

MGM INSTITUTE OF HEALTH SCIENCES

(Deemed University u/s 3 of UGC Act, 1956) **Grade 'A^s Accredited by NAAC** Sector-01, Kamothe, Navi Mumbai - 410 209 Tel 022-27432471, 022-27432994, Fax 022 - 27431094 E-mail : registrar@mgmuhs.com ; Website : www.mgmuhs.com

Syllabus for MBBS – (Second Year)

Approved as per BOM. 04/2007, dated 14.12.2007, item 4 & amended up to BOM. 43/2015 dated 14.11.2015

Syllabus have been categorized as 'Must know' (70%), 'Desirable to Know' (30%) and 'Nice to Know' (10%) topics.

Inside this booklet, 'Desirable to know' & 'Nice to Know' topics are stamped and remaining all unstamped topics belong to 'Must Know' area.

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GENERAL CONSIDERATIONS AND TEACHING APPROACH

- (1) Graduate medical curriculum is oriented towards training students to undertake the responsibilities of a physician of first contact who is capable of looking after the preventive, promotive, curative & rehabilitative aspect of medicine.
- (2) With wide range of career opportunities available today, a graduate has a wide choice of career opportunities. The training, though broad based and flexible should aim to provide an educational experience of the essentials required for health care in our country.

"Training should be able to meet internationally acceptable standards."

- (3) To undertake the responsibilities of service situations which is a changing condition and of various types, it is essential to provide adequate placement training tailored to the needs of such services as to enable the graduates to become effective instruments of implementation of those requirements. To avail of opportunities and be able to conduct professional requirements, the graduate shall endeavour to have acquired basic training in different aspects of medical care.
- (4) The importance of the community aspects of health care and of rural health care services is to be recognized. This aspect of education & training of graduates should be adequately recognized in the prescribed curriculum. Its importance has been systematically upgraded over the past years and adequate exposure to such experiences should be available throughout all the three phases of education & training. This has to be further emphasized and intensified by providing exposure to field practice areas and training during the internship period. The aim of the period of rural training during internship is to enable the fresh graduates to function efficiently under such settings.
- (5) The educational experience should emphasize health and community orientation instead of only disease and hospital orientation or being concentrated on curative aspects. As such all the basic concepts of modern scientific medical education are to be adequately dealt with.
- (6) There must be enough experiences to be provided for self learning. The methods and techniques that would ensure this must become a part of teaching learning process.
- (7) The medical graduate of modern scientific medicine shall endeavour to become capable of functioning independently in both urban and rural environment. He/she shall endeavour to give emphasis on fundamental aspects of the subjects taught and on common problems of health and disease avoiding unnecessary details of specialization.
- (8) The importance of social factors in relation to the problem of health and diseases should receive proper emphasis throughout the course and to achieve this purpose, the

educational process should also be community based than only hospital based. The importance of population control and family welfare planning should be emphasized throughout the period of training with the importance of health and development duly emphasized.

- (9) Adequate emphasis is to be placed on cultivating logical and scientific habits of thought, clarity of expression and independence of judgment, ability to collect and analyze information and to correlate them.
- (10) The educational process should be placed in a historic background as an evolving process and not merely as an acquisition of a large number of disjointed facts without a proper perspective. The history of Medicine with reference to the evolution of medical knowledge both in this country and the rest of the world should form a part of this process.
- (11) Lectures alone are generally not adequate as a method of training and are a poor means of transferring/acquiring information and even less effective at skill development and in generating the appropriate attitudes. Every effort should be made to encourage the use of active methods related to demonstration and on firsthand experience. Students will be encouraged to learn in small groups, through peer interactions so as to gain maximal experience through contacts with patients and the communities in which they live. While the curriculum objectives often refer to areas of knowledge or science, they are best taught in a setting of clinical relevance and hands on experience for students who assimilate and make this knowledge a part of their own working skills.
- (12) The graduate medical education in clinical subjects should be based primarily on outpatient teaching, emergency departments and within the community including peripheral health care institutions. The out-patient departments should be suitably planned to provide training to graduates in small groups.
- (13) Clinics should be organized in small groups of preferably not more than 10 students so that a teacher can give personal attention to each student with a view to improve his skill and competence in handling of the patients.
- (14) Proper records of the work should be maintained which will form the basis for the students' internal assessment and should be available to the inspectors at the time of inspection of the college by the Medical Council of India.
- (15) Maximal efforts have to be made to encourage integrated teaching between traditional subject areas using a problem based learning approach starting with clinical or community cases and exploring the relevance of various preclinical disciplines in both understanding and resolution of the problem. Every attempt be made to de-emphasize compartmentalization of disciplines so as to achieve both horizontal and vertical integration in different phases.

- (16) Every attempt is to be made to encourage students to participate in group discussions and seminars to enable them to develop personality, character, expression and other faculties which are necessary for a medical graduate to function either in solo practice or as a team leader when he begins his independent career. A discussion group should not have more than 20 students.
- (17) Faculty member should avail of modern educational technology while teaching the students and to attain this objective, Medical Education Units/ Departments be established in all medical colleges for faculty development and providing learning resource material to teachers.
- (18) To derive maximum advantage out of this revised curriculum, the vacation period to students in one calendar year should not exceed one month, during the 4 ½ years Bachelor of Medicine and Bachelor of Surgery (MBBS) Course.
- (19) In order to implement the revised curriculum in Toto, State Govts. and Institution Bodies must ensure that adequate financial and technical inputs are provided.
- (20) HISTORY OF MEDICINE –The students will be given an outline on "History of Medicine". This will be taught in an integrated manner by subject specialists and will be coordinated by the Medical Education Unit of the College.
- (21) All medical institutions should have curriculum committee which would plan curricula and instructional method which will be regularly updated.
- (22) Integration of ICT in learning process will be implemented.

OBJECTIVE OF MEDICAL GRADUATE TRAINING PROGRAMME:

- (1) **NATIONAL GOALS** : At the end of undergraduate program, the medical student should be able to :
- (a) Recognize `health for all' as a national goal and health right of all citizens and by undergoing training for medical profession fulfill his/her social obligations towards realization of this goal.
- (b) Learn every aspect of National policies on health and devote himself / herself to its practical implementation.
- (c) Achieve competence in practice of holistic medicine, encompassing promotive, preventive, curative and rehabilitative aspects of common diseases.
- (d) Develop scientific temper, acquire educational experience for proficiency in profession and promote healthy living.
- (e) Become exemplary citizen by observation of medical ethics and fulfilling social and professional obligations, so as to respond to national aspirations.
- (2) **INSTITUTIONAL GOALS:** (1) In consonance with the goals each medical institution should evolve institutional goals to define the manpower (or professionals) they intend to produce. The undergraduate students coming out of a medical institute should:
 - (a) Be competent in diagnosis and management of common health problems of the individual and the community, commensurate with his/her position as a member of the health team at the primary, secondary or tertiary levels, using his/her clinical skills based on history, physical examination and relevant investigations.
 - (b) Be competent to practice preventive, promotive, curative and rehabilitative medicine in respect to the commonly encountered health problems.
 - (c) Appreciate rationale for different therapeutic modalities; be familiar with the administration of the "essential drugs" and their common side effects.
 - (d) Be able to appreciate the socio-psychological, cultural, economic and environmental factors affecting health and develop humane attitude towards the patients in discharging one's professional responsibilities.
 - (e) Possess the attitude for continued self learning and to seek further expertise or to pursue research in any chosen area of medicine, action research and documentation skills.
 - (f) be familiar with the basic factors which are essential for the implementation of the National Health Programmes including practical aspects of the following:-
 - (i) Family Welfare and Material and Child Health(MCH)
 - (ii) Sanitation and water supply

- (iii) Prevention and control of communicable and non-communicable diseases (iv)
- Immunization (v)
- Health Education (vi)
- IPHS standard of health at various level of service delivery, medical waste disposal. (vii)
- Organizational institutional arrangements.
- Acquire basic management skills in the area of human resources, materials (g) and resource management related to health care delivery, General and hospital management, principal inventory skills and counseling (h)
- Be able to identify community health problems and learn to work to resolve these by designing, instituting corrective steps and evaluating outcome of such measures.
- Be able to work as a leading partner in health care teams and acquire (i) proficiency in communication skills. (j)
- Be competent to work in a variety of health care settings. (k)
 - Have personal characteristics and attitudes required for professional life such as personal integrity, sense of responsibility and dependability and ability to relate to or show concern for other individuals.

All efforts must be made to equip the medical graduate to acquire the skills as detailed as under:

A comprehensive list of skills recommended as desirable for Bachelor of Medicine and Bachelor of Surgery (MBBS) Graduate:

- 1. Clinical Evaluation:
 - To be able to take a proper and detailed history.
 - To perform a complete and thorough physical examination and elicit clinical signs. (a)
 - To be able to properly use the stethoscope, Blood Pressure, Apparatus Auroscope, Thermometer, Nasal Speculum, Tongue Depressor, Weighing Scales, Vaginal (b) (c)
 - To be able to perform internal examination-Per Rectum (PR), Per Vaginum (PV) etc.
 - To arrive at a proper provisional clinical diagnosis. (d) (e)
 - Bed side Diagnostic Tests: II.
 - To do and interpret Haemoglobin (HB), Total Count (TC), Erythrocytic Sedimentation Rate (ESR), Blood smear for parasites, Urine examination /albumin (a) /sugar /ketones /microscopic:
 - Stool exam for ova and cysts;
 - Gram, staining and Siehl-Nielsen staining for AFB; (b)
 - (c) To do skin smear for lepra bacilli
 - To do and examine a wet film vaginal smear for Trichomonas (d)
 - To do a skin scraping and Potassium Hydroxide (KOH) stain for fungus infections; (e)
 - (f)
 - To perform and read Montoux Test. (g)
 - Ability to Carry Out Procedures: III.
 - To conduct CPR (Cardiopulmonary resuscitation) and First aid in newborns, children (a)
 - To give Subcutaneous (SC) /Intramuscular (IM) /Intravenous (IV) injections and start (b)

- Intravenous (IV) infusions. To pass a Nasogastric tube and give gastric leavage.
- To administer oxygen-by masic/catheter (c)
- (d) To administer enema
- To pass a ruinary catheter-male and female (e)
- (f) To insert flatus tube
- To do pleural tap, Ascitic tap & lumbar puncture (g)
- Insert intercostal tube to relieve tension pneumothorax (h)
- (i) To control external Haemorrhage.
- (j)
- Anaesthetic Procedure IV
 - Administer local anaesthesia and nerve block (a)

Be able to secure airway potency, administer Oxygen by Ambu bag. (b) V

Surgical Procedures

- To apply splints, bandages and Plaster of Paris (POP) slabs; (a)
- To do incision and drainage of abscesses; (b)
- To perform the management and suturing of superficial wounds; (c)
- To carry on minor surgical procedures, e.g. excision of small cysts and nodules, (d)
 - circumcision, reduction of paraphimosis, debridement of wounds etc
- (e) To perform vasectomy;
- (f) To manage anal fissures and give injection for piles.
- VI Mechanical Procedures
 - To perform thorough antenatal examination and identify high risk pregnancies. (a)
 - (b) To conduct a normal delivery;
 - To apply low forceps and perform and suture episiotomies; (c)
 - (d) To insert and remove IUD's and to perform tubectomy

VII **Paediatrics**

- To assess new borns and recognize abnormalities and I.U. retardation (a)
- (b) To perform Immunization;
- (c) To teach infant feeding to mothers;
- To monitor growth by the use of 'road to health chart' and to recognize development (d) retardation;
- To assess dehydration and prepare and administer Oral Rehydration Therapy (ORT) (e)
- (f) To recognize ARI clinically;

ENT Procedures: VIII

- (a) To be able to remove foreign bodies;
- To perform nasal packing for epistaxis; (b)
- To perform trachesotomy (c)

IX **Ophthalmic Procedures:**

- (a) To invert eye-lids;
- To give Subconjunctival injection; (b)
- (c) To perform appellation of eye-lashes;
- (d) To measure the refractive error and advise correctional glasses;
- To perform nasolacrimal duct syringing for potency (e)

X. **Dental Procedures:**

To perform dental extraction

Community Healthy: XI

- To be able to supervise and motivate, community and para-professionals for corporate (a) efforts for the health care;
- To be able to carry on managerial responsibilities, e.g. Management of stores, (b) indenting and stock keeping and accounting
- Planning and management of health camps; (c)
- Implementation of national health programmes; (d)
- To effect proper sanitation measures in the community, e.g. disposal of infected (e) garbage, chlorination of drinking water;
- To identify and institute and institute control measures for epidemics including its (f) proper data collecting and reporting.

Forensic Medicine Including Toxicology XII

- To be able to carry on proper medico legal examination and documentation of injury (a) and age reports.
- To be able to conduct examination for sexual offences and intoxication; (b)
- To be able to preserve relevant ancillary material for medico legal examination; (c)
- To be able to identify important post-mortem findings in common un-natural deaths. (d)

Management of Emergency XIII

- To manage acute anaphylactic shock; (a)
- To manage peripheral vascular failure and shock; (b)
- To manage acute pulmonary oedema and LVF; (c)
- Emergency management of drowning, poisoning and seizures (d)
- Emergency management of bronchial asthma and status asthmaticus; (e)
- Emergency management of hyperpyrexia; (f)
- Emergency management of comatose patients regarding airways, positioning (g) prevention of aspiration and injuries
- Assess and administer emergency management of burns (h)

Syllabus for PATHOLOGY

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BROAD CURRICULUM AS PER MCI GUIDELINES (PATHOLOGY):

i) GOAL

The broad goal of the teaching of undergraduate student in Pathology is to provide the students with a comprehensive knowledge of the mechanisms and causes of disease, in order to enable him/her to achieve complete understanding of the natural history and clinical manifestations of disease.

ii) OBJECTIVES

a) KNOWLEDGE

At the end of the course, the student should be able to:-

- (1) Describe the structure and ultra structure of a sick cell, mechanisms of cell degeneration, cell death and repair and be able to correlate structural and functional alterations.
- (2) Explain the path physiological processes which govern the maintenance of homeostasis, mechanisms of their disturbance and the morphological and clinical manifestations associated with it.
- (3) Describe the mechanisms and patterns to tissue response to injury such that she/he can appreciate the path physiology of disease processes and their clinical manifestations.
- (4) Correlate normal and altered morphology (gross and microscopic) of different organ systems in common diseases to the extent needed for understanding of disease processes and their clinical significance.

b) SKILLS

At the end of the course, the student should be able to: -

- 1. Describe the rationale and principles of technical procedures of the diagnostic laboratory tests and interpretation of the results;
- 2. Perform the simple bed-side tests on blood, urine and other biological fluid samples;
- 3. Draw a rational scheme of investigations aimed at diagnosing and managing the cases of common disorders;

Understand biochemical/physiological disturbances that occur as a result of disease in collaboration with pre clinical departments.

iii) INTEGRATION

At the end of training he/she should be able to integrate the causes of disease and relationship of different etiological factors (social, economic and environmental) that contribute to the natural history of diseases most prevalent in India.

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PATHOLOGY

I. Learning Objectives

At the end of the course, the Student shall be able to,

1. Understand and describe the structure & ultra structure of a cell, the concept of cell injury, cell death, repair and the change produces thereby, in different tissues and organs.

2. Know the principles of collection, handling, storage, and dispatch of clinical samples from patient, in a proper manner.

- 3. Perform and interpret in a proper manner the basic clinico-pathological procedures.
- 4. Knowledge of the common hematological disorders and the investigations necessary to diagnose them and determine their prognosis.
- 5. Understand normal haemostatic mechanism, the derangements of this mechanism and the effect on human system.
- 6. Understand the etiopathogenesis, the pathological effects, and the clinico-pathological correlation of common infectious and non-infectious diseases.
- 7. Understand the concept of neoplasia with respect to etiology, gross and microscopic features, diagnosis and prognosis in different tissues and organs of the body.
- 8. Correlate normal and altered morphology (gross and microscopy) of different organ systems in different diseases to the extent needed of understanding of the disease processes and their clinical significance.
- 9. Have knowledge of common immunological disorders and their effects on human body.

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Deprived in Bom 43/2015, Dated 06/11/2015 Bom 43/2015, dated 06/11/2015 Resolution no. 3.2 (c)

PATHOLOGY

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- 9. Have knowledge of common immunological disorders and their effects on human body.

9.9.2015 : Jept. of Pathology 4 G.M Medical College Kamothe Navi Mumbay

Annexuse-VII Faithdagy

Total number of teaching hours: 300hrs (IIIrd, IVth	a & Vth Semester)
a) Theory (lectures & tutorials)	160 hrs
b) Practicals	110 hrs
c) Revisions & Evaluations (internal)	30 hrs
Total	300hrs

III. Distribution of teaching hours:

11.

