| | | |
|---|---|---|
| | University VIVA | : 10 Marks |
| | Internal assessment | : 10 marks |
| | Total | : 60 Marks |
| **Practical** | University | : 30 Marks |
| | Internal assessment | : 10 marks |
| | Total | : 40 Marks |
| **Grand total** | | **: 100 Marks** |

# MEDICINE AND ITS ALLIED SPECIALITIES

**MEDICINE**

**A. GOAL**

The broad goal of teaching of undergraduate students Medicine is to have the knowledge, skills and behavioural attributes to function effectively as the first contact physician/ family doctor.

**B. OBJECTIVES (1)**

**Knowledge**

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

a. Diagnose common clinical disorders with special reference to infectious diseases, nutritional disorders, tropical and environmental diseases;

b. Outline various modes of management including drug therapeutics especially dosage, side effects, toxicity, interaction, indications and contraindications:

c. Propose diagnostic and investigative procedures and ability to interpret;

d. Provide first level management of acute emergencies promptly and efficiently and decide the timing and level of referral of required.;

e. Recognize geriatric disorders and their management

f. Approach to terminal phase, end of life care, bereavement

g. Current Laws relevant to end of life care decisions – withholding, withdrawing artificial life interventions

**2. Skills**

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

a. Develop clinical skills (history taking, clinical examination and other instruments of examination) in various common medical disorders and emergencies.

b. Refer a patient to secondary and/or tertiary level of health care after having instituted primary care.

c. Perform& interpret simple routine investigation like hemogram, stool, urine, sputum and biological examinations



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d. Assist the common bed-side investigate procedures like pleural tap, lumbar puncture, bone marrow aspiration/biopsy and liver biopsy.

e. Learn to Commuicate with patients regarding common Medical problems, investigations and treatment .

f. Learn to address Common ethical issues in medical ward and OPD .

g. * Student should be aware of the rights of the patient, issues like autonomy, consent etc

- Integrated Care for chronic diseases– Assess, advice, agree, arrange, assist
- Principles of managing symptoms of advanced progressive diseases
- Palliative Care for advanced cardiac failure, renal failure
- Palliative Care for breathlessness, Nausea/Vomiting, Delirium

Palliative care for neurological disorders

**3. Integration**

a. 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:

b. With other relevant academic input which provide scientific basis of clinical medicine eg: anatomy, physiology, biochemistry, microbiology, pathology and pharmacology.

C. DETAILED SYLLABUS

DETAILS OF THE COURSE

| | |
|---|---|
| Duration of the course | :5 semesters – III, V, VI, VIII & IX |
| Total number of theory | : 300 |
| Lectures | : 100 |

| | |
|---|---|
| Innovative sessions | : 200 |
| Practicals | : Clinical posting as per schedule attached |
| (Project work, Seminars, Structured | Integrated teaching, Formative evaluation, Revision) |

**LECTURES**

1. Molecular and Genetic factors in disease





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a. Basics of cell and molecular biology; DNA,RNA, Genes, mitochondria, cell membrane, receptors; protein production and degradation
b. Cell division, cell death
c. Patterns of inheritance and common disorders, investigations, counseling
d. Stem cell therapy, gene therapy, new horizons

**Exercises : Eg.The cell ; a family tree for various common inherited diseases**

2. Nutrition and nutritional disorders
   a. Macronutrients, dietary recommendations
   b. Micronutrients-vitamins, minerals, deficiencies & excess
   c. Energy balance- body fat distribution, regulation, needs, responses to over nutrition and under nutrition, assessment of nutritional status
   d. Assessment & Management of Obesity & under nutrition
   e. Nutritional support in hospital, in pregnancy & lactation

   **Exercises:** eg **western vs Indian (also different parts of India) meals ; role of fiber in diet**
3. Environmental and Occupational problems
   a. Environmental effects on health, alcohol, smoking, air pollution, radiation hazards, Temperature regulation and extremes of temperature, high altitude, under water, problems of air travel, epidemics- Triage & Resuscitation
   b. Hanging, drowning, electrical injuries; lightning injury
   c. Fluorosis
   d. Food hygiene and poisoning

