

**RAMA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, HAPUR** Phase III Part-2 Clinical Posting (2019 Batch)

Clinical Posting of III MBBS Part -2 (2019 Batch)							
Date	IM	PE	OR	SU	DR	OG	
Date	(12 wks)	(4 wks)	(2 wks)	(12 wks)	(2 wks)	(12 wks)	
13-26 Feb '23	A1	A2	B1	B2	C1	C2	
27 Feb-12 Mar '23	A1	A2	C1	B2	B1	C2	
13-26 Mar '23	A1+A2	C1		B2		C2+B1	
27 Mar- 9 Apr'23	A1+A2	C1		B2		C2+B1	
10-23 Apr'23	A1+A2			B2+C1		C2+B1	
24 Apr- 7 May '23	A1+A2			B2+C1		C2+B1	
8-21 May '23	A2	B2	C2	C1	A1	B1	
22 May-4 Jun '23	A2	B2	A1	C1	C2	B1	
5-18 Jun '23	B2	C2+B1		C1	A2	A1	
19 Jun-2 Jul '23	B2	C2+B1	A2	C1		A1	
3-16 Jul '23	B2+C2			B1+A2		A1+C1	
17-30 Jul '23	B2+C2			B1+A2		A1+C1	
31 Jul -13 Aug'23	B2+C2			B1+A2		A1+C1	
14-27 Aug '23	B2+C2			B1+A2		A1+C1	
28 Aug- 10 Sep '23	C2	A1		B1+A2		C1+B2	
11-24 Sep '23	C2	A1		B1+A2		C1+B2	
25 Sep- 8 Oct '23	C1+B1			C2+A1		B2+A2	
9-22 Oct '23	C1+B1			C2+A1		B2+A2	
23 Oct-5 Nov '23	C1+B1			C2+A1		B2+A2	
6-19 Nov '23	C1+B1			C2+A1		B2+A2	
20 Nov- 3 Dec'23	C1+B1			C2+A1	B2	A2	
4-17 Dec'23	C1+B1		B2	C2+A1		A2	
18-31Dec '23	A1	A2	B1	B2	C1	C2	
1-14 Jan '24	A1	A2	B1	B2	C1	C2	
15-31 Jan '24	A2	B1	B2	C1	C2	A1	

Clinical Postings for Phase –III Part 2 (2019-20) MBBS Batch; 10 am to 1 pm

<b>Clinical Posting</b>	of III MBBS Part -2	(2019 Batch)
Chinese i obting		

IM-Internal Medicine, SU-Surgery, OG–Obstetrics & Gynaecology, PE-Paediatrics, DR-**Dermatology, OR-Orthopedics** 

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A1 (19002-04,07,08,10-17,19-25)	<b>A2</b> (19026,27,29-36,38-41,43- 47,49,50)
B1	B2
(19051-56,58-67,71,73-75)	(19076,77,79-82,84-94,97-99)
C1	C2
(19100-104,106-110,113,116-	(19130-139,141,143-149,
118,120,121,123-128)	18054,18073,3309095,3308066)

#### Batch is divided into 6 Groups as below:



#### **RAMA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, HAPUR** Phase III Part-2 Clinical Posting (2019 Batch)

#### Clinical Posting Classes for Phase-III Part 2 (2019-20 Batch)

Phase-III Part 2 students (2019-20 Batch) are posted in different departments for 2 or 4 weeks (as given in schedule above) from Mon to Sat- 10 am to 1 pm; 18 Hours a week. The Phase-III Part 2 student should be able to take History, to do Physical Examination, to Assess change in clinical status Communication & Patient Education. Departments may ensure that students take all precautions to prevent Covid-19 as per the periodic instructions of the government.

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5.	Orthopedics	OR	104
6.	Dermatology	DR	109





#### **RAMA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, HAPUR** Phase III Part-2 Clinical Posting (2019 Batch)

1. Clinical Posting Classes for Phase-III Part 2 (2019-20 Batch): Internal Medicine Each group is posted for 12 weeks in Medicine from Monday to Saturday (10 am to 1 pm). The students may be posted in rotation in the OPD, Ward & Special clinic according to the unit/units in the department. Faculty in charge for teaching will facilitate the Clinical Posting of students as follows:

internal Weaking Schedule			
Week	Day	Faculty	
Week 1 to Week 4	Mon		
	Tue		
	Wed	Faculty-in-Charge as decided	
	Thurs	by the HoD	
	Fri		
	Sat		

Faculty to ensure that the students take proper precautions to prevent Covid-19 as per the periodic government instructions. The following competencies may be imparted to the students posted according to the availability of patients:

S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
1.	IM 1.1: Describe & discuss the epidemiology, pathogenesis clinical evolution & course of common causes of heart disease including: rheumatic/ valvular, ischemic, hypertrophic inflammatory IM 1.2: Describe and discuss the genetic basis of some forms of heart failure	CP 1 IM 1.1, 1.2: Heart Diseases- Common Causes, their epidemiology, pathogenesis clinical features.	<ul> <li>Heart Diseases:</li> <li>Enumerate common causes of Heart Diseases</li> <li>Describe their epidemiology, pathogenesis.</li> <li>Describe the Clinical Feature of each cause.</li> <li>Do a systemic examination of the patient.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	1 /
2.	IM 1.3: Describe & discuss the aetiology microbiology pathogenesis & clinical evolution of rheumatic fever, criteria, degree of rheumatic activity & rheumatic valvular heart disease & its complications including infective endocarditis.	CP 2 IM 1.3: Rheumatic Fever including Infective Endocarditis- Aetiology, Pathogenesis, Clinical Feature, Criteria, Degree, Complication.	<ul> <li>Rheumatic fever:</li> <li>Describe Aetiology, Pathogenesis &amp; Clinical Feature.</li> <li>Discuss the Criteria, Degree of Rheumatic activity.</li> <li>Discuss the Complication.</li> <li>Do a systemic examination of the</li> </ul>	• Assess the Logbook/Portfolio.



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
			<ul><li>patient.</li><li>Document in the Logbook/Portfolio.</li></ul>	
3.	IM 1.4: Stage heart failure IM 1.5: Describe ,discuss & differentiate the processes involved in Rt Vs Lt heart failure, systolic vs diastolic failure	CP 3 IM 1.4, 1.5: Stage heart failure, Rt Vs Lt Heart failure, systolic vs diastolic failure	<ul> <li>Heart Failure- Stages, Types:</li> <li>Describe the Stages of Heart Failure.</li> <li>Document the stage of Heart Failure.</li> <li>Do a systemic examination of the patient &amp; present the case.</li> <li>Presents the case through SNAPPS &amp; probes the Faculty for more clarity.</li> <li>Describe &amp; discuss &amp; differentiate the processes involved in R Vs L heart failure, systolic vs diastolic failure.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Student presents the case through SNAPPS.</li> <li>Observe the performance; Viva; Probe the diagnosis.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
4.	IM 1.10: Elicit document & present an appropriate history that will establish the diagnosis, cause & severity of heart failure including: presenting complaints, precipitating & exacerbating factors, risk factors exercise tolerance, changes in sleep patterns, features suggestive of infective endocarditis.	CP 4 IM 1.10: Heart failure including Infective Endocarditis- Elicit History, Document Assess the severity.	<ul> <li>Heart Failure:</li> <li>Elicit history establish the diagnosis, cause &amp; severity of Heart Failure.</li> <li>Identify the precipitating &amp; exacerbating factors, risk factors exercise tolerance, changes in sleep patterns, any features suggestive of infective endocarditis.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Student presents the case through OMP.</li> <li>Observe the performance; Viva; Probe the diagnosis.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment
5.	IM 1.11: Perform & demonstrate a systematic examination based on the history that will help establish the diagnosis & estimate its severity including: measurement of pulse, blood pressure & respiratory rate, jugular venous forms & pulses, peripheral pulses, conjunctiva & fundus, lung, cardiac examination including palpation & auscultation with identification of heart sounds & murmurs, abdominal distension & splenic palpation. IM 1.12: Demonstrate peripheral pulse, volume, character, quality & variation in various causes of heart failure. IM 1.13: Measure the blood pressure accurately, recognize & discuss alterations in blood pressure in valvular heart disease & other causes of heart failure & cardiac tamponade.	CP 5: IM 1.11-1.13: Heart Disease- Perform & demonstrate a systematic examination	HeartDiseaseExamination:•• Perform&demonstrateasystematicexaminationexaminationinHeart Disease.• Discussalterationsin blood pressure invalvularheartdisease& othercausesofheartfailure& cardiactamponade.• DocumentinLogbook/Portfolio	<ul> <li>Observe the performance; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
6.	IM 1.14: Demonstrate & measure jugular venous distension IM 1.15: Identify & describe the timing, pitch quality conduction & significance of precordial murmurs & their variations.	CP 6 IM1.14, 1.15: Demonstrate & Measure Jugular venous distension, Significance of Precordial Murmurs & their Variations	HeartDiseaseInvestigations:• Demonstrate& MeasureJugularvenous distension,• Discuss• Discusstheir Variations && their Variations &their significance.• Document in theLogbook/Portfolio	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
7.	<b>IM</b> 1.16: Differential	<b>CP 7</b>	Differential	• Observe the
	diagnosis & most likely	IM 1.16:	Diagnosis in a	performance; Viva.
	diagnosis based on the	Differential diagnosis	Cardiac Case:	• Assess the
	clinical presentation	in a Cardiac Case &	•Clinical	Logbook/Portfolio.
		most likely diagnosis	Presentation of case.	• Validate the Logbook
		based on the clinical	•Generate a	entry.
		presentation	differential	<ul> <li>Provide feedback</li> </ul>
			diagnosis.	
			•Conclude a most	
			likely diagnosis based on the clinical	
			presentation.	
			•Document in the	
			Logbook/Portfolio	
8.	IM 1.28: Congenital	<b>CP 8</b>	Heart Disease	• Observe the
0.	heart disease; Features of	IM 1.28:	Presentations:	performance; Viva.
	cyanotic and acyanotic	Congenital heart	•Clinical	• Assess the
	heart disease	disease; Features of	Presentation.	Logbook/Portfolio.
		cyanotic and acyanotic	•Generate a	• Validate the Logbook
		heart disease	differential	entry.
			diagnosis.	• Provide feedback
			•Conclude a most	
			likely diagnosis	
			based on the clinical	
			presentation.	
			•Document in the	
			Logbook/Portfolio	
9.	IM 2.1: Discuss and	<b>CP 9</b>	Atherosclerosis &	• Observe the
	describe the	IM 2.1-2.4	IHD:	discussion/description.
	epidemiology, antecedents and risk factors for	Atherosclerosis & IHD - Risk Factors,	•Define	• Assess the
	atherosclerosis and	Dyslipidemia,	Atherosclerosis, IHD & acute	Logbook/Portfolio.
	ischemic heart disease	Pathogenesis, Natural	IHD & acute coronary	• Validate the Logbook
	IM 2.2: Discuss the	History &	syndromes.	entry.
	aetiology of risk factors	Complication	• Describe the natural	• Provide feedback.
	both modifiable & non		history & outcomes.	
	modifiable of		•Enumerate risk	
	atherosclerosis and IHD		factors both	
	IM 2.3: Discuss and		modifiable & non	
	describe the lipid cycle		modifiable of	
	and the role of		atherosclerosis and	
	dyslipidemia in the		IHD.	
	pathogenesis of		•Describe Lipid	
	atherosclerosis		cycle, discuss role	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	<b>IM 2.4:</b> Discuss and describe the pathogenesis natural history, evolution and complications of atherosclerosis and IHD.		of dyslipidemia in atherosclerosis • Describe the pathogenesis natural history, evolution and complications of atherosclerosis and IHD. • Document in the Logbook/Portfolio.	
10.	IM 2.5: Define the various acute coronary syndromes & describe their evolution, natural history & outcomes. IM 2.6: Elicit document & present an appropriate history that includes onset evolution, presentation risk factors, family history, comorbid conditions, complications, medication, history of atherosclerosis, IHD & coronary syndromes. IM 2.7: Perform, demonstrate & document a physical examination including a vascular & cardiac examination that is appropriate for the clinical presentation. IM 2.8: Generate document & present a differential diagnosis based on the clinical presentation & prioritize based on "cannot miss", most likely diagnosis & severity.	CP 10 IM 2.5-2.8: Atherosclerosis, IHD & Coronary Syndromes- Clinical Presentation, Perform a physical examination including a vascular & cardiac examination	Atherosclerosis,IHD,Acutecoronarysyndromes:• Define & describetheir evolution,natural history &outcomes of Acutecoronarysyndromes.• Elicit History thatincluding onsetevolution, riskfactors, familyhistory, comorbidconditions,complications,medication, andhistory ofatherosclerosis, IHD& coronarysyndromes.• Perform physicalexaminationincluding a vascular& cardiacexamination.• Present the case.• Document in theLogbook/Portfolio	<ul> <li>Observe the description &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment
11.	IM 2.9: Distinguish & differentiate between stable & unstable angina & AMI based on the clinical presentation. IM 2.10: Order, perform and interpret an ECG. IM 2.11: Order and interpret a Chest X-ray and markers of acute myocardial infarction. IM 2.12: Choose and interpret a lipid profile and identify the desirable lipid profile and identify the desirable lipid profile in the clinical context. IM 2.13: Discuss and enumerate the indications for and findings on echocardiogram, stress testing and coronary angiogram.	CP 11 IM 2.9-2.13: Stable & unstable angina & AMI. Clinical Presentation & Investigations	<ul> <li>Activity by learner</li> <li>Physical &amp; Cardiac Examination,</li> <li>Stable, Unstable angina &amp; AMI:</li> <li>Physical &amp; Cardiac Examination of a cardiac patient.</li> <li>Differential diagnosis based on the clinical presentation.</li> <li>Clinical Presentation through SNAPPS.</li> <li>Distinguish &amp; differentiate between stable &amp; unstable angina &amp; AMI based.</li> <li>Enlist &amp; Interpret investigations for AMI- ECG, Chest X-Ray, markers, lipid profile, ECHO, stress testing and coronary angiogram.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>by Faculty</li> <li>Observe the discussion.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
12.	IM 2.14: Discuss and describe the indications for admission to a coronary care unit and supportive therapy for a patient with acute coronary syndrome IM 2.15: Discuss & describe the medications used in patients with an acute coronary syndrome based on the clinical presentation.	CP 12 IM 2.14-2.15: Indications for admission of Acute Coronary Syndrome to CCU. Medications used in patients with an acute coronary syndrome based on the clinical presentation.	AcuteCoronarySyndrome in CCU:•Enumerateindicationsindicationsforadmission of AcuteCoronary Syndrometo CCU.•Enumeratemedications used inpatientswith anacutecoronarysyndrome•DocumentintheLogbook/Portfolio.	<ul> <li>Assess the indications &amp; treatment of Acute Coronary Syndrome in CCU.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
13.	IM 2.16: Discuss and describe the indications for acute thrombolysis, PTCA and CABG. IM 2.17: Discuss and describe the indications and methods of cardiac rehabilitation.	CP 13 IM 2.16 & 2.17: Indication for acute thrombolysis, PTCA, CABG and cardiac rehabilitation.	Indication for acute thrombolysis, PTCA, CABG and cardiac rehabilitation: •Discuss and describe the indications for Acute thrombolysis, PTCA and CABG. •Indications and methods of cardiac rehabilitation. •Document in the Logbook/Portfolio.	<ul> <li>Observe the discussion.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
14.	IM 2.18: Discuss and describe the indications, formulations, doses, side effects and monitoring for drugs used in the management of dyslipidemia. IM 2.19: Discuss and describe the pathogenesis, recognition and management of complications of acute coronary syndromes including arrhythmias, shock, LV dysfunction, papillary muscle rupture and pericarditis. IM 2.20: Discuss and describe the assessment and relief of pain in acute coronary syndromes	CP 14 IM 2.18-2.20: Acute coronary syndromes - drugs used in the management of dyslipidemia; identify complications, assessment and relief of pain	Acutecoronarysyndromes-medications,complicationscomplicationsandrelief of pain•• Discussand enlistdrugsused in themanagementofdyslipidemia.•• Discuss& describethepathogenesis,recognitionandmanagementofcomplicationsofacutecoronarysyndromes.•• Discussanddescribetheassessmentandreliefofpaininacutecoronarysyndromes.•• DocumentintheLogbook/Portfolio.	<ul> <li>Observe the discussion.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
15.	IM 3.4: Elicit document	CP 15	Pneumonia	• Observe the
13.	& present an appropriate	IM 3.4-3.6:	Presentation:	performance; Viva.
	history including the	Lung Disease	•Elicit History in a	• Assess the Logbook/
	evolution, risk factors	(Pneumonia):	patient with Lung	• Assess the Logoook/ Portfolio.
	including immune status	Document, Elicit &	Disease	
	& occupational risk.	present history,	(Pneumonia)	• Validate the Logbook
	IM 3.5: Perform,	demonstrate a physical	including immune	entry.
	document & demonstrate	examination & Discuss	status &	• Provide feedback.
	a physical examination	differential diagnosis.	occupational risk.	
	including general	differential diagnosis.	•Perform physical &	
	examination & appropriate		± •	
	examination of the lungs		general examination.	
	that establishes the			
	diagnosis, complications		•Perform appropriate examination of the	
	& severity of disease.			
	IM 3.6: Generate		lungs to establish the diagnosis,	
	document & present a		the diagnosis, complications &	
	differential diagnosis		severity of disease.	
	based on the clinical		• Document in the	
	features, & prioritize the			
	diagnosis based on the		Logbook/Portfolio.	
	presentation.			
16.	<b>IM 3.7:</b> Order & interpret	CP 16	Pneumonia	• Assess the
	diagnostic tests based on	IM 3.7 & 3.8:	Investigations:	performance.
	the clinical presentation	Order & interpret	•Enumerate &	*
	including: CBC, Chest X	diagnostic tests	Interpret diagnostic	Portfolio.
	ray PA view, Mantoux,	including ABG based	tests required for	• Validate the Logbook
	sputum gram stain,	on the clinical	Pneumonia.	entry.
	sputum culture &	presentation in	•Demonstrate in a	5
	sensitivity, pleural fluid	Pneumonia	mannequin and	
	examination & culture,		interpret results of	
	HIV testing & ABG.		an arterial blood gas	
	IM 3.8: Demonstrate in a		examination.	
	mannequin and interpret		•Document in the	
	results of an arterial blood		Logbook/Portfolio.	
	gas examination.			
17.	IM 3.9: Demonstrate in a	CP 17	Pneumonia	• Assess the
	mannequin and interpret	IM 3.9-3.11:	Investigations:	performance.
	results of a pleural fluid	Demonstrate &	•Enumerate &	• Assess the Logbook/
	aspiration.	interpret pleural fluid	Interpret diagnostic	Portfolio.
	IM3.10: Demonstrate the	aspiration, blood	tests required for	• Validate the Logbook
	correct technique in a	culture in Pneumonia.	Pneumonia.	entry.
	mannequin and interpret	Enumerate the	•Demonstrate in a	• Provide feedback.
	results of a blood culture.	indications for further	mannequin and	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	<b>IM 3.11:</b> Describe and enumerate the indications for further testing including HRCT, Viral cultures, PCR and specialized testing.	testing including HRCT, Viral cultures, PCR and specialized testing.	<ul> <li>interpret results of pleural fluid aspiration, blood culture.</li> <li>Enumerate the indications for further testing including HRCT, Viral cultures, PCR and specialized testing.</li> <li>Document in the</li> </ul>	, rucuiry
18.	IM 3.12: Select, describe and prescribe based on the most likely aetiology, an appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum. IM 3.13: Select, describe and prescribe based on culture and sensitivity appropriate impaling antimicrobial based on the pharmacology and antimicrobial spectrum. IM 3.14: Perform and interpret a sputum gram stain and AFB	CP 18 IM 3.12-3.14: Select Antimicrobial based on Antimicrobial spectrum, C & S in Pneumonia. Perform & interpret sputum gram stain and AFB	Logbook/Portfolio.PneumoniaSelectionofAntimicrobials:• Selectanappropriateempiricalantimicrobialbasedonthepharmacologyandantimicrobialspectrum & justify.• Select & justifyappropriateimpalingantimicrobialbasedon C & S.• Performandinterpret a sputumgram stain and AFB.• Document• DocumentintheLogbook/Portfolio.	<ul> <li>Assess the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
19.	<ul> <li>IM 3.15: Describe and enumerate the indications for hospitalization in patients with pneumonia.</li> <li>IM 3.16: Describe and enumerate the indications for isolation and barrier nursing in patients with pneumonia.</li> <li>IM 3.17: Describe and</li> </ul>	CP 19 IM 3.15-3.19: Pneumonia- Indication for Hospitalization, Isolation, Barrier Nursing, Supportive Therapy, Counsel Patient/Relatives about management &	PneumoniaInvestigations:•EnumerateIndicationforHospitalization,Isolation,BarrierNursing.•EnumerateSupportive Therapy.•DiscussCounseling	<ul> <li>Assess the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
20.	discuss the supportive therapy in patients with pneumonia including oxygen use and indications for ventilation. IM 3.18: Communicate and counsel patient on family on the diagnosis and therapy of pneumonia. IM 3.19: Discuss, describe, enumerate the indications and communicate to patients on pneumococcal and influenza vaccines.	Vaccines CP 20	<ul> <li>Patient/Relatives about management.</li> <li>Discuss Vaccine for Pneumonia.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	• Student presents the
20.	<ul> <li>IM 4.1: Describe &amp; discuss the febrile response &amp; the influence of host immune status, risk factors &amp; comorbidities on the febrile response.</li> <li>IM 4.2: Describe &amp; discuss the influence of special populations on the febrile response including: the elderly, immune suppression, malignancy &amp; neutropenia, HIV &amp; travel.</li> </ul>	CP 20 IM 4.1-4.2: Fever- Common Causes, Inflammatory & malignant causes, Pathophysiology, Clinical Manifestation(VI-MI)	<ul> <li>Fever:</li> <li>Describe &amp; discuss factors responsible febrile response.</li> <li>Enumerate the special populations affected during fever.</li> <li>Enumerate the causes &amp; presentations of bacterial, parasitic &amp; viral fever.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Student presents the case through OMP.</li> <li>Assess the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
21.	IM 4.3: Discuss & describe the common causes, pathophysiology & manifestations of fever in various regions in India including bacterial, parasitic & viral causes (e.g. Dengue, Chikungunya and Typhus).	CP 21 IM 4.3: Fever- Common Causes, in various regions in India including bacterial, parasitic & viral causes: e.g. Dengue, Chikungunya, Typhus, Clinical Manifestation (VI-MI)	Fever: •Enumerate the causes & presentations of common causes, in various regions in India including bacterial, parasitic & viral causes: e.g. Dengue, Chikungunya, Typhus, •Clinical	<ul> <li>Student presents the case through OMP.</li> <li>Assess the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
			Manifestation Document in the Logbook/Portfolio.	
22.	IM4.4:Describe&discussthepathophysiology&manifestationsofinflammatorycausesoffever.IM4.5:Describe&IM4.5:Describe&discussthepathophysiology&manifestationsofmalignantcausesofmalignantcausesofincludinghematologic&lymphnodemalignancies.	CP 22 IM 4.4: Fever- Inflammatory causes, pathophysiology, clinical Manifestation(VI-MI)	<ul> <li>Fever:</li> <li>Describe &amp; discuss the clinical presentation in inflammatory causes of fever.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Student presents the case through OMP.</li> <li>Assess the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
23.	IM 4.5: Describe & discuss the pathophysiology & manifestations of malignant causes of fever including hematologic & lymph node malignancies.	CP 23 IM 4.5: Fever- Malignant causes, pathophysiology, clinical manifestation(VI- MI,PA)	<ul> <li>Fever:</li> <li>Describe &amp; discuss the clinical presentation in malignant causes of fever.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Student presents the case through OMP.</li> <li>Assess the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
24.	<b>IM 4.6:</b> Discuss and describe the pathophysiology and manifestations of malaria.	CP 24 IM 4.5: Fever- Pathophysiology and manifestations of Malaria (VI-MI)	<ul> <li>Malaria Fever:</li> <li>Describe &amp; discuss the Pathophysiology and manifestations of malaria</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Student presents the case through OMP.</li> <li>Assess the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
25.	IM 4.7: Discuss and describe the pathophysiology and manifestations of the sepsis syndrome.	CP 25 IM 4.5: Fever- Pathophysiology and manifestations of Sepsis Syndrome. (VI- MI)	Fever-SepsisSyndrome:• Describe & discusstheclinicalpresentationinSepsis Syndrome• DocumentinLogbook/Portfolio.	<ul> <li>Assess the discussion &amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
26.	IM 4.8: Discuss & describe the pathophysiology, aetiology & clinical manifestations of fever of unknown origin (FUO) including in a normal host, neutropenic host, nosocomial host & a host with HIV disease.	CP 26 IM 4.8: Fever of unknown origin (FUO)- pathophysiology, etiology and clinical manifestations (VI- MI).	<ul> <li>FUO:</li> <li>Describe &amp; discuss factors involved, etiology and clinical manifestations in FUO.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the systematic examination, discussion about DD.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
27.	<b>IM 4.9:</b> Elicit document and present a medical history that helps delineate the aetiology of fever that includes the evolution and pattern of fever, associated symptoms, immune status, comorbidities, risk factors, exposure through occupation, travel and environment and medication use	CP 27 IM 4.9: Fever of unknown origin (FUO)- occupation, travel and environment and medication use (VI-MI,PH).	<ul> <li>FUO:</li> <li>Describe &amp; discuss factors involved in FUO due to occupation, travel and environment and medication use</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the systematic examination, discussion about DD.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
28.	IM 4.10: Perform a systematic examination that establishes the diagnosis & severity of presentation that includes: general skin mucosal & lymph node examination, chest & abdominal examination (including examination of the liver & spleen). IM 4.11: Generate a differential diagnosis & prioritize based on clinical features that help distinguish between infective, inflammatory, malignant &	CP 28 IM 4.10-4.11: Fever of unknown origin (FUO)- Systematic examination to diagnosis & severity of presentation that includes: general skin mucosal & lymph node examination, chest & abdominal examination (including liver & spleen examination) Differential diagnosis between infective, inflammatory, malignant & rheumatologic causes.	<ul> <li>FUO:</li> <li>Perform a systematic examination to establish the diagnosis &amp; severity of presentation.</li> <li>Discuss differential diagnosis between infective, inflammatory, malignant &amp; rheumatologic causes</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the systematic examination, discussion about DD.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



