

**DAY WISE CINICS**  
**CBME phase-2 Clinical Postings(4months)**

		9.30 am - 12.30 pm	9.30 am - 12.30 pm	9.30 am - 12.30 pm	9.30 am - 12.30 pm
		Medicine	Surgery	OBG	CM
<b>WEEK 1</b>	MON	IM1.10 History taking (Bedside Clinics)	SU17.1 Describe the Principles of FIRST AID. SU17.2 Demonstrate the steps in Basic Life Support. Transport of injured patient in a simulated environment(DOAP)	OG8.1: Antenatal care OG8.2-History taking (TL-bedside clinic) OG8.4- Follow up and monitoring of pregnancy (SGD)(K,KH,SH,DOAP)	CM 7.4 /7.5 Analysis & Interpretation of Descriptive Epidemiology (SGD)
	TUES	IM1.11 General examination , vitals IM1.12 Demonstration of pulse IM1.13 Demonstration of BP (DOAP)	SU5.2 Elicit, document and present a history in a patient presenting with wounds.(DOAP)	OG8:Antenatal care OG8.6 -Appropriate nutrition in pregnancy (Bedside clinics) OG8.8-Basic investigations (SGD) (SA-Short notes)Viva voce(SA)	CM 7.4 /7.5 Demonstrate ability to Analysis and interpret Case control & cohort study (SGD)
	WED	Examination of CVS IM1.14 Demonstration Of JVP IM1.15 Demonstration of heart sounds & Murmur (DOAP)	SU18.3 Describe and demonstrate the clinical examination of surgical patient including swelling and order relevant investigation for diagnosis. Describe and discuss appropriate treatment plan.(DOAP)	OG8: Antenatal careOG8.1- Screening for high risk factors (SGD)OG8.3-Obstetrical examination ( bedside clinics) (DOAP)	CM 7.7 Demonstrate steps in investigation of outbreak (SGD)
	THURS	IM1.16 Differential diagnosis IM1.17 Interpretation of ecg, chest x ray, blood culture & cardiac biomarker IM1.18 , IM 1.19 Interpret ECG, Echo ,TMT, Angio( Bedside Clinics)	SU22.3 Demonstrate and document the correct clinical examination of thyroid swellings and discuss the differential diagnosis and their management(DOAP)	OG6: Diagnosis of pregnancy OG6.1 Clinical features of pregnancy (Bedside clinics) (SA-Viva voce) OG6.2- The principles underlying and interpret pregnancy tests (SGD)	CM 7.6 Evaluation of screening test (SGD)
	FRID	IM2. 6 , IM2.7 ,IM2.8, IM2.9 IHD – MI/Unstable angina (Bedside clinics)	SU25.5 Demonstrate the correct technique to palpate the breast for breast swelling in a mannequin or equivalent.SU25.4 Counsel the patient and obtain informed consent for treatment of malignant conditions of the breast(DOAP)	OG5: Preconceptional care OG5.1:TL-Small group discussion(K/KH/SH) OG5.2-Short notes (SA)	CM 6.4 Normal Distribution curve, measures of central tendency & Dispersion (SGD)