   **Exercises: eg how to plan an epidemiological study; Minamata disease, others**
4. Poisoning
   a. Evaluation of a patient with suspected poisoning,
   b. Sedatives, antidepressants, antipsychotics;
   c. insecticides, pesticides, rodenticides- organophosphorus, organochlorides, Rat poison, Paraquat
   d. Odollum
   e. Acid & alkali, Ethyl & Methyl alcohol
   f. Bites of venomous animals, including snakes, spiders, scorpion, wasps
   g. Evaluation of a patient with suspected envenomation, general principles of management

   **Exercises: Eg, Common poisons in the region, presentations, management; Composition of common Tablets/ capsules/ household remedies/ chemicals around the house and workplace- with measures to eliminate the poison**
5. Immunological factors
   a. Anatomy, physiology of the immune system; B & T lymphocytes, immunoglobulin, immune reaction





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b. The inflammatory response- physiology, pathology, presentations, assessment
c. Autoimmune diseases- pathology, susceptibility, assessment
d. Immune deficiency- presentation, syndromes
e. Anaphylaxis, urticaria, angioedema, transplantation immunology

6. Infectious disease
   a. Viral infections-
      i. with exanthem: measles, chicken pox, herpes zoster, herpes simplex 1 & 2, dengue, hand foot and mouth disease
      ii. Without exanthem- influenza, mumps
      iii. With rheumatological involvement- Chikungunya
      iv. With GI, Respiratory, Neurological involvement
   b. Bacterial infections-
      i. Common gram positive infections-overview, then specifics- skin, soft tissue, bone infections, cellulitis,
      ii. Common gram negative infections- overview, then specifics
      iii. Enteric infections. Salmonella including typhoid, paratyphoid, bacillary dysentery-*shigella*, different causes of food poisoning, cholera, *C. Difficile*,
      iv. Respiratory infections- Sinusitis, bronchitis, diphtheria, pneumonias, pneumocystis carinii, chlamydia
      v. Mycobacterial infections- tuberculosis, Hansen's; atypical Mycobacteria
      vi. HIV infection, AIDS
         1. Clinical presentations, investigations, diagnosis of HIV infections
         2. The importance of pre-test & post- test counseling, breaking bad news
         3. Natural history and Staging of HIV
         4. Antiretroviral therapy, Preventing opportunistic infections
      vii. CNS-
         1. Meningitis -viral, bacterial,tuberculous, fungal, how to differentiate, management principles ; Chemoprophylaxis for purulent meningitis
         2. Parenchymal –viral encephalitis, Rabies, Poliomyelitis,H.zoster,SSPE
         3. Cerebral abscess, neurosyphilis
      viii. Diseases caused by bacterial toxins- tetanus, botulism
      ix. Rickettsial fevers- typhus
      x. Protozoa infections. Malaria, Leishmaniosis, Amoebiasis, Giardiasis
      xi. Helminthic infestations Ancylostomiasis, filariasis (Luminal & tissue nematodes)
      xii. Tape worms
      xiii. Fungal infections.





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1. Superficial- candidiasis
2. Subcutaneous- mycetoma
3. Systemic-aspergillosis, cryptococcosis, histoplasmosis, coccdiomycosis

c. General principles of use of antimicrobial agents, abuse of antimicrobials; antimicrobial resistance; antiviral, antifungal agents
d. Approah to a patient with suspected infection, sepsis, eosinophilia, PUO
e. Adult immunisation

7. Fluid and Electrolytes
   a. Water &Electrolyte balance, hypovolemia, dehydration- assessment, correction
   b. disorders of Sodium, Potassium balance, acidosis, alkalosis

   **Exercises:**
8. Renal medicine
   a. Functional anatomy, Structure & function of the Nephron, Clinical assessment of the Kidney & Urinary tract; significance of examining the urine, assessing GFR, proteinuria, investigating for renal vascular disease, infections of the urinary tract
   b. Glomerular vs tubular disease, Nephrotic syndrome, acute kidney injury- causes, complications, management; Chronic kidney disease- causes, complications, including anemia, bone disease, management- conservative, preventing deterioration; renal replacement therapy, renal transplantation- indications, problems, costs
   c. Pregnancy and renal disease, drugs and the kidney