1) General Pathology	35hrs
2) Hematology	16hrs
3) Systemic Pathology	61hrs
4) Clinical Pathology	3hrs
6) Autopsy	1hr
5) Tutorials	44 hrs
Total	160hrs

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General Pathology Cell injury Common definitions in pathology and causes of cell injury. Modes of cell injury: Mechanisms of cell injury Reversible cell injury: Definitions, cellular swelling, fatty	6hrs 1hr	Know	to know
Cell injury Common definitions in pathology and causes of cell injury. Modes of cell injury: Mechanisms of cell injury	1hr		
Common definitions in pathology and causes of cell injury. Modes of cell injury: Mechanisms of cell injury	1hr		
Modes of cell injury: Mechanisms of cell injury		\checkmark	1
	1hr		
change.	1hr	7	
Irreversible cell injury: Definition Necrosis & gangrene: definitions & types. Apoptosis & its relevance.	1hr	V	V
Intracellular accumulations & alterations: Types of Intracellular accumulations with alterations in cell organelles & cytoskeleton.	1 hr	1	-
Cellular adaptations & growth disturbances: Hypertrophy, Hyperplasia, Metaplasia, Agenesis, dysplasia.	1hr	1	
Acute & chronic Inflammation	3hrs		
Acute inflammation: Define & describe cellular & vascular changes. Outcomes & morphological patterns of acute inflammation.	1hr	. 1	
Chemical mediators of inflammation: definition, classification, description of each type, role in acute & chronic inflammation.	1hr	1	
Chronic inflammation: definition & causes. Granulomatous inflammation: etiology, pattern & systemic effects of granulomas.	1hr	1	
Regeneration & repair	3hrs		
Regeneration & repair: define & describe mechanism of regeneration & repair.	1hr	7	
Healing by primary & secondary intention with local & systemic factors affecting wound healing.	1hr	1	
Repair in specialized tissue: Describe repair in fractures & parenchymal organs.	1hr	1	
	 Apoptosis & its relevance. Intracellular accumulations & alterations: Types of Intracellular accumulations with alterations in cell organelles & cytoskeleton. Cellular adaptations & growth disturbances: Hypertrophy, Hyperplasia, Metaplasia, Agenesis, dysplasia. Acute & chronic Inflammation Acute inflammation: Define & describe cellular & vascular changes. Outcomes & morphological patterns of acute inflammation. Chemical mediators of inflammation: definition, classification, description of each type, role in acute & chronic inflammation: definition & causes. Granulomatous inflammation: etiology, pattern & systemic effects of granulomas. Regeneration & repair: define & describe mechanism of regeneration & repair. Healing by primary & secondary intention with local & systemic factors affecting wound healing. Repair in specialized tissue: Describe repair in fractures & 	Apoptosis & its relevance.IhrIntracellular accumulations & alterations:IhrTypes of Intracellular accumulations with alterations in cell organelles & cytoskeleton.IhrCellular adaptations & growth disturbances: Hypertrophy, Hyperplasia, Metaplasia, Agenesis, dysplasia.IhrAcute & chronic Inflammation 3hrs Acute inflammation: Define & describe cellular & vascular changes. Outcomes & morphological patterns of acute inflammation.IhrChemical mediators of inflammation: definition, classification, description of each type, role in acute & chronic inflammation: definition & causes. Granulomatous inflammation: etiology, pattern & systemic effects of granulomas.IhrRegeneration & repair 3hrs Regeneration & repair.IhrHealing by primary & secondary intention with local & systemic factors affecting wound healing.IhrRepair in specialized tissue: Describe repair in fractures & there in the systemic factors affecting wound healing.Ihr	Apoptosis & its relevance. Intracellular accumulations & alterations: Ihr √ Types of Intracellular accumulations with alterations in cell organelles & cytoskeleton. Ihr √ Cellular adaptations & growth disturbances: Ihr √ Hypertrophy, Hyperplasia, Metaplasia, Agenesis, dysplasia. Ihr √ Acute & chronic Inflammation 3hrs Acute & chronic Inflammation: Ihr √ Chemical mediators of inflammation: Define & describe cellular & vascular changes. Outcomes & morphological patterns of acute inflammation. Ihr √ Chemical mediators of inflammation: definition, classification, description of each type, role in acute & chronic inflammation. Ihr √ Chronic inflammation: definition & causes. Ihr √ Granulomatous inflammation: etiology, pattern & systemic effects of granulomas. Ihr √ Regeneration & repair: define & describe mechanism of regeneration & repair. Ihr √ Healing by primary & secondary intention with local & systemic factors affecting wound healing. Ihr √ Repair in specialized tissue: Describe repair in fractures & 1hr √

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	Course Contents	Hrs	Mu	st	Desi	rable
			Kn	0W	to k	now
0	Circulatory disturbances	5hrs				
I	lyperemia & congestion	1hr	1	1		
I	Edema: Define, classify, pathogenesis & correlate norphology with clinical significance.	lhr		1		
	Thrombosis: Definition, etiopathogenesis, morphology, fate & effects of thrombosis.	1hr		1		
	Embolism & Infarction: Define types with clinical significance.	1hr		1		
	Shock: Define, classify, pathogenesis, mediators & stages of shock.	1hr		\checkmark		
	Genetic disorders	1hr				
	Normal karyotype, classification of genetic disorders, types of genetic change.	;		V		
	Down's syndrome (Trisomy 21), Klinefelter's syndrome & Turner's syndrome.	1h	r	1		
	Glycogen storage disease & lysosomal storage disorders.					V
6	Disturbances of pigment metabolism	1b	r			
	Types, changes associated with common disturbances like lipofuscin, Hemosiderin, melanin & Bilirubin.	11	ur	1		
7	Disturbances of Mineral metabolism	11	hr			
	Types & morphological changes in calcification.	1	hr	V		
	Disturbance of mineral like zinc					Y
8	Diseases of Immunity	4	hrs			
	Hypersensitivity reactions: Types & differentiate betwee different types of hypersensitivity reactions. Transplant rejections		hr	1		1
	Autoimmune diseases: Mechanism of autoimmun	ity,	1hr		1	
	common autoimmune diseases, SLE. Amyloidosis: Definition, physical & chemical nature amyloid, classification, pathogenesis, morphology, diagnosis with special stain & clinical correlation.		1hr		V	

	AIDS: Epidemiology, etiology, pathogenesis, morphology, clinical features, diagnosis & handling of infected materials & health education.	1hr	V	
9	Infectious disease	6hrs		
	Typhoid fever: Pathogenesis, morphology & clinical	1hr		
	features.			
	Syphilis: Classify various stages, pathogenesis &	1hr	1	
	morphology.	1111	N N	
	Tuberculosis: Epidemiology, etiology, pathogenesis, morphology, clinical features, lab diagnosis & importance of tuberculosis in the present day context.	1hr	1	
	Leprosy: Classify, pathogenesis, differentiate between different types of leprosy, histological features & sequelae.	lhr	1	
	Fungal: Classification of fungal diseases & opportunistic fungal infections.	lhr	1	
	Parasitic:		1	
	Malaria: Types, morphological features in P. Vivax &		,	
	Falciparum Malaria & lab diagnosis.	1hr		
	Leishmaniasis, Filariasis, Hydatid, Cysticercosis			1
10	Neoplasia	5hrs		
	Nomenclature, classification & differentiation between benign & malignant neoplasms.	-1 hr	7	
P.	Precancerous lesions.			\checkmark
	Carcinogenesis	lhr	1	
	Tumor host interactions: Systemic effects & paraneoplastic syndromes.	1 hr	1	
	Biology of tumor growth & Lab Diagnosis: Diagnostic workup including tumor markers.	1hr	1	5
	Spread, grading & staging.	1hr	V	·

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Course Contents	Hr	s N	lust	Des	irable
		k	Know	to	know
Hematopathology and transfusion medicine	16h	irs			
Introduction to hematology & hemopoiesis	11	nr	\checkmark		
Anemia: classification and clinical features.	11	hr	7		
Nutritional anemia: Iron deficiency	1	hr	7		
Folic acid/ Vit B12 deficiency anemia including pernicious	1	hr	7		
anemia. Hemolytic anemia: Definition, classification, pathogenesis and investigations.		1 hr	7		
Hereditary spherocytosis and G6PD deficiency.					1
Haemoglobinopathies: Thalassemia, Sickle cell anemia.		1hr	V		
Aplastic anemia		1hr	V		
Hemorrhagic disorders: Classify and lab. Screening tests for hemorrhagic disorders. Platelet deficiency, ITP.	or	1hr			Y
Coagulopathies: Coagulation factor deficiency, hemophili DIC, factor VIII.	a,	1hr			
Leucocytic disorders: Leucocytosis, leucopenia, Leuken reaction.	noid	1hr			
Acute leukemia: classification and diagnosis.		1hr		1	
Chronic leukemia: classification and diagnosis.		1hr		V	
Paraprotenemias and Multiple myeloma		1hr		$\overline{\mathbf{A}}$	
Myelodysplastic syndromes and Myeloprolifer	rative	1hi			Y
disorders Blood groups and its relevance in transfusion medicine hematology. Erythoblastosis foetalis.	and	1h	r	7	
Blood transfusion: Indications, selection of donor criter cross matching, untoward reactions, transmissible infec including HIV and hepatitis.	ia, tions	1h	ur	V	

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	Course Contents		Must	Desirable
			Know	to know
	Systemic Pathology			
1	Cardiovascular system	9hrs	1	
	Hypertension & hypertensive heart disease: Mechanism, clinical course and sequel.	1hr	1	s.
	Atherosclerosis: Definition, etiopathogenesis, gross and microscopic features, complications and clinical correlation	1hr	V	
	Other diseases of blood vessels: Aneurysms Vasculitis.	1 hr	1	1
	Ischemic heart disease: Categories and pathogenesis. Myocardial infarction : incidence, risk factors, pathogenesis, morphology, complications, clinical course and investigations	lhr	1	V
	Rheumatic heart disease: Incidence, etiology, Pathogenesis, morphology, complications, clinical course & investigations.	1hr	1	
	Infective endocarditis: Causes, Pathogenesis, morphology, complications and differential diagnosis of cardiac vegetations.	1hr	1	
	Pericarditis and other pericardial diseases	1hr	1	
	Congenital heart disease: ASD, VSD, Fallot's teratology, Bicuspid aortic PDA	1hr		1
	Cardiomyopathies	lhr	-	1
2	Respiratory system	7hrs		
	Pneumonias: Etiopathogenesis, classifications, morphology, clinical course and complications.	1hr	7	
	Lung abscess: Etiopathogenesis, Morphology and complications.	1hr	1	-
	Atelectasis and hyaline membrane disease.	1111		1
	Chronic obstructive pulmonary disease: Bronchial asthma and Bronchiectasis -Etiopathogenesis, Morphology and complications.	1hr	1	

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Chronic obstructive pulmonary disease: Chronic bronchitis and Emphysema: Etiopathogenesis, Morphology types of emphysema and complications.	l hr				
Pulmonary tuberculosis: primary and secondary, morphologic types including pleuritis, clinical course.	1hr		V		
Occupational lung disorders: Anthracosis, silicosis, asbestosis, mesothelioma.	1hr			1	
Tumors of lung and pleura: Classification, etiopathogenesis, gross and microscopic features, pattern of spread, staging, clinical course, para- neoplastic syndromes	111		1		
Oral cavity and salivary gland	2h	rs			
Precancerous lesions of oral cavity and oral cancers: etiopathogenesis, gross and microscopic features	11	r	7		
Differential diagnosis of swelling of salivary gland.	[1]	ır	\checkmark		
Gastrointestinal tract	51	irs			
Gastritis: etiology and types.	1	hr		1	
Peptic ulcer: definition, etiopathogenesis, gross and microscopic features and complications.			1		
Ulcers of intestine: etiological classifications, morphology typhoid, tubercular, amoebic ulcers and bacillary dysenter Differential diagnosis of different forms of ulcers.		hr	1		
Idiopathic inflammatory bowel disease: etiopathogenesis, morphology and differences between Crohn's disease and ulcerative colitis.		1 hr	7		
Appendicitis			V		
Tumors of upper Gastrointestinal Tract: Esophagus: etiopathogenesis, morphology and clinical		1hr	1		
features. Gastric carcinoma: etiopathogenesis, classification, gross microscopic features and clinical features. Carcinoid tumors of GIT	and		4		1
Tumors of lower Gastrointestinal Tract:		1hr			
Carcinoma colon- Etiopathogenesis, morphology and cli features. Intestinal polyps and gastrointestinal stromal tumors.	nical		1		1
				Roha	Y

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	Course Contents		Must	Desirable
			Know	to know
	Liver and Biliary Tract	5hrs		
	Viral hepatitis: Etiopathogenesis, types, clinical source, pathology, serologic diagnosis, sequelae.	1hr	V	
	Alcoholic liver disease: Pathogenesis, morphology and correlation with clinical features.	1hr	1	
	Cirrhosis: Etiopathogenesis, classification, pathology, complications and differential diagnosis.	1hr	V	
	Portal Hypertension: Types and manifestations.		1	
	Tumors of liver: Pathology of hepatocellular carcinoma.	1hr	7	
	Disease of gall bladder: cholecystitis, cholelithiasis and tumors.	1hr		V
6	Urinary tract system	8hrs		
	Basics of impaired function and urinalysis	lhr	7	
	Nephritic and Nephrotic syndrome	-		
	Glomerulonephritis: Classification, Acute nephritis, rapidly progressive glomerulonephritis.	1hr	1	
	Renal failure: definitions, criteria, etiology, systemic manifestations and investigations.	1hr	1	
	Nephrolithiasis and obstructive nephropathy	1hr	V	
	Pyelonephritis and interstitial nephritis: etiopathogenesis of acute and chronic, morphology and clinical correlation.	1hr	1	
	Tumors of kidney and pelvis: classifications, morphology, clinical course and paraneoplastic syndromes of common tumors.	1hr	1	
	Renal vascular disorders and malformations, polycystic kidney.	lhı	:	1
	Urinary bladder: cystitis and carcinoma	lh	r V	
				RDLane

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1	Course Contents		Must	De	sirable
			Know	to) know
F	emale genital tract	6hrs			
	iseases of Uterus: Endometrial hyperplasia and carcinoma, lenomyosis, smooth muscle tumors	1hr	V		
T	rophoblastic diseases: hydatidiform mole, choriocarcinoma.	1hr			V
	Diseases of cervix: cervicitis, cervical carcinoma, etiology	1hr	1		
	ytological diagnosis Ovarian tumors	1hr	1		
I	Pelvic inflammatory disease including salpingitis	1hr	1		
0	Genital tuberculosis				\checkmark
	Breast: Non-neoplastic and Neoplastic lesions of the breast- Classification, Morphology, grading of carcinoma of breast and differential diagnosis of breast swellings.	1hr	1		
3	Male Genital System	2hrs			
ł	Prostate: Nodular hyperplasia, carcinoma	1hr	V		
ł	Testicular tumors and Carcinoma of penis	1hr	N		
9	Lymphoreticular system	3hrs			
	Diseases of spleen: Splenomegaly and effects	1hr			7
	Lymphadenitis: Non-specific, granulomatous			1	
	Hodgkin's lymphoma, classification, morphology	1h			
	Non-Hodgkin's lymphoma, classification, morphology	1h			
10	Dermatopathology	2hi	°S		
	Skin tumors: Non-pigmented -classification and morphology	7. 1h	r	1.	
	Skin tumors: pigmented- classification and morphological features of common nevi and malignant melanoma.	11	ır	1	
11	Soft tissue	11	ir		
	Classification, morphological features of lipomatous, fibrou blood vessels tumors. Neural, muscle and fibro histiocytic tumors.	is, 11	nr	1	-

1	Course Contents	Hrs	Must	Desirable
			Know	to know
2	Skeletal System	3hrs		1
	Osteomyelitis and Metabolic diseases: rickets / osteomalacia, osteoporosis, hyperparathyroidism	1hr		1
	Tumors: Primary, osteosarcoma, osteoclastoma, Ewing's sarcoma, chondrosarcoma, metastatic	1 hr	1	
t	Arthritis: Rheumatoid, osteoid and tuberculous	1hr		1
3	Central Nervous system	3hrs		
	CSF and its disturbances: Cerebral oedema, raised intracranial pressure	1hr	7	
	Inflammatory disorders: Pyogenic and tuberculous meningitis, brain abscess, tuberculoma.		V	-
	Classify CNS tumors-primary glioma and meningioma and metastatic	1 hr	V	
	Cerebrovascular disease: atherosclerosis, thrombosis, embolism, aneurysm, hypoxia, infraction and hemorrhage	1 hr		1
14.	Endocrine system	4hrs	· ·	
	Thyroid: Differential diagnosis of thyroid nodule.	1 hr	1	
	Adrenal diseases: Cortical hyperplasia, atrophy, tuberculosis, tumors of cortex and medulla.	1 hr		1
	Parathyroid hiperplasias and tumours , hyperparathyroidism. Pituitary tumors	1hr		~
15	Myopathies: Differential diagnosis of common muscle disorders.	_1hr		. 1
	Clinical Pathology	3hrs	;	
1.	Jaundice: Differential diagnosis and laboratory investigations in jaundice.	1hr	1	
2.	Diabetes mellitus: Classification, pathogenesis of system involvement, sequelae and complications.	1hr	1	
3.	Renal function tests	1h	. 1	

	Medical Autopsy	1hr		
1.	Indications and techniques of medical autopsies	1 hr	1	
1				

Tutorials and Integrated teaching:

A Hematology

- 1 Blood Collection and anticoagulant
- 2 Peripheral Smear
- 3 Iron deficiency Anemia
- 4 Megaloblastic Anemia
- 5 Hemolytic Anemia
- 6 Erythrocyte sedimentation Rate (ESR) & Packed Cell Volume (PCV)
- 7 Acute Leukemia
- 8 Chronic Leukemia
- 9 Bone Marrow Examination
- B · General Pathology
- 1 Cell injury & Cell death
- 2 Intracellular accumulations
- 3 Inflammation & Repair
- 4 Circulatory Disturbances
- 5 Infections
- 6 Neoplasia
- 7 HIV/AIDS
- C Systemic Pathology
- 1 Atherosclerosis & Ischemic heart disease
- 2 Rheumatic heart disease
- 3 Infective Endocarditis

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1	D .	
4	Pneumonias	
	1 IICUIIIOIIIUS	

5 Tumors of Lung

- 6 Cirrhosis
- 7 Glomerulonephritis
- 8 Peptic Ulcer
- 9 Ulcers of Intestine
- 10 Carcinoma Breast
- 11 Carcinoma Cervix
- 12 Bone tumors

13 Museum Specimens

- D Clinical Pathology
- 1 Liver function tests
- 2 Renal function tests
- 3 Gastric function tests
- 4 Cérebrospinal Fluid Examination (CSF)
- 5 Urine Examination

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PRACTICAL

1. One - third of allotted practical hours to be devoted to

- a. Performing a complete urine examination and detecting abnormalities and correlating with pathological changes.
- b. To perform with accuracy and reliability basic hematological estimation: TLC DLC, peripheral smear, staining, reporting along with history.
- 2. One third of allotted practical hours to be devoted to

Identify and interpret gross and microscopic features of inflammatory lesions of different organs and common systemic diseases.

3. One third of allotted practical hours to be devoted to

Discussion of case studies (paper) clinical, gross and microscopic features and other parameters wherever applicable to learn clinico-pathological correlations.