WEEK 2

MON	IM3.4 Pneumonia (DOA)P	SU27.2 Demonstrate the correct examination of the vascular system and enumerate and describe the investigation of vascular disease(DOAP)	OG2: Reproductive anatomy OG2.1: (SGD) OG2.2: DOAP on maniquen(SA)	CM 6.4 / 7.9 Data presentation (SGD)
TUES	IM3.7 IM3.8 IM3.9 IM3.10 IM3.11 Interpretation of chest x ray, sputum culture & sputum afb, mantoux, pleural fluid analysis, ABG ( DOAP)	SU27.8 Demonstrate the correct examination of the lymphatic system(DOAP)	OG13 Labour OG13.1.1:Prelabour-signs and symptoms(K/KH),(SGD) OG13.2:Differentiation between true and false labour (SA-DOAP)	CM 5.1 Introduction to Nutrition + spotters (SGD)
WED	IM4.9 Fever & PUO, IM4.23 Malaria (Bedside clinics)	SU28.9 Demonstrate the correct technique of examination of a patient with disorders of the stomach(DOAP)	OG13: Labour OG13.3: stages of labour- diagnosis and monitoring (K/KH/O in DOAP), (Bedside clinics) OG13.4: Management of II stage of labour-(Bedside clinic, (K,KH,DOAP)	CM 5.2 Demonstrate Nutritional Assessment methods (DOAP)
THUR	IM 4.12, IM 4.13, IM 4.14 Interpretation of cbc peripheralsmear, CSF & urine analysis	SU28.18 Describe and demonstrate clinical examination of abdomen. Order relevant investigations. Describe and discuss appropriate treatment plan(DOAP)	OG13: Labour OG13.5:Third stage of labour(SGD) OG13.6: Viva voce on normal labour(SA)	CM 5.4 Diet survey + Nutritional Assessment of families (SG)
FRID	Examination of git IM5.9. IM5.10 Demonstration of git examination (DOAP)	SU29.10 Demonstrate a digital rectal examination of the prostate in a mannequin or equivalent(DOAP)	OG19: Puerperium OG19.1:Normal puerperium-(Bedside clinic(K,KH,SH,DOAP) OG19.2: Abnormal puerperium(SGD)	CM 5.4 Diet survey - analysis & presentatio(SGD)

WEEK 3

MON	IM5.13 Interpretation of USG, CT Abdomen, MRCP, ERCP Bedside clinics	SU28.2 Demonstrate the correct technique to examine the patient with hernia and identify different types of hernias.(DOAP)	OG14: Lie and Presentation; Maternal Pelvis OG14.2: Definition and demonstration of normal lie and presentation(bedside clinics)(K,KH,SH,DOAP) OG14.2:Maternal Pelvis (DOAP)	Anganwadi Visit with Community Nutrition assessment (SGD)
TUES	IM5.15 Ascitic fluid tapping and analysis(DOAP)	SU9.1 Choose appropriate biochemical, microbiological, pathological, imaging investigations and interpret the investigative data in a surgical patient(DOAP)	OG17: Lactation OG17.1: Physiology of lactation(TL-small group discussion) (K/KH/DOAP) OG17.2: care of the breast, importance and the technique of breast feeding(-DOAP)	CM 5.4 Diet prescription (Balanced / Therapeutic) (SGD)
WED	IM6.7 HIV, STD (Bedside clinics)	SU10.3 Observe common surgical procedures and assist in minor surgical procedures; Observe emergency lifesaving surgical procedures. SU10.4 Perform basic surgical Skills such as First aid including suturing and minor surgical procedures in simulated environment. SU14.4 Demonstrate the techniques of asepsis and suturing in a simulated environment(DOAP)	OG21: Contraception OG21.1: Methods, oral, parenteral (SGD)(K/KH/SH)OG21.2: IUCD,(Bedside clinics) DOAP session on maniquens	CM 5.7 Milma Plant Visit (SGD)
THU	IM7.11 Rheumatoid arthritis examination & management (Bedside clinics)	SU9.3 Communicate the results of surgical investigations and counsel the patient appropriately.	OG9: Early pregnancy complication OG9.1: Detailed discussion on miscarriage( bedside clinics)(K/KH) OG9.2: Medical termination of pregnancy(SGD)(K/KH?SK)	CM 3.2 Water Works Visit (SGD)
FRID	IM7.12 Locomotor system examination including joints ( DOAP)	SU17.10 Demonstrate Airway maintenance. Recognize and manage tension pneumothorax, hemothorax and flail chest in simulated environment.(DOAP)	OG18: Care of the newborn OG18.1: General care of newborn(Bedside clinics) (K/KH/SH/DOAP) OG18.2:SA- Demonstration of steps of neonatal resuscitation on simulated specimen(DOAP)	CM 3.4 Sewage treatment Plant Visit (SGD)