interpretation       CP 29         INT 5.1: Describe and discuss the pysiologic and biochemical basis of Hyperbilirubinemia, INT 5.2: Describe and discuss the actiology and pathophysiology of liver injury.       INT 5.1: 5.1: Ver Discase: Hyperbilirubinemia, Iver injury, various forms of liver disease. (VI-MI).       Describe discuss the actiology and discuss the actiology and discuss the aphologic changes in various forms of liver disease.       Describe and discuss the aphologic changes in various forms of liver disease.       Observe         30.       INT 5.4: Describe and discuss the epidemiology, microbiology, immunology and clinical evolution of infective (viral) hepatitis.       CP 30       INT 5.4: Viral Hepatitis-Actiology and pathophysiology and pathophysiology and pathophysiology.       • Observe       discuss the epidemiology.         31.       INT 5.5: Describe and discuss the pathophysiology and clinical evolution of alcorbio achonic liver disease.       CP 31       INT 5.5: Liver Diseases: 4.2000/Portfolio.       • Observe       discuss on the epidemiology.       • Observe         31.       INT 5.5: Describe and discuss the pathophysiology and clinical evolution of alcorbio achonic liver disease.       CP 31       INT 5.5: Liver Diseases: 4.2000/Portfolio.       • Observe       • Observe         31.       INT 5.5: Describe and discuss the pathophysiology and clinical evolution of alcoholic liver disease.       MI).       CP 31       Liver Diseases: • Observe       • Observe         31.       INT 5.5: Describe and discuss the pathophysiology and clinical evolution of alcoholi	S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
<ul> <li>29. IM 5.1: Describe and discuss the physiologic and biochemical basis of Hyperbilirubinemia. IM 5.2: Describe and discuss the atology and pathophysiology of liver injury. IM 5.3: Describe and discuss the pathologic changes in various forms of liver disease.</li> <li>30. IM 5.4: Describe and discuss the epidemiology, microbiology, and clinical evolution of infective (viral) hepatitis.</li> <li>31. IM 5.5: Describe and discuss the pathologic charges in the pathophysiology and clinical evolution of infective (viral) hepatitis.</li> <li>31. IM 5.5: Describe and discuss the pathologic charges in the pathophysiology and clinical evolution of infective (viral) hepatitis.</li> <li>31. IM 5.5: Describe and discuss the pathophysiology and clinical evolution of alcoholic liver disease.</li> <li>31. IM 5.5: Describe and discuss the pathophysiology and clinical evolution of alcoholic liver disease.</li> <li>31. IM 5.5: Describe and discuss the pathophysiology and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>31. IM 5.5: Describe and discuss the pathophysiology and clinical evolution (VI- mathophysiology and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>31. IM 5.5: Describe and discuss the pathophysiology and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>31. IM 5.5: Describe and discuss the pathophysiology and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>31. IM 5.5: Describe and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>33. IM 5.5: Describe and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>34. IM 5.5: Describe and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>34. IM 5.5: Describe and clinical evolution (VI- mathophysiology alcoholic liver disease.</li> <li>34. IM 5.5: Describe and clinical evolution of alcoholic liver disease.</li> <li>35. Describe and cl</li></ul>		rheumatologic causes.			~ j _ acazoj
<ul> <li>discuss the epidemiology, microbiology, and clinical evolution of infective (viral) hepatitis.</li> <li>.</li> <li>.<td></td><td><ul> <li>IM 5.1: Describe and discuss the physiologic and biochemical basis of Hyperbilirubinemia.</li> <li>IM 5.2: Describe and discuss the aetiology and pathophysiology of liver injury.</li> <li>IM 5.3: Describe and discuss the pathologic changes in various forms of liver disease.</li> </ul></td><td>IM 5.1-5.5: Liver Disease- Hyperbilirubinemia, Liver injury, various forms of liver disease. (VI-MI).</td><td><ul> <li>Describe &amp; discuss physiologic and biochemical basis of Hyperbilirubinemia.</li> <li>Describe and discuss the aetiology and pathophysiology of liver injury.</li> <li>Describe and discuss the pathologic changes in various forms of liver disease.</li> <li>Document in the Logbook/Portfolio.</li> </ul></td><td><ul> <li>discussion &amp;</li> <li>description on Clinical</li> <li>Features, aetiology &amp;</li> <li>pathophysiology of</li> <li>Hyperbilirubinemia,</li> <li>Liver injury, various</li> <li>forms of liver disease.</li> <li>Assess the Logbook/</li> <li>Portfolio.</li> <li>Validate the Logbook</li> <li>entry.</li> <li>Provide feedback.</li> </ul></td></li></ul>		<ul> <li>IM 5.1: Describe and discuss the physiologic and biochemical basis of Hyperbilirubinemia.</li> <li>IM 5.2: Describe and discuss the aetiology and pathophysiology of liver injury.</li> <li>IM 5.3: Describe and discuss the pathologic changes in various forms of liver disease.</li> </ul>	IM 5.1-5.5: Liver Disease- Hyperbilirubinemia, Liver injury, various forms of liver disease. (VI-MI).	<ul> <li>Describe &amp; discuss physiologic and biochemical basis of Hyperbilirubinemia.</li> <li>Describe and discuss the aetiology and pathophysiology of liver injury.</li> <li>Describe and discuss the pathologic changes in various forms of liver disease.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>discussion &amp;</li> <li>description on Clinical</li> <li>Features, aetiology &amp;</li> <li>pathophysiology of</li> <li>Hyperbilirubinemia,</li> <li>Liver injury, various</li> <li>forms of liver disease.</li> <li>Assess the Logbook/</li> <li>Portfolio.</li> <li>Validate the Logbook</li> <li>entry.</li> <li>Provide feedback.</li> </ul>
31.IM 5.5: Describe and discuss pathophysiology and clinical evolution of alcoholic liver disease.CP 31 IM 5.5: Liver Disease- Alcoholic Liver Disease-Aetiology and pathophysiology, Clinical evolution (VI- MI).Liver Diseases: • Describe & discuss the epidemiology & Clinical evolution of Alcoholic Liver Disease.• Observe the discuss & description Clinical Feature aetiology Alcoholic Liver Disease.31.IM 5.5: Describe and clinical evolution of alcoholic liver disease.IM 5.5: Liver Disease- Alcoholic Liver Disease-Aetiology and pathophysiology, Clinical evolution (VI- MI).Liver Diseases: • Describe & discuss the epidemiology & Alcoholic Liver Disease.• Observe the discuss & description Clinical Feature aetiology Alcoholic Liver Disease.31.IM 5.5: Describe and Disease-Aetiology and pathophysiology, Clinical evolution (VI- MI).Liver Diseases: • Document in the Logbook/Portfolio.• Observe the discuss & description Clinical Feature aetiology Alcoholic Liver Disease.4IM 5.5: Liver Disease- Disease.• Observe the discuss & discuss Clinical evolution of Alcoholic Liver Disease.• Document in the Logbook/Portfolio.• Observe the discuss & discuss • Document in the Logbook/Portfolio.• Validate the Logbo entry.	30.	discuss the epidemiology, microbiology, immunology and clinical evolution of infective	IM 5.4: Viral Hepatitis-Aetiology and pathophysiology, Clinical evolution (VI-	<ul> <li>Describe &amp; discuss the epidemiology &amp; Clinical evolution of Infective (Viral) hepatitis.</li> <li>Document in the</li> </ul>	<ul> <li>discussion &amp; description on Clinical Features, aetiology &amp; pathophysiology of Infective (Viral) hepatitis.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> </ul>
32.       IM 5.6: Describe and       CP 32       Cirrhosis & Portal       • Observe		discuss the pathophysiology and clinical evolution of alcoholic liver disease.	IM 5.5: Liver Disease- Alcoholic Liver Disease-Aetiology and pathophysiology, Clinical evolution (VI- MI).	<ul> <li>Describe &amp; discuss the epidemiology &amp; Clinical evolution of Alcoholic Liver Disease.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the discussion &amp; description on Clinical Features, aetiology &amp; pathophysiology of Alcoholic Liver Disease.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	discuss the	IM 5.6,5.7: Cirrhosis	hypertension:	discussion &
	pathophysiology, clinical	& Portal hypertension,	•Describe & discuss	description on Clinical
	evolution and	(VI-PA)	pathophysiology,	Features, aetiology &
	complications of cirrhosis		clinical evolution	pathophysiology on
	and portal hypertension		and complications	Cirrhosis & Portal
	including ascites,		of cirrhosis and	hypertension.
	spontaneous bacterial		portal hypertension.	• Assess the Logbook/
	peritonitis, hepatorenal		•Document in the	Portfolio.
	syndrome and hepatic		Logbook/Portfolio.	• Validate the Logbook
	encephalopathy.		8	entry.
				• Provide feedback.
33.	IM 5.7: Enumerate and	CP 33	Cirrhosis & Portal	• Observe the
	describe the causes and	IM 5.6,5.7: Cirrhosis	hypertension, Drug	discussion &
	pathophysiology of drug	& Portal hypertension,	induced Liver	description .
	induced liver injury.	Drug induced Liver	Injury:	• Assess the Logbook/
		Injury ( <mark>VI-</mark> PA)	•Describe and	Portfolio.
			discuss causes and	• Validate the Logbook
			pathophysiology of	entry.
			drug induced liver	• Provide feedback.
			injury.	
			•Document in the	
			Logbook/Portfolio.	
34.	IM 5.8: Describe and	CP 34	Cholelithiasis and	• Observe the
	discuss the	<b>IM 5.8:</b> Presentation of	Cholecystitis:	discussion &
	pathophysiology, clinical	Cholelithiasis and	•Describe & discuss	description of the
	evolution & complications	Cholecystitis (VI-PA)	pathophysiology,	presentation.
	Cholelithiasis &		clinical evolution	• Assess the Logbook/
	Cholecystitis.		and complications	Portfolio.
			of Cholelithiasis and	• Validate the Logbook
			Cholecystitis.	entry.
			•Document in the	• Provide feedback
35.	IM 5.9: Elicit document	CP 35	Logbook/Portfolio. Portosystemic	• Ohaamua 🖓 aaaaaa tha
35.		<b>IM 5.9-5.12:</b> Liver	Hypertension &	• Observe & assess the
	& present a medical history that helps delineate	Disease- Document,	Hypertension & Hepatic	performance; Viva
	the aetiology of the	Elicit history &	Encephalopathy:	• Assess the
	current presentation &	Perform systematic		Logbook/Portfolio.
	includes clinical	examination, discuss	•Elicit history & document a case of	• Validate the Logbook
	presentation, risk factors,	DD & enumerate &	Liver Disease.	entry.
	drug use, sexual history,	interpret diagnostic	•Perform &	• Provide feedback.
	vaccination history &	tests	demonstrate a	
	family history.		systematic	
	<b>IM 5.10:</b> Perform a		examination to	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	that establishes the diagnosis & severity that includes nutritional status, mental status, jaundice, abdominal distension ascites, features of Portosystemic hypertension & hepatic encephalopathy. <b>IM 5.11:</b> Generate a differential diagnosis & prioritize based on clinical features that suggest a specific aetiology for the presenting symptom. <b>IM 5.12:</b> Choose & interpret appropriate diagnostic tests including: CBC, bilirubin, function tests, Hepatitis serology & ascetic fluid examination in patient with liver diseases.		of features of Portosystemic hypertension & hepatic encephalopathy. •Present the case through SNAPPS. •Generate a DD based on the clinical findings. •Document in the Logbook/Portfolio. •Present during rounds.	
36.	<ul> <li>IM 6.5: Describe and discuss the pathogenesis, evolution and clinical features of common HIV related malignancies.</li> <li>IM 6.6: Describe and discuss the pathogenesis, evolution and clinical features of common HIV related skin and oral lesions.</li> <li>IM 6.7: Elicit document and present a medical history that helps delineate the aetiology of the current presentation and includes risk factors for HIV, mode of infection, other sexually transmitted diseases, risks for opportunistic infections</li> </ul>	CP 36 IM 6.5-6.8: HIV-Discuss aetiology, risk factors, opportunistic infections & DD (VI-PA,MI)	CommonHIVrelatedmalignancies:• Describe & discussthe pathogenesis,evolutionandclinical features ofcommoncommonHIVrelatedmalignancies.• Describeanddiscussthepathogenesis of skinand oral lesions incommonHIVrelatedmalignancies.• Elicit document andmedicalhistory,possible aetiology ofand enumeraterisk	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
S.No. 37.	Competencyand nutritional status.IM 6.8: Generate adifferential diagnosis andprioritize based on clinicalfeatures that suggest aspecific aetiology for thepresenting symptom.IM 7.5: Describe &discriminate acute, sub-acute & chronic causes ofjoint pain.IM 7.6: Discriminate,describe &discussarthralgia from arthritis &mechanicalfrominflammatory causes ofjoint pain.IM 7.7: Discriminate,describe &discussarthralgia from arthritis &mechanicalfrominflammatory causes ofjoint pain.IM 7.7: Discriminate,describe &discussdistinguishingarticularfromperiarticular	Clinical Posting (CP)	Activity by learner factors for HIV. •Discuss mode of infection, other sexually transmitted diseases, risks for opportunistic infections and nutritional status. •Generate a DD based on clinical features that suggest a specific aetiology for the presenting symptom. Joint Pain: •Describe & discriminate acute, subacute & chronic causes of joint pain. •Discriminate causes of arthralgia from arthritis & mechanical from inflammatory causes of joint pain. •Discriminate articular from periarticular	Formative Assessment by Faculty         • Observe the response; Viva.         • Assess the Logbook/Portfolio.         • Validate the Logbook entry.         • Provide feedback
	<ul> <li>complaints.</li> <li>IM 7.8: Determine the potential causes of join pain based on the presenting features of joint involvement.</li> <li>IM 7.9: Describe the common signs &amp; symptoms of articular &amp; periarticular diseases.</li> <li>IM 7.10: Describe the systemic manifestations of rheumatologic disease.</li> </ul>		<ul> <li>complaints.</li> <li>Determine the causes, describe the common features of articular &amp; periarticular diseases.</li> <li>Describe the systemic manifestations of rheumatologic disease.</li> <li>Document in the Logbook/Portfolio</li> <li>.</li> </ul>	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
38.	<ul> <li>IM 7.16: Enumerate the indications for arthrocentesis.</li> <li>IM 7.17: Enumerate the indications and interpret plain radiographs of joints.</li> <li>IM 7.18: Communicate diagnosis, treatment plan and subsequent follow up plan to patients.</li> <li>IM 7.19: Develop an appropriate treatment plan for patients with rheumatologic diseases.</li> </ul>	CP 38 IM 7.16-7.19: Joint Pain- indications for arthrocentesis, interpret plain radiograph, Management (HI-OR, PM)	InvestigationsofJointPain/Rheumatologicdiseases:• Enumeratetheindicationsforarthrocentesis.• Enumeratetheindicationsandinterpretplainradiographsofjoints.• Communicatediagnosis, treatmentplan and subsequentfollow up plan topatients/relatives• Developanappropriatetreatmentplan forpatients with.	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
39.	IM 8.9: Elicit document and present a medical history that includes: duration and levels, symptoms, comorbidities, lifestyle, risk factors, family history, psychosocial and environmental factors, dietary assessment, previous and concomitant therapy. IM 8.10: Perform a systematic examination that includes: an accurate measurement of blood pressure, fundus examination, examination of vasculature and heart.	CP 39: IM 8.9- 8.10: Elicit document and present a medical history, Systematic Examination, Clinical Presentation of Hypertension.	Patients with.Hypertension:•ElicitMedicalhistory, symptoms,andriskenvironment factors.•Elicitdietaryassessment,previousandconcomitanttherapy.•Perform systematicexaminationthatincludes:anaccuratemeasurement of BP,fundus examination,examinationofvasculatureandheart.•Document•Dresentduringrounds.	<ul> <li>Observe the response; Viva.</li> <li>Assess the communication skills.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
40.	<ul> <li>IM8.11: Generate a differential diagnosis &amp; prioritize based on clinical features that suggest a specific aetiology.</li> <li>IM 8.12: Describe the appropriate diagnostic work up based on the presumed aetiology</li> <li>IM 8.13: Enumerate the indications for &amp; interpret the results of: CBC, Urine routine, BUN, Cr, Electrolytes, Uric acid, ECG.</li> <li>IM 8.14: Develop an appropriate treatment plan for essential hypertension.</li> <li>IM 8.15: Recognize, prioritize &amp; manage hypertensive emergencies.</li> <li>IM 8.16: Develop &amp; communicate to the patient lifestyle modification including weight reduction, moderation of alcohol intake, physical activity &amp; sodium intake.</li> </ul>	CP 40 IM 8.11-8.16: Hypertension- DD, Diagnostic work up, Treatment plan & communicate lifestyle modification in Hypertensive.	<ul> <li>Hypertension:</li> <li>Present the case through SNAPPS.</li> <li>Probe the faculty for more clarity.</li> <li>Generate a DD based on the clinical presentation.</li> <li>Enumerate appropriate diagnostic work ups.</li> <li>Enumerate the indications for the various tests &amp; interpret their results.</li> <li>Develop an appropriate treatment plan for essential hypertension.</li> <li>Discuss hypertensive emergencies.</li> <li>Use Kalamazoo method to communicate to the patient for lifestyle modification.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the communication skills.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
41.	<b>IM 8.17:</b> Perform &	CP 41	•Document in the Logbook/Portfolio. Hypertension:	• Observe the response;
	interpret a 12 lead ECG IM 8.18: Incorporate patient preferences in the management of HTN IM 8.19: Demonstrate understanding of the impact of Hypertension on quality of life, wellbeing, work and family IM 8.20: Determine the need for specialist consultation.	IM 8.17-8.20: Hypertension- Perform & interpret ECG. Management including life style changes & specialist consultation. DD, Diagnostic work up, Treatment plan & communicate lifestyle modification in Hypertensive.	<ul> <li>Perform &amp; interpret a 12 lead ECG</li> <li>Plan management of HTN including life style changes &amp; specialist consultation.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds.</li> </ul>	<ul> <li>Viva.</li> <li>Assess the communication skills.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
42.	<ul> <li>IM 9.3: Elicit document and present a medical history that includes symptoms, risk factors including GI bleeding, prior history, medications, menstrual history, and family history.</li> <li>IM 9.4: Perform a systematic examination that includes: general examination for pallor, oral examination, DOAP session of hyper dynamic circulation, lymph node and splenic examination.</li> <li>IM 9.5: Generate a differential diagnosis and prioritize based on clinical features that suggest a specific aetiology.</li> </ul>	CP 42: IM 9.3- 9.5: Anaemia- Document, Elicit History, clinical features, systematic examination and DD.	<ul> <li>Anaemia:</li> <li>Present the case</li> <li>Generate a DD based on the clinical presentation.</li> <li>Enumerate appropriate diagnostic work ups.</li> <li>Enumerate the indications for the various tests &amp; interpret their results.</li> <li>Develop an appropriate treatment plan.</li> <li>Discuss anemia complications.</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the communication skills.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
43.	<ul> <li>IM 10.1: Define, describe and differentiate between acute and chronic renal failure.</li> <li>IM 10.2: Classify, describe and differentiate the pathophysiologic causes of acute renal failure.</li> <li>IM 10.3: Describe the pathophysiology and causes of pre renal ARF, renal and post renal ARF.</li> <li>IM 10.4: Describe the evolution, natural history and treatment of ARF.</li> <li>IM 10.5: Describe and discuss the aetiology of CRF.</li> </ul>	CP 43: IM 10.1-10.5: ARF & CRF- Clinical Presentation & Treatment Plan.	<ul> <li>ARF &amp; CRF:</li> <li>Elicit history &amp; document a case Renal Failure.</li> <li>Identify whether it is ARF or CRF.</li> <li>Generate a DD based on the clinical presentation.</li> <li>Describe the pathophysiology and causes of pre renal ARF, renal and post renal ARF.</li> <li>Describe the evolution, natural history and treatment of ARF.</li> <li>Describe and discuss the aetiology of CRF.</li> <li>Develop an</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the communication skills.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
			<ul><li>appropriate treatment plan.</li><li>Document in the Logbook/Portfolio.</li></ul>	
44.	IM 11.7: Elicit document and present a medical history that will differentiate the aetiologies of diabetes including risk factors, precipitating factors, lifestyle, nutritional history, family history, medication history, co- morbidities and target organ disease. IM 11.8: Perform a systematic examination that establishes the diagnosis and severity that includes skin, peripheral pulses, blood pressure measurement, and fundus examination, detailed examination, detailed examination of the foot (pulses, nervous and deformities and injuries). IM 11.9: Describe and recognize the clinical features of patients who present with a diabetic emergency. IM 11.10: Generate a differential diagnosis and prioritize based on clinical features that suggest a specific aetiology.	CP 44: IM 11.7-11.10: Diabetes Mellitus (DM)-Document, Elicit History & Systematic examination, identifying complications, DD.	<ul> <li>Diabetic Mellitus:</li> <li>Elicit history &amp; document a case of DM.</li> <li>Enlist risk factors, precipitating factors, lifestyle, nutritional history, family history, medication history, comorbidities and target organ disease involved in DM.</li> <li>Perform a systematic examination to establish the diagnosis and severity that includes skin, peripheral pulses, BP measurement, and fundus examination detailed examination of the foot (pulses, nervous and deformities and injuries.</li> <li>Describe &amp; enumerate CF of a diabetic emergency.</li> <li>Generate a DD and prioritize based on clinical features that suggest a specific aetiology.</li> </ul>	communication skills. • Assess the