   **Exercises:**
9. CVS
   a. Functional anatomy & physiology, cardiac Cycle, Ventricular function, Biomarkers, Clinical assessment of the heart and circulation- ECG, chest Xray, basics of angiography
   b. Coronary circulation, coronary artery disease, its complications, angina, myocardial infarction, management
   c. Conducting system of the heart, abnormalities of cardiac rate and rhythm, principles of identification & basic management
   d. Acute Rheumatic fever, rheumatic heart disease, assessment, complications, management options, infective endocarditis
   e. Congenital heart disease, assessment, complications, management options
   f. Myocardial disease. Myocarditis, cardiomyopathy
   g. Acute & Chronic pericarditis
   h. Deep vein thrombosis, pulmonary embolism, management

   **Exercises: Cardiac cycle, normal ECG, ECG in Myocardial infarction, atrial fibrillation, complete heart block**





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10. Respiratory System
    a. Functional anatomy & physiology, Bronchopulmonary segments, Clinical assessment of the lungs, control of breathing, investigations - pulmonary function tests, imaging
    b. Bronchal Asthma, bronchitis, bronchiectasis, Lung abcess, bronchogenic Ca, obstructive sleep apnoea
    c. COPD, corpulmonale
    d. Pleural diseases
    e. Interstitial Lung disease
    f. Respiratory failure- assessment, management

    **Exercises: Bronchopulmonary segments, PFTs, clinical importance**

11. GIT
    a. Functional anatomy & physiology, Digestion, absorption, gut hormones, Clinical assessment & investigations of the GIT,
    b. Functional anatomy & physiology, Clinical assessment & investigations of the hepatobiliary system; interpreting Liver Function tests
    c. Dysphagia, Gastroesophageal reflux, peptic ulcer disease, gastric Ca, upper GI Bleeding,
    d. Symptoms and signs, investigations of Diseases of the small & large gut- diarrhea, malabsorption, lactose intolerance, infections of the small gut, irritable bowel syndrome, ischemic of the gut
    e. Inflammatory bowel disorders, diverticulosis of the large gut, tumors of the large gut, constipation
    f. Acute & chronic pancreatitis, gallstones, other GB diseases
    g. Acute and chronic Hepatitis
    h. Chronic liver disease
    i. Assessment of a patient with jaundice, ascites, Acute liver failure, hepatic encephalopathy, portal hypertension, portal vein thrombosis, chronic liver disease
    j. Alcoholic, non-alcoholic liver disease, autoimmune liver disease, primary & secondary malignancy of the liver
    k. Drug- induced liver disease
    l. Inherited liver diseases- Wilson's, haemochromatosis, Gilbert's
    m. Pregnancy & the liver
    n. Liver transplantation

    **Exercises: Liver function tests- various abnormalities; abnormalities in ascitic fluid**





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12. Hematology

a. Functional anatomy & physiology, Haemopoesis, Clinical assessment & investigations of the haemopoietic system; Iron, B12, Folate absorption, abnormalities
b. Interpreting a haemogram
c. Bleeding & Clotting disorders, Tests of coagulation, Bleeding & clotting disorders,
d. Thrombotic disorders
e. Anemia- presenting features, assessment, investigations, management
f. Different types of anemia, Fe deficiency, B12, Folate, Hemolytic, anemia of chronic disease
g. Haemoglobinopathies- assessment, sickle cell disease, thalassemias
h. Polycythemia- Primary & Secondary, presenting features, assessment, management
i. High and low White cell counts- clinical assessment, investigations, management
j. High and low platelet counts- clinical assessment, investigations, management
k. Pancytopenia
l. Hematological malignancies, lymphoma, Lymphadenopathy, splenomegaly
m. Paraproteinemias
n. Blood products, transfusions, adverse effects, safe transfusions, stem cell transplantation

**Exercises: Abnormalities in a Haemogram, blood smear**

13. Rheumatology

a. Presenting problems , Clinical examination, assessment, investigations of rheumatological disease: Osteoarthritis, Rheumatoid arthritis, crystal arthropathy, SLE, systemic sclerosis, seronegative spondyloarthropathies, reactive arthritis, connective tissue diseases, vasculitis
b. Non-Pharmacological & pharmacological therapy of rheumatological disease- principles, problems, side effects
c. Osteoporosis, vitamin D deficiency

**Exercises: abnormalities in the joint fluid**

14. Endocrinology

a. Organization of the endocrine system, functional anatomy & physiology, clinical presentations, overview of investigations
b. Disorders of Pituitary function
c. Thyroid gland-anatomy, physiology, abnormalities (hyper & Hypo function, thyroiditis)