**WEEK 4**

MON	Examination of CNS IM18.3 Demonstration of CNS examination – motor system and sensory system (DOAP)	SU11.3 Demonstrate maintenance of an airway in a mannequin or equivalent. (DOAP)	OG35.Gynecology skills OG35.1:History taking(bedside clinics) OG35.2: Provisional and clinical diagnosis after history taking (bedside clinics) (SA-viva voce)	CM 14.1 , 14.2 & 14.3 Bio - medical waste management Visit and activity(SGD)
TUES	IM18.5 Demonstration of cns examination – cranial nerve( DOAP)	U13.4 Counsel patients and relatives on organ donation in a simulated environment. SU2.3 Communicate and counsel patients and families about the treatment and prognosis of shock demonstrating empathy and care.(DOAP)	OG24.AUB OG24.1: Definition and classification of AUB(SGD) OG24.1: Management of AUB( SGD)	CM 4.1 & 4.2 Health education preparation(SGD)
WED	IM18.6 Cerebrovascular accident ( Bedside clinics)	U8.2 Demonstrate Professionalism and empathy to the patient undergoing General Surgery.SU4.4 Communicate and counsel patients and families on the outcome and rehabilitation demonstrating empathy and care.(DOAP)	OG23.Normal and abnormal Puberty OG23.1: Puberty: physiology and normal features(bedside clinic) OG23.1: SA- short notes on normal puberty	CM 4.3 School Health Programme evaluation(SGD)
THUR	IM18.7 Evaluation of speech( DOAP)	SU3.2 Observe blood transfusions(DOAP)	OG23.Normal and abnormal Puberty OG23.2: Abnormalities of puberty(SGD ) OG23.2: Anormal pubertal signs and symptoms(bedside clinics) (DOAP)	CM 3.7 Entomology slides demonstration(SGD)
FRID	IM 19.3 Parkinsonism (Bedside clinics)	SU3.3 Counsel patients and family/ friends for blood transfusion and blood donation.(DOAP)	OG22.WDPV OG22.1: Physiological WDPV( bedside clinics)OG22.2: Pathological WDPV( SGD )	End - Posting Exam

8.30Am to 11.30AM

**CBME phase-2 Clinical Postings(3months)**

Day	Ophthalmology	ENT	Paediatrics	Ortho
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WEEK I	MON	AN41.1Eyeball(Sem)	EN1.1 Anatomy of external ear and middle ear(Sem), EN2.1 History taking in ENT (Demonstration), EN 2.2 Headlamp examination (DOAP)	PE1.1 Define the terminologies Growth and development and discuss the factors affecting normal growth and development (SGD)	OR1.1 Prehospital care/triage(seminar) OR1.2Shock (DOAP)
	TUE	OP1.1 Physiology of Vision (Sem),OP1.3 Vision Assessment (DOAP),PY10.20Vision Testing Demonstration (DOAP)	EN1.1 Anatomy of inner ear (Sem), EN2.3 Otoscopy (DOAP), EN 2.4 Tuning fork tests (DOAP) EN 3.1 Otomicroscopic examination (Demonstration)	PE1.2 Discuss and describe the patterns of growth in infants, children and adolescents PE1.3 Discuss and describe the methods of assessment of growth including use of WHO and Indian national standards. Enumerate the parameters used for assessment of physical growth in infants children and adolescents (SGD) PE1.4 Perform Anthropometric measurements, document in growth charts and interpret (SGD )	IM 7.5 Clinical approval to ortho patient (DOAP) IM 7.6 IM 7.7 Joint pain etiopathology (Seminar)
	WED	OP2.1Eyelids and Adnexa(Sem), OP2.2 Clinical signs symptoms(DOAP)	EN 1.1/PY 10.15 Physiology of hearing (Sem), EN 4.4 Visualize and assess tympanic membrane (Demonstration), EN 4.16 Methodology of PTA (DOAP)	PE1.5 Define development and discuss the normal developmental mile stones with respect to motor, behavior, social, adaptive and language (SGD) PE1.6 Discuss the methods of assessment of development (SGD) PE1.7 Perform Developmental assessment and interpret (Bedside clinics, Skills Lab)	IM 7.8 IM 7.9 IM 7.10 Joint pain differential diagnosis (seminar)
	THU	OP2.1Eyelids and Adnexa(Sem), OP2.3 Clinical Procedures(DOAP)	EN4.3 ASOM(Sem), EN 4.2 Diseases of external ear (DOAP)	PE2.1 Discuss the etio- pathogenesis, clinical features and management of a child who fails to thrive (SGD)E2.2 Assessment of a child with failing to thrive including eliciting an appropriate history and examination (Bedside clinics) PE2.3 Counseling a parent with failing to thrive child ( OSPE)	AN 10.12Shoulder joint anatomy (seminar)IM 7.13 Shoulder joint examination (DOAP)OR 1.5 Shoulder dislocation (seminar &DOAP
	FRI	OP3.3 Conjunctivitis(Sem) ,OP3.1 Red Eye (DOAP), OP3.2 Red Eye(DOAP)	EN 4.7 CSOM mucosal disease (Sem) ,EN 4.10 Indications and steps involved in myringoplasty (DOAP)	PE2.4 Discuss the etio-pathogenesis, clinical features and management of a child with short stature( SGD )PE2.5 Assessment of a child with short stature: Elicit history, perform examination, document and present (Bedside clinics, Skills) PE2.6 LabEnumerate the referral criteria for growth related problems (SGD)	IM 7.13 Elbow joint examination (DOAP)OR 1.5 Elbow dislocation (DOAP)