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment
45	<b>IM</b> 11 17. Outline e	CD 45.	Diahatia Mallitura	by Faculty
45.	IM 11.17: Outline a	CP 45:	Diabetic Mellitus:	• Observe the response;
	therapeutic approach to	IM 11.17,11.18 (VI-	•Develop an	Viva.
	therapy of T2Diabetes	PA): Diabetes	appropriate	• Assess the
	based on presentation,	Mellitus-Type 2-	treatment plan based	communication skills.
	severity and complications	Presentaion,	on presentation,	• Assess the
	in a cost effective manner.	complication &	severity and	Logbook/Portfolio.
	IM 11.18: Describe and	Treatment Plan	complications in a	• Validate the Logbook
	discuss the pharmacology,		cost effective	entry.
	indications, adverse		manner.	<ul> <li>Provide feedback</li> </ul>
	reactions and interactions		•Describe and	
	of drugs used in the		discuss medications	
	prevention and treatment		indications, adverse	
	of target organ damage		reactions and	
	and complications of Type		interactions of drugs	
	II Diabetes including		used in the	
	neuropathy, nephropathy,		prevention and	
	retinopathy, hypertension,		treatment of target	
	dyslipidemia and		organ damage in	
	cardiovascular disease.		Type II Diabetes.	
			• Enumerate	
			complications of	
			Type II Diabetes	
			including	
			neuropathy,	
			nephropathy,	
			retinopathy,	
			hypertension,	
			dyslipidemia and	
			cardiovascular	
			disease.	
			•Document in the	
			Logbook/Portfolio.	
46.	<b>IM 12.1:</b> Describe the	<b>CP 46:</b>	Thyroid	• Observe the response;
-10.	epidemiology and	IM 12.1-12.8 ( <mark>VI-</mark> PY,	Dysfunction:	• Observe the response; Viva.
	pathogenesis of	<b>PA</b> ): Thyroid	•Describe the	
	hypothyroidism and	dysfunction-		• Assess the
	hyperthyroidism including	Pathogenesis, Clinical	epidemiology and	communication skills.
	the influence of iodine	features, history taking,	pathogenesis of	• Assess the
			hypothyroidism and	Logbook/Portfolio.
	5	systematic	hyperthyroidism	• Validate the Logbook
	autoimmunity in the	examination, DD.	including the	entry.
	pathogenesis of thyroid		influence of iodine	• Provide feedback
	disease.		deficiency and	
	IM 12.2: Describe and		autoimmunity in the	
	discuss the genetic basis		pathogenesis of	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	of some forms of thyroid		thyroid disease.	
	dysfunction.		•Describe and	
	IM 12.3: Describe and		discuss about	
	discuss the physiology of		genetic basis, hypo-	
	the hypo-thalamopituitary		thalamopitiuary	
	- thyroid axis, principles		iodine uptake	
	of thyroid function testing		related to thyroid	
	and alterations in		function.	
	physiologic function.		•Elicit history,	
	IM 12.4: Describe and		systematic	
	discuss the principles of		examination to	
	radio iodine uptake in the		identify thyroid	
	diagnosis of thyroid		dysfunction –	
	disorders.		thyrotoxicosis,	
	IM 12.5: Elicit document		hypothyroidism.	
	and present an appropriate		•Generate a DD	
	history that will establish		based on clinical	
	the diagnosis cause of		presentation and	
	thyroid dysfunction and its		prioritize it based on	
	severity.		the most likely	
	IM 12.6: Perform and		diagnosis.	
	demonstrate a systematic		•Document in the	
	examination based on the		Logbook/Portfolio.	
	history that will help		Logooon ronono.	
	establish the diagnosis and			
	severity including			
	systemic signs of			
	thyrotoxicosis and			
	hypothyroidism, palpation			
	of the pulse for rate and			
	rhythm abnormalities,			
	neck palpation of the			
	thyroid and lymph nodes			
	and cardiovascular			
	findings.			
47.	IM 12.7: Demonstrate the	<b>CP 47:</b>	Thyroid	• Observe the response;
	correct technique to	IM 12.7-12.11:	Dysfunction:	Viva.
	palpate the thyroid.	Thyroid Dysfunction-	•Demonstrate the	• Assess the
	IM 12.8: Generate a	CF, Correct technique	correct technique to	Logbook/Portfolio.
	differential diagnosis	to palpate the thyroid,	palpate the thyroid.	• Validate the Logbook
	based on the clinical	Diagnostic Tests,	•Generate a DD	entry.
	presentation and prioritize	Interpret ECG changes	based on clinical	Provide feedback
	it based on the most likely	& Thyroid Function	presentation and	
	diagnosis.	Tests.	prioritize it based on	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
48.	<ul> <li>IM 12.9: Order and interpret diagnostic testing based on the clinical diagnosis including CBC, thyroid function tests and ECG and radio iodine uptake and scan.</li> <li>IM 12.10: Identify atrial fibrillation, pericardial effusion and bradycardia on ECG.</li> <li>IM 12.11: Interpret thyroid function tests in hypo &amp; hyperthyroidism.</li> <li>IM 13.1: Describe the clinical epidemiology and inherited &amp; modifiable risk factors for common malignancies in India.</li> <li>IM 13.2: Describe the genetic basis of selected cancers.</li> <li>IM 13.3: Describe the relationship between infection and cancers.</li> <li>IM 13.4: Describe the natural history, presentation, course, complications and cause of death for common cancers.</li> <li>IM 13.5: Describe the relationship between infection and cancers.</li> <li>IM 13.7: Elicit document and present a history that will help establish the aetiology of cancer and includes the appropriate risk factors, duration and evolution.</li> <li>IM 13.9: Demonstrate in a</li> </ul>	CP 48 IM 13.1-13.5, 13.7- 13.9: Cancer-Common malignancies, clinical presentation Document, Elicit History, physical examination. (VI-BI, PA)	the most likely diagnosis. • Order and interpret diagnostic tests for diagnosing hypothyroidism & hyperthyroidism. • Identify ECG changes in a Thyroid dysfunctional patient. • Document in the Logbook/Portfolio. <b>Malignancy:</b> • Describe clinical epidemiology of common cancers in India. • Enumerate the various causes- genetic, infections of cancers. • Describe natural history, clinical presentation, complication & causes of death. • Discuss & describe common issues encountered in patients at end of life. • Demonstrate the correct techniques for various common cancers. • Document in the Logbook/Portfolio.	• Observe the response; Viva.



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	mannequin the correct technique for performing breast exam, rectal examination and cervical examination and pap smear.			
49.	IM 14.6: Elicit and document and present an appropriate history that includes the natural history, dietary history, modifiable risk factors, family history, clues for secondary causes and motivation to lose weight. IM 14.7: Perform, document and demonstrate a physical examination based on the history that includes general examination, measurement of abdominal obesity, signs of secondary causes and comorbidities. IM 14.8: Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritize based on the most likely diagnosis. IM 14.9: Order and interpret diagnostic tests based on the clinical diagnosis including blood glucose, lipids, thyroid function tests etc. IM 14.10: Describe the indications and interpret the results of tests for secondary causes of obesity.	CP 49 IM 14.6-14.7: Obesity -Elicit History, Risk Factors, physical examination. Identify Co-morbidities (VI-BI, PY, PA) PY, PA) CP 50 IM 14.6-14.7: Obesity -Generate a DD, Investigate & interpret results for secondary causes of obesity. (VI- BI, PY, PA)	<ul> <li>Obesity:</li> <li>Discuss &amp; describe risk factors, dietary history and causes of Obesity.</li> <li>Perform, document and demonstrate a physical examination, general examination, measurement of abdominal obesity, signs of secondary causes and comorbidities.</li> <li>Document in the Logbook/Portfolio.</li> <li>Obesity-Investigation:</li> <li>Generate a DD based on clinical presentation of obesity.</li> <li>Enumerate investigations &amp; interpret results for secondary causes and comorbidities.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul> • Observe the response; Viva. <ul> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
51.	<ul> <li>IM 14.11: Communicate and counsel patient on behavioural, dietary and lifestyle modifications.</li> <li>IM 14.12: Demonstrate an understanding of patient's inability to adhere to lifestyle instructions and counsel them in a non - judgemental way.</li> <li>IM 14.13: Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for obesity.</li> <li>IM 14.14: Describe and enumerate the indications and side effects of bariatric surgery.</li> <li>IM 14.15: Describe and enumerate and educate patients, health care workers and the public on measures to prevent obesity and promote a healthy lifestyle.</li> </ul>	CP 51 IM 14.6-14.7: Obesity – Prepare a Treatment Plan Communicate and counsel, Pharmacotherapy & Surgery (VI-BI, PY, PA)	<ul> <li>Obesity- Management:</li> <li>Communicate and counsel an obesity patient or in a simulated environment.</li> <li>Enumerate indications and side effects of pharmacotherapy for obesity.</li> <li>Enumerate the indications and side effects of bariatric surgery.</li> <li>Enumerate strategies to prevent Obesity &amp; promote Healthy Lifestyle.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the</li> </ul>
52.	<ul> <li>IM 15.1: Enumerate, describe and discuss the aetiology of upper and lower GI bleeding.</li> <li>IM 15.2: Enumerate, describe and discuss the evaluation and steps involved in stabilizing a patient who presents with acute volume loss and GI bleed.</li> <li>IM 15.3: Describe and discuss the physiologic effects of acute blood and volume loss.</li> <li>IM 15.4: Elicit and document and present an</li> </ul>	CP 52 IM 15.1 -15.5 (HI- SU): GI Bleeding- Causes, physiologic effects, presentation, identify route of bleeding, Appropriate Abdominal Examination	<ul> <li>GI Bleeding:</li> <li>Discuss &amp; enumerate causes of upper and lower GI bleeding.</li> <li>Discuss how to stabilize acute volume loss &amp; GI bleed.</li> <li>Elicit history of bleeding and comorbidities &amp; risk factors.</li> <li>Perform physical &amp; general examination for volume assessment in a GI</li> </ul>	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	appropriate history that identifies the route of bleeding, quantity, grade, volume loss, duration, etiology, comorbid illnesses and risk factors. <b>IM 15.5:</b> Perform, demonstrate and document a physical examination based on the history that includes general examination, volume assessment and appropriate abdominal examination.		bleed case. •Document in the Logbook/Portfolio.	
53.	<ul> <li>IM 15.6: Distinguish between upper and lower Gastro-intestinal bleeding based on the clinical features.</li> <li>IM 15.7: Demonstrate the correct technique to perform an anal and rectal examination in a mannequin or equivalent.</li> </ul>	CP 53 IM 15.6,15.7: GI Bleeding- Upper & Lower GI Bleeding, Perform Anal & Rectal Examination in Mannequin (HI-SU)	<ul> <li>GI Bleeding:</li> <li>Discuss to distinguish between upper and lower Gastro-intestinal bleeding based on the clinical features.</li> <li>Perform the correct technique to perform an anal and rectal examination in a mannequin or equivalent.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response &amp; performance; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
54.	IM 15.8: Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritize based on the most likely diagnosis IM 15.9: Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, PT and PTT, stool examination, occult blood,	CP 54 IM 15.8- 15.10: GI Bleeding- Generate a DD & Investigations. (HI-SU)	GIBleeding:Investigations• Generate a DDbased on thepresentingsymptoms and CF.• Enumerate requireddiagnostic tests &interpret the testresults.• Enumerate theindications forendoscopy,colonoscopy and	<ul> <li>Observe the response &amp; performance; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	liver function tests, H.Pylori test. <b>IM 15.10</b> : Enumerate the indications for endoscopy, colonoscopy and other imaging procedures in the investigation of Upper GI bleeding.		other imaging procedures in the investigation of Upper GI bleeding. •Document in the Logbook/Portfolio.	
55.	IM 15.11: Develop, document and present a treatment plan that includes fluid resuscitation, blood and blood component transfusion, and specific therapy for arresting blood loss. IM 15.12: Enumerate the indications for whole blood, component and platelet transfusion and describe the clinical features and management of a mismatched transfusion. IM 15.13: Observe cross matching and blood / blood component transfusion. IM 15.14: Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of pressors used in the treatment of Upper GI bleed. IM 15.15: Describe and enumerate the indications, pharmacology and side effects of pharmacology and side	CP 55 IM 15.6, 15.7: GI Bleeding- Treatment plan. (HI-SU)	<ul> <li>GI Bleeding: Treatment Plan</li> <li>Develop a treatment plan including fluid therapy &amp; blood transfusion.</li> <li>Enumerate the indications for whole blood, component and platelet transfusion and describe the CF and management of a mismatched transfusion.</li> <li>Observe cross matching and blood / blood component transfusion.</li> <li>Enumerate the indications &amp; contraindication of pharmacotherapy including those for H.pylori.</li> <li>Enumerate the indications for endoscopic interventions and Surgery.</li> <li>Counsel patient &amp; family on the diagnosis and therapeutic option in person or in a simulated</li> </ul>	<ul> <li>Observe the response &amp; performance; Viva.</li> <li>Assess the communication skills.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	<ul> <li>IM 15.16: Enumerate the indications for endoscopic interventions and Surgery.</li> <li>IM 15.17: Determine appropriate level of specialist consultation.</li> <li>IM 15.18: Counsel the family and patient in an empathetic nonjudgmental manner on the diagnosis and therapeutic option.</li> </ul>		environment. •Document in the Logbook/Portfolio.	
56.	IM 16.4: Elicit and document and present an appropriate history that includes the natural history, dietary history, travel, sexual history and other concomitant illnesses. IM 16.5: Perform, document and demonstrate a physical examination based on the history that includes general examination, including an appropriate abdominal examination. IM 16.6: Distinguish between diarrhea and dysentery based on clinical features. IM 16.7: Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritize based on the most likely diagnosis. IM 16.9: Identify common parasitic causes of diarrhea under the microscope in a stool specimen.	CP 56 IM 16.4-16.7,16.9, 16.10: Diarrhea: Elicit, document, history taking, general examination. Distinguish between diarrhea and dysentery, Generate a DD. (VI- MI, PA)	<ul> <li>Diarrhoea:</li> <li>Presenting Features:</li> <li>Elicit history of case presentation of Diarrhoea.</li> <li>Perform physical &amp; general examination of a Diarrhoea patient.</li> <li>Distinguish between diarrhea and dysentery.</li> <li>Enumerate common parasitic causes of diarrhea under the microscope in a stool specimen including cholera.</li> <li>Generate a DD based on the presenting symptoms and clinical features</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response &amp; performance; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	<b>IM 16.10:</b> Identify vibrio cholera in a hanging drop specimen.			
57.	IM16.8:Choose and interpret diagnostic tests based on the clinical diagnosis including 	CP 57 IM 16.8, 16.11-16.14: Diarrhea: Investigation & Treatment Plan. (VI- MI, PA)	Diarrhoea:Investigation&Treatment Plan• Enumeratediagnosticinvestigationsfordiarrhoealdiseasesincludingstool&bloodcultures.• Enumerateanddiscusstheindicationsforantibodies,colonoscopy,diagnosticimagingandbiopsy in thediagnosis of chronicdiarrhea.• Describeandenumeratetheindications and sideeffectseffectsofpharmacotherapyforbacterialandviraldiarrhea• DocumentintheLogbook/Portfolio.	<ul> <li>Observe the response &amp; performance; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
58.	<b>IM 16.12:</b> Enumerate and discuss the indications for further investigations including antibodies, colonoscopy, diagnostic imaging and biopsy in the diagnosis of chronic diarrhea.	CP 58 IM 16.12,16.15,16.16: Chronic Diarrhoea Causes, Crohn's disease & Ulcerative Colitis	<ul> <li>Chronic Diarrhoea : Crohn's disease &amp; Ulcerative Colitis:</li> <li>Enumerate investigations for diagnosis of Chronic Diarrhoea.</li> <li>Elicit features to</li> </ul>	<ul> <li>Observe the response Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	based on the clinical presentation Crohn's disease from Ulcerative Colitis. <b>IM 16.16:</b> Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy including immunotherapy.		<ul> <li>the clinical presentation of Crohn's disease from Ulcerative Colitis.</li> <li>Discuss the medications for the above.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
59.	IM 17.1: Define and classify headache and describe the presenting features, precipitating factors, aggravating and relieving factors of various kinds of headache. IM 17.2: Elicit and document and present an appropriate history including aura, precipitating aggravating and relieving factors, associated symptoms that help identify the cause of headaches. IM 17.3: Classify migraine and describe the distinguishing features between classical and non- classical forms of migraine.	CP 59 IM 17.1-17.3: Headache-Presenting symptoms, History, Migraine	<ul> <li>Headache:</li> <li>Define &amp; Classify headache and enlist the various causes of Headache.</li> <li>Classify migraine and describe the distinguishing features between classical and non- classical forms of migraine.</li> <li>Perform and demonstrate a general neurologic examination and a focused examination for signs of intracranial tension including neck signs of meningitis</li> <li>Discuss the medications for the above.</li> <li>Document in the</li> </ul>	<ul> <li>Observe the response Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
60.	IM 17.4: Perform and	CP 60	Logbook/Portfolio. Meningitis:	• Observe the response
	demonstrate a general neurologic examination and a focused examination for signs of intracranial tension including neck signs of meningitis. IM 17.5: Generate	IM 17.4-17.8: Headache-Neurological Examination, DD, Diagnostic work up, CSF findings. Perform lumbar puncture in a mannequin or	<ul> <li>Perform a general, neurological examination including neck signs of meningitis.</li> <li>Generate the DD for meningitis.</li> </ul>	<ul> <li>Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
61.	document and present a differentialdiagnosis based on the clinical features, and prioritize the 	equivalent CP 61 IM 18.3-18.5: CVA- Elicit, document. Take History, systematic & neurological examination (VI-PA)	<ul> <li>Enumerate the investigations and demonstrate a general neurologic examination and a focused examination for signs of intracranial tension including neck signs of meningitis</li> <li>Discuss the medications for the above.</li> <li>Document in the Logbook/Portfolio.</li> <li>Cerebrovascular Accident:</li> <li>Elicit history, risk factors and symptoms of a patient showing features of CVA.</li> <li>Identify the cause &amp; nature of CVA.</li> <li>Perform a general, neurological examination based on history &amp; signs &amp; symptoms.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	• Observe the response Viva.



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
62.	IM 18.6: Distinguish the	CP 62	Upper Vs Lower	
•=•	lesion based on upper vs	IM 18.6-18.11: UMN	Motor Neuron	Viva.
	lower motor neuron, side,	& LMN Disease-	Lesion:	• Assess the
	site and most probable	Clinical Features,	•Discuss features to	
	nature of the lesion.	Examinations, Choose	distinguish the	• Validate the Logbook
	<b>IM 18.7:</b> Describe the	& Interpret	lesion based on	entry.
	clinical features and	Investigations (VI-	upper vs lower	<ul> <li>Provide feedback</li> </ul>
	distinguish, based on	AN)	motor neuron, side,	• Provide leedback
	clinical examination, the		site and most	
	various disorders of		probable nature of	
	speech.		the lesion.	
	<b>IM 18.8:</b> Describe and		• Enumerate &	
	distinguish, based on the		interpret the	
	clinical presentation, the		diagnostic & testing	
	types of bladder		images to identify	
	dysfunction seen in CNS		the cause of lesion.	
	disease.		• Present a simulated	
	<b>IM 18.9:</b> Choose and		CVA patient- CF,	
	interpret the appropriate		perform a general,	
	diagnostic and imaging		neurological	
	test that will delineate the		examination based	
	anatomy and underlying		on history & signs	
	cause of the lesion.		& symptoms.	
	IM 18.10: Choose and		Choose appropriate	
	interpret the appropriate		diagnostic tests.	
	diagnostic testing in		Discuss & describe	
	young patients with a		the supportive	
	cerebrovascular accident		management to be	
	(CVA).		planned.	
	IM 18.11: Describe the		•Document in the	
	initial supportive		Logbook/Portfolio.	
	management of a patient		Logook/i oniono.	
	presenting with a			
	cerebrovascular accident			
	(CVA).			
63.	IM 19.1: Describe the	CP 63	Movement	• Observe the response
	functional anatomy of the	IM 19.1-19.4:	Disorder:	Viva.
	locomotor system of the	Movement Disorder-	•Discuss the	• Assess the
	brain.	Elicit History, Perform	locomotor system of	
	<b>IM 19.2:</b> Classify	Physical Examination,	the brain.	• Validate the Logbook
	movement disorders of the	Neurological	•Classify movement	entry.
	brain based on	Examination Rating	disorders.	Provide feedback
	distribution, rhythm,		• Discuss the Clinical	
	repetition, exacerbating		presentation as per	



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	and relieving factors.		the cause of the	
	IM 19.3: Elicit and		movement	
	document and present an		disorders.	
	appropriate history		• Perform &	
	including onset,		demonstrate	
	progression precipitating		physical &	
	and aggravating relieving		neurological	
	factors, associated		examination of such	
	symptoms that help		a patient.	
	identify the cause of the		•Generate a DD	
	movement disorders.		based on the	
	IM 19.4: Perform,		examination.	
	demonstrate and document		•Make a clinical	
	a physical examination		diagnosis reading	
	that includes a general examination and a detailed		the anatomical	
			location of the	
	neurologic examination using standard movement		lesion.	
	rating scales.		•Document in the	
	IM 19.5: Generate		Logbook/Portfolio.	
	document and present a			
	differential diagnosis and			
	prioritise based on the			
	history and physical			
	examination			
	<b>IM 19.6:</b> Make a clinical			
	diagnosis regarding on the			
	anatomical location,			
	nature and cause of the			
	lesion based on the			
	clinical presentation and			
	findings.			
64.	IM19.7: Choose and	CP 64	<b>Movement Disorder</b>	• Observe the response
-	interpret diagnostic and	IM 19.7-19.9:	Investigations &	Viva.
	imaging tests in the	Movement Disorder-	Treatment Plan:	• Assess the
	diagnosis of movement	Investigations &	•Enumerate the	Logbook/Portfolio.
	disorders.	Treatment Plan.	diagnostic and	• Validate the Logbook
	IM 19.8: Discuss and		imaging tests	entry.
	describe the		required to	• Provide feedback
	pharmacology, dose, side		diagnosis a case of	
	effects and interactions		movement	
	used in the drug therapy of		disorders. Choose	
	Parkinson's syndrome.		and interpret the test	
	IM 19.9: Enumerate the		results	





S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	interpret the appropriate diagnostic testing in patients with snake bites. IM 20.7: Enumerate the indications and describe the pharmacology, dose, adverse reactions and hypersensitivity reactions of anti-snake venom. IM 20.8: Describe the diagnosis, initial approach stabilization and therapy of scorpion envenomation. IM 20.9: Describe the diagnosis initial approach stabilization and therapy of bee sting allergy		<ul> <li>examination, local examination, appropriate cardiac and neurologic examination</li> <li>Enumerate indication, CI &amp; side effects and hypersensitivity of anti-snake venoms.</li> <li>Describe &amp; discuss clinical presentation &amp; treatment plan of scorpion bite in a simulated environment.</li> <li>Describe &amp; discuss clinical presentation &amp; treatment plan of bee/wasp sting in a simulated environment.</li> <li>Document in the bocument in the</li> </ul>	
66.	<ul> <li>IM 21.1: Describe the initial approach to the stabilization of the patient who presents with poisoning.</li> <li>IM 21.2: Enumerate the common plant poisons seen in your area and describe their toxicology, clinical features, prognosis and specific approach to detoxification.</li> <li>IM 21.3: Enumerate the common corrosives used in your area and describe their toxicology, clinical features, prognosis and approach to therapy.</li> <li>IM 21.4: Enumerate the commonly observed drug</li> </ul>	CP-66 IM 21.1 -21.8: Poisoning: Clinical findings, Systematic examination & Management	Logbook/Portfolio. Plant & Corrosive poisons: • Enumerate the common plant poisons seen the area around the hospital and describe their toxicology, clinical features, prognosis and specific approach to detoxification. • Describe the initial approach to stabilize a patient who presents with poisoning. • Enumerate the common corrosives	Viva. • Assess the Logbook/Portfolio.