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d. Adrenal glands – functional anatomy, physiology, assessment, Cushing's, Addison's, Hyperaldosteronism, Phaochromocytoma
e. Calcium metabolism, hyperparathyroidism, hypercalcemia, hypocalcemia, tetany
f. Diabetes mellitus
    i. Clinical presentations, examination; diabetes mellitus Types 1&2 , other forms
    ii. Diagnosis of diabetes mellitus, complications
    iii. Managing diabetes: Life style management, Diet and Drugs in the management of diabetes mellitus, oral medications, insulin, incretin based therapy
    iv. Hypoglycemia, diabetes in special situations
    v. Managing the complications of diabetes mellitus

**Exercises: Inter-relation of the Pituitary with other endocrine organs; Thyroid function tests; diagnosing diabetes mellitus; identification & management of the complications of Diabetes; differences in management of type 1 and Type 2 diabetes**

15. Nervous system
a. Overview of the nervous system, basic anatomy & blood supply of the Brain, csf production& circulation, abnormalities, the need for localization; the value of history and physical examination, overview of tests available
b. Headache syndromes, migraine, seizures, anticonvulsant therapy
c. Clinical features of Meningitis –how to differentiate & manage the varioustypes,
d. Intracranial space occupying lesions- including subdural haemorrhage, the need to identify and treat early
e. Delirium, Coma, brain death
f. Strokes : infarction vs hemorrhage, assessment, broad principles of localization , the need for urgent intervention when possible
g. Amnesia, dementias, neurodegenerative disorders
h. Demyelinating disorders, paraneoplastic neurological disorders
i. Parkinson's disease, Motor neurons disease, CNS Tuberculosis
j. Anatomy & Overview of diseases of the spinal cord, transverse myelitis, Syringomyelia, tumors,
k. Polyneuropathy, Guillain Barré syndrome, Peripheral neuropathy
l. Myasthenia gravis, other myasthenia syndromes, disorders of muscle

**Exercises: The structure of the Neuron; clinical differences between upper motor and lower motor neurone lesions; differentiating hemispheric from brainstem lesions; differentiating spinal cord,peripheral nerve and muscle disease**





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16. Medical disorders of Pregnancy
    a. Prenatal genetic testing, infections in the antenatal period, prescribing in pregnancy, air travel
    b. Gestational diabetes mellitus
    c. Endocrine disorders- pituitary, thyroid, adrenal,
    d. Liver, kidney, cardiac, respiratory, neurologic disease , venous thromboembolism in pregnancy
17. Critical care
    a. Severe sepsis, shock, Multi-organ failure
    b. Management of acute LVF, acute severe asthma, acute coronary syndrome
    c. Cardiopulmonary resuscitation, BLS, ACLS, when / whether to resuscitate
    d. Disseminated intravascular coagulation
    e. Coma, hepatic encephalopathy
    f. Bioterrorism, disaster management , mass casualty, the concept of triage.
18. Ageing
    a. Biology of ageing, comprehensive assessment, Frailty, problems in old age- falls, delirium, dizziness, urinary incontinence, cardiac, GI, neurological problems
    b. How much to investigate? How aggressive must one be?
    c. Prescribing in the elderly
    d. Rehabilitation
19. Pain and Palliative care
    a. Assessment and measurement of pain, psychological aspects of chronic pain
    b. Management of pain, breathlessness, cough, nausea, vomiting, dehydration, GI obstruction, weight loss, lassitude, anxiety, depression
    c. How to break bad news, how to prepare a person to face terminal disease, dying
20. Clinical Pharmacy and Therapeutics
    a. General principles of prescribing, rational use of drugs, monitoring drug therapy
    b. Drug interactions, Adverse drug reactions,



**TEXT BOOKS RECOMMENDED**

1. Principles and practice of Medicine by Davidson
2. Davidsons clinical cases by Mark W Stratchan and S.K.Sharma
3. Text Book of Medicine by Kumar and Clark
4. Text Book of Medicine byDr.K.V.Krishnadas
5. Clinical Medicine by Dr.K.V.Krishnadas
6. Macleod's clinical examination
7. Hutchison's textbook of clinical methods
8. Hari's Essentials of Clinical Medicine by Dr. P.Baburaj
9. Introduction to clinical methods in medicine – 2nd edition edited by Dr. V.K Lakshmanakumar



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**REFERENCE TEXT BOOKS**

1. Harrison's Principles of Internal Medicine
2. Text Book of Medicine Cecil & Loeb
3. API textbook of Medicine
4. Oxford Textbook of Medicine
5. Clinical Medicine-Vakil and Golwala
6.

