

Course Content Second MBBS (from October 2020) Subject: Pathology (Theory and Practical)

(Based on Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 1; page nos.160-203)

1. Total Teaching hours: 230 hours

2. A. Lectures (hours): 80

B. Self-directed learning (hours): 12

C. Clinical postings (hours): NIL

D. Small group teachings/tutorials/Integrated teaching/Practicals (hours): 138

Competency Nos.	Topics & Subtopics	Lectures	Small group teaching	SDL
		80	138	12
		hours	hours	hours
PA1.1 - 1.3	Introduction to Pathology	1	2	
	Core: common definitions and terms, role of pathologist,			
	branches of pathology			
	Practicals: histological techniques, working of a microscope			
	Non-core: history and evolution of pathology			
PA2.1 - 2.8	Cell injury and adaptations	6	6	
	Core: Cell injury, necrosis, apoptosis, intracellular			
	accumulations, cell death, cellular adaptations, calcification,			
	disorders of pigment metabolism, Non-core: cellular aging			
PA3.1-3.2	Amyloidosis- <i>Core</i> : Pathogenesis and pathology of amyloidosis	1	2	
PA4.1 - 4.4	Inflammation	4	4	
	Core: Acute and chronic inflammation, mediators of			
	inflammation, granulomatous inflammation, including TB			
PA5.1	Healing and repair- Core: Repair and wound healing	1	-	
PA6.1- 6.7	Hemodynamic disorders	4	6	
	Core: Edema, hyperemia, congestion, hemorrhage, shock,			
	thrombosis, embolism, ischemia, infarction			
PA7.1-7.5	Neoplasia Neoplasia	5	6	
	Core: Definition and classification of neoplasia, molecular			
	basis of cancer, carcinogenesis, effects of tumour on host,			
	paraneoplastic syndrome, laboratory diagnosis of cancer			
	Non-core: Immunology and immune response to cancer			
PA8.1-8.3	Basic diagnostic cytology	-	2	
	Core: Diagnostic role of cytology, exfoliative cytology			
PA9.1-9.37	Immunopathology	5	2	
	Core: Principles of immunity, hypersensitivity reactions, HLA			
	system, transplant rejection, autoimmunity, systemic lupus			
	erythematosus, pathology of HIV/AIDS			
PA10.1-10.4	Infections and infestations- Core: Malaria, cysticercus, leprosy,	-	2	1
	Non-core: Common bacterial, viral, protozoal, and helminthic			
	diseases			

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Competency Nos.	Topics & Subtopics	Lectures	Small group teaching	SDL
		80 hours	138 hours	12 hours
PA11.1-11.3	Genetic and pediatric diseases-	1	-	1
	Non-core: Mutations, Tumors and tumour-like conditions of			
	infancy and childhood, common storage disorders			
PA12.1-12.3	Environmental and nutritional disease	-	2	
	Core: Air pollution, tobacco, alcohol, protein calorie			
	malnutrition, starvation, obesity			
PA13.1-13.5	Introduction to hematology	2	8	
	Core: Hematopoiesis and extramedullary hematopoiesis,			
	definition and classification of anemia, anticoagulants,			
	investigations in anemia, peripheral smear examination			
PA14.1-14.3	Microcytic anemia- Core: Iron metabolism, microcytic	1	4	
	hypochromic anemia, peripheral smear in microcytic anemia			
PA15.1-15.4	Macrocytic anemia	1	4	
	Core: Vitamin B12 metabolism. Etiology and pathogenesis of	_	•	
	B12 deficiency, laboratory investigations in macrocytic			
	anemia, megaloblastic anemia			
	Non-core: differences between megaloblastic and non-			
	megaloblastic anemia			
PA16.1-16.7	Hemolytic anemia	2	6	
PA10.1-10.7	Core: Definition and classification of hemolytic anemia,		U	
	pathogenesis, features, hematological indices, sickle cell			
	anemia, thalassemia, peripheral smear picture in hemolytic			
	anemia, classification, clinical features of hemolytic anemia			
DA171 172		1	2	
PA17.1-17.2	Aplastic anemia- Non-core: Etiology, pathogenesis, findings,	1	2	
	bone marrow aspiration and biopsy			
PA18.1-18.2	Leukocyte disorders	2	2	
	Core: Leukocytosis, leukopenia, acute and chronic leukemia			
PA19.1-19.7	Lymph node and spleen	2	2	
	Core: Lymphadenopathy, TB lymphadenitis, Hodgkin's			
	disease, non-Hodgkin's lymphoma, splenomegaly			
PA20.1	Plasma cell disorders- Core: Multiple myeloma	-	2	
PA21.1-21.5	Hemorrhagic disorders	3	4	
	Core: Normal hemostasis, vascular and platelet disorders, ITP,			
	hemophilia, clotting disorders, DIC, Vitamin K deficiency			
PA22.1-	Blood banking and transfusion	2	4	1
22.7	Core: Blood group systems, compatibility testing, blood			
	components, transfusion transmitted infections, transfusion			
	reactions, autologous transfusion			
PA23.1-23.3	Clinical Pathology		12	
	Core: Urine analysis, Body fluids, semen analysis, thyroid		- -	
	function tests, renal function tests, liver function tests			
PA24.1-24.7	Gastrointestinal tract:- Core: Etiology, pathogenesis,	5	4	
· /\	pathology, morphology and clinical features of: oral cancer,		, ,	

