AYUB MEDICAL COLLEGE ABBOTTABAD



GASTROINTESTINAL & HEPATOBILIAR II MODULE

4TH YEAR MBBS

BLOCK:K DURATION: 9 WEEKS SESSION: 2024

STUDENT NAME

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: https://kmu.edu.pk/examination/guidelines

• 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.

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1 Module Committee:

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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.



3 Recommended List Of Icons





Resource Material

4 Table Of Specification

S. No	Themes	Topics covered	Duration Weeks
1	Difficulty in swallowing	Oral cavity	1
		Salivary glands	
		Esophagus	
2	Pain epigastrium	Stomach and duodenum	1
3	Pain right upper abdomen	Liver	2
		Gall bladder	
		Pancreas	
4	Diarrhea and constipation	Small intestine	3
5	Bleeding Per Rectum	Large intestine	1
6	Practical work		1

5 Organization of Module

5.1 Introduction:

Gastro-intestinal-II and Hepatobiliary-II Module is designed to provide both basic, clinical knowledge and skills to the medical students. The modules include sessions on important pathological diseases of gastrointestinal system and hepatobiliary system. The relevant clinical subjects are also taught under the shared themes with pharmacological explanation. The medical and surgical management and preventive aspect of the diseases is also addressed.

5.2 Rational :

A thorough understanding of the diseases of the gastrointestinal tract and hepatobilary system is essential as more than 50% cases in medical and surgical OPD are related to these systems



6 Learning Objectives

6.1 General Learning Outcomes

By the end of the module, students of 4th year MBBS should be able to:

- 1. Describe the etiology, pathogenesis, morphology, clinical features, laboratory diagnosis, medical and surgical management of diseases of GIT & hepatobiliary system.
- 2. Interpret the liver function tests in different hepatic diseases.
- 3. Describe the basic and clinical pharmacology of drugs used in GIT & hepatobiliary diseases.
- 4. Write prescriptions for common GIT & hepatobiliary disorders.
- 5. Describe medico legal aspects of abdominal trauma.
- 6. Describe medico legal aspects of vegetable acid, corrosive and irritants poisoning
- 7. Describe the epidemiology and prevention of malnutrition and viral hepatitis.
- 8. Analyze demographic processes in context of public health care.

6.2 Specific learning objectives

Theme-1 (Difficulty in swallowing)			
	· - ·		· · · ·
Subject	Горіс	IVIII	Learning objective At the end of year-4, the students of MBRS will
			be able to:
Pathology	Salivary Gland	LGF	Classify the inflammatory and neoplastic
	(Inflammation		diseases of salivary gland.
	and tumors)		
			Describe the etiology, morphology and clinical
			presentation of inflammatory and neoplastic
	Fsonhagus	IGE	Classify econhagitis
	Loophagas	201	Describe the etiology, pathophysiology,
			morphology, clinical presentation and
			complications of esophagitis
			Classify esophageal tumors.
			Describe the etiology, pathogenesis,
			morphology, clinical presentation, diagnosis
Madiaina	Oral Cavity		and complications of esophageal tumors
weatche		LGF	ulcers
	Discuses		Discuss the clinical features of stomatitis and
			Aphthous ulcers
			Discuss the investigations of stomatitis and
			Aphthous ulcers
			Devise a management plan for stomatitis and
	F acalas a	1.05	Aphthous ulcers
	Esophagus:	LGF	Discuss the causes of esophageal motility
	motility disorders		
			Discuss the clinical features of esophageal
			motility disorders
			Discuss the relevant investigations of
			esophageal motility disorders
			Devise a management plan of esophageal
	1) Econhagitic		motility disorders
	I) ESOPHABILIS	LGF	Discuss the clinical features of econhagitis
			Discuss the appropriate diagnostic testing for
			esophagitis
			Devise a management plan for esophagitis
	2) Cardia	LGF	Discuss the etiology, clinical features,

	achalasia		investigations and management of Cardia achalasia
	3) Gastro Esophageal reflux disease (GERD)	LGF	Discuss the risk factors, etiology, clinical features, investigations, complications and management of GERD
ENT	Cleft lip and palate	LGF	Discuss the etiology, clinical features, investigations, complications and management of cleft lip and palate
	Pharyngitis and Tonsillitis	LGF	Discuss the etiology, clinical features, investigations, complications and management of Pharyngitis and acute Tonsillitis
			Explain the clinical features, and management of peritonsillar abscess
			Discuss the classification, etiology, clinical features, investigations, and management of Chronic Tonsillitis
	Oropharyngeal cancer	LGF	Discuss the classification, etiology, clinical features, investigations, and management of oropharyngeal cancers
	Salivary glands	LGF	Classify diseases of the salivary glands
			Explain the etiology, clinical features, investigations and management of Mumps, and Sialadenitis
			Explain the etiology, clinical features, investigations and management of salivary ducts stones
	Dysphagia	LGF	Explain the types, etiology, clinical features, investigations and management of a patient with dysphagia
Surgery	Tumors of the esophagus	LGF	Discuss the classification, etiology, clinical features, investigations, staging and management of Esophageal cancers
	Para-esophageal hiatus hernia	LGF	Explain the etiology, clinical features, investigations and management of Para- esophageal hiatus hernia
PRIME/ME DICAL EDUCATIO N	Social accountability	LGF	Explain the concept of social accountability
			Differentiate between different social accountability issues
	т	heme-2	2 (Epigastric pain)

