azim
14	14	Monday	19/06/2023	(8:00AM- 9:00AM)	Hyperparathyroidism	Prof Khawaja M Azim
15	15	Monday	24/07/2023	(8:00AM- 9:00AM)	CA Parathyroid	Prof Khawaja M Azim
16	16	Monday	31/07/2023	(8:00AM- 9:00AM)	Conn's Syndrome	Prof Khawaja M Azim
17	17	Monday	07/08/2023	(8:00AM- 9:00AM)	Surgical Anatomy & Investigations of Adrenal Gland	Prof Khawaja M Azim
18	18	Monday	21/08/2023	(8:00AM- 9:00AM)	Pheochromocytoma	Prof Khawaja M Azim
19	19	Monday	28/08/2023	(8:00AM- 9:00AM)	Assessment 1	Prof Khawaja M Azim
20	20	Monday	04/09/2023	(8:00AM- 9:00AM)	Cushing Syndrome	Prof Khawaja M Azim
21	21	Monday	11/09/2023	(8:00AM- 9:00AM)	Surgical Anatomy of Testis/ Scrotum	Prof Khawaja M Azim

22	22	Monday	18/09/2023	(8:00AM- 9:00AM)	Benign Conditions of Scrotum & testicles	Prof Khawaja M Azim
23	23	Monday	25/09/2023	(8:00AM- 9:00AM)	Testicular Tumors & their Management	Prof Khawaja M Azim
24	24	Monday	02/10/2023	(8:00AM- 9:00AM)	Head & Neck Cancers: Overview	Prof Khawaja M Azim
25	25	Monday	09/10/2023	(8:00AM- 9:00AM)	CA tongue	Prof Khawaja M Azim
26	26	Monday	16/10/2023	(8:00AM- 9:00AM)	Salivary Gland Tumors 1	Prof Khawaja M Azim
27	27	Monday	23/10/2023	(8:00AM- 9:00AM)	Salivary Gland Tumors 2	Prof Khawaja M Azim
28	28	Monday	30/10/2023	(8:00AM- 9:00AM)	Trauma Clinical Scenarios	Prof Khawaja M Azim
29	29	Monday	06/11/2023	(8:00AM- 9:00AM)	ATLS: 'ABC' / 'CBL'	Prof Khawaja M Azim
30	30	Monday	13/11/2023	(8:00AM- 9:00AM)	Approach to patient with Trauma	Prof Khawaja M Azim
31	31	Monday	20/11/2023	(8:00AM- 9:00AM)	Thoracic Trauma : CBL	Prof Khawaja M Azim
32	32	Monday	27/11/2023	(8:00AM- 9:00AM)	Management of Shock	Prof Khawaja M Azim
33	33	Monday	04/12/2023	(8:00AM- 9:00AM)	Chest Trauma 1	Prof Khawaja M Azim
34	34	Monday	11/12/2023	(8:00AM- 9:00AM)	Ischemial Trauma : CBL	Prof Khawaja M Azim
35	35	Friday	08/09/2023	(8:00AM- 9:00AM)	Chest Trauma 2	Prof Khawaja M Azim
36	36	Friday	15/09/2023	(8:00AM- 9:00AM)	Extremity Trauma : CBL	Prof Khawaja M Azim
37	37	Friday	22/09/2023	(8:00AM- 9:00AM)	Abdominal Trauma	Prof Khawaja M Azim
38	38	Friday	29/09/2023	(8:00AM- 9:00AM)	Revision Lecture	Prof Khawaja M Azim
39	39	Friday	13/10/2023	(8:00AM- 9:00AM)	Neurosurgical Trauma : CBL	Prof Khawaja M Azim
40	40	Friday	20/10/2023	(8:00AM- 9:00AM)	Assessment 2	Prof Khawaja M Azim
			Genei	al Surgery Pro	f Humad Naeem Rana (Final Year)	
41	1	Tuesday	07/03/2023	(8:00AM- 9:00AM)	Preoperative Preparation	Prof Humad Naeem Rana
42	2	Tuesday	14/03/2023	(8:00AM- 9:00AM)	Peri operative Care	Prof Humad Naeem Rana
