# AYUB MEDICAL COLLEGE ABBOTTABAD

## **DEPARTMENT OF MEDICAL EDUCATION**



# RESPIRATORY MODULE

# 1<sup>ST</sup> YEAR MBBS

BLOCK: C. ( RESPIRATION MODULE)

CLASS OF: 1ST YEAR MBBS

**DURATION:4 WEEKS** 

FROM:2022-2023

STUDENT NAME

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#### **DISCLAIMER**

- Developing a study guide is a dynamic process and undergoes iteration according to the needs and priorities.
  - This study guide is subjected to the change and modification over the whole academic year.
  - However, students are advised to use it as a guide for respective modules.
  - It is to declare that the learning objectives (general and specific) and the
    distribution of assessment tools (both theory and practical) are obtained from
    Khyber Medical University, Peshawar. These can be obtained from:
    http://kmu.edu.pk/sites/default/files/curriculum/1st%262nd-Year.zip
  - The time tables are for guiding purpose. It is to advise that final timetables are always displayed over the notice boards of each lecture hall.
- Students are encouraged to provide feedback via coordinator (see "For inquiry and troubleshooting") or use the link given below.

https://forms.gle/ZfugPgAia9VvMeJ29

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# 1 Module Committee:

s.no	Name	Department	Role
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15.	Dr.Syed Yasir Gillani	Asso. Prof.General Med	Member
16.	Dr.Shwana Asad	Asst.Prof General Surgery	Member

### 2 What Is A Study Guide?

It is an aid to Inform students how student learning program of the module has been organized, to help students organize and manage their studies throughout the module and guide students on assessment methods, rules and regulations.

#### 2.1 The study guide:

- Communicates information on organization and management of the module.
- This will help the student to contact the right person in case of any difficulty.
- Defines the objectives which are expected to be achieved at the end of the module.
- Identifies the learning strategies such as lectures, small group teachings.

#### 2.2 Module objectives.

- Provides a list of learning resources such as books, computer-assisted learning programs, weblinks, and journals, for students to consult in order to maximize their learning.
- Highlights information on the contribution of continuous on the student's overall performance.
- Includes information on the assessment methods that will be held to determine every student's performance.

#### 2.3 Achievement of objectives.

Focuses on information pertaining to examination policy, rules and regulations.

#### 5.3: curriculum framework:

Students will experience integrated curriculum.

#### 2.4 Integrated curriculum:

An integrated curriculum is all about making connections, whether to real life or across the disciplines, about skills or aboutknowledge. An integrated curriculum fuses subject areas, experiences, and real-life knowledge together to make a more fulfilling and tangible learning environment for students. Integrated teaching means that subjects are presented as a meaningful whole. Students will be able to have better understanding of basic sciences when they repeatedly learn in relation to clinical examples. Case based discussions, computer-based assignments, early exposure to clinics, wards, and skills acquisition in skills lab are characteristics of integrated teaching program.



## 3 Recommended List Of Icons



**Introduction To Case** 



For Objectives



**Critical Questions** 



Assessment



**Resource Material** 

# 4 Table Of Specification

S. N o.	Discipline RESP	Lectur es (No. of hours)	LGD (No. of hours )	SGD/ Demonstra tion/ Dissection (No. of hours)	Practical (No. of hours)	Tutorials (No. of hours)	distribu hours,	age ution of subject ise	No. of MCQs	%age for MCQs	No. of OSP E	Viva Statio ns
1	Gross Anatomy	3	-	23	-	1 x 2	23.9%		12	24%	1	
2	Histology	3	-	-	3 x 2	-	5.1%	31.5%	4	8%	3	1
3	Embryology	3	-	-	-	-	2.5%		3	6%	0	
4	Physiology	12	4	12	6 x 2	1 x 2	36	5%	20	40%	3	1
5	Biochemistry	8		3	4 x 2	1 x 2	18	3%	8	16%	0	1
6	Pharmacolog y	2	-	-	-	-	1.7	7%	0	-	-	-
7	Pathology	1	-	-	-	-	0.8	3%	1	2%	-	-
8	Community medicine	1	-	-	-	-	0.8	3%	1	2%	-	-
9	Forensic medicine	1	-	-	-	-	0.8	3%	1	2%	-	-
10	General Medicine	1	-	-	-	-	0.8	3%	0	-	-	-
11	Pediatrics	-	-	-	-	-		-	0	-	-	-
12	Surgery	1	-	-	-	-	0.8	3%	0	-	-	-
13	Prime	7	-	-	-	-	0.8	3%	0	-	-	-
	Sub- Total	43	4	38	26	6		-	50	-	7	3
	Total			117 contact h	ours				50	-		10
	Percentage distribution	36.7%	3.4%	32.4%	22.22%	5.12%			-	-	-	-

#### 5 Organization of Module

#### 5.1 Introduction To Respiratory Module

By the end of this module the student of Ayub Medical College Abbottabad should be able to **build** adequiate knowledge, attitude and skills to manage (Diagnose, Investigate, Treat, Refer, Prevent and Counsel) common respiratory diseases. The **Aim** of respiratory Module is to define the scope of Knowledge/ Skills/ Attitudes of a first year medical student of the Basic Medical Sciences i.e. Anatomy, Physiology and Biochemistry with the introduction to the Clinical Sciences and an **emphasis** on understanding of pulmonary functions and their abnormalities. Respiratory module is a 4 weeks' theme based module, followed by a block assessment. The contents of which will be taught in lectures, SGDs, DSLs and practical work. This module consists of the following themes:

1- Chest wall injury- 1 week
2- Cough and hemoptysis- 1 week
3- Breathlessness- 2 weeks
4- Chest wall injury- 1 week
5- Cough and hemoptysis- 1 week
6- Breathlessness- 2 weeks

#### 5.2 Rationale

Respiratory module is combined with CVS and Respiration module (Total 9 weeks' duration) as defined by KMU and four weeks given to the Respiration module). Respiratory module is developed in order to assist students when they come in more frequent and prolonged contact with patients in the 3rd year of the MBBS curriculum. By the end of this module the students are expected to know the main concepts of respiratory system in all domains of learning and the skills gained in this module will help them deal with chest related conditions especially in the fields of Internal Medicine, Community medicine, Forensic aspects, Pharmacology of some important medications related to respiratory disorders, and Surgical Wards in tertiary care hospitals

#### **5.3** Teaching And Learning Strategies:

The following teaching / learning methods are used to promote better understanding:

1. Interactive Lectures

- 2. Hospital / Clinic visits
- 3. Small Group Discussion
- 4. Skills session
- 5. Self-Directed Study

#### Interactive lectures:

An interactive lecture is an easy way for instructors to intellectually engage and involve students as active participants in a lecture - based class of any size.