DistrictCompetencyConnectivity of terminal pointby Facultyoverdose in your area and describe their toxicology, clinical features, prognosis and approach to therapy.used in the area around & describe their toxicology, clinical features, prognosis and approach to therapy.IM 21.5: Observe and describe the functions and role of a poison center in suspected poisoning Hmedico legal aspects of suspected suicidal or homicidal poisoning and demonstrate the correct procedure to write a medico legal report on a suspected poisoning• Enumerate their toxicology, clinical features, prognosis and approach to therapy.IM 21.7: Counsel family members of a patient with suspected poisoning about the clinical and medico legal aspects with empathy.• Describe the medico legal aspects of suspected poisoning and demonstrate the correct procedure to write a medico legal report on a suspected poisoning about the clinical and medico legal aspects with empathy.• Describe the medico legal aspects of suspected poisoning and demonstrate the correct procedure to write a medico legal report on a suspected poisoning and demonstrate the correct procedure to write a medico legal report on a suspected poisoning.IM 21.8: Enumerate the indications for psychiatric consultation and describe the precautions to be taken• Counsel patient & family members of a patient with
<ul> <li>in a patient with suspected suicidal ideation / gesture.</li> <li>suspected poisoning about the clinical and medico legal aspects with empathy.</li> <li>Enumerate the indications for psychiatric consultation and describe the precautions to be taken by patient &amp; family members in such a situation.</li> <li>Document in the</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
67.	IM 22.5: Enumerate the causes and describe the clinical features and the correct approach to the diagnosis and management of the patient with hyponatremia. IM 22.6: Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hypernatremia. IM 22.7: Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hypernatremia. IM 22.7: Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hypokalemia. IM 22.8: Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hypokalemia.	CP-67 IM 22.5-22.13: Hyponatremia, Hypokalemia, Hyperkalemia, Hyperkalemia,	<ul> <li>Hyponatremia,</li> <li>Hypernatremia,</li> <li>Hyperkalemia;</li> <li>Enumerate the causes and describe the clinical features and the correct approach to the diagnosis and management of the patient with</li> <li>Hyponatremia.</li> <li>Hypernatremia</li> <li>Hyperkalemia</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>by Faculty</li> <li>Observe the response Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
68.	<ul> <li>IM 22.9: Enumerate the causes and describe the clinical and laboratory features of metabolic acidosis.</li> <li>IM 22.10: Enumerate the causes of describe the clinical and laboratory features of metabolic alkalosis.</li> <li>IM 22.11: Enumerate the causes and describe the clinical and laboratory features of respiratory features of respiratory acidosis.</li> </ul>	CP-68 IM 22.5-22.13: , Metabolic Acidosis & Alkalosis	Metabolic Acidosis & Alkalosis: •Enumerate the causes and describe the clinical & laboratory features and the correct approach to the diagnosis and management of the patient with -Metabolic Acidosis - Meta. Alkalosis - Resp. Acidosis	<ul> <li>Observe the response Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
	<ul> <li>IM 22.12: Enumerate the causes and describe the clinical and laboratory features of respiratory alkalosis.</li> <li>IM 22.13: Identify the underlying acid based disorder based on an ABG report and clinical situation.</li> </ul>		<ul> <li>Discuss acid based disorder based on an ABG report and clinical situation.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
69.	IM 23.3: Discuss and describe the aetiology, causes, clinical manifestations, complications, diagnosis and management of common vitamin deficiencies. IM 23.4: Enumerate the indications for enteral and parenteral nutrition in critically ill patients. IM 23.5: Counsel and communicate to patients in a simulated environment with illness on an appropriate balanced diet.	CP 69: IM 23.3-23.5: Malnutrition- Clinical Features, Systematic examination, Counsel for appropriate Diet	Vitamin Deficiencies: • Enumerate common vitamin deficienciesdiscuss and describe the aetiology, causes, clinical manifestations, complications, diagnosis and management. • Enumerate the indications for enteral and parenteral nutrition in critically ill patients. • Counsel and communicate to patients in a simulated environment with illness on an appropriate balanced diet. • Document in the	<ul> <li>Observe the response Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
70.	<b>IM 25.1:</b> Describe and	<b>CP 70:</b>	Logbook/Portfolio. Rabies:	• Observe the response
	discuss the response and the influence of host immune status, risk factors and comorbidities on zoonotic diseases (e.g.	IM 25.1-25.3: Zoonotic Diseases- Rabies- Clinical features, Management (VI-MI, CM)	•Describe and discuss clinical presentation, complication & management of	<ul> <li>Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> </ul>



S.No.	Competency	Clinical Posting (CP)	Activity by learner	Formative Assessment by Faculty
71.	Leptospirosis, Rabies) and non-febrile infectious disease (e.g. Tetanus). IM 25.2: Discuss and describe the common causes, pathophysiology and manifestations of these diseases. IM 25.3: Describe and discuss the pathophysiology and manifestations of these diseases.	CP 71: IM 25.1-25.3 : Zoonotic Diseases- Tetanus- Clinical features, Management (VI-MI, CM)	Rabies including the various treatment regimens.• Document in the Logbook/Portfolio.Tetanus: • Describe and discuss clinical presentation, complication & management of Tetanus including the various treatment regimens.• Document in the Logbook/Portfolio.	<ul> <li>Provide feedback</li> <li>Observe the response Viva.</li> <li>Assess the Logbook/Portfolio.</li> </ul>
72.		Ward Leaving	Assessment	



#### **RAMA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, HAPUR** Phase III Part-2 Clinical Posting (2019 Batch)

#### 2. Clinical Posting Classes for Phase-III Part 2 (2019-20 Batch): Surgery

Each group is posted for 12 weeks in Surgery from Monday to Saturday (10 am to 1 pm). The students may be posted in rotation in the OPD, Ward, Operation Theatre & Special clinic cording to the unit/units in the department. Faculty in charge for teaching, according to Units shall facilitate the Clinical Posting of students as follows:

	Surgery- Weekly Schedule					
Week	Day	Faculty				
	Mon					
Weels 1	Tue					
Week 1	Wed	Faculty-in-Charge as decided				
to Week 4	Thurs	by the HoD				
WEEK 4	Fri					
	Sat					

Faculty to ensure that the students take proper precautions to prevent Covid-19 as per the periodic government instructions. The following competencies may be imparted to the students posted according to the availability of patients:

S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
1.	SU 1.1: Describe Basic	<b>CP 1</b>	Metabolic response	• Observe the
	concepts of homeostasis;	SU 1.1-1.3:	to Injury –	discussion; Viva.
	enumerate the metabolic	Metabolic response to	Homeostasis:	• Assess the
	changes in injury & their	Injury – Homeostasis,	•Describe Basic	Logbook/Portfolio.
	mediators.	Factors involved,	concepts of	• Validate the Logbook
	SU 1.2: Describe the	Perioperative care.	homeostasis.	entry.
	factors that affect the		•Enumerate the	<ul> <li>Provide feedback</li> </ul>
	metabolic response to		metabolic changes	
	injury.		in injury & their	
	SU 1.3: Describe basic		mediators.	
	concepts of perioperative		•Enumerate the	
	care.		factors that affect	
			the metabolic	
			response to injury.	
			•Describe basic	
			concepts of	
			perioperative care.	
			•Document in the	
			Logbook/Portfolio.	
2.	SU 2.1: Describe	<b>CP 2</b>	Shock:	• Observe the
	Pathophysiology of	SU2.1-2.3:	•Describe the	discussion; Viva.
	shock, types of shock &	Shock-	Pathophysiology,	• Assess the
	principles of	Pathophysiology,	Types, Clinical	0
	resuscitation including	Types, Fluid	Features, Fluid	• Validate the Logbook
	fluid replacement &	replacement, CF,	replacement, CF,	entry.
	monitoring.	Management.	Management.	<ul> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
	SU 2.2: Describe the clinical features of shock & its appropriate treatment. SU 2.3: Communicate & counsel patients & families about the treatment & prognosis of shock demonstrating empathy & care.		<ul> <li>Use Kalamazoo technique to communicate &amp; counsel patients &amp; families about the treatment &amp; prognosis of shock demonstrating empathy &amp; care.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
3.	<ul> <li>SU 3.1: Describe the Indications and appropriate use of blood and blood products and complications of blood transfusion.</li> <li>SU 3.2: Observe blood transfusions.</li> <li>SU 3.3: Counsel patients and family/ friends for blood transfusion and blood donation.</li> </ul>	CP 3 SU 3.1-3.3: Blood Transfusion-Observe, enlist complication. (VI-PA):	<ul> <li>Blood Transfusion:</li> <li>Enumerate indication of blood &amp; blood products.</li> <li>Enlist complication in Blood Transfusion.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
4.	<ul> <li>SU 4.1: Elicit document and present history in a case of Burns and perform physical examination. Describe Pathophysiology of Burns.</li> <li>SU 4.2: Describe Clinical features, Diagnose type and extent of burns and plan appropriate treatment.</li> <li>SU 4.3: Discuss the Medicolegal aspects in burn injuries.</li> <li>SU 4.4: Communicate and counsel patients and families on the outcome and rehabilitation demonstrating empathy and care.</li> </ul>	CP 4 SU 4.1-4.4: Burns- Elicit document, take history, physical examination, Plan a treatment	<ul> <li>Burns:</li> <li>Elicit document and present history in a case of Burns and perform physical examination.</li> <li>Describe Pathophysiology of Burns.</li> <li>Describe Clinical features, Diagnose type and extent of burns and plan appropriate treatment.</li> <li>Discuss the Medicolegal aspects in burn injuries.</li> <li>Communicate and counsel patient and families on the</li> </ul>	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			outcome and rehabilitation demonstrating empathy and care. • Document in the Logbook/Portfolio.	
5.	<b>SU 5.1:</b> Describe normal wound healing and factors affecting healing.	CP 5 SU 5.1: Wounds- Document, Elicit history taking, plan of management	<ul> <li>Wounds:</li> <li>Describe normal wound healing and factors affecting healing.</li> <li>Discuss treatment plan of wounds.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess steps enumerated; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
6.	<b>SU 5.2:</b> Elicit, document and present a history in a patient presenting with wounds.	CP 6 SU 5.2: Wounds-Bed sore-Document, Elicit history taking, plan of management	<ul> <li>Bed sores:</li> <li>Elicit history taking, document and plan management of Bed sore.</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
7.	SU 5.3: Differentiate the various types of wounds, plan & observe management of wounds. SU 5.4: Discuss medico legal aspects of wounds	CP 7 SU 5.3 & 5.4: Wounds - Type CF, Investigations, Management (Rodent, Meleney's etc.)	<ul> <li>Wounds:</li> <li>Discuss the various types of wounds including Rodent, Meleney's.</li> <li>Discuss treatment plan &amp; management of wounds.</li> <li>Discuss medico legal aspects of wounds</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
8.	SU 6.1:Define and describe the aetiology and pathogenesis of surgical Infections.SU 6.2:Enumerate Prophylactic : and therapeutic antibiotics Plan appropriate	<b>CP 8</b> <b>SU 6.1, 6.2:</b> Surgical Site Infection (SSI) - etiology, pathogenesis, antibiotic plan.	SurgicalSiteInfection (SSI):• Define and describethe aetiology andpathogenesisofsurgical Infections.• Enumerateprophylactic&	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
	management		<ul> <li>therapeutic antibiotics.</li> <li>Plan appropriate management.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
9.	SU 9.1: Choose appropriate biochemical, microbiological, imaging investigations and interpret the investigative data in a surgical patient. SU 9.2: Biological basis for early detection of cancer and multidisciplinary approach in management of cancer. SU 9.3: Communicate the results of surgical investigations and counsel the patient appropriately.	CP 9: SU 9.1-9.3: Surgical Patient- Investigation and interpretation. Early detection of Cancer. Communicate investigation results to surgical patient.	SurgicalPatient-Investigationandinterpretation:•• Enumeratebiochemical,microbiological,pathological,imaginginvestigationsrequiredinasurgical patient• Interprettheinvestigative data &identify the patient'sfitnessforthe surgicalfitnessaccordingthe typeof surgery.• Enumeratethe signs& symptomsforearlydetectionofcancerandmultidisciplinaryapproachinmanagementofcancer.• Communicate• Communicatetheresultsof surgicalinvestigationsandcounseltheppropriately.• Document• DocumentintheLogbook/Portfolio.	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
10.	SU 10.1: Describe the principles of	CP 10 SU 10.1, 10.2:	Common surgical procedures-	• Observe the responses.
	perioperative management of common surgical procedures.	Common surgical procedures- Perioperative	Perioperative Management, Informed Consent:	<ul> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
	SU 10.2: Describe the steps and obtain informed consent in a simulated environment	Management, Informed Consent	<ul> <li>Describe the principles of perioperative management of common surgical procedures.</li> <li>Describe the steps to obtain informed consent in a simulated environment.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	entry. • Provide feedback
11.	SU 10.3: Observe common surgical procedures & assist in minor surgical procedures; Observe emergency lifesaving surgical procedures.	CP11 SU 10.3: Common surgical procedures- assist in minor surgical procedures; Observe emergency lifesaving surgical procedures.	Common surgical procedures: •Observe common surgical procedures & assist in minor surgical procedures •Observe emergency lifesaving surgical procedures. •Document in the Logbook/Portfolio	<ul> <li>Assess the activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
12.	SU 10.4: Perform basic surgical Skills such as First aid including suturing & minor surgical procedures in simulated environment	CP12 SU 10.4: Perform basic surgical Skills (First aid including suturing & minor surgical procedures) in a simulated environment	Basic surgical Skills:• PerformbasicsurgicalSkillsasFirstaidincluding suturing &minorsurgicalproceduresinsimulatedenvironment• Documentin theLogbook/Portfolio	
13.	SU 11.1: Describe principles of Pre- operative assessment.	CP13 SU 11.1: Preoperative assessment.	<ul> <li>Preoperative assessment:</li> <li>Enumerate &amp; discuss principles of Preoperative assessment.</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Assess the activity observed; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
14.	<b>SU 11.3:</b> Demonstrate maintenance of an airway in a mannequin or equivalent.	<b>CP 14:</b> <b>SU 11.3:</b> Demonstrate maintenance of an airway in a mannequin or equivalent	<ul> <li>Airway</li> <li>Maintenance:</li> <li>Demonstrate <ul> <li>maintenance of an</li> <li>airway in a</li> <li>mannequin or</li> <li>equivalent.</li> </ul> </li> <li>Document in the <ul> <li>Logbook/Portfolio.</li> </ul> </li> </ul>	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
15.	<b>SU 11.5:</b> Describe principles of providing post-operative pain relief and management of chronic pain.	<b>CP 15</b> <b>SU 11.5:</b> Providing post-operative pain relief and management of chronic pain.	Post-operativepainreliefandmanagementofchronic pain:•• Describeprinciplesofprovidingpost-operativeoperativepainreliefandand managementofchronic pain.•• DocumentintheLogbook/Portfolio.	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
16.	SU 11.6: Describe Principles of safe General Surgery	<b>CP 16</b> <b>SU 11.6:</b> Describe Principles of safe General Surgery	SafeGeneralSurgery•DescribePrinciplesofsafeGeneralSurgery.•DocumentintheLogbook/Portfolio.	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
17.	SU 12.1: Enumerate the causes and consequences of malnutrition in the surgical patient. SU 12.2: Describe and discuss the methods of estimation and replacement of the fluid and electrolyte requirements in the surgical patient. SU12.3: Discuss the nutritional requirements of surgical patients, the methods of providing nutritional support and their complications	CP 17 SU 12.1-12.3 Surgical Patient- Fluid, Electrolyte & Nutritional requirement. (VI- PY,BI):	SurgicalPatient-Fluid, Electrolyte &Nutritionalrequirement:• Enumeratethecausesandconsequencesofmalnutritioninthesurgical patient.• Describeanddiscussthefluid and electrolyterequirementsinthesurgical patient.• Discussthe	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
18.	SU 13.1: Describe the	CP 18	nutritional requirements of surgical patients, the methods of providing nutritional support and their complications. •Document in the Logbook/Portfolio. Surgical principles,	• Observe the response
	<ul> <li>immunological basis of organ transplantation</li> <li>Discuss the Principles of immunosuppressive therapy.</li> <li>SU 13.2: Enumerate Indications, describe surgical principles, management of organ transplantation.</li> <li>SU 13.3: Discuss the legal and ethical issues concerning organ donation.</li> <li>SU 13.4: Counsel patients and relatives on organ donation in a simulated environment</li> </ul>	SU 13.1-13.4: Surgical principles, management of organ transplantation. (VI- FM)	<ul> <li>management of organ</li> <li>transplantation:</li> <li>Discuss &amp; describe the immunological basis of organ transplantation</li> <li>Enumerate the principles of immunosuppressive therapy.</li> <li>Enumerate indications; describe surgical principles, management of organ transplantation.</li> <li>Discuss the legal and ethical issues concerning organ donation.</li> <li>Counsel patients and relatives on organ donation in a simulated environment.</li> <li>Document in the</li> </ul>	<ul> <li>&amp; performance.</li> <li>Assess steps enumerated; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
19.	SU 14.1: Describe	CP 19	Logbook/Portfolio. Asepsis Techniques:	• Observe the response
	Aseptic techniques, sterilization and disinfection.	SU 14.1: Demonstrate the techniques of asepsis in a simulated environment	•Enumerate the steps of asepsis techniques in a simulated environment	<ul> <li>Observe the response &amp; performance.</li> <li>Assess steps enumerated; Viva.</li> <li>Assess the Logbook/Portfolio.</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			•Document in the Logbook/Portfolio	<ul> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
20.	SU 14.2: Describe Surgical approaches, incisions & the use of appropriate instruments in Surgery in general. SU 14.3: Describe the materials & methods used for surgical wound closure & anastomosis (sutures, knots &	CP 20 SU 14.2,14.3: Surgical approaches, incisions & use of appropriate instrument; materials & methods for surgical wound closure & anastomosis (sutures,	Surgical Approaches: • Describe the materials & methods used for surgical wound closure & anastomosis (sutures, knots & needles). • Document in the	<ul> <li>Observe the response &amp; performance.</li> <li>Assess steps enumerated; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
21.	needles) SU 14.4: Demonstrate the techniques of asepsis and suturing in a simulated environment	knots & needles) CP 21: SU 14.4: Demonstrate the techniques of aseptic suturing in a simulated environment	<ul> <li>Logbook/Portfolio.</li> <li>Aseptic conditions while Suturing</li> <li>Demonstrate the techniques of suturing in a simulated environment using aseptic techniques.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
22.	SU 16.1: Minimally invasive General Surgery: Describe indications advantages & disadvantages of Minimally invasive General Surgery.	<b>CP 22</b> <b>SU 16.1:</b> Minimum Invasive General Surgery - Skin graft & flops	MinimallyInvasiveGeneral Surgery:• Enumerateindications.• Enumerateadvantages&disadvantages.• DocumentintheLogbook/Portfolio.	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
23.	SU 17.1: Describe the Principles of FIRST AID SU 17.2: Demonstrate the steps in Basic Life Support. Transport of injured patient in a simulated environment. SU 17.3: Describe the Principles in management of mass casualties.	CP 23 SU 17.1-17.3 First AID, BLS, Mass Casualty Trauma-Triage ABC of trauma	<ul> <li>First AID, BLS, Mass Casualty:</li> <li>Describe the Principles of First Aid.</li> <li>Demonstrate the steps in Basic Life Support.</li> <li>Demonstrate transport of injured</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
			patientinasimulatedenvironment.•DescribethePrinciplesinmanagementofmass casualties.•DocumentintheLogbook/Portfolio.	
24.	<ul> <li>SU 17.4: Describe Pathophysiology, mechanism of head injuries.</li> <li>SU 17.5: Describe clinical features for neurological assessment &amp; GCS in head injuries.</li> <li>SU 17.6: Choose appropriate investigations &amp; discuss the principles of management of head injuries.</li> </ul>	CP 24 SU 17.4-17.6: Head Injury- Pathophysiology, Mechanism of Injury, Neurological Assessment, and Investigations & Management.	Head Injury:• DescribethePathophysiology,MechanismMechanismofInjuryDiscussthe,• Discussthe,NeurologicalAssessment, GCS.• Identifyanappropriateinvestigationsinvestigations&Management.• Document• Documentin theLogbook/Portfolio.	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
25.	SU 17.7: Describe the clinical features of soft tissue injuries. Chose appropriate investigations and discuss the principles of management.	CP 25 SU 17.7: Soft tissue injuries. Clinical features, Investigations, Management	<ul> <li>Soft tissue injuries.</li> <li>Clinical features,</li> <li>Investigations,</li> <li>Management:</li> <li>Describe the clinical features of soft tissue injuries.</li> <li>Choose appropriate investigations and discuss the principles of management.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
26.	<b>SU17.10:</b> Demonstrate Airway maintenance. Recognize and manage tension pneumothorax, hemothorax and flail chest in simulated environment.	CP 26 SU 17.10: Demonstrate Airway maintenance. Recognize and manage tension pneumothorax,	Demonstrate Airway maintenance in tension pneumothorax, hemothorax & flail chest. • Demonstrate	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
		hemothorax and flail chest in simulated environment.	Airway maintenance. • Identify clinical presentation of the following: - Tension pneumothorax - Hemothorax - Flail chest • Manage the above in a simulated environment. • Document in the Logbook/Portfolio.	• Provide feedback
27.	SU 18.1: Describe the pathogenesis, clinical features and management of various cutaneous and subcutaneous infections.	CP 27 SU 18.1: Cutaneous and subcutaneous infectionsclinical features and management	Cutaneousandsubcutaneousinfections:• Describethepathogenesis,clinical features andmanagementofvariouscutaneousandsubcutaneousinfections.• Documentin theLogbook/Portfolio.	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
28.	SU 18.2: Classify skin tumors, Differentiate different skin tumors and discuss their management.	CP 28 SU 18.2: Classify skin tumors Differentiate different skin tumors and discuss their management.	Skin tumors:•Enumeratethedifferentskintumorsanddiscusstheir management.•DocumentintheLogbook/Portfolio.	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
29.	SU 18.3: Describe & demonstrate the clinical examination of surgical patient including swelling & order relevant investigation for diagnosis. Describe & discuss appropriate treatment plan.	<b>CP 29</b> <b>SU 18.3:</b> Swelling- Clinical examination, investigation, treatment plan.	<ul> <li>Swelling:</li> <li>Demonstrate clinical examination, investigation</li> <li>Prepare a treatment plan.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
30.	SU 19.1: Describe the etiology and	CP 30 SU 19.1,19.2	Cleft lip and palate:• Describethe	• Observe the responses.



