

STUDY GUIDE 2026

BLOCK-09



LAHORE MEDICAL AND DENTAL COLLEGE, LAHORE



Vision Statement

UHS is a leading University aiming to keep its graduates apt with the ever emerging global health challenges evolving educational methodologies and emerging technological advancements to maintain its distinguishable position as a Medical University.

Mission Statement

UHS shall continue to strive for producing a human resource par at excellence to cater for the health needs of the people of Punjab and Pakistan.

Mission of LMDC

“Train future leaders of medicine who set new standards in knowledge, care and compassion”.

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Introduction

UHS has introduced modular integrated MBBS curriculum 2023 from the academic session 2024-2025 and version 3.0 was released in 2025, the study guide for Block-09 is developed in order to introduce the 3rd Year MBBS students to various modules and block in the Year 3. The learning Objectives of all the Subjects included in Block -09 are added to help learners focus on key areas.

Time tables for all the modules in Block -09 are added and total contact hours for each subject are given in a tabulated manner. The books and other reading resources are mentioned to facilitate the students. Assessment tools, policy and schedule are also included. Moreover, table of specifications (ToS) for Block-09 examination is added to facilitate the learners.

DEPARTMENTS AND FACULTY INVOLVED IN BLOCK 9 TEACHING

Department Of Pathology

- **Prof. Dr. Shazia Nilofar Ibne Rasa (HOD/Professor Histopathology)**
- Prof. Dr. Saadia Chaudhary (Professor Microbiology)
- Prof. Dr. Fauzia Sadiq (Professor Chemical Pathology)
- Prof. Dr. Muhammad Shahbaz Amin (Professor Histopathology)
- Dr. Nazia Ahmad (Associate Professor Hematology)
- Dr. Sonia Tahir (Assistant Professor Microbiology)
- Dr. Muhammad Rizwan (Assistant Professor Histopathology)
- Dr. Maimoona Aslam (Assistant Professor Histopathology)
- Dr. Hira Baber (Assistant Professor Hematology)

Department Of Forensic Medicine

- **Prof. Dr. Aamir Bashir (HOD/Professor)**

Department Of Pharmacology

- **Prof. Dr. Ajaz Fatima (HOD/Professor)**
- Prof. Dr. Shazia Asim (Professor)
- Dr. Asia Firdous (Associate Professor)
- Dr. Quratulain Mehdi (Assistant Professor)
- Dr. Ovais Qarni (Senior Lecturer)

Department Of Community Medicine

- **Prof. Dr. Seema Daud (HOD/Professor)**
- Prof. Dr. Humayun Mirza
- Dr. Umbreen Navied (Assistant Professor)
- Dr. Saadia Maqbool (Assistant Professor)

Department Of Medicine

- **Prof. Dr. Shumail Zafar (HOD/Professor)**

- Prof. Dr. Asad Ullah Ijaz (Professor OPS)
- Prof. Dr. Sarah Shoaib (Professor OPS)
- Prof. Dr. Ijaz Ahmed (Professor OPS)
- Prof. Dr. Rizwan Akram (Professor OPS)
- Prof. Dr. Atiq-Uz-Zaman (Professor OPS)
- Dr. Abdullah Shah (Associate Professor OPS)

Department Of Surgery

- **Prof. Dr. Saquib Zahoor (Professor)**
- Dr. Sidra Shoaib (Professor)

Department Of Behavioral Sciences

- **Prof. Dr. Maj. R. Maqbool Ahmad (HOD/Professor)**
- Ms. Ramlah

Department Of Radiology

- **Prof. Dr. Khalid Farooq (HOD/Professor)**

Department Of Pediatrics

- **Prof. Rizwan Waseem (HOD/Professor)**
- Dr. Sobia

Department of Gynecology

- **Prof. Fauzia Umber Qureshi**
- Dr. Sadia Ilyas

Department Of Medical Education

- **Prof. Dr. Nighat Nadeem (HOD)**

List of Abbreviations

Abbreviations	Subjects
A	Anatomy
ABCDE	Airway, Breathing, Circulation, Disability, Exposure
ABG	Arterial Blood Gas
ACS	Acute Coronary Syndromes
Ag	Aging
AKI	Acute Kidney Injury
ALT	Alanine Transaminase
AMI	Acute Myocardial Infarction
AMP	Adenosine Monophosphate
ANA	Antinuclear Antibody
ANCA	Antineutrophil Cytoplasmic Antibodies
ANS	Autonomic Nervous System
AO	Association of Osteosynthesis
APTT	Activated Partial Thromboplastin Clotting Time
ARDS	Acute Respiratory Distress Syndrome
ARVC	Arrhythmogenic Right Ventricular Cardiomyopathy
ASD	Atrial Septal Defect
AST	Aspartate Aminotransferase
ATLS	Advanced Trauma Life Support
Au	Autopsy
AUC	Area Under The Curve
AV	Atrioventricular
B	Biochemistry
BhS	Behavioral Sciences
BHU	Basic Health Unit
BSL	Biological Safety Level
C	Civics
C-FRC	Clinical-Foundation Rotation Clerkship
C. burnetii	Coxiella burnetii
C. neoformans	Cryptococcus neoformans
C. pneumoniae	Chlamydia pneumonia

C. psittaci	Chlamydia psittaci
C. trachomatis	Chlamydia trachomatis
CA	Cancer
CABG	Coronary Artery Bypass Grafting
CAD	Coronary Artery Disease
CBC	Complete Blood Count
CCR5	Cysteine-Cysteine Chemokine Receptor 5
CD31	Cluster of Differentiation 31
CD34	Cluster of Differentiation 34
CD4	Clusters of Differentiation 4
CF	Cystic Fibrosis
CK	Creatine Kinase
CK	Creatine Kinase
CLED	Cystine Lactose Electrolyte Deficient
CLL	Chronic Lymphocytic Leukemia
CM	Community Medicine
CML	Chronic Myelogenous Leukemia
CMV	Cytomegalovirus
CNS	Central Nervous System
CO	Carbon Monoxide
CO₂	Carbon Dioxide
CODIS	Combined DNA Index System
COPD	Chronic Obstructive Pulmonary Disease
COVID-19	Corona Virus Disease 2019
COX	Cyclooxygenase
CPR	Cardio Pulmonary Resuscitation
CR	Clinical Rotation
CRP	C- Reactive Protein
CSF	Cerebrospinal Fluid
CT	Computed Tomography
CT	Computerized Tomography
CV	Cardiovascular
CVA	Cerebral Vascular Accident
CVDs	Cardiovascular Diseases
CVS	Cardiovascular System
D. medinensis	Dracunculus Medinensis

