

THIRD YEAR MBBS

Module Name: CVS-II

Session 2022-23



Abbottabad International Medical Institute,
Abbottabad

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1. Overview

Program	MBBS
Year	Third Year MBBS
Module Name	CVS-II
Contact Hours	57 Hours
Pre-requisites of the course	<ol style="list-style-type: none"> 1. Anatomy 2. Physiology 3. Biochemistry
Infrastructure Requirements	<ol style="list-style-type: none"> 1. Lecture Halls 2. Demo Room 3. Museum 4. Laboratory

Faculty Responsible for Module

Sr. No	Faculty	Designation	Department
	Block Coordinator		
	Prof/Dr. Shagufta Shafi	Head of Department	Forensic Medicine
	Module Coordinator		
	Dr. M. Huzaifa Aurangzeb	Demonstrator	Forensic Medicine
	Module Committee		
1.	Dr. Muhammad Qasim	Assistant Professor	Pathology
2.	Dr. Rehana Rasool	Assistant Professor	Community Medicine
3.	Dr. Najib	Demonstrator	Pharmacology
4.	Dr. Amber	Assistant Professor	Medicine
5.	Dr. Adnan	Assistant Professor	Pediatrics
6.	Dr. Atif Nawaz	Assistant Professor	Anatomy
7.	Dr. Asma Shams	Demonstrator	Physiology
8.	Dr. Osama Siddiqui	Demonstrator	Biochemistry

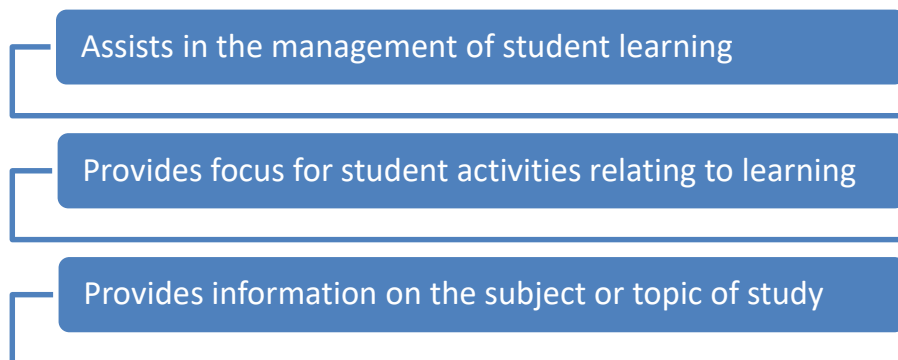
2. INTRODUCTION

What is Study Guide?

“An aid, usually in the form of printed notes designed to assist students with their learning.” *

Role of Study Guide

Study guides have three roles in facilitating learning



*AMEE Medical Education Guide No 16: Study guides----their use and preparations

- 1.1 Helps students to plan their learning in line with the learning outcomes.
- 1.2 Facilitates students to make best use of the learning opportunities provided
- 1.3 Helps teacher to adopt appropriate learning strategies lectures, small group teachings, clinical skills, demonstration, tutorial and case-based learning that will be implemented to achieve the course objectives.
- 1.4 Provides knowledge about the content of the course
- 1.5 Helps students to prepare for the assessment which is part of the educational program.
- 1.6 Facilitates students to respond appropriately to the educational environment of the institution.
- 1.7 Assists students to contact the concerned faculty member in case of any difficulty.
- 1.8 Provides information about the learning resources such as Text books, reference books, web- links and journals for students to consult in order to maximize their learning.
- 1.9 Includes information on the assessment methods formative as well as summative that will be held to determine every student’s achievement of objectives.
- 1.10 Provides information related to examination policy, rules and regulations.

3. CURRICULUM FRAMEWORK

Integrated Curriculum: Integrated curriculum is an educational approach that emphasizes interdisciplinary instruction, where students learn through the integration of knowledge from multiple subjects. This approach aims to create a more meaningful and engaging learning experience for students by connecting various subjects and disciplines into a unified curriculum.