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	classification of cleft lip and palate. <b>SU 19.2:</b> Describe the Principles of reconstruction of cleft lip and palate.	Classification of Cleft lip and palate- Reconstruction	etiologyandclassificationofcleft lip and palate.•EnumeratethePrinciplesofreconstructionofcleft lip and palate.•DocumentintheLogbook/Portfolio.	<ul> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
31.	SU 20.1: Describe etiopathogenesis of oral cancer symptoms and signs of Oropharyngeal cancer. SU 20.2: Enumerate the appropriate investigations and discuss the Principles of treatment.	CP 31 SU 20.1, 20.2: Oropharyngeal cancer-Signs & Symptoms; investigations and treatment.	Oropharyngeal cancer:• Describe etiopathogenesis of oral cancer symptoms and signs of Oropharyngeal cancer.• Enumerate appropriate investigations discuss the Principles treatment.• Document Logbook/Portfolio.	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
32.	SU 21.1: Describe surgical anatomy of the salivary glands, pathology, and clinical presentation of disorders of salivary glands. SU 21.2: Enumerate the appropriate investigations and describe the Principles of treatment of disorders of salivary glands	CP 32 SU 21.1,21.2 Salivary Glands Disorders-Pathology, and clinical presentation, investigation & Treatment	SalivaryGlandsDisorders:• Describesurgicalanatomyofsalivaryglands,pathology,andclinical presentationofdisordersofdisordersofdisordersofanotherofdisordersofdisordersofanotherofdisordersofdisordersofanotherappropriateanotherinvestigationsanddescribethePrinciplesoftreatmentofdisordersof salivaryglands• DocumentintheLogbook/Portfolio	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
33.	SU 22.1: Describe the applied anatomy and physiology of thyroid SU 22.2:Describe the etiopathogenesis of thyroidal swellings SU 22.3: Demonstrate and document the correct clinical examination of thyroid swellings and discus the differential diagnosis and their management.	CP 33 SU 22.1- 22.3: Thyroid Swelling- Clinical Examination, DD & their Management.(VI- AN, PA)	<ul> <li>Thyroid Swelling:</li> <li>Describe the applied anatomy &amp; physiology of thyroid.</li> <li>Describe the etiopathogenesis.</li> <li>Demonstrate &amp; document the correct clinical examination of thyroid swellings.</li> <li>Present a case of Thyroid swelling in SNAPPS &amp; discuss DD &amp; their management</li> <li>Document in the</li> </ul>	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
34.	SU 22.5: Describe the applied anatomy of parathyroid. SU 22.6: Describe and discuss the clinical features of hypo - and hyperparathyroidism and the principles of their management	CP 34 SU 22.5, 22.6: Parathyroid Swelling- Clinical Examination, & their Management.(VI- AN, PA)	Logbook/Portfolio. Parathyroid – Hypo & Hyper: • Describe the applied anatomy of parathyroid • Describe and discuss the CF of hypo - and hyperparathyroidism and the principles of their management • Document in the Logbook/Portfolio	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
35.	SU 24.1: Describe the clinical features, principles of investigation, prognosis & mgt. of pancreatitis. SU 24.2: Describe the clinical features, principles of investigation, prognosis and management of pancreatic endocrine tumours.	CP 35 SU 24.1: Pancreatitis- Presentation, Investigation, prognosis and Management (VI- PY,AN)	<ul> <li>Pancreatitis:</li> <li>Describe &amp; discuss the CF, principles of investigation, prognosis and management of:</li> <li>Pancreatitis.</li> <li>Pancreatic endocrine tumours.</li> <li>Discuss treatment plan of Pancreatic disorders including</li> </ul>	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
	SU 24.3: Describe the principles of investigation and management of Pancreatic disorders including pancreatitis and endocrine tumors.		<ul><li>pancreatitis and endocrine tumors.</li><li>Document in the Logbook/Portfolio.</li></ul>	
36.	SU 25.1: Describe applied anatomy & appropriate investigations for breast disease. SU 25.2: Describe the etiopathogenesis, clinical features & principles of management of benign breast disease including infections of the breast.	CP 36 SU 25.1-25.2: Breast Disease- Fibroid Adenoma, Phyloid Tumour, mastitis, , Galactorrhoea-CF, Examination & Management	<ul> <li>Breast disease:</li> <li>Describe applied anatomy for breast disease.</li> <li>Enumerate appropriate investigations for breast disease.</li> <li>Describe the etiopathogenesis, clinical features &amp; principles of management of benign breast disease including infections of the breast.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
37.	SU 25.3: Describe the etiopathogenesis, clinical features, Investigations & principles of treatment of benign & malignant tumours of breast. SU 25.4: Counsel the patient & obtain informed consent for treatment of malignant conditions of the breast.	CP 37 SU 25.3, 25.4: Benign & malignant Tumours of Breast- Definition, CF, Examination, Investigation, Management-Non- Surgical, Surgical (Types).(VI-AN, AETCOM)	<ul> <li>Benign &amp; malignant Tumours of breast:</li> <li>Describe the etiopathogenesis, clinical features, Investigations.</li> <li>Enlist the principles of treatment.</li> <li>Counsel the patient &amp; obtain informed consent for treatment of malignant conditions of the breast.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance.</li> <li>Observe the counseling skills.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
38.	SU 25.5: Demonstrate the correct technique to palpate the breast for breast swelling in a mannequin or equivalent.	CP 38: SU 25.5: Breast examination in a mannequin or equivalent	<ul> <li>Breast examination:</li> <li>Enumerate the steps in Breast examination in a mannequin.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Assess steps enumerated; Viva.</li> <li>Observe the response &amp; performance; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
39.	<b>SU 26.1:</b> Outline the role of surgery in the management of coronary heart disease, valvular heart diseases and congenital heart diseases.	<b>CP 39</b> <b>SU 26.1:</b> Role of Surgery in the management of coronary heart disease, valvular heart diseases and congenital heart diseases	Coronaryheartdisease,valvularheartdiseasesandcongenitalheartdiseases-RoleofSurgery:••Discuss the role ofsurgeryinthemanagementofcoronaryheartdisease,valvularheartdiseasesandcongenitalheartdiseases•DocumentintheLogbook/Portfolio.	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
40.	SU 26.2: Describe the clinical features of mediastinal diseases and the principles of management. SU 26.3: Describe the etiology, pathogenesis, clinical features of tumors of lung and the principles of management.	CP 40 SU 26.2, 26.3: Management of Mediastinal diseases & Lung Cancers	<ul> <li>Mediastinal diseases</li> <li>&amp; Lung Cancers -</li> <li>Management:</li> <li>Describe the CF of mediastinal diseases and the principles of management.</li> <li>Describe the etiology, pathogenesis, clinical features of tumors of lung and the principles of management.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
S.No. 41.	CompetencySU 27.1: Describe the etiopathogenesis, clinical features, investigations and principles of treatment of occlusive arterial disease.SU 27.2: Demonstrate the correct examination 	Clinical Posting CP 41 SU 27.1-27.3: Occlusive arterial disease Etiopathogenesis, CF, Investigations & Treatment	Occlusive arterial disease:• Describethe etiopathogenesis, CF, investigations and principles of treatmentof occlusiveof occlusive arterial disease.• Demonstratethe correct examination of the vascular system & enumerate & describe the investigation of vascular disease• DescribeCF, investigations & 	
42.	<b>SU 27.4:</b> Describe the types of gangrene & principles of amputation	CP 42 SU 27.4: Gangrene-Types, Principles of Amputation (HI- PMR)	<ul> <li>disorders.</li> <li>Document in the Logbook/Portfolio.</li> <li>Gangrene:</li> <li>Describe Types.</li> <li>Discuss principles of Amputation.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> </ul>
43.	SU 27.5: Describe the applied anatomy of venous system of lower limb SU 27.6: Describe pathophysiology, clinical features, Investigations & principles of management of DVT & Varicose veins	CP 43 SU 27.5, 27.6: DVT & Varicose veins-CF, investigations & management. (VI- AN,HI- IM)	<ul> <li><b>DVT &amp; Varicose</b></li> <li><b>veins:</b></li> <li>Describe the applied anatomy of Venous system of lower limb.</li> <li>Describe pathophysiology, CF, investigations DVT &amp; Varicose veins</li> <li>Principles of mgt.</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Provide feedback</li> <li>Assess the observed; activity Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
44.	SU 27.7: Describe pathophysiology, clinical features, investigations & principles of management of Lymph edema, lymphangitis & Lymphomas. SU 27.8: Demonstrate the correct examination of the lymphatic system	CP 44 SU 27.7,27.8: Lymph edema, lymphangitis & Lymphomas- Pathophysiology, CF, Examination, Investigations & Management(VI-AN)	Lymphedema,lymphangitis&lymphomas:•• Describepathophysiology,clinicalfeatures,investigations.•• Principlesofmanagement•• Observecommonsurgicalprocedures& assistin minorsurgicalprocedures• Observeemergencylifesavingsurgicalprocedures.•• Documentin theLogbook/Portfolio.	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
45.	SU 28.1: Describe pathophysiology, clinical features, Investigations and principles of management of Hernias. SU 28.2: Demonstrate the correct technique to examine the patient with hernia and identify different types of hernias.	CP 45 SU 28.1, 28.2: Hernia-Types, Clinical features, investigations & Management	<ul> <li>Hernia:</li> <li>Describe pathophysiology, clinical features, Investigations and principles of management of Hernias</li> <li>Demonstrate the correct technique to examine the patient with hernia and identify different types of hernias.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
46.	SU28.3:Describecauses, clinical features, complicationsand principlesprinciplesof managementperitonitis.	CP 46 SU 28.3: Peritonitis: Clinical features, investigations & Management	Peritonitis:• Describecauses,clinicalfeatures,complicationsandprinciplesofmanagementofperitonitis•• DocumentintheLogbook/Portfolio.	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
47.	SU 28.4: Describe	CP 47	Intra-abdominal	• Assess the observed
	pathophysiology, clinical	SU 28.4: Intra-	abscess, mesenteric	activity; Viva.
	features, investigations	abdominal abscess,	cyst, and	• Assess the
	and principles of	mesenteric cyst, and	retroperitoneal	Logbook/Portfolio.
	management of Intra-	retroperitoneal	tumors:	• Validate the Logbook
	abdominal abscess,	tumors: CF,	• Describe	entry.
	mesenteric cyst, and	investigations &	pathophysiology,	• Provide feedback
	retroperitoneal tumors.	Management	clinical features,	• I Tovide Teedback
		U	investigations and	
			principles of	
			management of	
			Intra-abdominal	
			abscess, mesenteric	
			cyst, and	
			retroperitoneal	
			tumors.	
			•Document in the	
			Logbook/Portfolio.	
48.	SU 28.5: Describe the	CP 48	Oesophageal	• Assess the observed
	applied Anatomy and	SU 28.5, 28.6:	Disorders:	activity; Viva.
	physiology of	Oesophageal	• Describe the applied	• Assess the
	esophagus.	Disorders: CF,	Anatomy and	Logbook/Portfolio.
	SU 28.6: Describe the	investigations &	physiology of	• Validate the Logbook
	clinical features,	Management	esophagus	entry.
	investigations and		•Describe the CF	• Provide feedback
	principles of		investigations and	
	management of benign		principles of	
	and malignant disorders		management of	
	of esophagus.		benign and	
			malignant disorders	
			of esophagus	
			•Document in the	
			Logbook/Portfolio.	
49.	SU 28.7: Describe the	CP 49	Stomach Disorders:	• Assess the observed
	applied anatomy and	SU 28.7-28.9:	•Describe the applied	activity; Viva.
	physiology of stomach.	Stomach Disorders:	anatomy and	• Assess the
	SU 28.8: Describe and	CF, investigations &	physiology of	Logbook/Portfolio.
	discuss the aetiology, the	Management	stomach	• Validate the Logbook
	clinical features,		•Describe and	entry.
	investigations and		discuss the	<ul> <li>Provide feedback</li> </ul>
	principles of		aetiology, the CF,	
	management of		investigations and	
	congenital hypertrophic		principles of	
	pyloric stenosis, Peptic		management of	



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	ulcer disease, Carcinoma stomach. <b>SU 28.9:</b> Demonstrate the correct technique of examination of a patient with disorders of the stomach.		<ul> <li>congenital hypertrophic pyloric stenosis, Peptic ulcer disease, and Carcinoma stomach.</li> <li>Demonstrate the correct technique of examination of a patient with disorders of the stomach.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
50.	<b>SU 28.10:</b> Describe the applied anatomy of liver. Describe the clinical features, Investigations and principles of management of liver abscess, hydatid disease, injuries and tumors of the liver.	CP 50 SU 28.10: Liver Disorders: CF, investigations & Management	<ul> <li>Liver Disorders:</li> <li>Describe the applied anatomy of liver.</li> <li>Describe the CF, investigations and principles of management of liver abscess, hydatid disease, injuries and tumors of the liver.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
51.	<b>SU 28.11:</b> Describe the applied anatomy of spleen. Describe the clinical features, investigations and principles of management of splenic injuries. Describe the post-splenectomy sepsis – prophylaxis.	CP 51 SU 28.11: Spleen Injuries: CF, investigations & Management	<ul> <li>Spleen Injuries:</li> <li>Describe the applied anatomy of spleen.</li> <li>Describe the clinical features, investigations and principles of management of splenic injuries. Describe the post-splenectomy sepsis – prophylaxis.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
52.	<b>SU 28.12:</b> Describe the applied anatomy of biliary system. Describe the clinical features, investigations and principles of management of diseases of biliary system.	CP 52 SU 28.12: Biliary system diseases-CF, Investigations & Management	Biliarysystemdiseases:• Describe the applied anatomy of biliary system.• Describe the CF, investigations and principles of management of diseases of biliary system.• Document in the Logbook/Portfolio	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
53.	SU 28.13: Describe the applied anatomy of small and large intestine. SU 28.14: Describe the clinical features, investigations and principles of management of disorders of small and large intestine including neonatal obstruction and Short gut syndrome.	CP 53 SU 28.13;28.14: Small and Large intestine disorders- CF, Investigations & Management small and large intestine	<ul> <li>Small and Large intestine disorders</li> <li>Describe the applied anatomy of small and large intestine</li> <li>Describe the CF, investigations and principles of management of disorders of small and large intestine including neonatal obstruction and Short gut syndrome.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
54.	SU 28.15: Describe the clinical features, investigations and principles of management of diseases of Appendix including appendicitis and its complications.	<b>CP 54</b> <b>SU 28.15:</b> Appendicitis-Elicit History, document, take history, systematic examination, plan a management	Appendicitis• Describe the CF investigations and principles of management of diseases of Appendix including appendicitis and its complications.• Document in the Logbook/Portfolio.	<ul> <li>Assess the observed activity; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
55.	SU 28.16: Describe applied anatomy including congenital anomalies of the rectum & anal canal.	CP 55 SU 28.16: Sinus & Fistula: CF, Investigations, Management. (VI- AN,PA)	Congenital anomalies of the rectum & anal canal: • Discuss congenital anomalies of the rectum & anal canal. • Document in the Logbook/Portfolio.	<ul> <li>Observe the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
56.	SU 28.17: Describe the clinical features, investigations and principles of management of common anorectal diseases.	CP 56 SU 28.17: Common anorectal diseases- CF, Investigations & Management. (VI- AN,PA,MI)	<ul> <li>Common anorectal diseases</li> <li>Describe the CF, investigations and principles of management of common anorectal diseases.</li> <li>Describe and demonstrate clinical examination of abdomen. Order relevant investigations.</li> <li>Describe and discuss appropriate treatment plan.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
57.	SU 28.18: Describe and demonstrate clinical examination of abdomen. Order relevant investigations. Describe and discuss appropriate treatment plan.	CP 57 SU 28.18: Clinical examination of abdomen. Order relevant investigations. Describe and discuss appropriate treatment plan. (VI-AN,PA)	<ul> <li>Clinical Abdominal Examinations:</li> <li>Describe and demonstrate clinical examination of abdomen. Order relevant investigations.</li> <li>Describe and discuss appropriate treatment plan.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
58.	<ul> <li>SU 29.1: Describe the causes, investigations and principles of management of Hematuria</li> <li>SU 29.2: Describe the clinical features, investigations and principles of management of congenital anomalies of genitourinary system</li> </ul>	CP 58 SU 29.1, 29.2: Hematuria; Congenital anomalies of genitourinary system: CF, investigations and treatment plan. (VI- AN,BI,PA)	<ul> <li>Hematuria:</li> <li>Describe the causes, investigations and principles of management of Hematuria</li> <li>Describe the CF, investigations and principles of management of congenital anomalies of genitourinary system.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
59.	<b>SU 29.3:</b> Describe the Clinical features, Investigations and principles of management of urinary tract infections.	CP 59 SU 29.3: UTI: CF, investigations and treatment plan (VI-AN,BI,PA)	<ul> <li>UTI:</li> <li>Describe the CF, investigations and principles of management of UTI.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
60.	SU 29.4: Describe the clinical features, investigations and principles of management of hydronephrosis.	CP 60 SU 29.4- Hydronephrosis-CF, Investigations and Management (VI- AN,BI,PA)	Hydronephrosis:• Describe the CFinvestigations &principles ofmanagement ofHydronephrosis.• Document in theLogbook/Portfolio.	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
61.	SU 29.5: Describe the clinical features, investigations and principles of management of renal calculi	CP 61 SU 29.5-Renal Calculi-CF, Investigations and Management (VI- AN,PA)	<ul> <li>Renal Calculi:</li> <li>Describe the CF, investigations &amp; principles of management of renal calculi</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
62. 63.	SU 29.6: Describe the clinical features, investigations and principles of management of renal tumours.SU 29.7: Describe the principles of 	CP 62 SU 29.6- Renal tumoursCF, investigation & Management. (VI- AN,PA) CP 63 SU 29.7- Acute and Chronic retention of	<ul> <li>Renal tumours:</li> <li>Describe the CF, investigations and principles of mgt. of renal tumours.</li> <li>Document in the Logbook/Portfolio.</li> <li>Acute and Chronic retention of urine:</li> <li>Describe the CF,</li> </ul>	<ul> <li>by Faculty</li> <li>Observe &amp; assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry. Provide feedback</li> <li>Observe and assess the responses.</li> <li>Assess the</li> </ul>
	and chronic retention of urine.	urine-CF, investigation & Management ( <mark>VI-</mark> AN,BI,PA)	<ul> <li>investigations and principles of management of acute and chronic retention of urine.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul><li>Logbook/Portfolio.</li><li>Validate the Logbook entry.</li><li>Provide feedback</li></ul>
64.	SU 29.8: Describe the clinical features, investigations and principles of management of bladder cancer.	CP 64 SU 29.8- Bladder Cancer-CF, investigation & Management (VI- AN,BI,PA)	Bladder Cancer: • Describe the CF, investigations & principles of management of bladder cancer • Document in the Logbook/Portfolio.	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
65.	<b>SU 29.9:</b> Describe the clinical features, investigations and principles of management of disorders of prostate	CP 65 SU 29.9: Prostate Disorders-CF, investigation & Management (VI- AN,BI,PA)	<ul> <li>Prostate Disorder:</li> <li>Describe the CF, investigations &amp; principles of management of disorders of prostate</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
66.	<b>SU 29.10:</b> Demonstrate a digital rectal examination of the prostate in a mannequin or equivalent.	<b>CP 66</b> <b>SU 29.10:</b> Digital rectal examination of the prostate in a mannequin or equivalent	Digitalrectalexamination:• Demonstrateadigitalrectalexaminationof theprostateinamannequinorequivalent.• DocumentintheLogbook/Portfolio.	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
67.	SU 29.11: Describe clinical features, investigations and management of urethral strictures	CP 67 SU 29.11: Urethral Strictures-CF, investigation & Management. (VI- AN,BI,PA)	<ul> <li>Urethral Strictures:</li> <li>Demonstrate a digital rectal exam. of the prostate in a mannequin or equivalent.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
68.	<b>SU 30.1:</b> Describe the clinical features, investigations and principles of management of phimosis, paraphimosis and carcinoma penis.	CP 68 SU 30.1: Phimosis, Paraphimosis and Carcinoma Penis - CF, investigation & Management (VI- AN,BI,PA)	<ul> <li>Phimosis,</li> <li>Paraphimosis And Carcinoma Penis:</li> <li>Describe the CF, investigations and principles of management of -Phimosis,</li> <li>Paraphimosis and -Carcinoma penis.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
69.	SU 30.2: Describe the applied anatomy clinical features, investigations and principles of management of undescended testis. SU 30.3: Describe the applied anatomy clinical features, investigations and principles of management of epidydimoorchitis	CP 69 SU 30.2: Undescended Testis- Document, Elicit History, systematic examination, plan a management	<ul> <li>Undescended Testis:</li> <li>Describe the applied anatomy clinical features, investigations and principles of management of undescended testis.</li> <li>Describe the applied anatomy clinical features, investigations and principles of management of epidydimoorchitis.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
70.	SU 30.4: Describe the applied anatomy clinical features, investigations and principles of management of Varicocele. SU 30.5: Describe the applied anatomy, clinical features, investigations and principles of management of Hydrocele.	CP 70 SU 30.4, 30.5: Hydrocele, Varicocele- Clinical features, Investigations and management.	<ul> <li>Hydrocele, Varicocele:</li> <li>Describe the applied anatomy CF, investigations and principles of management of -Varicocele.</li> <li>Hydrocele</li> <li>Describe classification, clinical features, investigations and principles of management of tumours of testis.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
71.	<b>SU 30.6:</b> Describe classification, clinical features, investigations and principles of management of tumours of testis.	<b>CP 71</b> <b>SU 30.6:</b> Testicular Tumours-CF, Investigations and management.	Testicular Tumours:• Describe the applied anatomyanatomyCF,investigationsandprinciplesofmanagementofTesticular Tumours• DocumentintheLogbook/Portfolio.	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
72.		Ward leavin	g Assessment	



Phase III Part-2 Clinical Posting (2019 Batch)

#### 3. Clinical Posting Classes for Phase-III Part 2 (2019-20 Batch):

#### **Obstetrics & Gynaecology**

Each group is posted for 12 weeks in Obstetrics & Gynaecology from Monday to Saturday (10 am to 1 pm). The students may be posted in rotation in the OPD, Ward, Operation Theatre & Special clinic according to the unit/units in the department. Faculty in charge for teaching, will facilitate the Clinical Posting of students as follows:

Obstetrics & Gynaecology				
Week	Day	Faculty		
	Mon			
Week 1	Tue			
Week 1	Wed	CP Faculty-in-Charge as		
to Week 4	Thurs	decided by the HoD		
WEEK 4	Fri			
	Sat			

Faculty to ensure that the students take proper precautions to prevent Covid-19 as per the periodic government instructions. The following competencies may be imparted to the students posted according to the availability of patients:

S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
1.	OG 5.1: Describe, discuss and identify pre-existing medical disorders and discuss their management; discuss evidence- based intrapartum care.	<b>CP 1</b> <b>OG 5.1:</b> Intrapartum care -identify pre- existing medical disorders and their management.	Intrapartum care: • Describe, discuss and identify pre- existing medical disorders and discuss their management; discuss evidence- based intrapartum care. • Document in the	<ul> <li>Observe&amp; assess the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
2.	OG 5.2: Determine maternal high risk factors and verify immunization status.	<b>CP 2</b> <b>OG5.2:</b> Determine maternal high risk factors and verify immunization status.	Logbook/Portfolio. Maternal high risk factors and verify immunization status: • Determine maternal high risk factors and verify immunization status of a pregnant women. • Document in the Logbook/Portfolio.	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
3.	OG 6.1: Describe, discuss and	<b>CP 3</b> <b>OG 6.1:</b> Pregnancy-	<ul><li>Pregnancy:</li><li>Describe, discuss</li></ul>	• Observe and assess the responses.
	demonstrate the	CF, discuss DD,	and demonstrate	• Assess the
	clinical features of	principles underlying	the clinical features	Logbook/Portfolio.
	pregnancy, derive and	and interpret	of pregnancy,	• Validate the Logbook
	discuss its differential	pregnancy tests.	derive and discuss	entry.
	diagnosis, elaborate		its differential	• Provide feedback
	the principles		diagnosis,	
	underlying and		elaborate the	
	interpret pregnancy		principles	
	tests.		underlying and	
			interpret pregnancy	
			tests.	
			•Document in the	
			Logbook/Portfolio.	
4.	OG 8.2: Elicit	<b>CP 4</b>	Antenatal Care:	• Observe and assess the
	document and present	OG 8.2: ANC-Elicit	•Elicit document	responses.
	an obstetric history	& document, History	and present an	• Assess the
	including menstrual	taking	obstetric history	Logbook/Portfolio.
	history, last menstrual		including	• Validate the Logbook
	period, previous		menstrual history,	entry.
	obstetric history,		last menstrual	• Provide feedback
	comorbid conditions, past medical history		period, previous	
	and surgical history.		obstetric history, comorbid	
	and surgical instory.		conditions, past	
			medical history and	
			surgical history.	
			•Document in the	
			Logbook/Portfolio.	
5.	OG 8.3: Describe,	<b>CP 5</b>	Obstetrical	• Observe and assess the
	demonstrate,	OG 8.3: Obstetrical	Examination:	responses.
	document and	Examination	•Describe, demo,	• Assess the
	perform an obstetrical		document &	Logbook/Portfolio.
	examination including		perform an	• Validate the Logbook
	a general and		obstetrical exam.	entry.
	abdominal		including a general	Provide feedback
	examination and		& abdominal	
	clinical monitoring of		examination &	
	maternal and fetal		clinical monitoring	
	well-being.		of maternal & fetal	
			well-being.	
			•Document in the	
			Logbook/Portfolio.	