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Practical Syllabus:

	Clinical Pathology
1	Introduction to Pathology
2	Blood collection and anticoagulants
3	Hemoglobin estimation, RBC Count, ESR & PCV
4	Total WBC count
5	Differential WBC count
6	Development of blood & bone marrow examination.
7	Laboratory investigations in anemias :
8	Acute Leukemia
9	Chronic Leukemia
10	Blood grouping
11	Urine Analysis
12	Examination of CSF
13	Bleeding disorders
14	Sputum and fluids
15	Renal function tests and clinical charts
16	Liver function tests and clinical charts
17	Gastric & Pancreatic function tests and clinical charts
18	Investigations in infertility
19	Investigations in PUOX
20	Examination of faeces & malabsorption

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1	Microscope and microscopic study of cells and tissues.
2	Cell injury & adaptation.
3	Necrosis and Gangrene
4	Pigments
5	Amyloidosis
6	Acute inflammation
7	Chronic inflammation & repair
8	Typhoid & syphilis
9	Tuberculosis and Amoebic inflammation
10	Circulatory disturbances I, II & III
11	Disorders of cell growth
12	Tumor Pathology I & II
13	Immuno Pathology I &II
14	Respiratory System I & II
15	Cardiovascular System I & II
16	Alimentary System I, II & III
17	Hepatobiliary System I & II
18	B Diseases of Kidney I & II
1	9 Female reproductive System
2	0 Male reproductive System
2	1 Lymph nodes and Spleen
2	2 Skeletal System
2	23 Diseases of Skin
	24 Central nervous System
	25 Tumors of Breast and Diseases of the endocrine organs

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EXAMINATION SKILLS

Skills

- 1 Be able to collect, store and transport materials for various pathological tests including histopathology, cytopathology, clinical pathology, hematology and biochemistry.
- 2 Interpret abnormal laboratory values of common diseases
- 3 Do complete urine examination including microscopy.
- 4 Do perform and interpret hemoglobin, TLC, DLC, ESR, PCV, peripheral blood smears and red cell morphology.
- 5 Interpret the peripheral smears of common diseases.
- 6 Do blood grouping and cross matching
- 7 Adapt universal precautions for self protection against HIV and hepatitis and counsel the patient.

Prot & Heau Liept. of Pathology

Theory Marks	Practical Marks
40	40
40	40
40	40
120	120
	40 40 40

Semester / Term Ending Theory and Practical Examination in Pathology

There will be single theory paper at the end of each semester. The pattern for theory & Practical examination will be same as Pathology University Examination.

Pathology University Examination: Theory, Practicals and Viva

- 1. Scheme of internal assessment (Pathology) : The computation of internal assessment marks shall be as per rule No 2 and 3 mentioned in this rule and regulation
- 2. Pattern of Theory Examination including Distribution of Marks, Questions and Time.
- a. Distribution of Marks

Sr.No		Total marks
1	Theory (2 papers - 40 marks each)	. 80
2	Oral (Viva)	15
3	Practical	25
4	Internal assessment (Theory -15, Practicals -15)	30
	Total	150

i) Total duration - 4 hrs (each paper of 2 hrs or 120 minutes)

ii) Each paper will have 3 sections.

iii) Pattern and marking for each paper of 40 marks as provided in the table.

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Sections	Nature of Question- Two Theory Papers	Total No. of Questions	Mark (s) per Question	Total Marks
A)	Multiple Choice Questions (MCQs)	16	16x1/2	08
B)	Brief Answer Questions (BAQs)	4 out of 5	4 x 4	16
C)	Long Answer Question (LAQ)	2 out of 3	2 x 8	16
	Total		L	40

- 1. Direction- Only short answer questions may be permitted from the portions marked as "Desirable to know"
 - Paper wise distribution of theory topics and number of questions:-

A) Paper I:

General Pathology inclusive of general neoplasia, Haematology inclusive of transfusion medicine.

Out of 3 LAQs in Section C, 2 questions should be from General Pathology and General Neoplasia and one question should be from Haematology inclusive of transfusion medicine.

B) Paper II:

Systemic Pathology inclusive of Systemic Neoplasia and Clinical Pathology. Out of 3 LAQs in Section C, 2 questions should be from Systemic Pathology and Systemic Neoplasia and one question should be from Clinical Pathology.

4. Marking scheme: Each paper of 40 marks as shown in the above table.

5. University examination Nature of practicals and duration (Pathology)

a) Number of students for practical Examination should not exceed more than 30 /day

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b) Practicals

Marks 25

	Practicals		Marks
a.	10 Spots (2 minutes each)	4 specimen, 3 histopathology, 1 hematology slide, 1 instrument and 1 chart	10 Marks
		Identification – 1/2 mark Specific short question - 1/2 mark 1 Mark for each spot	
b.	Urine Examination	Physical Examination and two abnormal constituents.	05 Marks
c.	Histopathology slide	Draw, label and give diagnosis.	03 Marks
d.	Haematology Examination	Peripheral blood smear : stain and report.	03 Marks
	Daumination	Hemoglobin Estimation / Total leukocyte count / Blood group Estimation.	04 Marks
-		Total	25 Marks

C. Viva: Duration and topic distribution: Viva marks shall be added to theory and shall be submitted separately out of 15 Marks.

Viva consists of two tables; on each table the student will face 2 examiners for 5 minutes each:

Table - I General and Systemic Pathology

7 Marks

Table - II Clinical Pathology and Haematology

8 Marks

Total 15 Marks

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TEACHING LEARNING METHODS:

- Structured interactive sessions
- Small group discussion
- Practical including demonstrations
- Problem based exercises
- Self learning tools
- Interactive learning
- E-modules

LEARNING RESOURCE MATERIALS:

Text books

1) Robbin's : Pathologic basis of Disease

2) Hematology De Gruchy

3)Text book of Pathology by Harsh Mohan

4) Clinical Pathology: A Practical Manual by Sabitri Sanyal

- Reference books
- Practical note books
- Internet resources

TIME OF EVALUATION:

There should be regular formative assessment. Formative assessment, day to day performance should be given greater importance. Examination of pathology should be at the end of 5^{th} semester and formative assessment in middle of 3^{rd} and 4^{th} semester and summative assessment at the end of 5^{th} semester.

Pathology : Jept. of G M Medical Colleg+ Kamothe Navi Mumbai

II. Total number of teaching hours: 300hrs (IIIrd, IVth & Vth Semester)

a) Theory (lectures & tutorials)	160 hrs
b) Practicals	110 hrs
c)Revisions & Evaluations (internal)	30 hrs
Total	300hrs

III. Distribution of teaching hours:

36hrs
16hrs
57hrs
03hrs
01hrs
47hrs
160hrs

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
	General Pathology				
1	Cell injury	6hrs			1
	Common definitions in pathology and causes of cell injury.	1hr	\checkmark		
	Modes of cell injury: Mechanisms of cell injury	1hr			
	Reversible cell injury: Definitions, cellular swelling, fatty change.	1hr	\checkmark		
	Irreversible cell injury: Definition Necrosis & gangrene: definitions & types. Apoptosis & its relevance.	1hr	\checkmark		
	Intracellular accumulations & alterations: Types of Intracellular accumulations with alterations in cell organelles & cytoskeleton.	1hr	\checkmark		
	Cellular adaptations & growth disturbances: Hypertrophy, Hyperplasia, Metaplasia, Agenesis, dysplasia.	1hr	\checkmark		
	Cellular ageing and mechanism				
	2 Acute & chronic Inflammation	3hr	s		
	Acute inflammation: Define & describe cellular & vascular changes. Outcomes & morphological patterns of acute inflammation.	1h			
	Chemical mediators of inflammation: definition, classification, description of each type, role in acute & chronic inflammation.	11	r v		
	Chronic inflammation: definition & causes. Granulomatous inflammation: etiology,	11	ur 🔨	1	
	pattern & systemic effects of granulomas.	31	irs		
	3 Regeneration & repair Regeneration & repair: define & describe mechanism of regeneration & repair.			\checkmark	
	Healing by primary & secondary intention with local & systemic factors affecting wound healing.				
	Repair in specialized tissue: Describe repair in fractures & parenchymal organs.	r 1	hr	\checkmark	
	Stem cell concept-Regenerative medicine				

2	4 Circulatory disturbances	5hrs			
	Hyperemia & congestion	1hr			
	Edema: Define, classify, pathogenesis & correlate morphology with clinical significance.	1hr			
	Thrombosis: Definition, etiopathogenesis, morphology, fate & effects of thrombosis.	lhr			
	Embolism & Infarction: Define types with clinical significance.	1hr			-
	Shock: Define, classify, pathogenesis, mediators & stages of shock.	1hr			_
5	Genetic disorders	1hr			
	Normal karyotype, classification of genetic disorders, types of genetic change.	1hr			
	Down's syndrome (Trisomy 21), Klinefelter's syndrome & Turner's syndrome.				
	Glycogen storage disease & lysosomal storage disorders.				
6	Disturbances of pigment metabolism	1hr			
	Types, changes associated with common disturbances like lipofuscin, Hemosiderin, melanin & Bilirubin.	1hr			
7	Disturbances of Mineral metabolism	1hr			1
	Types & morphological changes in				
ŀ	calcification.	1hr	V		
	Disturbance of mineral like zinc				
8	Diseases of Immunity	4hrs			1
	Hypersensitivity reactions: Types & differentiate between different types of hypersensitivity reactions.	1hr	\checkmark		
-	Transplant rejections	F			
	Autoimmune diseases: Mechanism of autoimmunity, common autoimmune diseases, SLE.	1hr		v	
	Amyloidosis: Definition, physical & chemical nature of amyloid, classification, pathogenesis, morphology, lab diagnosis with special stain & clinical correlation.	1hr			

			11		Ĩ			7
	ATT	DS: Epidemiology, etiology, pathogenesis,	1hr		\checkmark			
	1	1 1 and althical tealines, undertooks						
	han	dling of infected materials & neural						_
	edu	ication.	7hr	S				
9	Inf	fectious disease	- 11			T	 T	
	T	phoid fever: Pathogenesis, morphology &	1h	r	\sim	1		
	cli	nical features.		_	Г		 	
	G	philis: Classify various stages,	11	ir	\checkmark			
	103	athogenesis & morphology.					 	
		Enidomiology etiology,	21	nr				
			1					
	11:	ab diagnosis & importance of tuberes						~
	t	he present day context.			-		 	
1		Cleasify nathogenesis,	1	hr	N			
			1					
	11	lanrosy histological realures of segurit					 	
	Ľ	Fungal: Classification of fungal diseases &		1hr	1			
		opportunistic fungal infections.					 	
	L			1hr				
		Parasitic: Malaria: Types, morphological features in P						
		Malaria: Types, morphological feature Vivax &Falciparum Malaria & lab diagnosi	s.				 	
	1	VIVax der archper	-					
		Leishmaniasis, Filariasis, Hydatid,						
		Cysticercosis		5 h	rs			
	10	Neoplasia					 T	
		Nomenclature, classification &		1h	r			
		Nomenclature, classification ed differentiation between benign & malignar	at					
		neonlasms					5	
		Precancerous lesions.		-			 V	
		Gaminogenesis		1	hr		 	
		Tumor host interactions: Systemic effects	80	1	hr			
		som acril actic svii (11011103)		_			 	
		- ab Diagnos	is:		hr			
		Biology of tumor grown to have a Diagnostic workup including tumor mark	cers.				 	
		Spread, grading & staging.			1hr	\checkmark		
				-		6		
		Molecular basis of cancer						T
				-				
-		Tumor immunology		-	1hr	1		
F		11 Environmental Pathology					 	V
		the initial stragging drug initial.			1hr			
		Air pollution, latrogene drug injury Radiation & physical injury & Obesity	,					
		Tobacco& Alcoholism					 	
		10000000						

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
1	Hematopathology and transfusion medicine	16hrs			
	Introduction to hematology & hemopoiesis	1hr			
	Anemia: classification and clinical features.	1hr			
	Nutritional anemia: Iron deficiency, Folic acid/ Vit B12 deficiency anemia including pernicious anemia.	2hr			
	Hemolytic anemia: Definition, classification, pathogenesis and investigations.	1hr	Ń		
	Hereditary spherocytosis and G6PD deficiency.			$\sqrt{-1}$	
	Haemoglobinopathies: Thalassemia, Sickle cell anemia.	1hr			
	Aplastic anemia	1hr			
	Hemorrhagic disorders: Classify and lab. Screening tests for hemorrhagic disorders. Platelet deficiency, ITP.	1hr			
	Coagulopathies: Coagulation factor deficiency, hemophilia, DIC.	1hr			
	Leucocytic disorders: Leucocytosis, leucopenia, Leukemoid reaction.	1hr			
	Acute leukemia: classification and diagnosis.	1hr			
	Chronic leukemia: classification and diagnosis.	1hr			
	Paraprotenemias: Multiple myeloma	1hr			
	Myelodysplastic syndromes and Myeloproliferative disorders	1hr			
	Blood groups and its relevance in transfusion medicine and hematology. Erythoblastosis foetalis.	1hr			
	Blood transfusion: Indications, selection of donor criteria, cross matching, untoward reactions, transmissible infections including HIV and hepatitis.	1hr	\checkmark		

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
	Systemic Pathology			-	
1	Cardiovascular system	9hrs		-ç	
	Hypertension & hypertensive heart disease	1hr			
	Atherosclerosis: Definition, etiopathogenesis, gross and microscopic features, complications and clinical correlation	1hr	\checkmark		v
	Other diseases of blood vessels : Aneurysms Vasculitis	1hr	\checkmark		
	Ischemic heart disease: Categories and pathogenesis. Myocardial infarction : incidence, risk factors, pathogenesis, morphology, complications, clinical course and investigations	1hr			
	Rheumatic heart disease: Incidence, etiology, Pathogenesis, morphology, complications, clinical course & investigations.	1hr	\checkmark		
	Infective endocarditis:Causes, Pathogenesis, morphology, complications and differential diagnosis of cardiac vegetations.	1 hr			
	Pericarditis and other pericardial diseases	1hr			
	Congenital heart disease: ASD, VSD, Fallot's teratology, Bicuspid aortic PDA	1hr			
	Cardiomyopathies	1hr		\checkmark	
2	Respiratory system	8hrs			
	Pneumonias: Etiopathogenesis, classifications, morphology, clinical course and complications.	1hr	\checkmark		
	Lung abscess: Etiopathogenesis, Morphology and complications.	1hr	\checkmark		
	Atelectasis and hyaline membrane disease.				
	Chronic obstructive pulmonary disease:Bronchial asthma and Bronchiectasis -Etiopathogenesis, Morphology and complications.	1hr			
	Chronic bronchitis and Emphysema: Etiopathogenesis, Morphology types of emphysema and complications.	1hr	.√		
	Pulmonary tuberculosis: primary and secondary, morphologic types including pleuritis, clinical course.	1hr	\checkmark		

	Occupational lung disorders: Anthracosis, silicosis, asbestosis, mesothelioma.	1 hr			
	Tumors of lung and pleura:Classification, etiopathogenesis, gross and microscopic features, pattern of spread, staging, clinical course, para- neoplastic syndromes.	1hr			
3	Oral cavity and salivary gland	2hrs			
	Precancerous lesions of oral cavity and oral cancers: etiopathogenesis, gross and microscopic features.	1hr	\checkmark		
	Differential diagnosis of swelling of salivary gland.	1hr	\checkmark		
4	Gastrointestinal tract	5hrs			
	Gastritis: etiology and types.	1hr			
	Peptic ulcer: definition, etiopathogenesis, gross and microscopic features and complications.			v	
	Ulcers of intestine: etiological classifications, morphology of typhoid, tubercular, amoebic ulcers and bacillary dysentery. Differential diagnosis of different forms of ulcers.	1hr			
	Idiopathic inflammatory bowel disease: etiopathogenesis, morphology and differences between Crohn's disease and ulcerative colitis.	1hr	\checkmark		
	Appendicitis				
	Tumors of upper Gastrointestinal Tract: Esophagus: etiopathogenesis, morphology and clinical features. Gastric carcinoma: etiopathogenesis, classification, gross and microscopic features and clinical features. Carcinoid tumors of GIT.	1hr			
	Tumors of lower Gastrointestinal Tract: Carcinoma colon- Etiopathogenesis, morphology and clinical features.	1hr			
	Intestinal polyps and gastrointestinal stromal tumors.		-		
5	Liver and Biliary Tract	5hrs			1
	Viral hepatitis: Etiopathogenesis, types, clinical source, pathology, serologic diagnosis, sequelae.	1hr	\checkmark	2	
	Alcoholic liver disease: Pathogenesis, morphology and correlation with clinical features.	1hr	\checkmark		
	Cirrhosis: Etiopathogenesis, classification, pathology,complications & differential diagnosis.	1hr	\checkmark		

	Portal Hypertension: Types and manifestations.		~		
	Tumors of liver: Pathology of hepatocellular carcinoma.	1hr	\checkmark		
	Disease of gall bladder: cholecystitis, cholelithiasis and tumors.	1hr		~ √	
6	Urinary tract system	8hrs			Ý
	Basics of impaired function and urinalysis	1hr	\checkmark		
	Nephritic and Nephrotic syndrome				
	Glomerulonephritis: Classification, Acute nephritis, rapidly progressive glomerulonephritis.	1hr	\checkmark		
	Renal failure: definitions, criteria, etiology, systemic manifestations and investigations.	1hr			
	Nephrolithiasis and obstructive nephropathy	1hr			
	Pyelonephritis and interstitial nephritis: etiopathogenesis of acute and chronic, morphology and clinical correlation.	1hr	\checkmark		
	Tumors of kidney and pelvis: classifications, morphology, clinical course and paraneoplastic syndromes of common tumors.	1hr	\checkmark		
	Renal vascular disorders and malformations, polycystic kidney.	1hr		\checkmark	
	Urinary bladder: cystitis and carcinoma	1hr	\checkmark		
7	7 Female genital tract	6hrs			
	Diseases of Uterus: Endometrial hyperplasia and carcinoma, adenomyosis, smooth muscle tumors	1hr	\checkmark		
	Trophoblastic diseases: hydatidiform mole, choriocarcinoma.	1hr		\checkmark	
	Diseases of cervix: cervicitis, cervical carcinoma, etiology cytological diagnosis	1hr	\checkmark		
	Ovarian tumors	1hr			
	Pelvic inflammatory disease including salpingitis	1hr	\checkmark		
	Genital tuberculosis			\checkmark	
	Breast: Non-neoplastic and Neoplastic lesions of the breast- Classification, Morphology, grading of carcinoma of breast and differential diagnosis of breast swellings.	1hr			

8	Male Genital System	3hrs		
	Prostate: Nodular hyperplasia, carcinoma	1hr		Τ
	Testicular tumors	1hr		
	Carcinoma of penis	1hr		
9	Lymphoreticular system	3hrs		
	Diseases of spleen: Splenomegaly and effects	1hr		
	Lymphadenitis: Non-specific, granulomatous			
	Hodgkin's lymphoma, classification, morphology	1hr		
	Non-Hodgkin's lymphoma, classification, morphology	1hr		
10	Dermatopathology	2hrs		-
	Skin tumors: Non-pigmented -classification and morphology.	1hr		
đ	Skin tumors: pigmented- classification and morphological features of common nevi and malignant melanoma.	1hr	\checkmark	
11	Soft tissue	1hr		
	Classification, morphological features of lipomatous, fibrous, blood vessels tumors. Neural, muscle and fibro histiocytic tumors.	1hr	√	2)
12	Skeletal System	3hrs		 1
	Osteomyelitis and Metabolic diseases: rickets / osteomalacia, osteoporosis, hyperparathyroidism	1hr		
	Tumors: Primary, osteosarcoma, osteoclastoma, Ewing's sarcoma, chondrosarcoma, metastatic	1hr	\checkmark	
	Arthritis: rheumatoid, osteoid and tuberculosis	1hr		
13	Central Nervous system	3hrs		
	CSF and its disturbances: Cerebral oedema, raised intracranial pressure	1hr	\checkmark	
•	Inflammatory disorders: Pyogenic and tuberculous meningitis, brain abscess, tuberculoma.		\checkmark	
	Cerebrovascular disease: atherosclerosis, thrombosis, embolism, aneurysm, hypoxia, infraction and hemorrhage	1hr	r.	
	Classify CNS tumors-primary glioma and meningioma and metastatic	1hr	\checkmark	

