

Introduction of "Communication Skills, Professionalism & Ethics in Medical Education Modules First Ranker.com

New Topic in Syllabus of Pathology (A.Y. 2015-16)

## Curricula for II M.B.B.S.

## **Pathology**

#### 1. Goal

The goal of teaching pathology is to provide undergraduate students comprehensive knowledge of the causes and mechanisms of disease, in order to enable them to achieve complete understanding of the natural history and clinical manifestations of the disease.

#### 2. Educational objectives

#### (a) Knowledge

At the end of one and half years, the student shall be able to -

- i. describe the structure and ultrastructure of a sick cell, the mechanisms of the cell degradation, cell death and repair.
- ii. Correlate structural and functional alterations in the sick cell.
- iii. Explain the Patho physiological processes which governs the maintenance of homeostasis, mechanism of their disturbances and the morphological and clinical manifestation associated with it.
- iv. describe the mechanisms and patterns of tissue response to injury to appreciate the Pathophysiology of disease processes and their clinical manifestations.
- v. Correlate the gross and microscopic alterations of different organ systems in common diseases to the extent needed to understand disease processes and their clinical significance.
- vi. Develop an understanding of neoplastic change in the body in order to appreciate need for early diagnosis and further management of neoplasia.
- vii. Understand mechanisms of common haematological disorders and develop a logical approach in their diagnosis and management.

#### (b) Skills

At the end of one and half years, the student shall be able to -

- i. Describe the rationale and principles of technical procedures of diagnostic laboratory tests.
- ii. Interpret diagnostic laboratory tests and correlate with clinical and morphological features of diseases.
- iii. Perform simple bedside tests on blood, urine and other biological fluid samples.
- iv. Draw a rational scheme of investigations aimed at diagnosing and managing common disorders.
- v. Recognise morbid anatomical and histopathological changes for the diagnosis of common disorder.



#### (c) Integration

At the end of one and half years, the student shall be able to integrate the causes and mechanisms of disease most prevalent in India with their natural history for the understanding of their clinical course and management.

#### 3. Total duration of teaching

3 Semesters (III, IV and V)
Minimum 315

working days.

#### Total number of teaching hours allotted to the discipline

**300 hrs** 

Distribution of teaching hours

A) Theory (lectures &	101
tutorials)	58
Total	159
B) Practicals	110
C) Revision & Evaluation (Internal)	31

#### 4. Syllabus

#### a. Learning methods

Distribution of teaching hours

DIVISI	(ONS A)	LECTURES	B) TUTORIALS	<b>C</b> )	
PRAC'	ΓICALS		A CONTRACTOR OF THE PROPERTY O		
		(1 hr)	(2 hrs)	(2 1/2 hrs)	)
1. Gen	eral Pathology	35	07	12	
2. Hae	ematology	15	04	07	
3. Sys	temic Pathology	47	13	18	
4. Clir	nical Pathology	03	04	05	
5. Aut	opsy	01	01	02	
	TOTAL	101	29x2	44x2.5	

#### b. & c. Sequential organization of course contents

The Broad area of study shall be:-

General Pathology (including general neoplasia) Systemic Pathology (including systemic neoplasia) Haematology Clinical Pathology

#### A) GENERAL PATHOLOGY: (n=35)

#### 1. Definitions and causes of diseases:-

Must know:- Able to recall common definitions in Pathology and causes of cell injury.

#### 2. Modes of cell injury:-

Must know:- Able to appreciate mechanisms of cell injury & relate them to the morphological changes.

#### 3. Necrosis & gangrene:-

Must know:- Able to recognize types of necrosis and gangrene at gross and microscopic levels.

Desirable to know:- Apoptosis and its relevance.

#### 4. Intracellular accumulations and alterations:-

Must know:- Able to list the types of intracellular accumulations & alterations in reversible cell injury along with alterations in cell organelles and cytoskeleton.

#### 5. Cellular Adaptations/ Growth disturbances:-

Must know:- Define the various growth disturbances and appreciate the clinical significance of each.

#### 6. Acute inflammation:-

Must know:- Define and describe changes occurring in acute inflammation and integrate the changes with morphological patterns of injury.

#### 7. Chemical mediators of Inflammation:-

Must know: Definition, Classification, description of each type, role of acute chronic inflammation.

## 8. Chronic inflammation (including granulomatous):-

Must know:- differentiate it from acute inflammation, describe aetiology, patterns and systemic effects of granulomas.

## 9. Regeneration and repair (general):-

Must know:- Define & describe regeneration and repair and understand the mechanisms and list factors modifying repair.

#### 10. Repair in specialized tissues:-

Must know:- Describe repair in fractures and parenchymal organs and list modifying factors and complications.

### 11. Oedema:-

Must know:- Define oedema, classify and describe pathogenesis & correlate morphology with clinical significance with emphasis on transudate and exudate.

#### 12. Shock:-

Must know:- Define, classify and understand pathogenesis, recognize the of mediators and stages of shock.

#### 13. Thrombosis:-

Must know: Describe etio-pathogenesis, fate, morphology and effects of thrombosis.

#### 14. Embolism and Infarction:-

Must know:- Enumerate types of embolism and infarction, recognize morphological changes and correlate clinical significance.

#### 15. Hyperaemia and Haemorrhage:-

Must know:- Definitions, morphology of acute and chronic congestions, clinical significance of haemorrhage.

#### 16. Disturbances of pigment metabolism:-

Must know:- State the type of pigment disturbances and describe the changes associated with common disturbances like lipofuscin, melanin, Hemosiderin and Bilirubin.

#### 17. Disturbances of Mineral metabolism:-

Must know: Describe the types and morphological changes of calcification. Desirable to know: Disturbances of other minerals like zinc etc.

#### 18. Genetic disorders:-

Must know:- Normal karyotype, classification of genetic disorders, types of genetic change, Down's syndrome, Klinefelter's syndrome, Turner's syndrome Desirable to know:- Lysosomal storage disorders, glycogen storage diseases, methods of disease diagnosis.

#### 19. Hypersensitivity reactions:-

Must know:- Classify, differentiate between different types of Hypersensitivity reactions.

Desirable to know: - Be conversant with transplant rejections.

#### 20. Autoimmune diseases:-

Must know:- Understand mechanisms of autoimmunity and diagnose common autoimmune diseases; overview of SLE.

#### 21. Amyloidosis:-

Must know:- Definition, physical characters, chemical characters, classification, pathogenesis morphology, clinical correlation and lab diagnosis.

#### 22. AIDS:-

Must know:- Understand the natural history of the disease and recommend relevant investigations in the management.





#### 23. Typhoid fever:-

Must know:- Correlate Pathogenesis with morphology and clinical features of the disease.

#### 24. Syphilis:-

Must know:- Classify and describe lesions in various stages of syphilis

#### 25,26,27 (3 lectures) Tuberculosis:-

Must know:- Appreciate the importance of tuberculosis in the present day Context, its Pathogenesis & basic histopathology. List and describe the various pulmonary lesions of tuberculosis. Describe changes in various organs in TB and understand their functional correlation, sequelae, lab diagnosis and TB in AIDS.

#### 28. Leprosy:-

Must know:- Classify, differentiate between different types of leprosy and describe the diagnostic histologic features and sequelae.

#### 29. Fungal diseases:-

Desirable to know:- Classification and be conversant with relevance of fungal diseases in the world with emphasis on opportunistic fungal infections.

#### 30. Malaria:-

Must know:- Identify, morphological features in vivax and falciparum malaria and recommend lab investigations in the management.

## 31 & 32. Neoplasia - Nomenclature and classification:-

Must know:- Define important terms, classify and differentiate benign from malignant neoplasms.

Desirable to know: Precancerous conditions

#### 33. Neoplasia - Carcinogenesis:-

Must know:- Understand carcinogenesis and analyse the mechanism of genetic changes in carcinogenesis.

## 34. Neoplasia - Biology and Lab diagnosis:-

Must know:- Understand the tumour host interactions in neoplasia and recommend the diagnostic workup for detection of cancer.

#### 35. Neoplasia - Spread, grading and staging:-

Must know:- Biology of tumour growth, metastases, types, mechanisms, clinical correlations, grading of cancer and staging of cancer.

#### B) HAEMATOLOGY: (n=15)

#### 1. Introduction to haematology and hemopoiesis:-

Must know:- Understand the importance of haematology in clinical practice and enumerate the stages of hemopoiesis.

#### 2. Anaemias (general):-

Must know:- Definition, classify anaemia by various methods, clinical features and lab approach to anaemias.

#### 3. Iron deficiency anaemia:-

Must know: Definition, causes, haematological features, morbid anatomical features, laboratory diagnosis and differential diagnosis.

#### 4. Megaloblastic anaemia:-

Must know:- Definition, causes, haematological features, morbid anatomical features, laboratory diagnosis and differential diagnosis.

#### 5. Haemolytic anaemia:-

Must know:- Definition, classification, Pathogenesis and haematological features.

#### 6. Haemoglobinopathies:-

Must know:- Definition, classification, Lab diagnosis of Thalassaemia and Sickle cell anaemia.

#### 7&8. Haemorrhagic disorders:-

Must know:- Classify haemorrhagic disorders, describe clinical distinction between Purpuras and Coagulation disorders and laboratory screening tests for haemorrhagic disorders. Normal coagulation and fibrinolytic mechanism. Describe etio-pathogenesis, clinical significance and lab diagnosis of haemophilia and DIC.Describe etio-pathogenesis, morphological features (haematological and morbid anatomical) clinical significance and lab diagnosis of ITP.

#### 9. Leukocytic disorders:-

Must know:- Leukocytosis, Leukopenia and Leukemoid reactions.

#### 10. Acute Leukaemias:-

Must know:- Classify and differentiate different types of acute Leukaemias.

#### 11. Chronic Leukaemias:-

Must know:- Definition, general features, classification, aetiology, haematological change, morbid anatomy, clinical course and lab. investigations.

#### 12. Paraproteinemia:-

Desirable to know:- Understand the relevance of paraproteinemia"s and integrate the various diagnostic modalities with the diagnosis.

#### 13. Aplastic Anaemias:-

Desirable to know: Aplastic anaemias and Agranulocytosis.

#### 14. Blood groups:-

Must know:- Appreciate the relevance of blood groups in haematology and transfusion medicine. Erythroblastosis foetalis

#### 15. Blood Transfusion:-

Must know:- Indications, selection of blood donors, autologous transfusions, complications of blood transfusions, investigation of suspected transfusion reactions.

#### C) SYSTEMIC PATHOLOGY: (n=46)

#### 1. Atherosclerosis:-

Must know:- Definition, etiopathogenesis, gross and microscopic description, complications and clinical correlation.

#### 2. Hypertension:-

Must know:- Relate the mechanisms of the disease to the clinical course and sequelae.

#### 3. Other diseases of blood vessels:-

Must know:- Develop an index of suspicion for vasculitides and aneurysms.

#### 4. Ischaemic heart disease:-

Must know:- Incidence, risk factors, Pathogenesis, morphological changes, clinical course, complications and investigations.

#### 5. Congenital heart disease:-

Desirable to know:- Correlate the anatomical malformations of disorders to the clinical consequences of the disease.

## 6. Rheumatic heart disease:-

Must know:- Incidence, etiopathogenesis, morbid anatomy, histopathology, lesions in the organs, clinical course and sequelae.

#### 7. Endocardial and pericardial diseases:-

Must know:- Infective endocarditis - Pathogenesis, morphology, differential diagnosis of cardiac vegetations, aetiology and basic morphology of different forms of pericarditis.

#### 8. Cardiomyopathies:-

Desirable to know:- Recognize the disorders as part of differential diagnosis in primary myocardial diseases.

#### 9. Pneumonias:-

Must know:- Aetiology, classification, gross, histopathological description in different forms and complications.

#### 10. Lung Abscess and Bronchiectasis:-

Must know:- Etiopathogenesis, morphological appearances and complications.

#### 11. Chronic Bronchitis and Emphysema:-

Must know:- Pathogenesis, types of emphysema, definition of chronic bronchitis, morbid anatomy and cardiac sequelae.

#### 12. Occupational lung diseases:-

Must know:- Types, etiopathogenesis, gross anatomical differences between different forms and sequelae.

#### 13. Tumours of lung and pleura:-

Must know:- Classification, aetiology, gross appearances, histological description of important forms, natural history, pattern of spread, Para neoplastic syndromes and secondary Pathology.

#### 14. Lesions of oral cavity and salivary glands:-

Must know: Differential diagnosis of swelling of salivary glands, oral cancer - etiopathogenesis, gross and histopathological descriptions.

#### 15. Gastritis and Peptic Ulcer:-

Must know: Definition of peptic ulcer, etiological factors, gross and microscopic appearances and sequelae.

Desirable to know:- Overview of aetiology and types of gastritis.

#### 16. Ulcers of Intestines:-

Must know:- Etiological classifications, Morphological appearances of typhoid, tubercular, amoebic ulcers and bacillary dysentery. Differential diagnosis of different forms of ulcers.

#### 17. Idiopathic Inflammatory Bowel disease:-

Must know:- Enumerate similarities and differences between the two component disorders viz., Crohn's disease and ulcerative colitis.

## 18. Tumours of upper GIT:-

Must know:- Etiopathogenesis, morphological features of carcinoma oesophagus, classification and morbid anatomy and histopathology of gastric carcinomas.

Desirable to know: Overview of carcinoid tumours of GIT.

#### 19. Tumours of lower GIT:-

Must know:- Pathology of carcinoma colon.

Desirable to know:- Intestinal polyps & GI stromal tumours.

#### 20. Viral Hepatitis:-

Must know:- Aetiology, clinical source and enzymology, salient histological features and sequelae.

#### 21. Alcoholic liver disease:-

Must know:- Pathogenesis, morphological manifestations and correlation with clinical features.

#### 22. Cirrhosis:-

Must know:- Etiopathogenesis, classification, important histological features and differential diagnosis.

#### 23. Tumours of liver, Pancreas and gall bladder:-

Must know:- Pathology of Hepatocellular carcinoma.

Desirable to know:- Pathology of tumours of Pancreas and gall bladder.

#### 24. Diabetes mellitus:-

Must know:- Classification, pathogenesis of system involvement, sequelae and complications.

#### 25. Acute nephritis and rapidly progressive GN:-

Must know:- Understand and integrate clinical and pathologic features of these syndromes.

#### 26. Nephrotic syndrome:-

Must know:- Integrate clinical and pathological features of this disorder.