#### Hospital / Clinic visits:

In small groups, students observe patients with signs and symptoms in hospital or clinical settings. This helps students to relate knowledge of basic and clinical sciences of the relevant module.

#### • Small group discussion (SGD):

Students learn from each other. Everyone gets more practice at expressing their ideas. A two way discussion is almost always more creative than individual thoughts. Social skills are practiced in a 'safe' environment e.g. tolerance, cooperation.

#### Skills/Practical session:

Skills relevant to respective module are observed and practiced where applicable in skills laboratory or Laboratories of various departments.

#### Self-Directed learning (SDL):

Self-directed learning, which involves studying without direct supervision in a classroom/Library, is a valuable way to learn and is quickly growing in popularity among parents and students. Students' assume responsibilities of their own learning through individual study, sharing and discussing with peers, seeking information from Learning Resource Centre, teachers and resource persons wi thin and outside the college. Students can utilize the time within the college scheduled hours of self-study.



#### 6 Learning Objectives

#### **6.1** General Learning Outcomes

By the end of this module the students would be able to;

#### 6.1.1 Knowledge

By the end of four weeks module AMC FIRST YEAR MBBS student should be able to;

- 1. Utilize the basic knowledge of the gross and microscopic anatomy, the physiology and the relevant biochemical processes of respiration in order to comprehend how this system works and what happens in disease process.
- 2. Diagnose common respiratory disorders based on knowledge of basic sciences and clinical data 3. Preventive strategies of different problems related to respiratory system
- 3. Describe the anatomy and abnormalities of thoracic cage
- 4. Describe the development and gross anatomy of the diaphragm
- 5. Describe the contents of mediastinum and their relations
- 6. Describe the anatomy of pleura and its reflections
- 7. Describe the gross and microscopic structure, development, nerve supply and blood supply of trachea, bronchi and lungs
- 8. Describe the epithelia and connective tissues lining the respiratory passageways.
- 9. Describe pulmonary ventilation
- 10. Discuss the mechanisms of gaseous exchange between alveoli, and blood and blood and tissues
- 11. Elaborate the transport of gases in the blood
- 12. Describe the mechanisms of regulation of respiration
- 13. Define hypoxia, and cyanosis
- 14. Describe the effect of aging on respiratory system
- 15. Describe the biochemical structure and functions of enzymes
- 16. Describe the mechanisms of O2 and CO2 transport in the blood
- 17. Classify anti-asthmatic and anti-tuberculous drugs
- 18. Describe the types and signs of asphyxia
- 19. Enlist the causes and signs of pneumonias, bronchial asthma, tuberculosis, Acute Respiratory Distress Syndrome (ARDS), and pulmonary edema
- 20. Describe the parameters of Pulmonary Function Tests (PFTs)
- 21. Understand what medications are available for treatment.
- 22. Describe issues related to Forensic Medicine
- 23. Enumerate the various symptoms of respiratory disorders

#### 6.1.2 Skill

By the end of Four weeks respiration module the AMC student should be able to;

- 1. Draw a normal spirogram, labeling the four lung volumes and four capacities.
- 2. List the volumes that comprise each of the four capacities.

- 3. Identify which volume and capacities cannot be measured by spirometry.
- 4. Define the factors that determine total lung capacity, functional residual capacity, and residual volume.
- 5. Describe the mechanisms responsible for the changes in those volumes that occur in patients with emphysema and pulmonary fibrosis.
- 6. Differentiate between the two broad categories of restrictive and obstructive lung disease, including the spirometric abnormalities associated with each category.]
- 7. Examine the chest of the subject.
- 8. Calculate the respiratory rate of the subject.
- 9. Determine the peak expiratory flow (PEF) by peak flow meter.
- 10. Describe the use of inhaler
- 11. Demonstrate the use of inhaler to the subject.
- 12. Identify the various microscopic tissue types in the mRespiratory system
- Epithelium of the respiratory system
- Trachea
- Bronchi
- Bronchioles
- Alveoli

#### 6.1.3 Attitude

By the end of four weeks respiratory module the AMC student should be able to

- 1. Demonstrate ability to give and receive feedback, respect for self and peers.
- 2. Develop respect for the individuality and values of others (including having respect for oneself) patients, colleagues and other health professionals
- 3. Organize& distribute task
- 4. Exchange opinion & knowledge
- 5. Develop communication skills and etiquette with sense of responsibility.
- 6. To equip themselves for teamwork
- 7. Regularly attend the classes
- 8. Demonstrate ethical self-management
- 9. Display compassion with patient and colleagues

#### **6.2** Specific learning objectives (THEME BASED)

7- Chest wall injury- 1 week							
SUBJECT:	SUBJECT:						
ANATOMY			Hours	MIT			
			TOTAL				
TOPICS	S.	Learning Outcomes	12				
	No						

1. GROSS ANATOMY OF THORAX	1.	Gross anatomy of thorax	Lecture
	2.	Describe the location and shape of the sternum	Lectures
	3.	Describe the parts of the sternum	Lectures
	4.	Describe the articulations and muscle attachments	Lectures
	5.	Describe the gross features of the thoracic vertebrae a. Vertebral body b. Intervertebral disc c. Laminae d. Pedicles e. Intervertebral foramina f. Processes g. Ligaments	Lectures
	6.	Differentiate between typical and atypical ribs.	Lectures
	7.	Describe different joints of thorax	Lectures
	8.	Discuss Intercostal muscles	Lectures
	9.	Discuss the contents of intercostal spaces	Lectures
	10.	Describe the origin of intercostal arteries	Lectures
	11.	Describe the origin, course and distribution of intercostal nerves	Lectures
	12.	Discuss branches and course of internal thoracic artery	Lectures
2.ABNORMALITIE S OF THORACIC WALL	13.	Describe thoracic wall abnormalities and its clinical correlation	Lectures
DIAPHRAGM	14	Describe the origin and insertion of the diaphragm	Lectures
	15	Describe the openings of the diaphragm	Lectures
	16	Describe the nerve supply of diaphragm and its clinical significance	Lectures
MEDIASTINUM	17	Describe the contents of the superior mediastinum	Lectures