WEEK 2

	MON	OP3.6 Pterygium(Sem), OP3.8 Foreign Body (DOAP), OP3.9 Eye Drop Instillation(DOAP)	EN 4.8 CSOM Squamosal disease (Sem), EN 4.11 Indications and steps of mastoidectomy (DOAP)	PE3.1 Define enumerate and discuss the causes of developmental delay and disability including intellectual disability in children(SGD) PE3.2 Discuss the approach to a child with developmental delay ( SGD) PE3.3 Assessment of a child with developmental delay- Elicit document and present history (Bedside clinics, Skills Lab ) PE3.4 Counsel a parent of a child with developmental delay (DOAP)	IM 7.13 Wrist joint examination (DOAP)OR 2.6 Distal radius fracture (Seminar)
	TUE	OP4.1 Corneal Ulcer(Sem), OP4.2 Infectious Keratitis(L)	EN 4.18 Facial nerve paralysis (Sem), EN 4.19 Clinical features and management of vertigo (Demonstration)	PE3.5 Discuss the role of the child developmental unit in management of developmental delay (SGD) PE3.6 Discuss the referral criteria for children with developmental delay (SGD) PE3.7 Visit a child Developmental Unit and observe its functioning (SGD) PE3.8 Discuss the etio- pathogenesis, clinical presentation and multi-disciplinary approach in the management of Cerebral palsy (Bedside clinics)	IM 7.13 Hip joint examination (DOAP)AN 17.3 Hip joint dislocation (seminar)OR 1.5 (DOAP)
	WED	OP4.9 Eye Banking(PBL), OP4.10 Eye Donation(DOAP)	EN 1.1Anatomy of nose and paranasal sinuses (Sem) , AN 37.1 Nasal septum and lateral wall of nose with blood supply and nerve supply (Practical)	PE4.1 Discuss the causes and approach to a child with scholastic backwardness (SGD) PE4.2 Discuss the etiology, clinical features, diagnosis and management of a child with Learning Disabilities(SGD )	AN 18.6 &18.7 Knee joint anatomy (seminar)IM 7.13 Knee joint examination (DOAP)OR 1.5 Knee joint dislocation (DOAP)
	THU	OP6.1 Uveitis(Sem), OP6.2 Uveitis(Sem), OP6.3 Uveitis(Sem)	EN 1.1 Physiology of nose and paranasal sinuses (Sem), EN 2.5 Examination of nose and PNS (DOAP)	PE4.3 Discuss the etiology, clinical features, diagnosis and management of a child with Attention Deficit Hyperactivity Disorder (ADHD) SGD PE4.4 Discuss the etiology, clinical features, diagnosis and management of a child with Autism (SGD) PE4.5 Discuss the role of child guidance clinic in children with Developmental problem ( SGD )	AN 19.7 Flat foot & club foot (seminar)surgical anatomyOR 12.1 CTEV (DOAP & seminar)