14	Endocrine system	4hrs			
	Thyroid: Differential diagnosis of thyroid nodule.	1hr			
	Adrenal diseases: Cortical hyperplasia, atrophy, tuberculosis, tumors of cortex and medulla.	1hr			
	Parathyroid hiperplasias and tumours, hyperparathyroidism. Pituitary tumors	1hr			
15	Myopathies: Differential diagnosis of common muscle disorders.	1hr			
	Clinical Pathology	3hrs			
1	Jaundice: Differential diagnosis and laboratory investigations in jaundice.	1hr	\checkmark		
2	Diabetes mellitus: Classification, pathogenesis of system involvement, sequelae and complications.	1hr	\checkmark		
3	Renal function tests	1hr	\checkmark		
	Medical Autopsy	1hr		L	
1	Indications and techniques of medical autopsies	1hr			

Tutorials and Integrated teaching:

Α	Hematology
1	Blood Collection and anticoagulant
2	Peripheral Smear
3	Iron deficiency Anemia
4	Megaloblastic Anemia
5	Hemolytic Anemia
6	Erythrocyte sedimentation Rate (ESR) & Packed Cell Volume (PCV)
7	Acute Leukemia
8	Chronic Leukemia
9	Bone Marrow Examination
В	General Pathology
1	Cell injury & Cell death
2	Intracellular accumulations
3	Inflammation & Repair
4	Circulatory Disturbances
5	Infections
6	Neoplasia
7	HIV/AIDS
С	Systemic Pathology
1	Atherosclerosis & Ischemic heart disease
2	Rheumatic heart disease
3	Infective Endocarditis
4	Pneumonias

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- 5 Tumors of Lung
- 6 Cirrhosis
- 7 Glomerulonephritis
- 8 Peptic Ulcer
- 9 Ulcers of Intestine
- 10 Carcinoma Breast
- 11 Carcinoma Cervix
- 12 Bone tumors
- 13 Museum Specimens
- D Clinical Pathology
- 1 Liver function test & clinical charts
- 2 Renal function test & clinical charts
- 3 Gastric function test & clinical charts
- 4 Cerebrospinal Fluid Examination (CSF)

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5 Urine Examination

PRACTICAL:

- 1. One third of allotted practical hours to be devoted to
 - a. Performing a complete urine examination and detecting abnormalities and correlating with pathological changes.
 - b. To perform with accuracy and reliability basic hematological estimation: TLC DLC, peripheral smear, staining, reporting along with history.
- 2. One third of allotted practical hours to be devoted to

Identify and interpret gross and microscopic features of inflammatory lesions of different organs and common systemic diseases.

3. One third of allotted practical hours to be devoted to

Discussion of case studies (paper) clinical, gross and microscopic features and other parameters wherever applicable to learn clinico-pathological correlations.

Practical Syllabus:

 	Clinical Pathology	
1	Introduction to Pathology	
2	Blood collection and anticoagulants	
3	Hemoglobin estimation	
4	Total WBC count	
5	Differential WBC count	
6	Development of blood & bone marrow examination.	
7	Laboratory investigations in anemias :	
8	Acute Leukemia	
9	Chronic Leukemia	
10	Blood grouping	
11	Urine Examination	
12	Examination of CSF	
13	Bleeding disorders	
14	Sputum and fluid tests	
15		
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18		

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	General and Systemic Pathology
1	Microscope and microscopic study of cells and tissues
2	Retrogressive changes
3	Necrosis and Gangrene
4	Pigments
5	Amyloidosis
6	Acute inflammation
7	Chronic inflammation & repair
8	Typhoid & syphilis
9	Tuberculosis and Leprosy
10	Circulatory disturbances I, II & III
11	Disorders of cell growth
12	Tumor Pathology I & II
13	Immuno Pathology I &II
14	Respiratory System I & II
15	Cardiovascular System I & II
16	Alimentary System I, II & III
17	Hepatobiliary System I & II
18	Diseases of Kidney I & II
19	Female reproductive System
20	Male reproductive System
21	Lymph nodes and Spleen
22	Skeletal System
23	Diseases of Skin
24	Central nervous System
25	Tumors of Breast and Diseases of the endocrine organs

EXAMINATION SKILLS

- 1 Be able to collect, store and transport materials for various pathological tests including histopathology, cytopathology, clinical pathology, hematology and biochemistry.
- 2 Interpret abnormal laboratory values of common diseases
- 3 Do complete urine examination including microscopy.
- 4 Do perform and interpret hemoglobin, TLC, DLC, ESR, PCV, peripheral blood smears and red cell morphology.
- 5 Interpret the peripheral smears of common diseases.
- 6 Do blood grouping and cross matching
- 7 Adapt universal precautions for self protection against HIV and hepatitis and counsel the patient.

Semester / Term Ending Theory and Practical Examination in Pathology

Semester	Theory Marks	Practical Marks
III	40	40
IV	40	40
V	40	40
Total	120	120

There will be single theory paper at the end of each semester. The pattern for theory & Practical examination will be same as Pathology University Examination.

Pathology University Examination: Theory, Practicals and Viva

- 1. Scheme of internal assessment (Pathology) : The computation of internal assessment marks shall be as per rule No 2 and 3 mentioned in this rule and regulation
- 2. Pattern of Theory Examination including Distribution of Marks, Questions and Time.

Sr.No		Total marks
1	Theory (2 papers - 40 marks each)	80
2	Oral (Viva)	15
3	Practical	25
4	Internal assessment (Theory -15, Practicals -15)	30
	Total	150

a. Distribution of Marks

i) Total duration - 4 hrs (each paper of 2 hrs or 120 minutes)

ii) Each paper will have 3 sections.

iii) Pattern and marking for each paper of 40 marks as provided in the table

Sections	Nature of Question- Two Theory Papers	Total No. of Questions	Mark (s) per Question	Total Marks
A)	Multiple Choice Questions (MCQs)	16	1/2	08
B)	Brief Answer Questions (BAQs)	4 out of 5	4 x 4	16
C)	Long Answer Question (LAQ)	2 out of 3	2 x 8	16
	Total			40

1. Direction- Only short answer questions may be permitted from the portions marked as "Desirable to know"

- Paper wise distribution of theory topics and number of questions:-

A) Paper I:

General Pathology inclusive of general neoplasia, Haematology inclusive of transfusion medicine. Out of 3 LAQs in Section C, 2 questions should be from General Pathology and General

Out of 5 LAQs in Section 0, 2 question Haematology inclusive of transfusion

medicine.

B) Paper II:

Systemic Pathology inclusive of Systemic Neoplasia and Clinical Pathology. Out of 3 LAQs in Section C, 2 questions should be from Systemic Pathology and Systemic Neoplasia and one question should be from Clinical Pathology.

4. Marking scheme: Each paper of 40 marks as shown in the above table.

5. University examination Nature of practicals and duration (Pathology)

a) Number of students for practical Examination should not exceed more than 35 /day

b) Practicals

	Practicals		Marks
a.	10 Spots (2 minutes each)	4 specimen, 3 histopathology, 1 hematology slide, 1 instrument and 1 chart	10 Marks
		Identification – 1/2 mark Specific short question - 1/2 mark 1 Mark for each spot	
b.	Urine Examination	Physical Examination and two abnormal constituents.	05 Marks
c.	Histopathology slide	Draw, label and give diagnosis.	03 Marks
d.	Haematology Examination	Peripheral blood smear staining and do differential leukocyte count.	03 Marks
		Hemoglobin Estimation / Total leukocyte count / Blood group Estimation.	04 Marks
		Total	25 Marks

C. Viva: Duration and topic distribution: Viva marks shall be added to theory and shall be submitted separately out of 15 Marks.

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Viva consists of two tables; on each table the student will face 2 examiners for 5 minutes each:

Table - I General and Systemic Pathology

7 Marks

Table - II Clinical Pathology and Haematology

8 Marks

Total 15 Marks

TEACHING LEARNING METHODS:

- Structured interactive sessions
- Small group discussion
- Practical including demonstrations
- Problem based exercises
- Self learning tools
- Interactive learning
- E-modules 0

LEARNING RESOURCE MATERIALS:

Text books .

1) Robbin's : Pathologic basis of Disease

2) Hematology De Gruchy

- 3)Text book of Pathology by Harsh Mohan
- 4) Clinical Pathology: A Practical Manual by Sabitri Sanyal
- Reference books
- Practical note books
- Internet resources .

TIME OF EVALUATION:

There should be regular formative assessment. Formative assessment, day to day performance should be given greater importance. Examination of pathology should be at the end of 5th semester and formative assessment in middle of 3rd and 4th semester and summative assessment at the end of 5th semester.

Approved in BOM 43/2015, dated 06/11/2015 resolution no. 3.2 (d)

Resolution No. 3.2(d): Resolved to delete the topics OSPE, Mal absorption, PUO, Gastric Analysis in Practical of Pathology (UG) for the batch of Students entering into 2nd MBBS from the academic year 2016-17 onwards.

Approved in Bom 43/2015, Dated OG/11/2015, Resolution alo. - 3.3(d)

Resolution No. 3.3(d): Resolved that the basic research methodology should be taught to UG and PG students for all courses as per their regulatory Council Norms.

Approved in Bom 32/2013, Dared 29/10/2013

Resolution No. - 5.2.4.

5.2.4 Introduction of "Quality control in Laboratory" in MD Pathology

Resolution No. 5.2.4 : Resolved to add topic "Quality control in Laboratory" in MD Pathology theory syllabus.

BOM 40/2015, dated 13/03/2015, resolution no. 3.2 (c)

1 L. Resolution No. 3.2(c): Resolved to accept the break-up of 25 & 15 marks in Practical & Viva examination in Microbiology, Pathology and Pharmacology in IInd MBBS.

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Resolution Alo. 3.2 (1)

BOM 40/2015, dated 13/03/2015, Resolution No. 3.2 (h)

ANNEXURE - 6

MGM Medical College, Kamothe, Department of pathology.

Ref: MGMPatho - July 2015-179

Date: 15/7/15

To,

The Registrar, MGMIHS, Kamothe, Navi Mumbai.

Sub: Changes in the syllabus of Second MBBS (Para- clinical).

Respected Sir,

This is to inform you that there are no significant changes in the syllabus of second MBBS (Para-clinical) submitted to us in the subject of pathology except that the total time for theory examination will be 2hrs instead of 2hrs 30minutes [General section, A (iii)] and typing error in section B- 2 (2.2), instead of theory it should be practicals.

This is for your kind information and necessary action.

Thanking you,

Yours sincerely, 112015 15

Dr. Reeta Dhar.

Prof & HOD

Dept. of P athology.

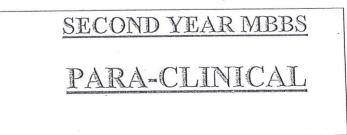
Prot & Head Liept. of Pathology & G M Medical College Kamothe, Navi Mumbai

(Approved in Bom 40 12015, dated	INWARD NO	$ \begin{array}{c} \text{A} \\ \text{b} \\ \text{b} \\ \text{b} \\ \text{c} \\ - \frac{4874}{15} \end{array} $
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MGM INSTITUTE OF HEALTH SCIENCES

(Deemed University u/s 3 of UGC Act, 1956) Grade 'A' Accredited by NAAC Sector-1, Kamothe, Navi Mumbai - 410209 Tel. No. 022-27432471, 022-27432994, Fax No. 022 - 27431094 E-mail : registrar@mgmuhs.com ; Website : www.mgmuhs.com



SYLLABUS FOR THE SUBJECT OF SECOND YEAR MBBS COURSE AT CONSTITUENT COLLEGES OF MGM INSTITUTE OF HEALTH SCIENCES, NAVI MUMBAI / AURANGABAD

1.15

Prof & Head Lept. of Pathology G M Medical College Kamothe Navi Mumbai

EXAMINATION PATTERN FOR PATHOLOGY, MICROBIOLOGY & PHARMACOLOGY

GENERAL SECTION

A. PASSING:-

- i. A candidate must obtain 50% in aggregate with a minimum of 50% in Theory including oral and minimum of 50% in practical and 35% in internal assessment combined theory and practical.
- Prelims examination on the basis of University pattern (Theory, Practical and viva): Minimum 3-4 weeks gap between Prelims and University examination.
- iii. The total time will be 2 hours each for theory papers of 40 marks.
- iv. Practical (total time 3 hours). The details of Practical examination exercises will be notified by Head of the department / Head of Institution.
- v. Prelim pattern will be as per the University exam with 2 papers in theory each of 2 hours duration.
- B. CALCULATION OF INTERNAL ASSESSMENT MARKS:
 - Calculation of Theory and Practical Internal Assessment marks for Pathology, Microbiology & Pharmacology shall be as per following rule
 - 1. Distribution of 15 marks in theory shall be as follows:
 - 1.1 5 marks for attendance as per the following guidelines: Below 75% -0

Upto75% -2.5

Above 75% proportionately higher marks at pro-rate basis (multiplication factor is 0.1)

- 1.2 10 marks for academic performance in theory in 2 term and prelim exam-(average of all the 3 internal examination shall be taken)
- 1.3 Marks in decimal computed in 1.1, 1.2 & 1.3 should be converted into whole number at the end.

Prof & Heac Dept. of Pathology 4 G. M. Medical College

- 2. Distribution of 15 marks in practical shall be as follow:
 - 2.1 5 marks for attendance as per the following guidelines:

Below 75%-0

Upto 75% -2.5

Above 75% proportionately higher marks at pro -rate basis (multiplication factor is 0.1)

2.2 10 marks for academic performance in Practicals in 2 term and prelim exam-(average of all the internal examination shall be taken).

.23 Marks in decimal computed in 1.1, 1.2 & 1.3 should be converted into whole number at the end.

Minimum marks required by a candidate to be declared as pass will be as follows:

Subject		ory and	Pra	ctical		ernal ssment	Т	otal
	Max Max		Max	Min Passing	Max	Min Passing	Max	Min Passing
		Passing	25	13	30	111	150	75
Pathology	95	47		13	30	11	150	75
Microbiology	95	47	25		30	111	150	75
Pharmacology	95	47 .	25	13	20	7	100	50
FMT	50	25	30	15	20	/		

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Prot & Head Lept of Pathology 4 C M Medical College Komothe Javi Mumbai

SECOND YEAR MBBS SYLLABUS: PATHOLOGY 2015

MGM Medical College, Kamothe, Department of pathology.

Ref: MGMPatho - July 2015-180

Date: 15/7/15

To,

The Registrar, MGMIHS, Kamothe, Navi Mumbai.

Sub: Incorporation of Changes in the syllabus of Second MBBS (Para- clinical).

Respected Sir,

This is to inform you that according to resolution No. 3.2(h) required changes have been incorporated in the subject of pathology, IInd MBBS syllabus.

This is for your kind information.

Thanking you,

Yours sincerely,

15.7.2015 Alor. Dr. Reeta Dhar.

Prof & HOD

Dept. of P athology.

Prol & Heng Dept. of Pathology & G M Medical College Kamothe Navi Mumbal

> MGM Institute Of Health Sciences INWARD NO. 4875

PATHOLOGY

Learning Objectives

At the end of the course, the learned shall be able to,

- 1. Know the principles of collection, handling, storage, and dispatch of clinical samples from patient, in a proper manner.
- 2. Perform and interpret in a proper manner the basic clinico-pathological procedures.
- Have an understanding of the common hematological disorders and the investigations necessary to diagnose them and determine their prognosis.
- Understand the concept of cell injury, the change produces thereby, in different tissues and organs and the body capacity for healing.
- 5. Understand normal haemostatic mechanism, the derangements of this mechanism and the effect of human system.
- 6. Understand the etiopathogenesis, the pathological effects, and the clinico-pathological correlation of common infectious and non-infectious diseases.
- Understand the concept of neoplasia with respect to etiology, gross and microscopic features, diagnosis and prognosis in different tissues and organs of the body.
- Correlate normal and altered morphology (gross and microscopy) of different organ systems in different diseases to the extent needed of understanding of the disease processes and their clinical significance.
- 9. Have knowledge of common immunological disorders and their effects on human body.

Prof & Heac Dept. of Pathology

	Course Contents	Must Know	Desirable to know
	General Pathology		
1.	 Cell injury : Common definitions in pathology and causes of cell injury. Modes of cell injury: Mechanisms of cell injury Reversible cell injury: Definitions, cellular swelling, fatty change. Irreversible cell injury: Definition Necrosis & gangrene: definitions & types. 	イイト	
	 Apoptosis & its relevance. Differentiate necrosis & apoptosis Intracellular accumulations & alterations: Types of Intracellular accumulations with alterations in cell organelles & cytoskeleton. Cellular adaptations & growth disturbances: Hypertrophy, Hyperplasia, Metaplasia, Agenesis. 	~	
2.	Acute & chronic Inflammation: • Acute inflammation: Define & describe cellular & vascular	1	
	changes.Outcomes & morphological patterns of acute inflammation.Chemical mediators of inflammation: definition, classification,	1	44
	 description of each type, role in acute & chronic inflammation. Chronic inflammation: definition & causes. Granulomatous inflammation: etiology, pattern & systemic effect of granulomas. 	ts	

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	Course Contents	Must Know	Desirable to know
3.]	Regeneration & repair :		
	· Regeneration & repair: define & describe mechanism of	V	
	regeneration & repair.		
	 Healing by primary & secondary intention with local & systemic 	V	
	factors affecting wound healing.	~	
	 Repair in specialized tissue: Describe repair in fractures & 		
	parenchymal organs.		
4.	Circulatory disturbances:	1	
	Edema: Define, classify, pathogenesis & correlate morphology	V V	
	with clinical significance.		
	Hyperemia & congestion	1	
	 Thrombosis: Definition, etiopathogenesis, morphology, fate & effects of thrombosis. 		
		1	
	 Embolism & Infarction: Define types with clinical significance. 		
	 Shock: Define, classify, pathogenesis, mediators & stages of 	1	
	shock.		
5.	Genetic disorders:		
	 Normal karyotype, classification of genetic disorders, types of 		
	genetic change.		
		1	
	 Down's syndrome (Trisomy 21), Klinefelter's syndrome & 		
	Turner's syndrome.		
	 Glycogen storage disease & lysosomal storage disorders. 		1
6.	Disturbances of pigment metabolism:		,
	Types, changes associated with common disturbances like lipofuscin,		4
	Hemosiderin, melanin & Bilirubin.		