DALY	Disability-Adjusted Life Year
DCIS	Ductal Carcinoma in situ
DCM	Dilated Cardiomyopathy
DCMLS	Dorsal Column Medial Lemniscus System
DLC	Differential Leukocyte Count
DMARDs	Disease-modifying antirheumatic drugs
DNA	Deoxy Ribonucleic Acid
DOTS	Directly Observed Treatment Short-course
DTP	Diphtheria, Tetanus, Pertussis
DVI	Disaster Victim Identification
DVT	Deep Vein Thrombosis
E. coli	Escherichia coli
ECF	Extra Cellular Fluid
ECG	Electrocardiography
ECG	Electrocardiogram
ECP	Emergency contraceptive pills
ED50	Median Effective Dose
EEG	Electroencephalogram
EIA	Enzyme Immunoassay
ELISA	Enzyme Linked Immunosorbent Assay
EnR	Endocrinology & Reproduction
ENT	Ear Nose Throat
EPI	Expanded Programme on Immunization
ER	Emergency Room
F	Foundation
FAST	Focused Assessment with Sonography in Trauma
FEV1	Forced Expiratory Volume 1
FM	Family Medicine
For	Forensics Medicine
FPIA	Fluorescent Polarization Immunoassay
FS	Forensic Serology
FSc	Forensic Science
FVC	Forced Vital Capacity
GCS	Glasgow Coma Scale
GFR	Glomerular Filtration Rate
GIT	Gastrointestinal tract

GL-MS	Gas Liquid Mass Spectrometry
GLC	Gas Liquid Chromatography
GLP	Good Laboratory Practice
GMP	Guanosine Monophosphate
GO	Gynecology and Obstetrics
GP	General Practitioner
GPE	General Physical Examination
GTO	Golgi Tendon Organ
Gynae & Obs	Gynecology and Obstetrics
H & E	Hematoxylin and Eosin
H. influenzae	Haemophilus influenza
H. pylori	Helicobacter pylori
HAI	Healthcare Associated Infections
HbC	Hemoglobin C
HbS	Sickle Hemoglobin
HbSC	Hemoglobin Sickle C Disease
HCL	Hydrochloric Acid
HCM	Hypertrophic Cardiomyopathy
HHV	Human Herpesvirus
HIT	Hematopoietic, Immunity and Transplant
HIV	Human Immunodeficiency Virus
HL	Hematopoietic & Lymphatic
HLA	Human Leukocyte Antigen
HMP	Hexose Monophosphate
HNSS	Head & Neck and Special Senses
HPLC	High Pressure Liquid Chromatography
ICF	Intra Cellular Fluid
ID	Infectious Diseases
IE	Infective Endocarditis
IL	Interleukin
ILD	Interstitial Lung Disease
IN	Inflammation
INR	International Normalized Ratio
INSTIs	Integrase Strand Transfer Inhibitors
IPV	Inactivated Poliovirus Vaccine
IUD	Intrauterine Device

IUGR	Intra Uterine Growth Restriction
JVP	Jugular Venous Pulse
L	Law
LD50	Median Lethal Dose
LDH	Lactate Dehydrogenase
LSD	Lysergic acid diethylamide
M	General Medicine
MALT	Mucosa Associated Lymphoid Tissue
MBBS	Bachelor of Medicine, Bachelor of Surgery
MCH	Mean corpuscular hemoglobin
MCHC	Mean Corpuscular Hemoglobin Concentration
MCV	Mean Corpuscular Volume
MHO 2001	Mental Health Ordinance 2001
MoA	Mechanism of action
MRI	Magnetic resonance imaging
MS	Musculoskeletal
MSD	Musculoskeletal disorders
MSDS	Minimum Service Delivery Standards
MSK	Musculoskeletal
N	Neoplasia
NEAA	Non-Essential Amino Acids
NK cells	Natural Killer Cells
NMJ	Neuro Muscular Junction
NNRTIs	Non-nucleoside Reverse Transcriptase Inhibitors
NRTIs	Nucleoside Reverse Transcriptase Inhibitors
NS	Neurosciences
NSAIDs	Non-steroidal Anti-Inflammatory Drugs
O	Ophthalmology
OA	Osteoarthritis
OPC	Organophosphate
OPV	Oral poliovirus vaccine
Or	Orientation
Orth	Orthopedic
P	Physiology
P. jiroveci	Pneumocystis jiroveci
Pa	Pathology

PAD	Peripheral Artery Disease
PAF	Platelet Activating Factor
PBL	Problem Based Learning
PCI	Percutaneous Coronary Intervention
PCR	Polymerase Chain Reaction
PDA	Patent Ductus Arteriosus
PDGF	Platelet Derived Growth Factor
Pe	Pediatrics
PEM	Protein Energy Malnutrition
PERLs	Professionalism, Ethics, Research, Leadership
PET	Positron Emission Tomography
Ph	Pharmacology
pH	potential Hydrogen
PI	Personal Identity
PID	Pelvic inflammatory disease
PIs	Protease inhibitors
PMC	Pakistan Medical Commission
PMDC	Pakistan Medical and Dental Council
PMI	Post-Mortem Interval
PNS	Peripheral Nervous System
PPD	Paraphenylenediamine
PPE	Personal Protective Equipment
Psy	Psychiatry
PT	Prothrombin Time
PVC	Premature Ventricular Contraction
PVD	Peripheral Vascular Diseases
QALY	Quality-Adjusted Life Year
QI	Quran and Islamiyat
R	Renal
Ra	Radiology
RA	Rheumatoid Arthritis
RBCs	Red Blood cells
RCM	Restrictive Cardiomyopathy
RDA	Recommended Dietary Allowance
Re	Respiratory
RF	Rheumatoid factor

RFLP	Restriction Fragment Length Polymorphism
Rh	Rheumatology
RHC	Rural Health Center
RIA	Radioimmunoassay
RMP	Resting Membrane Potential
RNA	Ribonucleic Acid
RTA	Road Traffic Accident
S	General Surgery
S. pneumonia	Streptococcus pneumonia
SA	Sinoatrial
SCC	Squamous-cell carcinoma
Se	Sexology
Sec	Section
SIDS	Sudden Infant Death Syndrome
SLE	Systemic Lupus Erythematosus
SOP	Standard Operating Procedure
TB	Tuberculosis
TBI	Traumatic Brain Injury
TCA	Tricarboxylic acid cycle
TCBS	Thiosulphate Citrate Bile salts Sucrose
TD50	Median Toxic Dose
TGA	Transposition of the Great Arteries
Th	Thanatology
TLC	Thin Layer Chromatography
TNF	Tumor Necrotic Factor
TNM	Tumour, Node, Metastasis
TOF	Tetralogy of Fallot
Tox	Toxicology
Tr	Traumatology
TSI	Triple Sugar Iron
USG	Ultrasonography
UTI	Urinary Tract Infections
UV	Ultraviolet
VAP	Ventilator-Associated Pneumonia
Vd	Volume of Distribution
VEGF	Vascular Endothelial Growth Factor

