

GENERAL MEDICINE

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MBBS SYLLABUS FORMAT- GENERAL MEDICINE

1. GOAL

The goal of the undergraduate medical education program is to create an "Indian Medical Graduate" who has the necessary competencies (knowledge, skills, attitudes, values and responsiveness) to assume his or her role as a health care provider to the people of India and the world.

2. SPECIFIC LEARNING OBJECTIVES

A. KNOWLEDGE

At the end of the clinical postings in General Medicine, the medical student should:

- Be able to evaluate each patient as a person in society and not merely as a collection of organ systems.
- Have developed an interest in and care for all types of patients.
- Recognize differences between normal and abnormal behaviour.
- Be able to discern the hopes and fears of patients which inevitably underlie the symptom complexes and know how to handle these emotions, both in the patient and in others.
- Possess sound knowledge of common diseases, their clinical manifestations and natural history.
- Elicit a good clinical history and physical findings, elucidate the clinical problems based on these and discuss the differential diagnosis.
- Requisition relevant laboratory tests and perform common side lab procedures.
- Be familiar with common imaging techniques, their advantages, disadvantages and indications; be aware of radiation hazards and measures to protect there from.
- Outline the principles of management of various diseases, including the medical and surgical procedures available.
- Describe the mode of action of commonly used drugs, their doses, side effects, toxicity, indications, contraindications and drug interactions.
- Have an open attitude to the newer developments in medicine to keep abreast of new knowledge.
- Diagnose and provide competent initial care for medical emergencies.
- Refer medical problems to secondary and tertiary care at appropriate times.



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- Recognize the problems arising in patients with AIDS.
- Have an understanding of the art of medicine involving communication with patients, demonstration of empathy, reassurance, patient education and an understanding of the patient's socio-economic circumstances in relation to management.
- Learn to be adaptable to new ideas and new situations where resources may be limited.
- Possess knowledge to perform certain procedures.

Understand the ethical and legal implications of one's medical decisions.

B. SKILLS

At the end of the course, the student should be able to:

- Develop clinical skills (history taking, clinical examination and other instruments of examination) to diagnose various common medical disorders and emergencies.
- Refer a patient to secondary and/or tertiary level of health care after having instituted primary care.
- Perform simple routine investigations like haemogram, stool, urine, sputum and biological fluid examinations.
- Assist the common bedside investigative procedures like pleural tap, lumbar puncture, bone marrow aspiration/biopsy and liver biopsy.

C. INTEGRATION

- With community medicine and physical medicine and rehabilitation to have the knowledge and be able to manage important current national health programs, also to be able to view the patient in his/her total physical, social and economic milieu.
- With other relevant academic inputs which provide scientific basis of clinical medicine e.g. anatomy, physiology, biochemistry, microbiology, pathology, pharmacology and medico legal orientation.
- Orientation to National Health Programs and Emerging Diseases of International Relevance (International Health Regulations)

3. TEACHING HOURS

CLINICAL POSTINGS- TEACHING HOURS (3 hrs /day Forenoon)

S.No	Semester	No of weeks
1	3 rd Semester	6 (3h x 6 d x 6w= 108 H)
2	5 th Semester	4(3h x 6 d x 4w= 76 H)
3	7 th Semester	4(3h x 6 d x 4w= 76 H)
4	8 th Semester	6(3h x 6 d x 6w= 108 H)
5	9 th Semester	6(3h x 6 d x 6w= 108 H)
	Total	26 weeks= 475 hours

THEORY-TEACHING HOURS

S.No	Semester	No of hours
1	4 th & 5 th Semesters	2 hrs/wk x 42= 84 hrs
2	6th & 7th Semesters	2 hrs/wk x 42= 84 hrs
3	8th & 9th Semesters	3 hrs/wk x 44= 132 hrs
	Total	300 hours

THEORY TEACHING BREAK UP (Including all semesters)

Didactic Lecture (1/3 of the schedule as per MCI)	100 hours
Lecture Demonstration / case scenarios	100 hours
Seminars/ Symposium with pre and post test questionnaires	50 hours
Group Discussion with Faculty as moderators	15 hours
Role play (Communication Skills)	15 hours
Integrated Teaching Classes	20 hours
Total	Hours



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4. TEACHING METHODOLOGY

- 1. Didactic lectures
- 2. Clinical Demonstrations,
- 3. Video demonstrations
- 4. Seminars
- 5. Case presentations
- 6. General Clinics
- 7. Group discussions
- 8. Ward rounds
- 9. Communicative Skill assessment –VIVA
- 10. OSCE
- 11. Self-Directed Learning
- 12. Assignments
 - 13. Observation of the management of critically ill in Emergency department
- 14. Integrated Teaching
- 15. Skills lab practice

5. THEORY SYLLABUS

MENINGITIS

Must know	Desirable to know	Nice to know
Definition	CSF abnormalities	Management of complications
Meningism	Antimicrobial therapy of CNS infection based on pathogenesis	
Causes		
Clinical features		
Investigations		
Management		
Complications		



ENCEPHALITIS:

Must know	Desirable to know	Nice to know
Definition	CSF findings	IMAGE findings
Etiopathogenesis	Differential diagnosis	EEG
Clinical features	SSPE	PMLE
Investigations		
Management including preventive measures		

BRAIN TUMOURS

Must know	Desirable to know	Nice to know
Classification	Differential diagnosis	Associated genetic syndromes
Clinical features		
Investigation		
Management		

INCREASED ICT

Must know	Desirable to know	Nice to know
Causes	Management	
Clinical Features	Intracranial mass lesions	



HYDROCEPHALUS

Must know	Desirable to know	Nice to know
Definition	Idiopathic intracranial hypertension	DANDY criteria
Causes		
Investigation		
Management		

PERIPHERAL NEUROPATHY

Must know	Desirable to know	Nice to know
Definition	Neurocutaneous syndromes	Associated syndromes
Etiopathogenesis Types including GB syndrome	Types of peripheral neuropathy	Genetic syndromes associated
Clinical features	Electrophysiological features	Charcot marie tooth syndrome
Investigations		Newer modalities of treatment
Management		

MYASTHENIA GRAVIS

Must know	Desirable to know	Nice to know
Definition		
Pathophysiology	Differential diagnosis	Drug interactions
Clinical features	Myasthenic crisis	
Investigations		
Management		



SPINAL CORD COMPRESSION

Must to know	Desirable to know	Nice to know
Causes	Difference between intramedullary and extramedullary lesions	Spinal cord syndromes
Clinical features		
1.SIGNS		
2.SYMPTOMS		
Investigations		
Management		

PARKINSONISM

Must know	Desirable to know	Nice to know
Definition	Parkinsonism plus syndromes	Surgical treatment options
Pathophysiology		Differential diagnosis
Causes		
Clinical features		
Investigations		
Management		

MUSCLE DISORDER

Must know	Desirable to know	Nice to know
Types of muscular dystrophy	Clinical features & management	Genetic predisposition
Causes of acquired proximal and distal myopathies		Channel myopathies



SEIZURES

Must know	Desirable to know	Nice to know
Definition	EEG	PET scan and other imaging studies
		illiaging studies
Types		
Etiology		
Clinical manifestations		
Investigations		
Management		
Status epilepticus		

STATUS EPILEPTICUS

Must know	Desirable to know	Nice to know
Definition	Coma scale	EEG
Diagnosis		
Complications		
Precipitatory factors		
Investigations		
Treatment		

HEADACHE SYNDROMES

Must know	Desirable to know	Nice to know
Definition		MIDAS questionnaire
'Red flag' symptoms		
Migraine		
Pathogenesis		
Investigations		
Treatment		