Pathology	Gastritis	LGF	Explain the types, etiology, microscopic
i attrology	Custinus	20.	morphology and clinical features of Gastritis
	Peptic ulcers	LGF	Discuss the etiology, pathophysiology,
			morphology, complications and lab. diagnosis
			of peptic ulcer disease
			the causation of Peptic ulcer disease
			Discuss the morphology, virulence factors and
			lab diagnosis of H. Pylori & campylobacter
	Gastric polyps and	LGF	Classify gastric polyps and tumors
	tumors		
			Describe the pathogenesis, morphology, lab
			diagnosis and complications of gastric polyps
Medicine	Gastritis	LGF	Explain the types, etiology, clinical features,
			investigations, management and complications
			of Gastritis
	Peptic ulcer	LGF	Explain the types, etiology, clinical features,
	disease		investigations, management and complications
			Describe Hipplori eradication therapy protocols
			in the treatment of peptic ulcer disease
	Upper GI Bleeding	LGF	Explain the etiology, clinical features,
			investigations and management of a patient
			with upper GI bleeding
			Describe the indications and procedures of
			pharmacological
Pharmacol	Anti-omotics		and endoscopic treatment of variceal bleeding
	Anti-emetics	LGF	
-81			Describe the mechanism of serotonin
			antagonists as anti-emetic agents.
			Enlist the clinical uses (anti-emetic) and adverse
			effects of serotonin antagonists.
			Describe the pharmacological basis of serotonin
			antagonists in chemotherapy induced vomiting
			anti-emetic agents
			Enlist the clinical uses (anti-emetic) of H1-
			antagonists.
			Describe the mechanism of anticholinergic
			drugs as anti-emetic agents.
			Enlist the clinical uses (anti-emetic) of

	1	
		anticholinergic drugs.
		Describe the pharmacological basis of
		Describe the anti-emotic mechanism of D2
		recenter blockers (Meteolopromide &
		Democridene)
		Domperidone).
		Enlist the clinical uses (anti-emetic) and adverse
		effects of D2-receptor blockers.
		Compare the pharmacological features of
		metoclopramide & Domperidone.
		Describe the drug interaction of
		metoclopramide with levodopa.
		Describe the mechanism of neuroleptics as
		anu-emetic agent.
		Enumerate the clinical uses (anti-emetic) of neuroleptic drugs.
		Describe the antiemetic mechanism of
		benzodiazepines.
		Describe the antiemetic mechanism of
		glucocorticoids.
		Enumerate the indications (anti-emetic) of
		glucocorticoids.
		List anti-emetic drugs used in morning sickness.
		List anti-emetic drugs used in chemotherapy
		induced vomiting.
Drugs used in the	LGF	Enlist the drugs used in variceal hemorrhage
treatment of		
variceal bleeding		
		Describe the mechanism of somatostatin and
		octreotide in variceal hemorrhage
	1	Describe the mechanism of Vasopressin &
		Terlipressin in variceal hemorrhage
		Describe the mechanism of beta-blockers in
		variceal hemorrhage
Drugs used in the	LGF	Classify the drugs used in Peptic ulcer disease
treatment of		
Peptic ulcer		
disease and		
Gastritis		
		Describe the mechanism of action, indications
		and adverse effects of proton pump inhibitors
		(PPIs).
		Describe the pharmacokinetics of PPIs with
		special emphasis on time of administration

	-	r	
			Describe the drug interaction of Omeprazole & H2 blockers with Sucralfate
			Describe the drug interaction of Omeprazole with Clopidogrel
			Describe the mechanism of action, indications
			and adverse effects of H-2 blockers.
			Compare/differentiate H2-blockers in terms of
			bioavailability and involvement in drug
			Describe the mechanism of action indications
			and adverse effects of Antacids.
			Enumerate the properties of an ideal antacid.
			Describe the pharmacokinetics of antacids with special emphasis on time of administration
			Describe the drug interactions of antacids with
			tetracyclines, iron and fluroquinolones.
			Describe the mechanism of sucralfate in the
			treatment of peptic ulcer
			List the indicationsof sucralfate.
			Discuss the drug interaction of sucralfate with
			digoxin, ketoconazole and tetracyclines.
			Describe the pharmacokinetics of sucralfate
			with special emphasis on time of
			administration.
			Describe the mechanism, indications and
			adverse effects of bismuth compounds.
			Describe the role of anticholinergic drugs in peptic ulcer.
			List the indications (anti-peptic ulcer) of anticholinergic drugs.
			Discuss the pharmacological basis for the use of
			prostaglandin analogues (Misoprostol) in the
			treatment of peptic ulcer.
			List the contraindications of misoprostol.
			Describe triple therapy for the eradication of
			H.pylori infection.
			Describe quadruple therapy for the eradication
			of H.pylori infection
Forensic	Common house-	LGF	Enlist, domestic, medicinal and garden poisons
medicine	hold poisons		commonly used
	Corrosives/ Mineral acids	LGF	Enlist different commonly used mineral acids
			Enumerate physical appearance and uses of
			Sulphuric acid