	18.	Describe the contents of the Anterior & Posterior Mediastinum		Lectures
	19	Describe the relations of different contents in mediastinum		Lectures
	20	Identify various anatomical landmarks on chest X-Rays, CT and MRI		Lectures
EMBRYOLOGY			03	
1.DEVELOPMENT OF DIAPHRAGM	21.	Describe development of diaphragm		Lectures
	22.	Describe diaphragmatic hernias and clinical significance		Lectures
2.DEVELOPMENT OF RIBS	23	Describe the development of ribs from costal elements of primitive vertebrae		Lectures
PHYSIOLOGY			20	
1.MECHANICS OF RESPIRATION	24	Describe the mechanics of respiration		Lectures
	25.	Describe the pressures that cause the movements of the air in and out of the lungs		Lectures
2.LUNG COMPLIANCE	26.	Define compliance of the lung and elastic recoil		Lectures
	27.	Identify two common clinical conditions in which lung compliance is higher or lower than normal.		Lectures
3.LUNG VOLUMES AND CAPACITIES	28.	Describe changes in the lung volume, alveolar pressure, pleural pressure, and trans-pulmonary pressure during normal breathing		Lectures
	29.	Draw a normal pulmonary pressure-volume (compliance) curve (starting from residual volume to total lung capacity and back to residual volume), labeling the inflation and deflation limbs. Explain the cause and significance of the hysteresis in the curves.		Lectures
	30.	Draw the pressure-volume (compliance) curves for the lungs, chest wall, and respiratory system on the same set of axes. Show and explain the significance of the resting positions for each of these three structures.		Lectures
SURGERY	31	Describe pneumothorax	01	Lectures
	32	Define Hydro pneumothorax		Lectures

THEME II: Cough and hemoptysis- 1 week						
SUBJECT/TOPICS	S.N O	LEARNING OUTCOMES	HOURS	MIT		
ANATOMY						
1 INTRODUCTION	33.	Describe the major components of the (upper and lower) respiratory system and describe their functions		Lectures		
2. TRACHEA, BRONCHI AND LUNGS	34.	Describe trachea and bronchi with relations plus subdivisions		Lectures		
	35.	Describe the neurovascular supply of trachea and bronchi		Lectures		
	36.	Describe the surfaces anatomy of trachea and bronchi		Lectures		
	37.	Describe the lungs with their lobes and fissures, relations with surroundings and surfaces and compare between right and left lungs.		Lectures		
	38.	Describe Broncho-pulmonary segments and their clinical importance		Lectures		
	39.	Describe innervations, blood supply and lymphatic drainage of the lungs.		Lectures		
EMBRYOLOGY	•					
DEVELOPMENT OF RESPIRATORY SYSTEM	40.	Describe development of trachea, bronchial tree, pleura, lungs		Lectures		
	41.	Recognize the cephalo-caudal and transverse folding of embryonic disc		Lectures		
	42.	Describe the extent of intra embryonic coelom after folding and its divisions into three serous cavities		Lectures		
	43.	State the derivatives of visceral and parietal layers of mesoderm		Lectures		
	44.	State the pericardio-peritoneal canals and their final fate		Lectures		
	45.	Discuss the formation of Lung Bud		Lectures		
HISTOLOGY						
RESPIRATORY EPITHELIUM AND CONNECTIVE TISSUES	46.	Classify the types of epithelia lining the various parts of respiratory system		Lectures		

	47.	Differentiate between the histological differences among various parts of respiratory system		Lectures
	48.	Describe the structure of trachea and its layer		Lectures
	49.	Discuss the microscopic picture of respiratory bronchiole, alveolar ducts, alveolar sacs and alveoli.		Lectures
	50.	Describe the different types of cells found in alveoli		Lectures
PHYSIOLOGY.				
1. FUNCTIONS OF RESPIRATORY PASSAGEWAYS	51.	Describe the respiratory and non-respiratory functions of the respiratory passageways		Lectures
	52.	Identify the mechanism by which particles are cleared from the airways.		Lectures
PHARMACOLOGY				
1. ANTI-	53.	Enlist Anti-asthmatic drugs		Lectures
ASTHMATIC				
DRUGS				
2. ANTI-	54.	Classify Anti-tuberculous drugs		Lectures
TUBERCULOUS				
PATHOLOGY				
1.PNEUMONIAS	55.	Define pneumonia and enlist the causative pathogens of pneumonia		Lectures
2. PULMONARY	56.	Define primary and secondary		Lectures
TUBERCULOSIS		Tuberculosis and state its etiology		
3.BRONCHIAL	57.	Describe the etiology, pathogenesis and		Lectures
ASTHMA	F.0	clinical features of asthma		11
4.PULMONARY EDEMA	58.	Define pulmonary edema and classify it according to underlying causes		Lectures
COMMUNITY	59.	Discuss preventive strategies of different		Lectures
MEDICINE		problems related to respiratory system		
1. PREVENTION	60.	Discuss the relationship of smoking with		Lectures
OF RESPIRATORY DISORDERS		lung Diseases	_	
	61.	Describe preventive strategies for smoking		Lectures
· · · · · · · · · · · · · · · · · · ·				

MIT:mode of information transfer. E.g. lecture, SGD, DSL, Practical, skill lab etc etc

THEME-III:	BREAT	HLESSNESS (2 week)		
SUBJECT/TOPICS	S.NO	LEARNING OUTCOMES	HOURS	MIT
ANATOMY				
1.MECHANICS OF	62.	Describe briefly mechanics of		Lectures
RESPIRATION		respiration		
2.PLEURA	63.	Describe the gross features of pleura		Lectures
	64.	Describe the pleural cavity and the		Lectures
		pleural reflections		
	65.	Describe the surface anatomy related		Lectures
		to pleural reflections		
EMBRYOLOGY				
1.DEVELOPMENT	66.	Describe the development of pleural		Lectures
OF PLEURAL CAVITY		cavity		
HISTOLOGY				
	67.	Discuss surfactant, alveolar septum,		Lectures
		alveolar pores and alveolar		
		macrophages		
PHYSIOLOGY			T	T
1.PULMONARY	68.	Define Pulmonary		Lectures
VENTILATION		ventilation/Respiration		
	69.	Compare between the internal and		Lectures
		external respiration		
	70.	Enlist the steps of external respiration		Lectures
		accomplished by the respiratory		
		system and those carried out by the		
		circulatory system		
	71.	State the functions of Type I alveolar		Lectures
		cells, Type II alveolar cells, and alveolar		
		macrophages		
	72.	Describe the forces that keep the		Lectures
		alveoli open and those that promote		
	72	alveolar collapse.		11
	73.	Define the following terms: anatomic		Lectures
		dead space, physiologic dead space,		
		wasted (dead space) ventilation, total		
		minute ventilation and alveolar minute		
	74	ventilation		Lockins
	74.	Compare anatomic and physiologic		Lectures
	75	dead space		Lookuuss
	75.	Describe the basic concept of		Lectures
		measurement of dead space		