43	3	Tuesday	21/03/2023	(8:00AM- 9:00AM)	Peri operative pain control/ Analgesia	Prof Humad Naeem Rana
44	4	Tuesday	28/03/2023	(8:00AM- 9:00AM)	Peri Operative Fluid Therapy & Nutrition	Prof Humad Naeem Rana
45	5	Tuesday	04/04/2023	(8:00AM- 9:00AM)	Gastrointestinal Endoscopy	Prof Humad Naeem Rana
46	6	Tuesday	11/04/2023	(8:00AM- 9:00AM)	History, Examination of acute abdomen	Prof Humad Naeem Rana

47	7	Tuesday	18/04/2023	(8:00AM- 9:00AM)	Diseases abdominal wall and hernias	Prof Humad Naeem Rana
	· ·	Tuesday		(8:00AM-		Prof Humad Naeem
48	8		25/04/2023	9:00AM)	Groin Hernias	Rana
		Tuesday		(8:00AM-		Prof Humad Naeem
49	9		02/05/2023	9:00AM)	Peritoneum Infection and Neoplasm	Rana
		Tuesday		(8:00AM-		Prof Humad Naeem
50	10	1 desday	09/05/2023	9:00AM)	Omentum & Mesentery	Rana
		Tuesday		(8:00AM-		Prof Humad Naeem
51	11	Tucsuay	16/05/2023	9:00AM)	Retroperitoneal Space	Rana
		Tuesday		(8:00AM-		Prof Humad Naeem
52	12	Tuesday	23/05/2023	9:00AM)	Stomach- Surgical Anatomy & Investigations	Rana
		T1		(8:00AM-		Prof Humad Naeem
53	13	Tuesday	30/05/2023	9:00AM)	Diseases of Stomach	Rana
		TD 1		(8:00AM-		Prof Humad Naeem
54	14	Tuesday	06/06/2023	9:00AM)	CA stomach	Rana
				(8:00AM-	Surgical Anatomy of small, Large Bowel &	Prof Humad Naeem
55	15	Tuesday	13/06/2023	9:00AM)	Structure Diseases	Rana
			10.00.2020	(8:00AM-		Prof Humad Naeem
56	16	Tuesday	20/06/2023	9:00AM)	Inflammatory diseases of large bowel	Rana
30	10		20/00/2023	(8:00AM-	initialification y diseases of large bower	Prof Humad Naeem
57	17	Tuesday	25/07/2023	9:00AM)	Lecture Assessment 1	Rana
31	1 /		23/07/2023	/	Lecture Assessment 1	Prof Humad Naeem
58	18	Tuesday	01/08/2023	(8:00AM-	I C t'- D' CI D 1	
38	18		01/08/2023	9:00AM)	Infective Diseases of Large Bowel	Rana
50	10	Tuesday	00/00/2022	(8:00AM-		Prof Humad Naeem
59	19		08/08/2023	9:00AM)	Intestinal Obstruction	Rana
	• •	Tuesday	15/00/505	(8:00AM-		Prof Humad Naeem
60	20		15/08/2023	9:00AM)	Tumors of small & large gut	Rana
		Tuesday		(8:00AM-		Prof Humad Naeem
61	21	- raesaay	22/08/2023	9:00AM)	Appendix	Rana
		Tuesday		(8:00AM-		Prof Humad Naeem
62	22	Tuesday	29/08/2023	9:00AM)	Rectum: Non-malignant diseases	Rana
		Tuesday		(8:00AM-		Prof Humad Naeem
63	23	1 ucsuay	05/09/2023	9:00AM)	CA Rectum	Rana
		Tuggday		(8:00AM-		Prof Humad Naeem
64	24	Tuesday	12/09/2023	9:00AM)	Surgical anatomy & physiology of Breast	Rana
		T1		(8:00AM-		Prof Humad Naeem
65	25	Tuesday	19/09/2023	9:00AM)	Diseases & Carcinoma Anal Canal	Rana
		m 1		(8:00AM-		Prof Humad Naeem