#### 27. Renal failure:-

Must know:- Definitions, criteria, aetiology, systemic manifestations and investigations.

#### 28. Pyelonephritis and interstitial Nephritis:-

Must know:- Aetiology, Pathogenesis of Pyelonephritis acute and chronic morphological features and clinical correlation.

#### 29. Tumours of kidney and Pelvis:-

Must know:- Classification, Morphological features, clinical course including Para neoplastic syndromes of common tumours.

#### 30. Tumours of testis and Prostate:-

Must know:- Classification, salient morphological features of most common tumours and clinical course.

#### 31. Tumours of Cervix and Uterus:-

Must know:- Etiopathogenesis, salient morphological features, dysplasia and role of cytological screening.

#### 32. Tumours of Ovary and trophoblastic tissue:-

Desirable to know:- Classification and morphological description of important types.

#### 33. Non-neoplastic and Neoplastic lesions of the breast:-

Must know:- Classification, morphological features and grading of carcinoma breast and differential diagnosis of breast swellings.

#### 34. Non-neoplastic lesions of lymph nodes and Spleen:-

Must know:- Aetiology, differential diagnosis, morphological features of common causes of lymphadenopathy, common causes and appearances of splenomegaly.

#### 35. Hodgkin's Lymphoma:-

Must know:- Definition, classification, salient diagnostic features and clinical course.

#### 36. Non-Hodgkin's Lymphoma:-

Must know:- Definition, classification, salient diagnostic features and clinical Correlation.

Desirable to know: - Extra nodal lymphomas.

#### 37. Tumours of skin - Non-pigmented:-

Must know:- Classification, morphological features of most common types and natural history.

#### 38. Tumours of skin - Pigmented:-

Must know:- Classification, morphological features of common naevi, natural history of malignant melanoma.

#### 39 &40. Soft tissue tumours:-

Must know:- Classification, morphological features of lipomatous, fibrous and blood vessel tumours. Morphological features of neural, muscle and fibro histiocytic tumours.

#### 41. Non-neoplastic lesions of bone and joints:

Must know:- Etiopathogenesis and morphological changes of common arthritis and osteomyelitis.

## 42 & 43. Tumours of bone, cartilage and joints:-

Must know:- Classification, radiological and pathological features of important bone tumours (Osteosarcoma, Osteochondroma, GCT and Ewing's sarcoma).

#### 44. Inflammatory and neoplastic conditions of CNS:-

Must know: Morphological features and differential diagnosis of meningitis. Desirable to know: Classification, morphological features of important CNS tumours, clinical course and sequelae (Meningioma and Gliomas).

#### 45. Lesions of Thyroid:-

Must know: Differential diagnosis of thyroid nodule.

#### 46. Myopathies:-

Desirable to know:- Differential diagnosis of common muscle disorders.

#### D) CLINICAL PATHOLOGY: (n=3)

#### 1. Differential diagnosis of Jaundice:-

Must know:- The differential diagnosis and laboratory investigations in jaundice

#### 2. Renal function tests:-

Must know:- Laboratory approach to a case of renal dysfunction

#### 1. <u>Diabetes mellitus:-</u>

Must know:- Laboratory diagnosis of Diabetes mellitus

## **E) AUTOPSY : (n=1)**

Must know:- Indications and techniques of medical autopsies

#### **Tutorials**

#### **GENERAL PATHOLOGY:**

- 1. Cell injury and cell death
- 2. Cellular accumulations
- 3. Inflammation and repair
- 4. Circulatory disturbances
- 5. Immunological disorders
- 6. Infections
- 7. Neoplasia

#### **HAEMATOLOGY:**

- 1. Anaemias
- 2. Leukaemias
- 3. Interpretation of haematological case charts and identification of instruments

SUKEL COLL

4. Haemorrhagic disorders

#### SYSTEMIC PATHOLOGY:

- 1. Atherosclerosis and IHD
- 2. Rheumatic heart disease
- 3. Pneumonias
- 4. Tumours of lung
- 5. Oral cancer
- 6. Peptic Ulcer
- 7. Cirrhosis
- 8. Glomerulonephritis
- 9. Carcinoma Breast
- 10. Carcinoma Cervix
- 11. Bone Tumours
- 12. Museum specimens
- 13. Museum specimens



#### **CLINICAL PATHOLOGY:**

- 1. Glucose Tolerance Test
- 2. Renal Function Tests
- 3. Differential Diagnosis of Meningitis
- 4. Identification of needles and instruments used in clinical pathology

#### **AUTOPSY:**

CPC of common diseases like 1. Tuberculosis 2. Myocardial infarction 3. Carcinoma/sarcoma 4. Hypertension by students (2 or 3)

#### d. Term-wise distribution

1st term: 1. General Pathology 2. General Neoplasia 3. Haematology & Transfusion

Medicine

2nd term: 1. Systemic Pathology 2. Systemic Neoplasia 3. Clinical Pathology

3<sup>rd</sup> term: Tutorials & Revision.

e. Practicals: Total hours, number & contents

Total hours: 110 Number: 44

**Contents:** 

#### A) GENERAL PATHOLOGY: (n=12)

- 1. Microscopy and tissue processing
- 2. Identify the common types of cells by light microscopy
- 3. Intracellular accumulation
- 4. Acute inflammation
- 5. Chronic inflammation and Repair
- 6. Thrombosis, embolism, infarction and gangrene
- 7. Oedema and congestion
- 8. Disturbances of pigment metabolism
- 9. Tuberculosis
- 10. Leprosy
- 11. Amyloidosis
- 12. Disturbances of growth (Atrophy, hypertrophy, hyperplasia, metaplasia, Dysplasia, hypoplasia)

#### B) HAEMATOLOGY: (n=7)

- 1. Collection of specimen, anticoagulants and common haematological tests (Hb)
- 2. Common Haematological Counts (TLC, DLC) & Interpretation of ESR
- 3. Haemopoiesis
- 4. Investigations in Anaemia
- 5. Investigations in Leukaemia
- 6. Investigations in haemorrhagic disorders
- 7. Blood Banking



#### C) SYSTEMIC PATHOLOGY: (n=18)

- 1. Diseases of blood vessels (Atherosclerosis, syphilitic aortitis)
- 2. Diseases of Heart (IHD & RHD)
- 3. Pneumonias
- 4. Tumours of lung
- 5. Diseases of kidney
- 6. Gross and Microscopic features of peptic ulcer and duodenal ulcer
- 7. Gross and Microscopic features of other intestinal ulcers
- 8. Tumours of GIT
- 9. Diseases of Liver
- 10. Lymphomas
- 11. Diseases of male and female genital system
- 12 &13. Tumours of breast
- 14. Tumours of skin (Pigmented)
- 15. Tumours of skin (non-pigmented)
- 16. Soft tissue tumours
- 17. Tumours of bone
- 18. Diseases of thyroid

#### D) CLINICAL PATHOLOGY: (n=5)

- 1. Urine RE Carryout a bedside routine urine examination and interpret the results.
- 2. Pregnancy test and Semen Analysis (Practical demonstration).
- 3. Common cytological preparations (lecture demonstration).
- 4. CSF examination.
- 5. Serous effusion examination.

#### E) AUTOPSY: (n=2)

1 & 2) To study and describe five autopsy reports.

#### For the batches joining in June 2001 and later

## List of Slides and Specimens that should be shown during the Pathology Practical Classes

These are grouped under two headings: The students

- 1) must see (M)
- 2) desirable to see (D)

Please note that this will be applicable for the batch which will be joining Pathology term in June / July 2001 and later.

#### **DRAWING SLIDES:**



#### HISTOPATHOLOGY:

- 1. Kidney cloudy change (M)
- 2. Fatty change liver (M)
- 3. Uterus leiomyoma with hyaline change (M)
- 4. Kidney amyloid (M)
- 5. Lymph node caseous necrosis (M)
- 6. Kidney infarct (Coagulation necrosis) (M)
- 7. Acute ulcerative appendicitis (M)
- 8. Pyogenic meningitis (M)
- 9. Lepromatous leprosy skin (M)
- 10. Tuberculoid leprosy skin (M)
- 11. Actinomycosis (M)
- 12. Granulation tissue (M)
- 13. Ileum typhoid ulcer (M)
- 14. Tuberculous lymphadenitis (M)
- 15. Amoebic colitis (M)
- 16. Lung haemosiderin pigment or CPC (M)
- 17. Liver CPC (M)
- 18. Artery recent / organised thrombus (M)
- 19. Hashimoto's thyroiditis (D)
- 20. Skin papilloma (M)
- 21. Squamous cell carcinoma (M)
- 22. Adenocarcinoma Colon (M)
- 23. Lymph node metastasis (M)
- 24. Skin capillary haemangioma (M)
- 25. Cavernous haemangioma (M)
- 26. Benign cystic teratoma (Dermoid cyst) (M)
- 27. Stomach chronic peptic ulcer (M)
- 28. Liver Viral hepatitis (Massive/ sub-massive necrosis) (D)
- 29. Liver- portal and biliary cirrhosis (M)
- 30. Lung lobar and broncho pneumonia (M)
- 31. Lung fibrocaseous tuberculosis (M)
- 32. Heart rheumatic myocarditis (D)
- 33. Heart healed infarct (M)
- 34. Aorta atherosclerosis (M)
- 35. Kidney crescentic glomerulonephritis (M)
- 36. Kidney chronic glomerulonephritis (M)
- 37. Kidney chronic pyelonephritis (M)
- 38. Kidney RCC (D)
- 39. Benign prostatic hyperplasia (M)
- 40. Testis seminoma (M)
- 41. Uterus leiomyoma (M)
- 42. Products of conception (M)
- 43. Hodgkin's lymphoma (M)
- 44. Brain tuberculous meningitis (M)
- 45. Brain meningioma (D)
- 46. Bone osteogenic sarcoma (M)
- 47. Bone chondroma (M)
- 48. Bone osteoclastoma (M)



- 49. Skin melanoma and nevus (M)
- 50. Breast fibroadenoma (M)
- 51. Breast carcinoma (M)
- 52. Thyroid colloid goitre (D)
- 53. Thyroid papillary carcinoma (D)
- 54. Skin basal cell carcinoma (M)

#### HAEMATOLOGY:

- 1. Acute blast cell leukaemia (M)
- 2. Chronic myeloid leukaemia (M)
- 3. Eosinophilia (M)
- 4. Iron deficiency anaemia (M)
- 5. Haemolytic anaemia (M)
- 6. Macrocytic anaemia (M)
- 7. Leucocytosis (M)
- 8. Various biochemical charts LFT, GTT, CSF, etc (M)

#### LIST OF SPECIMEN:

- 1. Cell injury and adaptation (Degeneration)
- a) Liver fatty change (M)
- b) Kidney cloudy change (M)
- c) Aorta atheroma (M)
- W.F.irsiPanker.com d) Atheroma with calcification (D)
- e) Kidney stones (M)
- 2. Amyloidosis
- a) Kidney amyloidosis (M)
- b) Spleen amyloidosis (M)
- 3. Necrosis and Gangrene
- a) Kidney infarct (M)
- b) Spleen infarct (M)
- c) Intestine gangrene (M)
- d) Foot gangrene (M)
- e) Lymph node caseation (M)
- 4. Acute inflammation
- a). Lobar pneumonia (M)
- b) Kidney abscess (D)
- c) Liver abscess (D)
- d) Mycetoma foot (D)
- e) Acute appendicitis (M)
- f) Purulent meningitis (M)
- g) Fibrinous pericarditis (M)

- 5. Chronic inflammation
- a) Syphilitic aortitis (D)
- 6. Repair
- a) Heart healed infarct (M)
- 7. Specific inflammation
- a) Ileum typhoid (M)
- b) Amoebic colitis (M)
- c) Amoebic liver abscess (M)
- 8. Chronic specific granulomatous inflammation
- a) Intestine TB ulcer (M)
- b) Brain TB meningitis (M)
- c) Lymph node TB (M)
- d) Lung miliary TB (M)
- e) Fibrocaseous TB (M)
- 9. Pigment disorders
- 10. Disorders of vascular flow and shock
  a). Liver CPC (M)
  b). Lung CPC (M) a). Liver and spleen - Prussian blue reaction (D)

- 11. Thrombosis embolism and infarction
- a) Thrombus artery / yein (M)
- b) Infarction kidney / spleen / brain (M)
- c) Intestine gangrene (M)
- 12. Immunopathology
- a) Heart Rheumatic carditis (M)
- b) Kidney acute glomerulo nephritis (M)
- c) Thyroid Hashimoto's thyroiditis (D)
- 13. Growth disorders
- a) Heart LVH (M)
- b) Kidney atrophy and compensatory hypertrophy (M)



- c) Kidney Hydronephrosis (M)
- 14. Neoplasm
- a) Papilloma skin (M)
- b) Adenomatous polyp (M)
- c) Fibroadenoma breast (M)
- d) Squamous cell carcinoma skin (M)
- e) Adenocarcinoma colon (M)
- f) Metastasis lung (M)
- g) Leiomyoma uterus (M)
- h) Soft tissue lipoma (M)
- j) Haemangioma any site / type (M)
- k) Melanoma (M)
- 1) Dermoid cyst (M)
- m) Teratoma (M)
- 15. Alimentary System
- a) Oesophagus carcinoma (M)
- b) Stomach chronic peptic ulcer (M)
- c) Perforated peptic ulcer (M)
- d) Stomach carcinoma (linitis plastica) (M)
- e) Intestine TB ulcer (M)
- f) Colon Amoebic colitis / bacillary colitis / carcinoma ulcerative / carcinoma polypoidal growth (M)
- 16. Liver
- a) Acute diffuse necrosis (D)
- b) Amoebic abscess (M)
- c) Micronodular / macronodular / mixed cirrhosis (M)
- d) Hepatoma (M)
- e) Metastasis (M)
- 17. Respiratory system
- a) Lung lobar / bronchopneumonia (M)
- b) Bronchogenic carcinoma (M)
- c) Lung abscess (D)
- d) Fibrocaseous TB (M)



#### 18. Cardiovascular System

- a). Rheumatic endocarditis (D)
- b) Fibrinous pericarditis (M)
- c) Mitral stenosis (M)
- d) Aortic stenosis (M)
- e) Bacterial endocarditis (M)
- f) Recent myocardial infarct (D)
- g) Healed myocardial infarct (M)
- h) Atheroma aorta (M)
- j) Atheroma with complications (M)