	76.	Enlist the factors that changes the	Lectures
		dead space	
	77.	Define the following terms:	Lectures
		hypoventilation, hyperventilation,	
		hypercapnea, eupnea, hypopnea, and	
		hyperpnea	
	78.	Define surface tension, surfactants,	Lectures
		atelectasis	
	79.	Describe the role of surfactants on the	Lectures
		lung compliance	
	80.	Describe the composition of the	Lectures
		pulmonary surfactants and its role	
	81.	Describe the pathophysiology of	Lectures
		respiratory distress syndrome of the	
		newborn	
	82.	Discuss the work of breathing	Lectures
2.PULMONARY	83.	Explain the physiologic anatomy of the	Lectures
CIRCULATION		pulmonary circulatory system	
	84.	Describe the pressures in the	Lectures
	0	pulmonary circulatory system	20000103
	85.	Describe blood volume of the lungs	Lectures
	86.	Describe blood flow through the lungs	Lectures
	00.	and its distribution	Lectures
		and its distribution	
	87.	Compare the systemic and pulmonary	Lectures
		circulations with respect to pressures,	
		resistance to blood flow, and response	
		to hypoxia	
	88.	Describe the regional differences in	Lectures
	00.	pulmonary blood flow in an erect	20000103
		position	
	89.	Describe the consequence of hypoxic	Lectures
		pulmonary vasoconstriction on the	Lectures
		distribution of pulmonary blood flow	
	90.	Describe the pulmonary capillary	Lectures
	J0.	dynamics	Lectures
	91.	Describe the development of	Lectures
	91.	pulmonary edema	Lectures
GAS EXCHANGE	92.	List the normal airway, alveolar,	Loctures
UAS EXCHANGE	92.	•	Lectures
		arterial, and mixed venous PO <sub>2</sub> and	
	02	PCO <sub>2</sub> values.	1
	93.	List the normal arterial and mixed	Lectures
		venous values for O <sub>2</sub> saturation,	
		[HCO <sub>3</sub> -]	

	_		
	94.	List the factors that affect diffusive	Lectures
		transport of a gas between alveolar	
		gas and pulmonary capillary blood.	
	95.	Describe respiratory unit	Lectures
	96.	Describe the physiologic anatomy of	Lectures
		the respiratory membrane and its	
		significance	
	97.	Describe the factors that affect the	Lectures
		rate of gaseous diffusion through the	
		respiratory membrane	
	98.	Describe the diffusing capacity of	Lectures
		respiratory membrane for O <sub>2</sub> and CO <sub>2</sub>	
		at rest and exercise.	
		de rest dira exercise.	
	99.	Describe the effect of	Lectures
		ventilation/perfusion (V/Q) ratio on	Lectures
		alveolar gas concentrations.	
		alveolar gas concentrations.	
	100.	Identify the average V/Q ratio in a	Lectures
	100.	normal lung.	Ecctures
	101.	Explain the concept of physiologic	Lectures
	101.	shunt and physiologic dead space	Lectures
	102.	Describe the abnormalities of	Loctures
	102.		Lectures
		ventilation perfusion ratio in normal	
		lung and chronic obstructive lung	
	102	disease	l and and
TD 4 M CD CD T CD C	103.	Enlist common causes of hypoxemia	Lectures
TRANSPORT OF O <sub>2</sub>	104.	Define oxygen partial pressure	Lectures
AND CO <sub>2</sub> IN THE		(tension) oxygen content, and percent	
BLOOD		hemoglobin saturation as they pertain	
		to blood.	
	105.	Describe Oxyhemoglobin dissociation	Lectures
		curve (hemoglobin oxygen equilibrium	
		curve) showing the relationships	
		between oxygen partial pressure,	
		hemoglobin saturation, and blood	
		oxygen content.	
	106.	Describe the relative amounts of O2	Lectures
		carried bound to hemoglobin with that	
		carried in the dissolved form	
	107.	State Henry's Law (the relationship	Lectures
		between PO2 and dissolved plasma O2	
		content)	
	•	,	
	108.	Describe how the shape of the	Lectures

		influences the uptake and delivery of	
		oxygen.	
	109.	Define P50.	Lectures
	110.	Describe how the oxyhemoglobin	Lectures
	110.	dissociation curve is affected by	Lectures
		changes in blood temperature, pH,	
	111	PCO2, and 2,3-DPG.	Lastinas
	111.	Describe how anemia and carbon	Lectures
		monoxide poisoning affect the shape	
		of the oxyhemoglobin dissociation	
	110	curve, PaO2, and SaO2.	
	112.	List the forms in which carbon dioxide	Lectures
		is carried in the blood	
	113.	Describe the percentage of total CO2	Lectures
		transported as each form	
	114.	Describe the chloride shift and its	Lectures
		importance in the transport of CO2 by	
		the blood.	
	115.	Describe the enzyme that is essential	<b>L</b> ectures
		to normal carbon dioxide transport by	
		the blood and its location	
	116.	Describe the carbon dioxide	Lectures
		dissociation curves for oxy- and	
		deoxyhemoglobin	
	117.	Describe the interplay between CO2	Lectures
		and O2 binding on hemoglobin that	
		causes the Haldane effect.	
REGULATION OF	118.	Describe the regions in the central	Lectures
RESPIRATION		nervous system that play important	
		roles in the generation and control of	
		cyclic breathing	
	119.	Give three examples of reflexes	Lectures
		involving pulmonary receptors that	
		influence breathing frequency and	
		tidal volume. Describe the receptors	
		and neural pathways involved.	
	120.	List the anatomical locations of	Lectures
		chemoreceptors sensitive to changes	
		in arterial PO2, PCO2, and pH that	
		participate in the control of	
		ventilation. Identify the relative	
		•	
	121.		
		_	
	121.	ventilation. Identify the relative importance of each in sensing alterations in blood gases  Describe how changes in arterial PO2	
		and PCO2 alter alveolar ventilation,	