MULTIPLE SCLEROSIS

Must know	Desirable to know	Nice to know
Definition	Clinical types	Disorders that mimic MS
Pathophysiology	Diagnostic criteria	
Clinical features		
Investigations		
Management		

MOVEMENT DISORDER

Must know	Desirable to know	Nice to know
Types	Other hypokinetic disorders except chorea	Imaging
Tremors-Definition &causes		
Chorea-Definition & causes		

LOSS OF CONSCIOUSNESS (COMA)

Must know	Desirable to know	Nice to know
Definition	Brain death – diagnosis	
Glasgow coma scale	Indian Criteria for certifying Brain Death	
Etiology		
Investigations		
Management		



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BELL'S PALSY

Must to know	Desirable to know	Nice to know
Definition	Differential diagnosis	Other motor disorders of face
Clinical features		
Investigations		
Treatment		



Approach to a case of cerebrovascular accident

Must Know	Desirable To Know	Nice To Know
Higher mental functions		
Speech and language- various types of Aphasia and dysarthria Attention and neglect	Neuro anatomical areas involved	Etiology mini mental scoring
Cranial nerves		
Testing of olfactory nerve causes of defective smell Testing of optic nerves and its pathway (Diagram)	Smell / Taste / Flavour kallman syndrome Causes of filed effects Explain A R pupils	Olfactory pathway and its peculiarity Neuro anatomy of visual cortex
Testing of 3,4,6 nerves Explain science and symptoms of nerve palsy	Pathway for Horner's syndrome	Anatomical Peculiarity of 4th nerve
Horner's syndrome	Trigeminal neurologia various nuclei of 5 th nerve in the brain stem(Diagram)	Onion peal appearance describe?
Testing for motor and sensory divisions of trigeminal nerve muscles supplied by this nerve	Ramsay Hunt syndrome Difference between bilateral LMN and UMN palsy	Anatomical peculiarity Taste buds and their locations
Testing for facial nerve causes of unilateral and bilateral palsy LMN facial palsy and BELL'S phenomena	Glossopharyngeal neuralgia afferent and efferent for gag reflex and their interpretation	
Explain its common association with hemiplegia	Anatomical peculiarities of this nerve	
Rinne's test / Weber's test / absolute bone conduction test / calorie test	Monosynaptic reflex	
testing for 9th nerve volitional reflex / gag reflex nasal twang of voice	Poly synaptic reflexes-why are there abolished in UMN lesion	
Testing for 12 th nerve, both extrinsic and intrinsic muscles of the tough	Plantar equivalents	
Motor system		

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Upper limb: bulk / tone / power / reflex testing Is there hypertonia if so is it spasticity / rigidity Reading of power of all muscles DTR reflexes: normal / sluggish / brisk / exaggerated Demonstration of biceps / supinator / triceps reflexes		
Lower limbs: - do-		
Demonstration of knee and ankle reflexes		
Clonus- significance		
Demonstrate all superficial		
reflexes		
Explain other methods of		
testing of plantar reflex		
pyramidal tract pathway		
Sensory system		
Examination of touch / pain		
/ temp./vib/ joint position /		
joint movement		
Romberg's sign		
Autonomic nervous system		
Bladder and bowel		
involvement		
Skin changes		
Cerebellar signs		
Spine and cranium		
Involuntary movements Extra pyramidal symptoms		
Fixed risk factors for stroke	Various dermatomal	Draw and avalain
TIXEU HSK IdCIOIS IOI STIOKE	patterns	Draw and explain Pronator drift?
Modifiable factors for	sympathetic and	Homunculus
stroke	parasympathetic systems	representation in motor
	paragripation oyotomo	cortex - diagram
Factors for young stroke	Neuro Anatomy of	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
, 0 11 1	cerebellum	



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Anatomy of internal	Cranio vertebral anamoly	Posterior column and
capsule		spinothalamic tract
		pathway (diagram)
Types of stroke	Pathophysiology of	
	cytotoxic edema	
signs of ICA / MCA / ACA /	Anatomy of Brain stem	Functional imaging studies
PCA occlusions		
Blood supply of internal		
capsule		
Investigations – CT & MRI	Contrast imaging studies	
Imaging		
Treatment options		

CRITICAL CARE MEDICINE

Topics	Must Know	Desirable To Know	Nice To Know
Critical		Oxygen Delivery	
Care	Oxygen Therapy	Devices	Causes of MODS
		Causes, recognition	
		and Treatment of	Hyperbarric Oxygen
	Fluid Management	ARDS	Therapy
			Interpretation of
	Type I & II Respiratory		mixed Acid Base
	Failure	Acid Base Imbalance	Imbalance
			Nutrition Therapy -
	Basic Management of		Enteral & Total
	Acute Asthma	Interpretation of ABG	Parentral
	Acute Pulmonary		Causes and
	Edema	Setting of Ventilation	Management of DIC
			Sedation and
			Analgesia in ICU
	Anaphylaxis	Modes of Ventilation	setup
		Complications of	
	Seizures	Ventilation	
		Brain Death	
	Status Epilepticus	Certification	
		Scoring system in	
		Intensive Care	
	Hepatic	(APACHE - II) & SAPS	
	Encephalopathy	- 2	
	Management of	Disaster Preparedness	
	Electrolyte Imbalances	& Management	
	Basics of Ventilation	Steps of ACLS	



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Indications for		
Mechanical Ve	ntilation Steps of Defibrillation	
	Renal replacement	
	therapy - Peritoneal	
	Dialysis &Hemo	
Ambu Bag Ve	tilation Dialysis	
Non Invassive		
Ventilation		
Steps of BLS		
Management	f GI	
Bleed		

CVS

Must Know	Desirable To Know	Nice To Know
Clinical examination of cvs	Disease of pericardium	Echocardiography
Electrocardiogram	Cardiac biomarkers	Anti –arrythmic drugs
Rheumatic heart disease	Sinoatrial node rhythms	Myocarditis
Mitral valve disease	Atrial tachy arrhythmia	Cardiomyopathy
Aortic valve disease	Supra ventricular tachy	Cardiac tumours
Infective endocarditis	Arrhythmia	Cardiac risk of non -cardiac surgery
Pulmonary valve disease	Ventricular tachy arrhythmia	
Heart failure	Etiology of Complete AV Block	
Abnormal heart sounds	Bundle Branch Block	
and murmurs		
Atherosclerosis	Myocarditis	
Hypertension	Cardiomyopathy	
Rheumatic fever	Dilated	
Tricuspid valve disease	Hypertropic	
Coronary heart disease	Restrictive	
Angina	Specific diseases of Heart	
	muscle	
Acute coronary syndrome	Infections	
	Endocrine	
	Metabolic	
	Connective tissue	
	Infiltration	
	Toxins	





CARDIOVASCULAR SYSTEM

CLINICAL EXAMINATION OF CVS

Must Know	Desirable To Know	Nice To Know
Inspection	Percussion	
Palpation		
JVP		
Pulse		
Wave form		
Arterial pulse		
Auscultation		

ECG

Must Know	Desirable To Know	Nice To Know
Rhythm strip	Sinoatrial node rhythms	
P wave	Atrial tachy arrhythmia	
PR interval	Supra ventricular tachy	
	arrhythmia	
QRS	Ventricular tachy arrhythmia	
Q waves		
ST segment		
QT interval		
ECG converters		

RHEUMATIC HEART DISEASE

Must Know	Desirable To Know	Nice To Know
Rheumatic fever		
Modified jones criteria		
Clinical features		
Diagnosis		
Management		
Prophylaxis		