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			Describe mechanism of action, fatal dose & period of Sulphuric acid
			Describe clinical features and treatment of Sulphuric acid burns
			Describe postmortem appearance and forensic
			importance of Sulphuric acid burns
			Enumerate physical appearance and uses of
			nitric acid
			Describe mechanism of action and fatal dose &
			period of nitric acid
			Describe clinical features and postmortem
			Enumerate physical appearance and uses of
			hydrochloric acid
			Describe clinical features and postmortem
	Correcives / Alkali		appearance of hydrochloric acid burns
		LGF	Emission and uses of
			alkali
			Describe mechanism of action, clinical features
			and treatment of alkali burns
			Describe postmortem appearance and forensic
	Corrective		Importance of alkali burns
	acid	LGF	Enlist different commonly used organic acids
			Enumerate physical appearance and uses of carbolic acid
			Describe mechanism of action, fatal dose & period of carbolic acid
			Describe clinical features and treatment of carbolic acid poisoning
			Describe postmortem appearance and forensic importance of carbolic acid poisoning
			Enumerate physical appearance and uses of
			oxalic acid
			Describe mechanism of action, fatal dose &
			period of oxalic acid
			Describe clinical features and treatment of oxalic acid poisoning
			Describe postmortem appearance and forensic
	Corrosive/	IGE	Enumerate physical appearance sources and
	vegetable acid		uses of cyanides
	and cyanices		

			Describe mechanism of action fatal dose &
			neriod of cyanides
			Describe clinical features and treatment of
			cvanide noisoning
			Describe postmortem appearance and forensic
			importance of cvanide acid poisoning
Surgery	Gastric cancer	LGF	Describe the types, etiology, risk factors, lab
ourgery		20.	diagnosis and management of a patient with
			gastric cancer
	Gastric outlet	LGF	Describe the etiology, diagnosis and
	obstruction		management of a patient with gastric outlet
			obstruction
Communit	Health system of	LGF	Define health care system of Pakistan using
y medicine	Pakistan:		WHO Health system frame work
and public	Introduction		
health			
	Primary health	LGF	Define PHC
	care (PHC)		
			Describe the history of development of PHC
			Describe the concepts and components of PHC
			Describe comprehensive & selective PHC
			Describe reasons for failure of PHC
			Describe Health Systems before & after PHC
			Describe district health care system
			Enumerate indicators for assessing PHC
	Health education	LGF	Define health education
			Describe objectives and functions of health
			education
			Describe the components of health education
			Describe the methods of health education
			Describe the communication channel in health
			education
			Describe the constraints in health education
			Describe classification of theories of health
			education
			Describe the stages in health education
			Describe the principles of health education
			Describe the strategies for an effective health
			education program
			Explain the methods of evaluation and
			effectiveness of a health education project
	Health	LGF	Define concept of HMIS
	management		
	information		

 system (HMIS)		
		Enumerate the components of HMIS
		Describe its importance in health care delivery
		system
		Enumerate the principles of HMIS
		Give the causes of failure of HMIS
Hospital	LGF	Define health care delivery system
administration		
		Describe the need of a specialized hospital
		administration
		Describe the attributes of a good hospital
		administrator
		Describe functions involved in hospital
		administration
		Describe the levels of hospitals and
		management levels in a hospital
Health plans -	LGF	Describe different health plans
Longitudinal,		
horizontal,		
integrated, 5 year,		
ADP, SAP, Short		
term, long term		
		Describe characteristics of health plans
Health plans -	LGF	Enumerate MDGS
MDGs		
		Describe targets & indicators of various health
		related MDGs
		Describe reasons for failure to achieve MDGS
Health plans –	LGF	Enumerate SDGs related to health
SDGs		
		Describe targets & indicators of various health
		related SDGs
		Describe Pakistan progress on set targets
Health planning	LGF	Define health planning
		Describe importance & use of planning in
		health
		Explain the reasons for ineffective health
		planning in Pakistan
		Describe health planning cycle
		Describe the types of health planning
Health economics	IGF	Define Health economics
		Explain the importance of economic studies in
		health
		Describe different tools used in economic

			evaluations
	Health policy	LGF	Define health policy
			Describe its role in health system
			Describe different stages in policy making
			Describe the different types of policies
			Describe the constraints in policy making
			Describe health policy of Pakistan
	Role of	LGF	Enumerate international health agencies
	international		working in health sector
	health agencies in		
	public health		
			Discuss structure and function of WHO & UNICEF
			Explain the roles of WHO & UNICEF in Pakistan
	Theme	-3 (Pain	ı right upper abdomen)
	T	Γ	
Anatomy	Gross anatomy	LGF	Explain the lobes and segments of the liver
			Discuss the gross structure of gall bladder and
			biliary channels
			Explain the gross and microscopic structure of
			the pancreas
	Liver histology	LGF	Explain the microscopic structure of the liver
			and gall bladder
Pathology	Liver Function	LGF	Enumerate the functions of the liver.
	Tests		Explain the significance of different liver
			function tests.
			Interpret the Liver function tests in different
			diseases.
	Mechanisms of	LGF	Describe the etiology and morphology of liver
	liver injury and		injury and repair
	repair		
	Acute Liver failure	LGF	Describe the etiology, pathogenesis, clinical and
			biochemical and other features of acute liver
			failure
	Chronic Liver	LGF	Describe the etiology,
	disease and liver		pathogenesis, clinical and biochemical and
	cirrhosis		other features of chronic liver disease
			Explain the complications of liver cirrhosis
	Portal	LGF	Describe the etiology,
	hypertension		pathogenesis, clinical features and complication
			of portal hypertension
	Viral hepatitis A	LGF	Explain the Etiology, pathogenesis, morphology
	and E		and clinical features of Acute viral hepatitis A
			and E infection