		including the synergistic effects when	
		PO2 and PCO2 both change.	
	122.	Describe the significance of the	Lectures
		feedforward control of ventilation	
		(central command) during exercise,	
		and the effects of exercise on arterial	
		and mixed venous PCO2, PO2, and pH.	
	123.	Describe voluntary control of	Lectures
		respiration	
	124.	Describe the effect of irritant	Lectures
		receptors, J-receptors, brain edema	
		and anesthesia on breathing.	
COMMON	125.	Describe periodic breathing and basic	Lectures
RESPIRATORY		mechanism of Cheyne-Stokes	
ABNORMALITIES		breathing	
	126.	Define sleep apnea	Lectures
	127.	Describe the pathophysiology of	Lectures
		Obstructive sleep apnea and central	
		sleep apnea	
	128.	Describe the pathophysiology of	Lectures
		specific pulmonary abnormalities	
	129.	Describe hypoxia.	Lectures
	130.	Describe cyanosis	Lectures
	131.	Describe the effect of aging on lung	Lectures
		volumes, lung and chest wall	
		compliance, blood gases, and	
		respiratory control	
BIOCHEMISTRY			
ENZYMES	132.	Define Enzymes	Lectures
	133.	Define activation energy	Lectures
	134.	Define Gibbs Free energy	Lectures
	135.	Explain the general structure of	Lectures
		enzymes	
	136.	Define co-factors	Lectures
	137.	Explain the function of co-factors	Lectures
	138.	Enlist different types of co-factors	Lectures
	139.	Define different parts and forms of enzymes	Lectures
	140.	Describe the factors involved in	Lectures
		structure of enzymes	

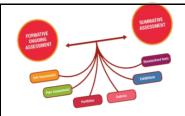
	141.	Describe the mechanism of Enzyme activity	Lectures
	142.	Define catalysis	Lectures
	143.	Explain different mechanism of catalysis	Lectures
	144.	Explain the Principals for Nomenclature of enzymes	Lectures
	145.	Classify Enzymes on the basis of functions	Lectures
	146.	Enlist the factors affecting the activity of enzymes	Lectures
	147.	Describe roles of factors affecting enzyme activity	Lectures
	148.	Define enzyme kinetics	Lectures
	149.	Explain different areas of enzyme kinetics	Lectures
	150.	Describe the role of Km in Enzyme kinetics	Lectures
	151.	Define Isoenzymes (Isozymes)	Lectures
	152.	Explain Factors affecting the properties of isozymes	Lectures
	153.	Application of enzymes in clinical diagnostics and therapeutics Profiles	Lectures
FORENSIC MED	ICINES		
ASPHYXIA	154.	Define Asphyxia	Lectures
	155.	Describe different types of Asphyxia	Lectures
	156.	Identify classical signs of asphyxia	Lectures
MEDICINE	•		•

1.2INTRODUCTION TO RESPIRATORY SYMPTOMATOLOGY	157.	Enumerate the various symptoms of respiratory disorders	Lectures
2. PFT`S	158.	Interpret the Pulmonary Function Tests	Lectures
	159.	Discuss acute lung injury and its correlation Acute Respiratory Distress Syndrome	Lectures
	160.	Describe the causes of Acute Respiratory Distress Syndrome	Lectures
	161.	Discuss the morphology of Acute Respiratory Distress Syndrome	Lectures

MIT:mode of information transfer. E.g. lecture, SGD, DSL, Practical, skill lab etc etc

Psychomotor a	nd Affective	dor	nain	MIT
BREATHLESSNE SS	PHYSIOLOG Y	162	Draw a normal spirogram, labeling the four lung volumes and four capacities.	Practical, skill lab
		163	List the volumes that comprise each of the four capacities.	Practical, skill lab
			Identify which volume and capacities cannot be measured by spirometry	Practical, skill lab
			Define the factors that determine total lung capacity, functional residual capacity, and residual volume	Practical, skill lab
			Describe the mechanisms responsible for the changes in those volumes that occur in patients with emphysema and pulmonary fibrosis.	Practical, skill lab
			Differentiate between the two broad categories of restrictive and obstructive	Practical, skill lab

		lung disease, including the	
		spirometric abnormalities	
		associated with each	
		category.	
		Examine the chest of the	Practical, skill lab
		subject	
		Calculate the respiratory	Practical, skill lab
		rate of the subject	
		Determine the peak	Practical, skill lab
		expiratory flow (PEF) by	
		peak flow meter	
		Describe the use of inhaler	Practical, skill lab
		Demonstrate the use of	Practical, skill lab
		inhaler to the subject	
COUGH AND	HISTOLOGY	Identify the various microsco	Practical, skill lab Practica
HEMOPTYSIS		Respiratory system	
		<ul> <li>Epithelium of the re</li> </ul>	
		<ul> <li>Trachea</li> </ul>	
		<ul> <li>Bronchi</li> </ul>	
		<ul> <li>Bronchioles</li> </ul>	
		<ul> <li>Alveoli</li> </ul>	



#### 7 Examination and Methods of Assessment:

#### 7.1 Block Assessment

Block Assessment consists of

- Theory Paper(MCQs, SAQs) and
- Skill assessment (OSPE).
  - 1. Non-Interactive/ Non-Observed Station:
  - 2. Interactive/Observed Station

#### **7.2** Attendance Requirement:

More than 75% attendance is mandatory to sit for the examinations.

Table-1: Total marks distribution for papers C of year-1 (MBBS)

Year 1 Professional Exam in System-based Curriculum							
Theory paper	Modules	Theory marks	Internal assessment theory (10%)	OSPE/OSCE	Internal assessment OSPE/OSCE (10%)	TOTAL MARKS	
Paper C	CVS Respiratory	120	13	90	10	233	

#### 7.3 UNIVERSITY EXAM:

• Exam has 90% (210) marks in total

#### 7.4 INTERNAL EXAM:

- Students will be assessed comprehensively through multiple methods.
- 10% marks of internal evaluation will be added to the KMU annual professional exam.
- The marks distribution is based on Formative Assessment done individually by all the concerned departments.
- It has 10% (23 marks) of total exam.

#### 7.5 Assessment tools:

- Theoretical knowledge is tested by a written examination system constituted by multiple choice questions (MCQ/SEQs).
- The assessment of practical knowledge involves oral, spot, or objective structured practical examinations (OSPE).