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
6.	OG 8.4: Describe and demonstrate clinical monitoring of maternal and fetal well-being.	CP 6 OG 8.4: Monitoring of maternal & fetal well being	Monitoringofmaternal&fetalwell-being:•• Describeanddemonstrateclinical monitoringofmaternalandfetal well-being.• DocumentintheLogbook/Portfolio.	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
7.	OG 8.5: Describe and demonstrate pelvic assessment in a model.	CP 7 OG 8.5: Pelvic assessment in a model.	<ul> <li>Pelvic assessment in a model:</li> <li>Describe and demonstrate pelvic assessment in a model.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
8.	OG 8.6: Assess and counsel a patient in a simulated environment regarding appropriate nutrition in pregnancy.	CP 8 OG 8.6: Nutrition in pregnancy	Nutritioninpregnancy:• Assess and counsela patient in asimulatedenvironmentregardingappropriatenutritioninpregnancy.• Document in theLogbook/Portfolio.	<ul> <li>Observe and assess the responses.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
9.	OG 9.2: Describe the steps & observe/ assist in the performance of an MTP evacuation.	<b>CP 9</b> <b>OG 9.2:</b> MTP ( <mark>▼</mark> - FM)	<ul> <li>MTP evacuation:</li> <li>Enumerate the steps.</li> <li>Observe/assist in the performance of an MTP evacuation.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
10.	OG 9.4: Discuss the clinical features, laboratory investigations, ultrasonography,	CP 10 OG 9.4: Gestational trophoblastic neoplasms:	Gestationaltrophoblasticneoplasms:•ElicitHistory,Abdominal	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	differential diagnosis, principles of management & follow up of gestational trophoblastic neoplasms.	Document Eliciting History, Abdominal examination, plan a management (HI-RD)	examination, plan a management •Document in the Logbook/Portfolio	entry. • Provide feedback
11.	OG 10.1: Define, classify & describe the aetiology, pathogenesis, clinical features, ultrasonography, differential diagnosis & management of antepartum hemorrhage in pregnancy.	CP 11 OG 10.1:Antepartum hemorrhage: Document, Elicit History, Abdominal examination, plan a management	<ul> <li>APH in Pregnancy:</li> <li>Define, classify &amp; describe the aetiology, pathogenesis.</li> <li>Present the case through SNAPPS-discuss CF, USG findings.</li> <li>Discuss the management.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
12.	OG 11.1: Describe the etiopathology, clinical features; diagnosis & investigations, complications, principles of management of multiple pregnancies.	CP 12 OG 11.1: Multiple Pregnancy- Document, Elicit History, Abdominal examination	Multiple pregnancies: • Describe the etiopathology, CF; diagnosis • Enumerate the investigations, complications. • Discuss the management. • Document in the Logbook/Portfolio.	<ul> <li>Observe the response.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
13.	OG 12.1: Define, classify & describe the etiology & pathophysiology, early detection, investigations; principles of management of hypertensive disorders of pregnancy & eclampsia, complications of eclampsia.	CP 13 OG 12.1: Hypertension & Pregnancy- Document, Elicit History, systematic examination, plan a management(VI-IM)	Hypertensive disorders:• Define, classify & describe• Define, classify & describethe etiologyetiologywathophysiology, earlyearlydetection, investigations.• Plan management of hypertensive disorders of pregnancy & eclampsia,	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



RAMA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, HAPUR

S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			<ul> <li>complications of eclampsia.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds</li> </ul>	
14.	OG 12.2: Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of anemia.	CP 14 OG 12.2: Anaemia & Pregnancy- Document, Elicit History, systematic examination, plan a management	<ul> <li>Anaemia &amp;</li> <li>Pregnancy:</li> <li>Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of anemia.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
15.	OG 12.3: Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of diabetes in pregnancy.	CP 15 OG 12.3: Diabetes mellitus & Pregnancy- Document, Elicit History, systematic examination, plan a management	Diabetes mellitus & Pregnancy: • Define, classify and describe the etiology, pathophysiology, diagnosis, investigations, criteria, adverse effects on the mother and foetus and the management during pregnancy and labor, and complications of diabetes in pregnancy.	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



RAMA MEDICAL COLLEGE HOSPITAL & RESEARCH CENTRE, HAPUR

S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
16.	OG 12.4: Define, classify & describe the etiology, pathophysiology, diagnosis, investigations, and criteria, adverse effects on the mother & foetus & the management during pregnancy & labor, & complications of heart diseases in pregnancy.	CP 16 OG 12.4: Heart Diseases in Pregnancy: Document, Elicit History, systematic examination, plan a management(VI-IM)	<ul> <li>Plan management of DM during pregnancy &amp; labour.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds</li> <li>Heart diseases in pregnancy:</li> <li>Define, classify &amp; describe the etiology, pathophysiology, diagnosis, investigations.</li> <li>Criteria, adverse effects on the mother &amp; foetus.</li> <li>Plan mgt. during pregnancy &amp; labor.</li> <li>Plan mgt. of complications of heart diseases in pregnancy.</li> <li>Document in the</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
17.	OG 12.5: Describe the clinical features, detection, and effect of pregnancy on the disease and impact of the disease on pregnancy complications and management of urinary tract infections in pregnancy.	CP 17 OG 12.5: UTI In Pregnancy	Logbook/Portfolio. UTI in pregnancy: • Describe the CF, of UTI during pregnancy. • Discuss the complications & mgt. of UTI in pregnancy. • Plan mgt. during pregnancy & labor. • Plan management of complications of heart diseases in pregnancy. • Document in the Logbook/Portfolio.	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
18.	OG 12.6: Describe the clinical features,	<b>CP 18</b> <b>OG 12.6:</b> Liver	Liver Disease in Pregnancy:	• Observe the response; Viva.
	detection, and effect of pregnancy on the	Disease in Pregnancy:	•Elicit History & describe CF.	• Assess the Logbook/Portfolio.
	disease & impact of the disease on	Document, Elicit History, systematic	•Do a systematic	• Validate the Logbook
	pregnancy	examination, plan a	examination. ●Plan mgt. during	entry. • Provide feedback
	complications & management of liver	management(VI-IM)	pregnancy & labor.	
	disease in pregnancy.		•Document in the Logbook/Portfolio'	
19.	OG 12.7: Describe	<b>CP 19</b>	HIV in Pregnancy:	• Observe the response;
	and discuss screening, risk factors,	OG 12.7: Management of	•Describe and discuss screening,	Viva. • Assess the
	management of	mother and newborn	risk factors,	Logbook/Portfolio.
	mother and newborn with HIV.	with HIV	management of mother and	• Validate the Logbook
	whith the v.		newborn with HIV.	<ul><li>entry.</li><li>Provide feedback</li></ul>
			•Plan management	
			during pregnancy & labor.	
			•Document in the	
- 20	00 10 p 1		Logbook/Portfolio'	
20.	OG 12.8: Describe the mechanism,	CP 20 OG 12.8:	Isoimmunization in <b>Pregnancy:</b>	• Observe the response; Viva.
	prophylaxis, fetal	Isoimmunization in	•Describe the	• Assess the
	complications,	Pregnancy.	mechanism,	Logbook/Portfolio.
	diagnosis and management of		prophylaxis, fetal complications,	• Validate the Logbook entry.
	isoimmunization in		diagnosis & mgt.	• Provide feedback
	pregnancy.		of isoimmunization	
			in pregnancy. ●Plan management	
			during pregnancy & labor.	
			•Document in the Logbook/Portfolio'	
21.	OG 13.2: Define,	CP 21	Preterm labor,	• Observe the response;
	describe the causes, pathophysiology,	OG 13.2: Preterm labor, PROM and	PROM and postdated	Viva. • Assess the
	diagnosis,	postdated pregnancy-	pregnancy:	Logbook/Portfolio.
	investigations and	Diagnosis &	•Define, describe	• Validate the Logbook
	management of preterm labor, PROM	management.	the causes, pathophysiology,	entry. • Provide feedback
	and postdated		diagnosis,	- I TO VIGE TEEDUCK



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	pregnancy.		<ul> <li>investigations and management of preterm labor, PROM &amp;postdated pregnancy.</li> <li>Plan management during pregnancy &amp; labor.</li> <li>Document in the Logbook/Portfolio'</li> </ul>	
22.	OG 13.3: Observe/	CP 22	Artificial rupture	• Observe the performance;
	assist in the	OG13.3:Performance	of membranes:	Viva
	performance of an	of an artificial rupture	•Observe/ Assist in	• Assess the
	artificial rupture of	of membranes	the performance of	Logbook/Portfolio.
	membranes.		AROM.	• Validate the Logbook
			•Document in the	entry.
23.	OG 13.5: Observe	CP 23	Logbook/Portfolio. Normal vaginal	Provide feedback
23.	and assist the conduct	OG 13.5: Normal	Normal vaginal delivery: Observe:	• Observe the performance; Viva
	of a normal vaginal	vaginal delivery:	•Observe and assist	• Assess the
	delivery.	Observe.	the conduct of a	Logbook/Portfolio.
			normal vaginal delivery.	• Validate the Logbook entry.
			•Document in the Logbook/Portfolio.	Provide feedback
24.	OG 14.3: Describe	<b>CP 24</b>	<b>Rupture uterus:</b>	• Observe the performance;
	and discuss rupture	OG 14.3: Rupture	•Describe and	Viva
	uterus, causes, diagnosis and	uterus- causes, diagnosis and	discuss rupture	• Assess the
	management.	management.	uterus, causes, diagnosis and	Logbook/Portfolio. • Validate the Logbook
	management	managementi	management.	• Validate the Logbook entry.
			•Document in the	Provide feedback
			Logbook/Portfolio.	
25.	OG 14.4: Describe	CP 25	Abnormal labor:	• Observe & assess the
	and discuss the	OG 14.4: Abnormal	•Describe and	response; Viva
	classification;	labor: Classification, diagnosis &	discuss rupture	• Assess the
	diagnosis; management of	management.	uterus, causes, diagnosis & mgt.	Logbook/Portfolio.
	abnormal labor	management.	•Document in the	• Validate the Logbook entry.
			Logbook/Portfolio.	• Provide feedback
26.	OG 15.2: Observe	CP 26	Episiotomy;	• Observe the performance;
	and assist in the	OG 15.2: Episiotomy	Observe CS,	Viva
	performance of an	and Observe/Assist in	Forceps, Vacuum	• Assess the



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
S.No.	Competencyepisiotomyand demonstratedemonstratethe correctcorrectsuturing techniquetechniqueof 	Clinical Posting operative obstetrics cases including - CS, Forceps, vacuum extraction, and breech delivery CP 27 OG 16.1:Postpartum Hemorrhage	extraction&Breech Delivery:• Observe & assist an episiotomy.• Demonstrate• Demonstratethe correctsuturing techniquetechniqueofan episiotomyepisiotomyin a simulated environment.• Observe/Assistin operative obstetrics casescasesin CS, Forceps, Vacuum extractionextraction& Breech Delivery.• DocumentIn the Logbook/Portfolio.Postpartum Haemorrhage:• Enumerate• Enumeratethe causes of PPH.• Discuss causes, prevention, diagnosis, management, appropriateuse of blood& blood	<ul> <li>Formative Assessment by Faculty <ul> <li>Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul> </li> <li>Observe &amp; assess the response; Viva <ul> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul> </li> </ul>
28.	OG 16.2: Describe and discuss uterine inversion – causes, prevention, diagnosis and management.	CP 28 OG 16.2: Uterine Inversion.	<ul> <li>products in PPH.</li> <li>Plan management during pregnancy &amp; labor.</li> <li>Document in the Logbook/Portfolio.</li> <li>Uterine Inversion:</li> <li>Enumerate causes of uterine inversion.</li> <li>Describe and discuss prevention &amp; diagnosis Uterine Inversion.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			during pregnancy & labor. •Document in the Logbook/Portfolio.	
29.	OG 16.3: Describe and discuss causes, clinical features, diagnosis, investigations; monitoring of fetal well-being, including ultrasound and fetal Doppler; principles of management; prevention and counseling in intrauterine growth retardation.	CP 29 OG 16.3: IUGR- Diagnosis, Prevention & Management.	<ul> <li>IUGR:</li> <li>Enumerate causes of IUGR.</li> <li>Describe CF, diagnosis, investigation, prevention of IUGR.</li> <li>Monitoring of well-being, including ultrasound and fetal Doppler</li> <li>Counseling in IUGR.</li> <li>Plan management during pregnancy &amp; labor.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
30.	OG 19.1: Describe and discuss the physiology of puerperium, its complications, diagnosis & management; counseling for contraception, puerperal sterilization.	CP 30 OG 19.1: Counseling for contraception in a simulated environment.	Puerperium&CounselingforContraception:•• Describeanddiscussthephysiologyofpuerperium,itscomplications,diagnosisdiagnosis&management.•• Counselingforcontraception,puerperalsterilization.•• Plan PP IUCD afterlabor.• Document in theLogbook/Portfolio.	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
31.	OG 21.1: Describe and discuss the temporary and permanent methods of contraception, indications, technique and complications; selection of patients, side effects and failure rate including OCs, male contraception, emergency contraception and IUCD	CP 31 OG 21.1: Contraceptive Methods & their indications, contraindications & complications.	ContraceptionMethods:• Describeanddiscussthetemporaryandpermanent methodsof contraception.• Indications,techniqueandcomplications;selectionofpatients,sideeffectsand failurerateincluding OCs,malecontraception,emergencycontraception andIUCDPlan PP IUCD afterlabor.• Document in theLogbook/Portfolio.	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
32.	OG 22.2: Describe & discuss the etiology (with special emphasis on Candida, T. vaginalis, bacterial vaginosis), characteristics, clinical diagnosis, investigations, genital hygiene, management of common causes and the Syndromic management.	CP 32 OG 22.2: Vaginal Discharge- Causes, Diagnosis, Prevention & Syndromic management.	<ul> <li>Vaginal Discharge:</li> <li>Enumerate the various causes of vaginal discharge.</li> <li>Characteristic of each cause to make a clinical diagnosis, choose an appropriate investigation.</li> <li>Plan treatment as per the Syndromic management.</li> <li>Counsel for genital hygiene &amp; preventive measures.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
33.	OG 23.1: Describe and discuss the physiology of puberty, features of abnormal puberty, common problems and their management	CP 33 OG 23.1: Puberty- Physiology & common problems and their management	<ul> <li>Puberty:</li> <li>Describe and discuss the physiology of puberty.</li> <li>Discuss features of abnormal puberty, common problems and their management.</li> <li>Counsel about abnormal puberty, common problems during Puberty.</li> <li>Document in the log of the second second</li></ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
34.	OG 24.1: Define, classify & discuss abnormal uterine bleeding, its aetiology, clinical features, investigations, diagnosis & management.	<b>CP 34</b> <b>OG 24.1:</b> Abnormal uterine bleeding: Document, Elicit History, systematic examination, plan a management.	Logbook/Portfolio. Abnormal uterine bleeding: • Elicit History, do a systematic examination. • Describe the clinical features, investigations to confirm a diagnosis • Plan a management. • Document in the Logbook/Portfolio.	<ul> <li>Observe the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
35.	OG 28.1: Describe and discuss the common causes, pathogenesis, clinical features, differential diagnosis; investigations; principles of management of infertility – methods of tubal patency, ovulation induction, and assisted reproductive techniques.	<b>CP 35</b> <b>OG 28.1:</b> Infertility- Document, Elicit History, systematic examination, plan a management	Infertility:•Enumeratediscussthecommoncauses,pathogenesis&clinical features.•Generate a DD.•Enlistinvestigationstosupportyourdiagnosis.•Discusstheprinciplesofmanagementofinfertility.	<ul> <li>Observe the response; Viva</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			•Discuss & describe	
			– methods of tubal	
			patency, ovulation	
			induction, assisted	
			reproductive	
			•Prepare a	
			Treatment Plan.	
			•Document in the	
			Logbook/Portfolio.	
36.	OG 28.2: Enumerate	CP 36	Restoration of	• Observe the response;
	the assessment and	OG 28.2: Enumerate	tubal latency:	Viva
	restoration of tubal	the assessment and	•Enumerate &	• Assess the
	latency	restoration of tubal	discuss the	Logbook/Portfolio.
	-	latency.	common causes,	• Validate the Logbook
			pathogenesis &	entry.
			clinical features.	Provide feedback
			•Generate a DD.	
			●Enlist	
			investigations to	
			support your	
			diagnosis.	
			•Discuss the	
			principles of	
			management of	
			infertility.	
			•Discuss & describe	
			– methods of tubal	
			patency, ovulation	
			induction, assisted	
			reproductive	
			•Prepare a	
			Treatment Plan.	
			•Document in the	
			Logbook/Portfolio.	
37.	OG 28.3:Describe the	CP 37	Ovulation	• Observe the response;
<i></i>	principles of	OG 28.3: Ovulation	induction:	Viva
	ovulation induction	induction	•Enumerate &	• Assess the
			discuss the	Logbook/Portfolio.
			indications for	• Validate the Logbook
			Ovulation	entry.
			Induction.	• Provide feedback
			•Enumerate the	
			methods of	
			Ovulation	



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			Induction. • Prepare a Treatment Plan. • Document in the Logbook/Portfolio.	
38.	OG 29.1: Describe & discuss the etiology; pathology; clinical features; differential diagnosis; investigations; principles of management, complications of fibroid uterus.	<b>CP 38</b> <b>OG 29.1:</b> Fibroid uterus- Document, Elicit History, systematic examination, plan a management	<ul> <li>Fibroid uterus:</li> <li>Elicit History, do a systematic examination.</li> <li>Discuss the etiopathogenesis, CF; investigation &amp; DD.</li> <li>Identify complications.</li> <li>Plan a mgt.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
39.	OG 31.1: Describe and discuss the etiology, classification, clinical features, diagnosis, investigations, and principles of management and preventive aspects of prolapse of uterus.	CP 39 OG 31.1: Prolapse of uterus-CF, investigation & management.	<ul> <li>Prolapse Uterus:</li> <li>Describe &amp; discuss the etiology &amp; classify Prolapse Uterus.</li> <li>Describe the CF appropriate investigations to support the diagnose prolapse uterus.</li> <li>Discuss the principles &amp; preventive aspects of prolapse of uterus.</li> <li>Prepare a treatment plan to manage Prolapse Uterus.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
40.	OG 32.1: Describe and discuss the physiology of menopause, symptoms, prevention, management and the role of hormone replacement therapy.	CP 40 OG 32.1: Menopause& its management	<ul> <li>Menopause:</li> <li>Describe and discuss the physiology, symptoms of menopause.</li> <li>Enlist the, prevention strategies &amp; discuss the mgt.</li> <li>Discuss the mgt.</li> <li>Discuss the indications &amp; contraindications &amp; contraindications of HRT.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
41.	OG 32.2: Post- menopausal bleeding- Document, Elicit History, systematic examination, plan a management	CP 41 OG 32.2: Postmenopausal bleeding& its management	<ul> <li>Postmenopausal bleeding:</li> <li>Elicit History, systematic examination of postmenopausal bleeding.</li> <li>Prepare a treatment plan a mgt.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
42.	OG 33.1: Classify, describe & discuss the etiology, pathology, clinical features, differential diagnosis, investigations & staging of cervical cancer	CP 42 OG 33.1: Cancer cervix- Document, Elicit History, systematic examination, plan a management	Cervical Cancer: • Classification & Staging. • Discuss the etiopathogenesis, CF, investigation & DD. • Enumerate the investigations. • Plan a mgt. • Document in the Logbook/Portfolio. • Present during rounds.	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



managementPre- including surgery and radiotherapyPre- a	CP 43 G 33.2: Benign, e-malignant (CIN) and Malignant ions of the Cervix it's management	Benign,Pre-malignant(CIN)andMalignantLesionsoftheCervix:••Discusstheetiopathogenesis,	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> </ul>
		<ul> <li>CF; investigations to diagnose Benign, Premalignant (CIN) and Malignant Lesions of the Cervix.</li> <li>Prepare a Treatment plan &amp; management for each of the above stages.</li> <li>Document in the Logbook/Portfolio.</li> <li>Present during rounds.</li> </ul>	• Provide feedback
prevent cancer of me cervix including cancer	<b>CP 44</b> <b>G 33.4:</b> Screening ethods to prevent cer of cervix VIA, LI, pap smear and colposcopy	<ul> <li>Screening methods to prevent Cancer Cervix:</li> <li>Enumerate the methods to prevent Ca Cervix.</li> <li>Discuss the requirement of VIA, VILI, Pap smear &amp; colposcopy &amp; describe each of them.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
clinical features, D differential diagnosis, His	<b>CP 45</b> <b>OG 34.1:</b> dometrial cancer- ocument, Elicit story, systematic amination, plan a	Endometrial cancer: • Discuss the etiopathogenesis, CF; Staging,	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	laparotomy & principles of management of endometrial cancer	management.	<ul> <li>DD.</li> <li>Enumerate the investigations.</li> <li>Plan a mgt.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	• Provide feedback
46.	OG 35.1: Obtain a logical sequence of history, and perform a humane and thorough clinical examination, excluding internal examinations (per- rectal and per- vaginal)	<b>CP 46</b> <b>OG 35.1:</b> Obtain a logical sequence of history, and perform a humane and thorough clinical examination, excluding internal examinations (per- rectal and per- vaginal)	<ul> <li>History Taking &amp; Examination in a Gynecological Patient:</li> <li>Obtain a logical sequence of history taking.</li> <li>Perform a humane and thorough clinical examination, excluding internal examinations (perrectal and pervaginal).</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
47.	OG 35.2: Arrive at a logical provisional diagnosis after examination.	CP 47 OG 35.2: Arrive at a logical provisional diagnosis after examination.	<ul> <li>Provisional</li> <li>Diagnosis:</li> <li>Arrive at a logical provisional diagnosis after examination.</li> <li>Enumerate the DD as per the findings.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
48.	OG 35.3: Recognize situations, which call for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients after giving first aid or emergency treatment.	CP 48 OG 35.3: Referral Services for urgent or early treatment at secondary and tertiary centres and make a prompt referral of such patients.	EmergencyTreatment&Referral Services:• Enlistconditionswhichrequireurgentorearlytreatmentatsecondaryandtertiary centres.• Discusstheplanforfirstaidor	<ul> <li>Observe &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			<ul> <li>emergency treatment.</li> <li>Discuss how to make a prompt referral of such patients.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
49.	OG 35.4:Demonstrate interpersonal & communication skills befitting a physician in order to discuss illness and its outcome with patient and family	CP 49 OG 35.4: Interpersonal & communication skills to discuss illness and its outcome with patient and family	Interpersonal and communication skills: • Demonstrate interpersonal and communication skills in a simulating environment to discuss illness and its outcome with patient and family. • Document in the Logbook/Portfolio.	<ul> <li>Observe &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
50.	OG 35.6:Demonstrate ethical behavior in all aspects of medical practice.	CP 50 OG 35.6: Demonstrate ethical behavior in all aspects of medical practice.	<ul> <li>Ethical aspects in Medical Practice:</li> <li>Demonstrate ethical behavior in all aspects of medical practice.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
51.	OG 35.7: Obtain informed consent for any examination / procedure.	CP 51 OG 35.7: Informed consent.	<ul> <li>Informed consent:</li> <li>Obtain informed consent for any examination / procedure from a patient or in a simulated environment</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
52.	OG 35.8: Write a complete case record with all necessary details	<b>CP 52</b> <b>OG 35.8:</b> Write a complete case record	<ul><li>Writing a complete</li><li>case record:</li><li>Write a complete</li><li>case record with all</li></ul>	<ul> <li>Observe &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			necessary details about problem based patient in a simulated environment • Document in the Logbook/Portfolio.	<ul><li>Validate the Logbook entry.</li><li>Provide feedback</li></ul>
53.	OG 35.9: Write a proper discharge summary with all relevant information	CP 53 OG 35.9: Write a discharge summary.	WritingaDischargeSummary:•Writeaorperdischargesummarywithallrelevantinformation.•DocumentintheLogbook/Portfolio.	<ul> <li>Observe &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
54.	<b>OG 35.10:</b> Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details.	<b>CP 54</b> <b>OG 35.10:</b> Writing a Referral Note	<ul> <li>Writing a Referral Note:</li> <li>Write a proper referral note to secondary or tertiary centres or to other physicians with all necessary details.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
55.	OG 35.15: Demonstrate the correct technique to insert & remove an IUD in a simulated/ supervised environment	CP 55 OG 35.15: IUD – insertion & removal	<ul> <li>IUD -insertion &amp; removal:</li> <li>Demonstrate the correct technique to insert an IUD in a simulated/ supervised environment.</li> <li>Demonstrate the correct technique to remove an IUD in a simulated/ supervised environment</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
56.	OG 35.16:Emergency mgt. of APH & PPH in a simulated / guided environment.	CP 56 OG 35.16: Emergency mgt. of APH & PPH in a simulated / guided environment	Emergency management of APH & PPH: • Demonstrate the correct technique to insert an IUD in a simulated/ supervised environment. • Demonstrate the correct technique to remove an IUD in a simulated/ supervised environment • Document in the	<ul> <li>Observe the performance &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
57.	OG 36.1: Plan and institute a line of treatment, which is need based, cost effective and appropriate for common conditions taking into consideration (a) Patient (b) Disease (c) Socio- economic status (d) Institution/ Governmental guidelines.	CP 57 OG 36.1: Need based, cost effective and appropriate Treatment Plan for common conditions.	Logbook/Portfolio. Need based, cost effective and appropriate Treatment Plan for common conditions: • Discuss need based, cost effective and appropriate plan of treatment for common conditions considering patient condition, disease, Socio-economic status and as per Institution/ Governmental guidelines. • Document in the Logbook/Portfolio	<ul> <li>Observe the performance &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
58.	OG 36.2 : Organize antenatal, postnatal, well-baby and family welfare clinics	<b>CP 58</b> <b>OG 36.2:</b> Organize a antenatal, postnatal, well-baby and family welfare clinics	Logbook/Portfolio.Organizeaantenatal,well-postnatal,well-babyandfamilywelfare clinics:&•Enumerate&	<ul> <li>Observe the performance &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
			<ul> <li>discuss the plan to organize a antenatal, postnatal clinic in reality/in simulated environment.</li> <li>Enumerate &amp; discuss the plan to organize a well- baby and family welfare clinics in reality/in simulated environment.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	entry. • Provide feedback
59.	OG 36.3: Demonstrate the correct technique of punch biopsy of uterus in a simulated/ supervised environment	CP 59 OG 36.3: Punch biopsy of uterus.	<ul> <li>Punch biopsy of uterus:</li> <li>Demonstrate the correct technique of punch biopsy of uterus in a simulated/ supervised environment</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance &amp; assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
60.	<b>OG 37.1:</b> Observe and assist in the performance of a Caesarean section.	<b>CP 60</b> <b>OG 37.1:</b> Observe a Caesarean section	ObserveaCaesarean section:• ObservetheperformanceofaCaesarean section.• DocumentintheLogbook/Portfolio.	<ul> <li>Assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
61.	OG 37.3: Observe and assist in the performance of Hysterectomy – abdominal/vaginal.	CP 61 OG 37.3:Observe an Abdominal Hysterectomy	ObserveanAbdominal/VaginalHysterectomy:• ObservetheperformanceofHysterectomy-abdominal/vaginal.• DocumentintheLogbook/Portfolio.	<ul> <li>Assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
62.	OG 37.2: Observe & assist in the performance of Laparotomy	CP 62 OG 37.2: Observe & assist in the performance of Laparotomy	<ul> <li>Laparotomy:</li> <li>Observe &amp; assist in the performance of Laparotomy.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
63.	OG 37.4: Observe and assist in the performance of Dilatation & Curettage (D&C)	<b>CP 63</b> <b>OG 37.4:</b> Observe and assist in the performance of Dilatation & Curettage (D&C)	<ul> <li>D&amp;C:</li> <li>Observe and assist in the performance of Dilatation &amp; Curettage (D&amp;C)</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
64.	OG 37.5: Observe and assist in the performance of Endometrial aspiration - endocervical curettage (EA-ECC)	CP 64 OG 37.5: Endometrial aspiration: endocervical curettage (EA-ECC)	Endometrial aspiration - endocervical curettage (EA- ECC): •Observe & assist in the performance of Endometrial aspiration - endocervical curettage •Document in the Logbook/Portfolio.	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
65.	OG 37.6: Observe & assist in the performance of outlet forceps application of vacuum & breech delivery.	CP 65 OG 37.6: Observe & assist in the performance of outlet forceps application	Outletforcepsapplication:• Observe & assist in the performance of Outlet application.• Document in the Logbook/Portfolio.	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
66.	OG 37.6: Observe & assist in the performance of outlet forceps application of vacuum & breech delivery	CP 66 OG 37.6: Observe & assist in the performance of breech delivery	<ul> <li>Breech delivery:</li> <li>Observe &amp; assist in the performance of Breech delivery.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry. Provide feedback</li> </ul>