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Course Contents	Must Know	Desirable to know
 Types & morphological changes if calcification. Disturbance of mineral like zinc seases of Immunity: Hypersensitivity reactions: Types & differentiate between different types of hypersensitivity reactions. Transplant rejections Autoimmune diseases: Mechanism of autoimmunity, common autoimmune diseases, SLE. Amyloidosis: Definition, physical & chemical nature of amyloid classification, pathogenesis, morphology, lab diagnosis with special stain & clinical correlation. AIDS: Epidemiology, etiology, pathogenesis, morphology clinical features, diagnosis & handling of infected materials & 		~
 health education. Infectious disease: Typhoid fever: Pathogenesis, morphology & clinical features. Syphilis: Classify various stages, pathogenesis & morphology. Tuberculosis: Epidemiology, etiology, pathogenesis, morphology, clinical features, lab diagnosis & importance of tuberculosis in the present day context. Leprosy: Classify, pathogenesis, differentiate between different types of leprosy, histological features & sequelae. Fungal: Classification of fungal diseases & opportunistic fungation infections. Parasitic: Malaria: Types, morphological features in P. Vivax & 	1	
falciparum malaria & lab diagnosis. Leishmaniasis, Filariasis, Hydatid, Cysticercosis		1

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	Course Contents	Must Know	Desirable to know
8	Osteopathology		
	Osteomyelitis : acute, chronic, tuberculosis	\checkmark	
	 Metabolic diseases: rickets / osteomalacia, osteoporosis, hyperparathyroidism 	\checkmark	
	 Tumors: Primary, osteosarcoma, osteoclastoma, Ewing's sarcoma, chondrosarcoma, metastatic 	\checkmark	
	Arthritis: rheumatoid, osteoid and tuberculosis	\checkmark	
	 Healing of fractures 	\checkmark	
9	Endocrine pathology		
	• Diabetes mellitus: types, pathogenesis, pathology	\checkmark	
	 Non neoplastic lesion of thyroid : Iodine deficiency goiter, autoimmune thyroiditis, thyrotoxicosis, myxoedema 	\checkmark	
	 Tumors of thyroid : adenoma, carcinoma : papillary, follicular, medullary, anaplastic 	\checkmark	
	 Adrenal disease: Cortical hyperplasia, atrophy, tuberculosis, tumors of cortex and medulla 		V
*	 Parathyroid hyperplasia and tumors 		V
10	Neuropathology		
	 Inflammatory disorders: Pyogenic and tuberculous meningitis, brain abscess, tuberculoma. 	1	
	 Classify CNS tumors-primary glioma and meningioma and metastatic 	V	
	 CSF and its disturbances: Cerebral oedema, raised intracranial pressure 	V	
	 Cerebrovascular disease: atherosclerosis, thrombosis, embolism, aneurysm, hypoxia, infraction and hemorrhage 		1
	Dermatopathology		
	 Skin tumors: Squamous cell carcinoma, basal cell carcinoma and melanoma 	V	

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	to Lorenze and other causes		1	
	 Malasorption-coeliac disease, tropical sprue and other causes Pancreatic tumors: endocrine, exocrine and periampullary. 		\checkmark	
5	Liver and Billiary tract pathology	1		
	 Jaundice: Types, pathogenesis and differentiation 	1		
	 Hepatitis : acute and chronic, etiology, pathogenesis and pathology 			
	 Cirrhosis: etiology, classification, pathology, complications 	~		
	 Portal hypertension: types and manifestation 	1		
	 Diseases of gall bladder: Cholecystitis, cholelithiasis, carcinoma 	~		
	 Tumors of liver: hepatocellular, metastatic, tumor markers. 	7		\square
6	Lymphoreticular system			
	Lymphadenitis: Non-specific, granulomatous	1		
	 Hodgkin's and non-Hodgkin's lymphoma, classification, morphology 	v V		
	 Diseases of spleen: splenomegaly and effects 			
7	Female reproductive system			
	 Diseases of cervix: cervicitis, cervical carcinoma, etiology cytological diagnosis 			
	 Diseases of Uterus: Endometrial hyperplasia and carcinoma, adenomyosis, smooth muscle tumors 			
	 Trophoblastic diseases : hydatidiform mole, choriocarcinoma 		1	
	 Diseases of breast: Mastitis, abscess, fibrocystic disease, neoplastic lesions, fibroadenoma, carcinoma, phyllodes 	~		
	tumors	1		
	Ovarian tumors	2.1		
	 Pelvic inflammatory disease including salpingitis 	1		
	Genital tuberculosis			
	Male reproductive system			
	 Prostate: Nodular hyperplasia, carcinoma 	1		
	Testicular tumors	7		
	Carcinoma of penis			1
			PN	

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	Course Contents	Must Know	Desirable to know
3	Urinary Tract pathology		
	 Basics of impaired function and urinalysis 	\checkmark	
	 Glomerulonephritis : Classification, primary proliferative and non proliferative, secondary (SLE, polyarteritis, amyloidosis, diabetes) 	7	
	Nephritic syndrome	4	
	Acute renal failure: acute tubular and cortical necrosis	\checkmark	
	Pyelonephritis, reflux nephropathy, interstitial nephritis	\checkmark	
	Renal cell tumors : renal cell carcinoma, nephroblastoma	1	
	• Urinary bladder: cystitis, carcinoma	\checkmark	
	 Progressive renal failure and end stage renal disease. 		1
	Renal vascular disorders.		1
	Urinary tract tuberculosis		\checkmark
	 Nephrolithiasis and obstructive nephropathy 	1	
	Renal malformation polycystic kidney.		\checkmark
4	Pathology of Gatrointestinal tract		-
	 Oral Pathology: Leukoplakia, carcinoma oral cavity and esophagus 	1	
	 Peptic ulcer: etiopathogenesis and complications, gastritis types 	1	
	• Tumors of stomach: benign, polyp, Leiomyoma, malignant adenocarcinoma, lymphoma	\checkmark	
	 Inflammatory disease of small intestine: typhoid, tuberculosis, Crohn's disease, appendicitis. 	1	
	 Inflammatory disease of large intestine: amoebic colitis, bacillary dysentery, ulcerative colitis 	7	
	 Large and small intestine tumors: polyps, carcinoid, carcinoma, lymphoma. 		
	 Pancreatitis 	V	
	Salivary gland tumors: mixed, adenoids, cystic, warthins		V
	 Ischemic and pseudomembranous enterocolitis, diverticulitis. 		V

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	Course Contents	Must Know	Desirable to know
	Systemic Pathology		
1 0	ardiovascular Pathology		
	 Rheumatic heart disease : Pathogenesis and morphology Infective endocarditis: Causes and pathogenesis Atherosclerosis and ischemic heart disease : myocardial infraction Hypertension and hypertensive heart disease. Congenital heart disease: ASD, VSD, Fallot's teratology, Biscuspid aortic PDA Pericarditis Cardiomyopathy 	~ ~ ~ ~	4
2	 Respiratory Pathology Inflammatory diseases of bronchi: Chronic bronchitis, bronchial asthma, Bronchiectasis Pneumonias : Lobar, broncho, interstitial Lung abscess: etiopathogenesis and morphology Pulmonary tuberculosis: primary and secondary, morphologic types including pleuritis Emphysema : type and pathogenesis Tumors : Benign, malignant, Squamous cell, oat cell, a etiopathogenesis Structure of bronchial tree and alveolar walls, normal a altered lung function, concepts of obstructive and restr lung disorders Nasopharyngeal and laryngeal tumors Occupational lung disorders: anthracosis, silicosis, asbestosis, mesothelioma. Atelectasis and hyaline membrane disease. 	deno,	

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I. Hematopathology: Know to know • Introduction to hematology & hemopolesis √ • Anemia: classification and clinical features. √ • Nutritional anemia: Iron deficiency, folic acid/ Vit B12 √ deficiency anemia: including pernicious anemia. √ • Hemolytic anemia: classification and investigation. √ • Hereditary bemolytic anemia: thalassemia, Sickle cell anemia. √ • Hereditary spherocytosis and G6PD deficiency. √ • Acquired hemolytic anemia √ • Acquired hemolytic anemia √ • Hemorrhagic disorders: Classify hemorrhagic disorders; describe clinical distinction between purpuras & coagulation disorders and lab. Screening tests. √ • Haemostatic disorders: Platelet deficiency, ITP, drug induced, secondary. √ • Coagulopathies: Coagulation factor deficiency, hemophilia, JC and anticoagulant control. √ • Leucocytic disorders: Leucocytosis, leucopenia, Leukemoid reaction. √ • Multiple myeloma and dysproteinemias. √ • Blood transmissible infections including HIV and hepatitis. √ • <t< th=""><th></th><th>Course Contents</th><th>Must</th><th>Desirable</th><th></th></t<>		Course Contents	Must	Desirable	
 Introduction to hematology & hemopoiesis Anemia: classification and clinical features. Nutritional anemia: Iron deficiency, folic acid/ Vit B12 deficiency anemia including pernicious anemia. Hemolytic anemia: classification and investigation. Hereditary hemolytic anemia: thalassemia, Sickle cell anemia. Hereditary spherocytosis and G6PD deficiency. Acquired hemolytic anemia Aplastic anemia Aplastic anemia Hemorrhagic disorders: Classify hemorrhagic disorders; describe clinical distinction between purpuras & coagulation disorders and lab. Screening tests. Haemostatic disorders: Platelet deficiency, hemophilia, DIC and anticoagulant control. Leucocytic disorders: Leucocytosis, leucopenia, Leukennoid reaction. Acute and chronic leukemia: classification and diagnosis. Multiple myeloma and dysproteinemias. Blood transfusion: grouping and cross matching untoward reactions, transmissible infections including HIV and hepatitis. Hemolytic anemia: autoimmune, alloinmune, drug induced, microangiopathie and malaria 			Know	to know	
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	 Introduction to he Anemia: classifie Nutritional anemia deficiency anemia Hemolytic anemia Hereditary hemory anemia. Hereditary sphe Acquired hemory Aplastic anemia Hemorrhagic describe clinic disorders and induced, second Coagulopathin DIC and antice Leucocytic direction. Acute and cliphic my Blood transs reactions, hepatitis. 	 ation and clinical features. ia: Iron deficiency, folic acid/ Vit B12 ia including pernicious anemia. ia: classification and investigation. olytic anemia: thalassemia, Sickle cell crocytosis and G6PD deficiency. lytic anemia a disorders: Classify hemorrhagic disoral distinction between purpuras & coagu ab. Screening tests. disorders: Platelet deficiency, ITP, ndary. es: Coagulation factor deficiency, hemorrhagic ontrol. isorders: Leucocytosis, leucopenia, Leul aronic leukemia: classification and diagno eloma and dysproteinemias. fusion: grouping and cross matching undersmissible infections including Hill 	rders; lation drug pphilia, kemoid V ssis. It v and v ssis. V		
 Myelodysplastic syndrome Myeloproliferative disorders: polycythemia, myelofibrosis. √ 			ibrosis.	~	

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Course Contents	Must Know	Desirable to know
Nomenclature & classification. Precancerous lesions Biology of tumor growth, differentiate between benign & malignant neoplasms. Carcinogenesis		

Prot a Heat. Prot of Pathology

PATHOLOGY

University Examination: Theory, Practicals and Viva

1. Scheme of internal assessment (Pathology) : The computation of internal assessment marks shall be as per rule No 2 and 3 mentioned in this rule and regulation

2. Pattern of Theory Examination including Distribution of Marks, Questions and Time.

a. Distribution of Marks

Sr.No		Total marks
1	Theory (2 papers - 40 marks each)	80
2	Oral (Viva)	15
3	Practical	25
4	Internal assessment (Theory -15, Practicals -15)	30
	TOTAL	150

i) Total duration - 4 hrs (each paper of 2 hrs or 120 minutes)

ii) Each paper will have 3 sections.

iii) Pattern and marking for each paper of 40 marks as provided in the table

Sections	Nature of Question- Two Theory Papers	Total No. of Questions	Mark (s) per Question	Total Marks
A)	Multiple Choice Questions (MCQs)	16	1/2	08
B)	Brief Answer Questions (BAQs)	4 out of 5	4	16
C)	Long Answer Question (LAQ)	2 out of 3	8	16
	Total	,		40

3. Direction- Only short answer questions may be permitted from the portions marked as "Desirable to know"

- Paper wise distribution of theory topics and number of questions:-

A) Paper 1:- General Pathology inclusive of general neoplasia, Haematology inclusive of transfusion medicine.

Out of 3 LAQs in Section C, 2 questions should be from General Pathology and General Neoplasia and one question should be from Haematology inclusive of transfusion medicine.

- B) Paper II:-Systemic Pathology inclusive of Systemic Neoplasia and Clinical Pathology. Out of 3 LAQs in Section C, 2 questions should be from Systemic Pathology and Systemic Neoplasia and one question should be from Clinical Pathology.
- 4. Marking scheme: Each paper of 40 marks as shown in the above table.
- 5. University examination Nature of practicals and duration (Pathology)

a) Number of students for practical Examination should not exceed more than 35 /day

Prof & Head Dept. of Pathology 1 G M Medical College Kamothe Navi Mumbat

b) Practicals: M	arks 25
a. 10 Spots 2 minutes each (4 specimen, 1 instrument, 3 histopathology	10
slides, 1 hematology slide and 1 chart) Identification – 1/2 mark to together 1 mark for	\$
Specific short question - $1/2$ mark \int_{x} each spot	·
b. Urine Examination-physical and two abnormal constituents	05
c. Histopathology slides: Diagnosis and discussion	03
d. Hematology examination	
i). peripheral blood smear, staining and report	03
ii). Hb/TLC/Blood group	04
Total	25

C. Viva: duration and topic distribution: Viva marks shall be added to theory and shall be submitted separately out of 15 Marks. Viva consists of two tables; on each table the student will face 2 examiners for 5 minutes each:

Table - I General and Systemic Pathology	7 Marks
Table - II Clinical Pathology and Hematology	8 Marks
	Total 15 Marks

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Prof & Head Spept. of Pathology 4 G. M. Medical College Kamothe, Navi Mumbai

Ref.: MGM/Patho./2016/0-272

Date : 06.01.2016

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To, Dr. Rajesh Goel Dy. Registrar MGM Institute of Health Sciences, Kamothe, Navi Mumbai.

Dear Sir,

Hereby submitting the final revised sylia us for II year MBBS for Pathology subject. This syllabus was discussed and approved in the last BOS meeting which was in the month of October 2015.

Thanking you, Yours Truly,

Dr. Reeta Dhar Professor & Head Department of Pathology

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MGM.Institute Of Health Sciences INWARD NO. 145

PATHOLOGY

I. Learning Objectives

At the end of the course, the Student shall be able to,

- 1. Understand and describe the structure & ultra structure of a cell, the concept of cell injury, cell death, repair and the change produces thereby, in different tissues and organs.
- 2. Know the principles of collection, handling, storage, and dispatch of clinical samples from patient, in a proper manner.
- 3. Perform and interpret in a proper manner the basic clinico-pathological procedures.
- 4. Knowledge of the common hematological disorders and the investigations necessary to diagnose them and determine their prognosis.
- 5. Understand normal haemostatic mechanism, the derangements of this mechanism and the effect on human system.
- 6. Understand the etiopathogenesis, the pathological effects, and the clinico-pathological correlation of common infectious and non-infectious diseases.
- 7. Understand the concept of neoplasia with respect to etiology, gross and microscopic features, diagnosis and prognosis in different tissues and organs of the body.
- 8. Correlate normal and altered morphology (gross and microscopy) of different organ systems in different diseases to the extent needed of understanding of the disease processes and their clinical significance.
- 9. Have knowledge of common immunological disorders and their effects on human body.