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Competency Nos.	Topics & Subtopics	Lectures	Small group teaching	SDL
		80 hours	138 hours	12 hours
	nanticulcar disease nalum carcinoma stomach tubercular	ilouis	ilouis	ilouis
	peptic ulcer disease, polyp, carcinoma stomach, tubercular intestine, inflammatory bowel disease, carcinoma colon			
PA25.1-25.6		5	6	
PA25.1-25.6	Hepatobiliary system: Core: Bilirubin metabolism, etiopathogenesis and	5	б	
	classification of jaundice, hepatic failure, pathology,			
	complications, consequences and laboratory diagnosis of viral			
	hepatitis; pathophysiology of alcoholic liver disease and			
	cirrhosis; portal hypertension; hepatocellular carcinoma			
	Interpretation of liver function tests; Serology panel in viral			
	hepatitis (small group)			
PA26.1-26.7	Respiratory system:	4	4	
	Core: Etiopathogenesis, morphology, and complications of:	7	7	
	pneumonia, lung abscess, chronic obstructive airway disease,			
	bronchiectasis, tuberculosis, occupational lung disease, lung			
	tumours, <i>Non-core</i> : pleural tumours, mesothelioma			
PA27.1-	Cardiovascular system:	5	6	1
27.10	Core: Arteriosclerosis, aneurysm, heart failure, ischemic heart			
	disease, laboratory diagnosis of acute coronary syndrome,			
	rheumatic fever and heart disease, infective endocarditis,			
	pericarditis, pericardial effusion, Non-core: cardiomyopathies,			
PA28.1-	Urinary tract	6	4	2
28.16	Core: Histology of kidney, clinical syndromes, acute renal			
	failure, chronic renal failure, acute glomerulonephritis,			
	glomerular manifestations in systemic disease, diseases of			
	tubular interstitium, acute tubular necrosis, acute and chronic			
	pyelonephritis, reflux nephropathy, vascular diseases of			
	kidney, cystic diseases of kidney, urinary calculi and			
	obstructive uropathy, renal tumours			
DA 20 4 20 5	Non-core: thrombotic angiopathies, urothelial tumours			
PA29.1-29.5	Male genital tract:	1	2	
	Core: Testicular tumours, carcinoma penis, benign prostatic			
PA30.1-30.9	hyperplasia, carcinoma prostate, <i>Non-core</i> : prostatitis	1	6	2
PA3U.1-3U.9	Female genital tract:	1	Ö	2
	Core: Pathogenesis, etiology, pathology, diagnosis, and progression of: carcinoma cervix, carcinoma endometrium,			
	leiomyoma, leiomyosarcoma, ovarian tumours, gestational			
	trophoblastic neoplasms, <i>Non-core</i> : cervicitis, endometriosis,			
	adenomyosis, endometrial hyperplasia			
PA31.1-31.4	Breast-	1	2	
. 721.1-21.4	Core: Benign breast disease, carcinoma breast,	1	_	
	Non-core: gynecomastia			
D4224 22 0	Endocrine system	4	4	2
PA37 1-37 4			-	_
PA32.1-32.9	Core: etiology, pathogenesis, pathology and iodine			



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		Lectures	Small	SDL
Competency	Topics & Subtopics		group	
Nos.			teaching	
		80	138	12
		hours	hours	hours
	hypothyroidism; epidemiology, etiopathogenesis, pathology,			
	laboratory diagnosis, complications of diabetes mellitus			
	Non-core: hyperparathyroidism, pancreatic cancer, adrenal			
	insufficiency, Cushing syndrome, adrenal neoplasms			
PA33.1-33.5	Bone and soft tissue	1	4	1
	Core: Osteomyelitis, bone tumours, soft tissue tumors			
	Non-core: Rheumatoid arthritis, Paget's disease of bone			
PA34.1-34.4	Skin	1	4	
	Core: Squamous cell carcinoma, basal cell carcinoma			
	Non-core: Nevus, melanoma,			
PA35.1-35.3	Central nervous system	2	4	
	Core: CSF findings in meningitis, CNS tumours			
PA36.1	Eye- Non-core: Retinoblastoma			1
AETCOM 2.4	Working in a health care team		2	
AETCOM 2.8	What does it mean to be family member of a sick patient?		2	