S. No.	Subject	Lecture Topic	Topic Objectives	Teachig Hours	Mode of Teachig	Assessme nt Tools
Theme 1: Chest pain						
1.	Anatomy	Gross anatomy of heart, valves and coronary arteries	Describe surface anatomy of the heart and heart valves	1	LGD and Models	MCQ's
			Describe the anatomy of coronary circulation			
			Enumerate heart valves and describe their gross morphology			
2.	Biochemist ry	Lipoproteins and cholesterol	1 Classify and Describe types of lipoproteins	1	LGD	MCQ's
3.			Summarize cholesterol synthesis			
4.	Pathology	Atherosclerosis	Discuss the risk factors, Morphology, pathological changes and consequences of Atherosclerotic plaque	1	LGD	MCQs And OSPE
5.		Ischemiaandinfarction	Define Ischemia and infarction, and differentiate it from infarction		LGD	
6.			Discuss Classification and pathophysiology of ischemic heart disease			
7.			Discuss pathophysiology of myocardial infarction			
8.	Pharmacol ogy	Antianginal drugs	Classify antianginal drugs	1	LGD	MCQS
9.			Explain mechanism of action, pharmacokinetics and adverse effects of organic nitrates and calcium channel blockers			
10.			Explain the rationale for use of β -adrenergic blockers			

			and sodium channel blocker in the management of angina pectoris			
11.	Lipid lowering drugs		Briefly describe the types of dyslipidemias	2	LGD	MCQS
12.			List the lipid lowering drug classes			
13.			Explain the mechanism of action, effect on serum lipid profile and adverse effects of each of the five drug classes			
14.			Discuss drug-drug interaction of lipid lowering drugs			
15.	Anticoagulant drugs		Classify anticoagulant drugs	2	LGD	MCQS
16.			Discuss mechanism of action, uses of Unfractionated heparin			
17.			Compare low molecular weight and Unfractionated heparin			
18.			Describe adverse effects of heparin and treatment of heparin overdose			
19.			Describe mechanism of action and uses of direct Xa and IIa inhibitors			
20.		Describe mechanism of action and uses of warfarin				
21.		Describe adverse effects of warfarin and treatment of warfarin overdose				
22.		Compare heparin and warfarin in terms of mechanism and onset of action				
23.		Explain monitoring of anticoagulant therapy				
24.	Antiplatelet and thrombolytic drugs		Classify antiplatelet drugs	1	LGD	MCQS
25.			List indications of antiplatelet therapy			
26.			Explain the mechanism of action and adverse effects of each antiplatelet drug group			
27.			Name thrombolytic drugs and explain their mechanism of action, uses and adverse effects			
28.	Forensic Medicine	Chest trauma	Describe heart injuries caused by regional injuries	1	LGD	MCQS
29.			Discuss chest wall injuries in general			

30.			Enumerate the complications of rib fracture			
31.		Sudden death	Define sudden death	1	LGD	MCQS
32.	Explain the causes of sudden death					
33.	Describe autopsy findings in sudden death					
34.	Describe the medico-legal importance of sudden death					
35.	Community Medicine	Non communicable diseases: Cardiovascular diseases of public health importance	Define Cardiovascular disease (CVD)	2	LGD	MCQS
36.			Elaborate the concept of CVD risk stratification			
37.			Describe the epidemiology of cardiovascular diseases and explain cardiovascular diseases of Public Health importance globally and in Pakistan			
38.			Explain the known risk factors of CVD and cultural, racial and gender difference in Prevalence and incidence			
39.		Hypertension	Describe the epidemiology of hypertension and its public Health importance globally and in Pakistan			
40.	General Medicine/Cardiology	Coronary Heart disease	Discuss CAD risk factors and strategies to reduce them	1	LGD and Case Based Discussions	MCQS and OSCE
41.	Discuss strategies for primary and secondary prevention of CHD in outpatients setting					
42.	Define chronic stable angina, its clinical signs and symptoms, laboratory findings, imaging techniques for assessment of it and management protocols Discuss coronary vasospasm and angina with normal coronary Angiograms					
43.	Define Acute coronary syndrome					