ECHO

Must Know	Desirable To Know	Nice To Know
Indications	Basics of ECHO	Doppler Echo
		TEE
		Stress Echocardiography
		MRI
		CT Scan

IMAGING

Must Know	Desirable To Know	Nice To Know
	CAG	Cardiac catheterization
		Radionucleotide Imaging

CHEST PAIN

Must Know	Desirable To Know	Nice To Know
NYHA Classification of	Angina equivalent	
chest pain		
Ischaemic cardiac chest		
pain		
Non cardiac chest pain		
DD of Chest pain		
Causes for Chest pain		
Stable Angina		
ACS		

DYSPNOEA

Must Know	Desirable To Know	Nice To Know
Causes of Dysponea	Trepopnea	
Grading of Dyspnoea	Platypnea	
PND		
Orthopnea		
DD of Dyspnoea		
Causes of Dyspnoea		
Investigations		
Management		



CARDIAC FAILURE

Must Know	Desirable To Know	Nice To Know
Acute Cardiac Failure	Framingham's criteria	
Treatment		
Signs&Symptoms		
Diagnosis		
Etiology		
Chronic Cardiac Failure		Heart transplantation
Etiology		
Signs& Symptoms		
Diagnosis		
Treatment		
Mechanism of HF		Implantable Cardiac
		Defibrillation
Pathophysiology		Resynchronisation
		Therapy
Types of Heart Failure		Ventricular Assist Devices
ACE Inhibitors in HF		Coronary
		Revascularisation
ARB and HF		
Beta blockers in HF		

SYNCOPE

Must Know	Desirable To Know	Nice To Know
DD		
Cardiac syncope		
Neurocardiogenic		
Postural hypotension		
Investigations and		
Diagnosis of syncope		

PALPITATION

Must Know	Desirable To Know	Nice To Know
Definition		
Causes		
How to evaluate		
Palpitation		
Simple approach to		
Diagnosis of Palpitation		





ANTI ARRHYTHMIC DRUGS

Must Know	Desirable To Know	Nice To Know
	Classification of Anti	
	Arrhythmic Drugs	
	Uses	
	Dosage	
	Side effects	

CARDIAC ARREST

Must Know	Desirable To Know	Nice To Know
Causes of Sudden		
Cardiac Death		
Etiology of Cardiac arrest		
Algorithm to Adult Basic		
Life Support		
Management of Cardiac		
arrest		
Algorithm for Advanced		
Life Support		

CARDIAC RISK OF NON CARDIAC SURGERIES

Must Know	Desirable To Know	Nice To Know
		Cardiac risk of non cardiac
		surgeries

HEART SOUNDS AND MURMUR

Must Know	Desirable To Know	Nice To Know
1st Heart Sound		
2 nd Heart Sound		
3rd Heart Sound		
4 th Heart Sound		
Systolic Clicks		
OS		
Features of innocent		
murmur		
How to assess a murmur		
Features of common		
Systolic murmur		



RAYNAUD'S PHENOMENON

Must Know	Desirable To Know	Nice To Know
		Primary Raynaud's
		Secondary Raynaud's

DISORDERS OF HEART RATE AND RHYTHM

Must Know	Desirable To Know	Nice To Know
Pathological causes of	Etiology of AV Block	Sino Atrial Rhythm
Bradycardia&		
Tachyarrhythmia		
Atrial Fibrillation	Bundle Branch Block	Sick Sinus Syndrome
Etiology		
Signs & Symptoms		
Investigations		
Treatment		
Anti coagulation in AF	Supraventricular arrhythmia	Hemiblock
		Ventricular arrhythmia
		WPW Syndrome
		AV reentrant Tachycardia
		Causes of long QT
		Torsades de Pointes

THERAPAEUTIC PROCEDURES

Must Know	Desirable To Know	Nice To Know
	External Defibrillation	
	Cardiac Version	
		Catheter ablation
		Temporary pacemakers
		Permanent pacemakers
		International generic
		pacemaker code
		Implantable Cardiac
		Defibrillator
		Cardiac resynchronization
		therapy
		Ventricular Assist Devices
		Indications of ICD



ATHEROSCLEROSIS

Must Know	Desirable To Know	Nice To Know
Pathophysiology		
Stages of atherosclerosis		
Risk factors		
Primary prevention		
Secondary prevention		
Uses of Statins		
ACE Inhibitors		

DISEASES OF AORTA

Must Know	Desirable To Know	Nice To Know
Aortic aneurysm	Types of Aortic dissection	
Types	Debakey's classification	
Etiology	Stanford's classification	

CORONARY ARTERY DISEASE

Must Know	Desirable To Know	Nice To Know
Stable Angina	Angioplasty and intra	
	coronary stents	
Unstable Angina	CABG	
Prinzmetal Angina		
ACS		
MI		
Factors precipitating		
Angina		
Risks of Stable Angina		
Investigations		
Management		
Definition of MI		
Criteria for MI		
Clinical features		
Investigations		
Management		
Complication of ACS		
Arrhythmias in ACS		
Indications of		
Thrombolytic therapy		



PERIPHERAL ARTERIAL DISEASE

Must Know	Desirable To Know	Nice To Know
Symptoms of Limb	Percutaneous Intervention	
ischemia		
Critical limb ischemia	Surgical procedure	
Clinical features	Buerger's disease	
Medical management		
Diabetic vascular disease		

MYOCARDIUM

Must Know	Desirable To Know	Nice To Know
Acute Myocarditis	Cardiomyopathy	Arrhythmogenic RV
	muscle	cardiomyopathy
Common causes	Dilated	Peripartum
		cardiomyopathy
Clinical recognition &	Hypertrophic	
management		
	Restrictive	
	Specific diseases of Heart	
	Infections	
	Endocrine	
	Metabolic	
	Connective tissue	
	Infiltration	
	Toxins	

CARDIAC TUMORS

Must Know	Desirable To Know	Nice To Know
		Cardiac tumors

PERICARDIUM

Must Know	Desirable To Know	Nice To Know
Acute pericarditis		
Etiology		
Clinical features		
Investigations		
Management		
Pericardial effusion		



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T.B.Pericarditis	
Chronic Constrictive	
Pericarditis	
Clinical features &	
Management of	
Constrictive Pericarditis	

CONGENITAL HEART DISEASE

Must Know	Desirable To Know	Nice To Know
Cyanotic heart disease	Pregnancy and CHD	
Acyanotic CHD		

INFECTIVE ENDOCARDITIS

Must Know	Desirable To Know	Nice To Know
Pathophysiology	Indications for surgery	
IE in old age	Culture negative	
	Endocarditis	
Microbiology		
Incidence		
Clinical features		
Modified Duke's criteria		
Management		
Prevention		
Antimicrobial treatment		

HYPERTENSION

Must Know	Desirable To Know	Nice To Know
Definition	AMBP	
Secondary HTN		
Approach to New HTN		
History		
Examination		
How to measure BP		
Fundal changes		
Assessing end organ		
damage		
Malignant HTN		
Investigations		
HTN in old age		



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Stepwise approach	
Antihypertensives	
Drugs	
Indications	
Dose	
Side effects	
Hypertensive Urgencies &	
Emergencies	

DISEASES OF HEART VALVES

Must Know	Desirable To Know	Nice To Know
Mitral stenosis		
MVPS		
MR		
Aortic stenosis		
AS in old age		
AR		
Peripheral signs		
Tricuspid stenosis		
TR		
PS		
PR		