WEEK 2	FRI	OP6.7 Glaucoma(Sem), OP6.6 Anterior Chamber (DOAP)	EN 4.23 Deviated nasal septum(Sem), EN 4.24 Indications and steps of septoplasty (DOAP)	PE4.6 Visit to Child Guidance Clinic PE5.1 Describe the Clinical features, Diagnosis and management of thumb sucking(SGD) PE5.2 Describe the clinical features, diagnosis and management of Feeding problems(SGD) PE5.3 Describe the clinical features, diagnosis and management of nail biting (SGD) PE5.4 Describe the clinical features, diagnosis and management of Breath Holding spells(SGD) PE5.5 Describe the clinical features, diagnosis and management of temper tantrums(SGD) PE5.6 Describe the clinical features, diagnosis and management of Pica PE5.7 Describe the clinical features, diagnosis and management of Fussy infant(SGD) PE5.8 Discuss the etiology, clinical features and management of Enuresis(SGD) PE5.9Discuss the etiology, clinical features and management of Encopresis(SGD) PE5.10 Discuss the role of child guidance clinic in children with behavioural problems and the referral criteria(SGD) PE5.11 Visit to Child Guidance Clinic and Observe functioning(SGD)	OR 12.1DDH (seminar & DOAP)
	WEEK 3	MON	OP6.7 Glaucoma(Sem)	EN 4.33 Acute and chronic sinusitis(Sem), EN 3.2 Indications and steps involved in the performance of Diagnostic nasal endoscopy (Demonstration)	
		TUE	OP6.7 Glaucoma(Sem)	EN 4.25 Nasal polyps(Sem)	
		WED	OP7.2 Cataract(Sem), OP7.3 Cataract(DOAP)	EN 4.30 Epistaxis (Sem),	
		THU	OP7.4 Cataract Surgery(Sem),	EN 1.1 Anatomy of waldeyers ring (Sem), EN 2.6	
FRI		OP8.1 vascular Occlusions(Sem), OP8.2 Fundus Examination(DOAP)	EN4.35 Acute and chronic tonsillitis (beside clinic), EN 4.40 Indications and steps involved in		
4	MON	OP8.2 LASERS(Sem)	EN 1.1 Anatomy of larynx(Sem), EN 2.7 Examination of neck(DOAP)		

WEEK

TUE	OP9.2 Squint(L), OP9.1 Extraocular	LN 1.1 Physiology of degeneration (Sem), LN 4.38		
WED	OP9.4 NPCB(Sem)	LN 4.45 Principles of management of foreign body		
THU	OP9.5 Ocular Injuries(Sem)	LN 4.47 Principles of management of strabismus (Sem), LN 4.50 Indications and steps involved in		
FRI	Assessment OSCE	Assessment OSCE		



8.30Am to 11.30AM

**CBME phase-2 Clinical Postings(2 months)**

**WEEK 1**

Day	Dermatology	Clinical Pathology	Pstchiatry	Resp Medicine
MON	DR1.1 ACNE-Sebaceous gland – anatomy and function.Etiology of acne(SGD) DR1.2 Grading of acne(BED SIDE CLINIC)DR1.3 Treatment, prevention(SGD)	Introduction to Clinical Pathology PA1.1 (SGD)Clinical Pathology PA23.1 (DOAP)Clinical Pathology PA23.1 (DOAP)	PS2.1 Stress (SGD)PS2.2 Time management (SGD)	CT2.8 Elicit document and present a medical history that will differentiate the aetiologies of obstructive airway disease, severity and precipitants(Bed side clinic,DOAP session)
TUE	DR2.1 VITILIGO –Etiology, clinical features, differential diagnosis(SGD/BED SIDE CLINIC) DR2.2 Treatment	Clinical Pathology PA23.1 (DOAP)Clinical Pathology PA23.2 (SGD)Clinical Pathology PA23.2 (DOAP)	PS2.5 Normality &Abnormality (SGD)PS3.1 Introduction (SGD)PS3.2 Signs and symptoms (SGD)	CT2.9 Perform a systematic examination that establishes the diagnosis and severity that includes measurement of respiratory rate, level of respiratory distress, effort tolerance, breath sounds, added sounds,identification of signs of consolidation pleural effusion and pneumothorax (Bed side clinic DOAP session)