44.		Acute coronary syndrome	Explain the spectrum of illness in ACS and relevant management steps	1	LGD and Case Based Discussions	MCQS and OSCE
45.	Describe the clinical features and steps of the management of Myocardial infarction					
46.	Describe risk stratification in myocardial infarction					
47.	Describe complications of acute MI					
48.		Hypertrophic cardiomyopathy	Discuss clinical features, imaging protocols, risk stratification and short/long-term management of hypertrophic Cardiomyopathy		LGD and Case Based Discussions	MCQ'S
49.	PRIME/	Informed consent	Obtaining informed consent from a patient before for an invasive procedure	1	LGD	MCQ's

Themell: Blood Pressure

50.	Pathology	Blood pressure	Describe the mechanisms of blood pressure regulation	2	LGD	MCQ'S and OSCE
51.			Classify shock		LGD	
52.		Shock	Describe the pathophysiology and types of shock		LGD	MCQ'S
53.			Describe the stages of shock			
54.			Define sepsis and septic shock			
55.			Discuss causes, pathogenesis, and laboratory findings in shock			
56.			Discuss Disseminated intravascular coagulation in the context of sepsis			
57.		Describe classification and pathophysiology of Hemorrhage				
58.			Hypertension	Describe the causes, Pathogenesis, morphology and complications of Hypertension	1	LGD
59.		Aneurisms	Discuss pathophysiology of hypertension in pregnancy	1	LGD	MCQ'S

60.			Describe the etiology, morphology and manifestations of vascular aneurisms			
61.			Describe the causes, Pathogenesis and types of Aortic Aneurysm			
62.		Aortic dissection	Describe the pathogenesis, morphology and clinical features of Aortic Dissection	1	LGD	MCQ'S
63.		Vasculitis	Define Vasculitis			
64.			Classify vasculitides			
65.			Describe the immunological mechanisms of non-infectious Vasculitis			
66.			Describe the morphology and clinical features of Giant cell arteritis			
67.			Describe the morphology and clinical features of Takayasu arteritis			
68.			Describe the morphology and clinical features of Polyarteritis nodosa			
69.			Describe the morphology and clinical features of Kawasaki disease			
70.			Describe the morphology, serological markers and clinical Features of Wegener granulomatosis			
71.			Describe the morphology and clinical features of Thromboangitis Obliterans			
72.		Diseases of veins	Differentiate between thrombophlebitis and Phlebothrombosis	1	LGD	MCQ'S
73.			Describe the etiology and clinical features of varicose veins			
74.			Enlist the benign and malignant tumors of the arteries and veins			
75.	Pharmacology	Antihypertensive drugs	Classify antihypertensive drugs	2	LGD	MCQ'S
76.			Discuss role of diuretics in the management of hypertension			
77.			Discuss the role of ACE inhibitors, Angiotensin receptor-blocking agents, Renin inhibitor in hypertension			
78.			Explain the rationale for the use of β -blockers, α -adrenoceptor			

			blocking agent, centrally acting sympatholytic drugs in hypertension			
79.			Describe the direct vasodilators (mechanism of action and drug toxicity) in relation to antihypertensive drug therapy			
80.			Describe the role of Calcium channel blockers in hypertension			
81.	General Medicine/ Cardiology	Hypertension	Define and classify hypertension	1	LGD	MCQ'S
82.			Discuss drug treatment protocols for hypertension			
83.			Describe the risk factors and complications of hypertension			
84.			Describe the management of hypertensive emergencies and Urgencies			
85.	Forensic medicine	Cardiac poisons	Classify Cardiac Poisons	1	LGD	MCQ's and OSPE
86.			Describe the characteristic, clinical signs/symptoms, treatment and medico legal aspects of cardiac glycosides			
87.			Discuss cardiac effects of methylphenidate, cocaine and Ice			
88.			Describe the characteristic, clinical signs/symptoms, treatment and medico legal aspects of Oleander			
89.	PRIME/MEDICAL EDUCATION	Counseling skills	Develops counseling skills in professional life	1	SGD	MCQ's
Theme III: Shortness of breath						
90.	Physiology	Cardiac cycle	Outline major events in cardiac cycle. Discuss physiology of heart sounds and murmurs	1	LGD	MCQ's
91.	Pathology	Congestive heart failure	Describe the types, etiology, pathogenesis, and clinical features of congestive heart failure	2	LGD	MCQ's
92.		Cardiomyopathies	Describe the Pathological patterns, causes, morphological			