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Prof & Head Sept. of Pathology & G. M. Medical Colle & Kamothe Navi Mumbe

Contrast-

II. Total number of teaching hours: 300hrs (IIIrd, IVth & Vth Semester)

	a) Theory (lectures & tutorials)	160 hrs
1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 - 1999 -	b) Practicals	110 hrs
	c)Revisions & Evaluations (internal)	30 hrs
	Total	300hrs

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III. Distribution of teaching hours:

1) General Pathology	36hrs
2) Hematology	16hrs
3) Systemic Pathology	57hrs
4) Clinical Pathology	03hrs
6) Autopsy	01hrs
5) Tutorials	47hrs
Total	160hrs

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
	General Pathology				
1	Cell injury	6hrs			Т
	Common definitions in pathology and causes of cell injury.	1hr	V		
	Modes of cell injury: Mechanisms of cell injury	1hr	¥	4	
	Reversible cell injury: Definitions, cellular swelling, fatty change.	1hr	1		
	Irreversible cell injury: Definition Necrosis & gangrene: definitions & types. Apoptosis & its relevance.	1hr	V	V	
	Intracellular accumulations & alterations: Types of Intracellular accumulations with alterations in cell organelles & cytoskeleton.	1 hr	V		
	Cellular adaptations & growth disturbances: Hypertrophy, Hyperplasia, Metaplasia, Agenesis, dysplasia.	1hr	V		
	Cellular ageing and mechanism				V
2	Acute & chronic Inflammation	3hrs			
	Acute inflammation: Define & describe cellular & vascular changes. Outcomes & morphological patterns of acute inflammation.	1hr	V		
	Chemical mediators of inflammation: definition, classification, description of each type, role in acute & chronic inflammation.	1hr	V		
	Chronic inflammation: definition & causes. Granulomatous inflammation: etiology, pattern & systemic effects of granulomas.	1hr			
	3 Regeneration & repair	3hrs	s		
	Regeneration & repair: define & describe mechanism of regeneration & repair.	1hr	N		
	Healing by primary & secondary intention with local & systemic factors affecting wound healing.	1hr	· V		
	Repair in specialized tissue: Describe repair in fractures & parenchymal organs.	1hı	r V		
	Stem cell concept-Regenerative medicine				

4	Circulatory disturbances	5hrs			
	Hyperemia & congestion	1 hr			
	Edema: Define, classify, pathogenesis & correlate morphology with clinical significance.	1hr	\checkmark		
	Thrombosis: Definition, etiopathogenesis, morphology, fate & effects of thrombosis.	1hr	· 1		
	Embolism & Infarction: Define types with clinical significance.	1hr	V		٢
	Shock: Define, classify, pathogenesis, mediators & stages of shock.	1hr	V		
5	Genetic disorders	1hr			
	Normal karyotype, classification of genetic disorders, types of genetic change.	1hr	V		
	Down's syndrome (Trisomy 21), Klinefelter's syndrome & Turner's syndrome.		V		
	Glycogen storage disease & lysosomal storage disorders.			\checkmark	
6	Disturbances of pigment metabolism	1hr			
	Types, changes associated with common disturbances like lipofuscin, Hemosiderin, melanin & Bilirubin.	1 hr	√		
7	Disturbances of Mineral metabolism	1hr		1	1
	Types & morphological changes in calcification.	1hr	1		
	Disturbance of mineral like zinc			√	
8	Diseases of Immunity	4hrs		_ L	t
	Hypersensitivity reactions: Types & differentiate between different types of hypersensitivity reactions.	1hr	√		
	Transplant rejections			\checkmark	
	Autoimmune diseases: Mechanism of autoimmunity, common autoimmune diseases, SLE.	1hr	√		
	Amyloidosis: Definition, physical & chemical nature of amyloid, classification, pathogenesis, morphology, lab diagnosis with special stain & clinical correlation.	1 hr	V		

	AIDS: Epidemiology, etiology, pathogenesis, morphology, clinical features, diagnosis & handling of infected materials & health education.	1hr			
9	Infectious disease	7hrs			
	Typhoid fever: Pathogenesis, morphology & clinical features.	1hr	√		
	Syphilis: Classify various stages, pathogenesis & morphology.	1hr	V	-	
	Tuberculosis: Epidemiology, etiology, pathogenesis, morphology, clinical features, lab diagnosis & importance of tuberculosis in the present day context.	2hr	V		
	Leprosy: Classify, pathogenesis, differentiate between different types of leprosy, histological features & sequelae.	1hr	V		
	Fungal: Classification of fungal diseases & opportunistic fungal infections.	1hr	V		
	Parasitic: Malaria: Types, morphological features in P. Vivax &Falciparum Malaria & lab diagnosis.	1hr	V		
	Leishmaniasis, Filariasis, Hydatid, Cysticercosis			V	
10	Neoplasia	5 hrs			
	Nomenclature, classification & differentiation between benign & malignant neoplasms.	1hr	V		
	Precancerous lesions.		<u> </u>	√	
	Carcinogenesis	1hr	V		
	Tumor host interactions: Systemic effects & paraneoplastic syndromes.	1hr	√		
	Biology of tumor growth & Lab Diagnosis: Diagnostic workup including tumor markers.				
	Spread, grading & staging.	1hr	√		
	Molecular basis of cancer				
	Tumor immunology				N
1	Environmental Pathology	1hr			
	Air pollution, latrogenic drug injury. Radiation & physical injury & Obesity, Tobacco& Alcoholism	1hr			V

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
1	Hematopathology and transfusion medicine	16hrs		1	
	Introduction to hematology & hemopoiesis	1hr		1	
	Anemia: classification and clinical features.	1hr			<u>ــــــــــــــــــــــــــــــــــــ</u>
	Nutritional anemia: Iron deficiency, Folic acid/ Vit B12 deficiency anemia including pernicious anemia.	2hr	V		*
	Hemolytic anemia: Definition, classification, pathogenesis and investigations.	1 hr	v ,		
	Hereditary spherocytosis and G6PD deficiency.				
	Haemoglobinopathies: Thalassemia, Sickle cell anemia.	lhr	V		
	Aplastic anemia	1hr	V		
	Hemorrhagic disorders: Classify and lab. Screening tests for hemorrhagic disorders. Platelet deficiency, ITP.	1hr		√ .	
	Coagulopathies: Coagulation factor deficiency, hemophilia, DIC.	1hr			ner en ferste son
	Leucocytic disorders: Leucocytosis, leucopenia, Leukemoid reaction.	1hr	V		
	Acute leukemia: classification and diagnosis.	1hr			
	troduction to hematology & hemopoiesis1hr $$ nemia: classification and clinical features.1hr $$ nemia: classification and clinical features.1hr $$ utritional anemia: Iron deficiency, olic acid/ Vit B12 deficiency anemia including rmicious anemia.2hr $$ emolytic anemia: Definition, classification, thogenesis and investigations.1hr $$ ereditary spherocytosis and G6PD deficiency.1hr $$ aemoglobinopathies: Thalassemia, Sickle cell1hr $$ emorrhagic disorders: Classify and lab. Screening ats for hemorrhagic disorders. Platelet deficiency, P.1hr $$ agulopathies: Coagulation factor deficiency, P.1hr $$ aucocytic disorders: Leucocytosis, leucopenia, ukemoid reaction.1hr $$ raprotenemias: Multiple myeloma1hr $$ raprotenemias: Multiple myeloma1hr $$ velodysplastic syndromessyndromes and and1hrvelodysplastic reasting. Sinderes1hr $$ od groups and its relevance in transfusion dicine and hematology. Erythoblastosis foetalis.1hr $$ od groups and its relevance in transfusion retria, cross matching, untoward reactions, nsmissible infections including HIV and1hr $$				
	Paraprotenemias: Multiple myeloma	1hr			
	Myelodysplastic syndromes and Myeloproliferative disorders	1hr			
	Blood groups and its relevance in transfusion medicine and hematology. Erythoblastosis foetalis.	1hr	\checkmark		
	Blood transfusion: Indications, selection of donor criteria, cross matching, untoward reactions, transmissible infections including HIV and hepatitis.	1hr	V		

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
	Systemic Pathology	ş		n and a second	
1	Cardiovascular system	9hrs			
	Hypertension & hypertensive heart disease	1hr	√ *		
	Atherosclerosis: Definition, etiopathogenesis, gross and microscopic features, complications and clinical correlation	1hr	- V ·		v
	Other diseases of blood vessels : Aneurysms Vasculitis	1hr	V	V	
	Ischemic heart disease: Categories and pathogenesis. Myocardial infarction : incidence, risk factors, pathogenesis, morphology, complications, clinical course and investigations	1hr	V		
	Rheumatic heart disease: Incidence, etiology, Pathogenesis, morphology, complications, clinical course & investigations.	1hr	1		
	Infective endocarditis:Causes, Pathogenesis, morphology, complications and differential diagnosis of cardiac vegetations.	1 hr	V		
	Pericarditis and other pericardial diseases	1hr	V		
	Congenital heart disease: ASD, VSD, Fallot's teratology, Bicuspid aortic PDA	1hr		1	
	Cardiomyopathies	1hr		1	
2	Respiratory system	8hrs			
	Pneumonias: Etiopathogenesis, classifications, morphology, clinical course and complications.	1hr	V		
	Lung abscess: Etiopathogenesis, Morphology and complications.	1hr	1		
	Atelectasis and hyaline membrane disease.			\checkmark	
	Chronic obstructive pulmonary disease:Bronchial asthma and Bronchiectasis -Etiopathogenesis, Morphology and complications.	1hr	\checkmark		
	Chronic bronchitis and Emphysema: Etiopathogenesis, Morphology types of emphysema and complications.	1hr	V		
	Pulmonary tuberculosis: primary and secondary, morphologic types including pleuritis, clinical course.	1hr	1		

	Occupational lung disorders: Anthracosis, silicosis, asbestosis, mesothelioma.	1 hr		\checkmark	
s	Tumors of lung and pleura:Classification, [*] etiopathogenesis, gross and microscopic features, pattern of spread, staging, clinical course, para- neoplastic syndromes.	1 hr	•√		
3	Oral cavity and salivary gland	2hrs	<u> </u>		
	Precancerous lesions of oral cavity and oral cancers: etiopathogenesis, gross and microscopic features.	1hr	1	٢	
	Differential diagnosis of swelling of salivary gland.	1hr	V		
4	Gastrointestinal tract	5hrs			
	Gastritis: etiology and types.	1hr		√	
	Peptic ulcer: definition, etiopathogenesis, gross and microscopic features and complications.		~		
	Ulcers of intestine: etiological classifications, morphology of typhoid, tubercular, amoebic ulcers and bacillary dysentery. Differential diagnosis of different forms of ulcers.	1hr	V		
	Idiopathic inflammatory bowel disease: etiopathogenesis, morphology and differences between Crohn's disease and ulcerative colitis.	1hr	V		
	Appendicitis				
	Tumors of upper Gastrointestinal Tract: Esophagus: etiopathogenesis, morphology and clinical features. Gastric carcinoma: etiopathogenesis, classification, gross and microscopic features and clinical features. Carcinoid tumors of GIT.	1hr	V	V	
	Tumors of lower Gastrointestinal Tract: Carcinoma colon- Etiopathogenesis, morphology and clinical features.	1hr	V	, v	
	Intestinal polyps and gastrointestinal stromal tumors.			V	
5	Liver and Biliary Tract	5hrs			
	Viral hepatitis: Etiopathogenesis, types, clinical source, pathology, serologic diagnosis, sequelae.	1hr	\checkmark		
	Alcoholic liver disease: Pathogenesis, morphology and correlation with clinical features.	1hr	\checkmark		
	Cirrhosis: Etiopathogenesis, classification,	1hr			

	Portal Hypertension: Types and manifestations.				
		1 hr	V		
	Tumors of liver: Pathology of hepatocellular carcinoma.	1 111	, ,		
	Disease of gall bladder: cholecystitis, cholelithiasis and tumors.	1 hr		V	
6	Urinary tract system	8hrs			
	Basics of impaired function and urinalysis	1hr	V.		
	Nephritic and Nephrotic syndrome				r
	Glomerulonephritis: Classification, Acute nephritis, rapidly progressive glomerulonephritis.	1 hr	V		
	Renal failure: definitions, criteria, etiology, systemic manifestations and investigations.	1 hr			
	Nephrolithiasis and obstructive nephropathy	1hr			
	Pyelonephritis and interstitial nephritis: etiopathogenesis of acute and chronic, morphology and clinical correlation.	1hr	V		
	Tumors of kidney and pelvis: classifications, morphology, clinical course and paraneoplastic syndromes of common tumors.	1hr			
	Renal vascular disorders and malformations, polycystic kidney.	1hr		V	
	Urinary bladder: cystitis and carcinoma	1hr	V		
7	Female genital tract	6hrs		<u>. I </u>	
	Diseases of Uterus: Endometrial hyperplasia and carcinoma, adenomyosis, smooth muscle tumors	1hr	V		
	Trophoblastic diseases: hydatidiform mole, choriocarcinoma.	1hr		V	
	Diseases of cervix: cervicitis, cervical carcinoma, etiology cytological diagnosis	1hr	V		
	Ovarian tumors	1hr			
	Pelvic inflammatory disease including salpingitis	1hr	V		
	Genital tuberculosis			V	
	Breast: Non-neoplastic and Neoplastic lesions of the breast- Classification, Morphology, grading of carcinoma of breast and differential diagnosis of breast swellings.	1hr	1		

8	Male Genital System	3hrs			
	Prostate: Nodular hyperplasia, carcinoma	l hr	1	an Marine Wall Administration in the second processing of the second second second second second second second	
	Testicular tumors	1hr	- V		
	Carcinoma of penis	1hr			
9	Lymphoreticular system	3hrs	*		
	Diseases of spleen: Splenomegaly and effects	1hr		$\overline{\mathbf{v}}$	1
	Lymphadenitis: Non-specific, granulomatous			<pre></pre>	
	Hodgkin's lymphoma, classification, morphology	1hr			
	Non-Hodgkin's lymphoma, classification, morphology	1 hr	V		
10	Dermatopathology	2hrs			-1
	Skin tumors: Non-pigmented -classification and morphology.	1hr	\checkmark		
	Skin tumors: pigmented- classification and morphological features of common nevi and malignant melanoma.	1hr	V		
11	Soft tissue	1hr			.I
	Classification, morphological features of lipomatous, fibrous, blood vessels tumors. Neural, muscle and fibro histiocytic tumors.	1hr	√		
12	Skeletal System	3hrs			<u> </u>
	Osteomyelitis and Metabolic diseases: rickets / osteomalacia, osteoporosis, hyperparathyroidism	1hr			
	Tumors: Primary, osteosarcoma, osteoclastoma, Ewing's sarcoma, chondrosarcoma, metastatic	1hr	1		
	Arthritis: rheumatoid, osteoid and tuberculosis	1hr		V	
13	Central Nervous system	3hrs	<u> </u> l		1
	CSF and its disturbances: Cerebral oedema, raised intracranial pressure	1hr	1		
	Inflammatory disorders: Pyogenic and tuberculous meningitis, brain abscess, tuberculoma.		7		
	Cerebrovascular disease: atherosclerosis, thrombosis, embolism, aneurysm, hypoxia, infraction and hemorrhage	1hr		V	
	Classify CNS tumors-primary glioma and meningioma and metastatic	1hr	$\overline{\mathbf{v}}$		

14	Endocrine system	4hrs			
a nar dan sebelahir (da an da ta	Thyroid: Differential diagnosis of thyroid nodule.	1 hr			
	Adrenal diseases: Cortical hyperplasia, atrophy, tuberculosis, tumors of cortex and medulla.	1hr		V	
	Parathyroid hiperplasias and tumours, hyperparathyroidism. Pituitary tumors	1 hr	Ą	\checkmark	
15	Myopathies: Differential diagnosis of common muscle disorders.	1hr			
	Clinical Pathology	3hrs			۷
1	Jaundice: Differential diagnosis and laboratory investigations in jaundice.	1hr	V		
2	Diabetes mellitus: Classification, pathogenesis of system involvement, sequelae and complications.	1hr	V		
3	Renal function tests	1hr	N,		
	Medical Autopsy	1hr	1		
1	Indications and techniques of medical autopsies	1hr			

Tutorials and Integrated teaching:

A Hematology

- 1 Blood Collection and anticoagulant
- 2 Peripheral Smear
- 3 Iron deficiency Anemia
- 4 Megaloblastic Anemia
- 5 Hemolytic Anemia
- 6 Erythrocyte sedimentation Rate (ESR) & Packed Cell Volume (PCV)

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- 7 Acute Leukemia
- 8 Chronic Leukemia
- 9 Bone Marrow Examination
- **B** General Pathology
- 1 Cell injury & Cell death
- 2 Intracellular accumulations
- 3 Inflammation & Repair
- 4 Circulatory Disturbances
- 5 Infections
- 6 Neoplasia
- 7 HIV/AIDS
- C Systemic Pathology
- 1 Atherosclerosis & Ischemic heart disease
- 2 Rheumatic heart disease
- 3 Infective Endocarditis
- 4 Pneumonias

5	Tumors of Lung
6	Cirrhosis
7	Glomerulonephritis
8	Peptic Ulcer
9	Ulcers of Intestine
10	Carcinoma Breast
11	Carcinoma Cervix
12	Bone tumors
13	Museum Specimens
D	Clinical Pathology
1	Liver function test & clinical charts
2	Renal function test & clinical charts
3	Gastric function test & clinical charts
4	Cerebrospinal Fluid Examination (CSF)
5	Urine Examination

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PRACTICAL:

- 1. One third of allotted practical hours to be devoted to
 - a. Performing a complete urine examination and detecting abnormalities and correlating with pathological changes.
 - b. To perform with accuracy and reliability basic hematological estimation: TLC DLC, peripheral smear, staining, reporting along with history.
- 2. One third of allotted practical hours to be devoted to

Identify and interpret gross and microscopic features of inflammatory lesions of different organs and common systemic diseases.

3. One third of allotted practical hours to be devoted to

Discussion of case studies (paper) clinical, gross and microscopic features and other parameters wherever applicable to learn clinico-pathological correlations.

Practical Syllabus:

Clinical Pathology

- 1 Introduction to Pathology
- 2 Blood collection and anticoagulants
- 3 Hemoglobin estimation
- 4 Total WBC count
- 5 Differential WBC count
- 6 Development of blood & bone marrow examination.
- 7 Laboratory investigations in anemias :
- 8 Acute Leukemia
- 9 Chronic Leukemia
- 10 Blood grouping
- 11 Urine Examination
- 12 Examination of CSF
- 13 Bleeding disorders
- 14 Sputum and fluid tests
- 15 Renal function tests
- 16 Liver function tests
- 17 Gastric & Pancreatic function tests
- 18 Investigations in infertility

General and Systemic Pathology

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- 1 Microscope and microscopic study of cells and tissues
- 2 Retrogressive changes
- 3 Necrosis and Gangrene
- 4 Pigments
- 5 Amyloidosis
- 6 Acute inflammation
- 7 Chronic inflammation & repair
- 8 Typhoid & syphilis
- 9 Tuberculosis and Leprosy
- 10 Circulatory disturbances I, II & III
- 11 Disorders of cell growth
- 12 Tumor Pathology I & II
- 13 Immuno Pathology I &II
- 14 Respiratory System I & II
- 15 Cardiovascular System I & II
- 16 Alimentary System I, II & III
- 17 Hepatobiliary System I & II
- 18 Diseases of Kidney I & II
- 19 Female reproductive System
- 20 Male reproductive System
- 21 Lymph nodes and Spleen
- 22 Skeletal System
- 23 Diseases of Skin
- 24 Central nervous System
- 25 Tumors of Breast and Diseases of the endocrine organs

EXAMINATION SKILLS

- 1 Be able to collect, store and transport materials for various pathological tests including histopathology, cytopathology, clinical pathology, hematology and biochemistry.
- 2 Interpret abnormal laboratory values of common diseases
- 3 Do complete urine examination including microscopy.
- 4 Do perform and interpret hemoglobin, TLC, DLC, ESR, PCV, peripheral blood smears and red cell morphology.

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- 5 Interpret the peripheral smears of common diseases.
- 6 Do blood grouping and cross matching
- 7 Adapt universal precautions for self protection against HIV and hepatitis and counsel the patient.

Semester	Theory Marks	Practical Marks
III	40	40
IV	40	40 *
V	40	40
Total	120	120

Semester / Term Ending Theory and Practical Examination in Pathology

There will be single theory paper at the end of each semester. The pattern for theory & Practical examination will be same as **Pathology University Examination**.

Pathology University Examination: Theory, Practicals and Viva

- 1. Scheme of internal assessment (Pathology) : The computation of internal assessment marks shall be as per rule No 2 and 3 mentioned in this rule and regulation
- 2. Pattern of Theory Examination including Distribution of Marks, Questions and Time.