## Psychiatry 20Hrs

- Classification and aetiological factors in psychiatric disorder
- Delirium and Dementia
- Schizophrenia
- Bipolar affective disorders
- Depressive disorders
- Anxiety disorders and OCD
- Stress and adjustment disorders
- Psychiatric presentations in general practice
- Personality disorders
- Substance use disorders
- Attempted suicide and suicide risk
- Mental retardation and learning disability
- Autism spectrum disorder and ADHD
- Sexual disorders
- Breaking bad news and crisis intervention
- Treatment of psychiatric disorders
- Basic communication and counseling skills
- Rehabilitation
- Legal aspects of psychiatry



**DERMATOLOGY LECTURES -30 HOURS**

- Structure and function of skin
- Infections of Skin
- Care of skin, preventing and managing bed sore in a bed ridden patient
- Eczematous diseases
- Bullous skin diseases
- Connective Tissue Diseases
- Pigmentary diseases
- Papulo squamous diseases
- Neoplastic diseases of skin
- Lesions of skin appendages
- Adverse drug reactions
- Veneral diseases



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- Leprosy
- Stigma in medicine and its management in diseases like HIV,STD, Leprosy

Communicating with dermatology/STD/Leprosy patients

**RADIOLOGY LECTURES (INCLUDING RADIOTHERAPY)-20 HOURS**

Production of X-rays
Biological changes Skeletal
Radiology Chest &
Mediastinum
Gastrointestinal system
Hepatobiliary system
Genitourinary system
Neuroimaging modalities
Emergency Radiology

**Respiratory Medicine** Lectures 20 hrs
Evaluation of cough
Evaluation of dyspnoea
Investigations in pulmonary medicine
Bronchial Asthma
COPD
Pneumonia
Lung abscess
Tuberculosis pathogenesis
Diagnosis & management
Control program
Pleural effusion
Empyema
Neoplasms of lung
Environmental & occupational lung diseases
Sleep disordered breathing
Pulmonary hypertension
Pulmonary embolism
Interstitial lung diseases
Basic procedures
Conservative management of irreversible breathlessness in terminally ill patients.

Home Oxygen therapy – Pros and cons; considerations
before prescribing ambulatory oxygen

**INNOVATIVE SESSIONS**





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(Project work, Seminars, Structured discussion, integrated teaching, Formative evaluation, Revision and Morning sessions)

A seminar on Pain – acute, chronic, classification, management, concept of total pain Controlled substances – essential analgesics Pain relief as Human Right

**I. Common symptoms of disease/clinical approach to**

a) Pain
b) Fever
c) Respiratory symptoms
d) Pallor, Jaundice, Oedema
e) GI symptoms(Chronic constipation as a seminar – practical skills on high up enema)
f) Haematemesis, Melaena, Bleeding PR/ Haematochezia
g) Urinary symptoms
h) Neurological symptoms : headache, dizziness, vertigo, weakness, sensory loss
i) Musculoskeletal symptoms : joint swelling,
j) Weight loss and gain

**Applied Basic Sciences topics with relevance to Medicine**

Cardiac cycle and ventricular functions
Cardiac biomarkers, (LFT/RFT/PFT) Normal CSF
Blood supply of brain
Lobar function of brain
Functional anatomy of spinal cord Functional anatomy of cranial nerves Bronchopulmonary segments Pulmonary circulative
Lympatic drainage of Lung Structure and functions of Nephrons Digestion and absorption Haemopoesis and Iron metabolism

Thyroid functions and hormones Calcium metabolism
Physiology of pain (&Pathophysiology) Chronic pain as a disease Survey of pain score in every In-patient of a chosen ward)

**III. Project work IV. Seminars**
**V. Structured discussion**
**VI. Formative evaluation**
**VII. Morning sessions**
**VIII. Revision**

**EXAMINATION**

At the end of the course the student should have sufficient
a) Knowledge to diagnose clinical disorders with special reference to Infectious Diseases,