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Subject: Pathology LIST OF PRACTICALS

GENERAL PATHOLOGY

- 1. Histological techniques, tissue processing, microscopy
- 2. Intracellular accumulations, calcification
- 3. Cellular adaptations
- 4. Disorders of pigment metabolism
- 5. Amyloidosis
- 6. Acute inflammation
- 7. Chronic inflammation and repair
- 8. Tuberculosis and leprosy
- 9. Hemodynamic disturbances
- 10. Neoplasia
- 11. Infections and infestations

HEMATOLOGY

- 1. Collection of specimens, anticoagulants, normal hematopoiesis
- 2. Hemoglobin estimation: Interpretation of report
- 3. Hematocrit and Erythrocyte sedimentation rate: Interpretation of report
- 4. Complete blood count: Interpretation of report (without flags) from automated cell counter
- 5. Preparation of peripheral smear and performing differential leukocyte count, interpretation of peripheral smear
- 6. Investigations of anemia
- 7. Investigations of leukemia
- 8. Plasma cell dyscrasias
- 9. Investigation of bleeding and clotting disorders
- 10. Blood banking: Performing blood grouping and interpretation of results

SYSTEMIC PATHOLOGY

- 1. Lymphoma
- 2. Splenomegaly
- 3. Gastrointestinal tract: Ulcers
- 4. Intestinal polyp and carcinoma intestine
- 5. Cirrhosis and hepatocellular carcinoma
- 6. Pneumonia, bronchiectasis
- 7. Pulmonary tuberculosis and bronchogenic carcinoma
- 8. Atherosclerosis
- 9. Left ventricular hypertrophy, myocardial infarction, lab diagnosis of MI
- 10. Rheumatic heart disease and infective endocarditis
- 11. Chronic contracted kidney, glomerulonephritis, pyelonephritis
- 12. Urinary calculi, Renal cell carcinoma,
- 13. Male genital tract
- 14. Female genital tract: Carcinoma cervix, Carcinoma endometrium
- 15. Leiomyoma, Ovarian tumours
- 16. Gestational trophoblastic disease
- 17. Breast
- 18. Thyroid
- 19. Bone and soft tissue tumours
- 20. Skin
- 21. CNS tumours



CLINICAL PATHOLOGY

- 1. Urine analysis: Interpretation of physical, chemical and microscopic examination results
- 2. Semen analysis: Lecture demonstration, interpretation of report
- 3. Basic cytological techniques: FNAC and exfoliative cytology (Lecture demonstration)
- 4. CSF examination: Lecture demonstration and interpretation of reports
- 5. Body fluids: Interpretation of serous effusion reports
- 6. Interpretation of kidney function tests
- 7. Investigations in jaundice
- 8. Investigations in diabetes mellitus

AUTOPSY

Indications and technique, autopsy findings in common conditions like myocardial infarction, cirrhosis, portal hypertension, bronchogenic carcinoma, miliary tuberculosis, renal cell carcinoma etc.

Suggested LIST OF SPECIMENS

- 1. Fatty liver
- 2. Vesicular mole (hydropic change)
- 3. Cardiac hypertrophy
- 4. Kidney- atrophy
- 5. Large white kidney-amyloidosis
- 6. Anthracosis
- 7. Hemochromatosis- Prussian blue reaction
- 8. Acute appendicitis
- 9. Serofibrinous pericarditis
- 10. Abscess- lung/ liver
- 11. Tubercular lymph node- caseation, matted lymph nodes
- 12. CVC Liver
- 13. Splenic infarct
- 14. Renal infarct
- 15. Myocardial infarction
- 16. Leiomyoma
- 17. Squamous papilloma
- 18. Hemangioma- Liver
- 19. Intestinal polyp
- 20. Squamous cell carcinoma-skin/cervix/penis
- 21. Adenocarcinoma- intestine
- 22. Melanoma
- 23. Enlarged lymph node: Hodgkin's disease
- 24. Benign ulcer-Peptic ulcer
- 25. Tubercular intestine
- 26. Amebic ulcer
- 27. Malignant ulcer- Carcinoma stomach
- 28. Cirrhosis
- 29. Hepatocellular carcinoma
- 30. Pulmonary tuberculosis
- 31. Miliary tuberculosis
- 32. Rheumatic heart disease mitral stenosis
- 33. Small contracted kidney
- 34. Renal cell carcinoma
- 35. Hydronephrosis
- 36. Urinary calculi
- 37. Wilm's tumour



- 38. Carcinoma penis
- 39. Seminoma
- 40. Carcinoma cervix
- 41. Carcinoma endometrium
- 42. Dermoid cyst
- 43. Ovarian cystadenoma
- 44. Leiomyoma
- 45. Carcinoma breast
- 46. Goitre
- 47. Solitary thyroid nodule
- 48. Giant cell tumour
- 49. Fibroadenoma of breast
- 50. Lipoma
- 51. Metastatic (Liver/Lung)
- 52. Fat necrosis
- 53. Meningioma