66	26	Tuesday	26/09/2023	9:00AM)	Benign Diseases of Breast	Rana
	-			(8:00AM-		Prof Humad Naeem
67	27	Tuesday	03/10/2023	9:00AM)	Malignant Diseases of Breast	Rana
			52: 23: 2323	(8:00AM-		Prof Humad Naeem
68	28	Tuesday	10/10/2023	9:00AM)	Stomas: Types and Care	Rana
	20		10/10/2023	(8:00AM-	Storius, 1 Jpes and Care	Prof Humad Naeem
69	29	Tuesday	17/10/2023	9:00AM)	Triage & Disaster Surgery	Rana
09	<i></i>		17/10/2023	, ,	Thage & Disaster Surgery	Prof Humad Naeem
70	30	Tuesday	24/10/2022	(8:00AM-	Doods Campony , Draw :-	
/U	30		24/10/2023	9:00AM)	Peads Surgery : Dyspersia	Rana
71	21	Tuesday	21/10/2022	(8:00AM-		Prof Humad Naeem
71	31		31/10/2023	9:00AM)	Peads Surgery : High Intestinal Onstruction	Rana

72	32	Tuesday	07/11/2023	(8:00AM- 9:00AM)	Peads Surgery : Low Intestinal Onstruction	Prof Humad Naeem Rana
73	33	Tuesday	14/11/2023	(8:00AM- 9:00AM)	Tumors of Childhood	Prof Humad Naeem Rana
74	34	Tuesday	21/11/2023	(8:00AM- 9:00AM)	Congenital Malfunctions	Prof Humad Naeem Rana
75	35	Tuesday	28/11/2023	(8:00AM- 9:00AM)	Lecture Assessment 2	Prof Humad Naeem Rana
			Gei	neral Surgery F	Prof Touseef Asghar (Final Year)	
76	1	Wednesday	08/03/2023	(09:50AM- 10:00AM)	Metabolic Response to Injury	Prof Touseef Asghar
77	2	Wednesday	15/03/2023	(09:50AM- 10:00AM)	Wound Tissue repair + Scars	Prof Touseef Asghar
78	3	Wednesday	22/03/2023	(09:50AM- 10:00AM)	Surgical Infection	Prof Touseef Asghar
79	4	Wednesday	29/03/2023	(09:50AM- 10:00AM)	Principles of Oncological Surgery	Prof Touseef Asghar
80	5	Wednesday	05/04/2023	(09:50AM- 10:00AM)	Surgical Audit & Research	Prof Touseef Asghar
81	6	Wednesday	12/04/2023	(09:50AM- 10:00AM)	Surgical Ethics & Law	Prof Touseef Asghar
82	7	Wednesday	19/04/2023	(09:50AM- 10:00AM)	Day Care Surgery	Prof Touseef Asghar
83	8	Wednesday	26/04/2023	(09:50AM- 10:00AM)	Tropical Surgery	Prof Touseef Asghar
84	9	Wednesday	03/05/2023	(09:50AM- 10:00AM)	Basic Setup of Operation Theater	Prof Touseef Asghar
85	10	Wednesday	10/05/2023	(09:50AM- 10:00AM)	Basics of Laparoscopic Surgery	Prof Touseef Asghar
86	11	Wednesday	17/05/2023	(09:50AM- 10:00AM)	Surgical Anatomy of Liver & Investigations of Biliary System	Prof Touseef Asghar
87	12	Wednesday	24/05/2023	(09:50AM- 10:00AM)	Liver Trauma	Prof Touseef Asghar
88	13	Wednesday	31/05/2023	(09:50AM- 10:00AM)	Portal Hypertension & Portosystemic Shunts	Prof Touseef Asghar
89	14	Wednesday	07/06/2023	(09:50AM- 10:00AM)	Liver Tumors: Benign & Malignant	Prof Touseef Asghar
90	15	Wednesday	14/06/2023	(09:50AM- 10:00AM)	Hydatid Disease of Liver	Prof Touseef Asghar