Sr.No		Total marks
1	Theory (2 papers - 40 marks each)	80
2	Oral (Viva)	15
3	Practical	25
4	Internal assessment (Theory -15, Practicals -15)	30
	Total	150

a. Distribution of Marks

i) Total duration - 4 hrs (each paper of 2 hrs or 120 minutes)

ii) Each paper will have 3 sections.

iii) Pattern and marking for each paper of 40 marks as provided in the table

Sections	Nature of Question- Two Theory Papers	Total No. of Questions	Mark (s) per Question	Total Marks
A)	Multiple Choice Questions (MCQs)	16	1/2	08
B)	Brief Answer Questions (BAQs)	4 out of 5	4 x 4	16
C)	Long Answer Question (LAQ)	2 out of 3	2 x 8	16
	Total			40

- 1. Direction- Only short answer questions may be permitted from the portions marked as "Desirable to know"
 - Paper wise distribution of theory topics and number of questions:-

A) Paper I:

General Pathology inclusive of general neoplasia, Haematology inclusive of transfusion medicine.

Out of 3 LAQs in Section C, 2 questions should be from General Pathology and General Neoplasia and one question should be from Haematology inclusive of transfusion medicine.

B) Paper II:

Systemic Pathology inclusive of Systemic Neoplasia and Clinical Pathology. Out of 3 LAQs in Section C, 2 questions should be from Systemic Pathology and Systemic Neoplasia and one question should be from Clinical Pathology.

4. Marking scheme: Each paper of 40 marks as shown in the above table.

5. University examination Nature of practicals and duration (Pathology)

a) Number of students for practical Examination should not exceed more than 35 /day

b) Practicals

Marks 25

	Practicals		Marks
a.	10 Spots (2 minutes each)	4 specimen, 3 histopathology, 1 hematology slide, 1 instrument and 1 chart	10 Marks
		Identification – 1/2 mark Specific short question - 1/2 mark 1 Mark for each spot	
b.	Urine Examination	Physical Examination and two abnormal constituents.	05 Marks
c.	Histopathology slide	Draw, label and give diagnosis.	03 Marks
d.	Haematology Examination	Peripheral blood smear staining and do differential leukocyte count.	03 Marks
		Hemoglobin Estimation / Total leukocyte count / Blood group Estimation.	04 Marks
		Total	25 Marks

C. Viva: Duration and topic distribution: Viva marks shall be added to theory and shall be submitted separately out of 15 Marks.

Viva consists of two tables; on each table the student will face 2 examiners for 5 minutes each:

Table - I General and Systemic Pathology

7 Marks

Table - II Clinical Pathology and Haematology

8 Marks

Total 15 Marks

TEACHING LEARNING METHODS:

- Structured interactive sessions
- Small group discussion
- Practical including demonstrations
- Problem based exercises
- Self learning tools
- Interactive learning
- E-modules

LEARNING RESOURCE MATERIALS:

• Text books

1) Robbin's : Pathologic basis of Disease

2) Hematology De Gruchy

3)Text book of Pathology by Harsh Mohan

4) Clinical Pathology: A Practical Manual by Sabitri Sanyal

- Reference books
- Practical note books
- Internet resources

TIME OF EVALUATION:

There should be regular formative assessment. Formative assessment, day to day performance should be given greater importance. Examination of pathology should be at the end of 5^{th} semester and formative assessment in middle of 3^{rd} and 4^{th} semester and summative assessment at the end of 5^{th} semester.

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Prof & Heac Dept of Pathology G M Medical College The New Mumba

EXAMINATION SKILLS

	Skills	P. Indep	Under guidance	Assist	observe
1	Be able to collect, store and transport materials for various pathological tests including histopathology, cytopathology, clinical pathology, hematology and biochemistry.	1		,	
2	Interpret abnormal laboratory values of common diseases	1			
3	Do complete urine examination including microscopy.	7			
4	Do perform and interpret hemoglobin, TLC, DLC, ESR, PCV, bleeding time, clotting time, blood smears and red cell morphology.	1			
5	Interpret the peripheral smears of common disease's	1			-
6	Do blood grouping and cross matching	1			
7	Adapt universal precautions for self protection against HIV and hepatitis and counsel the patient.	1			

PRACTICAL:

- 1. One third of allotted practical hours to be devoted to
 - a. Performing a complete urine examination and detecting abnormalities and correlating with pathological changes.
 - b. To perform with accuracy and reliability basic hematological estimation: TLC DLC, peripheral smear, staining, reporting along with history.
 - c. To perform basic lab hematological tests like BT & CT.
- 2. One third of allotted practical hours to be devoted to
 - a. Identify and interpret gross and microscopic features of acute inflammation in organs such as appendix, lungs, and meninges.
 - b. Cellular components of chronic and granulomatous inflammation.

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Cient. of Pathology

- Granulation tissue. c.
- Typhoid, tuberculosis, amoebic ulcers in intestine. d.
- Rhinosporiodosis, actinomycosis, mycetoma, molluscum contagiosum. Amoebic liver abscess, malarial liver and spleen, filarial lymphadenitis, Cysticercosis. e.
- Fatty liver and kidney, Amyloidosis of spleen, kidney and liver. f.
- g. Types of necrosis: caseous, coagulative, liquefactive and fat.
- Common systemic diseases. i.
- 3. One third of allotted practical hours to be devoted to
 - a. Discussion of case studies (paper) clinical, gross and microscopic features and other parameters wherever applicable to learn clinico-pathological correlations.

SUGGESTED TOPICS FOR INTEGRATED TEACHING.

1. Immunology

h.

- 2. Deficiency diseases
- 3. Genetics
- 4. Integrated seminars
 - a. Rheumatic heart disease.
 - b. Ischemic heart disease
 - c. Hypertension and hypertensive heart disease.
 - d. Tuberculosis lung.
 - e. Nephrotic syndrome
 - f. Inflammatory disease of small and large bowel
 - g. Cirrhosis
 - h. Metabolic bone disease
 - i. Diabetes mellitus
 - j. HIV/ AIDS
 - k. Iron deficiency anemia.
 - 1. Jaundice
 - m. Malaria

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TEACHING LEARNING METHODS:

- Structured interactive sessions
- Small group discussion
- Practical including demonstrations
- Problem based exercises
- Written case scenario
- Self learning tools
- Interactive learning
- E-modules

LEARNING RESOURCE MATERIALS:

- Text books
- Reference books
- Practical note books
- Internet resources

TIME OF EVALUATION:

There should be regular formative assessment. Formative assessment, day to day performance should be given greater importance. Examination of pathology should be at the end of 5^{th} semester and formative assessment in middle of 3^{rd} and 4^{th} semester and summative assessment at the end of 5^{th} semester.

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Prof & Head Dept. of Pathology

APProved in Bom 45/2016, Dated 28/04/2010

Resolution No. 3.2(b)

Resolution No. 3.2(b): Resolved to accept revised method to calculate internal assessment marks for IInd MBBS Exam effective from batch entering into 2nd MBBS from August 2016 onwards.

For Theory:

	Microbiology	Pharmacology	Pathology	FMT
III rd , IV th Sem. & Prelim Exam.	10	10	10	07
Day to day assessment as per MCI norms	05	05	05	03
Total marks	15	15	15	10

For Practical:

	Microbiology	Pharmacology	Pathology	FMT
III rd , IV th , Sem. & Prelim Exam.	10	10	10	07
Day to day assessment as per MCI norms	05	05	05	03
Total marks	15	15	15	10

Ref: MGM | Patho | 2016 0-424

To,

Date:14/12/16

The Registrar, MGMIHS, MGM Medical College, Navi Mumbai.

Subject: Submission of Final Revised Second MBBS syllabus.

Respected Sir,

Hereby submitting the final revised second MBBS syllabus and corrections have been done wherever needed.

Thanking You,

Yours faithfully,

Dr. Reeta Dhar, Prof & HOD, Dept. of Pathology, MGM Medical college, Navi Mumbai.

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MGM Institute Of INWARD NO	Health Sciences
DATE:	- 02-

PATHOLOGY (SYLLABUS)

I. Learning Objectives

At the end of the course, the Student shall be able to,

- 1. Understand and describe the structure & ultra structure of a cell, the concept of cell injury, cell death, repair and the change produces thereby, in different tissues and organs.
- 2. Know the principles of collection, handling, storage, and dispatch of clinical samples from patient, in a pro per manner.
- 3. Perform and interpret in a proper manner the basic clinico-pathological procedures.
- Knowledge of the common hematological disorders and the investigations necessary to diagnose them and determine their prognosis.
- 5. Understand normal haemostatic mechanism, the derangements of this mechanism and the effect on human system.
- 6. Understand the etiopathogenesis, the pathological effects, and the clinico-pathological correlation of common infectious and non-infectious diseases.
- 7. Understand the concept of neoplasia with respect to etiology, gross and microscopic features, diagnosis and prognosis in different tissues and organs of the body.
- Correlate normal and altered morphology (gross and microscopy) of different organ systems in different diseases to the extent needed of understanding of the disease processes and their clinical significance.
- 9. Have knowledge of common immunological disorders and their effects on human body.

II. Total number of teaching hours: 300hrs (IIIrd, IVth & Vth Semester)

a)Theory	160 hrs
b)Practicals	110 hrs
c)Revisions & Evaluations (internal)	30 hrs
Total	300hrs

III. Distribution of teaching hours:

1) General Pathology	37 hrs				
2) Hematology	16 hrs				
3) Systemic Pathology	61 hrs				
4) Clinical Pathology	03 hrs				
6) Autopsy	01 hr				
5) Tutorials, Integrated Teaching and Seminars	42 hrs				
Total	160hrs				

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
	General Pathology		1		
1	Cell injury	6hrs			
	Common definitions in pathology and causes of cell injury.	1hr	V		
	Modes of cell injury: Mechanisms of cell injury	1hr	V		
	Reversible cell injury: Definitions, cellular swelling, fatty change.	1hr	1		
	Irreversible cell injury: Definition Necrosis & gangrene: definitions & types. Apoptosis & its relevance.	1hr	V		
	Intracellular accumulations & alterations: Types of Intracellular accumulations with alterations in cell organelles & cytoskeleton.	1hr	V	√	
si	Cellular adaptations & growth disturbances: Hypertrophy, Hyperplasia, Metaplasia, Agenesis, dysplasia.	1hr	1		
	Cellular ageing and mechanism	-			V
2	Acute & chronic Inflammation	3hrs			
	Acute inflammation: Define & describe cellular & vascular changes. Outcomes & morphological patterns of acute inflammation.	1 hr	1		
	Chemical mediators of inflammation: definition, classification, description of each type, role in acute & chronic inflammation.	1hr	V		
	Chronic inflammation: definition & causes.	1hr			
	Granulomatous inflammation: etiology, pattern & systemic effects of granulomas.				
3	Regeneration & repair	3hrs		I	
	Regeneration & repair: define & describe mechanism of regeneration & repair.	1hr	V		
	Healing by primary & secondary intention with local & systemic factors affecting wound healing.	1hr	V		•
	Repair in specialized tissue: Describe repair in fractures & parenchymal organs.	1hr	V		
	Stem cell concept-Regenerative medicine				V

4	Circulatory disturbances	5hrs		v.	
	Hyperemia & congestion	1hr	~ √		
	Edema: Define, classify, pathogenesis & correlate morphology with clinical significance.	1hr			
	Thrombosis: Definition, etiopathogenesis, morphology, fate & effects of thrombosis.	1hr	V		
	Embolism & Infarction: Define types with clinical significance.	1hr	V		
	Shock: Define, classify, pathogenesis, mediators & stages of shock.	1hr			
5	Genetic disorders	1hr			
²	Normal karyotype, classification of genetic disorders, types of genetic change.	1hr	V		
	Down's syndrome (Trisomy 21), Klinefelter's syndrome & Turner's syndrome.		V		
	Glycogen storage disease & lysosomal storage disorders.			\checkmark	
6	Disturbances of pigment metabolism	1hr			
	Types, changes associated with common disturbances like lipofuscin, Hemosiderin, melanin & Bilirubin.	1hr	V		
7	Disturbances of Mineral metabolism	1hr			
	Types & morphological changes in calcification.	1hr	V		
	Disturbance of mineral like zinc				
8	Diseases of Immunity	4hrs			
	Hypersensitivity reactions: Types & differentiate between different types of hypersensitivity reactions.	1hr	V		
	Transplant rejections			\checkmark	
	Autoimmune diseases: Mechanism of autoimmunity, common autoimmune diseases, SLE.	1hr	V		
	Amyloidosis: Definition, physical & chemical nature of amyloid, classification, pathogenesis, morphology, lab diagnosis with special stain & clinical correlation.	1hr	N		
	AIDS: Epidemiology, etiopathogenesis, morphology,clinical features, diagnosis, handling of infected materials & health education.	1hr	V		

9	Infectious disease	7hrs			
	Typhoid fever: Pathogenesis, morphology & clinical features.	1 hr	V		×
	Syphilis: Classify various stages, pathogenesis & morphology.	1hr	√ ^N		
	Tuberculosis: Epidemiology, etiology, pathogenesis, morphology, clinical features, lab diagnosis & importance of tuberculosis in the present day context.	2hr	V		
	Leprosy: Classify, pathogenesis, differentiate between different types of leprosy, histological features & sequelae.	1hr	V		
	Fungal: Classification of fungal diseases & opportunistic fungal infections.	1hr	V		
	Parasitic: Malaria: Types, morphological features in P. Vivax &Falciparum Malaria & lab diagnosis.	1hr	V		
u.	Leishmaniasis, Filariasis, Hydatid, Cysticercosis			\checkmark	
10	Neoplasia	5 hrs		2	
	Nomenclature, classification & differentiation between benign & malignant neoplasms.	1 hr	V		
	Precancerous lesions.			\checkmark	
	Carcinogenesis	1hr	\checkmark		
	Tumor host interactions: Systemic effects & paraneoplastic syndromes.	1hr			
	Biology of tumor growth & Lab Diagnosis: Diagnostic workup including tumor markers.	1hr	V		
	Spread, grading & staging.	1hr	\checkmark		
	Molecular basis of cancer				\checkmark
	Tumor immunology				V
11	Environmental Pathology	1hr			
	Air pollution, Iatrogenic drug injury. Radiation & physical injury & Obesity, Tobacco& Alcoholism	1 hr			\checkmark

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
1	Hematopathology and transfusion medicine	16hrs			
	Introduction to hematology & hemopoiesis	1hr	V		
	Anemia: classification and clinical features.	1hr	V		
	Nutritional anemia: Iron deficiency,	2hr	V		
	Folic acid/ Vit B12 deficiency anemia including pernicious anemia.				
	Hemolytic anemia: Definition, classification, pathogenesis and investigations.	1hr	V		
	Hereditary spherocytosis and G6PD deficiency.			V	
22	Haemoglobinopathies: Thalassemia, Sickle cell anemia.	1hr	V		
	Aplastic anemia	1hr			
	Hemorrhagic disorders: Classify and lab. Screening tests for hemorrhagic disorders. Platelet deficiency, ITP.	1hr		V	
	Coagulopathies: Coagulation factor deficiency, hemophilia, DIC.	1hr	\checkmark		
	Leucocytic disorders: Leucocytosis, leucopenia, Leukemoid reaction.	1hr	V		
	Acute leukemia: classification and diagnosis.	1hr	\checkmark		
	Chronic leukemia: classification and diagnosis.	1hr	\checkmark		
	Paraprotenemias: Multiple myeloma	1hr	\checkmark		
	Myelodysplastic syndromes and Myeloproliferative disorders	1hr		V	
	Blood groups and its relevance in transfusion medicine and hematology. Erythoblastosis foetalis.	1hr	V		
	Blood transfusion: Indications, selection of donor criteria, cross matching, untoward reactions, transmissible infections including HIV and hepatitis.	1hr	V		

	Course Contents	Hrs	Must Know	Desirable to know	Nice to know
	Systemic Pathology				1
1	Cardiovascular system	9hrs			
	Hypertension & hypertensive heart disease	1hr	V		
	Atherosclerosis: Definition, etiopathogenesis, gross and microscopic features, complications and clinical correlation	1hr	1		
	Other diseases of blood vessels : Aneurysms Vasculitis	1hr	~	√	
	Ischemic heart disease: Categories and pathogenesis. Myocardial infarction : incidence, risk factors, pathogenesis, morphology, complications, clinical course and investigations	1hr	V		
	Rheumatic heart disease: Incidence, etiology, Pathogenesis, morphology, complications, clinical course & investigations.	1hr	1		
	Infective endocarditis: Causes, Pathogenesis, morphology, complications and differential diagnosis of cardiac vegetations.	1hr	V		
	Pericarditis and other pericardial diseases	1hr	V		
	Congenital heart disease: ASD, VSD, Fallot's teratology, Bicuspid aortic PDA	1hr			
	Cardiomyopathies	1hr			5
2	Respiratory system	7 hrs			
	Pneumonias: Etiopathogenesis, classifications, morphology, clinical course and complications.	1hr	\checkmark		
	Lung abscess: Etiopathogenesis, Morphology and complications.	1hr	V		
	Atelectasis and hyaline membrane disease.			V	
	Chronic obstructive pulmonary disease: Bronchial asthma and Bronchiectasis -Etiopathogenesis, Morphology and complications.	1hr	· √		
	Chronic bronchitis and Emphysema: Etiopathogenesis, Morphology types of emphysema and complications.	1hr			•
	Pulmonary tuberculosis: primary and secondary, morphologic types including pleuritis, clinical course.	1hr	V		

	Occupational lung disorders: Anthracosis, silicosis, asbestosis, mesothelioma.	1hr		V	
	Tumors of lung and pleura: Classification, etiopathogenesis, gross and microscopic features, pattern of spread, staging, clinical course, para- neoplastic syndromes.	1hr	V		
3	Oral cavity and salivary gland	2hrs			
	Precancerous lesions of oral cavity and oral cancers: etiopathogenesis, gross and microscopic features.	1hr			
	Differential diagnosis of swelling of salivary gland.	1hr	V		
4	Gastrointestinal tract	5hrs			
	Gastritis: Etiology and types.	1hr		V	
÷.	Peptic ulcer: definition, etiopathogenesis, gross and microscopic features and complications.		\checkmark		
	Ulcers of intestine: etiological classifications, morphology of typhoid, tubercular, amoebic ulcers and bacillary dysentery. Differential diagnosis of different forms of ulcers.	lhr	V		
	Idiopathic inflammatory bowel disease: etiopathogenesis, morphology and differences between Crohn's disease and ulcerative colitis.	1hr	V		
	Appendicitis	-			
	Tumors of upper Gastrointestinal Tract: Esophagus: etiopathogenesis, morphology and clinical features. Gastric carcinoma: etiopathogenesis, classification, gross and microscopic features and clinical features. Carcinoid tumors of GIT.	1hr	V		
	Tumors of lower Gastrointestinal Tract: Carcinoma colon- Etiopathogenesis, morphology and clinical features.	1hr	\checkmark		
	Intestinal polyps and gastrointestinal stromal tumors.			\checkmark	
5	Liver and Biliary Tract	5hrs			
	Viral hepatitis: Etiopathogenesis, types, clinical source, pathology, serologic diagnosis, sequelae.	1hr	\checkmark	-	
	Alcoholic liver disease: Pathogenesis, morphology and correlation with clinical features.	1hr	\checkmark		7
	Cirrhosis: Etiopathogenesis, classification, pathology, complications & differential diagnosis.	1hr	\checkmark		
	Portal Hypertension: Types and manifestations.	1	\checkmark		