MEDICAL DISORDERS IN PREGNANCY

Must Know	Desirable To Know	Nice To Know
Anaemia	HELLP Syndrome	
ValvularHeart disease	Acute Fatty Liver of	
	pregnancy	
Hypertension	CVT	
Diabetes	DIC	
Thyroid disorders	AKI	
Urinary Infection	Postpartum psychosis	
Drugs in pregnancy		
Acute febrile illness		
Seizures		



ENDOCRINOLOGY AND METABOLISM

Must Know	Desirable To Know	Nice To Know
HYPOTHALAMUS &		
PITUITARY GLAND		
Hyoipituitarism		
Hyperprolactinemia		
Adult GH deficiency		
Acromegaly		
Disorders of AVP secretion	non functioning & Gonadotropin producing pituitary adenoma	TSH secreting adenoma
Hypo / hypernatremia	Sellar masses	Somatostatin Analogues
THYROID GLAND		
Thyrotoxicosis Etiology		
Clinical assessment		
Investigation		
Management	Thyroid disorders and pregnancy	Congenital thyroid diseases
Thyrotoxic crisis (thyroid storm)	Asymptomatic abnormal TFT- sub clinical hypothyroidism / thyrotoxicosis. Sick euthyroidism	Thyroid disorders in old age
Hypothyroidism	Factitious thyrotoxicosis	Effects of amiodarone on Thyroid
Myxoedema coma	Silent thyroiditis	
Thyroid enlargement – Diffuse goitre, Multinodular goitre, Solitary nodule & its management		
Autoimmune thyroid diseases		
Transient Thyroiditis – Subacute (De Quervains) thyroiditis		
Post partum thyroiditis		
lodine associated thyroid		
diseases		
Thyroid Neoplasia		
REPRODUCTIVE		
SYSTEM		



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Disorders of Puberty		Disorders of reproductive
		axis during childhood
Polycystic ovarian	Hormone replacement	Tanners staging
syndrome	therapy	
Turner's syndrome		Testosterone formulations
Klinefelter's syndrome		
Testicular tumours		
Infertility & contraception		
Gynaecomastia		
Hirsuitism		
Menopause		
PARATHYROID GLANDS		
Primary / secondary	Magnesium in PTH	Genetic disorders causing
hyperparathyroidism	disorders	hyperparathyroid like
		syndromes
Hypoparathyroidism /	Pseudopseudohypopara	Idiopathic Hypercalcemia
Pseudohypoparathyroidism	thyroidism	of infancy
Hypercalcemia	Malignancy related	
	hypercalcemia	
Hypocalcemia	Vitamin D related calcium	
	disorders	
Bisphosphonates	Phosphate metabolism	
Calcitonin		
ADRENAL GLANDS		
Adrenal adenoma (Conn's)	Adrenal carcinoma	Same
Cushings syndrome	Incidentaloma	Liddle's syndrome
Congenital adrenal		
hyperplasia		
Adrenal insufficiency		
Phenochromocytoma		
ENDOCINE PANCREAS		
AND GIT		
Diabetes Mellitus –	Hyperglycemia in ICU	TPN in diabetes
Diagnosis, classification,		
pathophysiology,		
management,		
complications		
Diabetes and pregnancy	Surgery and Diabetes	Lipodystrophy
DKA & HHS	Hypoglycaemic conditions	
Hypoglycaemia in diabetes		
Insulin preparations		
OHAs		



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DISORDERS AFFECTING	
MULTIPLE ENDOCRINE	
GLANDS	
Multiple endocrine	Late effects of childhood
neoplasia	cancer therapy
Autoimmune polyendocrine	
syndromes	
OTHER METABOLIC	
DISORDERS	
Obesity	
Metabolic syndrome	
Hyperlipoproteinemias	
Osteoporosis	
Porphyrias	

ENVIRONMENTAL AND NUTRITIONAL DISORDERS

Topics	Must Know	Desirable To Know	Nice To Know
Environmental and	Widot Kilow	14100	11100 10 1111011
Nutritional Factors		High altitude	
in Disease	Heat Disorders	problems	Aviation Medicine
III Discase		Mountain sickness	Air travel advice
	Hyperpyrexia		
		High altitude	Decompression
	Heat Stroke	cerebral edema	illness
			Causes and its
			impact on health
		High altitude	due to global
	Heat Exhaustion	Pulmonary edema	warming
	Hypothermia	Frost Bite	
		Effects of Radiation	
		Exposure	
			Uncommon
	Common pollutants		pollutants in
	in atmospheric air		atmospheric air and
	and its importance		its importance on
	on health		health
	Causes of Obesity		Hoditi
		Smoking apposition	
	and its impact on	Smoking cessation	
	health	- methods	

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Lifestyle		
Modifications on		
health - Role of		
Exercise, Diet,		
Yoga, Meditation,		
etc.,		
,		
Prescribing diet in		
various clinical		
situations		
Anaemia		
Liver cell failure		
CKD		Total Parentral
Cardiac failure		Nutrition and its
Geriatric Patients	Diet in ICU patients	complications
Deficiencies of	1	
Vitamins A, D, E, K,		
B1, B2, B3, B6,		
B12, and C, its		Pesticides and
clinical and		
		Heavy Metals in
laboratory		food substances -
recognition,		its importance and
treatment including	Enteral tube	creating public
prevention	feeding	awareness
	Deficiency	
	disorders of Micro	
	Nutrients like Zinc,	
	selenium, Fluride,	
Deficiency	Sodium,	
disorders of Micro	Potassium,	
Nutrients - Iron,	Magnesium,	
Iodine, Calcium and	Copper,	
Phosphorus its	Manganese, etc.,	
clinical and	its clinical and	
laboratory	laboratory	
recognition,	recognition,	
treatment including	treatment including	
prevention	prevention	

GASTRO INTESTINAL SYSTEM

ACHALASIA CARDIA

Must Know	Desirable To Know	Nice To Know
Etiology	Imaging findings	Complications
Clinical features	Surgical treatment	
Investigations		
Treatment		

GERD

Must Know	Desirable To Know	Nice To Know
Pathophysiology	Complications	
Clinical features	Differential diagnosis	
Investigations		
Treatment		

PEPTIC ULCER DISEASE

Must Know	Desirable To Know	Nice To Know
Pathophysiology	Differential diagnosis	
Role of H.Pylori	Tests to detect H.Pylori	
Clinical features &	Surgical treatment	
Complications		
Treatment		

ZOLLINGER ELLISON SYNDROME

Must Know	Desirable To Know	Nice To Know
Pathophysiology	Complications	
Distribution of the tumor		
Clinical features		
Treatment		

GASTRITIS

Must Know	Desirable To Know	Nice To Know
Types / Classification	Etiology	
Treatment	Histopathology	





CELIAC DISEASE

Must Know	Desirable To Know	Nice To Know
Etiology	Histopathology	
Diagnosis		
Treatment		

TROPICAL SPRUE

Must Know	Desirable To Know	Nice To Know
Etiology	Histopathology	
Diagnosis		
Treatment		

WHIPPLE'S DISEASE

Must Know	Desirable To Know	Nice To Know
Etiology	Histopathology	
Clinical features		
Diagnosis		
Treatment		

INFLAMMATORY BOWEL DISEASE

Must Know	Desirable To Know	Nice To Know
Etiology	Risk factors	Differential diagnosis
Pathogenesis	Pathology	Extra intestinal
Clinical features	Complications	Manifestation
Diagnosis		Surgical interventions
Treatment		

IRRITABLE BOWEL SYNDROME

Must Know	Desirable To Know	Nice To Know
Diagnostic criteria	Pathophysiology	
Types	Approach	
Treatment	Newer drugs	