LIST OF SLIDES

- 1. Cloudy swelling-kidney
- 2. Fatty liver
- 3. Hyaline change in leiomyoma
- 4. Benign prostatic hyperplasia
- 5. Squamous metaplasia
- 6. Calcification
- 7. Amyloidosis- kidney
- 8. Nevus
- 9. Anthracosis
- 10. Acute appendicitis
- 11. Acute pyogenic meningitis
- anul 12. Tubercular lymphadenitis (Caseous necrosis, granuloma)
- 13. Tuberculoid leprosy
- 14. Lepromatous leprosy
- 15. Pulmonary edema
- 16. CVC lung
- 17. CVC liver
- 18. Thrombus
- 19. Renal infarct
- 20. Myocardial infarction
- 21. Capillary hemangioma
- 22. Squamous papilloma
- 23. Squamous cell carcinoma
- 24. Adenocarcinoma
- 25. Actinomycosis
- 26. Rhinosporidiosis
- 27. Cysticercosis
- 28. PS-Malaria
- 29. Eosinophilia
- 30. Neutrophilia
- 31. Microcytic anemia
- 32. Macrocytic anemia
- 33. Sickle cell anemia
- 34. Acute leukemia



- 35. Chronic myeloid leukemia
- 36. Hodgkin's disease
- 37. Peptic ulcer
- 38. Tubercular intestine
- 39. Adenocarcinoma intestine
- 40. Cirrhosis
- 41. Lobar pneumonia
- 42. Bronchopneumonia
- 43. Pulmonary tuberculosis
- 44. Atherosclerosis
- 45. Myocardial infarction
- 46. Crescentic glomerulonephritis
- 47. Chronic pyelonephritis
- 48. Renal cell carcinoma
- 49. Benign prostatic hyperplasia
- 50. Seminoma
- 51. Fibroadenoma
- 52. Carcinoma breast
- 53. Colloid goiter
- 54. Papillary carcinoma thyroid
- 55. Basal cell carcinoma
- 56. Melanoma
- 57. Lipoma
- 58. Osteogenic sarcoma
- 59. Giant cell tumour

CASE-BASED LEARNING

- 1. Microcytic anemia
- 2. Macrocytic anemia
- 3. Hemolytic anemia
- 4. Multiple myeloma
- 5. Hepatitis
- 6. Obstructive jaundice
- 7. Hemolytic jaundice
- 8. Nephrotic syndrome
- 9. Meningitis

CHARTS

- FirstRanker.com 1. Interpretation of microcytic anemia
- 2. Interpretation of macrocytic anemia
- 3. Interpretation of hemolytic anemia
- 4. Interpretation of acute leukemia
- 5. Interpretation of chronic leukemia
- 6. Interpretation of multiple myeloma
- 7. Interpretation of bleeding disorder
- 8. Interpretation of clotting disorder
- 9. Interpretation of Liver disorders
- 10. Interpretation of Renal disorders
- 11. Interpretation of Thyroid disorders
- 12. Interpretation of acute myocardial infarction
- 13. Pyogenic meningitis
- 14. Tubercular meningitis
- 15. Viral meningitis
- 16. Diabetes mellitus



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Paper wise distribution of topics for Prelim & MUHS Annual Examination Year: Second MBBS

Subject: Pathology **Paper** Section **Topics** Topics of the paper I Α General Pathology: 1. Cell injury and adaptation 2. Amyloidosis 3. Inflammation and repair 4. Tuberculosis and leprosy 5. Hemodynamic disturbances 6. Immunopathology 7. Neoplasia 8. Infections and infestations 9. Basic diagnostic cytology 10. Histological techniques, tissue processing 11. Genetic and pediatric diseases 12. Environmental and nutritional diseases Hematology 1. Introduction to hematology 2. Microcytic anemia 3. Macrocytic anemia 4. Hemolytic anemia 5. Aplastic anemia 6. Leukocyte disorder 7. Lymph node and spleen 8. Plasma cell disorders 9. Hemorrhagic disorders 10. Blood banking and transfusion medicine **AETCOM 2.4 and 2.8** Topics of the paper I Ш Α Systemic Pathology 1. Gastrointestinal tract 2. Hepatobiliary system 3. Respiratory system 4. Cardiovascular system 5. Urinary tract 6. Male genital tract 7. Female genital tract 8. Breast 9. Endocrine system 10. Bone and soft tissue 11. Skin 12. Central nervous system Clinical Pathology 1. Urine analysis 2. Body fluid analysis 3. CSF analysis 4. Liver function test 5. Renal function test 6. Diabetes mellitus 7. Thyroid function test