			Changes and clinical features of Cardiomyopathies			
93.		Congenital heart diseases	Describe the Etiology, Pathogenesis and clinical features of Tetralogy of Fallots, ASD, VSD and pulmonary stenosis			
94.		Valvular heart diseases	Describe the Etiology, pathogenesis and clinical features of Aortic stenosis, Aortic regurgitation, Mitral stenosis and Mitral Regurgitation			
95.		Rheumatic fever	Discuss pathophysiology and laboratory findings in rheumatic Fever	1		MCQ's and OSPE
96.		Rheumatic heart disease	Discuss pathological changes and morphology of rheumatic heart disease			
97.		Thrombosis and Embolism	Describe the mechanism and pathogenetic mechanisms of Vascular thrombosis			
98.	Enlist hypercoagulable states Define embolism					
99.	Discuss types of embolism					
100.	Describe the etiology, pathogenesis, morphology and clinical Features of pulmonary embolism					
101.		Endocarditis	Discuss Etiology, Pathogenesis, Morphology, diagnostic criteria, Clinical features and complications of infective Endocarditis	1		MCQ's
102.			Discuss the types of non-infected vegetation			
103.	Pharmacology	Drugs used in heart failure	Define the different classes of the drug used in the treatment of heart failure	2	LGD	MCQ's
104.			Explain the pharmacological effects, clinical uses, adverse effects and drug interactions of digitalis glycosides			
105.			Explain the signs symptoms and treatment of digoxin overdose			
106.			Enlist positive inotropic drugs (other than digoxin) that are used in heart failure			
107.			Classify the five major groups of diuretic drugs and relate them to their site of action			
108.			Discuss the mechanism of action, clinical applications and adverse effects of carbonic anhydrase enzyme inhibitors, osmotic diuretics, thiazide			

			diuretics, loop diuretics and potassium sparing diuretics			
109.			Enlist potassium sparing and potassium losing diuretics			
110.			Describe the effect of different classes of antiarrhythmic drugs on membrane potential of cardiomyocytes Classify antiarrhythmic drugs	2	LGD	
111.	GeneralMedicine/Cardiology	Heart failure	Explain the mechanism of action of all the classes of antiarrhythmic drugs	1	LGD	MCQ's and OSCE's
112.			Discuss the adverse effects and clinical uses of anti arrhythmic drugs			
113.			Discuss work up and management of pulmonary edema			
114.			Enlist and explain causes of heart failure			
115.			Describe workup and management of heart failure			
116.			Disorders of heart rate and rhythm			
117.		Describe the etiology, ECG findings and management of Atrial fibrillation Discuss types, workup and management of ventricular arrhythmias				
118.	Pulmonary embolism	Describe the etiology, clinical features and diagnostic workup of Pulmonary embolism	1		MCQ's	
119.		Discuss risk stratification and management of pulmonary embolism				
120.	Myocarditis Pulmonary hypertension	Discuss cardiac causes of pulmonary hypertension and outline their management	1		MCQ's	
121.		Discuss causes and management of myocarditis				
122.	Pericardial diseases	Define and classify pericarditis	1		MCQ's	
123.		Discuss clinical findings and treatment of pericarditis				

124.	Pediatrics	Cyanotic and Acyanotic congenial heart disease	Describe the etiology and management of pericardial effusion	1	LGD	MCQ's and OSCE
125.			Delineate the difference between the acyanotic and cyanotic heart disease conditions			
126.			Enumerate the various defects, involving both conditions.			
127.		Rheumatic fever	Describe the etiology of rheumatic fever	1		MCQ's
128.			Describe Duckett Johns criteria for diagnosis of RF			
129.	PRIME/MEDICAL EDUCATION	SWOT Analysis	Discuss about primary and secondary prophylaxis of rheumatic heart disease	1	LGD	MCQ's
130.			Perform SWOT analysis for a particular task			