APPROACH TO A PATIENT WITH LIVER DISEASE

Must Know	Desirable To Know	Nice To Know
Evaluation of abnormal	Hyperbilirubinemias	
Liver Function Test		
Child Pugh Classification		
MELD		
PELD		

VIRAL HEPATITIS

Must Know	Desirable To Know	Nice To Know
Hepatitis A,B,C,D,E	Genetics and	
	pathophysiology	
Pathophysiology	Natural course	
Acute hepatitis	Serology	
Chronic hepatitis	Complications	
Treatment	Newer drug	

TOXIC / DRUG INDUCED HEPATITIS:

Must Know	Desirable To Know	Nice To Know
Paracetamol toxicity	Evaluation of the pattern	
	of liver injury	
Drug induced liver injury		

AUTOIMMUNE HEPATITIS:

Must Know	Desirable To Know	Nice To Know
Pathogenesis	Differential diagnosis	
Diagnostic criteria		
Treatment		

ALCOHOLIC LIVER DISEASE

Must Know	Desirable To Know	Nice To Know
Alcoholic hepatitis	Prognostication	
Diagnosis		
Treatment		



NON-ALCOHOLIC FATTY LIVER DISEASE / NON-ALCOHOLIC **STEATOHEPATITIS**

Must Know	Desirable To Know	Nice To Know
Etiopathogenesis	Etiological factors	
Diagnosis	Fibrosis assessment	
Treatment		

CIRRHOSIS AND ITS COMPLICATIONS

Must Know	Desirable To Know	Nice To Know
Alcoholic cirrhosis	Grading of fibrosis	
Cirrhosis due to viral	Cardiac cirrhosis	
hepatitis		
Cirrhosis due to Auto	Wilson's disease	
Immune Hepatitis and		
NAFLD		
Biliary Cirrhosis	Hemochromatosis	
Primary Biliary Cirrhosis	Cystic Fibrosis	
Primary Sclerosing		
Cholangitis		
Other types of Cirrhosis		

COMPLICATIONS OF CIRRHOSIS

Must Know	Desirable To Know	Nice To Know
Portal hypertension	Portal hepatic wedge	
	pressure	
Varicealhemorrhage	Endoscopic grading of	
	varices	
Splenomegaly		
Hypersplenism		
Ascites		
Spontaneous Bacterial		
Peritonitis		
Hepatic encephalopathy		

LIVER TRANSPLANTATION

Must Know	Desirable To Know	Nice To Know
Indications	Techniques Immuno-	
Contra indications	suppressive therapy	

DISEASES OF GALL BLADDER AND BILE DUCT

Must Know	Desirable To Know	Nice To Know
Gall stones	Complications	
Types	Medical and surgical	
	management	
Treatment		
Cholecystitis		
Acute		
Chronic		

PANCREAS:

Must Know	Desirable To Know	Nice To Know
Acute Pancreatitis	ERCP	
Causes	Nutritional Support	
Clinical Features		
Complications		
Investigations		
Management		
Chronic Pancreatitis		
Causes		
Clinical Features		
Investigations		
Management		

HEMATOLOGY

IRON DEFICIENCY ANEMIA

Must Know	Desirable To Know	Nice To Know
WHO Criteria	Parenteral iron therapy	Nutritional support
Etiology	Erythropoietin	
Clinical features	Anaemia in old age	
Peripheral Smear &	Anaemia of chronic	
investigations including	disease	
iron studies		
Treatment		

MEGALOBLASTIC ANEMIA

Must Know	Desirable To Know	Nice To Know
Etiology	Peripheral smear	Perinicious anemia
Clinical features		
Investigations		
Treatment		

SICKLE CELL ANEMIA

Must Know	Desirable To Know	Nice To Know
Etiology	Sickle cell crisis	Treatment
Clinical features	Diagnosis	Screening

HAEMOGLOPINOPATHIES

Must Know	Desirable To Know	Nice To Know
THALASSEMIA -TYPES	Diagnosis	Treatment
Etiology	Thalassemia syndromes	Bone marrow transplant
Clinical features		

HEMOLYTICANEMIA

Must Know	Desirable To Know	Nice To Know
Causes / Classification	Inherited	G6PD Deficiency
Clinical features	Acquired	Paroxysmal nocturnal
		Hemoglobinuria
		Treatment

APLASTIC ANEMIA

Must Know	Desirable To Know	Nice To Know
Etiology	Peripheral smear	Treatment
Clinical features	Bone marrow picture	

LEUKEMIA

Must Know	Desirable To Know	Nice To Know
Etiology	Treatment	MDS
Clinical features	IMATINIB	Polycythemiarubravera
Acute and chronic	Newer protein kinase	Myelofibrosis
leukemias	inhibitors	
Philadelphia chromosome	Leukemoid reactions	
Peripheral smear		
Bone marrow picture		
Classification		
Blast crisis		

LYMPHOMAS

Must Know	Desirable To Know	Nice To Know
Etiology	Peripheral smear	Treatment
Classification & Clinical	Bone marrow picture	CHOP REGIMEN
features		
Hodgkins lymphoma		ABVD REGIMEN
Non hodgkins lymphoma		
Prognostic features		

BLEEDING DISORDERS:

Must Know	Desirable To Know	Nice To Know
Thrombocytopenia causes	Platelet functional disorder	

COAGULATION DISORDERS:

Must Know	Desirable To Know	Nice To Know
Causes of coagulopathy	Genetics	Severity of hemophilia and
		ISTH criteria
Hemophilia A&B	Antithrombin deficiency	TTP
Clinical Features &	Protein C & S deficiency	
Management		
Thrombotic Disorders	APLS	
Types		
DIC		



TRANSFUSION MEDICINE:

Must Know	Desirable To Know	Nice To Know
Indications & contraindications of transfusion of whole blood, packed cells, platelets, FFP, cryoprecipitate	Cell separators	Bone marrow transplant
Screening test for blood transfusion	Storage of blood	HLA typing
Early recognition & management of transfusion reactions	Single donor platelet transfusion	
	Stem cell therapy	

CKD

Must Know	Desirable To Know	Nice To Know
Definition & Causes		
Stages of CKD		
Investigations In CKD		
Systemic Manifestations of		
CKD		
Fluid & Electrolyte		
Disturbance		
Endocrine Disturbance		
Neuromuscular		
Disturbance		
CVS & Pulmonary		
Disturbance		
Hematological, GI,		
Dermatological		
Disturbance		
Treatment		

NEPHRITIS

Must Know	Desirable To Know	Nice To Know
I.Lupus Nephritis		
1. Clinical Manifestation	Alports Syndrome	Anca Small Vessel
		Vasculitis
2.Classification	Anti-Gbm- Goodpasteurs	Glomerular Deposition
	Syndrome	Diseases
		-Light Chain
		-Renal Amyloidosis
3.Treatment		Fabrys
II.IgA NEPHROPATHY		Microscopic Polyangitis
III.Membranoproliferative		Chrug Strauss Syndrome
Glomerulonephritis		
IV.Mesangioproliferative		
Glomerulonephritis		
V.Nephrotic Syndrome		
-Minimal Change		
Disease		
-FSGS		
VI.Membraneous		
Glomerulonephritis		
VII.Diabetic Nephropathy		

RENAL TRANSPLANTATION

Must Know	Desirable To Know	Nice To Know
Benefits & Outcomes	Perioperative Problems of	Basic Transplant
	Renal Transplantation	Immunology
Indications &	Complications Of	Preoperative Workup
Contraindications	Immunosupressive	
	Therapy	
Immunosupresive Therapy		Treatment of Acute
		Rejection