VSD	Ventricular Septal Defect
W. bancroft	Wuchereria Bancroft
WBCs	White Blood Cells
WHO	World Health Organization
ZN Staining	Ziehl-Neelsen Staining

Curriculum Frame Work for 3rd Year MBBS

Block	Module
Block-07	• FOUNDATION-2 & EBM • GENERAL & CLINICAL PHARMACOLOGY • HEMATOPOIETIC & IMMUNITY & TRANSPLANT • FORENSIC MEDICINE & TOXICOLOGY -3
Block-08	• Neoplasia • INFECTIOUS DISEASE • MUSCULOSKELETAL & LOCOMOTION -2 • FORENSIC MEDICINE & TOXICOLOGY -3
Block-09	• CARDIOVASCULAR -2 • RESPIRATORY -2 • COMMUNITY MEDICINE & FAMILY HEALTH -1 • FORENSIC MEDICINE & TOXICOLOGY -3
Spiral	• PERLS-3 • Expository -3 • C-FRC-3 (Clinical- Foundation, Rotation, Clerkships)

Introduction to the Block -09 :-

Course Name: Block -09
Year: Year -03
Level of Students: Third Year MBBS
Duration of Block -09: 28th of September 2026 to 18th of December 2026
Block examination: December 2026– January 2027

Sr. No.	Name of Module	Duration (weeks)
1	Cardiovascular - II	02
2	Respiratory - II	03
3	Community Medicine & Family Health - I	3.3
4	Forensic Medicine – 3	1.7
5	CFRC/PERL/Expository	2
	TOTAL	12

BLOCK COMMITTEE

The modular committee includes the coordinator, co-coordinator, and departmental representatives from areas such as internal medicine, surgery, pediatrics, and medical education. Together, they work to create an integrated and current curriculum that supports the educational objectives and prepares students for healthcare careers.

BLOCK INCHARGE

PROF. DR. AAMIR BASHIR

BLOCK COORDINATOR /CLASS INCHARGE

DR. SONIA TAHIR

DEPARTMENTS RESPONSIBLE

MAJOR	ALLIED/MINOR
Pathology	Medicine
Pharmacology	Surgery
Forensic medicine	Gynecology
Community Medicine	Psychiatry/Behavioral sciences
	Pediatrics
	Radiology

Module Committees Block – 9

MODULE 20

Committees Members :-

- Coordinator 01: Prof. Dr. Aamir Bashir (FM&T)
- Coordinator 02: Dr. Sonia Tahir (Associate Prof. Pathology Dept.)

Representative: -

- Prof. Dr. Shazia Ibne- Rasa (Pathology Dept.)
- Prof. Dr. Ajaz Fatima (Pharmacology Dept.)
- Assoc. Prof. Dr. Asia Firdous (Pharmacology Dept.)
- Prof. Dr. Seema Daud (Community Medicine Dept.)
- Prof. Dr. Humayun Mirza (Community Medicine Dept.)
- Prof. Dr. Aamir Bashir (Forensic Medicine Dept.)
- Prof. Dr. Shumail Zafar (Medicine Dept.)
- Dr. Sara (Medicine Dept.)
- Dr. Sidra Shoaib (Surgery Dept.)
- Prof. Dr. Maqbool (Psychiatry Dept.)
- Miss. Ramla (Behavioral Sciences.)
- Prof. Rizwan Waseem (Pediatrics)
- Dr. Sobia (Pediatrics)
- Prof. Dr. Fauzia Qureshi (OBS/GYNAE)
- Dr. Sadia Ilyas (OBS/GYN)

MODULE 21

Committees Members:-

- Coordinator 01: Prof. Dr. Aamir Bashir (Forensic Medicine Dept.)
- Coordinator 02: Dr. Sonia Tahir (Assistant Prof. Pathology Dept.)

Representative:-

- Prof. Dr. Shazia Ibne- Rasa (Pathology Dept.)
- Prof. Dr. Sonia (Pathology Dept.)
- Prof. Dr. Seema Daud (Community Medicine Dept.)
- Prof. Dr. Humayun Mirza (Community Medicine Dept.)
- Prof. Dr. Aamir Bashir (Forensic Medicine Dept.)
- Prof. Dr. Shumail Zafar (Medicine Dept.)
- Dr. Sara (Medicine Dept.)
- Dr. Sidra Shoaib (Surgery Dept.)
- Prof. Dr. Maqbool (Psychiatry Dept.)
- Miss Ramla (Behavioral Sciences)
- Prof. Rizwan Waseem (Pediatrics)

- Dr. Sobia (Pediatrics)
- Prof. Dr. Fauzia Qureshi (OBS/GYNAE)
- Dr. Sadia Ilyas (OBS/GYN)

MODULE 22

Committees Members:-

- Coordinator 01: Prof. Dr. Aamir Bashir (Forensic Medicine Dept.)
- Coordinator 02: Dr. Sonia Tahir (Assistant Prof. Pathology Dept.)

Representative:-

- Prof. Dr. Shazia Ibn-e-Rasa (Pathology Dept.)
- Prof. Dr. Ajaz Fatima (Pharmacology Dept.)
- Assoc. Prof. Dr. Asia Firdous (Pharmacology Dept.)
- Prof. Dr. Seema Daud (Community Medicine Dept.)
- Dr. Humayun Mirza (Community Medicine Dept.)
- Prof. Dr. Aamir Bashir (Forensic Medicine Dept.)
- Prof. Dr. Waseem Amir (Medicine Dept.)
- Dr. Sara (Medicine Dept.)
- Dr. Sidra Shoaib (Surgery Dept.)
- Prof. Dr. Maqbool (Psychiatry Dept.)
- Miss. Ramla (Behavioral Sciences.)
- Prof. Dr. Rizwan (Pediatrics Dept.)
- Prof. Dr. Fauzia Qureshi (OBS/GYNAE) Prof. Rizwan Waseem (Pediatrics)
- Dr. Sobia (Pediatrics)
- Dr. Sadia Ilyas (OBS/GYN)

MODULE 23

List of Committees Members:-

- Coordinator 01: Prof. Dr. Aamir Bashir (Forensic Medicine Dept.)
- Coordinator 02: Assist. Prof. Dr. Roman Ashraf (Forensic Medicine Dept.)

Representative:-

- Prof. Dr. Shazia Ibne- Rasa (Pathology Dept.)
- Prof. Dr. Sonia (Pathology Dept.)
- Prof. Dr. Ajaz Fatima (Pharmacology Dept.)
- Assoc. Prof. Dr. Asia Firdous (Pharmacology Dept.)
- Prof. Dr. Seema Daud (Community Medicine Dept.)
- Dr. Humayun Mirza (Community Medicine Dept.)
- Prof. Dr. Shumail Zafar (Medicine Dept.)
- Dr. Sara (Medicine Dept.)