#### 7.5.1 Multiple Choice Questions (MCQ/SEQs):

• Multiple choice questions (MCQ/SEQs) are a form of assessment for which students are asked to select the best choice from a list of answers.

- MCQ/SEQ consists of a stem and a set of options. The stem is usually the first part of the assessment that presents the question as a problem to be solved; the question can be an incomplete statement which requires to be completed and can include a graph, a picture or any other relevant information.
- The block exam will comprise of 120 MCQ/SEQs and will be compiled according to the shared blueprint.

#### 7.5.2 Short Essay Questions (SEQ)

Short answer questions generally ask for brief, text-based responses and may also be referred to as *fill-in-the-blank*; or *completion* questions.

#### 7.5.3 Objective Structured Practical Examination (OSPE)

- The content may assess application of knowledge, or practical skills.
- Student will complete task in define time at one given station.
- All the students are assessed on the same content by the same examiner in the same allocated time.
- A structured examination will have observed, unobserved, interactive and rest stations.
- Observed and interactive stations will be assessed by internal or external examiners.
- Unobserved will be static stations in which students will have to answer the questions related to the given pictures, models or specimens the provided response sheet.
- Rest station is a station where there is no task given, and in this time student can organize his/her thoughts.

The Block OSPE will be comprise of 16 examined station and 6 rest stations. The stations will be assigned according to the shred blueprint.

Table 2. Distribution of 13 Marks for block C paper (internal Assesment)

THEORY PAPER	INTERNAL ASSESSMAE	NT THEORY	INTERNAL ASSESSMAENT		
	(10%)		OSCE/OSP	E(10%)	
Paper c	Anatomy (06)		Anatomy	03	
	Physiology (05) F		Physiology	06	
	Biochemistry (2)		Biochemistry	01	
	Total	13	Total	10	

**Paper-C: Respiratory (internal Assesment)** 

Table-3: MCQs

Subject	Respiratory module
Gross Anatomy	12
Histology	4
Embryology	3
Physiology	20

Biochemistry	8
Pharmacology	0
Pathology	1
Community medicine	1
Forensic medicine	1
Total	50

**Table-4: OSPE External Assesment** 

Subject	CVS module	Viva stations	Respiratory module	Viva stations	Total OSPE stations (for final exam*)
Gross Anatomy	4	1	1	1	5
Histology	3		3		
Embryology	0		0		
Physiology	7	1	3	1	5
	2	1	0	1	2
Total	16	3	7	3	12+6 (viva)=18

<sup>\*</sup>out of total of 23 OSPE stations, 12 will be allocated for final exam plus 6 viva stations. A minimum of 18 stations will be used in final exams.



### 8 Learning Opportunities and Resources

#### 8.1 Instruction

Apart from these resource learning ,students can consult books available in library or recommended by the specialty experts.

#### **8.2 Books:**

Gross Anatomy	1. Netter's "Atlas of Human Anatomy-6th Edition
	2. Gray`s Anatomy-4th Edition
	3. Cunningam`s "Textbook of Anatomy'-12th Edition
	4. Snell's Clinical Anatomy by regions-9th Edition
	5. Snell's Clinical Neuroanatomy-7th Edition
	6. Last`s Anatomy-10th Edition
Embryology	1. Langman's Medical Embryology-14th Edition
	2. The Developing Human "by Keith L Moore"-10th Edition
Histology	<ol> <li>Textbook of Histology "by Leslie Gartner-3rd Edition</li> </ol>
	2. Basic Histology-Text and Atlas- "by Luiz Carlos-11th Edition
Physiology	1. Guyton's "Textbook of Medical Physiology"-13th edition
	2. Ganong's "Review Of Medical Physiology"-25th Edition
	3. "Human Physiology-From cell to system" by Lauralee Sherwood-
	8th Edition
Biochemistry	1. Harper`s Biochemistry-31st Edition
	2. Principles of Medical Biochemistry-3rd Edition
	3. Lippincot`s Biochemistry-6th Edition
Pharmacology	1. Katzung's Basic and Clinical Pharmacology-12th Edition
Pathology	1. Robbin's Basic Pathology-9th Edition
Community	1. Community medicin by Parikh
Medicine	2. Community medicine by M Ilyas
	3. Basic Statistics for the Health Sciences by Jan W Kuzma
Medicine	<ol> <li>Davidson's Principles and Practice of Medicine-22nd Edition</li> </ol>
Clinical Examination	1. Talley and O'Connor's Clinical Examination-6th Edition
Forensic Medicine	

#### 8.3 Website:

#### 8.3.1 Anatomy:

- 1. <a href="http://files.readmedbooks.com/anatomy/netter-atlas-7.pdf">http://files.readmedbooks.com/anatomy/netter-atlas-7.pdf</a>
- file:///C:/Users/dell/Desktop/Gray's%20Anatomy-The%20Anatomical%20Basis%20of%20Clinical%20Practice%2041st%20Edition%20-%202015%20[MSCambo].pdf
- 3. <a href="https://worldofmedicalsaviours.com/cunninghams-manual-of-practical-anatomy/">https://worldofmedicalsaviours.com/cunninghams-manual-of-practical-anatomy/</a>
- 4. <a href="https://ia802606.us.archive.org/16/items/pdfy-d-">https://ia802606.us.archive.org/16/items/pdfy-d-</a>
  <a href="PFUmAhPcw">PFUmAhPcw</a> n7EV/snell%20clinical%20anatomy%20by%20regions%209th%20ed%202012 2.pdf</a>

- 5. <a href="http://med-mu.com/wp-content/uploads/2018/06/Snell-Neuroanatomy-7th-Edition.pdf">http://med-mu.com/wp-content/uploads/2018/06/Snell-Neuroanatomy-7th-Edition.pdf</a>
- 6. <a href="http://files.readmedbooks.com/anatomy/lasts-anatomy.pdf">http://files.readmedbooks.com/anatomy/lasts-anatomy.pdf</a>
- 8.3.2 Embryology
  - 1. <a href="https://bhumikapalrocks.files.wordpress.com/2016/02/langmans-medical-embryology-12th-ed.pdf">https://bhumikapalrocks.files.wordpress.com/2016/02/langmans-medical-embryology-12th-ed.pdf</a>
  - 2. https://mymedicallibrary.files.wordpress.com/2016/08/the-developing-human-edition-8th.pdf
- 8.3.3 Histology
  - 1. file:///C:/Users/dell/Desktop/(Lib-Ebooks.com)150320212213%20(4).pdf
  - 2. <u>file:///C:/Users/dell/Desktop/pdfcoffee.com\_2002-basic-histology-by-luis-carlos-junqueira-text-amp-atlas-10th-edition-mcgraw-hill-appleton-amp-lange-pdf-free.pdf</u>