Second MBBS Internal Assessment Subject: Pathology

Applicable w.e.f October 2020 onwards examination for batches admitted from Ju

	I-Ex	cam (After 3 months , J	an)	II-Exa			
Phase	Theory	Practical (Including 10 Marks for Journal & Log Book)	Total Marks	Theory	Practical Including 10 Marks for Journal & Log Book	Total Marks	Theo
Second MBBS	100	100	200	100	100	200	Paper 1 Paper 2

- 1. There will be 3 internal assessment examinations in Pathology. The structure of the internal assessment be similar to the structure of University examinations.
- 2. It is mandatory for the students to appear for all the internal assessment examinations.
- 3. First internal assessment examination will be held in January, second internal assessment examination internal assessment examination will be held in July.
- 4. A student who has not taken minimum required number of tests for Internal Assessment each in the eligible for University examinations.
- 5. There will be only one additional examination for absent students (due to genuine reason) after app Grievances Committee. It should be taken after preliminary examination and before submission of ir University.
- 6. Internal assessment marks for theory will be out of 400 and practical will be out of 200.



- 7. Reduce total theory internal assessment to 40 marks and total practical internal assessment to 40 m least 50% marks of the total marks (combined in theory and practical; not less than 40 % marks in the eligible for appearing University examination
- 8. Conversion Formula for calculation of marks in internal assessment examinations

	First IA	Second IA	Third IA (Prelim)	Total	Internal assessment marks: Conversion formula (out of 40)	Eligibility to a University exa (after convers (40% separate	amination sion out ely in Th
						Practical, 50%	6 Combi
Theory	100	100	200	400	Total marks obtained	16	
				0,	10	(Minimum)	Total c
Practical	50	50	100	200	Total marks obtained	16	Practio
			0.0		05	(Minimum)	

While preparing Final Marks of Internal Assessment, the rounding-off marks shall done as illustrated in following table

Internal Assessment Marks	Final rounded marks
15.01 to 15.49	15
15.50 to 15.99	16

- 9. Internal assessment marks will reflect as separate head of passing at the summative examination.
- 10.Internal assessment marks will not to be added to marks of the University examinations and will be s



Second MBBS Practical Mark's Structure

Applicable w.e.f October 2020 onwards examination for batches admitted from June 2

					Subject: Path	nology (I te	rm)	
			Practical				Ot	ral/Viva
Seat No.							+ ,	
	OSPE	PS/DLC	CBC report interpretation	Blood group	Histopathology slide	Total	Gross specimen General Pathology	Hematolog
Max. Marks	10	5	5	5	5	30	7	8
				20				

			all.	Subject: Path	ology (II term)			
			Practical	Oral/Viva				
Seat No.								
	OSPE	Urine report interpretation	Histopathology slide	Total	Gross specimen Systemic Pathology	Clinical pathology		
Max. Marks	20	5	5	30	7	8		



Subject: Pathology Prelim Examination

	Practical													
Seat No.														
	OSPE	PS/DLC	Urine interpretation	CBC report interpretation	Blood group	Histopathology slide	Logbook	Total	Gross specimens					
Max. Marks	32 10 10		5	5	8	10	80	10						
					70,									

Subject: Pathology M.U.H.S. Final Exam.

	Practical													
Seat No.		Total												
	OSPE	PS/DLC	Urine interpretation	CBC report interpretation	Blood group	Histopathology slide		Gross specimens						
	Α	В	С	D	E	F	G	н						
Max. Marks	32	10	10	5	5	8	70	15						
	1													



For Urine examination

Students are not expected to perform urine examination, but to interpret results. Clinical cases with urinary findings may be

Suggested OSPE stations

- 1. Clinical chart interpretation (Clinical Pathology) 5 marks
- 2. Clinical chart interpretation (Clinical Pathology) 5 marks
- 3. Clinical chart interpretation (CSF) 5 marks
- 4. Clinical chart interpretation (Hematology)- 5 marks
- 5. Slides (3)- Hematology, benign, inflammatory- 6 marks
- 6. Specimens (3)-6 marks



Subject: Pathology

LIST OF PRACTICALS

GENERAL PATHOLOGY

- 1. Histological techniques, tissue processing, microscopy
- 2. Intracellular accumulations, calcification
- 3. Cellular adaptations
- 4. Disorders of pigment metabolism
- 5. Amyloidosis
- 6. Acute inflammation
- 7. Chronic inflammation and repair
- 8. Tuberculosis and leprosy
- 9. Hemodynamic disturbances
- 10. Neoplasia
- 11. Infections and infestations

HEMATOLOGY

- 1. Collection of specimens, anticoagulants, normal hematopoiesis
- 2. Hemoglobin estimation: Interpretation of report
- 3. Hematocrit and Erythrocyte sedimentation rate: Interpretation of report
- 4. Complete blood count: Interpretation of report (without flags) from automated cell counter
- 5. Preparation of peripheral smear and performing differential leukocyte count, interpretation of peripheral smear
- 6. Investigations of anemia
- 7. Investigations of leukemia
- 8. Plasma cell dyscrasia
- 9. Investigation of bleeding and clotting disorders
- 10. Blood banking: Performing blood grouping and interpretation of results