#### 19. Urinary System

- a) Flea bitten kidney (M)
- b) Large white kidney (M)
- c) Shrunken granular kidney (M)
- d) Acute pyelonephritis (M)
- e) RCC (D)
- f) Wilm's tumour (D)
- g) Papillary carcinoma Urinary bladder (D)

#### 20. Male Reproductive System

- a) SCC penis (M)
- b) Seminoma testis (M)
- c) Teratoma testis (M)
- \*Ranker com d) Benign prostatic hyperplasia (M)

#### 21. Female Reproductive System

- a) Uterus leiomyoma (M)
- b) Carcinoma cervix (D)
- c) Ovary cyst adenocarcinoma (D)
- d) Ovary dermoid cyst (D)

#### 21. Lymphoreticular System

- a) Lymph node TB Lymphadenitis (M)
- b) Lymph node lymphoma (M)
- c) Spleen infarct (M)

#### 22. Central Nervous System

- a) Brain purulent meningitis (M)
- b) Brain tuberculous meningitis (M)
- c) Tuberculoma (D)
- d) Meningioma (D)
- e) Glioma (D)
- f) Haemorrhage CVA (D)



- 23. Bone lesions
- a) Chronic osteomyelitis (D)
- b) Osteoclastoma (M)
- c) Osteogenic sarcoma (M)
- d) Multiple myeloma (D)
- 24. Skin lesions
- a) Squamous cell carcinoma (M)
- b) Basal cell carcinoma (D)
- c) Melanoma skin (any site) (M)
- 25. Diseases of Endocrine organs
- a) Breast fibroadenoma (M)
- b) Breast carcinoma (M)
- c) Thyroid multinodular goitre (M)
- d) Thyroid solitary nodule / adenoma (M)

#### f. Books recommended:

- a) Text book of Pathology by Robbins
- b) Text book of General Pathology Part I & II by Bhende and Deodhare
- c) Clinical Pathology by Talib
- d) Text book of Pathology by Harsh Mohan
- e) Text book of Pathology by Muir
- f) Haematology De Gruchi
- g) IAPM text book of Pathology

#### Reference books:

- a) Anderson's text book of Pathology Vol I & II
- b) Oxford text book of Pathology Vol. I, II & III
- c) Pathology by Rubin and Farber
- d) Pathologic basis of Disease Robbins

#### 5. Evaluation

Methods

Theory, Practicals and Viva

**Pattern of Theory Examination including Distribution of Marks, Questions,** *Time.* 



www.FirstRanker.com

**Nature of Question Paper** 

Faculty with : SECOND MBBS

Year

Subject : PATHOLOGY

Paper : I

Total Marks : 40 Time : 2 Hours

#### Section "A" (8 Marks)

#### **Instructions:**-

- 1) Fill (dark) the appropriate empty circle below the question number once only..
- 2) Use **blue/black** ball point pen only.
- 3) Each question carries **one / half mark.**
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

#### Section "A": MCQ (8 marks)

Question No.	Question Description	Division of Marks	Total Marks
1.	Total MCQs : 16	16 X ½	08

#### Section "B" & "C" (32 Marks)

#### **Instructions:**-

- 1) All questions are compulsory.
- 2) The number to the right indicates full marks.
- 3) Draw diagrams wherever necessary.
- 4) Answer each section in the respective answerbook only. Answers written in the inappropriate sectional answer books will not be assessed in any case.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### **Section "B": BAQ (20**

#### Marks)

Question No.		Que	stion D	escript	ion		Division of Marks	Total Marks
2.	Brief answer	Brief answer questions					5 X 4	20
	(Attempt any five out of six)							
	a)	b)	c)	d)	e)	f)		

**Section "C": LAQ (12** 

Marks)



#### www.FirstRanker.com

Question No.	Question Description	Division of Marks	Total Marks
3.	Attempt any two out of three:	2 X 6	12
	Long answer question only		
	a) b) c)		

Faculty with Year : SECOND MBBS

Subject : PATHOLOGY

Paper : II

Total Marks : 40 Time : 2 Hours

#### Section "A" (8 Marks)

#### **Instructions:**-

- 1) Fill (dark) the appropriate empty circle below the question number once only..
- 2) Use blue/black ball point pen only.
- 3) Each question carries **one / half mark.**
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

## Section "A": MCQ (8 marks)

Question No.	Question Description	Division of Marks	Total Marks		
1.	Total MCQs : 16	16 X ½	08		

## Section "B" & "C" (32 Marks)



www.FirstRanker.com

#### **Instructions:-**

- 1) All questions are compulsory.
- 2) The number to the right indicates full marks.
- 3) Draw diagrams wherever necessary.
- 4) Answer each section in the respective answerbook only. Answers written in the inappropriate sectional answer books will not be assessed in any case.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

#### Section "B": BAQ (20 Marks)

Question No.	Question Description					Division of Marks	Total Marks	
2.	Brief answer questions				5 X 4	20		
	(Attempt any five out of six)							
	a)	b)	c)	d)	e)	f)		

#### Section "C": LAQ (12 Marks)

Question No.	Question Description	Division of Marks	Total Marks	
	Attempt any two out of three:	2 X 6	12	
	Long answer question only a) b) c)			

MMM/FitstRanker.com

<u>Direction:</u> Only short answer questions may be permitted from the portions marked as "Desirable to know"

#### c. Paper wise distribution of theory topics and number of questions:-

A)

Paper I:- General Pathology inclusive of general neoplasia Haematology inclusive of transfusion medicine.

Out of 3 LAQs in Section C, 2 questions should be from General Pathology and General Neoplasia and one question should be from Haematology inclusive of transfusion medicine.

B)

Paper II:- Systemic Pathology inclusive of systemic Neoplasia and Clinical Pathology.

Out of 3 LAQs in Section C, 2 questions should be from Systemic Pathology and Systemic Neoplasia and one question should be from Clinical Pathology.

#### d. Marking scheme

Each paper of 40 marks as shown in the above table.

#### e. Nature of practicals and duration

<u>Practicals</u>	Marks 26
a. 10 Spots 2 minutes each (4 specimen,	
1 instrument, 3 histopathology	10
slides, 1 haematology slide and 1 chart)	
Identification - 1/2 mark together 1 mark for	
Specific short question - 1/2 markeach spot	
b. Urine Examination - Physical and two abnormal constituents	05
c. Histopathology slides: Diagnosis and discussion	03
d. Haematology examination	
i) Peripheral blood smear stain and report	03
ii) Hb/TLC/Blood group	05
, 5 1	
Total	26

f. Viva: duration and topic distribution

# Viva consists of two tables; on each table the student will face 2 examiners for 5 minutes each:

# Table - I General and Systemic Pathology - 7 marks

Table - II Clinical Pathology and Haematology - 7 marks **Total** 14 marks

Number of Students for Practical Examination should not exceed more than  $30\,$  / day

(4 for general Pathology, 4 for Systemic Pathology, 7 for Clinical Pathology including hematology)

### g. Plan for internal assessment

The time table for internal assessment will be as follows:

Theory	15
Practical	15

## Scheme of internal assessment

## From the batches which have joined before June 2001

Examination	Semester/term wise	Total No
Head	distribution	of marks
Theory	III Semester a). Mid-term test (MCQ)	30
	single best response b). III Semester examination	80
	IV Semester	
	a). Mid-term (MCQ) single best response	30
	b). IV Semester examination	80
	V Semester	
	a). Prelims examination	80
	Total theory	300 (reduced to out of 15)



Practicals	III Semester examination	40
	IV Semester examination	40
	Prelims examination	40
	Total Practicals	120 (reduced to out of 12)
Journal	Year ending	03
	Total internal assessment	30

MANN FIRSTRANKET COM





#### From the batches joining in June 2001 and later

Examination Head	n Semester/term wise distribution	Total No of marks
Theory	III Semester Term ending examination	50
	IV Semester Term ending examination	50
	V Semester a). Prelims examination	80
	Total theory	180 (reduced to out of 15)
Practicals	III Semester examination	40
	IV Semester examination	40
	Prelims examination	40
	Total Practicals	120 (reduced to out of 12)
Journal	Year ending	03
	Total internal assessment	30

#### Vth semester

Prelims examination on the basis of University pattern (Theory, practical and viva): Minimum 4 weeks gap between Prelims and University examination.

For the terminal theory examination 28 MCQs (1/2 mark each), 10 SAQs (option of 10 of any 12; 2 marks each) and 2 LAQs (option of 2 of any 3; 8 marks each) will be administered. The total time will be 2 hours 30 mins. This will be followed by practicals (total time 1 ½ hours). To familiarize the students with the `viva' methodology, the marks for the practical may be kept 20 while 20 marks may be given for the viva on theory topics (total 40 marks).

Prelim pattern will be as per the University exam with 2 papers in theory, each of 2 hours duration.

## 2. MICROBIOLOGY

#### 1. Goal

The goal of teaching Microbiology is to provide understanding of the natural history of infectious diseases in order to deal with the etiology, pathogenesis, pathogenicity, laboratory diagnosis, treatment, control and prevention of these infections and infectious diseases.

#### 2. Educational objectives

#### (a) Knowledge

The student at the end of one and half years should be able to: -

- i. state the etiology, pathogenesis and methods of laboratory diagnosis and apply that knowledge in the diagnosis, treatment, prevention and control of communicable diseases caused by microorganisms.
- ii. understand commensal, opportunistic and pathogenic organisms of human body and describe host parasite relationship.
- iii. know and describe the pathogenesis of diseases caused by microorganisms.
- iv. state the sources and modes of transmission of pathogenic and opportunistic micro-organisms including knowledge of insect vectors & their role in transmission of infectious diseases.
- v. choose appropriate laboratory investigations required for clinical diagnosis.

#### (b) Skills

- i. plan and interpret laboratory investigations for diagnosis of infectious diseases and correlate the clinical manifestations with the etiological agent.
- ii. identify common infectious agents with the help of laboratory procedure, acquire knowledge of antimicrobial agents, use of antimicrobial sensitivity tests to select suitable antimicrobial agents for treatment.
- iii. perform simple laboratory tests, which help to arrive at rapid diagnosis.
- iv. be conversant with proper methods of collection, storage & transport of clinical material for microbiological investigations.
- v. understand the principles of immunology and its application in the diagnosis and prevention of infectious diseases including immunization schedule, acquire knowledge of the scope of immunotherapy and different vaccines available for the prevention of communicable diseases.
- vi. understand methods of disinfection and sterilization and their application to control and prevent hospital and community acquired infections including universal biosafety precautions and waste disposal.
- vii. recommend laboratory investigations regarding bacteriological examination of food, water, milk and air.
- viii. the student should be well equipped with the knowledge of prevalent communicable diseases of national importance and of the newer emerging pathogens.



#### (c) Attitude

- i. the student will be regular, sincere, punctual and courteous and regular in studies.
- ii. the student will follow all the rules laid down by the department and participate in all activities.
- iii. the student will understand the importance of, and practice asepsis, waste segregation and appropriate disposal.
- iv. the student will understand the importance of, and practice the best methods to prevent the development of infection in self and patient. (E.g. hand washing, using aprons for hospitals in hospitals only, regularly washing the aprons, wearing gloves (as and when required / handling specimens etc.).
- v. the student will understand the use of the different antimicrobial agents including antibiotics to use judiciously and prevent misuse, (prescribing attitude).
- vi. the student will understand the significance of vaccinations and will receive appropriate vaccines (e.g. TT, Hepatitis B and any other as per needs).
- vii. the student will wash his/her hands with soap after each practical class.
- viii. the student will leave the area allotted for his practical neat and tidy.
- ix. the student will discard the slides in the appropriate container provided for the same.
- x. the student will report any injury sustained in class, immediately.
- xi. the student will report any breakage occurring during class times immediately.
- xii. the student may give suggestions to improve teacher student association.

An. the student may give suggestions to m	iprove teacher stude	in association.
3. Total duration of para-clinical teachi Total number of teaching hours allotted	-0//	3 semesters Total 360 teaching days 250 hrs
(As per MCI guidelines 1997).		
4. Syllabus  a. Learning methods  Lectures, practicals  Distribution of teaching hours		
A) Theory (lectures & (tutorials	71 26	
_	Total <b>97</b>	
B) Practicals and Revision	120	
C) Assessments	33	
Total	250	



#### b. & c. Sequential organisation of contents and their division

The areas of study in Microbiology will include General Microbiology, Systemic Microbiology including Bacteriology, Immunology, Mycology, Virology, Rickettsia, Chlamydia, Parasitology and Applied microbiology in relation to infections and diseases of various systems of the body.