67.	OG 37.6: Observe & assist in the performance of outlet forceps application of vacuum & breech	CP 67 OG 37.6: Observe & assist in the	Application of vacuum:	• Observe the performance;
	delivery	performance of application of vacuum	<ul> <li>Observe &amp; assist in the performance of Application of vacuum.</li> <li>Document in the</li> </ul>	<ul> <li>Viva.</li> <li>Assess the Logbook /Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
68.	<b>OG 37.7:</b> Observe and assist in the performance of MTP in the first trimester and evacuation in incomplete abortion	CP 68 OG 37.7: MTP	Logbook/Portfolio. <b>MTP:</b> • Observe & assist in the performance of MTP in the 1 <sup>st</sup> trim.& evacuation in incomplete abortion • Document in the Logbook/Portfolio.	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook /Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
69.	OG 38.1: Laparoscopy OG 38.2: Hysteroscopy.	<b>CP 69</b> <b>OG 38.1, 38.2:</b> Laparoscopy & Hysteroscopy	Laparoscopy:•ObserveaLaparoscopy.•ObserveaHysteroscopy.•Document in theLogbook/Portfolio.	<ul> <li>Observe the performance; Viva.</li> <li>Assess the Logbook /Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
70.	OG 38.3: Lap sterilization.	CP70 OG 38.3: Lap sterilization	Lap Sterilization. • Observe Lap sterilization. • Document in the Logbook/Portfolio.	<ul> <li>Assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
71.	OG 38.4: Assess the need for and issue proper medical certificates to patients for various purposes	<b>CP 71</b> <b>OG 38.4:</b> Issuing Medical certificates.	<ul> <li>Issuing Medical certificates:</li> <li>Enumerate condition to issue a medical certificate.</li> <li>Write a draft medical certificate to patients for various purposes.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Assess the response; Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



4. Clinical Posting Classes for Phase-III Part 2 (2019-20 Batch): Paediatrics Each group is posted for 4 weeks in Paediatrics, from Monday to Saturday (10 am to 1 pm). The students may be posted in rotation in the OPD, Ward & Special clinic according to the unit/units in the department. Faculty in charge for teaching will facilitate the Clinical Posting of students as follows:

Paediatrics				
Week	Day	Faculty		
	Mon			
Weels 1	Tue			
Week 1	Wed	Faculty-in-Charge as decided		
to Week 4	Thurs	by the HoD		
WEEK 4	Fri			
	Sat			

Faculty to ensure that the students take proper precautions to prevent Covid-19 as per the periodic government instructions. The following competencies may be imparted to the students posted according to the availability of patients:

S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
1.	<ul> <li>PE2.1: Discuss the etiopathogenesis, clinical features and management of a child who fails to thrive.</li> <li>PE 2.2: Assessment of a child with failing to thrive including eliciting an appropriate history and examination.</li> <li>PE 2.3: Counseling a parent with failing to thrive child.</li> <li>PE 2.4: Discuss the etiopathogenesis, clinical features and management of a child with short stature.</li> <li>PE 2.5: Assessment of a child with short stature: Elicit history, perform examination, document and present.</li> </ul>	CP 1 PE 2.1-2.5: FTT Short Stature	<ul> <li>Approach to a case of FTT Short Stature:</li> <li>Discuss the etiopathogenesis, CF &amp; management of a child who FTT.</li> <li>Perform Developmental assessment &amp; interpret the findings.</li> <li>Counsel care taker/parent of FTT child.</li> <li>Discuss the causes, CF &amp; management of Short Stature.</li> <li>Assess a child with Short Stature - Elicit history, perform general &amp; systematic examination.</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



of a child with <b>PE 3.3-3.5,3.8:</b>	Approach to a case of	
(DD - Elicit document & present history PE 3.4: Counsel a parent of a child with developmental delay. PE 3.5: Discuss the role of the child developmental unit in mgt of DD PE 3.8: Discuss the etiopathogenesis, clinical presentation & multi- disciplinary approach in the mgt. of Cerebral palsy.Cerebral Palsy3.PE 6.7: Describe the common mental health problems during adolescence. PE 6.8: Respecting patient privacy & maintaining confidentiality while dealing with adolescence.CP 3 PE 6.7: 6.9, 6.11: Adolescent HealthPE 6.9: Perform routine Adolescent Health checkup including eliciting history, performing exam. including SMR (Sexual Maturity Rating), growth assessments (using Growth charts) & systemic exam including thyroid & Breast exam & the ULADESCP 3 PE 6.9: Perform routine Adolescent Health checkup including SMR (Sexual Maturity Rating), growth assessments (using Growth charts) & systemic exam including thyroid & Breast exam & the ULADES	<ul> <li>Approach to a case of Developmental Delay; Cerebral Palsy:</li> <li>Assess of a child with developmental delay - Elicit document &amp; present history.</li> <li>Counsel parent/care taker of a child with DD.</li> <li>Discuss the approach to a child with DD.</li> <li>Discuss the causes, CF &amp; multi- disciplinary approach in the mgt. of Cerebral palsy.</li> <li>Document in the Logbook/Portfolio.</li> <li>Adolescent Health:</li> <li>Enumerate the common mental health problems during adolescence.</li> <li>Perform routine Adolescent Health checkup &amp; elicit history while respecting patient privacy &amp; maintaining confidentiality.</li> <li>Perform exam. including SMR growth assessments (using Growth charts) &amp; systemic exam including thyroid &amp; Breast exam &amp; the HEADSS screening</li> <li>Visit to the Adolescent Clinic- Enlist supporting health programmes. Support provided in the clinic.</li> <li>Document in the clinic.</li> </ul>	<ul> <li>by Faculty</li> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul> • Observe & assess the response & performance. <ul> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
4.	PE 8.4: Elicit history on the Complementary Feeding habits. PE 8.5: Counsel and educate mothers on the best practices in Complimentary Feeding. PE 9.4: Elicit document and present an appropriate nutritional history and perform a dietary recall PA 9.5: Calculate the age related calorie requirement in Health and Disease and identify gap PE 9.6: Assess and classify the nutrition status of infants, children and adolescents and recognize deviations PE 9.7: Plan an appropriate diet in	CP 4 PE 8.4, 8.5,9.4-9.7: Complimentary Feeding ,Nutritional Calorie Requirement in Health & Disease	<ul> <li>Activity by feather</li> <li>Complimentary Feeding:</li> <li>Elicit History of Complementary Feeding.</li> <li>Elicit a nutritional history &amp; perform a dietary recall.</li> <li>Calculate the age related calorie requirement &amp; identify the gaps.</li> <li>Assess and classify the nutrition status of infants/ children/ adolescents and recognize deviations.</li> <li>Counsel and educate the care taker.</li> <li>Prepare a diet plan.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>by Faculty</li> <li>Observe Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
5.	health and disease. <b>PE 10.3:</b> Assessment of a patient with SAM and MAM, diagnosis, classification and planning management including hospital and community based intervention, rehabilitation and prevention <b>PE 10.4:</b> Identify children with under nutrition as per IMNCI criteria and plan referral.	CP 5 PE 10.3-10.5: SAM & MAM	<ul> <li>SAM AND MAM:</li> <li>Perform an assessment of a child with SAM and MAM, diagnosis, classify.</li> <li>Prepare a Treatment plan involving the hospital and community based intervention, rehabilitation and prevention</li> <li>Identify under nutrition children as per IMNCI criteria &amp; plan referral.</li> </ul>	<ul> <li>Observe Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	<b>PE 10.5:</b> Counsel parents of children with SAM and MAM		<ul> <li>Counsel parents of children with SAM and MAM</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
6.	PE 11.3:Assessment of a child with obesity with regard to eliciting history including physical activity, charting and dietary recall PE 11.4: Examination including calculation of BMI, measurement of waist hip ratio, identifying external markers like acanthosis, striae, pseudogynaecomastia etc. PE 11.5: Calculate BMI, document in BMI chart and interpret.	CP 6 PE 11.3 -11.5: Obesity	<ul> <li>Obesity:</li> <li>Perform an assessment of a child with obesity-Elicit history including physical activity, charting&amp;dietary recall.</li> <li>Calculate BMI, measure waist hip ratio, identify external markers like acanthosis, striae, pseudogynaecomastia etc.</li> <li>Interpret the results and prepare a Treatment plan</li> <li>Counsel parents of children with obesity.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
7.	PE 15.1: Discuss the fluid and electrolyte requirement in health and disease PE 15.2: Discuss the clinical features and complications of fluid and electrolyte imbalance and outline the management. PE 15.3: Calculate the fluid and electrolyte requirement in health PE 15.4: Interpret electrolyte report. PE 15.5: Calculate fluid and electrolyte imbalance	CP 7 PE 15.3-15.7: Fluid and electrolyte requirement	<ul> <li>Fluid and electrolyte requirement:</li> <li>Discuss the fluid &amp; electrolyte requirement in health and disease</li> <li>Calculate the fluid and electrolyte imbalance &amp; interpret electrolyte report</li> <li>Discuss the CF and complications of fluid and electrolyte imbalance and outline the management</li> <li>Demonstrate the steps of inserting an IV cannula in a model</li> <li>Demonstrate the steps of inserting an inserting an IV cannula in a model</li> </ul>	<ul> <li>Observe Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
8.	PE 15.6: Demonstrate the steps of inserting an IV cannula in a model PE 15.7: Demonstrate the steps of inserting an interosseous line in a mannequin PE 19.7: Educate and counsel a patient for immunization. PE 19.10: Observe the handling and storing of vaccines. PE 19.11: Document Immunization record PE 19.12: Observe the administration of UIP vaccines PE 19.13: Demon. the correct adm. of different vaccines in a mannequin PE 19.14: Practice Infection control	CP 8 PE 19.7,19.10-19.14: Immunization	<ul> <li>interosseous line in a mannequin</li> <li>Document in the Logbook/Portfolio.</li> <li>Immunization: <ul> <li>Educate &amp; counsel a parent for Immun.</li> <li>Observe the handling &amp; storing of vaccines.</li> <li>Document Immun. in an immunization record</li> <li>Observe the adm. of UIP vaccines</li> <li>Demonstrate the correct administration of different vaccines in a mannequin.</li> <li>Practice Infection control measures &amp; appropriate handling of the sharps</li> </ul> </li> </ul>	<ul> <li>Observe Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>
	measures & app. handling of the sharps		• Document in the Logbook/Portfolio.	
9.	<ul> <li>PE 20.3: Perform Neonatal resuscitation in a manikin</li> <li>PE 20.18: Identify and stratify risk in a sick neonate using IMNCI guidelines</li> </ul>	CP 9 PE 20.3, 20.18: Neonatal Resuscitation & Sick Neonate	<ul> <li>Neonatal Resuscitation &amp; Sick Neonate:</li> <li>Perform Neonatal resuscitation in a manikin.</li> <li>Identify &amp; stratify risk in a sick neonate using IMNCI guidelines</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
10.	<ul> <li>PE 21.8: Elicit, document: and present a history pertaining to diseases of the Genitourinary tract.</li> <li>PE 21.9: Identify external markers for Kidney disease, like Failing to thrive, hypertension, pallor, icthyosis, and anasarca.</li> <li>PE 21.10: Analyze symptom and interpret the physical findings and arrive at an appropriate provisional // differential diagnosis</li> <li>PE 21.11: Perform and interpret the common analytes in a Urine examination</li> <li>PE 21.12: Interpret report of Plain X Ray of KUB</li> <li>PE 21.13: Enumerate the indications for and Interpret the written report of Ultra sonogram of KUB.</li> <li>PE 21.15: Discuss and enumerate the referral criteria for children with genitourinary disorder.</li> </ul>	CP 10 PE 21.8-21.13,21.15, 21.16: Genitourinary System	<ul> <li>Genitourinary System:</li> <li>Elicit history pertaining to diseases of the Genitourinary tract</li> <li>Enumerate external markers for Kidney disease, like Failing to thrive, HT, pallor, Icthyosis, anasarca</li> <li>Generate a DD analyzing symptom and interpreting the physical findings.</li> <li>Perform and interpret the Urine examination, Plain X Ray of KUB, Ultra sonogram of KUB</li> <li>Discuss and enumerate the referral criteria for children with genitourinary disorder.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
1         1 <td< td=""><td>PE 22.1: Enumerate the common Rheumatological problems in children. Discuss the clinical approach to recognition and referral of a child with Rheumatological problem. PE 22.2: Counsel a patient with Chronic illness PE 23.7: PE 23.7: Elicit appropriate history for a cardiac disease, analyse the symptoms e.g. breathlessness, chest pain, tachycardia, feeding difficulty, failing to thrive, reduced urinary output, swelling, syncope, cyanotic spells, Suck rest cycle, frontal swelling in infants. Document and present. PE 23.8: Identify external markers of a cardiac disease e.g. Cyanosis, Clubbing, dependent edema, dental caries, arthritis, erythema rash, chorea, subcutaneous nodules, Oslers node, Janeway lesions and</td><td>CP 11 PE22.1,22.2: Rheumatological Disease CP 12 PE 23.7, 23.8: Cardiovascular System [History &amp; External Markers ]</td><td><ul> <li>Rheumatological Disease:</li> <li>Enumerate the common Rheumatological problems in children.</li> <li>Discuss the clinical approach to recognition and referral of a child with Rheumatological problem.</li> <li>Counsel a patient with chronic illness disorder.</li> <li>Document in the Logbook/Portfolio.</li> <li>Cardiovascular System:</li> <li>Enumerate the symptoms of cardiac disease</li> <li>Elicit appropriate history for a cardiac disease, analyze &amp; interpret the cardiac symptoms.</li> <li>Identify external markers of a cardiac disease and document</li> <li>Document in the Logbook/Portfolio.</li> </ul></td><td><ul> <li>Observe the Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> <li>Observe the Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul></td></td<>	PE 22.1: Enumerate the common Rheumatological problems in children. Discuss the clinical approach to recognition and referral of a child with Rheumatological problem. PE 22.2: Counsel a patient with Chronic illness PE 23.7: PE 23.7: Elicit appropriate history for a cardiac disease, analyse the symptoms e.g. breathlessness, chest pain, tachycardia, feeding difficulty, failing to thrive, reduced urinary output, swelling, syncope, cyanotic spells, Suck rest cycle, frontal swelling in infants. Document and present. PE 23.8: Identify external markers of a cardiac disease e.g. Cyanosis, Clubbing, dependent edema, dental caries, arthritis, erythema rash, chorea, subcutaneous nodules, Oslers node, Janeway lesions and	CP 11 PE22.1,22.2: Rheumatological Disease CP 12 PE 23.7, 23.8: Cardiovascular System [History & External Markers ]	<ul> <li>Rheumatological Disease:</li> <li>Enumerate the common Rheumatological problems in children.</li> <li>Discuss the clinical approach to recognition and referral of a child with Rheumatological problem.</li> <li>Counsel a patient with chronic illness disorder.</li> <li>Document in the Logbook/Portfolio.</li> <li>Cardiovascular System:</li> <li>Enumerate the symptoms of cardiac disease</li> <li>Elicit appropriate history for a cardiac disease, analyze &amp; interpret the cardiac symptoms.</li> <li>Identify external markers of a cardiac disease and document</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> <li>Observe the Presentation, Viva.</li> <li>Assess the Logbook/Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
13.	PE 23.10: Perform	CP 13	CVS [Examination &	Observe the response
13.	independently	PE 23.10, 23.11: CVS	Treatment]:	& performance.
	examination of the	[Examination &	• Independently examine	• Assess the Logbook/
	cardiovascular system	Treatment]	CVS in children and	• Assess the Logbook/ Portfolio.
	<ul> <li>look for precordial</li> </ul>	Treatment	infants – look for	
	bulge, pulsations in		precordial bulge,	• Validate the Logbook
	the precordium, JVP		pulsations in the	entry.
	and its significance in		precordium, JVP and	• Provide feedback.
	children and infants,		its significance.	
	relevance of		• Percussion in Pediatric	
	percussion in		• relcussion in rediatric examination,	
	Pediatric examination,		Auscultation and other	
	Auscultation and			
	other system		system examination and document	
	examination and			
	document		• Document in the	
	<b>PE 23.11:</b> Develop a		Logbook/Portfolio.	
	treatment plan and			
	prescribe appropriate			
	drugs including fluids			
	in cardiac diseases,			
	anti -failure drugs,			
	<b>U</b> 1			
14.	and inotropic agents. <b>PE 23.12:</b> Interpret a	CP 14	Investigation in CVS	- Observe the
14.	chest X ray and	PE 23.12-23.15: Chest X	Investigation in CVS- Chest X Ray , Blood	• Observe the Dresentation Vive
	recognize	ray, Blood Report, ECG	Report, ECG	Presentation, Viva.
	Cardiomegaly.	&ECHO	&ECHO]:	• Assess the
	PE 23.13: Choose	aleno	-	Logbook/Portfolio.
	and Interpret blood		• Identify cardiac illness	• Validate the Logbook
	-		through X- Ray,	entry.
	reports in Cardiac illness		Blood reports.	• Provide feedback
	PE 23.14: Interpret		• Enumerate cardiac	
	Pediatric ECG		findings in the blood	
	<b>PE 23.15:</b> Use the		reports, Paediatric	
	ECHO reports in		ECG, ECHO	
	-		• Document in the	
1=	management of cases		Logbook/Portfolio.	
15.	<b>PE 24.9:</b> Elicit,	CP 15	Diarrheal Disease:	• Observe the response
	document and present	<b>PE 24.9- 23.14:</b> Diarrheal	• Elicit, document and	& performance.
	history pertaining to	Disease	present history	• Assess the Logbook/
	diarrheal diseases.		pertaining to diarrheal	Portfolio.
	PE 24.10: Assess for		diseases	• Validate the Logbook
	signs of dehydration,		• Assess for signs of	entry.
	document and present		dehydration	• Provide feedback.
	<b>PE 24.11:</b> Apply the		• Discuss the IMNCI	



Clinical Posting	Activity by learner	Formative Assessment by Faculty
Clinical Posting	<ul> <li>guidelines in risk stratification of children with diarrheal dehydration and refer.</li> <li>Enumerate/Demonstrat e steps to do hanging drop stool examination.</li> <li>Discuss results of RFT &amp; electrolyte report to support diagnosis.</li> <li>Discuss fluid management as per WHO.</li> </ul>	by Faculty
CP 16 PE 26.5-26.13: GI System [History & Examination]	<ul> <li>GI System [History And Examination]:</li> <li>Elicit history related to diseases of GI system</li> <li>Identify external markers for GI and Liver disorders.</li> <li>Perform abdominal examination to rule out organomegaly, ascites</li> <li>Generate a DD based on analysis of symptoms and interpretation of physical signs.</li> <li>Interpret LFT, viral markers, USG report</li> <li>Enumerate indications for liver biopsy &amp; Upper GI endoscopy.</li> <li>Counsel and educate patients and their family appropriately on liver diseases.</li> <li>Discuss Universal precautions &amp;</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
	CP 16 PE 26.5-26.13: GI System [History & Examination]	CP 16guidelinesinrisk stratificationCP 16Enumerate/Demonstrat esteps to do hanging drop stool examination.DiscussFilidian eDiscussDiscussfilidian managementasper WHO.Documentinthe Logbook/Portfolio.CP 16PE 26.5-26.13:GI System [History & Examination][History & Examination]Elicit history related to diseases of GI system I dentifyI dentifyexternal markersor or analysisof symptomsGeneratea DD based on analysisanalysisof symptomssymptomsand interpret LFT, viral markers, USG report EnumerateEnumerateindications for liver biopsy & upper GI endoscopy.Counsel and educate patientsand their family appropriately on liver diseases.DiscussUniversal



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
	provisional/ differential diagnosis <b>PE 26.9:</b> Interpret Liver Function Tests, viral markers, ultra sonogram report <b>PE 26.10:</b> Demonstrate the technique of liver biopsy in a Perform Liver Biopsy in a simulated environment. <b>PE 26.11:</b> Enumerate the indications for Upper GI endoscopy. <b>PE 26.12:</b> Discuss the prevention of Hep B infection – Universal precautions and Immunization <b>PE 26.13:</b> Counsel and educate patients and their family appropriately on liver diseases.		Logbook/Portfolio.	
17.	<ul> <li>PE 27.14: Assess emergency signs and prioritize.</li> <li>PE 27.15: Assess airway and breathing: recognize signs of severe respiratory distress. Check for cyanosis, severe chest in-drawing, grunting.</li> <li>PE 27.16: Assess airway and breathing.</li> <li>Demonstrate the method of positioning of an infant &amp; child to open airway i n a simulated environment.</li> </ul>	CP 17 PE 27.14- 27.22: Paediatric Emergency	<ul> <li>Paediatric Emergency:</li> <li>Enumerate the emergency signs in a Paediatric patient and prioritize</li> <li>Demonstrate how to assess airway and breathing:</li> <li>Enumerate signs of severe respiratory distress.</li> <li>Demonstrate the method of positioning of an infant &amp; child to open airway i n a simulated environment</li> <li>Administer oxygen using correct technique</li> </ul>	C



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
S.No.	PE 27.17: Assess airway and breathing: administer oxygen using correct technique and appropriate flow rate PE 27.18: Assess airway and breathing: perform assisted ventilation by Bag and mask in a simulated environment. PE 27.19: Check for signs of shock i.e. pulse, Blood pressure, CRT PE 27.20: Secure an IV access in a simulated environment PE 27.21: Choose the type of fluid and calculate the fluid requirement in shock PE 27.22: Assess	Clinical Posting	<ul> <li>and appropriate flow rate</li> <li>Perform assisted ventilation by Bag and mask in a simulated environment</li> <li>Enumerate signs of shock i.e. pulse, Blood pressure, CRT</li> <li>Secure an IV access in a simulated environment.</li> <li>Choose the type of fluid and calculate the fluid requirement in shock</li> <li>Assess level of consciousness &amp; provide emergency treatment to a child with convulsions/ coma - Position an unconscious child - Position a child with suspected trauma - Administer IV/per</li> </ul>	Formative Assessment by Faculty
	PE 27.19: Check for signs of shock i.e. pulse, Blood pressure, CRT PE 27.20: Secure an IV access in a simulated environment PE 27.21: Choose the type of fluid and calculate the fluid requirement in shock PE 27.22: Assess level of consciousness & provide emergency treatment to a child with convulsions/ coma - Position an unconscious child		<ul> <li>fluid and calculate the fluid requirement in shock</li> <li>Assess level of consciousness &amp; provide emergency treatment to a child with convulsions/ coma <ul> <li>Position an unconscious child</li> <li>Position a child with suspected trauma</li> </ul> </li> </ul>	
	<ul> <li>Position a child with suspected trauma</li> <li>Administer IV/per rectal Diazepam for a convulsing child in a simulated environment.</li> </ul>			