RENAL REPLACEMENT THERAPY

Must Know	Desirable To Know	Nice To Know
Indications	Preparing For RRT	



Hemodialysis	Complications & Problems	
Peritoneal Dialysis	CAPD	
Hemofiltration		

GLOMERULAR DISEASES

Must Know	Desirable To Know	Nice To Know
Causes & Types of AGN	Histopathology & Causes of	FSGS
	Membraneous Nephropathy	
Urine Examination In	Goodpasture Syndrome	RPGN
Glomerulonephritis		
Clinical Features,	Alports Syndrome	Anca Small Vessel
Investigations & Management		Vasculitis
of Minimal Change		
Nephropathies		
Lupus Nephritis-Stages,	Clinical Features,	
Pathology, Serological	Investigation & Management	
Markers	of HSP	
IgA Nephropathy – Clinical		
Features		
Causes And Types of		
Crescentic		
Glomerulonephritis / RPGN		
PSGN-Clinical Features &		
Investigations		

INFECTIONS OF THE URINARY TRACT

Must Know	Desirable To Know	Nice To Know
Pathophysiology	Antibotic Regimen	Catheter Related
		Bacteruria
Spectrum of Presentation	Prophyllactic Measures in	
	Recurrent UTI	
Risk Factors	Persistent or Recurrent UTI	
Clinical Features	Asymptomatic Bacteruria	
DD		
Investigations		
Management		

ACUTE PYELONEPHRITIS

Must Know	Desirable To Know	Nice To Know
Triad	Tuberculosis of Kidney	Sterile Pyuria
Bacterial Profile	Investigations	Role of Surgery
Predisposing Factors		
Complications		
Xanthogranulomatous		
Pyelonephritis		
Investigation		
Management		

HEMATURIA

Must Know	Desirable To Know	Nice To Know
Causes	Interpretation of Dipstick	Dipstick Negative Dark
	Positive Hematuria	Urine Causes
Investigations of Hematuria		
Nephritic Syndrome		

RENAL STONE DISEASE

Must Know	Desirable To Know	Nice To Know
Composition	Investigation For Recurrent	ESWL
	Stone	
Predisposing Factors	Measures To Prevent	
	Calcium Stone Formation	
Clinical Features	Indications For Intervention	
	To Remove Stones	
Investigations		
Management		

ACUTE KIDNEY INJURY

Must Know	Desirable To Know	Nice To Know
Classification	Criteria For AKI-KDIGO,	AKI on Old Age
	Rifle	



Causes of Each	Clinical Features & Investigations of Specific Cases of AKI	Biochemical markers in AKI
Clinical Features of Each Form	Vascular Occlusion	Complications of RRT
Investigation of Patients With Established AKI	Malignent HTN	
Management Options To All Forms of AKI	Scleroderma	
Hemodynamic Status	Systemic Inflammatory Disease	
Cardiopulmonary Complications	Glomerular Disease	
Electrolyte Disturbance	Interstitial Nephritis	
Diet	Myeloma	
Drug	Infections	
Infections	Renal Replacement Therapy	
Recovery From AKI	AKI in Hemodynamically Stable Non Septic Pts	
	UTI Drugs &Toxins	
	Autoimmune DIS	
	Acute Interstitial Nephritis	

RENOVASCULAR & MISCELLEANEOUS DISEASES:

Must Know	Desirable To Know	Nice To Know
Renal Artery Stenosis		
HUS		
ADPKD		
Drug Induced Renal Disease		

POISONING

	Must Know	Desirable To	Nice To Know
TOPICS		Know	
	General Approach		
	to Poisoning		
Toxicology	History Taking		
	Clinical		
	Examination -		
	Syndromic		
	Approach		



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	Decontamination		
	Investigation		
	Management		
	Complications		
	Complications		
	Pesticides - OPC	Crane killer	Substance Abuse
	Carbamate		
	Organochlorine		
	Pyrethroid		
	Rat Killer	Paraquat	Coccaine
	Oleander	Oduvanthalai	Ganja
	Paracetamol	KodaliKizhangu	Hans
	Phenytoin	Cow Dung Powder	Cyanide
	Phenobarbitone	TCA drugs	Lead
	Diazepam	SSRI Drugs	Mercury
Common Poisons	Acids & Corrosives	Betablocker	Cartrap
	Camphor	Iron Tablets	Abruesprecataries
		Calcium Channel	
	Kerosene	blocker	Datura
		Aluminium	
	Food Poisoning	phosphide	
		Zincphosphide	
		CO poison	
		Cuso4	
		Hair Dye	
		Opioids	
	Coma	Methonal poison	
	Seizures		
	Altered sensorium		
Alcohol	Gl Bleed		
Intoxication	Abdominal Pain		
	Withdrawal state		
Bites & Stings		Recognition of	
		various poisonous	
	Snake Bite	snakes	
	History taking		
	Clinical Features		
	WBCT		
	Monitoring		
	Symptoms & Signs		
	Treatment		
	. roadilont		



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	Complications		
	Preventive Aspects		
	Do's & Don'ts		
	Scorpion Sting	Other Bites	
	History taking		
	Clinical Features		
	Monitoring		
	Symptoms & Signs		
	Treatment		
	Complications		
	Preventive Aspects		
	Do's & Don'ts		
	Bees & Wasp Sting		
	History taking		
	Clinical Features		
	Monitoring		
	Symptoms & Signs Treatment		
	Complications		
	Preventive Aspects		
	Do's & Don'ts		
	Animal Bite		
	Management		
	First Aid		
	ARV &		
	Immunoglobulin		
	Indications,		
	Schedule and		
	advising patients on		
	the importance of		
	immunization		
	Pre exposure		
	prophylaxis		
	History taking		
	Clinical Features		
Hanging,	Monitoring		
Drowning,	Symptoms & Signs		
Electrocution	Treatment		
	Complications		
	Preventive Aspects		
	Do's & Don'ts		

PSYCHIATRY

Must Know	Desirable To Know	Nice To Know
Schizophrenia- distorted thinking and perception, thought echo, thought insertion, thought broadcasting.	Types of schizophrenia	Repetitive magnetic transcranial stimulations – new treatment for depression.
ICD 10 classification of psychiatric illness.	Types of personality disorders	Identification and characterization of enzymes responsible for clearing beta amyloid from amyloid precursor protein – rational treatments for alzhemier's disease
Classification of psychotrophic drugs	Sexual perversions	Landau kleffner syndrome, syndromes associated with psychiatric illness
Bipolar disorders	Post traumatic stress disorder	
Anxiety	Dissociations – dissociative fugue, dissociative stupor	
Somatoform disorders – somatization, hypochondriasis		
Personality disorders		
Eating disorders – anorexia nervosa, bulimia nervosa		

RESPIRATORY SYSTEM

OBSTRUCTIVE PULMONARY DISEASES

BRONCHIAL ASTHMA



Definition	Stepwise approach	Asthma in pregnancy
Pathophysiology	Metered dose inhaler-use	Assisted ventilation - indications
Clinical features		
Diagnosis		
Management		
Acute Severe Asthma		

CHRONIC OBSTRUCTIVE PULMONARY DISEASE

Must know	Desirable to know	Nice to know
Definition	Modified MRC dyspnoea	Long term O2 therapy
	scale	
Aetiology	Classification of COPD	BODE index
	based on spirometry	
Risk Factors &	Smoking cessation and	
Pathophysiology	COPD	
Clinical features	Non invasive ventilation in COPD exacerbations	Surgical interventions
Investigations		
Management		
Acute exacerbations		
Complications		

BRONCHIECTASIS

Must know	Desirable to know	Nice to know
Definition	Types of bronchiectasis	
Causes		
Pathology		
Symptoms		
Investigations		
Management		
Complications		