#### A) GENERAL MICROBIOLOGY: (n=10)

No	Topic of lecture	Must know (MK)	Desirable to know (DK)	Hrs
1.	Introduction and Historical background	Definitions: Medical Microbiology, pathogen, commensal, symbiont etc. To cover Anton van Leewenhoek, Pasteur, Lister, Koch, Flemming etc. In History: Scope to cover the importance of Med. Microbiology on diagnosis and prevention of infectious diseases.	Micro-organisms as models in Molecular Biology and Genetic engineering.	1
2.	Morphology of bacteria and Classification	Bacterial cell and its organelles, morphological classification, methods of studying bacteria, staining methods & their principles Grams & Zeil Nelson staining, their importance in presumptive diagnosis, negative staining, dark ground illumination, phase contrast and fluorescent microscopy, briefly about electron microscopy. Principles and applications of all microscopes.		1
3.	Physiology of bacteria including growth requirements & metabolism	Nutrition, respiration (anaerobic & aerobic) and growth of bacteria, growth curve, physical factors influencing growth. Culture media: Definition, classification and application.	Important constituents of culture media.	1
4.	Sterilization	Definition of sterilization, disinfection, asepsis, antiseptics. Ubiquity of bacteria, modes of killing microbes and preventing them, factors determining selection of the mode, factors adversely affecting sterilization. Enumeration of physical methods of sterilization including principle & their application.	Working and efficacy testing of autoclave, inspissator and hot air oven. Central Sterile Supply Department (CSSD) – concept only.	1
5.	Disinfectants	Asepsis and antisepsis, modes of Action of chemical agents on microbes. Phenols, Halogens, Aldehydes, Acids, Alcohol, heavy metals, oxidizing agents etc. Universal biosafety precautions.	Dyes, soaps and detergents. Concentration and contact time.	1
6.	Waste disposal	Definition of waste, classification, segregation, transport and disposal.		1



#### www.FirstRanker.com

7.	Bacterial	Introduction – codon, lac operon, mutation,		1
	genetics and	transformation, transduction & conjugation, R factor,		
	drug	mode of action of antimicrobials on bacteria, mechanism		
	resistance to	of drug resistance and antimicrobial susceptibility tests,		
	antimicrobial	steps taken to minimize emergence of resistant strains		
	agents.	(Antibiotic policy, formulation),		
8.	Host parasite	Commensal, pathogenic and opportunistic organisms,		1
	relationship	their pathogenic factors and modes of transmission.		
	and bacterial	Microbial factors: spores, capsule, toxins, enzymes,		
	infections	intracellular parasitism, antigenic variation & extrinsic		
		factors etc. leading to establishment of infection. Types		
		of infection: primary, secondary, general, local, natural,		
		nosocomial, iatrogenic, zoonotic.		
9.	Normal flora	Introduction – various sites, types and role		1
10.	Methods of	Principles of laboratory diagnosis of infectious diseases.	PCR, RIA, DNA	1
	identification	General procedures for collection transport, processing of	probes.	
	of bacteria.	specimens for microbiological diagnosis.		
	Diagnosis of			
	infectious			
	diseases			
	( direct and			
	indirect)			

#### B) IMMUNOLOGY: (n=12)

No.	Topic	Must know	Desirable to know	Hrs
1	Introduction	Definition of immunity, types of immunity, factors responsible, mechanism of innate immunity, active and passive immunity, local immunity.	Herd immunity	1
2	Antigens, HLA	Definition, types, antigen determinants, properties of antigen. MHC- concept, class- I, II & III functions, indication of typing, MHC restriction.	Nature of determinants, e.g. of haptens, e.g. of cross- reactive antigen.	1
3	Antibodies	Definition, nature, structure of immuno- Globulins, papain digestion, understand isotypic, allotypic and idiotypic markers, immunoglobulin classes, physical and biological properties of immunoglobins.,	Pepsin digestion, amino acid sequence, immunoglobin domain, abnormal immunoglobins.	1
4	Serological reactions	Definition, characteristics, titre, sensitivity & specificity, antigen- antibody interaction-primary, secondary & tertiary, prozone phenomenon, principle, types and application of precipitation, agglutination, complement fixation, enzyme immunoassay, radioimmunoassay, immunofluoroscence test, neutralization and opsonisation.	Techniques of precipitation and their uses, blocking antibodies, antiglobulin reactions, co-agglutination, in vitro test, techniques of EIA, IF & electron microscopy.	2



#### www.FirstRanker.com

5	Immune response	Types, development, role ofthymus, bone marrow, lymph nodes & spleen, cells of lymphoreticular system, morphology and role of T subsets, NK cells, B cells, plasma cells and macrophages, B & T cell activation, antigen processing and presentation, primary and secondary immune response, principle and uses of monoclonal antibodies, factors affecting antibody production, CMI-definition, types, role of T cell and macrophages, definition of immune tolerance and mechanism of tolerance.	Lymphokines and their role, clonal selection, mechanism of immunoregulation, theories of antibodies formation, techniques of monoclonal antibody formation, detection of CMI, types of immunotolerance.	2
6	Complement	Definition, synthesis, pathways, activation, role & biological functions, components, measurement.	Regulation of complement activation, complement deficiency	1
7	Hypersensitivity	Definition, classification, difference between immediate and delayed reaction, mechanism of anaphylaxis, manifestations of anaphylaxis, types of anaphylaxis, atopy, e.g. of anaphylactic reaction, tests for anaphylaxis, mechanism and e.g. of type-II & type-III reactions, mechanism & types of delayed hypersensitivity.	Desensitization in anaphylaxis, type V reaction, ADCC, Shwartzman phenomenon.	1
8	Autoimmunity	Definition, mechanism, classification, pathogenesis.		1
9	Transplantation & tumour immunology	Types of transplants, mechanism of transplant rejection, prevention of graft rejection, GVH reaction, IR to tumours, tumour antigens, mechanism of IR to tumours.	Type of tumour antigens, immune surveillance.	1
10.	Immuno- Deficiency	Classification, examples, laboratory tests for detection, manifestations.		1

www.FirstRanker.com

### C) SYSTEMIC BACTERIOLOGY: (n=21)

#### Pathogenesis includes:

16	imogenesis meiaues.		
•	Infectious agent	- MK	*MK- Must know
•	Habitat	- MK	*DK- Desirable to know
•	Source / reservoir	- MK	
•	Mode	- MK	
•	Infective dose	- MK	
•	Multiplication, spread	- MK	
•	Clinical features, pathology	- MK	
•	Complications	- MK	
•	Virulence factors	- MK	
•	Immunological response	- DK	

#### **Laboratory diagnosis:**

-MK Specimen selection -MK Collection -MK Transport -MK Primary smear, hanging drop -MK Selection of media -MK Pathogenicity testing -MK Anti microbial drug susceptibility testing-MK

Serological interpretation -MK

Key to the abbreviations used in the table below:

Classification, B- Morphology, C- Culture and isolation, D- Biochemical **₩** ₫ reactions,

E- Viability, F - Virulence, G- Diseases, H- Antigens, I- Pathogenesis, J- Laboratory diagnosis, K- Prevention and control, L- Immune response

No	Topic/ hours	A	В	С	D	E	F	G	Н	I	J	K	L
1	Staphylococci	MK	MK	DK	DK	MK	MK	MK	DK	MK	MK	MK	-
	(1 hour)			. 5									
2	Streptococci	MK	MK	BA-MK,	DK	MK	DK						
	Pneumococci			DK DK									
	(1 hour)		7										
3	Neisseria	DK	MK	DK	DK	MK	MK	MK	DK	MK	MK	MK	-
	(1 hour)												
4	C.diptheriae	DK	MK	DK	-	MK	MK	MK	-	MK	MK	MK	DK
	(1 hour)												
5	M.Tuberculosis	MK	MK	LJ,Growth	DK	MK	DK						
	(1 hour)			Time MK									
6	Atypical	MK	MK	DK	DK	MK	MK	MK	-	MK	MK	MK	-
	mycobacteria												
	(1hour)												
7	M.leprae	MK	MK	Isolation-	-	MK							
	(1 hour)			MK									



## www.FirstRanker.com www.FirstRanker.com

8	Bacillus Methods of anaerobiosis & classification. Non sporing anaerobes (1 hour)	MK	MK	MK	DK	MK	MK	MK	-	MK	MK	MK	-
9	Clostridium welchii, tetani, botulinum (1 hour)	MK	DK	MK	-	-	-	MK	-	-	MK	-	-
10	Enterobacteriacea e ( 1 hour)	MK	MK	DK	DK	MK	MK	MK	DK	-	MK	-	-
11	Salmonella typhi (1 hour)	MK	MK	DK	DK	MK	MK	MK	DK	-	MK	-	MK
12	Shigella (1 hour)	MK	MK	DK	DK	MK	MK	MK	DK	_	MK	-	-
13	Vibrio & Campylobacter (1 hour)	MK	MK	DK	DK	MK	MK	MK	-	_	MK	-	-
14	Pseudomonas (1 hour)	-	MK	DK	DK	MK	MK	MK	-	-	MK	-	-
15	Other GNB (1 hour)	List onl y	MK	DK	-	-	MK	-	-	-	MK	-	-
16	Newer bacteria (1 hour)	List onl y	MK	DK	-	- 0	26	-	-	-	MK	-	-
17	Spirochete (1 hour)	MK	MK	DK	15	MK	-	MK	-	-	MK	-	DK
18	Actinomycosis & Nocardia (1 hour)	DK	MK	DK	<u>O:</u>	-	-	-	-	-	MK	-	-
19	Rickettsia (1 hour)	MK	MK	Cillo	-	-	-	-	-	-	MK	-	-
20	Chlamydia & Mycoplasma (1 hour)	MK	MK	19	-	-	-	1	-	-	MK	-	-
21	Bacteriology of air, water, milk and food (1 hour)	-	-	MK	DK	MK	MK	MK	-	MK	MK	MK	-

#### www.FirstRanker.com

#### D) MYCOLOGY: (n=4)

No	Topic	Must know	Desirable to know	Hrs
1	Introduction to	Nature of fungus (definition, differences	Growth requirements,	1
	Mycology	with bacteria), characteristics of fungi,	ecological, medical and	
		common terminologies, brief account of	industrial importance of	
		types of sporulation and morphological	fungi (brief account).	
		classification of fungi. Methods of		
		identification, Infections produced,		
		Lab Diagnosis, processing of skin, hair		
		and nail,		
2	Agents of	Enumerate, predisposing factors,	Colony characteristics	1
	Superficial mycosis	morphological features, Lab. Diagnosis	of dermatophytes	
3	Subcutaneous	Enumerate, predisposing factors,	-	1
	mycosis	Mycetoma, Rhinosporidiosis,		
		Pathogenesis, Lab. Diagnosis		
4	Systemic mycosis	Classification, predisposing factors,	Cultural characteristics	1
	Opportunistic fungal	Candida, Cryptococcus, Histoplasma		
	infections	morphology, pathogenesis, lab.		
		Diagnosis		
		Classification, predisposing factors,		
		Mucor, Aspergillus, Pneumocystis carinii		

#### E) VIROLOGY: (n=12)

Morphology, pathogenesis, laboratory diagnosis, prevention and control for all viruses (Must know).

No	Topic of lecture	Must know	Desirable to know	Hrs
1	General Virology	Size, shape, symmetry, structure, resistance, multiplication, properties and classification of viruses, pathogenesis, bacteriophages, concept of	-	1
2	Laboratory diagnosis of viral infections	virons  Collection of samples, transport, cultivation and methods of diagnosis	-	1
3	Viral immunity	Viral immunity, interferon, viral vaccines	-	1
4	Pox viruses	Small pox and Molluscum	-	1
5	DNA viruses	Papova, Adeno, Herpes viruses (Herpes simplex, Varicella zoster, CMV, EBV)	-	1
6	Respiratory viruses	Orthomyxo and Paramyxoviruses, Ag shift and drift	Rhinoviruses	1
7	Picornaviruses	Polio, Coxsackie, Enteroviruses, Viruses causing diarrhoea – Rota viruses, Immunity (polio)	-	1
8	Hepatitis viruses	Hepatitis viruses, immunity and laboratory diagnosis	-	1
9	Arboviruses	Dengue, KFD, Japanese encephalitis – definition, classification, enumeration in India, Pathogenesis, laboratory diagnosis and control	-	1



#### www.FirstRanker.com

10	Rhabdoviruses	Rabies	-	1
11	Slow and Oncogenic	Characteristics of slow virus infections, pathogenesis	-	1
	viruses	and laboratory diagnosis and viruses associated with		
		it		
12	Retroviruses	HIV/AIDS, Immunity, USP	-	1

#### F) PARASITOLOGY: (n=11)

#### Must know -

- Geographical distribution
- Habitat
- Morphology ( different stages ) found in human beings
- Life cycle
- Pathogenesis
- Laboratory diagnosis
- Treatment
- Control
- Immunoprophylaxis

No	Topic of lecture	Must know	Desirable to know	Hrs	
1	Introduction to medical Parasitology	Parasites: their nature, classification, and explanation of terminologies, epidemiology, emerging parasitic infections, (pathogenicity and laboratory diagnosis)		1	
2	E. histolytica	Amoebic infections		1	
3	Free living amoebae and flagellates	Free living amoebae, PAME, Giardia & Trichomonas		1	
4	Hemoflagellates	L. donovani: life cycle, morphology, pathogenicity, and lab. Diagnosis etc.	Brief account of Trypanosomes	1	
5	Malaria	Malarial parasites: life cycle, morphology, pathogenicity, laboratory diagnosis etc.		1	
6	Misc. Pathogenic protozoa	Toxoplasma,	Cryptosporidium, Isospora, B.coli	1	
7	Cestodes	Taenia saginata & solium, Echinococcus granulosus, life cycle, morphology, pathogenicity and laboratory diagnosis.	Brief mention of other cestodes	1	
8	Trematodes	Schistosomiasis: life cycle, morphology, pathogenicity & lab diagnosis.	Brief account of Fasciola hepatica	1	
9	Intestinal A.duodenale, A. lumbricoides, E. vermicularis, T. Nematodes tritura		brief mention of S. stercoralis, life cycle,morphology laboratory diagnosis	2	
10	Tissue Nematodes	W. bancrofti, D. medinensis, in brief T. spiralis		1	

#### TUTORIALS (APPLIED MICROBIOLOGY): (n=26)

Regular tutorials, student seminars & symposia shall be conducted in addition to lectures.