SYSTEMIC PATHOLOGY

- 1. Lymphoma
- 2. Splenomegaly
- 3. Gastrointestinal tract: Ulcers
- 4. Intestinal polyp and carcinoma intestine
- 5. Cirrhosis and hepatocellular carcinoma
- 6. Pneumonia, bronchiectasis
- 7. Pulmonary tuberculosis and bronchogenic carcinoma
- 8. Atherosclerosis
- 9. Left ventricular hypertrophy, myocardial infarction, lab diagnosis of MI
- 10. Rheumatic heart disease and infective endocarditis
- 11. Chronic contracted kidney, glomerulonephritis, pyelonephritis
- 12. Urinary calculi, Renal cell carcinoma,
- 13. Male genital tract
- 14. Female genital tract: Carcinoma cervix, Carcinoma endometrium
- 15. Leiomyoma, Ovarian tumours
- 16. Gestational trophoblastic disease
- 17. Breast
- 18. Thyroid
- 19. Bone and soft tissue tumours
- 20. Skin
- 21. CNS tumours



CLINICAL PATHOLOGY

- 1. Urine analysis: Interpretation of physical, chemical and microscopic examination results
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- 4. CSF examination: Lecture demonstration and interpretation of reports
- 5. Body fluids: Interpretation of serous effusion reports
- 6. Interpretation of kidney function tests
- 7. Investigations in jaundice
- 8. Investigations in diabetes mellitus

AUTOPSY

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LIST OF SPECIMENS

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- 6. Anthracosis
- 7. Hemochromatosis- Prussian blue reaction
- 8. Acute appendicitis
- 9. Serofibrinous pericarditis
- 10. Abscess-lung/liver
- restrantei 11. Tubercular lymph node- caseation, matted lymph nodes
- 12. CVC Liver
- 13. Splenic infarct
- 14. Renal infarct
- 15. Myocardial infarction
- 16. Leiomyoma
- 17. Squamous papilloma
- 18. Hemangioma- Liver
- 19. Intestinal polyp
- 20. Squamous cell carcinoma-skin/cervix/penis
- 21. Adenocarcinoma- intestine
- 22. Melanoma
- 23. Enlarged lymph node: Hodgkin's disease
- 24. Benign ulcer-Peptic ulcer
- 25. Tubercular intestine
- 26. Amebic ulcer
- 27. Malignant ulcer- Carcinoma stomach
- 28. Cirrhosis
- 29. Hepatocellular carcinoma
- 30. Pulmonary tuberculosis
- 31. Miliary tuberculosis
- 32. Bronchectasis
- 33. Bronchogenic carcinoma
- 34. Atherosclerosis
- 35. Myocardial infarction



- 36. Small contracted kidney
- 37. Renal cell carcinoma
- 38. Hydronephrosis
- 39. Urinary calculi
- 40. Wilm's tumour
- 41. Carcinoma penis
- 42. Seminoma
- 43. Carcinoma cervix
- 44. Carcinoma endometrium
- 45. Dermoid cyst
- 46. Ovarian cystadenoma
- 47. Leiomyoma
- 48. Carcinoma breast
- 49. Goitre
- 50. Solitary thyroid nodule
- 51. Giant cell tumour
- 52. Fibroadenoma of breast
- 53. Lipoma
- 54. Metastasis of Liver/Lung
- 55. Fat necrosis
- 56. Meningioma

LIST OF SLIDES

- 1. Cloudy swelling-kidney
- 2. Fatty liver
- 3. Hyaline change in leiomyoma
- 4. Benign prostatic hyperplasia
- 5. Squamous metaplasia
- 6. Calcification
- 7. Amyloidosis- kidney
- 8. Nevus
- 9. Anthracosis
- 10. Acute appendicitis
- 11. Acute pyogenic meningitis
- 12. Tubercular lymphadenitis (Caseous necrosis, granuloma)
- 13. Tuberculoid leprosy
- 14. Lepromatous leprosy
- 15. Pulmonary edema
- 16. CVC lung /Liver
- 17. Thrombus
- 18. Renal infarct
- 19. Myocardial infarction
- 20. Capillary hemangioma
- 21. Squamous papilloma
- 22. Squamous cell carcinoma
- 23. Adenocarcinoma
- 24. Actinomycosis
- 25. Rhinosporidiosis
- 26. Cysticercosis
- 27. PS-Malaria