#### 8.3.4 Physiology:

- 1. <a href="https://med-mu.com/wp-content/uploads/2018/06/Guyton-and-Hall-Textbook-of-Medical-Physiology-12th-Ed-PDFtahir99-VRG.pdf">https://med-mu.com/wp-content/uploads/2018/06/Guyton-and-Hall-Textbook-of-Medical-Physiology-12th-Ed-PDFtahir99-VRG.pdf</a>
- 2. <a href="https://medicostimes.com/guyton-medical-physiology-pdf/">https://medicostimes.com/guyton-medical-physiology-pdf/</a>
- 3. <a href="https://ia903208.us.archive.org/23/items/GanongsReviewOfMedicalPhysiology25thEdition/Ganongs%20Review%20of%20Medical%20Physiology%2025th%20Edition.pdf">https://ia903208.us.archive.org/23/items/GanongsReviewOfMedicalPhysiology25thEdition/Ganongs%20Review%20of%20Medical%20Physiology%2025th%20Edition.pdf</a>
- 4. <a href="https://worldofmedicalsaviours.com/medical-books/mbbs/physiology/sherwood-human-physiology.pdf">https://worldofmedicalsaviours.com/medical-books/mbbs/physiology/sherwood-human-physiology.pdf</a>
- 8.3.5 Biochemistry:
  - 1. file:///C:/Users/dell/Desktop/harpers-illustrated-biochemistry-28th-edition.pdf
  - 2. <a href="http://repository.stikesrspadgs.ac.id/69/1/Principles%20of%20Medical%20Biochemistry%20Meisenberg%20Simmons-635hlm.pdf">http://repository.stikesrspadgs.ac.id/69/1/Principles%20of%20Medical%20Biochemistry%20Meisenberg%20Simmons-635hlm.pdf</a>
  - 3. <a href="https://worldofmedicalsaviours.com/medical-books/mbbs/biochemistry/lippincotts-Illustrated-reviews-series.pdf">https://worldofmedicalsaviours.com/medical-books/mbbs/biochemistry/lippincotts-Illustrated-reviews-series.pdf</a>
- 8.3.6 Pharmacology:
  - 1. https://pharmacomedicale.org/images/cnpm/CNPM 2016/katzung-pharmacology.pdf
- 8.3.7 Community Medicine:
  - 1. <a href="https://drive.google.com/file/d/1kG">https://drive.google.com/file/d/1kG</a> 04GUfxSOxsdRaucxJ-jykVgc-BZTO/view
  - 2. <a href="https://barlybeltatimen.wixsite.com/charratttisri/post/ilyas-ansari-community-medicine-book-free-46">https://barlybeltatimen.wixsite.com/charratttisri/post/ilyas-ansari-community-medicine-book-free-46</a>
  - 3. <a href="https://psebooks.club/-/reader-roman/#/flow=gHqRV5+cdn.bkfd4.club/q=Basic%20Statistics%20for%20the%20Health%20Sciences/">https://psebooks.club/-/reader-roman/#/flow=gHqRV5+cdn.bkfd4.club/q=Basic%20Statistics%20for%20the%20Health%20Sciences/</a>

#### 8.3.8 Forensic medicine:

1. <a href="https://www.ojp.gov/ncjrs/virtual-library/abstracts/parikhs-text-book-medical-jurisprudence-and-toxicology-classrooms">https://www.ojp.gov/ncjrs/virtual-library/abstracts/parikhs-text-book-medical-jurisprudence-and-toxicology-classrooms</a>

#### 8.3.9 Medicine:

1. <a href="https://drive.google.com/file/d/0B8VbbFBwhaS8a2ZlaXllMGNwMmc/view?resourcekey=0-cJj3WGul40Avx4G5U1gX2A">https://drive.google.com/file/d/0B8VbbFBwhaS8a2ZlaXllMGNwMmc/view?resourcekey=0-cJj3WGul40Avx4G5U1gX2A</a>

#### Clinical Examination:

 $1. \quad \underline{\text{https://www.docdroid.net/mQ9vDWs/talley-and-oconnors-clinical-examination-8th-edition-pdfdrivecom-pdf} \\$ 

#### 9 Timetables

# AYUB MEDICAL COLLEGE ABBOTTABAD TIME TABLE OF 1<sup>ST</sup> YEAR MBBS CLASS

### CVS & RESPIRATION MODULE (Week-01)

		1			ı		
Days	8:00 – 9:00	9:00 – 10:00	10:00 – 11:00	11:00 to 12:00	12:00 – 12:45	12:45 –	1: 15 – 3:00
	DISSE	ECTION	11.00			1:15	PRACTICAL
Monday 02-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Shazia Heart (LH-1)	Biochemistry Dr. Ayesha Awan (LH-1)	PRIME Surgery Dr. Amjad Farooq (LH-1)	AK	Batch A: Anatomy Batch B: Physiology Batch C: Biochemistry Batch D: Tutorial
Tuesday 03-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Raisa Respiration (LH-1)	Pharmacology Dr. Nauman Iqbal (LH-1)	Physiology Dr. Sahar CVS (LH-1)	BRE	Batch A: Tutorial Batch B: Anatomy Batch C: Physiology Batch D: Biochemistry
Wednesday 04-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Sahar CVS (LH-1)	Embryology Dr. Robina (LH-1)	Pakistan Studies (LH-1)	[1] <b>K</b>	Batch A: Biochemistry Batch B: Tutorial Batch C: Anatomy Batch D: Physiology
Thursday 05-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Sahar CVS (LH-1)	Biochemistry Dr. Noreen (LH-1)	Gross Anatomy Dr. Humaira (LH-1)	AYI	Batch A: Physiology Batch B: Biochemistry Batch C: Tutorial Batch D: Anatomy
Friday 06-08-22	Histology Dr. Sumera (LH-1)	Physiology Dr. Sahar CVS (LH-1)	Physiology Dr. Raisa Respiration (LH-1)	Physiology Dr. Shazia Heart (LH-1)	Islamiat (LH-1)	PR.	HALF DAY