#### **Students must know:**

- Micro-organisms causing diseases & pathological lesions
- Methods of collection & transportation of specimens
- Methods of laboratory diagnosis
- Serological response produced by organisms
- Interpretation of laboratory report

No	Topic of Tutorial	Hrs		
1	Gastrointestinal infections (diarrhoea and dysentery) and their laboratory diagnosis			
2	Upper respiratory tract infection (patch and sore throat) and their laboratory diagnosis			
3	Lower respiratory tract infection (pneumonia, bronchitis, bronchiolitis etc.) and their			
	laboratory diagnosis			
4	Urinary tract infection and their laboratory diagnosis			
5	Infections of the central nervous system (meningitis, encephalitis, brain abscess) and their			
	laboratory diagnosis			
6	Wound infections and pyogenic infections	2		
7	Septicemia and laboratory diagnosis and PUO			
8	Eye infections and their laboratory diagnosis	2		
9	Sexually transmitted disease (STD) and their laboratory diagnosis (genital ulcerative disease)			
10	Role of laboratory in cross infection, Nosocomial infections / outbreak / epidemic			
11	Vehicles and vectors of communicable disease & zoonosis			
12	Preventive inoculations, immunomodulation and immunotherapy			

## Suggested topics for integrated teaching:

<b>♦</b>	Tuberculosis and Leprosy
	hours. These topics may

- Pyrexia of Unknown Origin (PUO) MBBS.
- ♦ Sexually Transmitted Diseases
- ♦ Hepatitis
- ♦ HIV / AIDS
- ♦ Malaria
- ♦ Diarrhoea and Dysentery

#### d. Term-wise distribution

Note:	Each	topic	may	be	allo	tted	3
be co	vered i	in 2 <sup>nd</sup>	and	3 <sup>rd</sup> to	erm	of 2	2 <sup>nd</sup>

First term (4 months)	Theory- 32 hours	Practical- 32 hours
Second term (5 ½ months)	Theory- 66 hours	Practical- 44 hours
Third term (4 months)	Theory- 48 hours	Practical- 32 hours
Total teaching hours	254 hou	ırs



System-wise distribution

		NO. OF	CLASSES	
TERM	BROAD TOPICS	Lectures	Practicals	TUTORIALS
		(1 hour)	(2 hours)	(2 hours)
First term	General Microbiology	10	28	-
	Systemic Bacteriology	18	24	-
Second term	Systemic bacteriology	3	19	-
	Immunology	12	4	-
	Virology	12	4	-
	Mycology	5	4	-
	Parasitology	11	24	-
Third term	Applied microbiology	-	_	26

### e. Practicals: Total hours, number & contents: (n=100)

No	Topic	Hrs
1.	Introduction to Microbiology, Microscopy and Micrometry.	4
2.	Morphology and physiology of bacteria and methods staining.	4
3.	Growth requirements of bacteria (media) and identification of bacteria (biochemical reactions).	4
4.	Scheme for laboratory diagnosis of infectious diseases and collection, storage and transport of microbiological specimens and laboratory animals.	4
5.	Sterilization- the physical agents. Sterilization- the chemical agents and method of waste disposal.	4
6.	Serological tests for diagnosis of microbial infections.	4
7.	Staphylococci and other gram-positive cocci.	4
8.	Streptococci and Pneumococci.	4
9.	Gram negative cocci	4
10.	C. diphtheriae and other gram positive non sporing bacilli	4
11.	Mycobacteria	4
12.	Spore bearing aerobic and anaerobic bacilli.	4
13.	Enteric gram-negative bacilli – lactose fermenters - E.coli etc	4
14.	Non lactose fermenters – Salmonella and Shigella	4
15.	V. cholerae and other Vibrio like organisms	4
16.	Other gram-negative bacilli including Pseudomonas, Proteus and hospital acquired infection.	4
17.	Spirochetes	4
18.	Actinomycetes, Nocardia and Fungi.	4
19.	Rickettsia, Chlamydia, Mycoplasma and Viruses	4
20.	Introduction to Parasitology and Protozoal infections (including Isospora & Cryptosporidium)	4
21.	Haemoflagellates	4
22.	Plasmodia and toxoplasma.	4
23.	Cystodes and trematodes	4
24.	Intestinal nematodes	4
25.	Extra-intestinal nematodes.	4

The number of practicals and lectures can be changed as per the needs.

Introdu cti on Of "Bio -Me dical W aste" topi c in su bject of Microbiol o g y & P reventive

& Social Medicine



www.FirstRanker.com

### f. Books recommended:

1. Textbook of Microbiology - R. Ananthanarayan C. K. Jayaram Panikar

2. A Textbook of Microbiology - P. Chakraborty

3. Textbook of Medical Microbiology - Rajesh Bhatia & Itchpujani

4. Textbook of Medical Microbiology - Arora and Arora

5. Textbook of Medical Parasitology - C. K. Jayaram Panikar

6. Textbook of Medical Parasitology - Arora and Arora

7. Textbook of Medical Parasitology - S.C.Parija
8. Microbiology in clinical practice - D. C. Shanson

A Textbook of Parasitology - Dr. R.P. Karyakarte and Dr. A.S.

Damle

### Reference books:

1. Mackie McCartney practical Medical Microbiology- Colle JG, Fraser AG

2. Principles of Bacteriology, Virology &

Immunology vol. 1,2,3,4,5
3. Medical Mycology (Emmons)
\*\*Topley Wilsons\*\*

\*Kwon - Chung\*\*

4. Review of Medical Microbiology (Lange)- Jawetz5. Immunology- Weir DM

6. Medical Microbiology- David Greenwood, Richard Stack, John Pentherer

7. Parasitology-

KD Chatterjee

8. Medical virology-

Timbury MC

9. Mackie McCartney Medical, Microbiology vol.1-

Duguid JP

10.Microbial infections-

Marmion BP, Swain RHA

#### 5. Evaluation

### a. Methods

Theory, Practical & Viva

No		Total marks
1	Theory (2 papers – 40 marks each)	80
2	Oral (Viva)	15
3	Practical	25
4	Internal assessment (theory –15, practicals –15)	30
	TOTAL	150

**Passing :** A candidate must obtain 50% in aggregate with a minimum of 50% in Theory including oral and minimum of 50% in practicals and 50% in internal assessment (combined theory and practical).

# b. Pattern of Theory Examination including Distribution of Marks, Questions, Time.



www.FirstRanker.com

**Nature of Question Paper** 

Faculty with : SECOND MBBS

Year

Subject : MICROBIOLOGY

Paper : I

Total Marks : 40 Time : 2 Hours

### Section "A" (8 Marks)

#### **Instructions:**-

- 1) Fill (dark) the appropriate empty circle below the question number once only..
- 2) Use **blue/black** ball point pen only.
- 3) Each question carries one / half mark.
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "A": MCQ (8 marks)

Question No.	Question Description	Division of Marks	Total Marks
1.	Total MCQs : 16	16 X ½	08

### Section "B" & "C" (32 Marks)

#### **Instructions:-**

- 1) All questions are compulsory.
- 2) The number to the right indicates full marks.
- 3) Draw diagrams wherever necessary.
- 4) Answer each section in the respective answerbook only. Answers written in the inappropriate sectional answer books will not be assessed in any case.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "B": BAQ (20 Marks)

Question No.		Qu	estion I	Descript	Division of Marks	Total Marks
	Brief answ	-			5 X 4	20
	(Attempt a	ny five	e out of	six)		
	a)	b)	c)	d)		

### **Section "C": LAQ (12**

#### Marks)

Question No.	Question Description	Division of Marks	Total Marks	
3.	Attempt any two out of three:	2 X 6	12	
	Long answer question only			
	a) b) c)			



www.FirstRanker.com

Faculty with Year : SECOND MBBS

Subject : MICROBIOLOGY

Paper : II

Total Marks : 40 Time : 2 Hours

### Section "A" (8 Marks)

### **Instructions:**-

- 1) Fill (dark) the appropriate empty circle below the question number once only..
- 2) Use **blue/black** ball point pen only.
- 3) Each question carries one / half mark.
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "A": MCQ (8 marks)

Question No.	Question Description	Division of Marks	Total Marks
1.	Total MCQs : 16	16 X ½	08

### Section "B" & "C" (32 Marks)

### **Instructions:-**

- 1) All questions are compulsory.
- 2) The number to the right indicates full marks.
- 3) Draw diagrams wherever necessary.
- 4) Answer each section in the respective answerbook only. Answers written in the inappropriate sectional answer books will not be assessed in any case.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "B": BAQ (20 Marks)

Question No.		Qu	estion I	Descript	ion	Division of Marks	Total Marks
2.	Brief a	nswer (	questio	1S		5 X 4	20
	(Attem	pt any	five out	of six)			
	a)	b)	c)	d)	e)		

### Section "C": LAQ (12 Marks)

Question No.	Question Description	Division of Marks	Total Marks
3.	Attempt any two out of three:	2 X 6	12
	Long answer question only		
	a) b) c)		



### A) MICROBIOLOGY PAPER I

- General Microbiology
- Systematic bacteriology including Rickettsia, Chlamydia and Mycoplasma
- Related applied microbiology.

### B) MICROBIOLOGY PAPER II

- Parasitology
- Mycology
- Virology
- Immunology
- Related applied Microbiology.

### d. Marking scheme

Each paper of 40 marks as shown in the above table.

### e. Nature of practicals and duration

Practical examination in MICROBIOLOGY will be of 26 marks and oral (viva) of 14 marks of THREE hours duration.

		, 0	Total-	26
Q.4:	Spot identification (Ten spots)*	~O/.		10
Q.3:	Stool examination for Ova/cyst	2		6
Q.2:	Zeil – Nelson"s staining			5
Q.1:	Gram staining			5

(\*Spots- Microscopic slides, Mounted specimen, Instruments used in laboratory, Serological tests, Inoculated culture medium, Sterile culture medium, Vaccines / serum).

f. Viva (Two tables)	Marks
A: General & Systemic Microbiology	7
B: Mycology, Parasitology, Virology, Immunology	7

### g. Plan for internal assessment

Marks for Internal Assessment:

Theory: 15 Practical: 15

### From the batches which have joined before June 2001

### Theory examination

Internal assessment for theory shall be calculated on the basis of two term ending examinations (Ist & IInd), two mid term examinations in Ist & IInd term & one preliminary examination at the end of the course (total 5 examinations) till the batch of Nov.2000 admission appears for University examination.



Marks Distribution for theory examination: (Internal assessment)

Examination	MC	Q	SAQ		LAQ		Total	Time
	Marks	No.	Marks	No.	Marks	No.		
Ist & IInd midterm	10	20	20	10/12	-	-	30	1 hr
Ist & IInd term	28	56	24	12/14	28	4/5	80	3 hr

MCQ = Multiple choice questions, SAQ = Short answer questions, LAQ = Long answer questions

Preliminary examination (as per the University pattern -2 papers, 3 h each) 80 marks

Internal assessment marks for theory will be computed to 15 out of total 300 marks.

### **Practicals (Internal assessment):**

Three term ending practicals only.

#### **Marks Distribution of Practicals:**

,	Total- 120
Preliminary Practical examination	40
II <sup>nd</sup> term ending examination	40
I <sup>st</sup> term ending examination	40

Internal assessment marks for Practicals have to be computed out of 12 marks at the end of the curriculum and add marks for journals out of 3. Thus, total marks for practical assessment will be 15.

### From the batches joining in June 2001 and later

Pattern for computation of 'Internal Assessment 'in the subject of Microbiology. (Applicable to the batch joining in June 2001)

#### THEORY:

Internal assessment shall be computed on the basis of three term ending examinations (two terminals & one preliminary examination before the university examination).

EXAMINATION	No.of Papers	Pattern	Duration of	Total
			each paper	Marks
1 <sup>ST</sup> TERMINAL	One -50 Marks	MCQs- 28(14 Marks)	2 Hours 30	50
		SAQs- 10/12 (20 Marks)	Minutes	
		LAQs- 2/3 ( 16 Marks)		
2 <sup>ND</sup> TERMINAL	One - 50 marks	MCQs- 28(14 Marks)	2 Hours 30	50
		SAQs- 10/12(20Marks)	Minutes	
		LAQs- 2/3 (16 Marks)		



PRELIMINARY	Two - 40	Each paper-	2 Hours	80
(As per final	marks each	MCQs- 28(14 Marks)	each paper	
University pattern)		SAQs- 6/7(12Marks)		
		LAQs- 2/3 (14 Marks)		
		(Total- 40 Marks, each paper)		
			TOTAL	180

Final internal assessment in THEORY shall be computed on the basis of actual marks obtained out of 180, reduced to marks out of 15.

### **PRACTICAL:**

Internal assessment in PRACTICALS shall be computed on the basis of three term ending examinations and the marks allotted to practical record book.

EXAMINATION	PATTERN	MARKS	TOTAL
1 <sup>ST</sup> TERMINAL	Exercise(eg.Gram's	10	
	Stain)		40
	Spotting	10	40
	Viva	20	
2 <sup>ND</sup>	Exercise/Exercises(eg	10	
	.Gram's & Z.N. Stain)		40
	Spotting	10	40
	Viva	20	
PRILIMINARY EXAM	Gram's Stain	5	
As per University	Ziehl-Neelson Stain	5	
pattern	Stool Exam.	5	40
	Spotting	10	
	Viva	15	
		TOTAL	120

Actual marks obtained out of 120 shall be reduced to out of 12. Add marks obtained out of 3 for Practical Record Book. Total internal assessment marks for Practical shall be out of (12+3) 15.

## **Pharmacology and Pharmacotherapeutics**

### 1. Goal

The broad goal of teaching pharmacology to undergraduate students is to inculcate in them a rational and scientific basis of therapeutics.

#### 2. Educational objectives

#### (a) Knowledge

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

- i. describe the pharmacokinetics and pharmacodynamics of essential and commonly used drugs
- ii. list the indications, contraindications, interactions and adverse reactions of commonly used drugs
- iii. indicate the use of appropriate drug in a particular disease with consideration of its cost, efficacy and safety for -
  - individual needs, and
  - mass therapy under national health programmes
- iv describe the pharmacokinetic basis, clinical presentation, diagnosis and management of

common poisonings

- v Integrate the list the drugs of addiction and recommend the management
- vi. Classify environmental and occupational pollutants and state the management issues
- vii. Explain pharmacological basis of prescribing drugs in special medical situations such as pregnancy, lactation, infancy and old age
- vii explain the concept of rational drug therapy in clinical pharmacology
- viii state the principles underlying the concept of 'Essential Drugs"
- ix evaluate the ethics and modalities involved in the development and introduction of new drugs

### (b) Skills

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

- i. prescribe drugs for common ailments
- ii. identify adverse reactions and interactions of commonly used drugs
- iii. interpret the data of experiments designed for the study of effects of drugs and bioassays which are observed during the study
- iv. scan information on common pharmaceutical preparations and critically evaluate drug formulations
- v. be well-conversant with the principles of pharmacy and dispense the medications giving proper instructions

#### (c) Integration

Practical knowledge of rational use of drugs in clinical practice will be acquired through integrated teaching vertically with pre-clinical & clinical subjects and horizontally with other para-clinical subjects.