- 28. Eosinophilia
- 29. Neutrophilia
- 30. Microcytic anemia
- 31. Macrocytic anemia
- 32. Sickle cell anemia
- 33. Acute leukemia
- 34. Chronic myeloid leukemia
- 35. Hodgkin's disease
- 36. Peptic ulcer
- 37. Tubercular intestine
- 38. Adenocarcinoma intestine
- 39. Cirrhosis
- 40. Lobar pneumonia
- 41. Bronchopneumonia
- 42. Pulmonary tuberculosis
- 43. Atherosclerosis
- 44. Myocardial infarction
- 45. Crescentic glomerulonephritis
- 46. Chronic pyelonephritis
- 47. Renal cell carcinoma
- 48. Benign prostatic hyperplasia
- 49. Seminoma
- 50. Fibroadenoma
- 51. Carcinoma breast
- 52. Colloid goiter
- www.FirstRanker.com 53. Papillary carcinoma thyroid
- 54. Basal cell carcinoma
- 55. Melanoma
- 56. Lipoma
- 57. Osteogenic sarcoma
- 58. Giant cell tumour

CASE-BASED LEARNING

- 1. Microcytic anemia
- 2. Macrocytic anemia
- 3. Hemolytic anemia
- 4. Multiple myeloma
- 5. Hepatitis
- 6. Obstructive jaundice
- 7. Hemolytic jaundice
- 8. Nephrotic syndrome
- 9. Meningitis

CHARTS

- 1. Interpretation of microcytic anemia
- 2. Interpretation of macrocytic anemia
- 3. Interpretation of hemolytic anemia
- 4. Interpretation of acute leukemia
- 5. Interpretation of chronic leukemia



- 6. Interpretation of multiple myeloma
- 7. Interpretation of bleeding disorder
- 8. Interpretation of clotting disorder
- 9. Interpretation of Liver disorders
- 10. Interpretation of Renal disorders
- 11. Interpretation of Thyroid disorders
- 12. Interpretation of acute myocardial infarction
- 13. Pyogenic meningitis
- 14. Tubercular meningitis
- 15. Viral meningitis
- 16. Diabetes mellitus

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
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- c) Pathology by Rubin and Farber
- d) Pathologic basis of Disease Robbins

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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK FORMAT / SKELETON OF QUESTION PAPER

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MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK FORMAT / SKELETON OF QUESTION PAPER

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Competency Based Medical Education Year: Second MBBS

Subject: Pathology Learning Resource Material

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

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Maharashtra University of Health Sciences Nashik



PATHOLOGY LOGBOOK FOR PHASE
SECOND MBBS STUDENTS AS PER COMPETENCY
BASED CURRICULUM

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Preface

The Medical Council of India has revised the undergraduate medical education curriculum so that the Indian Medical Graduate (IMG) is able to recognize "Health for all" as a national goal. He/she should also be able to fulfil his/her societal obligations. The revised curriculum has specified the competencies that a student must attain and clearly defined teachinglearning strategies for the same. With this goal in mind, integrated teaching, skill development, AETCOM and self-directed learning have been introduced. There would be emphasis on communication skills, basic clinical skills and professionalism. There is a paradigm shift from the traditional didactic classroom-based teaching to learning environments where there is emphasis on learning by exploring, questioning, applying, discussing, analysing, reflecting, collaborating and doing. The recognition of this need is enshrined by a greatly enhanced allocation of time to these methods and also the assessment www.FirstRanker.com techniques. With this view in mind the log book has been designed as per the guidelines of competency based curriculum.



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Name of	the College
Admission Yea	
CERTI	IFICATE
This is to certify that,	
Mr/Ms	
Roll No has satisfactorily attended logbook as per the guidelines prescribed by N Competency Based Curriculum in the subject	
Date:/	
Teacher Incharge	Kei colu
Teacher Incharge	Professor and Head Department of Pathology



Instructions

- 1. This logbook is prepared as per the guidelines of MCI for implementation of Competency based curriculum for Phase II MBBS students in the subject of Pathology.
- 2. Students are instructed to keep their logbook entries up to date.
- 3. Students also have to write reflections on AETCOM Module 2.4 and 2.8)

Reflections should be structured using the following guiding questions:

- What happened? (What did you learn from this experience)
- So what? (What are the applications of this learning)
- What next? (What knowledge or skills do you need to develop so that you can handle this type of situation?)
- 4. The logbook assessment will be based on multiple factors like
 - Attendance
 - Active participation in the sessions
 - Timely completions
 - Quality of write up of reflections
 - Overall presentation

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CONTENTS

S.No	Topic	Signature of the teacher	Remarks
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ASSESSMENT OF LOG BOOK

Sr.No	Description	Maximum Marks	Marks obtained	Signature of Teacher
1	Completion of Journal- I term	5		
2	Completion of Journal- II term	5		
3	Performance in case based learning	3		
4	Participation in seminars, research projects, quiz etc	3		
5	Reflections on AETCOM Module * 2.4 , 2.8	2 Let con		
6	Attendance Records	SIR 2012		
7	Total marks obtained for log book	20		

^{*} AETCOM – Competencies for IMG, 2018, Medical Council of India.