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
18.	PE27.30:Demonstrate confidentiality with regard to abuse.PE27.31:Assess child for signs of 	CP 18 PE 27.30 - 27.33: Abuse CP 19	<ul> <li>Paediatric Abuse:</li> <li>Assess child for signs of abuse</li> <li>Demonstrate confidentiality with regard to abuse</li> <li>Counsel parents of dangerously ill / terminally ill child to break a bad news</li> <li>Obtain Informed Consent</li> <li>Document in the Logbook/Portfolio.</li> <li>LRTI, Stridor:</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> </ul>
19.	<ul> <li>PE 28.15: Stratify risk in children with stridor using IMNCI guidelines</li> <li>PE 28.15: Interpret blood tests relevant to upper respiratory problems</li> <li>PE 28.16: Interpret X-ray of the paranasal sinuses and mastoid; and /or use written report in case of management</li> <li>PE 28.17: Interpret CXR in foreign body aspiration and lower respiratory tract infection, understand the significance of thymic shadow in pediatric chest X-rays.</li> <li>PE 28.18:Describe the etiopathogenesis, diagnosis, clinical features, management and prevention of lower respiratory infections including</li> </ul>	CP 19 PE 28.15 - 28.18: LRTI , Stridor	<ul> <li>LR11, Stridor:</li> <li>Stratify risk in children with stridor using IMNCI guidelines</li> <li>Interpret blood tests relevant to URTI.</li> <li>Interpret X-ray of the paranasal sinuses and mastoid;</li> <li>Interpret CXR in foreign body aspiration and LRTI, discuss the significance of thymic shadow in pediatric chest X-rays</li> <li>Discuss the causes, diagnosis, CF management and prevention of LRTI including bronchiolitis, wheeze associated LRTI Pneumonia and empyema</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>&amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
20.	bronchiolitis, wheeze associated LRTI Pneumonia and empyema PE 29.10: Elicit, document and present the history related to Hematology. PE 29.11: Identify external markers for hematological disorders e.g. Jaundice, Pallor, Petechiae purpura, Ecchymosis,	<b>CP 20</b> <b>PE 29.10- 29.12:</b> Heamatology	<ul> <li>Heamatology:</li> <li>Elicit, document and present the history related to Hematology</li> <li>Enumerate external markers for hematological disorders</li> <li>Perform examination of the abdomen, demonstrate organomegaly</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
	Lymphadenopathy, bone tenderness, loss of weight, Mucosal and large joint bleed <b>PE 29.12:</b> Perform examination of the abdomen, demonstrate organomegaly.		• Document in the Logbook/Portfolio.	
21.	<ul> <li>PE 30.17: Elicit document and present an age appropriate history pertaining to the CNS.</li> <li>PE 30.18: Demo. the correct method for physical examination of CNS including identification of external markers. Document and present clinical findings</li> </ul>	<b>CP 21</b> <b>PE 30.17, 30.18:</b> CNS [History & Examination]	<ul> <li>CNS[ History &amp; Examination]:</li> <li>Elicit document and present an age appropriate history pertaining to the CNS</li> <li>Demonstrate the correct method for physical examination of CNS including identification of external markers. Document and present clinical findings</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response &amp; performance.</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
22.	PE 30.21: Enumerate	CP 22	Investigations in CNS:	• Observe the response
	the indication and	PE 30.21- 30.23:	• Enumerate the	& performance.
	discuss the limitations	Investigations in CNS	indication and discuss	• Assess the Logbook/
	of EEG, CT & MRI.		the limitations of EEG,	Portfolio.
	PE 30.22: Interpret		CT, MRI	• Validate the Logbook
	the reports of EEG,		• Interpret the reports of	entry.
	CT, and MRI.		EEG, CT, MRI	• Provide feedback.
	PE 30.23: Perform in		• Perform in a	
	a mannequin lumbar		mannequin lumbar	
	puncture. Discuss the		puncture. Discuss the	
	indications,		indications,	
	contraindication of		contraindication of the	
	the procedure		procedure	
			• Document in the	
			Logbook/Portfolio.	
23.	<b>PE 33.1:</b> Describe the	CP 23	Endocrine disorders,	• Observe the response
	etiopathogenesis	<b>PE 33.1-33.11:</b> Endocrine	Puberty:	& performance.
	clinical features,	disorders, Puberty	• Discuss the	• Assess the Logbook/
	management of		etiopathogenesis, CF,	Portfolio.
	Hypothyroidism in		management of	• Validate the Logbook
	children		Hypothyroidism in	entry.
	PE 33.2: Recognize		children.	• Provide feedback.
	the clinical signs of		• Neonatal thyroid	
	Hypothyroidism and		screening-Indications,	
	refer		interpret results.	
	PE 33.3: Interpret and		• Discuss the	
	explain neonatal		etiopathogenesis,	
	thyroid screening		clinical presentations,	
	report		complication and	
	PE 33.4: Discuss the		management of	
	etiopathogenesis,		Diabetes mellitus in	
	clinical types,		children	
	presentations,		• Interpret Blood sugar	
	complication and		reports and explain the	
	management of		diagnostic criteria for	
	Diabetes mellitus in		Type 1 Diabetes	
	children		• Perform and interpret	
	PE 33.5:Interpret		Urine Dip Stick for	
	Blood sugar reports		Sugar	
	and explain the		• Define precocious and	
	diagnostic criteria for		delayed Puberty	
	Type 1 Diabetes		enumerate signs to	
	PE 33.6: Perform and		recognize them.	
	interpret Urine Dip		• Perform genital	



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	Stick for Sugar <b>PE 33.7:</b> Perform genital examination and recognize Ambiguous Genitalia and refer appropriately <b>PE 33.8:</b> Define precocious and delayed Puberty <b>PE 33.9:</b> Perform Sexual Maturity Rating (SMR) and interpret <b>PE 33.10:</b> Recognize precocious and delayed Puberty and refer <b>PE 33.11:</b> Identify deviations in growth and plan appropriate referral		<ul> <li>examination and recognize Ambiguous Genitalia</li> <li>Perform Sexual Maturity Rating (SMR) and interpret</li> <li>Identify deviations in growth and plan appropriate referral.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
24.		Ward Leavin	ng Assessment	



Phase III Part-2 Clinical Posting (2019 Batch)

#### 5. Clinical Posting Classes for Phase-III Part 2 (2019-20 Batch): Orthopedics including Trauma

Each group is posted for 2 weeks in Orthopedics including Trauma from Monday to Saturday (10 am to 1 pm). The students may be posted in rotation in the OPD, Ward, Operation Theatre & Special clinic according to the unit/units in the department. Faculty in charge for teaching will facilitate the Clinical Posting of students as follows:

Orthopedics				
Week	Day	Faculty		
	Mon			
Week 1	Tue			
	Wed	Faculty-in-Charge as decided		
to Week 4	Thurs	by the HoD		
WEEK 4	Fri			
	Sat			

Faculty to ensure that the students take proper precautions to prevent Covid-19 as per the periodic government instructions. The following competencies may be imparted to the students posted according to the availability of patients:

S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
1.	<b>OR 2.16:</b> Describe and discuss the mechanism of injury, clinical features,	<b>CP 1</b> <b>OR 2.16:</b> Open Fractures- Management;	<b>Open Fractures:</b> • Describe & discuss the mechanism of injury, CF	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> </ul>
	investigations and principles of management of open fractures with focus	Prevention of Secondary infection & its Management	<ul> <li>investigations and principles of management.</li> <li>Discuss prevention</li> </ul>	<ul><li>Validate the Logbook entry.</li><li>Provide feedback.</li></ul>
	on secondary infection prevention and management		<ul> <li>Discuss prevention and management of secondary infection.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
2.	<b>OR 3.1:</b> Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of Bone and Joint infections a)Acute Osteomyelitis b)Subacute osteomyelitis c) Acute Suppurative arthritis	CP 2 OR3.1 : Clinical features & Management of Bone & Joint infections: a) Acute Osteomyelitis, b) Subacute osteomyelitis, c) Acute Suppurative arthritis, d) Septic arthritis & HIV infection,	<ul> <li>Bone &amp; Joint infections:</li> <li>Describe and discuss the aetiopathogenesis, CF, investigations and principles of management of :</li> <li>a. Acute Osteomyelitis</li> <li>b. Subacute OM</li> <li>c. Acute Suppurative arthritis</li> <li>d. Septic arthritis &amp;</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
	<ul> <li>d) Septic arthritis &amp;</li> <li>HIV infection</li> <li>e)Spirochaetal</li> <li>infection</li> <li>f)Skeletal</li> <li>Tuberculosis</li> </ul>	e) Spirochaetal infection, f) Skeletal Tuberculosis	<ul> <li>HIV infection</li> <li>e. Spirochaetal</li> <li>infection</li> <li>f. Skeletal</li> <li>Tuberculosis.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	
3.	<b>OR 5.1</b> : Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of various inflammatory disorder of joints	CP3 OR 5.1: Rheumatoid Arthritis and associated inflammatory disorders	<ul> <li>Rheumatoid Arthritis</li> <li>&amp; associated inflammatory disorders:</li> <li>Enumerate various inflammatory disorder of joints.</li> <li>Describe and discuss the aetiopathogenesis, CF, investigations and principles of management of</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
4.	<b>OR 6.1:</b> Describe and discuss the clinical features, investigations and principles of management of degenerative condition of spine (Cervical Spondylosis, Lumbar Spondylosis, PID)	CP4 OR 6.1: Degenerative Disorder	<ul> <li>Degenerative Disorder:</li> <li>Enumerate various inflammatory disorder of joints.</li> <li>Describe and discuss the causes, CF, investigations &amp; principles of management of inflammatory disorder of joints including degenerative disorders.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
5.	<b>OR 7.1:</b> Describe and discuss the aetiopathogenesis, clinical features, investigation and principles of management of metabolic bone disorders in particular osteoporosis, osteomalacia, rickets, Paget's disease.	CP5 OR7.1: Metabolic bone disorders	Metabolicbonedisorders:•• Describe and discussthe causes, CF,investigationandprinciplesofmanagementofmetabolicbonedisordersinparticularosteoporosis,osteomalacia, rickets,Paget's disease.• DocumentintheLogbook/Portfolio.	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
6.	<b>OR 8.1:</b> Describe and discuss the aetiopathogenesis, clinical features, assessment & principles of management a patient with Post-Polio Residual Paralysis.	<b>CP6</b> <b>OR8.1:</b> Post-Polio Residual Paralysis	<ul> <li>Post-Polio Residual</li> <li>Paralysis:</li> <li>Describe &amp; discuss the aetiopathogenesis, CF, assessment &amp; principles of management a patient with Post-Polio Residual Paralysis.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
7.	<b>OR 9.1:</b> Describe and discuss the aetiopathogenesis, clinical features, assessment and principles of management of Cerebral palsy patient.	CP7 OR 9.1: Cerebral palsy	<ul> <li>Cerebral palsy:</li> <li>Enumerate the causes of Cerebral palsy.</li> <li>Discuss the CF, assessment and principles of management of Cerebral palsy patient.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
8.	<b>OR 10.1:</b> Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of benign and malignant bone tumours and pathological fractures.	<b>CP 8</b> <b>OR10.1:</b> Benign & Malignant Bone Tumours & Pathological fracture	<ul> <li>Benign &amp; Malignant</li> <li>Bone Tumours &amp; Pathological fracture:</li> <li>Enumerate causes benign and malignant bone tumours.</li> <li>Discuss the CF, investigations &amp; principles of management of benign and malignant bone tumours &amp; pathological fractures</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>
9.	<b>OR 11.1:</b> Describe and discuss the aetiopathogenesis, clinical features, investigations and principles of management of peripheral nerve injuries in diseases like foot drop, wrist drop, claw hand, palsies of Radial, Ulnar, Median, Lateral Popliteal and Sciatic Nerves.	<b>CP 9</b> <b>OR 11.1:</b> Peripheral nerve injuries	<ul> <li>Peripheral nerve injuries:</li> <li>Enumerate the types of peripheral injuries.</li> <li>Describe &amp; discuss the actiopathogenesis, CF, investigations and principles of management of peripheral nerve injuries in diseases like foot drop, wrist drop, and claw hand, palsies of Radial, Ulnar, Median, Lateral Popliteal and Sciatic Nerves.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe &amp; assess the response; Viva</li> <li>Assess the Logbook/ Portfolio.</li> <li>Validate the Logbook entry.</li> <li>Provide feedback.</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
10.	OR 12.1: Describe	CP10	Congenital lesions:	• Observe & assess the
	and discuss the	<b>OR12.1:</b> Congenital	• Enumerate types of	response; Viva
	clinical features,	lesions	Congenital &	<ul> <li>Assess the Logbook/</li> </ul>
	investigations and		acquired	Portfolio.
	principles of		malformations &	• Validate the Logbook
	management of		deformities of a.	entry.
	Congenital and		limbs and spine.	<ul> <li>Provide feedback.</li> </ul>
	acquired		• Describe & discuss	
	malformations and		the CF investigations	
	deformities of:		& principles of mgt.	
	a. limbs and spine -		of the above:	
	Scoliosis and spinal		a.limbs & spine:	
	bifida		Scoliosis & spinal	
	b. Congenital		bifida	
	dislocation of Hip, Torticollis,		b.Congenital	
	c. congenital talipes		dislocation of Hip,	
	equino varus.		Torticollis,	
	equillo varus.		c. Congenital talipes	
			<ul><li>equino varus.</li><li>Document in the</li></ul>	
			• Document in the Logbook/Portfolio.	
11.	OR 13.1: Participate	<b>CP11</b>	Perform Plastering,	• Observe & assess the
11.	in a team for	OR13.1: Perform	Splinting &	• Observe & assess the response; Viva
	procedures in patients	Plastering, Splinting	Strapping:	• Assess the Logbook/
	and demonstrating the		• Participate in a team	• Assess the Logbook/ Portfolio.
	ability to perform on	& Strapping	for procedures in	<ul> <li>Validate the Logbook</li> </ul>
	mannequins /		patients &	entry.
	simulated patients in		demonstrating the	<ul> <li>Provide feedback.</li> </ul>
	the following:		ability to perform on	• I IOVIUE IEEUDACK.
	i. Above elbow		mannequins /	
	plaster		simulated patients in	
	ii. Below knee plaster		the following:	
	iii. Above knee		i. Above elbow plaster	
	plaster		ii. Below knee plaster	
	iv. Thomas splint		iii. Above knee plaster	
	v. splinting for long		iv. Thomas splint	
	bone fractures		v. splinting for long	
	vi. Strapping for		bone fractures	
	shoulder and clavicle		• vi. Strapping for	
	trauma		shoulder & clavicle	
			trauma	
			• Document in the	
			Logbook/Portfolio.	
12.		Ward Leavi	ing Assessment	



#### Phase III Part-2 Clinical Posting (2019 Batch)

#### 6. Clinical Posting Classes for Phase-III Part 2 (2019-20 Batch): **Dermatology**, Venereology & Leprosy

Each group is posted for 2 weeks in Dermatology, Venereology & Leprosy, from Mon to Sat (10 am to 1 pm). The students may be posted in rotation in the OPD, Ward & Special clinic according to the unit/units in the department. Faculty in charge for teaching will facilitate the Clinical Posting of students as follows:

Dermatology				
Week	Day	Faculty		
	Mon			
Weels 1	Tue			
Week 1	Wed	Faculty-in-Charge as decided		
to Week 4	Thurs	by the HoD		
WEEK 4	Fri			
	Sat			

Faculty to ensure that the students take proper precautions to prevent Covid-19 as per the periodic government instructions. The following competencies may be imparted to the students posted according to the availability of patients:

S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
1.	DR 1.1: Enumerate the causative & risk factors of acne DR 1.2: Identify & grade the various common types- acne. DR 1.3: Describe the treatment & preventive measures for various kinds of acne.	<b>CP 1</b> <b>DR 1.1-1.3:</b> Acne	<ul> <li>Acne:</li> <li>Enumerate the causative &amp; risk factors of acne</li> <li>Identify &amp; grade the various common types of acne.</li> <li>Describe the treatment &amp; preventive measures for various kinds of acne.</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>
2.	<b>DR2.1:</b> Identify and differentiate vitiligo from other causes of hypopigmented lesions <b>DR2.2:</b> Describe the treatment of vitiligo	CP 2 DR 2.1, 2.2: Etiopathogenesis & classification of vitiligo	Vitiligo: • Identify and differentiate	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
3.	DR3.1: Identify and	<b>CP 3</b>	Papulosquamous	• Observe the response
	distinguish psoriatic	DR 3.1-3.3:	disorders:	• Assess the Logbook/
	lesions from other	Papulosquamous	• Identify and distinguish	Portfolio
	causes	disorders	psoriatic lesions from	
	<b>DR3.2:</b> Demonstrate		other causes	entry
	the grattage test		• Demonstrate the grattage	-
	<b>DR3.3:</b> Enumerate		test	• Flovide leedback
	the indications for		• Enumerate the	
	and describe the		indications for and	
	various modalities of		describe the various	
	treatment of psoriasis		modalities of treatment	
	including topical,		of psoriasis including	
	systemic and		topical, systemic and	
	phototherapy		phototherapy	
			• Document in the	
			Logbook/Portfolio.	
4.	<b>DR8.1:</b> Describe the	<b>CP 4</b>	Viral Infections:	• Observe the response
-10	etiology,	<b>DR 8.1, 8.2:</b> Viral	• Describe the etiology,	• Assess the Logbook/
	microbiology,	Infections (VI-IM, HI-	microbiology,	Portfolio
	pathogenesis and	IMOCHONIS (11 INI, 11 IM)	pathogenesis and clinical	
	clinical presentations	11(1)	presentations and	0
	and diagnostic		diagnostic features of	entry • Provide feedback
	features of common		common viral infections	• Provide leedback
	viral infections of the		of the skin in adults and	
	skin in adults and		children	
	children		• Identify and distinguish	
	<b>DR8.2:</b> Identify and		herpes simplex and	
	distinguish herpes		herpes labialis from	
	simplex and herpes		other skin lesions.	
	labialis from other			
	skin lesions		• Document in the Logbook/Portfolio.	
5.	<b>DR9.1:</b> Classify,	CP5	Hansen's disease:	• Observe the record
5.	describe the	<b>DR 9.1, 9.2:</b> Hansen's		• Observe the response
	epidemiology,	disease (HI-IM)	• Classify, describe the	• Assess the Logbook/
	etiology,	uisease ( <mark>111</mark> -1111)	epidemiology, etiology,	
	microbiology,		microbiology, pathogenesis, clinical	• Validate the Logbook
	pathogenesis, clinical		1 0 ,	entry
	presentations and		-	• Provide feedback
	diagnostic features of		U	
	Leprosy		Leprosy.	
	<b>DR9.2:</b> Demonstrate		• Demonstrate (and alogaify based on) the	
	(and classify based		classify based on) the	
	on) the clinical		clinical features of	
	/		leprosy including an	
	features of leprosy		appropriate neurologic	



S.No.	Competency	<b>Clinical Posting</b>	Activity by learner	Formative Assessment by Faculty
	including an appropriate neurologic examination <b>DR9.3:</b> Enumerate the indications and observe the performance of a slit skin smear in patients with leprosy.		<ul> <li>examination</li> <li>Enumerate the indications and observe the performance of a slit skin smear in patients with leprosy.</li> <li>Document in the Logbook/Portfolio</li> </ul>	
6.	DR10.1: Identify and classify syphilis based on the presentation and clinical manifestations DR10.2: Identify spirochete in a dark ground microscopy	<b>CP 6</b> <b>DR 10.1-10.2:</b> Syphilis ( <b>VI</b> -CM, <b>HI</b> -IM, OG)	<ul> <li>Syphilis- Identify:</li> <li>Identify and classify syphilis based on the presentation and clinical manifestations</li> <li>Identify spirochete in a dark ground microscopy</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>
7.	DR10.3: Enumerate the indications and describe the pharmacology, administration and adverse reaction of pharmacotherapies for syphilis DR10.4: Describe the prevention of congenital syphilis DR10.5: Counsel in a non-judgmental and empathetic manner patients on prevention of STD	<b>CP 7</b> <b>DR 10.3-10.5:</b> Syphilis ( <b>V1</b> -CM, <b>H1</b> -IM, OG)	<ul> <li>Syphilis-Indications &amp; Managment:</li> <li>Enumerate the indications</li> <li>Describe the pharmacology, administration &amp; adverse reaction of pharmacotherapies</li> <li>Describe the prevention of congenital syphilis</li> <li>Counsel in a non- judgmental &amp; empathetic manner patient on prevention of STD.</li> <li>Document in the Logbook/Portfolio.</li> </ul>	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>
8.	DR13.1: Distinguish bulla from vesicles DR13.2: Demonstrate the Tzanck test, nikolsky sign and bulla spread sign	CP 8: DR 13.1-13.3: Vesicubullous Lesions	<ul> <li>Vesicubullous Lesions:</li> <li>Distinguish bulla from vesicles</li> <li>Demonstrate the Tzanck test, nikolsky sign and bulla spread sign</li> <li>Calculate the body</li> </ul>	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
9.	DR13.3: Calculate the body surface area of involvement of vesiculobullous lesions. DR14.1: Describe the etiology, pathogenesis and clinical precipitating features and classification of Urticaria and angioedema DR14.2: Identify and distinguish urticarial from other skin lesions DR14.3: Demonstrate dermographism DR14.4: Identify and distinguish angioedema from other skin lesions DR14.5: Enumerate the indications and describe the pharmacology indications and adverse reactions of drugs used in the urticaria and angioedema	CP 9 DR 14.1-14.5: Urticaria & Angioedema	<ul> <li>surface area of involvement of vesiculobullous lesions</li> <li>Document in the Logbook/Portfolio</li> <li>Urticaria &amp; Angioedema:</li> <li>Describe the etiology, pathogenesis and clinical precipitating features and classification.</li> <li>Identify and distinguish urticarial from other skin lesions</li> <li>Demonstrate dermographism</li> <li>Identify and distinguish angioedema from other skin lesions</li> <li>Enumerate the indications and describe the pharmacology indications and adverse reactions of drugs used in the urticaria and angioedema</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>



S.No.	Competency	Clinical Posting	Activity by learner	Formative Assessment by Faculty
10.	DR 17.1: Enumerate and identify the cutaneous findings in vitamin A deficiency DR 17.2:Enumerate and describe the various skin changes in Vitamin B complex deficiency DR 17.3: Enumerate and describe the various changes in Vitamin C deficiency DR 17.4: Enumerate and describe the various changes in Zinc deficiency	CP10 DR17.1-17.4: Cutaneous manifestation of nutritional deficiency- Vit A, Vit C & Zinc	<ul> <li>Nutritional deficiency:</li> <li>Enumerate and identify the cutaneous findings in vitamin A deficiency</li> <li>Enumerate and describe the various skin changes in Vitamin B complex deficiency</li> <li>Enumerate and describe the various changes in Vitamin C deficiency</li> <li>Enumerate and describe the various changes in Zinc deficiency</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>
11.	DR 18.1:Enumerate the cutaneous features of Type 2 diabetes DR 18.2:Enumerate the cutaneous features of hypo/hyper- thyroidism	CP11 DR 18.1,18.2: Cutaneous manifestation in Type 2 diabetes & hypo/hyper- thyroidism	<ul> <li>Cutaneous manifestation in Type 2 diabetes &amp; hypo/hyper-thyroidism:</li> <li>Enumerate cutaneous manifestation in Type 2 diabetes.</li> <li>Enumerate cutaneous manifestation in hypo/hyper-thyroidism.</li> <li>Document in the Logbook/Portfolio</li> </ul>	<ul> <li>Observe the response</li> <li>Assess the Logbook/ Portfolio</li> <li>Validate the Logbook entry</li> <li>Provide feedback</li> </ul>
12.	Ward Leaving Assessment			