WEEK 1

WED	<p>DR3.1 PSORIASIS – Etiology, clinical features, types, differential diagnosis(SGD/BED SIDE CLINIC/CASE SCENARIO)</p> <p>DR3.2 Demonstrate grattage test and auspitz sign(DOAP)</p> <p>DR3.3 Management of psoriasis – general, topical, systemic and phototherapy(SGD)</p>	<p>Clinical Pathology PA23.3 (SGD)UTPA28.2,PA28.3,PA28.4(DOAPClinical Pathology PA23.3 ,CVS PA27.8(DOAP)Clinical Pathology PA23.3 ,HBSPA25.6(DOAP)</p>	<p>PS3.6 Etiology (SGD)PS3.3 History taking (DOAP)PS3.4 Establishing Rapport (DOAP)</p>	<p>CT2.10 Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology (Bed side clinic,DOAP session) CT 2.11 Describe, discuss and interpret pulmonary function test(Bed side clinic,DOAP session). CT 2.13 Describe the appropriate diagnostic work up based on the presumed aetiolog(Bed side clinic Small group discussion) CT 2.14 Enumerate the indications for and interpret the results of : pulse oximetry,ABG, Chest Radiograph(Bed side clinic Small group discussion,DOAP session)</p>
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WEEK 1

THU	<p>DR5.1 SCABIES – Etiology, microbiology, clinical features, types.(SGD/BED SIDE CLINIC/CASE SCENARIO)</p> <p>DR5.2 Differential diagnosis(SGD/BED SIDE CLINIC /CASE SCENARIO)</p> <p>DR5.3 Management of scabies – general measures Specific treatment – topical and systemic drugs, administration(SGD)</p>	<p>Introduction to HistoPathology PA1.1 ,(SGD) Introduction to Clinical Pathology PA1.1 ,Basic diagnostic cytologyPA8.1,PA8.2(DOAP)Introduction to haematologyPA13.2( SGD)</p>	<p>PS3.5 MMSE (DOAP/ Bedside)PS3.5 MMSE (DOAP/ Bedside)</p>	<p>CT2.16 Discuss and describe therapies for OAD including bronchodilators,leukotriene inhibitors, mast cell stabilisers, theophylline, inhaled andsystemic steroids, oxygen and immunotherapy (Lecture,small group discussion)CT2.17 Describe and discuss the indications for vaccinations in OAD (,small group discussion) CT2.18 Develop a therapeutic plan including use of bronchodilators and inhaled corticosteroids(Bedside clinics, Small group discussion, DOAP session)</p>
FRI	<p>DR7.1 Fungal Infections – Etiology, microbiology, clinical features and differential diagnosis(SGD/BED SIDE CLINIC/CASE SCENARIO/CASE PRESENTATION)</p>	<p>Basic diagnostic cytology PA8.1,PA8.2 (SGD)Basic diagnostic cytology PA8.3 (DOAP})Introduction to haematologyPA13.4( SGD)</p>	<p>PS4.1 Substance use D/d etiology (SGD)PS4.2 Clinical feature (Bedside)PS4.3 Lab investigations (Bedside)PS4.4 Treatment (SGD)</p>	<p>CT2.19 Develop a management plan for acute exacerbations including bronchodilators, systemic steroids, antimicrobial therapy (Bedside clinics, Small group discussion, DOAP session0</p>