PRACTICAL ROTATION

S.No	Subjects	Topic's	Learning Objectives	Learning Modalities	Clinical Hours
1.	Pharmacology	Myocardial Infarction	Construct a prescription for a patient with Myocardial Infarction	LGD	1.5
2.		Hypertension	Construct a prescription for a patient with Hypertension	LGD	1.5
3.		Congestive Cardiac Failure	Construct a prescription for a patient with Congestive Cardiac Failure	LGD	1.5
4.	Pathology	Lipid Profile	Demonstrate Estimation of total cholesterol	LGD	1.5
5.		Hemangioma	Identify the morphological changes occurring in Hemangioma	Slide discussion and Interactive Lecture	1.5
6.	Forensic medicine	Cardiac toxins	Identify the following cardiogenic toxins: <ul style="list-style-type: none"> • Digitalis 	LGD	1.5

			<ul style="list-style-type: none"> • Cannabis • Heroin 		
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4. LEARNING METHODOLOGIES

1. Large Group Discussion (LGD)
2. Small Group Discussions (SGDs)
3. Case Based Discussions (CBDs)
4. Clinical Rotations
5. Self-Directed Learning (SDL)

4.1 Large Group Discussion

Large Group Discussion are different from conventional lectures. Lectures are made interactive when the teacher or instructor discusses the topic or common clinical scenario by using pictures, radiographs, videos of patient interaction etc. Students are actively involved in the learning process when they are asked questions, are given small tasks where they can apply knowledge gained during the session.

4.2 Small Group Discussions (SGDs)

SGD allows students to actively participate in learning process and enables them to clarify concepts and acquire psychomotor skills and attitude. Sessions are planned in a structured way by using clinical cases , patient interviews or discussion topics. Students are encouraged to share their concepts and are motivated to give opinions and apply basic knowledge gained from lectures and self study. Role play is an effective small group strategy to sensitize students with real life situations. Teacher asks ask probing questions, rephrase and summarize to help clear the concepts

4.3 Case- Based Discussions

Case-Based Discussion is a strategy in which learning is focused around a clinical scenario. List of questions is developed regarding the case under discussion and students are encouraged to discuss their ideas and answer the questions applying relevant basic or clinical knowledge acquired during the course. Usually, common clinical cases are selected for discussions.

4.4 Clinical Rotations

4.5 Self Directed Learning

Self-Directed Learning is process where student take initiative with or without the help of others. Students identify their learning needs and map out their

learning goals. They choose and follow learning strategies of their own choice and evaluate the learning outcomes by themselves.

5. OBJECTIVES & LEARNING STRATEGIES

Abbreviations & Acronyms

IL: Interactive Lectures

SGD: Small Group Discussion

MCQ: Multiple Choice Question

SAQs: Short Answer Questions

Demo: Demonstration

6. LEARNING RESOURCES

Sr. No	Subject	Text Books
1.	Community Medicine	1. Community Medicine by Park 2. Community Medicine by Mlllyas 3. Basic Statistics for the Health Sciences by Jan W Kuzma

2.	Forensic Medicine	<ol style="list-style-type: none"> 1. NasibR. Awan. Principles and practice of Forensic Medicine 1st ed. 2002. 2. Parikh, C.K. Parikh's Textbook of Medical Jurisprudence, Forensic Medicine and Toxicology.7thed.2005. 3.Knight B. Simpson's Forensic Medicine. 11th ed.1993. 4. KnightandPekka.Principlesofforensicmedicine.3rded.2004 5. Krishan VIJ. Text book of forensic medicine and toxicology (principles and practice). 4th ed.2007 6. DikshitP.C. Text book of forensic medicine and toxicology. 1st ed. 2010 7. Polson.Polson'sEssentialofForensicMedicine.4thedition.2010. 8. Rao.Atlas of Forensic Medicine (latest edition). 9. Rao.Practical Forensic Medicine 3rd ed ,2007. 10. Knight: Jimpson's Forensic Medicine 10th 1991,11th ed.1993 11. Taylor'sPrinciplesandPracticeofMedicalJurisprudence. 15thed.1999
3.	Pathology	<ol style="list-style-type: none"> 1. Robbins&Cotran, Pathologic Basisof Disease, 9th edition. 2. RapidReview Pathology, 4th edition byEdward F. Goljan MD
4.	Pharmacology	<ol style="list-style-type: none"> 1. LippincottIllustrated Pharmacology 2. Basicand Clinical Pharmacology by Katzung
5.	Anatomy	K.L.Moore,ClinicallyOrientedAnatomy
Reference Books		
1.		
2.		

Additional Learning Resources

Hands on	Students will be involved in practical performance by using models
Skills Lab	Acquiring of skills in a simulated environment i.e. skills lab involving experiential learning ensures patient safety and confidence building in approaching and treating the patients.
Videos	Students are encouraged to watch videos in order to familiarize themselves with the procedures and protocol which they can watch at any time as per their own convenience, as part of Self-Directed learning.
Internet Resources	Students are encouraged to use accessible internet resources for clarity of their concepts and update their knowledge.

7. ASSESSMENT METHODS

MCQs: Multiple Choice questions; Single best Type

SAQs: Short Answer Questions

OSPE/OSCE: Objective Structured Practical/Clinical examination

DOPS: Directly Observed Procedural Skills

Presentation:

Quiz:

Multiple Choice Questions

1. Single best type MCQs having five options with one correct answer and four distracters are part of assessment.
2. Correct answer carries one mark, and incorrect will be marked zero. Rule of negative marking is not applicable.
3. Students mark their responses on specified computer-based sheet designed by Khyber Medical University.

Short Answer Questions

1. Short-answer questions are structured way of asking open-ended questions that require students to create their answers based on their knowledge.
2. Commonly used in examinations to assess the depth of knowledge and understanding.
3. SAQs will only be included in formative assessment.

Objective Structured Practical/Clinical Examination

1. Nine OSCE stations are used for formative as well as summative assessment.
2. Time allocated for each station is five minutes as per Examination rules of Khyber Medical University, Peshawar.
3. All students are rotated through the same stations.
4. Stations used are unobserved, observed, interactive and rest stations.
5. On unobserved stations, models, lab reports, radiographs, flowcharts, case scenarios may be used to assess cognitive domain.
6. On observed station, examiners don't interact with candidate and just observe the performance of skills /procedures.
7. On interactive station, examiner ask questions related to the task within the allocated time.
8. On rest station, students are not given any task. They just wait to move to the next station

Directly Observed Procedural Skills

The Direct observation of procedural skills (DOPS) is a tool used for workplace-based assessment. The aim of this strategy is to promote learning for students where teacher provides structured feedback on performance.

The purpose of the DOPS is to enable examiners to provide structured feedback. Few of the examples are: -

1. Communication skills
2. Demonstrate knowledge of procedure
3. Organisation, time management and documentation

Presentation

Students are given topics for presentation either individually or in groups. They are encouraged to prepare presentations on power point to enhance their understanding of the topic and IT Skills.

Quiz

To evaluate the knowledge of the students, well-tailored quiz is conducted.

8. INTERNAL ASSESSMENT CRITERIA

- 10% weightage of Internal Assessment in professional exam is policy of Khyber Medical University.
- The total marks for internal assessment in Paper I are 12.
- 6 marks are given for theory and 6 marks for OSPE.
- For theory portion, a block exam will be conducted at the end of block by the department. There will be a total of 120 MCQS in the exam each having one mark.
- These 120 marks would later on be converted to 6 marks.
- For OSPE portion, an OSPE will be conducted and there will be a total of 20 stations.
- These 20 stations would have 12 OSPE/OSCE stations and 8 viva stations each having 6 marks.
- Total Marks of the 20 stations i.e. 120 marks would be later converted to 6 marks.