- Dr. Sidra Shoaib (Surgery Dept.)
- Prof. Dr. Maqbool (Psychiatry Dept.)
- Miss. Ramla (Behavioral Sciences.)
- Prof. Rizwan Waseem (Pediatrics)
- Dr. Sobia (Pediatrics)
- Prof. Dr. Fauzia Qureshi (OBS/GYNAE)
- Dr. Sadia Ilyas (OBS/GYN)

Duties Of Module Committees

- Module committee will be head by module coordinator
- Module coordinators are nominated from the subject with the maximum content in the respective module
- Module coordinator will develop module team for collaboration and consultation with all the relevant subject
- Module committee assists in implementation of the curricular guidelines provided by UHS
- Module committee coordinates with the assessment cell in medical education
- Module coordinator will help in developing the study guide in collaboration with department of medical education.

IMPLEMENTATION TORs

1. The time calculation for completion of modules and blocks **is based on 35 hours per week.**
Total hours of teaching, learning and formative/summative **internal assessment to be completed in a year are 1200.**
2. The hours mentioned within each module are the mandatory minimum required. The rest of the hours are left to the discretion of the institution that can be used in teaching, learning and assessment as per decision of the institutional academic council.
3. The content and the intended learning outcomes written are mandatory, to be taught, at the level required, as the end year assessment will be based on these.
4. However, the level of cognition can be kept at a higher level by the institution.
5. The Table of Specifications provided will be used for the three papers of the third professional examination. The same table of specifications should be used for the respective three block exams for internal assessment.

Teaching & Learning Methodologies

1. Interactive Lectures
2. Small Group Discussions (Tutorials Sessions) & SDL
3. Tests (MCQs , OSPE, OSCE & Viva Voce)
4. Clinico- Pathological Conference
5. Skill Laboratories
6. Practical
7. TBL

Reading Materials

1. Text Books
2. Hand Outs
3. E. Books
4. Lecture Notes/Power Point Presentations

ADDITIONAL LEARNING RESOURCES

Specimen/ Models/Instruments/Weapons

1. Pathology Museum
2. Forensic Medicine Museum
3. Community Medicine Museum

11. MODULE AIMS AND OUTCOME OBJECTIVES

MODULE-20

CARDIOVASCULAR-II

Rationale

The Cardiovascular System (CVS 2) Module is designed to provide an understanding of cardiovascular diseases (CVDs), which are a leading cause of global morbidity and mortality. This module is critical at this stage of medical education as it integrates foundational knowledge from basic sciences—such as anatomy, physiology, and pathology—with clinical application in general medicine, surgery, cardiology, pharmacology, and vascular surgery. The module emphasizes the pathophysiology, clinical manifestations, diagnostic approaches, and management strategies for common and critical cardiovascular conditions, including coronary artery disease, valvular heart disease, aneurysms, cardiomyopathies, congenital heart diseases, and vascular disorders.

Module Outcomes

1. Explain the underlying pathophysiological mechanisms of cardiovascular diseases and correlate them with clinical signs and symptoms.
2. Apply concepts from general medicine, surgery, cardiology, pharmacology, pathology, and vascular surgery to understand and manage cardiovascular diseases.
3. Recognize and diagnose common and critical cardiovascular disorders using clinical features, physical examination, and diagnostic tools such as ECG, echocardiography, and laboratory investigations.
4. Develop comprehensive, evidence-based management strategies, including medical, pharmacological, and surgical interventions, for treating cardiovascular diseases.
5. Competently interpret diagnostic studies (e.g., ECG, echocardiography, and imaging) and use them to guide patient care decisions.
6. Understand the role of various pharmacological agents in the prevention, treatment, and management of cardiovascular conditions and complications.

Subjects Integrated In The Module

1. Pathology
2. Pharmacology
3. Radiology
4. Community Medicine
5. Behavioral Sciences
6. Biochemistry
7. Medicine
8. Surgery
9. Pediatrics
10. Obs/Gyn

MODULE 21

RESPIRATORY-II

Rationale

The curriculum for respiratory medicine and related fields is designed to equip students with essential knowledge and skills in managing thoracic trauma, respiratory complications, and conditions affecting respiration. Demonstrate the qualities of compassion, honesty, and integrity in interactions with patients, families, communities, and fellow medical professionals. Exhibit a professional demeanour, foster a team-oriented spirit, and employ effective communication skills by actively participating in collaborative problem-solving, particularly in small group exercises focused on understanding respiratory disorders.

Module Outcomes

1. Integrate foundational concepts to address clinical respiratory issues.
2. Interpret common respiratory symptoms with accuracy in assessments.
3. Outline management plans for prevalent respiratory diseases during case discussions.
4. Utilize a problem-solving approach to accurately diagnose respiratory emergencies in simulated scenarios.
5. Demonstrate understanding of respiratory tract malignancies and referral criteria by the end of the module.
6. Identify the morphological features of common respiratory tract diseases in practical examinations.
7. Demonstrate effective communication strategies in patient interactions, evaluated through peer and instructor feedback.

Subjects Integrated in the module

1. Medicine
2. Surgery
3. Pathology
4. Clinical Pharmacology & Therapeutics
5. Community Medicine
6. Behavioural Sciences
7. Forensic Medicine
8. Paediatrics
9. Radiology

MODULE 22

COMMUNITY MEDICINE & FAMILY HEALTH-I

Rationale

The module on Community Medicine and Family Medicine is crucial for addressing the learning needs of medical students about holistic concept of health, prevalent health problems, their determinants and provision of comprehensive healthcare to the communities. Curriculum on Community Medicine and family medicine equips future healthcare professionals with the knowledge, skills and attitude to implement preventive strategies, health promotion & reduce the burden of disease through primary health care approach targeting universal health coverage. Health outcomes are influenced by social, economic & environmental factors. It helps students understand the broader determinants of health & how to address health disparities. Public health crises such as pandemics, natural disasters & environmental hazards require professionals trained in community-based responses & health emergencies and reaching at door step through provision of family health services. Healthcare professionals must be equipped to engage in provision of health care needs at smaller scale and building health policy at local, national and global levels to improve public health outcomes.

Module Outcomes

1. To apply principles of epidemiological study designs in research methodology to establish association and causations.
2. To apply principles of community diagnosis, screening in general population and high-risk population
3. To apply the concept of environmental safety and global environmental concerns including air, water, waste disposal, radiation, noise and climate change
4. To apply principles of infectious disease epidemiology in classification, prevention and control of communicable diseases
5. To apply different types of surveillance in disease control, elimination and eradication
6. To understand the concept of herd immunity and role of immunizing agents in disease prevention and control
7. To demonstrate the difference between health education and propaganda, application of different health education, communication, information in different settings using different techniques and approaches
8. To apply principles of primary health care targeting universal health care coverage through family medicine.
9. To demonstrate comprehensive health care services as a concept of One Health which is attainable and achievable.

SUBJECTS INTEGRATED IN THE MODULE

1. Community Medicine
2. Family Medicine

MODULE 23

FORENSIC MEDICINE & TOXICOLOGY-III

Rationale

This module prepares the 3rd year MBBS students for the real-world challenges of crime scene investigation, medico-legal frameworks of Pakistan, and dealing with cases of poisoning. This module is critical in developing a holistic understanding of the intersection of the medical profession and law.

Module Outcomes

1. Describe different types of Laws
2. Define legal terms relevant to medical practice and explain procedures in the courts of law
3. Explain legal aspects of medical practice
4. Discuss the principles and methods of crime scene investigations
5. Describe different analytical techniques to diagnose the nature of poison/drugs

Subjects Integrated In The Module

1. Pathology
2. Pharmacology
3. Behavioural Sciences

Learning Resources:

Pathology:-

TEXT BOOKS

1. Pathological Basis of Disease by Kumar, Cortan and Robbins, 10th Ed., W.B. Saunders.
2. Basic Pathology by Cotran & Kumar 11th edition (Medium Robbins)
3. Review of Medical Microbiology and Immunology by Lewinson
4. Medical Microbiology and Immunology by Levinson and Jawetz 9th Ed., Mc Graw-Hill.
5. Medical Genetics by Jorde, 3rd Ed., Mosby.

REFERENCE BOOKS

6. Illustrated Pathology
7. Pathology Practical Book by Harsh Mohan
8. Concise Pathology for Exam Preparation by Bhattacharya
9. District Laboratory Practice in Tropical Countries, Part 1 & 2 by Monica
10. Walter and Israel General Pathology

WEBSITES

11. <https://www.webpathology.com/>
12. <http://www.pathguy.com/>
13. <https://www.osmosis.org/>
14. <https://ilovepathology.com/>

Pharmacology:-

1. Goodman & Gilman's - The Pharmacological Basis of Therapeutics
2. Basic & Clinical Pharmacology by Bertram G, Katzung
3. Clinical Pharmacology by DR Lawrence, PN Bennett & MJ Brown
4. Essentials of Medical Pharmacology by K.D. Tripathi
5. Lippincott Illustrated Review Pharmacology

Forensic Medicine & Toxicology

1. G. Principles and Practice of Forensic Medicine by Prof. Nasib R Awan .
2. Parikh s Text book of Medical Jurisprudence, Forensic Medicine and Toxicology 8th edition; CBS Publisher.
3. Knight B. Simpsons Forensic Medicine.
4. Knights Forensic Pathology by Barnard knight 3rd edition.

Behavioral Sciences:-

1. Handbook of behavioral Sciences by Prof. Mowadat
2. Medical and Psychosocial Aspects of Chronic illness and Disability

Community Medicine:-

1. Parks Test book of Preventive and Social Medicine
2. Public Health and Community Medicine Ilyas

Surgery:-

1. Bailey & Love' short practice of surgery

Medicine:-

1. Davidson's Principles and Practice of Medicine



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No. LMDC/ /2026, Dated:

3rd YEAR M.B.B.S TIMETABLE SESSION 2023-2024 w.e.f. 28-09-2026 to 18-12-2026

Block - 9 (Module 20, 21, 22 & 23) 12 WEEKS

DAYS & TIME	08:00 a.m. to 08:45 a.m.	08:45 a.m. to 09:00 a.m.	09:00 a.m. to 10:15 a.m.	10:15 a.m. to 10:30 a.m.	10:30 a.m. to 12:00 p.m.		12:00 p.m. to 12:45 p.m.	12:45p.m. to 01:30 p.m.	01:30 p.m. to 02:15 p.m.	02:15 p.m. to 03:00 p.m.
MONDAY	Surgery Lecture Theatre No. 10	Travel To GTTH	Ward / SDL	Travel to LMDC & Break	¹ Pathology Pract/ C.Med. ² For Med Pract/ Pharma CFRC ³ C.Med / Family Health	A+B C+D E+F G+H	Forensic Medicine Lecture Theatre No. 10	Pathology Lecture Theatre No. 10	Medicine Lecture Theatre No. 10	Community Medicine Lecture Theatre No. 10
TUESDAY	Pharmacology Lecture Theatre No. 10				¹ Pathology Pract/ C.Med. ² For Med Pract/ Pharma CFRC ³ C.Med / Family Health	C+D E+F G+H A+B	Pathology Lecture Theatre No. 10	⁴ Paeds/BehSci/Medicine Lecture Theatre No. 10	Community Medicine Lecture Theatre No. 10	⁵ Family Medicine (Medicine/Com Med) Lecture Theatre No. 10
WEDNESDAY	Community Medicine Lecture Theatre No. 10				¹ Pathology Pract/ C.Med. ² For Med Pract/ Pharma CFRC ³ C.Med / Family Health	E+F G+H A+B C+D	Community Medicine Lecture Theatre No. 10	Pathology Lecture Theatre No. 10	Forensic Medicine Lecture Theatre No. 10	Pharmacology Lecture Theatre No. 10
THURSDAY	Medicine Lecture Theatre No. 10				¹ Pathology Pract/ C.Med. ² For Med Pract/ Pharma CFRC ³ C.Med / Family Health	G+H A+B C+D E+F	Pharmacology Lecture Theatre No. 10	Medicine Lecture Theatre No. 10	⁶ PERL/For. Medicine/ Family Med Lecture Theatre No. 10	Pathology Lecture Theatre No. 10
FRIDAY	08:00 a.m. to 08:45 a.m.	08:45 a.m. to 09:30 a.m.			09:30 a.m. to 11:30 a.m.				11:30 a.m. to 12:15 p.m.	12:15 a.m. to 01:00 p.m.
	Surgery Lecture Theatre No. 10	Forensic Medicine Lecture Theatre No. 10			GRAND TUTORIAL Community Medicine (1st, 2nd, 4th, 5th, 7th week) Combined Test (3rd, 6th, 10th week) Forensic Med (8th, 9th week) Pharmacology (11th week) Pathology (12th week) Lecture Theatre No. 10				⁷ Community Medicine / Mentoring / Medicine Lecture Theatre No. 10	Community Medicine Lecture Theatre No. 10

CC:-

- Principal, LMDC
- Vice Principal, LMDC
- Heads of All Departments, LMDC/GTTH
- HOD Medical Education, LMDC
- Chief Administrative Officer / Director F&A, LMDC
- Director HR, LMDC
- Director Skills Lab, LMDC
- Director IT, LMDC
- Medical Superintendent, GTTH
- Chairperson Timetable Committee, LMDC
- Class Coordinator (respective MBBS Year), LMDC
- Assessment & Examination Cell, LMDC
- Transport Incharge, LMDC
- Audio Visual Department (HOD) / (Lecture Theatre Incharge), LMDC
- Warden / Assistant Warden Hostels (Boy/Girl)
- Security Supervisor, LMDC
- Class Representative (Boy/Girl)
- M/s Ali Tours, LMDC
- Notice Board

- 1st – 11th weeks Pathology Prac. & 12th week Community Medicine Prac.
 - 1st – 11th weeks Forensic Medicine Prac. & 12th week Pharmacology Prac.
 - 1st 6 weeks Community Medicine and last 6 weeks Family Health (7th – 8th week Gynae & 9th – 12th week Pharmacology).
 - 1st – 8th weeks Paeds, 9th week Beh Sci, 10th - 12th weeks Medicine.
 - 1st week Medicine, 2nd – 12th weeks Community Medicine.
 - 1st – 4th weeks PERL, 5th – 6th weeks Forensic Medicine, 7th – 12th week Family Medicine (Com. Med.).
 - 1st – 7th week Community Medicine, 8th week Mentoring and 9th – 12th week Medicine.
- Clinical Foundation Rotation Clerkship (C-FRC) will be held in Ward / Skill Lab in practical time and issued separately.
 - In ward time of CFRC, students should be relieved 15 min before time to travel back to LMDC.
 - Expository writing to be managed by Pharmacology, Pathology & Forensic Medicine.
 - SDL for 30 mins practical time.
 - SDL for 1 hour ward time
 - Every Friday SDL from 01:00 p.m. to 02:00 p.m. and Library time from 02:00 p.m. to 03:00 p.m.

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

ASSESSMENT METHODS

Tools & Policy

Tools for Formative and Summative Assessment:-

Formative assessment:

CLASS TESTS (After every 2 weeks))

1. Friday during Grand Tutorial
2. On all topics covered during the past 2 weeks.
3. Weight and Grading will be as follows

- **Summative Block examination:-**

- MCQ's
- OSPE
- Viva Voce
- Assignments

INTERNAL ASSESSMENT

It shall constitute 20% of the total assessment at the end of the academic year.

	Scoring Parameter	Weightage (Percentage)
Theory 10 %	Attendance	75% attendance -1 % >85% attendance -2 %
	Block Exam	5 %
	Continuous assessment	3 %
Practical 10 %	Attendance	75% attendance -1 % >85% attendance -2 %
	Block Exam (OSCE / OSPE / OSVE / Short case)	5 %
	Portfolio-clinical logbooks (CFRC / PERLs / Clinical Clerkship)	3 %

MBBS YEAR-3						
Subject	Theory		Practical			Total
BLOCK 7 Modules (Foundation-II + Hematopoietic, Immunity & Implant + General & Clinical Pharmacology + Forensic Medicine & Toxicology-I)	Part I MCQs (140)	140 Marks	Practical / Clinical Examination	11 OSPE 01 OSCE 03 OSVE	Marks 88 10 42	350
	Internal Assessment 10%	35 Marks	Internal Assessment 10%	35 Marks		
	Total	175	Total	175		
BLOCK 8 Modules (Neoplasia + Infectious Diseases + Musculoskeletal & Locomotion-II + Forensic Medicine & Toxicology- II)	Part I MCQs (90)	90 Marks	Practical / Clinical Examination	11 OSPE 01 OSCE 03 OSVE	Marks 88 10 42	350
	Internal Assessment 10%	35 Marks	Internal Assessment 10%	35 Marks		
	Total	175	Total	175		
BLOCK 9 Modules (Cardiovascular-II + Respiratory II + Community Medicine & Public Health + Family Medicine I + Forensic Medicine & Toxicology- III)	Part I MCQs (140)	140 Marks	Practical / Clinical Examination	11 OSPE 01 OSCE 03 OSVE	Marks 88 10 42	350
	Internal Assessment 10%	35 Marks	Internal Assessment 10%	35 Marks		
	Total	175	Total	175		
Total Marks:						1050
Note:						
- Time for 140 MCQs will be 2 Hours 30 mins - Time for each OSPE, OSCE and OSVE station will be eight (08) minutes. - No grace marks shall be allowed in any examination or practical under any guise or name.						

UHS Assessment Policy:-

1. Professional examination shall be open to any student who: -
 - a. has been enrolled/registered and completed one academic year preceding the concerned professional examination in a constituent/affiliated college of the University.
 - b. has his/her name submitted to the Controller of Examinations, for the purpose of examination, by the Principal of the college in which he / she is enrolled & is eligible as per all prerequisites of the examination.
 - c. has his/her marks of internal assessment in all the Blocks sent to the Controller of Examinations by the Principal of the college along with the admission form.
 - d. produces the following certificates duly verified by the principal of his / her college:
 - (i) of good character;
 - (ii) of having attended not less than cumulative 85% of the full course of lectures delivered and practical conducted in the particular academic session, while maintaining 75 % attendance in each block,
 - (iii) Certificate of having appeared at the Block Examinations conducted by the college of enrolment with at least 55 % cumulative percentage in aggregate of blocks 7,8, and 9 for the third year;
 - (iv) Candidates falling short of block/s attendance shall not be admitted to the annual examination unless they take remedial classes to complete the requirement.
2. The minimum number of marks required to pass the professional examination for each paper shall be fifty-five percent (55%) in Written and fifty-five percent (55%) in the 'Oral/Practical/Clinical' examinations and fifty-five percent (55%) in aggregate, independently and concomitantly, at one and the same time.
3. Candidates who secure eighty five percent (85%) or above marks in any of the papers shall be declared to have passed "with distinction" in that Block, subject to having at least 80 % marks in the Written component of that paper, concomitantly. However, no candidate shall be declared to have passed "with distinction" in any paper, who does not pass in all the papers of the Professional Examination as a whole at one and the same time,
4. A candidate failing in one or more paper of the annual examination shall be provisionally allowed to join the next professional class till the commencement of supplementary examinations. Under no circumstances, a candidate shall be promoted to the next professional class till he / she has passed all the papers in the preceding professional examination.
5. If a student appears in the supplementary examination for the first time as he/she did

- not appear in the annual examination because of any reason and fails in any paper in the Supplementary Examination, he/she will be detained in the same class and will not be promoted to next class.
6. The colleges may arrange remedial classes and one re-sit for each block examination after approval from the Competent Authority.
 7. The remedial classes and re-sit examination can be conducted during summer vacation/weekends, before or during preparatory leave, for the concerned professional examination, subject to the following conditions:
 - a. At the completion of each block, the principals of the colleges shall submit a detailed report to the university, including cases of students with short attendance, poor performance/absence in the block examination along with the reasons and evidence for the same, proposed schedule for remedial classes and re-sit examination.
 - b. Competent Authority UHS will have the cause and the submitted evidence evaluated and documented, before permitting the colleges to arrange remedial classes and re-sit examination at the concerned block. No college is allowed to conduct remedial classes or re-sit examination without prior approval of the competent authority.
 - c. The students can appear in remedial classes / re-sit of a block examination, However, conduct of remedial classes shall be permitted only in the cases of students, who shall have attended at least 50 % of total attendance of the concerned block in the first instance.
 - a. However, in special circumstances a student can be allowed to attend the 'remedial classes' for a certain block, with the permission of the Competent Authority, to complete his/her requirement of attendance, even if the block attendance is less than 50%. In such cases, the evidence of reason will be provided by the college after the Principal has endorsed the case.
 - b. The students who have attained a cumulative attendance of 85% directly or with remedial classes, can appear in the 'annual' professional examination.
 - c. The valid reasons for short attendance in a block or absence from a block examination may include major illness/accident/surgery of the student or sickness / death of an immediate relative/being afflicted by a natural/man-made calamity or disaster or detained students (missed the first block of the year) or UHS permitted late admission students
 8. The application for admission of each candidate for examination shall be submitted to the Controller of Examination, through the Principal of the College, in a prescribed format, as per notified schedule, accompanied by the prescribed fee.
 9. The marks of internal assessment through block/s examination and attendance shall be submitted to Controller of Examinations three times, within two weeks of completion of each block examination.
 10. At the end of each block, the colleges are required to submit question papers and keys for the block examination, internal assessment marks and attendance record to

the Department of Examinations UHS. Further, parent-teacher meetings shall be arranged by the colleges after every block examination to share feedback on the progress of students with their parents. Minutes of parent teacher meetings shall be submitted to the Department of Medical Education UHS.

11. It is emphasized that fresh internal assessment or a revision of assessment for supplementary examination shall not be permissible. However, a revised internal assessment for the detained students can be submitted. The internal assessment award in a particular year will not be decreased subsequently detrimental to the detainee candidate. A proper record of the continuous internal assessment shall be maintained by the concerned department/s in the colleges.
12. The candidates shall pay their fee through the Principal of their respective Colleges who shall forward a bank draft / pay order / crossed cheque in favor of Treasurer, University of Health Sciences Lahore, along with their Admission Forms.
13. Only one annual and one supplementary of First, Second & Third Professional MBBS Examinations shall be allowed in a particular academic session. In exceptional situations, i.e., national calamities, war or loss of solved answer books in case of accident, special examination may be arranged after having observed due process of law. This will require permission of relevant authorities, i.e., Syndicate and Board of Governors.

Eligibility Criteria for Appearing in UHS Annual Examination.

- a. Minimum 75% attendance (in each Block and in aggregate)
- b. Minimum 50% aggregate Marks all Test
- 2. Retake of institutional block examination(s) will be allowed only under Special Circumstances**
3. Candidates falling short of attendance requirement shall not be admitted to the annual examination but may be permitted to appear at the supplementary examination if they make up the deficiency up to the commencement of next examination by remaining on rolls of a college as regular student, subject to fulfillment of all other mandatory requirements to appear at the examination
4. College may arrange remedial classes and one re-sit for each block examination, either with the subsequent block examination or before completion of the subsequent block, and before or during preparatory leave in case of terminal block of the professional year, before issuance of date sheet for the concerned professional examination.
5. The students can appear in Re-sit of a block examination, along with the subsequent block, and before or during preparatory leave for the terminal block of the professional year, once the requirement of attendance is met with. However, conduct of remedial classes shall be permitted only in the cases of students, who shall have attended at least 50% of the total attendance of the concerned block in the first instance.
6. The valid reason for short attendance in block or absence from a block examination may include major illness/ accident/ surgery of the student or death of an immediate relative, being afflicted by nature calamity or disaster.

The examination in Block 9 shall be as follows: -

- I. One written paper of 140 marks.
- II. OSCE/OSPE/OSVE of 140 marks.

3rd year MBBS 2026
BLOCK – 9 (12 Weeks)
MODULE (20,21,22 & 23)
28-09-26 to 18-12-2026
SCHEDULE DETAIL

PATHOLOGY

LECTURES:

WEEKS	DATE	DAY	TIME
1 st -12 th Week	28-09-26 to 18-12-26	Monday	12:45 -1:30
		Tuesday	12:00 -12:45
		Wednesday	12:45 – 1:30
		Thursday	2:15 – 3:00

PRACTICAL:

WEEKS	DATE	DAY	TIME
1 st – 11 th Week	28-09-26 to 11-12-26	Monday - Thursday	10:30 – 12:00

GRAND TUTORIAL:

WEEKS	DATE	DAY	TIME
12 th Week	18-12-26	Friday	9:30 – 11:30

PHARMACOLOGY

LECTURES:

WEEKS	DATE	DAY	TIME
1 st -12 th Week	28-09-26 to 18-12-26	Tuesday	8:00 – 8:45
		Wednesday	2:15 – 3:00
		Thursday	12:00 – 12:45

PRACTICAL:

WEEKS	DATE	DAY	TIME
9 th – 12 th Week	23-11-26 to 18-12-26 Family Health (Pharma)	Monday - Thursday	10:30 – 12:00
12 th Week	14-12-26 to 18-12-26	Monday - Thursday	10:30 – 12:00

GRAND TUTORIAL:

WEEKS	DATE	DAY	TIME
11 th Week	11-12-26	Friday	9:30 – 11:30

FORENSIC MEDICINE

LECTURES:

WEEKS	DATE	DAY	TIME
1 st -12 th Week	28-09-26 to 18-12-26	Monday	12:00 -12:45
		Wednesday	1:30 – 2:15
		Friday	8:45 – 9:30
5 th to 6 th Week	26-10-26 to 6-11-26	Thursday	1:30 – 2:15

PRACTICAL:

WEEKS	DATE	DAY	TIME
1 st – 11 th Week	28-09-26 to 11-12-26	Monday - Thursday	10:30 – 12:00

GRAND TUTORIAL:

WEEKS	DATE	DAY	TIME
8 th Week	20-11-26	Friday	9:30 – 11:30
9 th Week	27-11-26		

COMMUNITY MEDICINE

LECTURES:

WEEKS	DATE	DAY	TIME
1 st -12 th Week	28-09-26 to 18-12-26	Monday	2:15 – 3:00
		Tuesday	1:30 – 2:15
		Wednesday	8:00 – 8:45
		Wednesday	12:00 -12:45
		Friday	11:30 – 12:15
1 st to 7 th Week	28-09-26 to 13-11-26		
2 nd – 12 th Week (Family Medicine)	5-10-26 to 18-12-26	Tuesday	2:15 – 3:00

PRACTICAL:

WEEKS	DATE	DAY	TIME
1 st to 6 th Week	28-09-26 to 06-11-26	Monday - Thursday	10:30 – 12:00
12 th Week	14-12-26 to 18-12-26	Monday - Thursday	10:30 – 12:00

GRAND TUTORIAL:

WEEKS	DATE	DAY	TIME
1 st	2-10-26	Friday	9:30 – 11:30
2 nd	9-10-26		
4 th	23-10-26		
5 th	30-10-26		
7 th	13-11-26		

BEHAVIORAL SCIENCE

LECTURES:

WEEKS	DATE	DAY	TIME
9 th Week	24-11-26	Tuesday	12:45 – 1:30

PEDIATRICS

LECTURES:

WEEKS	DATE	DAY	TIME
1 st – 8 th Week	28-09-26 to 20-11-26	Tuesday	12:45 – 1:30

PERL

LECTURES:

WEEKS	DATE	DAY	TIME
1 st – 4 th Week	28-09-26 to 23-10-26	Thursday	1:30 – 2:15

SURGERY

LECTURES:

WEEKS	DATE	DAY	TIME
1 st -12 th Week	28-09-26 to 18-12-26	Monday	8:00 – 8:45
		Friday	8:00 – 8:45

MEDICINE

LECTURES:

WEEKS	DATE	DAY	TIME
1 st -12 th Week	28-09-26 to 18-12-26	Monday	1:30 – 2:15
		Thursday	12:45 – 1:30
		Thursday	8:00 – 8:45
1 st Week (Family Medicine)	28-09-26 to 02-10-26	Tuesday	2:15 – 3:00
9 th -12 th Week	23-11-26 to 18-12-26	Friday	11:30 – 12:15
10 th -12 th Week	30-11-26 to 18-12-26	Tuesday	12:45 – 1:30

FAMILY MEDICINE

LECTURES:

WEEKS	DATE	DAY	TIME
7 th -12 th Week	09-11-26 to 18-12-26	Thursday	1:30 – 2:15
1 st Week	28-09-26 to 02-10-26	Tuesday (Medicine)	2:15 – 3:00

FAMILY HEALTH

PRACTICAL:

WEEKS	DATE	DAY	TIME
7 th - 8 th Week	09-11-26 to 20-11-26	Monday – Thursday (Gynae)	10:30 – 12:00
9 th -12 th Week	23-11-26 to 18-12-26	Monday – Thursday (Pharma)	

GYNAE

PRACTICAL:

WEEKS	DATE	DAY	TIME
7 th - 8 th Week	09-11-26 to 20-11-26	Monday – Thursday (Family Health)	10:30 – 12:00

Joint TESTS

WEEKS	DATE	DAY	TIME
3 rd Week	16-10-26	Friday	9:30 – 11:30
6 th Week	06-11-26		
10 th Week	04-12-26		

Note: Joint test will be held in Lecture Theater 10 and Pathology Labs.

Prof. Dr. Aamir Bashir

Head

Forensic Medicine & Toxicology

3rd Year MBBS 2026

Timetable CFRC

BLOCK – 9 (12 weeks)

Department Responsible: Department of Medicine

Venue: Ward

Days: Monday – Thursday

Time: 10:30 am – 12:00 noon

Batches: Monday - E+F, Tuesday – G+H, Wednesday – A+B, Thursday – C+D

Dates	Task/Skill
28-9-26 to 1-10-26	CFRC3-047 History taking- chest pain Take history of a patient with chest pain and suggest differential diagnoses with emphasis on ischemic heart disease, pulmonary, and gastrointestinal causes.
	CFRC3-048 History taking- palpitations Take history of a patient with palpitations and suggest differential diagnoses with emphasis on hypertension, heart failure, and ischemic heart disease.
	CFRC3-049 History taking- dyspnea Take history of a patient with dyspnea and correlate with cardiac and respiratory causes.
5-10-26 to 8-10-26	CFRC3-050 Inspection of precordium Inspect the precordium for visible pulsations, scars, or deformities. CFRC3-052 Apex beat palpation Palpate the apex beat for location, character, and displacement. CFRC3-054 Auscultation of precordium Auscultate the precordium to identify normal heart sounds, added sounds, and murmurs.
12-10-26 to 15-10-26	CFRC3-053 Palpation of peripheral pulses Palpate peripheral pulses (radial, carotid, femoral, dorsalis pedis) and assess rate, rhythm, and volume.
19-10-26 to 22-10-26	CFRC3-055 ECG conduction Perform and interpret electrocardiography (ECG) independently according to standard protocol. CFRC3-056 ECG interpretation Identify ST-segment and T-wave abnormalities on an ECG and correlate them with ischemia, myocardial infarction, and electrolyte disturbances.

26-10-26 to 29-10-26	CFRC3-057 Blood pressure measurement and interpretation. Measure blood pressure accurately using a sphygmomanometer and interpret normal and abnormal readings.
2-11-26 to 5-11-26	CFRC3-051 Measurement of JVP Measure jugular venous pressure (JVP) accurately and interpret findings. CFRC3-058 Signs of heart failure Identify and report signs of heart failure such as pedal edema, raised JVP, hepatomegaly, and basal crepitation.
9-11-26 to 12-11-26	CFRC3-059 History taking-cough, sputum, dyspnea, wheeze Perform focused history taking for cough, sputum production, dyspnea, and wheezing, and suggest differential diagnoses focusing on asthma, COPD, tuberculosis, and pneumonia.
16-11-26 to 19-11-26	CFRC3-060 Chest inspection Inspect the chest for shape, symmetry, deformities, and movement. CFRC3-061 Chest palpation Palpate the chest wall to assess expansion, tracheal position, and tactile fremitus. CFRC3-062 Chest percussion Percuss the chest to assess resonance and dullness and identify areas of consolidation or effusion.
23-11-26 to 26-11-26	CFRC3-063 Chest auscultation Auscultate the lungs to identify normal breath sounds, added sounds (crackles, wheeze), and differentiate obstructive and restrictive patterns.
30-11-26 to 3-12-26	CFRC3-064 Respiratory rate interpretation Measure respiratory rate and interpret abnormal findings in the context of respiratory distress. CFRC3-065 Peak expiratory flow rate measurement and interpretation Measure peak expiratory flow rate (PEFR) using a peak flow meter and interpret results.
7-12-26 to 10-12-26	ICFRC3-066 Inhaler and Spacer Use Demonstrate proper use of an inhaler or spacer device and counsel the patient on correct technique.
14-12-26 to 17-12-26	CFRC3-067 Respiratory failure signs Identify and report signs of respiratory failure and the need for urgent referral.

Director, Skills Lab.

HOD, DME