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Viral hepatitis B	LGF	Explain the Etiology, risk factors, pathogenesis, morphology and clinical features of Acute viral hepatitis B infection
		Explain the pathogenesis, morphology and clinical features of Chronic viral hepatitis B infection
		Discuss the stages of viral hepatitis B infections
		Discuss the complications of chronic Hepatitis B virus infection
		Discuss the serological markers of hepatitis B Virus infection
		Explain the preventive strategies of Hepatitis B virus infection
Viral Hepatitis C	LGF	Explain the Etiology, risk factors, pathogenesis, morphology and clinical features of viral hepatitis C infection
		Discuss the complications of chronic Hepatitis C virus infection
Autoimmune hepatitis	LGF	Define autoimmune hepatitis
		Explain the serological and morphological features of autoimmune hepatitis
Toxin and Drug induced hepatitis	LGF	Explain the etiology and morphological features of toxins and drug induced hepatitis
 Alcoholic liver disease	LGF	Discuss the morphology, pathogenesis and complications of Alcoholic liver disease
Metabolic liver diseases Non- Alcoholic liver disease (NAFLD) Hemochro matosis Wilson`s disease Alpha-1 antitrypsin deficiency	LGF	Describe the morphology, clinical features and complications of NAFLD, Hemochromatosis, Wilson`s disease and Alpha-1 Anti-Trypsin deficiency
		Describe the etiology, morphology, clinical features and complications of
		Hemochromatosis
		Describe the etiology, morphology, clinical

1	1		
			features and complications of Wilson's disease
			Describe the etiology, morphology, clinical
			features and complication of Alpha-1 Anti-
			Trypsin deficiency
	Liver abscess	LGF	Describe the etiology, pathogenesis,
			morphology, clinical presentation,
			complications and lab diagnosis of Liver abscess
	Tumors of the	LGF	Classify liver tumors
	liver		
			Explain the benign tumors of the liver
			Discuss the risk factors, etiology, morphology,
			clinical features, staging and complications of
			hepatocellular carcinoma
	Gall bladder	LGF	Discuss the types, risk factors, etiology,
	 Gall stones 		morphology, clinical features and complications
			of gall stones
	Cholecystiti	LGF	Discuss the risk factors, etiology, morphology,
	S		clinical features and complications of acute
			cholecystitis
			Discuss the risk factors, etiology, morphology,
			clinical features and complications of Chronic
			cholecystitis
	Gall		Discuss the risk factors, etiology, morphology,
	bladder		clinical features, staging and complications of
	cancer		carcinoma gall bladder
	Pancreas		Enlist and define the congenital anomalies of
			pancreas
			Discuss the risk factors, etiology, morphology,
			clinical features and complications of acute
			pancreatitis
			Discuss the risk factors, etiology, morphology,
			clinical features and complications of chronic
			pancreatitis
			Describe the pathogenesis and complications of
			pancreatic pseudocyst
			Discuss the risk factors, etiology, morphology,
			clinical features, staging and complications of
			carcinoma of pancreas
Pediatrics	Hereditary	LGF	Classify hereditary hyperbilirubinemias
	hyperbilirubinemi		
	as		
			Explain the types, clinical features,
			investigations and management of different
			hereditary hyperbilirubinemias

	Acute hepatitis A	LGF	Explain the Etiology, pathogenesis, clinical features, investigations and treatment of Acute viral hepatitis A infection
Medicine	Hepatitis B virus infection	LGF	Explain the Etiology, pathogenesis, clinical features, investigations and treatment of Acute viral hepatitis B infection
			Explain the Etiology, pathogenesis, clinical features, investigations and treatment of chronic viral hepatitis B infection
	Hepatitis C virus infection	LGF	Explain the Etiology, pathogenesis, clinical features, investigations and treatment of chronic viral hepatitis C infection
			Explain the clinical features, investigations, management and complications of liver cirrhosis
			Explain the treatment of a patient with hepatic encephalopathy
	Metabolic liver diseases	LGF	Discuss the management of a patient with Wilson's disease
			Discuss the management of a patient with Hemochromatosis
			Discuss the management of a patient with primary biliary cirrhosis
			Discuss the management of a patient with autoimmune hepatitis
	Hepatic vein obstruction	LGF	Discuss the etiology, clinical features, investigations and management of a patient with hepatic vein obstruction
	Hepatocellular carcinoma	LGF	Explain the etiology, clinical features, investigations, treatment and complications of hepatocellular carcinoma
	Carcinoma of the pancreas	LGF	Discuss the risk factors, etiology, clinical features, staging and complications of carcinoma of pancreas
Surgery	Gall bladder and pancreas	LGF	Explain the etiology, clinical features, investigations, treatment and complications of gall stones
			Explain the etiology, clinical features, investigations, treatment and complications of acute and chronic cholecystitis
			Explain the etiology, clinical features, investigations, treatment and complications of acute and chronic pancreatitis
	Carcinoma of the gall bladder	LGF	Discuss the risk factors, etiology, clinical features, staging and complications of