91	16	Wednesday	21/06/2023	(09:50AM- 10:00AM)	Surgical Anatomy & Physiology Of Biliary Tract	Prof Touseef Asghar
92	17	Wednesday	26/07/2023	(09:50AM- 10:00AM)	Investigation of Gall Bladder & Biliary Tract	Prof Touseef Asghar
93	18	Wednesday	02/08/2023	(09:50AM- 10:00AM)	Gallstones	Prof Touseef Asghar
94	19	Wednesday	09/08/2023	(09:50AM- 10:00AM)	Complications of Gall Stones	Prof Touseef Asghar
95	20	Wednesday	16/08/2023	(09:50AM- 10:00AM)	Open & Lap. Cholecystectomy	Prof Touseef Asghar

96	21	Wednesday	23/08/2023	(09:50AM- 10:00AM)	Choledocholithiasis + Cholangitis	Prof Touseef Asghar
97	22	Wednesday	30/08/2023	(09:50AM- 10:00AM)	Obstructive Jaundice 1 & 2	Prof Touseef Asghar
98	23	Wednesday	06/09/2023	(09:50AM- 10:00AM)	Assessment 1	Prof Touseef Asghar
99	24	Wednesday	13/09/2023	(09:50AM- 10:00AM)	Tumors of bile duct	Prof Touseef Asghar
100	25	Wednesday	20/09/2023	(09:50AM- 10:00AM)	Anatomy & Physiology of Pancreas + Investigations	Prof Touseef Asghar
101	26	Wednesday	27/09/2023	(09:50AM- 10:00AM)	Injuries to the Pancreas	Prof Touseef Asghar
102	27	Wednesday	04/10/2023	(09:50AM- 10:00AM)	Acute Pancreatitis 1	Prof Touseef Asghar
103	28	Wednesday	11/10/2023	(09:50AM- 10:00AM)	Acute Pancreatitis 2	Prof Touseef Asghar
104	29	Wednesday	18/10/2023	(09:50AM- 10:00AM)	Chronic Pancreatitis	Prof Touseef Asghar
105	30	Wednesday	25/10/2023	(09:50AM- 10:00AM)	ERCP & its Complications	Prof Touseef Asghar
106	31	Wednesday	01/11/2023	(09:50AM- 10:00AM)	CA Pancreas	Prof Touseef Asghar
107	32	Wednesday	08/11/2023	(09:50AM- 10:00AM)	Surgical Anatomy & Physio of Spleen/ Causes of Splenomegaly	Prof Touseef Asghar
108	33	Wednesday	15/11/2023	(09:50AM- 10:00AM)	Hemolytic Disorders of Spleen	Prof Touseef Asghar
109	34	Wednesday	22/11/2023	(09:50AM- 10:00AM)	Assessment 2	Prof Touseef Asghar
				Anes	sthesia (Final Year)	
110	1	Thursday	09/03/2023	(8:00AM- 9:00AM)	Introduction to Regional Anesthesia	Prof Mobeen
111	2	Thursday	16/03/2023	(8:00AM- 9:00AM)	Introduction of Pain Management	Dr Itrat Kazmi
112	3	Thursday	30/03/2023	(8:00AM- 9:00AM)	Principle of Fluid Management	Dr Amir bashir
113	4	Thursday	06/04/2023	(8:00AM- 9:00AM)	Basic Principle of ICU Management	Dr Amir Waseem
				Cardiovasc	ular Lectures (Final Year)	
114	1	Friday	17/03/2023	(8:00AM- 9:00AM)	Intro to Cardiothoracic Surgery	Prof Aftab Younas
115	2	Friday	24/03/2023	(8:00AM- 9:00AM)	Coronary Bypass Surgery	Prof Aftab Younas
116	3	Friday	31/03/2023	(8:00AM- 9:00AM)	Congenital & Vulvular Heart Surgery	Prof Aftab Younas