CYSTIC FIBROSIS (CF)

Must know	Desirable to know	Nice to know
Genetics	Treatments that reduce exacerbations	CF in adolescence
Pathogenesis	Investigations	
Clinical features		
Management		
Complications		

PNEUMONIA

Must know	Desirable to know	Nice to know
TYPES- Community acquired & Hospital acquired	Antibiotic treatment for Community acquired pneumonia	Differential diagnosis
Definition	CURB 65	Ventilator associated pneumonia (VAP)
Pathology	Predisposing factors for Hospital acquired pneumonia	Indications for referral
Clinical features	Aspiration pneumonia	Pneumonia in immune- compromised patient
Investigations	Vaccines and Pneumonia	
Management		
Complications		

TUBERCULOSIS

Must know	Desirable to know	Nice to know
Definition	Multi drug resistant TB	
Organism	XDR TB	



Pathophysiology	Cryptic TB	
Clinical features	Opportunistic mycobacterial infections	
Extra pulmonary disease	HIV with TB	
Diagnosis of TB	Non DOTS regimen	
Management- Drugs	Cause of drug resistance	
Complications	External markers of TB	
Risk factors		
Associated diseases		
Natural History of TB		
RNTCP		
Skin testing in TB		
Dosage &Side effects of drugs		

ASPERGILLOSIS

Must know	Desirable to know	Nice to know
About organism	Criteria for diagnosis of	Risk factors for invasive
	invasive aspergillosis	aspergillosis
Classification	Aspergilloma	Chronic and subacute
		pulmonary aspergillosis
Symptoms	X ray findings	
Investigations		
Management		
Complications		

BRONCHIAL CARCINOMA

Must know	Desirable to know	Nice to know
Definition	Non metastatic extra	Radiological presentations
	pulmonary manifestations	



Aetiology	Tumour staging
Types	Chemotherapeutic drugs
Clinical features	Secondary lung tumours
Investigations	Solitary pulmonary nodule
Management	

DIFFUSE PARENCHYMAL LUNG DISEASE

Must know	Desirable to know	Nice to know
Definition	Differential diagnosis	
Common features	Each type in detail	
Classification & types	Sarcoidosis	
Symptoms		
Investigations		
Management		

PNEUMOCONIOSIS

Must know	Desirable to know	Nice to know
Definition	Other Lung diseases	
	caused by Inorganic dust	
Types	Prevention	
Symptoms		
Investigations		
Management		

ASBESTOS RELATED LUNG DISEASES

Must know	Desirable to know	Nice to know
Types of asbestos	Asbestosis	Mesothelioma
Disease types		
Investigations of each		
Management		

HYPERSENSITIVITY PNEUMONITIS (HP)

Must know	Desirable to know	Nice to know
Definition	Agents causing HP	Humidifier fever
TYPES		
Clinical features		
Diagnosis		
Management		

PULMONARY HYPERTENSION

Must know	Desirable to know	Nice to know
Definition	Radiological findings	Sildenafil
Classification		Newer drugs -Bosentan
Clinical features		
Investigations		
Management		



SYSTEMIC LUPUS ERYTHEMATOSIS (SLE)

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	
Pathogenesis	ACR Criteria	Experimental Therapies
Clinical Features	Auto Antibodies in SLE	Preventive Therapies
Investigation	Drug induced lupus	
Complications	Lupus Nephritis	
Treatment		

SYSTEMIC SCLEROSIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Scleroderma Renal Crisis
Pathogenesis	Auto Antibodies in Systemic Sclerosis	Localized Scleroderma
Clinical Features	Difference between limited versus diffuse types	
Investigation		
Complications		
Treatment		

MIXED CONNECTIVE TISSUE DISEASE (MCTD)

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Experimental Therapies
Pathogenesis	Auto Antibodies in (MCTD)	
Clinical Features		
Investigation		
Complications		
Treatment		



IDIOPATHIC INFLAMMATORY MYOPATHIES

POLYMYOSITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Overlap syndromes
Pathogenesis	Auto Antibodies in Polymyositis	
Clinical Features		
Investigation		
Complications		
Treatment		

DERMATOMYOSITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Overlap syndromes
Pathogenesis	Auto Antibodies in Dermatomyositis	
Clinical Features	Associated Malignancy	
Investigation		
Treatment		

INCLUSION BODY MYOSITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Overlap syndromes
Pathogenesis	Auto Antibodies in Inclusion Body Myositis	
Clinical Features		
Investigation		
Treatment		



SJOGREN'S SYNDROME

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Differential Diagnosis for SICCA Symptoms
Pathogenesis	Auto Antibodies in Sjogren'sSyndrome	
Clinical Features	Secondary Sjogren'sSyndrome	
Investigation		
Treatment		

RHEUMATIOD ARTHRITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Definition of Remission in RA
Pathogenesis		
Criteria for RA&Clinical	Biological DMARDS	
Features		
Investigation	Felty's Syndrome	
Treatment		

ANTIPHOSPHOLIPID SYNDROME (APLA)

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	
Pathogenesis	Classification of Antiphospholipid Antibodies	
Clinical Features		
Investigation		
Treatment		



ANKYLOSING SPONDYLITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Seronegative spondarthitides
Pathogenesis	ASAS Criteria for Ankylosing Spondylitis	
Clinical Features		
Investigation		
Treatment		

REACTIVE ARTHRITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	Reiter's Disease
Pathogenesis	Triggering Infection of Reactive Arthritis	
Clinical Features		
Investigation		
Treatment		

PSORIATIC ARTHRITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	
Pathogenesis	CASPAR criteria	
Clinical Features		
Investigation		
Treatment		



SYSTEMIC VASCULITIS

Must Know	Desirable to Know	Nice to Know
Types of Vasculitis	Differential Diagnosis	Secondary Vasculitis
Pathogenesis	Autoantibodies in Vasculitis	
Clinical Features		
Investigation		
Treatment		

BEHCET'S SYNDROME

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	
Pathogenesis	Criteria of Behcet's	
	Syndrome	
Clinical Features		
Investigation		
Treatment		

RELAPSING POLYCHONDRITIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	
Pathogenesis	Disorders Associated with Relapsing Polychondritis	
Clinical Features		
Investigation		
Treatment		





SARCOIDOSIS

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	
Pathogenesis	Gallium 67 Scan	
Clinical Features		
Investigation		
Treatment		

FIBROMYALGIA

Must Know	Desirable to Know	Nice to Know
Aetiology	Differential Diagnosis	
Pathogenesis	Major tender sites in Fibromyalgia	
Clinical Features		
Investigation		
Treatment		

TROPICAL MEDICINE

		DESIRABLE TO	
TOPICS	MUST KNOW	KNOW	NICE TO KNOW
Infectious Disease	Bacterial	Viral	Viral
Clinical Features,			
Lab Diagnosis,			
Treatment,			
Complications			
and Preventive			
Aspects	Typhoid	PARO virus	Ebola
		Infectious	
	Cholera	Mononucleosis	Hanta
			Congo
	Leptospirosis	EBV	Haemorrhagic
	Diptheria	CMV	Yellow Fever
		Hand, foot and	
	Streptococcal	mouth disease	Zika