This time table is tentative and subject to changes needed according to the situation at the commencement of module

Dr. Shazia Tauqeer Assistant Professor Department of Physiology Ayub Medical College Abbottabad

Associate Dean (UG) Ayub Medical College Abbottabad

# AYUB MEDICAL COLLEGE ABBOTTABAD TIME TABLE OF 1<sup>ST</sup> YEAR MBBS CLASS CVS & RESPIRATION MODULE (Week-02)

Days	8:00 – 9:00	9:00 – 10:00	10:00 - 11:00	11:00 to 12:00	12:00 – 12:45	12:45 – 1:15	1: 15 – 3:00
	DISSEC	ΓΙΟΝ					PRACTICAL
Monday 09-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Shazia Heart	Physiology Dr. Sahar CVS	PRIME Community Medicine Dr. Junaid		Batch A: Anatomy Batch B: Physiology Batch C: Biochemistry Batch D: Tutorial
Tuesday 10-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Sahar CVS	Pharmacology Dr. Mehwish Gul	Physiology LGD	ER	Batch A: Tutorial Batch B: Anatomy Batch C: Physiology Batch D: Biochemistry
Wednesday 11-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Sahar CVS	Embryology Dr. Robina	Pakistan Studies	KAY REA	Batch A: Biochemistry Batch B: Tutorial Batch C: Anatomy Batch D: Physiology
Thursday 12-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Raisa Respiration	Biochemistry Dr. Noreen	Gross Anatomy Dr. Humaira	PR BI	Batch A: Physiology Batch B: Biochemistry Batch C: Tutorial Batch D: Anatomy
Friday 13-08-22	Histology Dr. Sumera	Physiology Dr. Sahar CVS	Physiology Dr. Raisa Respiration	Physiology Dr. Shazia Heart	Islamiat		HALF DAY

Dr. Shazia Tauqeer Assistant Professor Department of Physiology Ayub Medical College Abbottabad Associate Dean (UG) Ayub Medical College Abbottabad

This time table is tentative and subject to changes needed according to the situation at the commencement of module

# AYUB MEDICAL COLLEGE ABBOTTABAD TIME TABLE OF 1<sup>ST</sup> YEAR MBBS CLASS FOR THE SESSION 2020 CVS & RESPIRATION MODULE (Week-03)

Days	8:00 – 9:00	9:00 – 10:00	10:00 - 11:00	11:00 to 12:00	12:00 – 12:45	12:45 – 1:15	1: 15 – 3:00
	DISSECT	ΓΙΟΝ					PRACTICAL
Monday 16-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Shazia Heart	Physiology Dr. Sahar CVS	PRIME Community Medicine Dr. Junaid		Batch A: Anatomy Batch B: Physiology Batch C: Biochemistry Batch D: Tutorial
Tuesday 17-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Raisa Respiration	Pharmacology Dr. Maha Aziz	Physiology LGD	ER	Batch A: Tutorial Batch B: Anatomy Batch C: Physiology Batch D: Biochemistry
Wednesday 18-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Sahar CVS	Embryology Dr. Robina	Pakistan Studies	REA REA	Batch A: Biochemistry Batch B: Tutorial Batch C: Anatomy Batch D: Physiology
Thursday 19-08-22	Batch A: Batch B: Batch C: Batch D:		Physiology Dr. Raisa Respiration	Biochemistry Dr. Noreen	Gross Anatomy Dr. Humaira	PR BJ	Batch A: Physiology Batch B: Biochemistry Batch C: Tutorial Batch D: Anatomy
Friday 20-08-22							HALF DAY

This time table is tentative and subject to changes needed according to the situation at the commencement of module

Dr. Shazia Tauqeer Assistant Professor Department of Physiology Ayub Medical College Abbottabad

Associate Dean (UG) Ayub Medical College Abbottabad

The timetables for the module will be shared via Edmodo and the notice boards in advance.

# **10** For inquiry and troubleshooting



#### Please contact

Dr Shazia Tauqeer, Assistant Professor, Department of Physiology, Ayub Medical College, Abbottabad, Pakistan.

**Cell:** +92-3335286502

Email: <a href="mailto:shazia\_tauqeer@hotmail.com">shazia\_tauqeer@hotmail.com</a>

# 11.Module Feedback Form

Course Title:						
Module	Dates:					
Please fill the short questionnaire to make th	e module better.					
Please respond below with 1, 2, 3, 4 or 5, wh	ere 1 and 5 are explained.					
THE DESIGN OF THE MODLUE						
A. Were objectives of the module clear to you?	Y					
B. The module contents met with your expectations						
l. Strongly disagree	<ol><li>Strongly agree</li></ol>					
C. The lecture sequence was well-planned						
l. Strongly disagree	<ol><li>Strongly agree</li></ol>					
D. The contents were illustrated with						
l. Too few examples	5. Adequate examples					
E. The level of the module was						
l. Too low	5. Too high					
F. The module contents compared with your expectations						
l. Too theoretical	5. Too empirical					
G. The module exposed you to new knowledge and practices						
l. Strongly disagree	<ol> <li>Strongly disagree</li> <li>Strongly agree</li> </ol>					
H. Will you recommend this module to your colleague	H. Will you recommend this module to your colleagues?					
l. Not at all	5. Very strongly					
THE CONDUCT OF THE MODLUE						
A. The lectures were clear and easy to understand						
l. Strongly disagree	5. Strongly agree					
B. The teaching aids were effectively used						
l. Strongly disagree	5. Strongly agree					
C. The module material handed out was adequate						
l. Strongly disagree	<ol><li>Strongly agree</li></ol>					
D. The instructors encouraged interaction and were h	elpful					
l. Strongly disagree	<ol><li>Strongly agree</li></ol>					
E. Were objectives of the module realized?	Y					

Thank you!!

	90% - 100% 80% - 90% 70% - 80%	(	) ) )	60% - 70% 50% - 60% below 50%	(	) ) )
Please comment o	n the streng	ths of the	e module and	the way it w	as con	ducted
Please comment o	n the weakn	ossos of	the module a	nd the way it	: Was 6	anduct
Please comment o	ii tile weakii	esses or	ine module a	nd the way n	. was co	Jilaucu
		improve	ment of the	module.		
Please give sugges	tions for the					
Please give sugges	tions for the					

Optional - Your name and contact address: