

STUDY GUIDE MEDICINE



LAHORE MEDICAL AND DENTAL COLLEGE

LAHORE MEDICAL AND DENTAL COLLEGE

Study Guide Medicine 2025

Mission of LMDC

The Lahore Medical & Dental College is committed in its pursuit of excellence to providing the best academic facilities and atmosphere to its students.

Our mission is to: "Train future leaders of medicine who set new standards in knowledge, care and compassion".

The well qualified and committed faculty of LMDC provides combination of nurturing support and challenge to the students to reach their maximum potential.

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DEAPRTMENTAL CONSULTANTS / HIERARCHY PLAN

Medicine department teaching staff consists of

Name	Designation	Pictures	Qualification
Prof. Wasim Amer	Head of Department		FCPS
Prof. Shamail Zafar	Prof of Medicine		FCPS
Prof. Asad Ullah Ijaz	Prof of Medicine		FCPS
Prof. Sarah Shoaib	Prof of Medicine		FCPS
Dr. Sohail Nasir	Associate Professor	San	FCPS
Dr. Mehrin Farooq	Associate Professor		FCPS
Dr. Syed Khurram Shehzad	Assistant Professor		MRCP

INTRODUCTION

Medical education is a life-long process and MBBS curriculum is a part of the continuum of education from pre-medical education, MBBS, proceeding to house job, and post-graduation. PM&DC outlines the guiding principles for undergraduate medical curriculum and has defined the generic competencies and desired outcomes for a medical graduate to provide optimal health care, leading to better health outcomes for patients and societies. These generic competencies set the standards of care for all physicians and form a part of the identity of a doctor. Each competency describes a core ability of a competent physician. This study guide will give an insight to the students about all these competencies and how to plan their educational activities in the subject of medicine for the three years period.

PURPOSE OF GUIDE:

To facilitate undergraduate students to learn subject of Medicine in an effective manner, by enlightening them regards organization of the learning program, facilitates guides students in managing their studies through the academic year and guidance on assessments methods, exam rules and regulations.

TARGET AUDIENCE

 $1^{\text{st}},\,2^{\text{nd}},\,3^{\text{rd}},\,4^{\text{th}}$ and 5^{th} year MBBS students

DURATION OF FINAL YEAR SESSION:

APRIL 2025- DECEMBER 2025

TEACHING SYSTEM

1st, 2nd and 3rd Year ----- Modular System
4th and Final Year ----- Traditional System

LEARNING OBJECTIVES (knowledge, skills, attitude)

- to equip the students with specific knowledge, essential skills and appropriate attitude towards the human body
- to become problem solvers, dealing effectively with familiar and unfamiliar problems
- to become lifelong learners
- to direct their own learning and evaluate this activity
- to be able to reason critically and make justifiable decisions regarding patient management
- to practice evidence-based medicine
- to always ensure patient safety
- to ensure compliance with the legal system as it impacts health care and the PM&DC regulations
- to adopt a multidisciplinary approach for health promoting interventions
- Medical graduates should be able to demonstrate professional values of self and professional accountability, honesty, probity, and ethics
- Medical and dental graduates are expected to demonstrate exemplary professional conduct
- to be able to understand the pathogenesis of specific diseases
- to be able to take a thorough focused history and identify the patient's risk factors related to the disease process
- to be able to perform a physical examination on a patient, to diagnose specific diseases and rule out other diseases
- to formulate a provisional diagnosis with justification, and the likely differential diagnoses
- to be able to select appropriate hematological, biochemical and microbiological investigations and interpret their reports to confirm the diagnosis
- to be able to select specific radiological investigations for specific diseases
- to be able to apply evidence-based medicine concepts for the medical treatment of different diseases
- to be able to write prescriptions in appropriate format according to the disease

COURSE TO BE STUDIED (syllabus)

The course outline is as follows:

During three years the students will be taught all these topics.

By the end of five years, medical students should be able to identify and discuss the common causes of common clinical presentations. Causes in detail can be discussed under various other headings.

Ger	neral Medicine
Fev	er
Ede	ema

Headache
Drowsiness and unconsciousness
Clubbing
Cough
Sputum and hemoptysis
Chest pain.
·
Dyspnea
Shock Dainful and difficult quallowing
Painful and difficult swallowing
Anorexia, nausea and vomiting
Abdominal pain
Diarrhea and constipation
Urination abnormalities
High colored urine
Cachexia
o Involuntary movements
o Seizures
o Paresis and paralysis
o Numbness and paresthesia
Weakness and lassitude
o Dizziness and vertigo
o Joint pains
Nutrition (re-enforcement)
Geriatrics
End-of-Life Care
Preventive aspects
Ethical problems
Communication Skills
GASTROENTEROLOGY
Oral Cavity Presentations:
o Aphthous Ulcers*6, Pigmentation (Addison's), Gingivitis, Glossitis*
(Candida, Plummer-Winson Syndrome, Vitamin B2 and folate deficiency).
Nausea/Vomiting
o Hepatitis**, Gastro-enteritis**, Bacterial food poisoning, Acid peptic
disease**
Indigestion/Flatulence
o Diet, Irritable Bowel Syndrome and Gastroparesis
Dysphagia**
o Of Solids: Carcinoma Esophagus (with cachexia)* and Achalasia*.
o Of Liquids: Psychogenic and Neuro-Muscular Disorders (Dementia,
Bulbar Palsy and Scleroderma)
Heartburn and/or Epigastric pain
o Gastro Esophageal Reflux Disease**, Peptic ulcer and Gastritis**.
Diarrhea
o Acute Diarrhea due to Acute Gastro-enteritis: Viral**,
Shigellosis**, Salmonellosis**, Traveler's diarrhea**

- o Chronic Diarrhea: Amebiasis**, Giardiasis*, Malabsorption syndromes like Celiac Disease* and Tropical Sprue
- o With Haematochezia Inflammatory bowel diseases: Ulcerative colitis* and Crohn's Disease*
 - o Irritable bowel syndrome*.

Constipation*.

o Irritable Bowel Syndrome, Diet and sedentary life style, Hypothyroidism, Carcinoma descending colon

Ascites**.

o Chronic Liver Disease**, Malignancy*, Abdominal tuberculosis**.

Jaundice**.

- o Congenital hyperbilirubinemia (Gilbert Syndrome and Dubin Johnson Syndrome)
 - o Wilson"s Disease
 - o Haemolytic: Malaria, Auto-immune, Hypersplenism
- o Differentiate from Obstructive (Re-enforcement) *: Gall Stones, Carcinoma Pancreas, Cholangitis, Obstructive phase of Hepatitis
 - o Hepatitic**: Viral** (acute and chronic), Toxic and Drugs).

Haematemesis and / or Melena**.

o Esophageal varices*, Mallory Weiss Syndrome, Carcinoma Stomach, Cirrhosis of Liver** and Bleeding peptic ulcer**.

Bleeding per rectum*.

o Bacillary dysentery, Inflammatory Bowel Disease, Hemorrhoids*, and Amoebic dysentery**.

Abdominal Pain

o Acid peptic Disease**, Irritable Bowel Syndrome*, Carcinoma stomach, Pancreatitis* and Porphyria

Abdominal Mass: Visceromegaly

- o Liver: Hepatitis**, Liver abscess*, Hydatid Cyst, Congested Liver*, and Carcinoma (Primary and Secondary)
- o Spleen: Portal Hypertension, Chronic Malaria, Chronic Myeloid Leukemia, and Myelofibrosis
- o Splenomegaly with fever**: Malaria**, Typhoid**, Infective* endocarditis and Miliary tuberculosis*, Visceral Leishmaniasis,
 - o Kidney (see below)
 - o Abdominal Aneurysm

Altered Mentation: Hepatic Encephalopathy** and other causes of altered mentation.

o Drugs Contraindicated in Liver Diseases*.

KIDNEY AND GENITOURINARY SYSTEM

Lumbar pain**.

o Acute pyelonephritis**, Acute papillary necrosis, Renal Infarction, Perinephric abscess (Surgery) * and Urolithiasis (Surgery).

Oliquria/Anuria: Acute Kidney Injury**:

o Nephritides**, Acute Tubular Necrosis**, Drug-induced* (analgesic), Hypersensitivity nephropathy*, Contrast Induced* and (brief) Haemolytic-uremic syndrome

Polyuria / nocturia

- o Diabetes mellitus**, Diabetes insipidus, Hypercalcaemia**,
- o Chronic Kidney Disease: Glomerulopathies**, Nephrotic Syndrome**, Hyperuricemia, Drug-induced and Hemolytic uremic syndrome (brief)
 - o Psychogenic*.

Dysuria*: With and without frequency of Micturition (Urinary Tract infection) **

Hematuria with Dysuria*.

- o Cystic infection of the bladder**, Urethritis and Urolithiasis
- o Painless Hematuria*: Renal Tuberculosis*, Renal Cell Carcinoma* and Bladder carcinoma

Urinary incontinence

o Urge Incontinence (Urinary infection* and Bladder neck problems) and Stress

Urinary retention

o Prostatic Enlargement* and Neurogenic bladder

Impotence

o Diabetes mellitus and Psychogenic

Renal glycosuria*.

RESPIRATORY SYSTEM

Shortness of Breath

- o Episodic: Bronchial Asthma**
- o Acute: Pneumothorax**, Pulmonary Thrombo-embolism** / Acute Cor Pulmnale, Adult respiratory distress syndrome, Acute respiratory failure* (Type I and II) and Mechanical ventilation
- o Chronic: Chronic obstructive airway diseases**, Pleural Effusion**, Environmental and Occupational lung diseases (in brief: Asbestosis, Silicosis, Bagassosis, Byssinosis and Pneumoconiosis), Hypersensitivity pneumonitis and Interstitial lung disease.

Fever with Cough

- o Upper respiratory tract infection**
- o Lower respiratory tract infection: Acute and chronic Bronchitis**
- o Pneumonias**: Community acquired, Nosocomial, Lobar and Bronchopneumonia.

Cough with Sputum: Bronchiectasis* Hemoptysis: Carcinoma lung* and Tuberculosis**

Respiratory Distress

- o Type-I Respiratory Failure: Pneumonia**, Pulmonary Edema** and Pulmonary Embolism **
- o Type-II Respiratory Failure: Chronic Obstructive Pulmonary Disease (COPD) **

CARDIOVASCULAR SYSTEM

Fever with Murmur*

Rheumatic fever** and Infective endocarditis**

Shortness of breath with Murmur

Mitral, Aortic and Pulmonary valve diseases

Palpitations

Sinus tachycardia*, Paroxysmal Supraventricular Tachycardia**, Acute atrial Fibrillation and atrial flutter**, and Premature atrial and ventricular contractions**

Chest Pain**

Angina**, Myocardial infarction**, Constrictive pericarditis, and Pericardial effusion

Shortness of breath*

Orthopnea and/or Paroxysmal Nocturnal Dyspnea**, Left Ventricular Failure**, Congestive Cardiac Failure**, Corpulmonale and Congenital heart diseases (brief): atrial septal defect, patent ductus arteriosus and ventricular septal defect

Hypertension**

Atherosclerosis/Arteriosclerosis** and Lipid Disorders**

Secondary Hypertension*: Renal Causes* (Polycystic Kidney, Renal Artery Stenosis, Renal Parenchymal Diseases) and Endocrine Disorders** (Gigantism, Acromegaly, Cushings, Hyperthyroidism and Pheochromocytoma)

Postural Hypotension*.

Autonomic neuropathy (Diabetes mellitus) and Drug-induced (Antihypertensives, Loop diuretics* and Nitrates)

Claudication: Peripheral vascular disease and Ischemia

Shock**: Arrhythmias (ventricular tachycardia, fibrillation) and asystole.

Syncope*: Arrhythmias, Vasovagal attack and Heat syncope

CENTRAL NERVOUS SYSTEM

Headache**.

- o Acute Severe: Sinusitis** and Subarachnoid and Intra-cerebral Hemorrhage**.
 - o Periodic: Refractive errors, Migraine* and Tension Headaches*
 - o Progressive: Space-occupying lesion
- o With Fever**: Meningitis** (Bacterial, Tuberculosis and Viral), Encephalitis** and Brain abscess.
- o Nuchal headaches/Neck pain: Muscle spasm (Tension, Postural) and Cervical spondylosis*.

Facial Pain: Trigeminal neuralgia

Squint: Cranial nerves III, IV and VI (Cavernous sinus thrombosis)

Intellectual Impairment

Impaired Memory and Dementia*

Confusional states/Delirium/Encephalopathy**: Substance abuse, Toxins and Poisons

Paralysis*.

Hemiplegia/hemiparesis/monoplegia/quadriplegia**: Thrombotic,

Hemorrhagic and Embolic

Paraplegia/paraparesis/quadriplegia*: Spinal cord compression, Secondaries in the spine, Transverse Myelitis*, Tuberculous spine*, Syringomyelia and Syringobulbia

Focal Neurological Deficit: Multiple sclerosis, Space occupying lesion and Mononeuritis multiplex

Facial Weakness: Bell"s Palsy**

- o Ptosis: Myasthenia Gravis, Horner"s Syndrome and III nerve palsy o Transient Ischemic Attack** Speech disturbances Hypertonia: Myotonia Dystrophica and Parkinsonism * Hypotonia and muscle wasting: Lower motor neuron disease,* Muscle cramps: Metabolic, Overexertion and Idiopathic Movement Disorders: o Hyperkinesia: Tremors* (Hyperthyroidism**, Anxiety*, Druginduced, Parkinsonism, Cerebellar*) o Fasciculations: Motor neuron disease and Myokymia, o Others: Athetosis, Chorea, Hemiballismus, Ballismus, Myoclonus and Carpopedal Spasm (tetany)* o Hypokinesia: Parkinson"s Disease and Drug induced o Gait abnormalities: Ataxic: Cerebellar disorder* Shuffling gait: Parkinsonism* Scissor Gait: Cerebral palsy Lurching gait: Post Cerebro-vascular accidents Waddling gait: Proximal myopathy (Thyroid disease, Cushing's disease, Vitamin deficiency, steroids Convulsions/Fits**: Tetanus, Epilepsy*, Space-occupying lesion, Head injury and Cerebro-vascular accidents Coma/ Stupor / drowsiness**: Metabolic**, Trauma, Infection** (Meningitis and Encephalitis), Poisoning, Substance abuse (alcohol), Toxins and Cerebrovascular accidents Dizziness: Malignant Hypertension and Anxiety Vertigo: Benign Positional Vertigo*, Meniere"s disease, Labyrinthitis, Upper Respiratory Tract Infections and Vertebro-basilar insufficiency Congenital Deafness (ENT) Blindness / Blurring of Vision: Occipital Infarction /Hemorrhage, Head injury / Traumatic, Visual Field Defects (pituitary lesions), Malignant hypertension, Transient monoocular blindness (Amaurosis fugax), Multiple sclerosis (associated with more deficits), Snake-bite (neurotoxins) and Druginduced Paraesthesias: Polyneuropathy / Peripheral neuropathies o Hypoesthesia: Diabetes mellitus**, Vitamin deficiencies (B6 and B12) *, Mono neuritis multiplex*, and Drug induced (INH) * o Hyperesthesia: Diabetic Burning feet syndrome and Restless leg syndrome Muscular Weakness: o Acute: Periodic Paralysis and Guillain Barre Syndrome* o Chronic: Toxic/ Drug Induced, Hypothyroidism and Hyperthyroidism,
- Vitamin D deficiency*, Motor-neuron disease
 - o Myasthenia Gravis.

MUSCULOSKELETAL SYSTEM

Joint pain and/or Joint swelling:

o Monoarthritis* or Polyarthritis*

o Large Joint involvement: Osteoarthritis, Septic arthritis*, Haemarthrosis and polyarthritis migricans* (Rheumatic fever) o Small joint involvement (Inflammatory): Rheumatoid Arthritis*, Systemic Lupus Erythematosus* and Gout* Easy Fractures: Osteoporosis* Bone Pain: Osteomalacia*, Osteomyelitis, Hyperparathyroidism, Malignancy (Multiple Myeloma, Osteosarcoma, Secondaries in the bone and Leukemias) Neck Pain: Cervical spondylosis* and Tension Dorsal Pain: Tuberculosis* Low back pain: Sciatica (Herniated disc) *, Inflammatory (Ankylosing spondylitis and Sacro-iliitis), Secondaries, Lumbar spondylosis, Mechanical/postural, Vertebral Collapse (Tuberculosis and Osteoporosis) Claudication: Spinal stenosis** Increased skin elasticity and hypermobility of joints: Ehler Danlos syndrome and Marfan's Syndrome Muscle stiffness and pain: Depression, Anti-psychotic drugs and Fibromyalgia BLOOD Pallor: Anaemias. Microcytic Hypochromic (Iron deficiency)**: Increased Loss and Decreased uptake (Malabsorption, Tuberculous and Hookworms) Macrocytic Megaloblastic** (B-12 deficiency and Folic acid deficiency), Normocytic normochromic*: Anemia of chronic inflammation, Malignancies and Renal failure Hemolytic anemia*: Hereditary (Thalassemia*, Sickle cell anemia, Hereditary spherocytosis), Acquired (Blood Transfusion incompatibility, Autoimmune and Valve replacement) Intra-corpuscular: G6P Deficiency, Malaria, Sickle cell syndromes (brief) and Thalassaemias Extra-corpuscular Intravascular o Aplastic anemia: Myelofibrosis and Drug-induced Hepatosplenomegaly (Myeloproliferative diseases). With pallor: Chronic myeloid leukemia and Kala Azar Without pallor: Polycythemia rubra vera, Essential thrombocytosis Pallor with Lymphadenopathy and/or lassitude Leukemias**: Acute and Chronic and Lymphomas**: Non-Hodgkin"s and Hodgkin"s. Blood groups and blood transfusion**. Fever with lymphadenopathy: Infectious mononucleosis Bleeding and / purpura Clotting Disorders: Decreased production and increased destruction o Von Willebrand's disease, o Disseminated intravascular coagulation (DIC) o Hemophilia o Vitamin K deficiency o Anticoagulant Therapy: Injectable and oral including anti-platelet agents

Bleeding Disorders: Epistaxis (Hypertension), Thrombocytopenia

(Immune/ Idiopathic and Acquired Thrombocytopenic purpura),

Vessel wall disorders, Thrombocytic Dysfunction and Drug-induced

bleeding (Polypharmacy).

METABOLIC AND ENDOCRINAL DISORDERS

Generalized Pigmentation

Endocrinal: Addison"s Disease, with Diabetes Mellitus

(Haemochromatosis in brief)

Drug-induced: Chloroquine, Heavy Metals and Chemotherapy

Polyuria and Polydipsia: Diabetes mellitus*** and hyperglycemic states**.

Growth Abnormalities:

Tall stature: Gigantism and Acromegaly

Short Stature: Hypothyroidism**, Obesity: Cushing"s syndrome and

Hypothyroidism**

Infertility: Hypogonadism, Primary Ovarian failure and Sheehan"s

Syndrome

INFECTIOUS DISEASES

 \cdot Common infections in the organ-systems listed above, \cdot With emphasis on those common in Pakistan: Tuberculosis, Malaria, Typhoid, Dengue, Pneumonias, Meningitides and encephalitides, Infectious mononucleosis and \cdot Those of global importance

TEACHING METHODOLOGIES FOR MEDICINE

- Interactive Lectures
- Tutorials
- Case based learning(CBL)
- Essential Skills to be learned in the skills lab
- Power point presentations by students
- Small group discussions
- Clinical ward rotations
- CPC's using modern audio-visual techniques, distant learning using electronic devices and current Information technology facilities
- Journal Club meetings
- Self-directed learning is the most vital part of this module to solve problematic cases, go through different learning resources and discuss with peers and the faculty to clarify difficult concepts

LEARNING RESOURCES

Recommended books

- Davidson's Principals and Practices of Medicine 24th Edition.
- Kumar and Clark's Clinical Medicine 10th Edition
- Essentials of Clinical Medicine by Wasim Amer 1st Edition
- Current medical diagnosis and therapeutics
- Hutchison's clinical methods 25th Edition
- Macleod's Clinical Examination 15th Edition

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• Online Journals and Reading Materials through HEC Digital Library Facility.

Technologies to be used

- Textbooks are the most important part of student learning for this subject
- Bed side learning with patients
- Hands-on activities and practical sessions to enhance the learning.
- Skills lab will be used for simulated learning of the basic skills related to the gastrointestinal system
- Videos from different web portals to familiarize the students with the procedures and protocols.
- Computer and Internet resources are essential to gather the latest information about a specific disease.

ASSESSMENT METHODS

Formative

Theory, single best multiple choice question and SEQ test at the end of each topic finished and all topics tests at end of session

Clinical ward test / End of Rotation (EOR) assessment, comprising of one long case (90 marks) and two short cases (120 marks) and one OSCE comprising of 13 stations (65 marks), 25 marks contributed by ward attendance and histories taken

Total marks= 300

Summative UHS examination (to be held at the end of 5th year MBBS)

<u>Paper-I</u> All except Paper-II

<u>Paper-II</u> will include: 1.Infectious Diseases 2.Endocrinology including Diabetes 3.Metabolic Diseases 4.Genitourinary System 5.Immunology 6. Genetics 7.Oncology 8.Water and Electrolyte Balance 9. Acid and Base Balance 10.Psychiatry 11.Dermatology

Summative examination details

					The	ory			Sub		Oral and	Int.	Sub	Grand
S.No.	Subject		SEQs			MCQs		Int. Assessment	Total	Clinical	Practical	Ass	Total	Total
1.	Medicine - I	45 marks	9 SEQs	5 marks each	45 marks	45 MCQs	1 marks each our		200			2.5	200	500
2.	Medicine - II	45 marks	9 SEQs	5 marks each	40 marks	40 MCQs	1 marks each	25	200	210	65	25	300	500

TABLE OF SPECIFICATION FOR MEDICINE EXAM

Medicine paper I MCQs table of specifications

S.NO	TOPIC	MCQs
1	CARDIOVASCULARSYSTEM	07
2	PULMONARY MEDICINE	07
3	CENTRAL NERVOUS SYSTEM	07
4	GASTROINTESTINAL SYSTEM	07
5	LIVER,PANCREAS & GALL BLADDER	06
6	BLOOD	05
7	RHEUMATOLOGY	06

Medicine paper I SEQs table of specifications

S.NO	TOPIC	SEQs
1	CARDIOVASCULARSYSTEM	02
2	PULMONARY MEDICINE	01
3	CENTRAL NERVOUS SYSTEM	01
4	GASTROINTESTINAL SYSTEM	02
5	LIVER, PANCREAS & GALL BLADDER	01
6	BLOOD	01
7	RHEUMATOLOGY	01

Medicine paper II MCQ table of specifications

S.NO	TOPIC	MCQs
1	ENDOCRINES	05(Break up is as follows)
	Thyroid	01
	Diabetes	01
	Adrenals	01
	Others	02
2	RENAL/ACID BASE/WATER & ELECTROLYTES METABOLISM	10
3	INFECTIONS/TROPICAL DISEASES	07
4	NEURO-PSYCHIATRY	10
5	DERMATOLOGY	06
6	NUTRITION, DATA/PHOTO	02

Medicine paper II SEQs table of specifications

S.NO	TOPIC	SEQs
1	ENDOCRINES	02
2	RENAL/ACID BASE/WATER & ELECTROLYTES METABOLISM	02
3	INFECTIONS/TROPICAL DISEASES	02
4	NEURO-PSYCHIATRY	02
5	DERMATOLOGY	01
	TOTAL	09

FORMATIVE AND SUMMATIVE EXAM RULE AND REGULATIONS

ATTENDANCE REQUIREMENT FOR MEDICINE AND ALLIED

- Students are expected to attend all scheduled teaching sessions and examinations
- Attendance in lectures, tutorials, and wards is mandatory. Absence from these sessions will make the students ineligible to sit the final summative assessment.
- A minimum of 85 % attendance in the lectures and wards is mandatory to appear in the summative UHS examination
- Attendance will be recorded through a log-in/log-out biometrics system
- Absence due to illness must be certified appropriately by the General Physician

<u>DEPARTMENTAL TIME TABLES</u> 5th Year MBBS Lecture Timetable

cc:-

Principal, LMDC Vice Principal, LMDC

Heads of All concerned Departments, LMDC/GTTH
HOD Medical Education, LMDC
Chief Administrative Officer / Director F&A, LMDC
Director Skills Lab, LMDC
Director IT, LMDC
Medical Superintendent, GTTH

SDL for 2 hours evening ward time.

*** Last Friday of every month CPC in Auditorium from 12:10 p.m. to 01:00 p.m.
 SDL for 1.5 hours morning ward time (Monday to Thursday) and 30 minutes on Friday.

to 12:45 p.m. and 5th Friday of every month Ward / SDL from 10:45 a.m. to 11:55 a.m.

* In the month of February, March, April, June, July, & September 2025, 1" three Fridays of every month Ward /
SDL from 10:45 a.m. to 12:45 p.m. and 4th Friday of every month Ward / SDL from 10:45 a.m. to 11:55 a.m.
** In the month of May, August & November 2024, 1" four Fridays of every month Ward / SDL from 10:45 a.m.

Security Supervisor, LMDC Class Representative (Boy/Girl) M/s Ali Tours, LMDC

Warden / Assistant Warden Hostels (Boy/Girl)

Fransport Incharge, LMDC Lecture Theatre Incharge, LMDC



DAYS





Lahore Medical & Dental College Canal Bank North, Tulspura, Lahore Phone No. 0346-4418891-98 No. LMDC/255/-72_/2025, Dated: 25-3-25



5th YEAR M.B.B.S. TIMETABLE SESSION 2020-2021 w.e.f. 03-04-2025 (session start: 03-03-2025)

	KIDAY			URSDAY	DNESDAY	UESDAY	ONDAY	S & TIME
and beauti	Lecture Theatre No. 2	Surgery-I		Surgery-II / Anaesthesia (09-10-25 to 27-11-25) Lecture Theatre No. 2	Obs. / Gynae Lecture Theatre No. 2	Surgery-II Lecture Theatre No. 2	Surgery-1 / Radiology (06-10-25 to 24-11-25) Lecture Theatre No. 2	S & TIME 08:00 a.m. to 08:50 a.m.
	Lecture Theatre No. 2	Urology		Obs. / Gynae Lecture Theatre No. 2	Orthopaedics Lecture Theatre No. 2	Paediatrics Lecture Theatre No. 2	Paediatrics Lecture Theatre No. 2	08:50 a.m. (6 09:40 a.m. 09:40 a.m. (6 10:30 a.m. 10:30 a.m. to 11:00 a.m.
Lecture I heatre No. 2	08-08-25 to 28-11-25	Dermatology 07-03-25 to 01-08-25		Medicine Lecture Theatre No. 2	Medicine Lecture Theatre No. 2	Medicine Lecture Theatre No. 2	Medicine Lecture Theatre No. 2	09:40 a.m. to 10:30 a.m.
GITH	. 10	Travel	10:30 a.m. to 10:45 a.m.	Transcription of the control of the	& Break	to GTIH	Trave	10:30 s.m. to 11:00 s.m.
Ward / SDL	.** 10:45 a.m. to 11:55 a.m.	Ward / SDL	* 10:45 a.m. to 12:45 p.m.	Ward / SDL	Ward / SDL	Ward / SDL	Ward / SDL / Skill Lab	11:00 s.m. to 02:45 p.m.
Travel to LMDC	11:55 a.m. to 12:10 p.m.	Travelto	12:45 p.m. to		LMD	T.		02:45 p.m. to
Auditorium	12:10 p.m. to 01:00 p.m.	o LMDC	to 01:00 p.m.		DC	Travel		to 03:00 p.m.

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MAJ. GEN. (R) PROF. DR. NAEEM NAQI PRINCIPAL

5th Year MBBS Clinical Timetable

NOTICE

FINAL YEAR MBBS

Time Table of Clinical Batches of Final Year MBBS with effect from 03-03-2025

Final year MBBS class has been divided in the following batches for clinical classes at GTTH:-

Batch	Roll No
A	14069, 25046, 25117, 25135, 26003, 26004, 26006, 26007, 26008, 26009, 26010, 26011, 26012 26013, 26014, 26016, 26017, 26018, 26020, 26021, 26027, 26029, 26103, 26147, 26151, 26153 26013, 26014, 26016, 26017, 26018, 26020, 26021, 26027, 26029, 26103, 26033, 26035, 26036
В	25139, 26001, 26002, 26005, 26022, 26023, 26025, 26026, 26031, 26032, 26035, 26031, 26032, 26032, 26031, 26032, 260
С	26024, 26034, 26041, 26043, 26045, 26046, 26048, 26049, 26034, 26035, 26036, 26069, 26070, 26071, 26152
D	26040, 26068, 26072, 26073, 26074, 26075, 26076, 26078, 26079, 26080, 26081, 260
E	25113, 26015, 26030, 26082, 26090, 26095, 26101, 26102, 26103, 26107, 261
F	26112, 26113, 26114, 26116, 26117, 26116, 26117, 26113, 26130, 26131, 26132, 26133, 26135, 24108, 24118, 26077, 26115, 26123, 26127, 26128, 26130, 26131, 26132, 26133, 26135, 26136, 26137, 26138, 26139, 26140, 26141, 26142, 26143, 26144, 26145, 26148, 26149, 26150

-					
1)	11	ro	tı	n	n

		Du	Hauon			
Unit	03-03-25 to 11-04-25	12-04-25 to 22-05-25	23-05-25 to 31-07-25	01-08-25 to 11-09-25	12-09-25 to 22-10-25	23-10-25 to 02-12-25
Gynae & Obs.	A	В	С	D	E	F
Pediatrics	В	A	D	С	F	Е
Surgery – I	С	D	Е	F	A	В
Surgery - II	D	С	F	Е	B	A
Medicine -I	Е	F	A	В	С	D
Medicine -II	F	E	В	A	D	С

MAJOR GENERAL PROF. NAEEM NAQI (Retired)
PRINCIPAL

4th Year MBBS Lecture Timetable

TO BE SUBSTITUTED BEARING SAME NUMBER AND DATE

Canal Bank North, Tulspura, Lahore **Lahore Medical & Dental College**

No. LMDC/ 831-55 72025, Dated: 04-02-2025 Phone No. 0346-4418891-98

4th YEAR M.B.B.S TIMETABLE SESSION 2021-2022 w.e.f. 10-02-2025

FRIDAY		THURSDAY	A 1707 SALME	WEDNESDAY	TUESDAY		MONDAY	DATS & LIME
ENT Lecture Theatre No. 7	08:00 a.m. to 08:50 a.m.	Surgery-II Lecture Theatre No. 7	08:00 a.m. to 08:50 a.m.	Community Medicine Lecture Theatre No.7	Practical Pathology Lab	08:00 a.m. to 09:30 a.m.	Pathology Lecture theatre No. 7	00:00 a.m. to 00:30 a.m.
Obs. / Gynae Lecture Theatre No. 7	08:50 a.m. to 09:40 a.m.	Pediatrics Lecture Theatre No. 7	08:50 a.m. to 09:40 a.m.	EYE Lecture Theatre No. 7	Pathology Lecture Theatre No. 7	09:30 a.m. to 10:20 a.m.	Medicine Lecture Theatre No. 7	06:50 a.m. 10 07:40 a.m.
Medicine Lecture Theatre No. 7	09:40 a.m. to 10:30 a.m.	Practical Pathology Lab	09:40 a.m. to 11:10 a.m.	Pathology Lecture Theatre No. 7	Community Medicine Lecture Theatre No. 7	10:20 a.m. to 11:10 a.m.	Surgery-1 Lecture Theatre No. 7	09:40 a.m. to 10:30 a.m.
Pathology Lecture Theatre No. 7	10:30 a.m. to 11:20 a.m.		Travel to GTTH 11:10 a.m. to 11:25 a.m. Travel to GTTH					
Community Medicine Lecture Theatre No. 7	11:20 a.m. to 12:10 p.m.	Ward / SDL		Ward / SDL / Skill Lab	Ward / SDL	11:25 a.m. to 01:35 a.m.	Ward / SDL	10:45 a.m. to 01:35 p.m.
Community Me Lecture TI / C	* 12:10 p.m.		THE PERSON NAMED IN COLUMN	Break	LMDC	Iravel		01:35 p.m. to 02:10 p.m.
Community Medicine / Research Lecture Theatre No. 7 / CPC Auditorium	* 12:10 p.m. to 01:00 p.m.	Lecture Theatre No. 7	Partella	ENT Lecture Theatre No. 7	Lecture Theatre No. 7		Community Medicine Lecture Theatre No. 7	u2:10 p.m. to u3:00 p.m.

CC:-

Principal, LM&DC
Vice Principal, LM&DC
Heads of All concerned Departments, LM&DC/GTTH

Chief Administrative Officer / Director F&A, LM&DC, Lahore.
Director Skills Lab, LM&DC
Director IT, LM&DC Medical Education Department, LM&DC

Transport Incharge, LM&DC Medical Superintendent, GTTH

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Lecture Theatre Incharge, LM&DC
Warden/Assistant Warden Hostels (Boy/Girl)
Security Supervisor, LM&DC
Class Representative (Boy/Girl)
M/s Ali Tours, LM&DC

SDL for 30 minutes practical time.

* In the month of May, August & October 2025, 1st two Fridays Community Medicine, next two Fridays

Medicine, next Friday Research in Lecture Theatre No. 7 & last Friday CPC in Auditorium.

Research in Lecture Theatre No. 7 & last Friday CPC in Auditorium.

Schedule of Skill Lab will be issued separately.

MAJ. GEN. (R) PROF. DR. NAEEM NAQI PRINCIPAL

Study Guide Medicine 2025

4th Year MBBS Clinical Timetable

NOTICE

4th YEAR MBBS

Time Table of clinical batches of 4th Year MBBS with effect from 10-02-2025.

4th year MBBS class has been divided in the following batches for clinical classes at GTTH for Surgery, Medicine, Paediatrics, Gynae/Obst., Eye, ENT:-

Batch	Roll No.
A	26019, 26028, 26051, 26126, 26129, 27006, 27008, 27015, 27028, 27030, 27036, 27037, 27038, 27055, 27076, 27124,
В	27010, 27011, 27012, 27013, 27014, 27017, 27018, 27019, 27021, 27023, 27024, 27033, 27047, 27090
С	27002, 27003, 27004, 27007, 27009, 27016, 27025, 27026, 27027, 27031, 27034, 27042, 27074, 27114, 27127
D	27005, 27040, 27043, 27045, 27048, 27049, 27052, 27053, 27054, 27093, 27113, 27141
E	27029, 27056, 27057, 27058, 27059, 27060, 27064, 27065, 27067, 27069, 27072, 27075 27091, 27094, 27103
F	27022, 27041, 27077, 27078, 27080, 27081, 27083, 27084, 27085, 27086, 27087, 27088 27089, 27102
G	26098, 27046, 27062, 27068, 27071, 27079, 27095, 27097, 27098, 27104, 27105, 27106 27107, 27108, 27109, 27119
н	27044, 27100, 27110, 27111, 27112, 27115, 27116, 27117, 27118, 27120, 27121, 27126
I	27035, 27122, 27125, 27128, 27130, 27133, 27134, 27136, 27137, 27138, 27148
J	27131, 27135, 27139, 27140, 27142, 27143, 27144, 27145, 27146, 27149, 27150, 27151 27154

				Dura	tion					
Duration/ Unit	10-02-25 to 03-03-25	04-03-25 to 26-03-25	27-03-25 to 19-04-25	20-04-25 to 13-05-25	to	05-06-25 to 26-07-25	27-07-25 to 18-08-25	to	10-09-25 to 01-10-25	02-10-25 to 24-10-25
Eye	A+B		. C+D		E+F		G+H		I+J	
Surgical Unit-I	С	D	Е	F	G	Н	1	J	Α	В
Surgical Unit-II	D	С	F	Е	Н	G	J	1	В	A
Paediatrics	Е	F	G	Н	1	J	Α	В	С	D
Gynae & Obst.	F	Е	Н	G	J	I	В	A	D	С
Medical Unit-I	G	Н	1	J	Α	В	С	D	E	F
Medical Unit -II	Н	G	J	1	В	Α	D	C.	F	Е
ENT	1+	-J	A+	В	C-	-D	E	+F	G+	Н

MAJOR GENERAL PROF. NAEEM NAQI (Retired)
PRINCIPAL

3rd Year MBBS Lecture Timetable

No. LM&DC/ Copy for information to the: 1. Principal, LMDC 2. Vice Principal, LMDC 3. Heads of All concerned Departments, LMDC/GTTH 4. HOD Medical Education, LMDC 5. Chief Administrative Officer / Director F&A, LMDC 6. Director Skills Lab, LMDC 7. Director IT, LMDC 8. Medical Superintendent, GTTH 9. Transport herburge, LMDC 10. Lecture Theatre Inchange, LMDC 11. Warden / Assistant Warden Horisto (Boy/Girl) 12. Security Supervisor, LMDC 13. Chas Representative (Boy/Girl) 14. MrS All Tours, LMDC 15. Notice Board	Pharmacology Lecture Theatre No. 11 Lecture T		THURSDAY Locture Theatre No. 11	WEDNESDAY Pharmacology Lecture Theatre No. 11 GTTT	TUESDAY Locture Theatre No. 11 Travel	MONDAY Pathology Lecture Theatre No. 11	3 YEAR M.B.B.S RAMAZAN LIMETABLE SESSION 2022-2023 W.C.I. 24-03-2023 (MODULE 12 & 13) 4 WEERS DAYS & TIME 08:00 a.m. to 08:45 a.m. to 09:00 a.m. to 19:30 a.m. to 19:30 a.m. to 19:45 a.m. to 11:45 a.m. to 12:30 p.m. to 91:15 p.m. 01:15 p.m.	
ted: CCGTTH (LIMDC	Surgery Lecture Theatre No. 11	09:		to WARD/SDL GTTH			o 09:00 a.m. *09:00 a.m. to 10:	
*SDL *SDL *SDL *SDL *SDL *SDL *SDL *SDL	Pharmacology Forensic Medicine Pathology Clinical Pharma	09:30 a.m. to 10:45 a.m. GRAND TUTORIAL Pharmacology Forensic Medicine Pathology Pathology		DL To LMDC]		30 a.m. 10:30a.m. to 10:45 a.m.	
*SDL I hour ward time. *SDL Is minutes practical time. **Forensic Medicine 1*3 weeks and Psychiatry last 2 weeks. ***Forensic Medicine 1*3 weeks and Evychiatry last 2 weeks. ***********************************	PERL Lecture Theatre No. 11	10:45 a.m. to 11:30 a.m.	Pharmacology ***Forensic Medicine/ Pathology C-FRC Clinical Pharma CHD CHD CHD CHD CHD CHD CHD CHD CHD CH	Pharmacology ***Forensic Medicine/ G+H Pathology C-FRC Clinical Pharma C+D	dicine/	Pharmacology ***Forensic Medicine/ C+D Pathology C-PRC Clinical Pharma G+H	**10:45 a.m. to 11:45 a.m.	
last t2:	tre No. 11		*****Behavioral Science/Community Medicine Lecture Theatre No. 11	Pathology Locture Theatre No. 11	Forensic Medicine Lecture Theatre No. 11	Pharmacology Lecture Theatre No. 11	11:45 a.m. to 1	
weeks. **Medicine last 2 weeks. **P Medicine last 2 weeks. **p Medicine last 2 weeks. **pelson las	******Medicine/ Community Medicine Lecture Theatre No. 11	11:30 a.m. to 12:15 p.m.	Pharmacology Lecture Theatre No. 11	Safety/Psychiatry Lecture Theatre No. 11	Pharmacology Locture Theatre No. 11	Pathology Lecture Theatre No. 11	2:30 p.m. 12:30 p.m. to 01:15 p.m.	
be issued separately. A NAEEM NAQI	Integrate with Physiology/Biochemistry Lecture Theatre No. 11	12:15 a.m. to 01:00 p.m.	Pathology Lecture Theatre No. 11	Pharmacology Lecture Theatre No. 11	Pathology Lecture Theatre No. 11	Pharmacology Lecture Theatre No. 11	01:15 p.m. to 02:00 p.m.	

3rd Year MBBS Clinical Timetable

NOTICE

3rd YEAR MBBS

Revised Time Table of clinical batches of 3rd Year MBBS with effect from 24-03-2025

3rd Year MBBS class has been divided in the following batches for clinical classes at GTTH for Surgery, Medicine, Pediatrics, Gynae/Obst. and Behavioural Sciences:-

Batch	Roll No.
A	27001, 27020, 27032, 27039, 27051, 27066, 27070, 27073, 27092, 27099, 27129
	27132, 27147, 27153, 28001, 28002, 28003, 28004, 28005 28006, 28007, 28008, 28009, 28010, 28011, 28012, 28014, 28015, 28016, 28017
В	28018, 28019, 28020, 28021, 28022, 28026, 28027, 28028
-	28030, 28031, 28032, 28033, 28034, 28035, 28036, 28037, 28038, 28039, 28040
-	28041, 28042, 28043, 28044, 28045, 28046, 28047, 28048
D	28049, 28050, 28051, 28052, 28053, 28054, 28055, 28056, 28057, 28058, 28059
U	28060, 28061, 28062, 28063, 28064, 28065, 28067
E	28068, 28069, 28070, 28071, 28072, 28074, 28075, 28077, 28078, 28079, 28080
L	28081, 28082, 28083, 28084, 28085, 28086, 28087
F	28088, 28089, 28090, 28091, 28092, 28094, 28095, 28096, 28097, 28098, 28099
Г	28100, 28101, 28102, 28103, 28104, 28105, 28106
G	28107, 28108, 28109, 28110, 28111, 28112, 28113, 28114, 28116, 28117, 28118
O	28119, 28121, 28123, 28125, 28126, 28127, 28128
1.1	28129, 28131, 28132, 28133, 28134, 28135, 28136, 28138, 28139, 28140, 28141
H	28142, 28143, 28144, 28145, 28146, 28147, 28149

Duration 11-11-25 16-09-25 14-10-25 24-03-25 23-04-25 21-05-25 | 23-07-25 18-08-25 to to 13-10-25 10-11-25 09-12-25 22-04-25 15-09-25 17-08-25 20-05-25 22-07-25 Medicine-I В C D E F G H C Medicine-II В D F E H G A C D E F G H A В Surgery-II D C F E H G B A Surgery-I В C D F G H A Medicine Allied E Surgery Allied/ D C F G B A E H Orthopaedics F E C D В Paeds/Gynae G H A

A

H Paeds and Gynae Batches further Distribution

G

Beh. Sciences

Batch	Paeds	Gynae				
G	24-03-25 to 08-04-25	09-04-25 to 22-04-25				
Н	23-04-25 to 06-05-25	07-05-25 to 20-05-25				
A	21-05-25 to 03-06-25	04-06-25 to 22-07-25				
В	23-07-25 to 04-08-25	05-08-25 to 17-08-25				
C	18-08-25 to 01-09-25	02-09-25 to 15-09-25				
D	16-09-25 to 29-09-25	30-09-25 to 13-10-25				
E	14-10-25 to 27-10-25	28-10-25 to 10-11-25				
F	11-11-25 to 24-11-25	25-11-25 to 09-12-25				



F

E

C

D

	1st Year	MBBS	
Block 1	12 hours		
Block 2	3 hours		
Block 3	15 hours		
Total hrs	30 hours		
	2nd Year	MBBS	
Block 1	15		
Block 2	5		
Block 3	10	_	
Total hrs	30 hours		•

Medicine teaching during first three years through modular curriculum.

Medicine is taught through integrating with basic subjects through interactive lectures, acquiring skills in skill labs and wards

Learning Objectives

- Understand basic medical sciences and their clinical relevance
 - Develop essential clinical skills for patient assessment

The Main focus is on

- Interdisciplinary approach for comprehensive understanding
 - Early clinical exposure for practical application
 - Emphasis on problem-solving and critical thinking

ROBUST FEEDBACK SYSTEMS:

- Feedback on attendance report is forwarded to students and parents on daily basis.
- Feedback on academic performance Academic performance report is also regularly forwarded to students and parents.
- Individual students are given feedback on their academic performance in one to one session.
- MCQ and SEQ papers are also discussed with students in small groups. Parents
 of weak students are regularly contacted.

COUNSELLING

For students will include

- Career Guidance
- Psycho-social Counselling

COUNSELING FACILITIES FOR STUDENTS:

- Senior faculty members of Medicine department are actively involved in resolving academic and non-academic issues of allocated students.
- Individual students are also referred to the student counselor, if needed