Year 3 Professional Exam in System-based Curriculum						
Theory paper	Modules	Theory marks	Internal assessment theory (10%)	OSPE/OSPE	Internal assessment OSPE/OSPE (10%)	TOTAL MARKS
Paper G	Foundation-II	120	14	120	14	268
	Inf.&Inflamm.					
Paper H	Multisystem Blood	120	13	120	14	267
	MSK-II					
Paper I	CVS-II	120	13	120	12	265
	Respiratory-II					
TOTAL MARKS		360	40	360	40	800

Paper-I (CVS-II and Respiratory -II Module)

Table-5: MCQs

Subject	CVS-II	Respiratory - II	Total MCQs
Pharmacology	12	5	17
Pathology	20	22	42
Forensic medicine	4	9	13
Community medicine	2	6	8
ENT	0	6	6
PRIME	2	1	3
Research	1	1	2
Medicine	13	2	15
Pediatrics	3	5	8
Anatomy	1	1	2
Physiology	1	1	2
Biochemistry	1	1	2
Total	60	60	120

Table-6: OSPE

Subject	OSPE/OSCE	Viva stations	Total*
Pharmacology	5	2	7
Pathology	2	2	4
Forensic medicine	3	2	5
Community medicine	0	2	2
Medicine (history and physical examination)	1	0	1
Pediatrics (history and physical examination)	1	0	1
Total	12	8	20

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

9. EXAMINATION RULES & REGULATIONS

1. One class test of the subject will be held monthly, marks of which will be included in internal assessment. Marks for class test can vary according to syllabus and teachers' choice
2. One module and one Block exam will be taken after completion of module and block respectively.
3. Pre-prof Exam comprising 120 MCQs will be conducted at the end of session before prep leaves.
4. The pattern of Pre-prof will be same as the Professional Exam taken by Khyber Medical University, Peshawar.
5. OSPE/OSCEs will be conducted at the end of block as well as pre-prof Exam.

10. Exam Blueprint

Paper-I (CVS-II and Respiratory -II Module)

Table-5: MCQs

Subject	CVS-II	Respiratory - II	Total MCQs
Pharmacology	12	5	17
Pathology	20	22	42
Forensic medicine	4	9	13
Community medicine	2	6	8
ENT	0	6	6
PRIME	2	1	3
Research	1	1	2
Medicine	13	2	15
Pediatrics	3	5	8
Anatomy	1	1	2
Physiology	1	1	2
Biochemistry	1	1	2
Total	60	60	120

Table-6: OSPE

Subject	OSPE/OSCE	Viva stations	Total*
Pharmacology	5	2	7
Pathology	2	2	4
Forensic medicine	3	2	5
Community medicine	0	2	2
Medicine (history and physical examination)	1	0	1
Pediatrics (history and physical examination)	1	0	1
Total	12	8	20

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

11. FEEDBACK ON EXAMINATION

1. Students' feedback on assessment strategies will be taken in a preformed Performa for feedback after every i.e., block exam and pre-prof.
2. Feedback of theory as well as OSPE/OSCE & Viva will be taken.
3. Department of Medical Education & Quality Enhancement Cell in collaboration with Exam Cell of AIMI is responsible to conduct this exercise.

