

**RESPIRATORY MEDICINE (CODE: CT)**

Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/ SH/P	Core (Y/N)	Suggested Teaching Learning method	Suggested Assessment method	Number required to certify P	Vertical Integration	Horizontal Integration
<b>RESPIRATORY MEDICINE</b>									
<b>Topic:Tuberculosis</b>		<b>Number of competencies: (19)</b>			<b>Number of procedures that require certification : (01)</b>				
CT1.1	Describe and discuss the epidemiology of tuberculosis and its impact on the work, life and economy of India	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
CT1.2	Describe and discuss the microbiology of tubercle bacillus, mode of transmission, pathogenesis, clinical evolution and natural history of pulmonary and extra pulmonary forms (including lymph node, bone and CNS)	K	KH	Y	Lecture, Small group discussion	written		Microbiology	
CT1.3	Discuss and describe the impact of co-infection with HIV and other co-morbid conditions. Like diabetes on the natural history of tuberculosis	K	K	Y	Lecture, Small group discussion	written		Microbiology	
CT1.4	Describe the epidemiology, the predisposing factors and microbial and therapeutic factors that determine resistance to drugs	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine, Microbiology, Pharmacology	
CT1.5	Elicit, document and present an appropriate medical history that includes risk factor, contacts, symptoms including cough and fever CNS and other manifestations	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
CT1.6	Demonstrate and perform a systematic examination that establishes the diagnosis based on the clinical presentation that includes a a) general examination, b) examination of the chest and lung including loss of volume, mediastinal shift, percussion and auscultation (including DOAP session of lung sounds and added sounds) c) examination of the lymphatic system and d) relevant CNS examination	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
CT1.7	Perform and interpret a PPD (mantoux) and describe and discuss the indications and pitfalls of the test	S	P	Y	DOAP session	Maintenance of log book		Microbiology	
CT1.8	Generate a differential diagnosis based on the clinical history and evolution of the disease that prioritises the most likely diagnosis	K	K	Y	Bedside clinic, Small group discussion	Bedside clinic/ Viva voce			

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CT1.9	Order and interpret diagnostic tests based on the clinical presentation including: CBC, Chest X ray PA view, Mantoux, sputum culture and sensitivity, pleural fluid examination and culture, HIV testing	K	K	Y	Bedside clinic, DOAP session	Skill assessment			
CT1.10	Perform and interpret an AFB stain	S	P	Y	DOAP session	Skill assessment	1	Microbiology	
CT1.11	Assist in the performance, outline the correct tests that require to be performed and interpret the results of a pleural fluid aspiration	S	SH	Y	Skill assessment	Skill assessment			
CT1.12	Enumerate the indications for tests including: serology, special cultures and polymerase chain reaction and sensitivity testing	K	KH	Y	Small group discussion, Lecture	Short note/ Viva voce		Microbiology	
CT1.13	Describe and discuss the origin, indications, technique of administration, efficacy and complications of the BCG vaccine	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology	
CT1.14	Describe and discuss the pharmacology of various anti-tuberculous agents, their indications, contraindications, interactions and adverse reactions	K	KH	Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology, Microbiology	
CT1.15	Prescribe an appropriate antituberculosis regimen based on the location of disease, smear positivity and negativity and co-morbidities based on current national guidelines including directly observed tuberculosis therapy (DOTS)	K	SH	Y	Bedside clinic, Small group discussion, Lecture	Skill assessment		Pharmacology, Community Medicine	
CT1.16	Describe the appropriate precautions, screening, testing and indications for chemoprophylaxis for contacts and exposed health care workers	K	KH	Y	Bedside clinic, Small group discussion	Written		Community Medicine	
CT1.17	Define criteria for the cure of Tuberculosis; describe and recognise the features of drug resistant tuberculosis, prevention and therapeutic regimens	S	P	Y	Lecture, Small group discussion	Written			
CT1.18	Educate health care workers on National Program of Tuberculosis and administering and monitoring the DOTS program	C	SH	Y	DOAP session	Skill assessment		Community Medicine	

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CT1.19	Communicate with patients and family in an empathetic manner about the diagnosis, therapy	S	P	Y	DOAP session	Skill assessment		AETCOM	
<b>Topic: Obstructive airway disease</b> <b>Number of competencies: (28)</b> <b>Number of procedures that require certification : (01)</b>									
CT2.1	Define and classify obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.2	Describe and discuss the epidemiology, risk factors and evolution of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology , Pathology	
CT2.3	Enumerate and describe the causes of acute episodes in patients with obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
CT2.4	Describe and discuss the physiology and pathophysiology of hypoxia and hypercapnea	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.5	Describe and discuss the genetics of alpha 1 antitrypsin deficiency in emphysema	K	KH	N	Lecture, Small group discussion	Written/ Viva voce		Physiology, Pathology	
CT2.6	Describe the role of the environment in the cause and exacerbation of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
CT2.7	Describe and discuss allergic and non-allergic precipitants of obstructive airway disease	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pathology	
CT2.8	Elicit document and present a medical history that will differentiate the aetiologies of obstructive airway disease, severity and precipitants	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			
CT2.9	Perform a systematic examination that establishes the diagnosis and severity that includes measurement of respiratory rate, level of respiratory distress, effort tolerance, breath sounds, added sounds, identification of signs of consolidation pleural effusion and pneumothorax	S	SH	Y	Bed side clinic, DOAP session	Skill assessment			