			carcinoma of gall bladder
	Liverabceec		Evolution the sticlery clinical features
	LIVEI address	LGF	investigations treatment and complications of
			liver abscossos
	Hydatid livor cysts	ICE	Evolution the otiology clinical features
	Hyuatiu liver cysts	LGF	explain the etiology, clinical realties,
			Hydetid liver cysts
Dharmacol	Honototovic druge		Describe first pass honotic metabolism
Plialinacol	nepatotoxic urugs	LGF	Describe first pass nepatic metabolism
Ogy			Enlict common honototoxic drugs
			Emist common nepatotoxic drugs
			Explain the drug treatment of paracetamol
	Druge used in the		poisoning Classifiethe druge for bonetitie Desirus infection
	Drugs used in the	LGF	Classify the drugs for hepatitis B virus infection
	treatment of		
	перация в		
			Describe the duration and advarse offects of
			drugs used in the treatment of chronic henotitic
			drugs used in the treatment of chronic nepatitis
	Druge used in the		D Classify the drugs for honotitis Chirus infection
	brugs used in the	LGF	Classify the drugs for hepatitis C virus infection
	honotitic C		
	nepatitis C		Describe the duration and advarse effects of
			drugs used in the treatment of chronic henetitic
Communit	Viral Honatitic		C Describe the enidemiological determinants of
v modicino	viral nepatitis	LGF	Hopatitis R & C
ymedicine			Describe the provalence and insidence with
			reference to local context
			Describe the proventive & control measures for
			Henotitic P & C
Family	Acuto and chronic		Evalues bac Evaluin the stiplany and clinical features of
Modicino	honotitic	LGF	acuto honotitis
weutine	перация		Explain the management strategies of south
			henotitis in family practice
			Explain the atiology clinical features and
			complications of Chronic honotitis
			Evaluations of chronic nepatitis
			bonatitie in family practice
			Describe the red flags in a noticet with south
			and chronic honotitic for referred to encicity
			and chronic hepatitis for referral to speciality
			care

	Theme-4: (Diarrhea and Constipation)			
Pathology	Intestinal obstruction	LGF	Define hernia, adhesions, volvulus, and intussusception	
	Ischemic bowel disease	LGF	Describe the etiology, pathogenesis, morphology, and complications of small bowel ischemia	
	Diarrheas	LGF	Define malabsorption syndrome	
			Classify diarrheas	
			Explain the etiology, morphology, clinical features and complications of Celiac disease	
	Bacterial enterocolitis	LGF	Explain the etiology, pathogenesis, and clinical features of bacterial enterocolitis	
			Explain the etiology, pathogenesis, morphology and clinical features of Salmonellosis	
	Parasitic enterocolitis	LGF	Classify the parasites invading the small gut	
	Entamoeba histolytica	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Amebiasis	
	Giardia lamblia	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Giardiasis	
	Hymenolepis nana	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of H. nana infestation	
	Diphyllobothrium latum	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Diphyllobothrium latum	
	Schistosoma hematobium, mansoni and japonicum	LGF	Enlist physical characteristics of Trematodes	
			Classify Schistosoma on the basis of organ systems affected	
			Describe the routes of infection, pathophysiology life cycle, clinical features and lab diagnosis of Schistosoma hematobium, mansoni and japoncum	
			Compare the morphological characteristics of eggs of different species of Schistosoma.	
	Ascaris lumbricoides	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Ascaris lumbricoides	

		_	
	Strongyloides	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Strongyloides
	Ankylostoma duodenale	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Ankylostoma duodenale
	Enterobius vermicularis	LGF	Discuss the life cycle, morphology, pathogenesis, clinical features and complications of Enterobius vermicularis
Medicine	Intestinal tuberculosis	LGF	Discuss the etiology, pathogenesis, clinical features, investigations, treatment and complications of intestinal tuberculosis
Surgery	Acute appendicitis	LGF	Discuss the etiology, risk factors, pathogenesis, clinical features, differential diagnosis, investigations, treatment and complications of acute appendicitis
	Intestinal obstruction	LGF	Discuss the etiology, clinical features, investigations, management and complications of intestinal obstruction
Pharmacol ogy	Antidiarrheal agents (Opioids, Colloidal bismuth compounds, Kaolin & Pectin, etc	LGF	Define and classify antidiarrheal agents
			Describe the mechanism of action of different antidiarrheal agents
	Laxatives (Bulk- forming, stool softners, osmotic laxatives, stimulant laxatives, etc.	LGF	Define and classify laxative drugs
			Describe the mechanism of action of different laxatives
	Lactulose	LGF	Describe the pharmacological basis of Lactulose in the treatment of hepatic encephalopathy
	Anti-amoebic drugs	LGF	Classify anti-amoebic drugs
			Describe mechanism of actions of Metronidazole & Dialoxanide Furoate
			Enlist indications and adverse effect of Metronidazole & Dialoxanide Furoate.
			Describe the drug interaction of Metronidazole with Alcohol.