12.ACADEMIC CALENDAR

ACADEMIC CALENDAR 2022-23 AIMC											
YEAR	MONTH	Mon	Tue	Wed	Thu	Fri	Sat	Sun	ACADEMIC EVENTS	PUBLIC HOLIDAYS	
2022	December				1	2	3	4			
		5	6	7	8	9	10	11			25 th December 2022 Quaid's Day
		12	13	14	15	16	17	18		Institutional Management Committee (IMC) Meeting	
		19	20	21	22	23	24	25			
2023	January	26	27	28	29	30	31			Commencement of Classes 2 nd Year MBBS	
								1		Winter Vacations	
		2	3	4	5	6	7	8			
		9	10	11	12	13	14	15			
		16	17	18	19	20	21	22			
	February	23	24	25	26	27	28	29			
		30	31								
				1	2	3	4	5			5 th February Kashmir Day
		6	7	8	9	10	11	12			
	March	13	14	15	16	17	18	19			
		20	21	22	23	24	25	26		Commencement of Classes 1 st , 3 rd , 4 th & Final Year MBBS	
		27	28							Medical & Dental Examination 1 st year MBBS	
				1	2	3	4	5			
	April	6	7	8	9	10	11	12			
		13	14	15	16	17	18	19			
		20	21	22	23	24	25	26			
		27	28	29	30	31					
	May						1	2		Exam Block N Final Year MBBS *	
		3	4	5	6	7	8	9		Exam Block D 2 nd Year MBBS Theory & OSPE *	
		10	11	12	13	14	15	16		Exam Block A 1 st Year MBBS Theory & OSPE *	
		17	18	19	20	21	22	23		Exam Block G 3 rd Year MBBS Theory & OSPE *	
	June	24	25	26	27	28	29	30		Exam Block J 4 th Year MBBS*	Eid ul Fitr 17 th to 29 th April
		1	2	3	4	5	6	7			1 st May Labor Day
		8	9	10	11	12	13	14		International Thalassemia Day	
		15	16	17	18	19	20	21		Exam Block E 2 nd Year MBBS *	
	July	22	23	24	25	26	27	28			
		29	30	31						World No Tobacco Day	
					1	2	3	4		Spring Festival	
		5	6	7	8	9	10	11		Institutional Management Committee (IMC) Meeting	
	August	12	13	14	15	16	17	18		World Blood Donor Day	
		19	20	21	22	23	24	25		Exam Block O Final Year MBBS *	
26		27	28	29	30					Eid ul Azha 26 th June to 1 st July	
							1	2		Exam Block B 1 st Year MBBS *	
September	3	4	5	6	7	8	9		Exam Block C 1 st Year MBBS *		
	10	11	12	13	14	15	16		Exam Block F 2 nd Year MBBS *		
	17	18	19	20	21	22	23		Sports Week	Aashura	
	24	25	26	27	28	29	30				
October	31										
		1	2	3	4	5	6		Exam Block H 3 rd Year MBBS *		
	7	8	9	10	11	12	13		Exam Block K 4 th Year MBBS *		
	14	15	16	17	18	19	20			14 th August National Day	
November	21	22	23	24	25	26	27				
	28	29	30	31							
					1	2	3		Exam Block I Exam 3 rd Year MBBS *		
	4	5	6	7	8	9	10				
December	11	12	13	14	15	16	17		Exam Block L Final Year MBBS *		
	18	19	20	21	22	23	24		Exam Block P Final Year MBBS *	27 th September Eid Milad-ul-Nabi	
	25	26	27	28	29	30					
							1		Exam Block M1, M2 4 th Year MBBS *		
January	2	3	4	5	6	7	8				
	9	10	11	12	13	14	15				
	16	17	18	19	20	21	22				
	23	24	25	26	27	28	29		Breast Cancer Awareness Day		
February	30	31									
			1	2	3	4	5				
	6	7	8	9	10	11	12				
	13	14	15	16	17	18	19				
March	20	21	22	23	24	25	26		Exam Block Q Final Year MBBS *		
	27	28	29	30							
					1	2	3		World AIDS Day		
	4	5	6	7	8	9	10				
April	11	12	13	14	15	16	17		Institutional Management Committee (IMC) Meeting		
	18	19	20	21	22	23	24				
	25	26	27	28	29	30	31				
										25 th December Quaid's Day	

* Exact Dates for all the block exams will be announced later

More than 75% attendance is mandatory as per Khyber Medical University Examination policy to sit in the pre-prof and Final Professional Examination

In case of Medical Leave or any other unforeseen situation, refer to Exam Policy.

13. MODEL QUESTIONS

Multiple Choice Questions

Question: Diatoms in bone marrow are seen in death due to :

- A. CO poisoning
- B. Drowning**
- C. Electrocution
- D. Overlying
- E. Strangulation

KEY : B

OSCE

STATION

- Name the poison ?
- Mention its active substance?
- Enlist the symptoms the patient will present after ingestion of the poison?
- What is the antidote of the poison ?
- What are the post mortem changes seen after the death of the patient due to this poison ?