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CT2.10	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	S	SH	Y	Bed side clinic, DOAP session	Skill assessment/ Written			
CT2.11	Describe, discuss and interpret pulmonary function tests	S	SH	Y	Bed side clinic, DOAP session	Skill assessment		Physiology, Pathology	
CT2.12	Perform and interpret peak expiratory flow rate	S	P	Y	Bedside clinic, DOAP session	documentation in log book/ Skill assessment	3		
CT2.13	Describe the appropriate diagnostic work up based on the presumed aetiology	S	SH	Y	Bedside clinic, Small group discussion	Written/ Skill assessment			
CT2.14	Enumerate the indications for and interpret the results of : pulse oximetry, ABG, Chest Radiograph	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			
CT2.15	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			
CT2.16	Discuss and describe therapies for OAD including bronchodilators, leukotriene inhibitors, mast cell stabilisers, theophylline, inhaled and systemic steroids, oxygen and immunotherapy	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology	
CT2.17	Describe and discuss the indications for vaccinations in OAD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
CT2.18	Develop a therapeutic plan including use of bronchodilators and inhaled corticosteroids	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			

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CT2.19	Develop a management plan for acute exacerbations including bronchodilators, systemic steroids, antimicrobial therapy	K	SH	Y	Bedside clinics, Small group discussion, DOAP session	Written/ Skill assessment			
CT2.20	Describe and discuss the principles and use of oxygen therapy in the hospital and at home	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			
CT2.21	Describe discuss and counsel patients appropriately on smoking cessation	K/C	SH	Y	DOAP session	Skill assessment		AETCOM	
CT2.22	Demonstrate and counsel patient on the correct use of inhalers	S/C	SH	Y	DOAP session	Skill assessment			
CT2.23	Communicate diagnosis treatment plan and subsequent follow up plan to patients	K/C	SH	Y	DOAP session	Skill assessment			
CT2.24	Recognise the impact of OAD on patient's quality of life, well being, work and family	A	KH	Y	Small group discussion, Bedside clinics	Observation by faculty		Community Medicine	
CT2.25	Discuss and describe the impact of OAD on the society and workplace	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
CT2.26	Discuss and describe preventive measures to reduce OAD in workplaces	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine	
CT2.27	Demonstrate an understanding of patient's inability to change working, living and environmental factors that influence progression of airway disease	A	KH	Y	Small group discussion, Bedside clinics	Observation by faculty		Community Medicine	
CT2.28	Demonstrate an understanding for the difficulties faced by patients during smoking cessation	A	KH	Y	Small group discussion, Bedside clinics	Observation by faculty			
	<b>Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.</b> <b>Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently,</b> <b>Column F: DOAP session – Demonstrate, Observe, Assess, Perform.</b> <b>Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation</b>								

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<b>Integration</b>									
<b>Physiology</b>									
PY6.8	Demonstrate the correct technique to perform & interpret Spirometry	S	SH	Y	DOAP sessions	Skill assessment/ Viva voce		Respiratory Medicine	
<b>Pharmacology</b>									
PH1.32	Describe the mechanism/s of action, types, doses, side effects, indications and contraindications of drugs used in bronchial asthma and COPD	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Respiratory Medicine	
PH1.33	Describe the mechanism of action, types, doses, side effects, indications and contraindications of the drugs used in cough (antitussives, expectorants/ mucolytics)	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Respiratory Medicine	
PH1.44	Describe the first line antitubercular drugs, their mechanisms of action, side effects and doses.	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	
PH1.45	Describe the drugs used in MDR and XDR Tuberculosis	K	KH	Y	Lecture	Written/ Viva voce		Respiratory Medicine	Microbiology
<b>General Medicine</b>									
IM24.10	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of COPD in the elderly	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce			Respiratory Medicine
<b>Pediatrics</b>									
PE28.19	Describe the etio-pathogenesis, clinical features, diagnosis, management and prevention of asthma in children	S	SH	Y	Bedside clinics, Small group discussion, Lecture	Skill Assessment/ Written/ Viva voce		Respiratory Medicine	

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PE28.20	Counsel the child with asthma on the correct use of inhalers in a simulated environment	S	P	Y	Bedside clinics, Small group discussion, Lecture	Skills Assessment/ Written/ Viva voce	3	Respiratory Medicine	
PE34.1	Discuss the epidemiology, clinical features, clinical types, complications of Tuberculosis in Children and Adolescents	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.2	Discuss the various diagnostic tools for childhood tuberculosis	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine
PE34.3	Discuss the various regimens for management of Tuberculosis as per National Guidelines	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.4	Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Program	K	KH	Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Community Medicine, Pharmacology	Respiratory Medicine
PE34.5	Able to elicit, document and present history of contact with tuberculosis in every patient encounter	S	SH	Y	Bedside clinics, Skill lab	Skill Assessment			Respiratory Medicine
PE34.6	Identify a BCG scar	S	P	Y	Bed side clinics, Skills lab	Skill Assessment	3	Microbiology	Respiratory Medicine
PE34.7	Interpret a Mantoux test	S	P	Y	Bed side clinics Skills lab	Skill assessment	3	Microbiology	Respiratory Medicine
PE34.8	Interpret a Chest Radiograph	S	SH	Y	Bedside clinics Skills lab	Skill assessment		Radiodiagnosis	Respiratory Medicine
PE34.9	Interpret blood tests in the context of laboratory evidence for tuberculosis	S	SH	N	Bed side clinics, Small group discussion	Log book		Microbiolgy	Respiratory Medicine
PE34.10	Discuss the various samples for demonstraing the organism eg Gastric Aspirate, Sputum , CSF, FNAC	K	KH	Y	Bed side clinics, Small group discussion	Written/ Viva voce		Microbiolgy	Respiratory Medicine
PE34.11	Perform AFB staining	S	P	Y	DOAP session	Log book/Journal	3	Microbiology	Respiratory Medicine
PE34.12	Enumerate the indications and discuss the limitations of methods of culturing M.Tuberculi	K	KH	Y	Small group discussion	Written/ Viva voce		Microbiology	Respiratory Medicine