	Anthelmintics	LGF	Classify Anti-Helminthic drugs
			Enumerate clinical use(s), adverse effects and
			contraindications of Albendazole,
			Mebendazole, Pyrantal Pamoate, Ivermectin,
			Praziquantel & Niclosamide
			Describe mechanism of action of Albendazole,
			Mebendazole, Pyrantal Pamoate, Ivermectin,
			Praziquantel & Niclosamide
	Anti-	LGF	List the drugs used in enteric fever
	Salmonellosis		
	drugs		
	U		Describe the basis for selection of antibiotics in
			enteric fever based on age pregnancy and
			resistance
			Describe the clinical applications of
			fluroquinolones in the treatment of
			gastrointestinal disorders
Forensic	Irritants	LGE	Classify irritants poisons
medicine	innants	201	
medicine	Irritants:		Enlict common motallic irritant poisons
	Motallic poicons	LOI	
			Describe abusised engagements was
			Describe physical appearance, uses,
			mechanism, fatal dose, fatal period and signs
			and symptoms of Copper and Mercury poisons
			Describe the treatment, postmortem
			appearance and medicolegal importance of
			common Copper and Mercury poisons
			Describe the signs and symptoms, treatment,
			postmortem appearance and medicolegal
			importance of acute and chronic Arsenic
			poisoning
			Describe the signs and symptoms, treatment,
			postmortem appearance and medicolegal
			importance of acute and chronic Lead
			poisoning
	Irritants	LGF	Enlist commonly encountered mechanical
	/mechanical		poisons
	poisons/ powder		
	glass		
	_		Enumerate symptoms and signs, treatment,
			postmortem appearance and forensic
			importance of powder glass
	Irritants/	LGF	Enlist commonly encountered inorganic
	nonmetallic		elements poisoning
	poisons		0
	1 000000	I	1

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			Enumerate physical appearance and uses of phosphorus
			Describe mechanism of action, fatal dose & period of phosphorus
			Describe clinical features and treatment of
			phosphorus poisoning
			Describe postmortem appearance and forensic
			importance of phosphorus poisoning
			Describe physical appearance, uses, mechanism
			of action, clinical features, treatment,
			postmortem appearance and forensic
			importance of aluminum phosphide
			Describe physical appearance, uses, mechanism
			of action, clinical features, treatment,
			postmortem appearance and forensic
			importance of chlorine
			Describe physical appearance, uses, mechanism
			of action, clinical features, treatment,
			postmortem appearance and forensic
			importance of iodine
	Irritants/	LGF	Enlist commonly encountered inorganic
	vegetable poisons		elements poisoning
			Describe characteristics, active principles and
			clinical features of vegetable poisons
			Enumerate uses, fatal dose and fatal periods of
			vegetable poisons
			Describe treatment, postmortem appearance
			and forensic importance of vegetable poisons
	Irritants/ animal	LGF	Differentiate between poisonous and non-
	poisons		poisonous snakes
			Classify snakes on the basis of their venom
			Describe the characteristics of snake venoms
			Classify different snakes venoms
			Describe steps of management of snake bite
			Describe post mortem appearance and medico
			legal aspects of venomous snake bite
			Describe sign and symptoms of scorpion bite
Communit	Overview of	LGF	Describe the common intestinal worm
y medicine	common		infestation in our local context
	intestinal worms'		
	infestation and		
	their control		

			Describe the epidemiological determinants of common worm infestation with reference to local context
			Describe the preventive & control measures for common worm infestation
	Control of dysentery	LGF	Describe the epidemiology of Dysentery.
			Describe the prevention & control measures of Dysentery
	Food hygiene	LGF	Describe the term food Hygiene
			Describe the importance of food hygiene
			Describe the process of Food hygiene
Family medicine	Enteric infections	LGF	Classify enteric infections
			Describe the etiology, clinical features, investigations and management of Salmonellosis
			Describe the red-flags in a patient with Salmonella infections for referral to specialty care
			Explain the etiology, and management of acute gastroenteritis
			Discuss the primary and secondary prevention of acute gastroenteritis in a primary healthcare setting
			Describe the red-flags in a patient with acute gastroenteritis for referral to specialty care
Pediatrics	Lactase deficiency	LGF	Describe the clinical features, investigations, complications and management of Lactase deficiency
	Infectious diarrhea	LGF	Describe the etiology, clinical features, investigations, complications and management of infectious diarrheas in children
	Celiac disease	LGF	Describe the etiology, clinical features, investigations, complications and management of Celiac disease
	Then	ne- 5 (B	Bleeding per Rectum)
Pathology	Inflammatory bowel disease (IBD)	LGF	Classify IBD
			Discuss the risk factors and etiology of IBDs
			Explain the pathogenesis clinical presentation of IBD