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nutritional diseases, outline various modes of management including drug therapy.
b) Skills in history taking, clinical examination and diagnosis. c)
d) Perform simple routine investigations
e) Assist the common bed side investigative procedures like pleural tap, lumbar puncture

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|---|---|---|
| Part – II | | |
| **a)** | **Medicine** | |
| | Theory – two papers 60 marks each | **120 marks** |
| | Paper I – General Medicine | |
| | Paper II – General Medicine (including psychiatry, | |
| | dermatology and STD) | |
| | (Shall contain one question on basic sciences and allied | |
| | Subjects) | |
| Oral (Viva) interpretation of Xray , ECG etc. | | 20 marks |
| Clinical (bedside) | | 100 marks |
| Internal Assessment | | 60 marks |
| (Theory – 30: Practical – 30) | | |
| Total | | **300 marks** |
| Paper -I | | |

**General Medicine – Section – A**

| | |
|---|---|
| I. | 10 marks x 1 = 10 marks |
| (problem oriented question) | |
| II. | 2 marks x 10 = 20 marks) |
| (short answers) | |
| **Section -B** | |
| III. structured question 10 marks x 1 = 10 marks | |
| IV. short question 2 marks x 10 = 20 marks | |
| **Paper – II** | |

General Medicine including Psychiatry, Dermatology and Radio diagnosis





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**Section – A**

1.Problem oriented question 10 marks x 1 = 10 marks

| | | |
|---|---|---|
| II. | Short answer question | 2 marks x 10 = 20 marks |
| Section – B | | |
| II. | Structured question | 10 marks x 1 = 10 marks |
| III. | short answer question | 2 marks x 10 = 20 marks |

Problem oriented and structured questions must be from General Medicine. There should not be more than one question each from radiology, dermatology and psychiatry.

Ensure questions include Pain, - ethical concerns, whole person concerns, symptom management questions are assessed along with management of the disease

-Role of Multi-disciplinary team work is assessed

**SCHEME OF Practical Examination**

**Long case** = 40 Marks Time (60 minutes)

(Marks to be allotted for History- 10 marks, Physical examination- 10 marks, Case sheet writing- 10 marks; Discussion- arriving at a diagnosis + simple beside investigations +basics of EBM - 10 marks)



**Asessment of Long case should be based on**

1. Case sheet writing Methodology, Symptoms Signs Diagnosis
2. Elicitation of findings
3. Differential diagnosis
4. Suggested investigation for diagnosis
5. Treatment of the situation

**OSCE** (4 stations- 2.5 marks each, total 10 the objective shall be to assess the candidate on his knowledge, psychomotor skills and communication skills.

Time for each OSCE station 2 minutes

Total = Long Case (40) + OSCE (10) : 50 marks .

Short Cases (2x 25= 50 marks) (15 minutes each)



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*(Questions for the Long Case, OSCE, Short Cases shall be on the basis of 60% 'must know', 30% 'good to know' and 10% 'nice to know'*

**Viva voce:** 4 stations, 5 marks each (Total 20 marks)

# PAEDIATRICS&NEONATOLOGY

**DETAILS OF THE COURSE**

| | | |
|---|---|---|
| Duration of course | : 10 weeks in 3 semesters | VI ,VIII &IX |
| Total number of hours theory | | :100 |

Lectures :34 (including pediatric surgery)

Clinical 8-9 AM Tutorials
9 AM 1 PM Case discussions & Innovative sessions

Exposure of students to newborns and emergency management is inadequate during ten weeks of under graduate postings. During evening hours they should be posted in causality, ICU and new born nursery.



**General guidelines**

Apart from bedside discussion there should be 66 hours of Innovative sessions during clinical sessions in the forenoon session. This comprises of project work, seminars, structured discussion, and integrated teaching.

Simple day to day problems should be given more importance.

Sessions which will improve communication skills and attitude should be given more importance.

Pediatric casualty posting is compulsory during the final year posting. They should be posted in Intensive care unit and new born nurseries during evening hours with due care to prevent infections in nurseries .

There should be enough pediatric surgery case exposure during clinical sessions

The training in pediatrics should prepare the student to deliver preventive, promotive, curative and rehabilitative services for care of children both in the community and rehabilitative services



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