# 3. Total duration of para-clinical teaching (III,IV,V)

3 Semesters

Total 360 teaching days



Adverse Drug Reactions

### www.FirstRanker.com

### www.FirstRanker.com

(n=1)

## **Total number of teaching hours allotted to Pharmacology** 300 hours

4. Syllabus	
a. Learning methods	
Lectures, tutorials, Practicals	
Distribution of teaching hours	
Theory	
<ul><li>lectures</li><li>tutorials</li></ul>	
B) Practicals	120 ± 5
C) Revision & Evaluation (Internal Assessment)	60
b. & c. Sequential organisation of contents & their division	on
A) INTRODUCTION: <i>Pharmacology - a foundation to clin</i> (N=1) Development of the branch of pharmacology; Scope of the as one of the modalities to treat diseases, definition of drug; nature and sources of drugs; subdivisions of pharmacology rational pharmacotherapy	•
B) GENERAL PHARMACOLOGY:	$(N=7\pm2)$
Pharmacokinetics: Absorption, Distribution, Biotransform (n=3) Pharmacodynamics: Principles of Drug Act action,	
Receptors (Nature, Types, Theories, Principles, Regulation	on) (n=1)
Application to pharmacotherapeutics: Relevance of Pharmacotherapeutics	macokinetics and dynamics
in clinical practice, Sequale of repeated administration of	f drug (n=2)



Adrenergic agonists		(n=1)
Adrenergic antagonists I:	□-blockers	(n=1)
Adrenergic antagonists II:	□-blockers	(n=1)
Cholinergic agonists		(n=1)
Anticholinesterases		(n=1)
Antimuscarinic drugs Skeletal muscle relaxants		(n=1) (n=1)
· ·	YSEM INCLUDING DRUGS AFFECTING ON KIDNEYS:	$ \mathbf{NG} \\ (N=14\pm 2) $
General Considerations and O Diuretics Angiotensin Converting Enzyr Sympatholytics & vasodilators		(n=2) (n=1) (n=1)
Management of hypertension		
Antianginal: Nitrates & others Calcium channel blockers	n Rankel com	(n=1) (n=1)
Pharmacotherapy of chest pai	n	
Anticoagulants & Coagulants Thrombolytics & Antiplatelet	Agents	(n=2)
<b>Drugs for CCF: Digitalis gly</b>	cosides, Others agents	(n=2)
Management of CCF		
Antiarrhythmic Agents		(n=1)
Agents used for the manager	ment of shock	(n=1)
Hypolipidaemic drugs		(n=1)
Role of Nitric oxide and endotDK	thelin to be covered in CVS	



www.FirstRanker.com

E) NETEOMOUNICE HARNIAGE DIAGOP. OIETIC FACTORS:	<b>(N=19</b> $\pm$ 2)
<b>Gental Sett side rations</b> of iron deficiency anaemia and megaloblastic anae Erythropoietin,	er(nia;1)
GM-CSF	(n=1)
Management of anaemia	
F) NEUROPSYCHIATRIC PHARMACOLOGY INCLUDING INFLAMMATON, PAIN & SUBSTANCE ABUSE	$(N=15 \pm 2)$
General Considerations	(n=1)
Sedative-Hypnotics Psychopharmacology: Antianxiety; Antipsychotics; Antidepressants	(n=2) (n=3)
Antiepileptics	(n=2)
Therapy of neurodegenerative disorders:	
Anti-Parkinsonian agents; cerebral vasodilators/nootropics Local anaesthetics	(n=1) (n=1)
Analgesics: Opioids; NSAIDs	(n=3)
Pharmacotherapy of pain including migraine Pharmacotherapy of rheumatoid arthritis and gout	
Substance abuse: Management of opioid, alcohol and tobacco addictions	(n=1)
G) MISCELLANEOUS TOPICS - I:	$(N=6\pm2)$
Autocoids (to be covered before pain lectures)	(n=1)
Antiallergics: Antihistaminics	(n=1)
Drugs used for bronchial asthma	(n=1)
Pharmacotherapy of cough	
Drugs acting on immune system:	
Immunostimulants, immunosuppressants; pharmacology of vaccines & se	ra (n=1)
Drugs acting on the uterus	(n=1)





<ul> <li>Antimicrobial agents:</li> <li>Sulphonamides &amp; Cotrimoxazole</li> <li>Quinoline derivatives</li> <li>Penicillins, Cephalosporins &amp; Other □ Lactams</li> <li>Aminoglycosides</li> <li>Macrolides</li> <li>Tetracyclines &amp; Chloramphenicol</li> </ul>	(n=7)
Pharmacotherapy of UTI	
General principles of Antimicrobial use Antimycobacterial therapy: Anti-Kochs agents; Anti-leprotic agents	(n=1) (n=3)
Pharmacotherapy of tuberculosis	
Antiprotozoal agents:	
Antiamoebic, Antimalarials and Anti Kala azar	(n=3)
Pharmacotherapy of malaria	
Antihelminthics	(n=1)
(against intestinal Nematodes and Cestodes; extra intestinal Nen Trematodes)	natodes and
Antifungal agents	(n=1)
Antiviral agents including antiretroviral agents	(n=2)
Pharmacotherapy of STDs	(n=1)
Principles of cancer chemotherapy and their adverse drug reactions (individual agents and regimes need not be taught)	(n=1)
Principles of cancer chemotherapy and their adverse drug reactions	(n=1) (N=12 ± 2)
Principles of cancer chemotherapy and their adverse drug reactions (individual agents and regimes need not be taught)  I) ENDOCRINOLOGY:  Introduction to endocrinology (including Hypothalamic and Anterior Pituitary hormones) Steroids Glucocorticoids: Use and Misuse	$(N=12 \pm 2)$ $(n=1)$ $(n=2)$
Principles of cancer chemotherapy and their adverse drug reactions (individual agents and regimes need not be taught)  I) ENDOCRINOLOGY:  Introduction to endocrinology (including Hypothalamic and Anterior Pituitary hormones) Steroids	$(N=12 \pm 2)$ $(n=1)$





TOCHEMOTHERIAPY INCIDUDING CANCER CHEMOTHERAL Fertility control	PY:(N=22 ± 2)
Chyroxinonsidentibysoid agents Agents affecting calcification Antidiabetic agents: Insulin; Oral antidiabetic drugs	(n=12) (n=1) (n=2)
Pharmacotherapy of Diabetes Mellitus	
I) A CENTE LICED IN CACTDOINTECTINAL DICODDEDG.	(NI_2)

J) AGENTS USED IN GASTROINTESTINAL DISORDERS: (N=2)

Pharmacotherapy of nausea & vomiting (n=1)
Pharmacotherapy of peptic ulcer (n=1)

Management of dyspepsia Management of diarrhoea and constipation

K) PERIOPERATIVE MANAGEMENT: to be covered as a case study

Preanaesthetic medication

Preparation of surgical site: antiseptics etc.

**Local Anaesthetics** 

Skeletal muscle relaxants

Drugs used in post-operative period: analgesics, antiemetics etc.

### L) MISCELLANEOUS TOPICS – II

(N=5-7)

Drug-Drug Interactions (n=1)

Drug use at extremes of age, in pregnancy & in organ dysfunction (n=2)

Use of chelating agents in heavy metal poisonings; Environmental & occupational toxicants and principles of management (particularly cyanide and CO) (n=1)

Ocular pharmacology (n=1)

Dermatopharmacology (n=1)

# Gen e ral An aesthetics... DK

Pharmacotherapy of glaucoma and conjunctivitis

### M) RATIONAL PHARMACOTHERAPY:

(N=4)

Prescription writing and P-drug concept Rational Drug Use; Essential Drug List (EDL)

### **Criticism with reference to Fixed Drug Combinations (FDCs)**

Use and misuse of commonly used preparations: vitamins, antioxidants, enzymes etc.

#### d. Term-wise distribution





### I term

Introduction

General pharmacology

Autonomic pharmacology

Drugs acting on cardiovascular system including drugs affecting coagulation and those acting on the kidneys

### II term

Prescription writing and P-drug concept Rational use of drugs; Essential drug list

Neuro-psychiatric pharmacology including inflammation, pain and substance

abuse

Miscellaneous topics - I

Chemotherapy

**Endocrinology** 

### III term

### Agents used in gastro-intestinal disorders

Peri operative management

### **Miscellaneous topics**

#### Criticism with reference to FDCs

Use and misuse of commonly used preparations: vitamins, antioxidants, enzymes etc.

e. Practicals: Total hours, number & contents

Total hours: 120

*Number:* 18

Contents:

I term practicals

(N=7)

Introduction to Practical Pharmacology, Prescription Writing, Pharmacokinetics I, Routes of Administration: Oral, Routes of Administration: Topical, Routes of Administration: Parenteral, Pharmacokinetics II: Applied Pharmacokinetics



www.FirstRanker.com

II term practicals (N=7)

Pharmacodynamics I (Isolated Tissue, Cat NM junction), Pharmacodynamics II (Dog: BP and Respiration), Screening Techniques for New Drugs, Adverse Drug Reactions, Rational Pharmacotherapy I, Rational Pharmacotherapy II, Sources of Drug Information including scrutiny of Promotional Literature

### III term practicals

(N=4)

Case Study 1, Case Study 2 Revision Practicals (n=2)

#### f. Books recommended:

- 1. Basic & Clinical Pharmacology. Katzung BG (Ed), Publisher: Prentice Hall International Ltd., London.
- 2. Pharmacology & Pharmacotherapeutics. Satoskar RS, Bhandarkar SD (Ed), Publisher: Popular Prakashan, Bombay.
- 3. Essentials of Medical Pharmacology. Tripathi KD (Ed), Jaypee Brothers, publisher:Medical Publishers (P) Ltd.
- 4. Clinical Pharmacology. Laurence DR, Bennet PN, Brown MJ (Ed). Publisher: Churchill Livingstone

### Reference books:

- 2. Goodman & Gilman"s The Pharmacological Basis of Therapeutics. Hardman JG & Limbird LE (Ed), Publisher: McGraw-Hill, New York.
- 3. A Textbook of Clinical Pharmacology, Roger HJ, Spector RG, Trounce JR (Ed), Publisher: Hodder and Stoughton Publishers.

#### 5. Evaluation

Methods Methods

Theory, Practical & viva

b. Pattern of Theory Examination including Distribution of Marks, Questions & Time



www.FirstRanker.com

### **Nature of Question Paper**

Faculty with Year : SECOND MBBS

Subject : PHARMACOLOGY & THERAPEUTICS

Paper : I

Total Marks : 40 Time : 2 Hours

### Section "A" (8 Marks)

#### **Instructions:-**

- 1) Fill (dark) the appropriate empty circle below the question number once only..
- 2) Use blue/black ball point pen only.
- 3) Each question carries one / half mark.
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "A": MCQ (8 marks)

Question No.	Question Description	Division of Marks	Total Marks
1.	Total MCQs : 16	16 X ½	08

### Section "B" & "C" (32 Marks)

### **Instructions:-**

- 1) All questions are compulsory.
- 2) The number to the right indicates full marks.
- 3) Draw diagrams wherever necessary.
- 4) Answer each section in the respective answerbook only. Answers written in the inappropriate sectional answer books will not be assessed in any case.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "B" : BAQ (20 Marks)

Question No.	Question Description				ion	Division of Marks	Total Marks	
	Brief answer questions			5 X 4	20			
	(Attempt any five out of six) a) b) c) d) e) f)							

### Section "C": LAQ (12 Marks)

Question No.	Question Description	Division of Marks	Total Marks	
	Attempt any two out of three:  Long answer question only  a) b) c)	2 X 6	12	



www.FirstRanker.com

Faculty with Year : SECOND MBBS

Subject : PHARMACOLOGY & THERAPEUTICS

Paper : II

Total Marks : 40 Time : 2 Hours

### Section "A" (8 Marks)

#### **Instructions:-**

- 1) Fill (dark) the appropriate empty circle below the question number once only..
- 2) Use **blue/black** ball point pen only.
- 3) Each question carries one / half mark.
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "A": MCQ (8 marks)

Question No.	Question Description	Division of Marks	Total Marks
1.	Total MCQs : 16	16 X ½	08

### Section "B" & "C" (32 Marks)

### **Instructions:-**

- 1) All questions are compulsory.
- 2) The number to the right indicates full marks.
- 3) Draw diagrams wherever necessary.
- 4) Answer each section in the respective answerbook only. Answers written in the inappropriate sectional answer books will not be assessed in any case.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

## Section "B" : BAQ (20 Marks)

Question No.		Qu	estion I	Descript	ion	Division of Marks	Total Marks	
2.	Brief a	nswer (	question	ns		5 X 4	20	
	(Attem	pt any i						
	a)	b)	c)	d)	e)	f)		

### **Section "C": LAQ (12**

#### Marks)

Question No.	Question Description	Division of Marks	Total Marks
	Attempt any two out of three:	2 X 6	12
	Long answer question only		
	a) b) c)		

#### c. Topic distribution

- A) PHARMACOLOGY PAPER I includes General Pharmacology including drugdrug interactions; Autonomic Nervous System, Cardiovascular System including drugs affecting Coagulation and those acting on the Kidneys; Haematinics; Agents used in Gastro-Intestinal Disorders; Ocular pharmacology; Drug use at extremes of age, in pregnancy & in organ dysfunction; Diagnostic & Chelating agents; Environmental & Occupational Pollutants; Vitamins
- B) PHARMACOLOGY PAPER II includes Neuro-Psychiatric Pharmacology including Antiinflammatory-Analgesics and Addiction & its management; Pharmacology in Surgery (particularly peri-operative management); Chemotherapy including Cancer Chemotherapy; Endocrinology; Dermatology; Miscellaneous Topics I (Lipid-derived autacoids; Nitric Oxide; Allergy Histaminics & Antihistaminics including anti-vertigo; Anti Asthmatics; Antitussive agents; Immunomodulators; Vaccines & sera; Drugs acting on the uterus)

### d. Marking scheme

Each paper of 40 marks as shown in the above table.

### e. Nature of practicals and duration

Practical Heads	Marks 26
Prescription writing	5
• Long	(3)
• Short	(2)
Criticism	8
Prescription & rewriting	(4)
Fixed dose formulation	(4)
Clinical Pharmacy	

(dosage forms, routes of administration, label information and instructions)

i. Spots

 a Experimental Pharmacology – Graphs, Models for evaluation, Identification of a drug, Interpretation of data
 b Human Pharmacodynamics - Drug Identification – urine analysis, eye chart, - Subjective / objective effects of a drug
 c Therapeutic problems based on pharmaceutical factors - Outdated tablet,

Bioavailability, Dosage form, Ethics and Sources of drug information (2)

d Recognition of ADRs & interaction of commonly used drugs (2)

For each of the 4 groups (a, b, c & d) 2 spot questions each of 1mark to be asked.



www.FirstRanker.com

Time distribution:

For prescription and criticism the time given will be ½ hour.

For clinical pharmacy practical viva will be taken on pre-formed preparations and/or marketed formulations. The students may be asked to write labels and instructions to be given to the patients or demonstrate how specific dosage forms are administered and state the precautions to be taken/ explained to the patients while using them. The time for this will be 5 min.

For spots 20 min will be given (2 min per spot).

Thus the total time for the practical examination will be 1 hour.