			Differentiate between Ulcerative colitis and Crohn's disease
			Discuss the investigations and management of IBDs
			Explain the intestinal and extra-intestinal manifestations/complications of IBDs
			Explain the role of surveillance colonoscopy in
	Diverticular	LGF	Explain the etiology, pathogenesis, morphology
	Colonic polync	ICE	Classify colonic polyps
			Describe the pathogenesis, morphology, clinical presentation, complications and diagnosis of different types of colonic polyps
	Hemorrhoids	LGF	Define hemorrhoids
			Explain the morphology, pathogenesis and clinical features of Hemorrhoids
	Colorectal carcinoma	LGF	Describe the adenoma carcinoma sequence
			Describe the pathogenesis, morphology, clinical presentation, complications and staging of colorectal Carcinoma
Surgery	Ulcerative colitis	LGF	Explain the etiology, pathogenesis, clinical features, complications and surgical management of Ulcerative colitis
	Crohn`s disease	LGF	Explain the etiology, pathogenesis, clinical features, complications and surgical management of Crohn's disease
	Diverticular disease	LGF	Explain the etiology, pathogenesis, clinical features, complications and management of Diverticulosis and Diverticulitis
	Anal diseases: • fistula • fissures • hemorrhoi ds	LGF	Define perianal fistula and anal fissure
			Explain the risk factors and management of anal fistula and anal fissures
			Explain the risk factors and management of hemorrhoids
	Colorectal cancers	LGF	Classify colorectal cancers
			Describe the staging of colorectal cancers
			Explain the pathogenesis, risk factors and clinical features of colorectal cancers

			Explain the complications, management and
		1.05	prognosis of colorectal cancers
	Ischemic Colitis	LGF	Explain the etiology, pathogenesis, clinical features, complications and management of Ischemic colitis
Medicine	Irritable bowel syndrome	LGF	Explain the risk factors, clinical features, and management of Irritable bowel syndrome
	Ulcerative colitis	LGF	Explain the etiology, pathogenesis, clinical features, complications and surgical management of Crohn`s disease
	Crohn`s disease	LGF	Explain the etiology, pathogenesis, clinical features, complications and management of Crohn's disease
	Ano-rectal infections	LGF	Classify anorectal infections
			Explain the risk factors, clinical features and management of anorectal infections including sexually transmitted infections
Pharmacol ogy	Drugs used in the treatment of Irritable Bowel Syndrome (IBS)	LGF	Enlist the drugs used in IBS
			Describe the mechanism of action of antispasmodics (anticholinergics), 5-HT receptor antagonisms (Alosetron) in IBS
	Drugs used in the treatment of IBD	LGF	Classify the drugs used in IBD
			Describe the mechanism of actions of aminosalicylates, glucocorticoids, purine analogues, methotrexate, monoclonal antibodies and anti-integrin in IBDs
			Explain the adverse effects of drugs used in the treatment of IBD
Forensic medicine	Abdominal injuries	LGF	Describe injuries to abdominal wall
			Describe injuries to esophagus, intestine and stomach
			Describe injuries to liver and spleen
		Pra	actical work
Pathology	Ascaris	Identi	fy the important morphological and staining
	Lumbricoides	chara	cteristics of the ova
	Enterobius	ldenti	ty the important morphological and staining
	vermicularis	chara	cteristics of the ova
	Ankylostoma	identi	TY THE IMPORTANT MORPHOLOGICAL and staining

Teaching hours allocation

	duodenale	characteristics of the ova
	Liver Function	To interpret normal and abnormal liver function tests
	Tests	in different clinical scenarios
Pharmacol	Peptic ulcer	construct prescription for Helicobacter-associated
ogy	disease	peptic ulcer disease (Triple therapy & Quadruple
		therapy)
	Anti-emetics	construct prescriptions for motion sickness, morning
		sickness, post-operative patient
		construct prescriptions for cancer chemotherapy-
		induced vomiting
		construct a prescription for a patient suffering from
		amoebic dysentery
	Enteric fever	construct a prescription for a patient suffering from
		Enteric fever
		Write a prescription for a patient suffering from
		Ascariasis
Forensic	Poisons	Identify corrosives
medicine		
	Corosives	Case presentation of vitriolage
	Irritants	identify common irritant poisons
	Metallic poisons	identify common Metallic and non-metallic poisons
	Vegetable and	identify common Vegetable and animal poisons

S.No	Subject	Theory hours	Practical hours	Total hours
1.	Pathology	39	10	49
2.	Pharmacology	10	10	20
3.	Forensic Medicine	14	10	24
4.	Community Medicine	19	10 (Research)	29
5.	Medicine	17	Х	17
6.	Surgery	14	Х	14
7.	Pediatrics	04	Х	02
8.	Family medicine	03	X	O3
9.	Anatomy	01	Х	01
10.	Prime	01	Х	01
11.	ENT	24	Х	24
12.	Eye	17	X	17



Examination and Methods of Assessment:

The year-4 will be assessed in 5 blocks.