117	4	Friday	14/04/2023	(8:00AM- 9:00AM)	Acute & Chronic Ischemic Limb	Prof Aftab Younas
118	5	Friday	21/04/2023	(8:00AM- 9:00AM)	Abdomino-Thoracic Aneurysms	Prof Aftab Younas

				Neurosurg	gery Lectures (Final Year)					
119	1	Thursday	10/08/2023	(8:00AM- 9:00AM)	Neuromonitoring	Prof. Tariq Salahudin				
120	2	Thursday	17/08/2023	(8:00AM- 9:00AM)	Extradural / Subdural Hematoma	Prof. Tariq Salahudin				
121	3	Thursday	24/08/2023	(8:00AM- 9:00AM)	Hydrocephalous Management	Prof. Tariq Salahudin				
122	4	Thursday	31/08/2023	(8:00AM- 9:00AM)	Cervical Spine Injury (Assessment & Management)	Prof. Tariq Salahudin				
123	5	Thursday	07/09/2023	(8:00AM- 9:00AM)	Brain Tumors: Management	Prof. Tariq Salahudin				
				Urology	Lectures (Final Year)					
124	1	Friday	28/04/2023	(8:00AM- 9:00AM)	Urological Trauma	Dr Irfan Nazir				
125	2	Friday	12/05/2023	(8:00AM- 9:00AM)	Kidney Tumors	Dr Irfan Nazir				
126	3	Friday	19/05/2023	(8:00AM- 9:00AM)	Tumors of Urinary Bladder	Dr Irfan Nazir				
127	4	Friday	26/05/2023	(8:00AM- 9:00AM)	Prostate	Dr Farooq Hameed				
128	5	Friday	09/06/2023	(8:00AM- 9:00AM)	Pediatric Urology	Dr Irfan Nazir				
129	6	Friday	16/06/2023	(8:00AM- 9:00AM)	Assessment Urology	Dr Irfan Nazir				
				Orthoped	ics Lectures (Final Year)					
130	1	Thursday	14/09/2023	(8:00AM- 9:00AM)	Fracture in Children & How these differ from adults	Dr Muhammad Saleem				
131	2	Thursday	21/09/2023	(8:00AM- 9:00AM)	Knee Injuries, Soft Tissue ACL etc.	Dr Muhammad Saleem				
132	3	Thursday	05/10/2023	(8:00AM- 9:00AM)	Management of Orthopedic Infection	Dr Muhammad Saleem				
133	4	Thursday	12/10/2023	(8:00AM- 9:00AM)	Spinal Fracture: Classification & Management	Dr Muhammad Saleem				
134	5	Thursday	19/10/2023	(8:00AM- 9:00AM)	Complications of Fracturesa & Management of each type	Dr Muhammad Saleem				
135	6	Thursday	02/11/2023	(8:00AM- 9:00AM)	Classifications of fractures and introduction to fracture management	Dr Muhammad Saleem				
136	7	Thursday	09/11/2023		Assessment Orthopedic	Dr Muhammad Saleem				
	Plastic Surgery Lectures (Final Year)									

137	1	Friday	23/06/2023	(8:00AM- 9:00AM)	Basic of Plastic Surgery 1	Dr Asif Zubair Bhatti
138	2	Friday	11/08/2023	(8:00AM- 9:00AM)	Basic of Plastic Surgery 2	Dr Asif Zubair Bhatti
139	3	Friday	18/08/2023	(8:00AM- 9:00AM)	Basic of Plastic Surgery 3	Dr Asif Zubair Bhatti
140	4	Friday	25/08/2023	(8:00AM- 9:00AM)	Burns 4	Dr Asif Zubair Bhatti
141	5	Friday	27/10/2023	(8:00AM- 9:00AM)	Burns 5	Dr Asif Zubair Bhatti