### f. Viva: duration and topic distribution

Viva 14 marks Duration 10 mins

Four examiners 5 mins with each candidate

Two examiners for topics of paper I - systems to be distributed for topics of paper II - systems to be distributed

At each table marks will be given out of 7.

www.FirstRanker.com



### g. Plan for internal assessment

The time-table for internal assessment will be as follows:

### For the batches which have joined before June 2001

#### I term

1<sup>st</sup> midterm: After 60 teaching days (MCQs, and SAQs)

1<sup>st</sup> term ending: After 120 teaching days (Theory and Pharmacy Practicals)

#### II term

2<sup>nd</sup> midterm: After 60 days of 2<sup>nd</sup> term (MCQs and SAQs)

 $2^{nd}$  term ending: At the end of  $2^{nd}$  term (Theory and Practicals: Exptal/Clinical

Pharmacy)

#### IIIrd term

Prelims examination on the basis of University pattern -Theory, Practicals and Viva (Minimum 4 weeks gap mandatory between Preliminary and University examinations)

For each mid-term examination 40 MCQs (each worth 1/2 mark) will be administered to the students along with 5 SAQs (each of 2 marks with an option of 5 out of 6). The total time will be 1 hour and the total marks will be 30.

The term ending examination will be of 80 marks and the nature of questions will be as per University exam.

This will be followed by practical (total time 1½ hours).

To familiarize the students with the "viva-voce", the marks for the practical may be kept at only 20, while 20 marks be reserved for viva on theory topics (total 40 marks).

## For the batches joining in June 2001 and later

#### I term

1<sup>st</sup> term ending: After 120 teaching days (Theory and Pharmacy Practicals)

#### II term

2<sup>nd</sup> term ending: At the end of the 2<sup>nd</sup> term (Theory and Practicals: Exptal/Clinical Pharmacy)

#### IIIrd term

Prelims examination on the basis of University pattern -Theory, Practicals and Viva (Minimum 4 weeks gap mandatory between Preliminary and University examinations)

For the terminal theory examination students will be evaluated by a combination of 28 MCQs (each worth 1/2 mark), 10 SAQs (each of 2 marks with an option of 10 out of 12) and 2 LAQs (option of 2 out of 3 each worth 8 marks). The total time allotted for this 50 marks paper will be 2hours 30minutes.

This will be followed by practicals (total time  $1\frac{1}{2}$  hours).

To familiarize the students with the "viva-vocé", the marks for the practical may be kept at only 20, while 20 marks be reserved for viva on theory topics (total 40 marks).



www.FirstRanker.com

Prelim pattern will be as per the University exam with 2 papers in theory, each of 2 hours duration.

\_\_\_\_\_\_

# FORENSIC MEDICINE AND MEDICAL JURISPRUDENCE INCLUDING TOXICOLOGY

#### 1. Goal

The broad goal of teaching undergraduate students Forensic Medicine is to produce a physician who is well informed about Medico-legal responsibility during his/her practice of Medicine. He/She will also be capable of making observations and inferring conclusions by logical deductions to set enquiries on the right track in criminal matters and associated medico-legal problems. He/She acquires knowledge of law in relation to Medical practice, Medical negligence and respect for codes of Medical ethics.

### 2. Educational objectives

### (a) Knowledge

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

- i. identify the basic Medico-legal aspects of hospital and general practice
- ii. define the Medico-legal responsibilities of a general physician while rendering community service either in a rural primary health centre or an urban health centre
- iii. appreciate the physician's responsibilities in criminal matters and respect for the codes of Medical ethics
- iv. diagnose, manage and identify also legal aspect of common acute and chronic poisonings
- v. describe the Medico-legal aspects and findings of post-mortem examination in cases of death due to common unnatural conditions and poisonings
- vi. detect occupational and environmental poisoning, prevention and epidemiology of common poisoning and their legal aspects particularly pertaining to Workmen's Compensation Act
- vii. describe the general principles of analytical toxicology

#### (b) Skills

A comprehensive list of skills and attitude recommended by Medical Council of India Regulation, 1997 desirable for Bachelor of Medicine and Bachelor of Surgery (MBBS) Graduate for <u>Forensic Medicine and</u>

### **Toxicology**

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

- i. make observations and logical inferences in order to initiate enquiries in criminal matters and Medico-legal problems
- a. to be able to carry on proper Medico-legal examination and documentation/Reporting of Injury and Age
- b. to be able to conduct examination for sexual offences and intoxication
- c. to be able to preserve relevant ancillary materials for medico legal examination
- d. to be able to identify important post-mortem findings in common unnatural deaths
- ii. diagnose and treat common emergencies in poisoning and chronic toxicity
- iii. make observations and interpret findings at post-mortem examination
- iv. observe the principles of medical ethics in the practice of his profession

### (c) Integration

Department shall provide an integrated approach towards allied disciplines like Pathology, Radiology, Forensic Sciences, Hospital Administration etc. to impart training regarding Medico-legal responsibilities of physicians at all levels of health care. Integration with relevant disciplines will provide scientific basis of clinical toxicology e.g. Medicine, Pharmacology etc.

er.com

3. Total duration of Para-clinical teaching

3 Semesters

Total 360 teaching days

Total number of teaching hours allotted for Forensic Medicine & Toxicology

100 hours

#### 4. Syllabus

### a. Learning methods

Lectures, tutorials, practical demonstrations

Distribution of teaching hours



www.FirstRanker.com

Didactic lectures should not exceed one third of the time schedule, two third schedule should include Practicals, Demonstrations, Group discussions, Seminars and Tutorials.

Learning process should include living experiences and other case studies to initiate enquiries in criminal matters and Medico-legal problems.

A) Theory (lectures &		40
Tutorials, seminar & allied)		20
	Total	60

B) Practicals (including demonstrations)		25
		15
	Total	40

This period of training is minimum suggested. Adjustments whenever required, depending on availability of time, be made.

www.FirstRanker.com







#### b. & c. Sequential organisation of contents & their division

### **Topic wise distribution**

The course is designed to meet the needs of a General Practitioner and includes the following topics:

1.	Forensic Medicine	40 Hrs
2.	Toxicology	20 Hrs
3.	Medical Jurisprudence	12 Hrs
4.	Legal Procedures in Medico-Legal cases	08 Hrs
5.	Court attendance when medical	
	evidence is being recorded	04 Hrs
6.	Integrated approach towards	
	allied disciplines	06 Hrs
7.	Tutorial and Seminars	10 Hrs

Total: 100 Hrs

### **Part – 1 Forensic Medicine**: (N=40)

#### **Contents & division**

Note: Must Know (MK), Desirable to Know (DK) and `\*" is Nice to Know (NK)

#### A) DEFINITION, SCOPE RELEVANT TO SUBJECT

- 1. History of Forensic Medicine
- 2. Need, Scope, Importance and probative value of Medical evidence in Crime Investigation

### B) PERSONAL IDENTITY NEED AND ITS IMPORTANCE.

- 1. Data useful for Identification of Living and Dead
- 2. Age estimation and its medico-legal Importance
- 3. Sex determination and it "s medico-legal importance
- 4. Other methods of establishing identity: Corpus Delicti, **Dactylography, Tattoo** marks, Deformities, Scars and other relevant factors
- 5. Identification of decomposed, Mutilated bodies and skeletal remains
- 6. Medico legal aspect of \*DNA fingerprinting a brief introduction
- 7. Medico legal aspect of blood and blood stains

Collection, Preservation and Dispatch of Specimen for Blood and other ancillary material for identification and Medico-legal examination



### C) MECHANICAL INJURIES AND BURNS

- 1. Definition and classification of injuries: Abrasions, Contusions, Lacerations, Incised and Stab injury, Firearm and Explosion injury, Fabricated and **Defence injury**
- 2. Medico-legal aspect of injury/hurt, simple and grievous hurts, murder, Antemortem, Postmortem Wounds, Age of the injury, cause of death and relevant sections of I.P.C., Cr.P.C.
- 3. Causative Weapon and appearance of Suicidal, Accidental and Homicidal injuries
- 4. Physical methods of Torture and their identification
- 5. Reporting on Medico-legal cases of Hurts
- 6. Regional injuries: Head injury, cut throat injuries and Road traffic accident injuries
- 7. Thermal injuries: Injuries due to heat and cold, Frostbite, Burns, Scalds and Bride burning
- 8. Injuries due to Electricity, Lightening

Collection, Preservation and Dispatch of Specimen for Blood and other ancillary material for Medico-legal examination

### D) MEDICO-LEGAL ASPECTS OF SEX, MARRIAGE AND INFANT **DEATH**

- 1. Sexual Offences and perversions: Natural (Rape, Adultery, and Incest), Unnatural (Sodomy, Bestiality and Buccal coitus) Lesbianism, perversions and relevant sections of I.P.C. and Cr.P.C.
- 2. Fertility, **Impotence**, Sterility, **Virginity**, and Nullity of marriage and divorce on .5 Medical ground
- **Delivery**, Paternity, Legitimacy, 3. Pregnancy, Artificial Insemination. \*Fertilisation in Vitro, \*Sterilization (Family Planning Measures)
- Abortions, Medical Termination of pregnancy, criminal abortions, Battered Baby Syndrome, Cot deaths and relevant sections of I.P.C. and Cr.P.C., M.T.P. Act of 1971 and foetal sex determination Act
- **Infant death (Infanticide)** 
  - i. Definition Causes, Manners and Autopsy features
  - ii. Determination of age of Foetus and Infant
  - iii. Signs of live-born, stillborn and dead born child

Collection, Preservation and Dispatch of Specimen: Hair, seminal fluid/ stains and other ancillary material for medico-legal examination, examination of seminal stains and vaginal swabs



### E) MEDICO-LEGAL ASPECTS OF DEATH

- 1. Definition and concept of death, stages, modes, Signs of death and its importance
- **2.** Changes after death, Cooling, Hypostasis, Changes in eye, Muscle changes, Putrefaction, Saponification, Mummification, Estimation of time since death
- 3. **Death Certification**, Proximate causes of death, causes of sudden deaths, Natural deaths. Presumption of death and survivorship, disposal and preservation of dead
- 4. Introduction to \*The Anatomy Act, \*The Human organ transplantation Act. 1994
- 5. Medico-legal aspects and findings of post-mortem examination in cases of **death** due to common unnatural conditions
- 6. **Sudden unexpected death**, deaths from starvation, cold and heat and their medico-legal importance
- 7. Medico-legal aspects of death from Asphyxia, Hanging, Strangulation, Suffocation and Drowning

#### F) MEDICO-LEGAL AUTOPSY

- 1. Autopsy: Objectives, Facilities, Rules and Basic techniques, Proforma for reporting medico-legal autopsy
- 2. Exhumation, examination of mutilated remains, Obscure autopsy and post-mortem artifacts

Collection, preservation and despatch of material for various investigations to Forensic Science Laboratory

#### G) \*FORENSIC PSYCHIATRY

- 1. **Definition, General terminology** and \* Basic concept of normality and abnormality of human behaviour, Civil and Criminal responsibility
- 2. Examination, Certification, restraint and admission to Mental Hospital
- 3. Mental Health Act Principles and Objectives

Part - 2 Toxicology: (N=20)

### A) POISONS AND THEIR MEDICO-LEGAL ASPECTS

- 1. Definition of poison, General consideration and Laws in relation to poisons\Narcotic drugs and psychotropic substances Act, \*Schedules H and L drugs, \*Pharmacy Act, Duties and responsibilities of attending physician
- 2. Common poisons and their classification, Identification of common poisons, Routes of administration, Actions of poisons and factors modifying them, Diagnosis of poisoning (Clinical and Confirmatory), Treatment/Management of cases of acute and chronic poisonings
- 3. Addiction and Habit forming drugs, drug dependence



- 4. Occupational and environmental poisoning, prevention and Epidemiology of common poisoning and their legal aspects particularly pertaining to Workmen"s Compensation Act
- 5. Medico-Legal aspects and findings of postmortem examination in cases of death due to poisonings

#### **B) POISONS TO BE STUDIED**

- 1. Corrosive: Euphoric Acid, Nitric Acid, Hydrochloric Acid, Carbolic Acid and Oxalic Acid, Sodium and Potassium and Ammonium Hydro-Oxide
- 2. Non-metallic, Metallic Poisons and Industrial hazards: Phosphorus and compounds of Lead, Arsenic, Mercury, Copper, and Glass powder
- 3. Plant Poisons: Castor, Croton, Capsicum, Semicarpus Anacardium (Bhilawa), Calatropis Gigantea, Abrus Precatorius (Ratti), Dhatura, Cannabis Indica, Cocaine, Opium, Aconite, Yellow Oleander, Strychnine
- 4. Animal and Bacterial Poisons: Snakes, Scorpion and Food poisoning
- 5. Alcohol (Drunkenness) Ethyl Alcohol, Methyl Alcohol, Kerosene, Barbiturates
- 6. **Asphyxiant & Gaseous Poisons: Carbon Monoxide**, War gases, Hydrocyanic acid, and Cyanides
- 7. Insecticides, pesticides and Miscellaneous poisons: Organo-Phosphorus Compounds, Organo-Chloro Compounds, Carbamates (Carbaryl) and Rodenticides (Phosphides)

Collection, Preservation and forwarding of evidence, remains of poison, body discharges and viscera etc. to Forensic Science Laboratory in cases of poisoning

### C) FORENSIC SCIENCE LABORATORY: (BRIEF)

- 1. Aims, objects, general knowledge about Forensic Science Laboratory
- 2. General principles of analytical toxicology

## <u>Part - 3 Medical Jurisprudence</u>: (N=12)

### A) LEGAL AND ETHICAL ASPECTS OF PRACTICE OF MEDICINE

- 1. The **Indian Medical Council**, the Act, Formation and Functions; **State Medical Council**: Formation, Functions, and Registration
- 2. Rights and obligations of Registered Medical Practitioners and patient, Duties of physicians and patients, Euthanasia
- 3. Infamous conduct, Professional secrecy and privileged communications
- 4. Codes of Medical Ethics, medical etiquette, Medical Negligence and contributory negligence, Precautionary measures and defences for Medical Practitioners against legal actions, Medical/Doctors indemnity insurance, Consumer Protection Act relevant to medical practice
- 5. Medical Ethics and prohibition of Torture & care of Torture Victims

#### B) DEFINITION OF HEALTH AND ITEMS TO CERTIFY ABOUT HEALTH

- 1. Common medico-legal problems in Hospital practice, Consent in Medical Examination and treatment, under treatment/ Sickness and Fitness certificate, maintenance of medical records
- 2. Social, Medical, Legal and Ethical problems in relation to AIDS
- C) ACTS AND SCHEMES RELATED TO MEDICAL PROFESSION IN **BRIEF:**

Workmen"s compensation Act, \* Mental Health Act, Medical Practitioner Act, Protection of human rights Act, 1993, \* National Human Rights Commission, \* Human Organ Transplantation Act and other relevant sections of I.P.C., Cr.P.C. and I.E. Act. Maharashtra civil medical code, Hospital administration manual

### <u>Part – 4 Legal procedures in medico-legal cases</u>: (N=8)

- A. Medico-Legal Investigations of death in suspicious circumstances, different **Inquest**, type of offences
- Types of Criminal courts and their powers, punishments prescribed by law, B. kinds of witnesses, Evidence, Documentary Medical evidence, Dying declaration and Dying deposition
- The Trial of criminal cases, Rules and Conventions to be followed by C. Medical Witness at Medical evidence, subpoena, conduct money
- Relevant Sections from the Indian Evidence Act, Indian Penal code and D. **Criminal Procedure code**

**NOTE:** Must know, desirable to know and ", \* ", is nice to know

#### d. Term-wise distribution

Terms Tuts/Sem/	1/4	Non -	– Lectures	Pracs.	Demos
I Term	15	1	08	06	06
II Term	15	- 1	10	05	06
III Term	10	<u> </u>	07	04	08
Total	40	I	25	15	20

This period of training is the minimum suggested. Adjustments whenever required, depending on availability of time, be made

### e. Practicals (including demonstrations): Total no.of hours & contents

Practicals will be conducted in the laboratories.

Objective will be to assess proficiency in skills, conduct of experiment, interpretation of data and logical conclusion.

Emphasis should be on candidate"s capacity in making observations and logical inferences in order to initiate enquiries in criminal matters and medico-legal problems.

Total Marks: 25 + 15 = 40

Contents:

### **Part 1 Forensic Medicine**

#### Report on:

- 1. Estimation/Certification of Age
- 2. Recording of fingerprints
- 3. Examination/Certification of the Injured [Prescribed Forms]
- [Tescribed Forms]
- 4. Examination of the Causative Agents in cases of Injuries
  - (e.g. Weapons, Instruments)
  - a. Hard and blunt weapons
  - b. Sharp cutting, sharp pointed and Sharp Heavy cutting weapons
  - c. Firearm weapons
- 5. Sexual offences:
  - a. Examination/Certification of Victim
  - b. Examination/Certification of Accused
- 6. Examination of Foetus to opine about age
- 7. Examination of Bones and teeth for Medico-legal purpose to determine age, sex, stature, cause of death, time since death
  - a. Skull and Mandible
  - b. Scapula, Sternum and Upper limb bones
  - c. Sacrum and hip bone/ Pelvic bone
  - d. Lower limb bones

### **Study of:**

- 8. Medical certification of cause of Death as per Birth and Death registration Act [Prescribed Forms]
- 9. **Studies of Skiagrams** for estimation of age, bony injury, foreign body, and pregnancy
- 10. **Photograph of different events of Medico-legal importance** and post-mortem changes
- 11. Study of Various museum specimens of medico-legal significance
- 12. Study of Various slides of medico-legal significance
- 13. Demonstration of Instruments:
  - a. Used in treatment of acute poisoning cases
  - b. Used for causing abortions
  - c. Used for carrying out autopsy

[Standard human autopsy dissection Box/set]

### Part 2 Forensic Toxicology

- Examination/Certification of Alcoholic [Prescribed Forms "A" &"B"]
- 2. Study of Common poisons:

[Sulphuric Acid, Nitric Acid, Hydrochloric Acid, Carbolic Acid and Oxalic Acid, Sodium and Potassium Hydro-Oxide, Phosphorous, Lead, Arsenic, Mercury, Copper, Glass powder, Castor, Croton, Capsicum, Semicarpus Anacardium (Bhilawa), Calatropis Gigantea, Abrus Precatorius (Ratti), Dhatura, Cannabis Indica, Opium, Aconite, Yellow Oleander, Strychnine, Snakes, Scorpion, Alcohol, Methyl Alcohol, Kerosene, Barbiturates, Organophosphorus compounds, Organo Chloro compounds, Carbamates (Carbaryl)] and other commonly used poisons, antidotes and preservatives

#### Part 3 Medical Jurisprudence

**Study of Medical Certificates [Prescribed Forms]** 

- a. Sickness Certificate
- **b.** Fitness Certificate
- c. Certificate of Physical fitness
- d. \* Medical certificate prescribed under Mental Health Act : 1987
- e. \* Medical Certificate of Sound/ Unsoundness of mind.

### Part - 4 Legal procedures in medico-legal cases

**Study of the various prescribed Forms:** 

Consent to surgery Anaesthesia and other Medical services, Request for sterilization, Consent to access to hospital records, Authorization for Autopsy, Dead body Challan used for sending a dead body for post-mortem examination, Request for the second inquest by Magistrate on the dead body, Provisional post-mortem certificate, Post-mortem form, Pictorial Post-mortem form, Form for the Final cause of death, Forms for despatch of exhibits other than the viscera to chemical analyser, Forms for despatch of Viscera for Histopathological Examination, Form for dispatch of viscera to chemical analyser, Forensic Science Laboratory report form, Summons to witness.

Each student shall attend and record as a clerk

- a. As many as possible cases / items of medico-legal importance
- b. 10 cases of medico-legal autopsies

Both above "a" and "b" should be recorded in the approved Proforma in the single Journal. The Journal should be scrutinised by the teacher concerned and presented for the inspection and evaluation during the university examination.

Each student shall attend the court at least 2 cases when Medical Evidence is being recorded.

### f. Books recommended

- 1. Modi"s Textbook of Medical Jurisprudence and Toxicology Ed. 22, 1999, by B.V. Subramanyam, Butterworth
- 2. The Essentials of Forensic Medicine & Toxicology by K.S. Narayan Reddy
- 3. Parikh"s Textbook of Medical Jurisprudence and Toxicology.
- 4. Text Book of Forensic Medicine J.B. Mukherjii VOL 1 & 2
- 5. Principles of Forensic Medicine A. Nandy
- 6. Toxicology at a Glance by Dr S.K. Singhal
- 7. Bernard Knight et. All: Cox"s Medical Jurisprudence & Toxicology

### Reference books

- 1. Russell S. Fisher & Charles S.Petty: Forensic Pathology
- 2. Keith Simpson: Forensic Medicine
- 3. Jurgen Ludwig: Current Methods of autopsy practice.
- 4. Gradwohl Legal Medicine
- 5. A Doctors Guide to Court Simpson
- 6. Polson C.J.: The essentials of Forensic Medicine
- 7. Adelson, L.: The Pathology of Homicide.
- 8. Atlas of Legal Medicine (Tomro Watonbe)
- 9. Sptiz, W.U. & Fisher, R.S.: Medico-legal Investigation of Death.
- 10. A Hand Book of Legal Pathology (Director of Publicity)
- 11. Taylor"s Principles & Practice of Medical Jurisprudence. Edited by A.Keith Mant, Churchill Livingstone.
- 12. Ratanlal & Dhirajlal, The Indian Penal Code; Justice Hidayatullah & V.R. Manohar
- 13. Ratanlal & Dhirajlal, The Code of Criminal procedure; Justice Hidayatullah & S.P. Sathe
- 14. Ratanlal & Dhirajlal, The Law of Evidence; Justice Hidayatullah & V.R. Manohar
- 15. Medical Law & Ethic in India H.S. Mehta
- 16. Bernard Knight: Forensic Pathology
- 17. Code of medical ethics: Medical Council of India, approved by Central Government, U/S 33 (m) of IMC Act, 1956 (Oct 1970)
- 18. Krogman, W.M.: The human skeleton in legal medicine.
- 19. FE Camps, JM Cameren, David Lanham: Practical Forensic Medicine
- 20. V.V. Pillay: Modern Medical Toxicology.

#### 5. Evaluation

#### a. Methods

Theory, Practical & viva

b. Pattern of Theory Examination including Distribution of Marks, Questions, Time



www.FirstRanker.com

### **Nature of Question Paper**

Faculty with Year : SECOND MBBS

Subject : FORENSIC MEDICINE & TOXICOLOGY

Paper : --

Total Marks : 40 Time : 2 Hours

### Section "A" (8 Marks)

### **Instructions:**-

- 1) Fill (dark) the appropriate empty circle below the question number once only..
- 2) Use blue/black ball point pen only.
- 3) Each question carries **one / half mark.**
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "A": MCQ (8 marks)

Question No.	Question Description	Division of Marks	Total Marks
1.	Total MCQs : 16	16 X ½	08

### Section "B" & "C" (32 Marks)

### **Instructions:-**

- 1) All questions are compulsory.
- 2) The number to the right indicates full marks.
- 3) Draw diagrams wherever necessary.
- 4) Answer each section in the respective answerbook only. Answers written in the inappropriate sectional answer books will not be assessed in any case.
- 5) Do not write anything on the blank portion of the question paper. If written anything, such type of act will be considered as an attempt to resort to unfair means.

### Section "B": BAQ (20 Marks)

Question No.		Qu	estion [	Descript	ion		Division of Marks	Total Marks
	Brief an	-				5 X 4	20	
	(Attemp	ot any fi						
	a)	b)	c)	d)	e)	f)		

## **Section "C": LAQ (12**

#### Marks)

Question No.	Question Description	Division of Marks	Total Marks	
3.	Attempt any two out of three:	2 X 6	12	
	Long answer question only			
	a) b) c)			





FirstRanker.com

Section A & C: Forensic Medicine, Toxicology, Medical Jurisprudence, Legal

Procedure

Section B: Forensic Medicine, Toxicology and/or Medical Jurisprudence

### d. Marking scheme

As shown above

### e. Nature of practicals and duration

Practicals Marks 30

Report on: Six Exercises [With available resources] Time: About 2 hrs.

1. An Injured **OR** Age of the child

	<b>OR</b> An Alcoholic <b>OR</b> Sexual offence	07 Marks
2.	Bone <b>OR</b> Determination of age of Foetus	05 Marks
3.	Weapon	05 Marks
4.	Certificate of Sickness, fitness <b>OR</b> Death.	05 Marks
5.	Report on TWO Poison	04 Marks

**6.** Report on any TWO articles: [Skiagram **OR** Photographs **OR** Slides **OR** Museum

Specimens **OR** Instruments] 04 Marks

TOTAL 30 Marks

In respect of items 1 to 6, students will be expected to prepare their Reports as if they would be required to submit it to the investigating authority concerned within the time allotted, and the examiners will be assessing proficiency in skills, conduct of experiment, interpretation of data and logical conclusion. Emphasis should be on candidate's capacity in making observations and logical inferences in order to initiate enquiries in criminal matters and medico-legal problems.

### f. Viva: duration and topic distribution

Viva-vocé: Time: About 20 Min

There will be TWO tables examining each student separately on the topics "a" and "b".

Viva 10 marks Duration 20 mins

Four examiners 10 mins with each candidate

Two examiners for topics a. Toxicology and Medical Jurisprudence Two examiners for topics b. Forensic Medicine and Legal Procedures

At each table marks given will be out of 5 and then added together (total out of 10)



#### g. Plan for internal assessment

The time-table for internal assessment will be as follows:

# SCHEME OF INTERNAL ASSESSMENT WITH FREQUENCY OF EXAMINATIONS FOR THE BATCHES WHICH HAVE JOINED BEFORE JUNE 2001

Marks for internal assessment "A" shall be calculated on the basis of two mid terminals & three terminal college examinations conducted. During mid terminal (periodical examination) assessment should be done by MCQs of Single Best Response type.

Marks for internal assessment "B" shall be calculated on the basis of three terminal college examinations (7 marks) & day-to-day class practical work and Record (3 marks).

Department will maintain a register for periodic evaluation of their students. The internal assessment will be done separately for theory and practical examinations.

### A total of 5 (five) examinations will be conducted as under:

### FREQUENCY AND MARKING OF EXAMINATION FOR INTERNAL ASSESSMENT

Termwise distribution	Theory/Practical (	(Total Marks)
-----------------------	--------------------	---------------

I Term

One Midterm 15 / no practicals

1<sup>st</sup> Terminal 40 / 25

II Term

One Midterm 15 / no practicals

2<sup>nd</sup> Terminal 40 / 40

**III Term** 

One term ending Preliminary 40 / 40

SCHEME OF INTERNAL ASSESSMENT WITH FREQUENCY OF EXAMINATION FOR THE BATCHES JOINING IN JUNE 2001 AND LATER



www.FirstRanker.com

#### I term

1<sup>st</sup> term ending: After 120 teaching days (Theory and Practicals)

#### II term

2<sup>nd</sup> term ending: At the end of the 2<sup>nd</sup> term (Theory and Practicals)

### III term

Prelims examination on the basis of University pattern -Theory, Practicals and Viva (Minimum 4 weeks gap mandatory between Preliminary and University examinations)

For the terminal theory examination students will be evaluated by a combination of 28 MCQs (each worth 1/2 mark), 6 SAQs (each of 2 marks with an option of 6 out of 7) and 2 LAQs (option of 2 out of 3 each worth 7 marks). The total time allotted for this 40 marks paper will be 2 hours.

This will be followed by practicals (total time 1½ hours). The marks for the I term practicals will be 25 and for the II term will be 40.

To familiarize the students with the "viva-vocé", for the I term the marks for the practicals may be kept as 15, while 10 marks be reserved for viva on theory topics (total 25 marks); for the II term the marks for the practicals may be kept as 30, while 10 marks be reserved for viva on theory topics (total 40 marks).

Prelim pattern will be as per the University exam.	
ristRainket	



### REVISED INTERNAL ASSESSMENT EXAMINATION SCHEME w.e.f. JUNE

**YEAR:-** Second MBBS

		1 <sup>st</sup> Term End		2 <sup>nd</sup> Term End			
SN	Subject	Semester	Theory	Practical	Semester	Theory	Practical
			(A)	<b>(B)</b>		(C)	<b>(D)</b>
1.	Pharmacology	III	50	40	IV	50	40
2.	Pathology	III	50	40	IV	50	40
3.	Microbiology	III	50	40	IV	50	40
4.	FMT	III	20	20	IV	20	20

## (B) Calculation Method:

I) Theory Marks to be send to the University out of 15 Except FMT 
$$= \frac{(A)+(C)+(E)}{12} =$$
II) Practical Marks to be send to the University out of 15 Except FMT 
$$= \frac{(B)+(D)+(F)}{8} =$$
III) For FMT Theory Marks to be send to the University out of 10 
$$= \frac{(A)+(C)+(E)}{8} =$$

IV) For FMT Practical Marks to be send to the University out of 10 
$$= \frac{(B)+(D)+(F)}{8} = \frac{(B)+(D)+(F)}{8}$$