	Staphylococcal	Bacterial	Bacterial
	Gonococcal	Plague	Brucellosis
	Tuberculosis	Lyme Disease	Meliodosis
	Leprosy	Parasite	Syphilis
	Tetanus	Kalaazar	Anthrax
	Viral	Toxoplasmosis	Fungal
	Dengue	Fungal	Histoplasmosis
	Chickengunia	Aspergillus	Parasite
	Measles	Actiomyces	Sleeping sickness
	Mumps	Rickettsial	Liver Fluke
		Louse borne R.	
	Rubella	Fever	
	Chickenpox	Tick borne R. Fever	
	H1N1		
	Rabies		
	J.E.		
	H.S.V.		
	Hepatitis A		
	Hepatitis B		
	Hepatitis C		
	Rota virus		
	HIV		
	Fungal		
	Candiadiasis		
	Parasites		
	Malaria		
	Pinworm		
	Roundworm		
	Tapeworm		
	Hookworm		
	Filariasis		
	Rickettsial		
	Scrubtyphus		
Hospital Acquired			
Infections	Definition		
	Causes		
	Clinical Features		
	Complications		
	Prevention		
	Sepsis	SIRS	
	Definition	MODS	
	Causes		

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	Diagnostic Criteria		
	Clinical Features		
	Complications		
	Prevention		
	Dose, frequency,		
	important side	Drug interaction,	
Rational use of	effects of common	adjusting dosage in	
Antibiotics	antibiotics	renal & Liver failure	

6. PRACTICAL SYLLABUS

INTRODUCTORY BATCH

- 1. History of Medicine
- 2. Introduction and History Taking
- 3. Symptomatology- Chest pain
- 4. Breathlessness
- 5. Palpitation & Syncope
- 6. Edema
- 7. Cough
- 8. Haemoptysis
- 9. Alteration in the level of consciousness
- 10. Dizziness and vertigo
- 11. Headache
- 12. Seizures
- 13. Visual Disturbances
- 14. Weakness and Paralysis
- 15. Unsteady Gait
- 16. Speech Disturbances
- 17. Sensory Disturbances
- 18. Memory loss
- 19. Abdominal pain
- 20. Vomiting
- 21. GI Bleed
- 22. Diarrhoea & Constipation

- 23. Abdominal distension
- 24. Jaundice

PREFINAL BATCH

- 1. General Examination
- 2. Examination of all systems with focus on elicitation of signs and correlation with basic sciences
- 3. Examination of CVS- Valvular Heart Disease, Hypertensive Heart Disease, Congenital Heart Disease
- 4. Examination of RS- COPD, Pleural disorders, Parenchymal disorders
- 5. Examination of Abdomen- DCLD, Hepatosplenomegaly, Ascites
- 6. Examination of CNS- CVA, Parkinsonism, Movement disorders, Neuropathies, Seizure disorders

FINAL YEAR BATCH

Examination of all cases with focus on Diagnosis including Differential Diagnosis, Investigations and Management

Thyroid disorders, Complications of Diabetes, Acute Febrile Illness, COPD, Seizures, Hypertension, Coronary Artery Disease, Obesity, Alcohol related disorders

7. REFERENCE LEARNING (BOOKS)

CLINICAL BOOKS

- 1. Hutchison's Clinical Methods
- 2. Macleod's Clinical Examination

TEXTBOOKS OF MEDICINE

- 1. Davidson's Principles and Practice of Medicine
- 2. Kumar & Clark's Clinical Medicine
- 3. Harrisons Principles of Internal Medicine
- 4. API Textbook of Medicine
- 5. Washington's Manual of Medical Therapeutics
- 6. The Oxford Textbook of Medicine



8. THEORY EXAMINATION

S.No	Question Type	Marks	Total
	General Medicine Paper		
1	Essay	2 x 10 marks	20
2	Brief Answers	6 X 5 marks	30
3	Short Notes	5 x 2 marks	10
	Total		60
General Medicine Paper II (including Psychiatry, Dermatology and S.T.D.) (Shall contain one question on basic sciences and allied subjects)			ıbjects)
1	Essay	2 x 10 marks	20
2	Brief Answers	6 X 5 marks	30
3	Short Notes	5 x 2 marks	10
	Total		60

MEDICINE: PRACTICAL EXAMINATION

Exam. Category	No. of Cases	Time allotted	Marks
1. Long Case	1 x 40 marks	45 min	40
2. Short Cases	2 x 15 marks	30 min	30
3. Spotters	2 x 5 marks	10 min	10
4. OSCE	5 x 4 marks	20 min	20
		Total	100
5. Viva ((Orals) Interpreta	tion of X ray, ECG et	C.	20
6. Internal Assessment	:	Theory	30
		Practical	20
		Record / Log Book	10
		Total	60

PRACTICAL EXAMINATION- SUGGESTED SCHEME INCLUDING MARK ALLOTMENT

LONG CASE- 40 MARKS

Case writing - 5 marks

History taking - 5 marks

Clinical signs demo - 10 marks

Diagnosis - 5 marks

• Discussion - 5 marks

• Management - 5 marks

Recent Advances - 5 marks

OBJECTIVE CASES- TESTING OF CLINICAL SKILLS -1

- RHD
- Pleural Effusion
- DCLD
- Hepatosplenomegaly
- Bronchiectasis
- TB Cavity
- Pneumonia, Bronchial Asthma, COPD
- Bells palsy

OBJECTIVE CASES- HISTORY TAKING-2

- Hypertension
- Diabetes
- CAD
- Obesity
- Fever
- Nutritional disorders
- Jaundice
- Clubbing
- Cyanosis
- CKD
- Anemia
- Seizures

OBJECTIVE CASE- DECISION MAKING- 3

Students shall examine the case and later there shall be a discussion based on the available lab/X-ray/ ECG etc data

- Blood smear- Malaria, Anemia, Leukaemia
- Chest X ray- TB, Cardiomegaly, Pneumonia, Pleural Effusion, Fibrosis
- Hypo / Hyperthyroidism
- CSF Studies
- Liver Function Tests
- Tinea/Dermatitis/ Scabies/ Herpes/ Lepsrosy/ Filariasis
- ECG- CAD

OBJECTIVE CASE-COMMUNICATION SKILL-4

- Breaking Bad news
- Discharge advice
- Poisoning Counselling
- Adverse drug reactions
- HIV counselling
- DIL patient counselling
- Cancer

GENERAL MEDICINE-FULL EXAMINATION MARKING

Theory	120
Practical	100
Viva	20
Internal Assessment	60
Total	300

10.VIVA

Viva/oral includes evaluation of management approach and handling of emergencies. Candidate's skill in interpretation of common investigative data, x-rays, identification of specimens, ECG, Instruments, etc. also is to be evaluated.

11. FORMATIVE ASSESSMENT- See Internal Assessment Below

12. INTERNAL ASSESSMENT:

To be submitted online at the end of Second MBBS, Third MBBS- Part I and Third MBBS- Part II. The average of these three marks shall be computed and shall be the Final Internal Assessment mark for the Final MBBS part II University Examination

- (i) It shall be based on day to day assessment (see note), evaluation of student assignment, preparation for seminar, clinical case presentation etc.
- (ii) Regular periodical examinations shall be conducted throughout the course. The questions of number of examinations is left to the institution.
- (iii) Day to day records should be given importance during internal assessment.
- (iv) Weightage for the internal assessment shall be 20% of the total marks in each subject.

Note

Internal assessment shall relate to different ways in which students participation in learning process during semesters is evaluated.

Some examples are as follows:

- (i) Preparation of subject for students seminar.
- (ii) Preparation of a clinical case for discussion.
- (iii) Clinical case study/problem solving exercise.
- (iv) Participation in Project for health care in the community (planning stage to evaluation).
- (v) Proficiency in carrying out a practical or a skill in small research project.
- (vi) Multiple choice questions (MCQ) test after completion of a system/teaching.

Each item tested shall be objectively assessed and recorded. Some of the items