142	6	Wednesday	29/11/2023	(09:50AM- 10:00AM)	Flaps Recognition Surgery 8	Dr Asif Zubair Bhatti
143	7	Tuesday	05/12/2023	(8:00AM- 9:00AM)	Skin Grafting 6	Dr Asif Zubair Bhatti
144	8	Wednesday	06/12/2023	(09:50AM- 10:00AM)	Flaps Recognition Surgery 9	Dr Asif Zubair Bhatti
145	9	Tuesday	12/12/2023	(8:00AM- 9:00AM)	Skin Grafting 7	Dr Asif Zubair Bhatti
146	10	Wednesday	13/12/2023	(09:50AM- 10:00AM)	Flaps Recognition Surgery 10	Dr Asif Zubair Bhatti
			G	General Surger	y Prof Asghar Ali (Final Year)	
147	1	Thursday	13/04/2023	(8:00AM- 9:00AM)	Malnutrition in Surgical patient	Prof Asghar Ali
148	2	Thursday	20/04/2023	(8:00AM- 9:00AM)	Management of Fluid in Surgical Patients	Prof Asghar Ali
149	3	Thursday	27/04/2023	(8:00AM- 9:00AM)	Management of electrolytes in Surgical Patients	Prof Asghar Ali
150	4	Thursday	04/05/2023	(8:00AM- 9:00AM)	Wound Types	Prof Asghar Ali
151	5	Thursday	11/05/2023	(8:00AM- 9:00AM)	Types of Haemorrhage & Their Management	Prof Asghar Ali
152	6	Thursday	18/05/2023	(8:00AM- 9:00AM)	AIDS Management in Surgical Patient	Prof Asghar Ali
153	7	Thursday	25/05/2023	(8:00AM- 9:00AM)	Multidrug resistant infection in Surgical Pt.	Prof Asghar Ali
154	8	Thursday	01/06/2023	(8:00AM- 9:00AM)	Needle Stick Injury & Its Management	Prof Asghar Ali
155	9	Thursday	08/06/2023	(8:00AM- 9:00AM)	Cytoligical & hystological disorder	Prof Asghar Ali
156	10	Thursday	15/06/2023	(8:00AM- 9:00AM)	adjuvant treatment in Surgical Patient	Prof Asghar Ali
157	11	Thursday	22/06/2023	(8:00AM- 9:00AM)	Assessment (MCQs/SEQs)	Prof Asghar Ali
158	12	Thursday	03/08/2023	(8:00AM- 9:00AM)	Revision Lecture	Prof Asghar Ali
			Tai	ruma Surgery	Dr Talat Waseem (Final Year)	
159	1	Friday	10/11/2023	(8:00AM- 9:00AM)	Introduction to Surgical Trauma	Dr Talat Waseem

160	2	Friday	17/11/2023	(8:00AM- 9:00AM)	Types of Surgical Trauma	Dr Talat Waseem
161	3	Friday	24/11/2023	(8:00AM- 9:00AM)	Risk Factors for Surgical Trauma	Dr Talat Waseem
162	4	Friday	08/12/2023	(8:00AM- 9:00AM)	Postoperative Complications and Trauma	Dr Talat Waseem
163	5	Tuesday	15/12/2023	(8:00AM- 9:00AM)	Trauma-Informed Surgical Care	Dr Talat Waseem
164	6	Thursday	16/11/2023	(8:00AM- 9:00AM)	Preventing Surgical Trauma	Dr Talat Waseem
165	7	Thursday	23/11/2023	(8:00AM- 9:00AM)	Psychosocial Support for Patients	Dr Talat Waseem
166	8	Thursday	30/11/2023	(8:00AM- 9:00AM)	Trauma Care Team Collaboration	Dr Talat Waseem
167	9	Thursday	07/12/2023	(8:00AM- 9:00AM)	Ethical Considerations	Dr Talat Waseem
168	10	Thursday	14/12/2023	(8:00AM- 9:00AM)	Postoperative Trauma	Dr Talat Waseem