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- 1) Block-1 (Neurosciences-2 module) will be assessed in paper-J.
- 2) Block-2 (GIT and hepatobiliary module-2 will be assessed in paper-K.
- 3) Block-3 (Renal-2, Endocrine and Reproduction-2 module) will be assessed in paper-L.
- 4) Block-4 (ENT module) will be assessed in paper M-1.
- 5) Block-5 (Eye module) will be assessed in paper M-2.
- Each written paper consists of 120 MCQs except for ENT & Eye papers which includes 90 MCQs each.
- 7) Internal assessment will be added to final marks in KMU.
- For ENT (M-1 module) and Eye (M-2 module), the marks allocated for each OSCEstation will be 5, while the rest of the modules are allotted 6 marks per OSCE station.
- Practical assessment will be in the form of OSPE/OSCE which will also include embedded viva stations.

The details of each section are given in the tables below. Assessment Plan for 4 th Year MBBS							
Theory paper	Modules	Theory marks	Internal assessment theory (10%)	OSPE/OSP E	Internal assessment OSPE/OSP E(10%)	TOTA L MARK S	
Paper J	Neurosciences-2	120	13	120	13	266	
Paper K	GIT-2	120	13	120	13	266	

Paper L	Renal-2 and Endocrine and Reproduction	120	14	120	13	267
Paper M-1	ENT	90	10	75*	8	183
Paper M-2	EYE	90	10	75*	8	183
Research**						35
Total Mark s		480	53	500	67	1200

*For ENT (M-1 module) and Eye (M-2 module), the marks allocated for each OSCE station will be 5, while the rest of the modules are allotted 6 marks per OSPE/OSCE station.

**Research viva of 20 marks will be conducted in paper-L. However, the rest of the 15 marks will be decided by the concerned department internally for the contribution of the students in research project/thesis.

Paper-K (GIT and Hepatobiliary-2)

MCQs

Subject	Total MCQs
Pharmacology	16
Pathology	41
Forensic medicine	16
Community	18
medicine	
PRIME	01
Medicine	11
Surgery	12
Pediatrics	03
Family medicine	02
Total	120

OSPE

Subject	Viva stations	OSPE/OSCE	Tota
		stations	I
Pharmacology	2	2	4
Pathology	2	2	4
Forensic	2	2	4
medicine			
Community	2	4	6
medicine			
Medicine (GIT	Х	1	1
examination)			
Surgery	Х	1	1
(GIT/local			
examination)			
Total	8	12	20

* A minimum of 20 stations will be used in final exams. Total marks will be 120 (6marks for each station).



8 Learning Opportunities and Resources

8.1 Books:

Pathology:

Robbins Basic Pathology Pharmacology: Basic and clinical pharmacology by Katzung BG, Maters SB, Trevor AJ, 14th Edition *Lippinocott's Illustrated reviews, Pharmacology, Clark MA, Finkel R, Ray JA, Whalen K, 7*th Edition. **Reference Books:** Goodman and Gilman's The Pharmacologicl Basis of Therapeutics, Brunton LL 12th Edition **Pediatrics:** Nelson book of pediatrics 21st Edition Basis of pediatrics, Pervaiz Akbar Khan, Ninth edition Forensic Medicine: Parikh text book of medical jurisprudence. Seventh edition. Principles and practice of Forensic medicine by Nasib R. Awan Surgery: Baley and Love **Community Medicine:** 1. Park K. Park"s text book for preventive and social medicine. Twenth third edition. 2. Ansari IStextbook of community medicine eighth edition. Medicine: Davidson's Principles and Practice of medicine PJ kumar

9 Course Feedback Form

Course Title:			
Semester/Module Dates:			
Please fill the short questionnaire to make the co	ourse better.		
Please respond below with 1, 2, 3, 4 or 5, where	1 and 5 are explained.		
A Were objectives of the course clear to you?			
B The course contents met with your expectation			
L Strongly disagree	5 Stronglyagree		
C The lecture sequence was well-planned	5. Sti oligiy agi cc		
	5 Stronglyagree		
D The contents were illustrated with	5. Sti oligiy agi cc		
L Too few examples	5 Adequate examples		
E The level of the course was	5. Adequate examples		
I. Too low	5. Too high		
F. The course contents compared with your exp	pectations		
I. Too theoretical	5. Too empirical		
G. The course exposed you to new knowledge a	and practices		
I. Strongly disagree	5. Strongly agree		
H. Will you recommend this course to your colle	eagues?		
, I. Not at all	5. Very strongly		
THE CONDUCT OF THE MODLUE			
A. The lectures were clear and easy to understa	ind		
I. Strongly disagree	5. Strongly agree		
B. The teaching aids were effectively used			
I. Strongly disagree	5. Strongly agree		
C. The course material handed out was adequa	te		
I. Strongly disagree	5. Strongly agree		

	I. Strongly disagree		5. St	rongiyag	ree
D.	The instructors encouraged interaction a	nd were	helpful		
	I. Strongly disagree		5. St	ronglyag	ree
E.	Were objectives of the course realized?	Y	N		

F. Please give overall rating of the course

90% - 100%	()	60% - 70%	()
80% - 90%	()	50% - 60%	()
70% - 80%	()	below 50%	()

Please comment on the strengths of the course and the way it was conducted.

Please comment on the weaknesses of the course and the way it was conducted.

Please give suggestions for the improvement of the course.

Optional – Your name and contact address:

Thank you!!