The following skills have been performed by the student and are certified by the teacher as follows:

		Date	Teacher's signature
1.	Preparation of peripheral smear		
2.	Interpretation of liver function tests and viral serology panel		
3	Interpretation of CSF in meningitis		

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PRACTICAL TOPICS IN PATHOLOGY

Students are expected to write briefly about the topics and draw labelled diagrams of relevant slides in their journal, and get it assessed from their teacher.

GENERAL PATHOLOGY

- 1. Histological techniques, tissue processing, microscopy
- 2. Intracellular accumulations, calcification
- 3. Cellular adaptations
- 4. Disorders of pigment metabolism
- 5. Amyloidosis
- 6. Acute inflammation
- 7. Chronic inflammation and repair
- 8. Tuberculosis and leprosy
- 9. Hemodynamic disturbances
- 10. Neoplasia
- 11. Infections and infestations

HEMATOLOGY

- 1. Collection of specimens, anticoagulants, normal hematopoiesis
- 2. Hemoglobin estimation: Interpretation of report
- 3. Hematocrit and Erythrocyte sedimentation rate: Interpretation of report
- 4. Complete blood count: Interpretation of report (without flags) from automated cell counter
- 5. Preparation of peripheral smear and performing differential leukocyte count, interpretation of peripheral smear
- 6. Investigation of anemia
- 7. Investigation of leukemia
- 8. Plasma cell dyscrasia
- 9. Investigation of bleeding and clotting disorders
- 10. Blood banking: Performing blood grouping and interpretation of results

SYSTEMIC PATHOLOGY

- 1. Lymphoma
- 2. Splenomegaly
- 3. Gastrointestinal tract: Ulcers
- 4. Intestinal polyp and carcinoma intestine
- 5. Cirrhosis and hepatocellular carcinoma
- 6. Pneumonia, bronchiectasis
- 7. Pulmonary tuberculosis and bronchogenic carcinoma
- 8. Atherosclerosis
- 9. Left ventricular hypertrophy, myocardial infarction, lab diagnosis of MI
- 10. Rheumatic heart disease and infective endocarditis
- 11. Chronic contracted kidney, glomerulonephritis, pyelonephritis
- 12. Urinary calculi, Renal cell carcinoma,
- 13. Male genital tract
- 14. Female genital tract: Carcinoma cervix, Carcinoma endometrium
- 15. Leiomyoma, Ovarian tumours
- 16. Gestational trophoblastic disease
- 17. Breast
- 18. Thyroid



- 19. Bone and soft tissue tumours
- 20. Skin
- 21. CNS tumours

CLINICAL PATHOLOGY

- 1. Urine analysis: Interpretation of physical, chemical and microscopic examination results
- 2. Semen analysis: Lecture demonstration, interpretation of report
- 3. Basic cytological techniques: FNAC and exfoliative cytology (Lecture demonstration)
- 4. CSF examination: Lecture demonstration and interpretation of reports
- 5. Body fluids: Interpretation of serous effusion reports
- 6. Interpretation of kidney function tests
- 7. Investigations in jaundice
- 8. Investigations in diabetes mellitus

AUTOPSY

Indications and techniques, autopsy findings in common conditions like myocardial infarction, cirrhosis, portal hypertension, bronchogenic carcinoma, miliary tuberculosis, renal cell carcinoma etc.

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Reflection on AETCOM 2.4

Topic: Working in a health care team Date:

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Signature of Teacher-in- charge



Reflection on AETCOM 2.8

Topic: What does it mean to be a family member of a sick patient? Date:

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Signature of Teacher-in- charge



Participation in Seminars, Research Projects, Quiz

S.No	Activity	Date	Signature of Teacher
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Signature of Teacher-in- charge



Attendance Record of the Student

S. No	Term	Theory (%)	Practical (%)	Signature of the Student	Signature of the Teacher
Α	I Term				
В	II Term				
С	Overall attendance				

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.



Details of attending extra classes [For poor attendance (if any)]

S.No	Date	Period	Total hrs	Signature of student	Signature of Teacher
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	. 15	Total hou	urs		

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.



Section 5. Records of Internal Assessment Examinations

Records of Internal Assessment examinations

S.No	Exam	Theory	Practical including viva and log book	Signature of student	Signature of Teacher
1	I Internal Assessment	/ 100	/ 50		
2	II Internal Assessment	/ 100	/ 50		
3	III Internal Assessment (Prelim)	/ 200	/ 100		
4	Internal Assessment marks	/ 400	/ 200		
5	Remedial exam (if any)	/ 200	/100		
6	Internal Assessment marks after conversion	/100	/ 100		

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.