WEEK 2

MON	<p>DR7.2 Fungal scraping / identification of dermatophytes and candida species in KOH mount (DOAP)</p> <p>DR7.3 ANTIFUNGAL DRUGS – Classification, pharmacology of topical and systemic drugs(SGD)</p>	<p>Introduction to haematologyPA13.5( DOAP)Microcytic anemiaPA14.3,Macrocytic anemiaPA15.3 (DOAP)Hemolytic anemia PA16.6 (DOAP)</p>	<p>PS6.1 Depression etiology (SGD)PS6.2 Clinical feature (Bedside)PS6.3 Lab investigations (Bedside)PS6.4 Treatment (SGD)</p>	<p>CT 1.6 Demonstrate and perform a systematic examination that establishes the diagnosis based on the clinical presentation that includes a a)general examination, b) examination of the chest and lung includingloss of volume, mediastinal shift, percussion andauscultation(includingDOAP session of lung sounds and added sounds) c)examination of the lymphatic system and d) relevant CNS examination (Bed side clinic , DOAP)</p>
TUE	<p>DR8.2 Viral Infections – Etiology, clinical features and differential diagnosis ofHerpes simplex(SGD/BED SIDE CLINIC/ CASE SCENARIO/CASE PRESENTATION)</p> <p>DR8.3 Varicella</p> <p>DR8.4 HPV DR8.5 Molluscum contagiosum</p>	<p>Leucocyte disorders PA 18.1 ( DOAP)Leucocyte disorders PA 18.12( DOAP)Plasma cell disorders PA20.1( SGD)</p>	<p>PS8.1 Anxiety disorders etiology (SGD)PS8.2 Clinical feature (Bedside)PS8.3 Lab investigations (Bedside)PS8.4 Treatment (SGD)</p>	<p>CT 1.9 Order and interpret diagnostic tests based on the clinicalpresentation including: CBC, Chest X ray PA view, Mantoux, sputumculture and sensitivity, pleural fluid examination and culture, HIVtestingBedside clinic, (DOAP )</p>
WED	<p>DR8.6 Tzanck smear – indication, procedure, interpretation(DOAP)</p> <p>DR8.7 Management of common viral infections. Antiviral drugs - pharmacology, adverse effects(SGD)</p>	<p>Hemorrhagic disorders PA21.2,PA21.3(SGD)Leucocyte disorders PA 18.12( DOAP)Plasma cell disorders PA20.1( SGD)</p>	<p>PS9.1 Stress related disorder etiology (SGD)PS9.2 Clinical feature (Bedside)PS9.3 Lab investigations (Bedside)PS9.4 Treatment (SGD)</p>	<p>CT 1.14 Describe and discuss the pharmacology of various anti-tuberculousagents, their indications, contraindications, interactions and adversereaction( SGD)</p>

WEEK 2

<p>THU</p>	<p>DR9.1 LEPROSY – Etiology, classification, clinical features(SGD/BED SIDE CLINIC/CASE SCENARIO/CASE PRESENTATION)</p> <p>DR9.2 Demonstration of clinical features and neurological examination(BED SIDE CLINIC/DOAP)</p> <p>DR9.3 Observe the performance of a slit skin smear(BED SIDE CLINIC/DOAP)</p>	<p>Blood banking and transfusion PA22.4(SGD))CNS PA35.3.4(DOAP)CNS PA35.3(DOAP)Endocrine system PA32.2-PA32.2.9(SGD)</p>	<p>PS5.1 Schizophrenia Etiology (SGD)PS5.2 clinical features (Bedside)PS7.1 Bipolar disorder Etiology (SGD)PS7.2 clinical features (Bedside)</p>	<p>CT 1.16 Describe the appropriate precautions, screening, testing and indications for chemoprophylaxis for contacts and exposed health care workers Bedside clinic, Small group discussion CT 1.17 Define criteria for the cure of Tuberculosis; describe and recognise the features of drug resistant tuberculosis, prevention and therapeutic regimens small group discussion CT 1.18 Educate health care workers on National Program of Tuberculosis and administering and monitoring the DOTS program DOAP Session</p>
<p>FRI</p>	<p>DR10.1 SYPHILIS – Etiology, microbiology, classification and clinical features(SGD/BED SIDE CLINIC/ CASE SCENARIO)</p> <p>DR10.6 Etiology , clinical features of non syphilitic STD ( chancroid, donovanosis,LGV)(SGD/BED SIDE CLINIC/CASE SCENARIO)</p>	<p>Written exam Viva Skill assessment</p>	<p>ASSESSMENT – written, skill assessment, viva</p>	<p>PH 1.44 Describe the first line antitubercular drugs, their mechanisms of action, side effects and doses. PH 1.45 Describe the drugs used in MDR and XDR Tuberculosis</p>









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