	Tumors of liver: Pathology of hepatocellular carcinoma.	1hr	V		
	Disease of gall bladder: cholecystitis, cholelithiasis and tumors.	1hr		~	
6	Urinary tract system	8hrs			
	Basics of impaired function and urinalysis	1hr	\checkmark		
	Nephritic and Nephrotic syndrome				
	Glomerulonephritis: Classification, Acute nephritis, rapidly progressive glomerulonephritis.	1hr	V		
	Renal failure: definitions, criteria, etiology, systemic manifestations and investigations.	1hr	V		
	Nephrolithiasis and obstructive nephropathy	1hr			
	Pyelonephritis and interstitial nephritis: etiopathogenesis of acute and chronic, morphology and clinical correlation.	1hr			
	Tumors of kidney and pelvis: classifications, morphology, clinical course and paraneoplastic syndromes of common tumors.	1hr	V		
	Renal vascular disorders and malformations, polycystic kidney.	1hr			
	Urinary bladder: cystitis and carcinoma	1hr	\checkmark		
7	Female genital tract	6hrs			
	Diseases of Uterus: Endometrial hyperplasia and carcinoma, adenomyosis, smooth muscle tumors	1hr	V		
	Trophoblastic diseases: hydatidiform mole, choriocarcinoma.	1hr			
	Diseases of cervix: cervicitis, cervical carcinoma, etiology cytological diagnosis	1hr	V		
	Ovarian tumors	1hr	V		
	Pelvic inflammatory disease including salpingitis	1hr			
	Genital tuberculosis			V	-
	Breast: Non-neoplastic and Neoplastic lesions of the breast- Classification, Morphology, grading of carcinoma of breast and differential diagnosis of breast swellings.	1hr	1		*

8	Male Genital System	3hrs			
	Prostate: Nodular hyperplasia, carcinoma	1hr			
	Testicular tumors	1hr			
	Carcinoma of penis	1hr			
9	Lymphoreticular system	3hrs			
	Diseases of spleen: Splenomegaly and effects	1hr			
	Lymphadenitis: Non-specific, granulomatous	-	1		
	Hodgkin's lymphoma, classification, morphology	1hr			
	Non-Hodgkin's lymphoma, classification, morphology	1hr	V		
10	Dermatopathology	2hrs			
i.	Skin tumors: Non-pigmented -classification and morphology.	1 hr	V		
	Skin tumors: pigmented- classification and morphological features of common nevi and malignant melanoma.	1hr	V		
1	Soft tissue	1hr			
	Classification, morphological features of lipomatous, fibrous, blood vessels tumors, Neural, muscle and fibro histiocytic tumors.	1hr	V		~
12	Skeletal System	3hrs			
	Osteomyelitis and Metabolic diseases: rickets / osteomalacia, osteoporosis, hyperparathyroidism	1hr		\checkmark	
	Tumors: Primary, osteosarcoma, osteoclastoma, Ewing's sarcoma, chondrosarcoma, metastatic	1hr	V		
	Arthritis: rheumatoid, osteoid and tuberculosis	1hr		\checkmark	
13	Central Nervous system	3hrs			
	CSF and its disturbances: Cerebral oedema, raised intracranial pressure	1hr	V		
	Inflammatory disorders: Pyogenic and tuberculous meningitis, brain abscess, tuberculoma.		V		*
	Cerebrovascular disease: atherosclerosis, thrombosis, embolism, aneurysm, hypoxia, infarction and haemorrhage	1 hr		\checkmark	
	Classify CNS tumors -primary glioma and meningioma and metastatic.	1hr	V		

14	Endocrine system	3hrs			
	Thyroid: Differential diagnosis of thyroid nodule.	1hr			
	Adrenal diseases: Cortical hyperplasia, atrophy, tuberculosis, tumors of cortex and medulla.	1 hr		V	
	Parathyroid hyperplasias and tumours, hyperparathyroidism. Pituitary tumors	1hr		V	
15	Myopathies: Differential diagnosis of common muscle disorders.	1hr		V	
	Clinical Pathology	3hrs			-
1	Jaundice: Differential diagnosis and laboratory investigations in jaundice including Liver function.	1hr	V		
2	Diabetes mellitus: Classification, pathogenesis of system involvement, sequelae and complications.	1hr			
3	Renal function tests	1 hr	V		
	Medical Autopsy	1hr			
1	Indications and techniques of medical autopsies	1hr	V		

SR. No	TOPICS (Tutorials & Seminars)	HOURS
1	Blood Collection and anticoagulant	1 hr
2	Peripheral Smear	1 hr
3	Iron deficiency Anemia	1 hr
4	Megaloblastic Anemia	1 hr
5	Hemolytic Anemia	1 hr
6	Erythrocyte sedimentation Rate (ESR) & Packed Cell Volume (PCV)	1 hr
7	Leukemias	1 hr
~8	Bone Marrow Examination	1 hr
9	Cell injury & Cell death	1 hr
10	Inflammation & Repair	1 hr
11	Circulatory Disturbances	1 hr
12	Neoplasia	1 hr
13	Pneumonias	1 hr
14	Cirrhosis	1 hr
15	Glomerulonephritis	1 hr
16	Ulcers of Gastrointestinal Tract	1 hr
17	Carcinoma Breast	1 hr
18	Carcinoma Cervix	1 hr
19	Bone tumors	1 hr
20	Liver function test & clinical charts	1 hr
21	Renal function test & clinical charts	1 hr
22	Gastric function test & clinical charts	1 hr
	TOTAL	22hrs

Tutorials, Seminars and Integrated teaching (42 Hours)

SR. No	TOPICS (Integrated Teaching)	HOURS	SR. No
1	Auto immune disorders	Horizontal	2 hrs
2	Tuberculosis	Horizontal	2 hrs
3	Malaria	Horizontal	2 hrs
4	Urine Examination & UTI	Horizontal	2 hrs
5	HIV/AIDS	Vertical	2 hrs
6	Fungal Infection	Vertical	2 hrs
7	Typhoid	Vertical	2 hrs
8	Ischemic heart disease	Vertical	2 hrs
9	Rheumatic heart disease	Vertical	2 hrs
10	Meningitis	Vertical	2 hrs
	TOTAL	5	20hrs

PRACTICAL:

- 1. One third of allotted practical hours to be devoted to
 - a. Performing a complete urine examination and detecting abnormalities and correlating with pathological changes.
 - b. To perform with accuracy and reliability basic hematological estimation: TLC DLC, peripheral smear, staining, reporting along with history.
- 2. One third of allotted practical hours to be devoted to

Identify and interpret gross and microscopic features of inflammatory lesions of different organs and common systemic diseases.

3. One third of allotted practical hours to be devoted to

Discussion of case studies (paper) clinical, gross and microscopic features and other parameters wherever applicable to learn clinico-pathological correlations.

Practical Syllabus:

	Clinical Pathology
1	Introduction to Pathology
2	Blood collection and anticoagulants
3	Hemoglobin estimation
4	Total WBC count
5	Differential WBC count
6	Development of blood & bone marrow examination.
7	Laboratory investigations in anemias :
8	Acute Leukemia
9	Chronic Leukemia
10	Blood grouping
11	Urine Examination
12	Examination of CSF
13	Bleeding disorders
14	Sputum and fluid tests
15	Renal function tests
16	Liver function tests
17	Gastric & Pancreatic function tests
18	Investigations in infertility

	General and Systemic Pathology	
1	Microscope and microscopic study of cells and tissues	
2	Retrogressive changes	
3	Necrosis and Gangrene	
4	Pigments	
5	Amyloidosis	
6	Acute inflammation	
7	Chronic inflammation & repair	
8	Typhoid & syphilis	
9	Tuberculosis and Leprosy	
10	Circulatory disturbances I, II & III	
11	Disorders of cell growth	
12	Tumor Pathology I & II	
13	Immuno Pathology I &II	
14	Respiratory System I & II	
15	Cardiovascular System I & II	
16	Alimentary System I, II & III	
17	Hepatobiliary System I & II	
18	Diseases of Kidney I & II	
19	Female reproductive System	
20	Male reproductive System	
21	Lymph nodes and Spleen	
22	Skeletal System	1
23	Diseases of Skin	
24	Central nervous System	
25	Tumors of Breast and Diseases of the endocrine organs	

EXAMINATION SKILLS

- 1. Be able to collect, store and transport materials for various pathological tests including histopathology, cytopathology, clinical pathology, hematology and biochemistry.
- 2. Interpret abnormal laboratory values of common diseases
- 3. Do complete urine examination including microscopy.
- 4. Do perform and interpret hemoglobin, TLC, DLC, ESR, PCV, peripheral blood smears and red cell morphology.
- 5. Interpret the peripheral smears of common diseases.
- 6. Do blood grouping and cross matching
- 7. Adapt universal precautions for self protection against HIV and hepatitis and counsel the patient.

Semester	Theory Marks	Practical Marks		
III	40	40		
	1975 P. 1			
IV	40	40		
V	80	40		
Total	160	120		

Semester / Term Ending Theory and Practical Examination in Pathology

There will be single theory paper at the end of each semester. The pattern for theory & Practical examination will be same as **Pathology University Examination**.

Pathology University Examination: Theory, Practicals and Viva

- 1. Scheme of internal assessment (Pathology) : The computation of internal assessment marks shall be as per university rule and regulations.
- 2. Pattern of Theory Examination including Distribution of Marks, Questions and Time.

Distribution of Marks

Sr. No		Total marks
1	Theory (2 papers - 40 marks each)	80
2	Oral (Viva)	15
3	Practical	25
4	Internal assessment (Theory -15, Practicals -15)	30
	Total	150

i) Total duration - 4 hrs (each paper of 2 hrs or 120 minutes)

ii) Each paper will have 3 sections.

iii) Pattern and marking for each paper of 40 marks as provided in the table

Sections	Nature of Question- Two Theory Papers	Total No. of Questions	Mark (s) per Question	Total Marks
A)	Multiple Choice Questions (MCQs)	16	1/2	08
B)	Brief Answer Questions (BAQs)	4 out of 5	4 x 4	16
C)	Long Answer Question (LAQ)	2 out of 3	2 x 8	16
	Total			40

3. Direction- For paper setting

LAQs and MCQs must be from must know area.

SAQs must be from, Must know (90%), Desirable to know & Nice to know (10%)

Paper wise distribution of theory topics and number of questions:

A) Paper I:

General Pathology inclusive of general neoplasia, Haematology inclusive of transfusion medicine.

Out of the total 16marks for MCQs in section A, 10 MCQs should be from General Pathology inclusive of general neoplasia, 4 MCQs from hematology and 2 MCQs from transfusion medicine.

Out of 3 LAQs in Section C, 2 questions should be from General Pathology and General Neoplasia and one question should be from Haematology inclusive of transfusion medicine.

B) Paper II:

Systemic Pathology inclusive of Systemic Neoplasia and Clinical Pathology.

Out of the total 16 marks for MCQs in section A, 12 MCQs should be from systemic pathology inclusive of systemic neoplasia and 4 MCQs from clinical pathology.

Out of 3 LAQs in Section C, 2 questions should be from Systemic Pathology and Systemic Neoplasia and one question should be from Clinical Pathology.

4. Marking scheme: Each paper of 40 marks as shown in the above table.

5. University examination Nature of practicals and duration (Pathology)

a) Number of students for practical Examination should not exceed more than 35 /day.

b) Practicals

Marks 25

	Practicals		Marks
a.	10 Spots (2 minutes each)	4 specimens, 3 histopathology slides, 1 hematology slide, 1 instrument and 1 chart	10 Marks
		Identification – 1/2 mark Specific short question - 1/2 mark 1 Mark for each spot	
b.	Urine Examination	Physical Examination and two abnormal constituents.	05 Marks
c	Histopathology slide	Draw, label and give diagnosis.	03 Marks
d.	Haematology Examination	Peripheral blood smear staining and do differential leukocyte count.	03 Marks
		Hemoglobin Estimation / Total leukocyte count / Blood group Estimation.	04 Marks
		Total	25 Marks

C) Viva: Duration and topic distribution: Viva marks shall be added to theory and shall be submitted separately out of 15 Marks.

Viva consists of two tables; on each table the student will face 2 examiners for 5 minutes each:

Table - I General and Systemic Pathology

7 Marks

Table - II Clinical Pathology and Haematology

8 Marks

Total 15 Marks

TEACHING LEARNING METHODS:

- Structured interactive sessions
- Small group discussion
- Practical including demonstrations
- Problem based exercises
- Self learning tools
- Interactive learning
- E-modules

LEARNING RESOURCE MATERIALS:

- Text books
- 1) Robbin's : Pathologic basis of Disease
 - 2) Hematology De Gruchy
 - 3) Text book of Pathology by Harsh Mohan
 - 4) Clinical Pathology: A Practical Manual by Sabitri Sanyal
 - 5) Practical Pathology Book by Harsh Mohan
- Reference books
 - 1) Dacie and Lewis practical Hematology; 12th Edition.
 - 2) Pathology illustrated; 7th Edition by Robin Reid.
 - 3) Henry's Clinical diagnosis & Management By Laboratory Methods; 23rd Edition, by Richard McPherson.
 - 4) Transfusion Medicine, Technical Manual.2nd Edition 2003, Edited by R. K. Saran.

TIME OF EVALUATION:

There should be regular formative assessment. Formative assessment, day to day performance should be given greater importance. Examination of pathology should be at the end of 5^{th} semester and formative assessment in middle of 3^{rd} and 4^{th} semester and summative assessment at the end of 5^{th} semester.



MGM INSTITUTE OF HEALTH SCIENCES

(Deemed University u/s 3 of UGC Act, 1956)

MARKLIST FOR PRACTICAL AND VIVA

EXAM CENTRE: -..... EXAM: - SECOND MBBS

SUBJECT: -PATHOLOGY

DISTRIBUTION OF PRACTICAL MARKS

HAEMATOLOGY EXAMINATION

A: 10 spots2 minutes each (4 Specimen, 1 Instrument, 3 histopathology sides, 1 hematology slide and 1 chart) 1/2 marks for identification and 1/2 mark for specific short question together 1 mark for each spot."

B: Urine Examination

C : Histopathology Slides

- 10 Marks
- C5 Marks

- 03 Marks

D : Peripheral Blood Smear Stain And Report - 03 Marks - 04 Marks E: Hb/TLC/ Blood group - 25 Marks F: Total DISTRIBUTION OF VIVA MARKS G: General of Systematic Pathology - 07 Marks

H: Clinical Patho and Hematology - 08 Marks I : Totai - 15 Marks I : Totai

MONTH / YEAR: -....

Seat No	А	В	С	D	E	F Practical Total 25 Max. 25 Marks Min.12.5 Marks	G	Н	Viva Total.
	10	5	3	3	4	25 Marks	07	08	15 Marks
¥					÷				
									1
					1				
				EL.					
					1				

NAME OF EXAMINER	COLLEGE	SIGNATURE WITH DATE
1.		7
2.		
3.		
4.		

Subject: Pathology

PAPER-I

Date:

Instructions:

- 1. All questions are compulsory.
- 2. Please darken the correct box in an answer sheet.

SECTION 'A' (MCQ's)

1) Bouin's fluid contains all except

- a) Picric acid
- c) Formalin

b) Glacial acetic acid d) Methanol

d) Autotechnicon

Duration: 2hrs

Maximum Marks: 40 Section A: 15mins

16x0.5 = 8Marks

2) Tissue sections are cut by an instrument called as a)Thermometer b) Cryostat

c) Microtome

3) Masson's trichrome stain is used for a) Fat b) Mucin c)connective tissue d) Pigment

4) Coagulative necrosis is seen in all of the following conditions except a) Myocardial infarction

c) Tuberculosis of lung

b) Thermal injury

d) Kidney infarction

5) Gangrene of intestine is an example of a)Dry Gangrene c)Gas Gangrene

b) Wet Gangrene d) Air embolism

6) Reversible cell injury does not show a) Loss of microvilli c) Endoplasmic reticulum swelling

b) Karyolysis d) Myelin figures

7) Caisson disease is due toa) Fat embolismc) Amniotic fluid embolism	b) Air embolism d) Thromboembolism
	leads to: b) Septic shock d) Neurogenic shock
9) In clean surgical wound, granulation tissuea) 24hrsc) 3 days	e appears by b) one week d) 5days
10) In acute inflammation ,the tissue responsea) Exudationc) Neutrophilic response	consists of all except b) Vasodilation d) Macrophage accumulation
11) All of the following investigations are done excepta) Serum iron levelc) Folic acid level	e to diagnose iron deficiency anaemia b) Serum ferritin level d) Total iron binding capacity
	b) Shilling's Testd) Total iron binding capacity
13) All of the following are the abnormalities ina) Ovalocytec) Spherocyte	n the shape of erythrocyte EXCEPT b) Elliptocyte d) Reticulocyte
14) Following are the causes of iron deficiencya)Hookworm infestationc) Nutritional deficiency	anaemia EXCEPT b) Carcinoma of the stomach d) Intrinsic factor deficiency
15) In Blood bag Adenine is added to CPD toa) Increase Shelf – lifec) Prevent Growth of microorganisms	b) Prevent Coagulation of bloodd) All of above
16) Bombay phenotype are the individuals who:a) Lack H genes and therefore H substancec) Secrete excessive amount of H substance	b) Lack C, D, E antigens d) Possess A, B antigens

Subject: Pathology

PAPER -I

Date:

Duration: 2hrs Maximum Marks: 40 Section B& C: 1hr 45mins

Instructions:

- 1. All questions are compulsory.
- 2. Draw neat and labelled diagram wherever necessary.

Section – B

Q 2) Write short answers (Any 4 out of 5)

- 1) Difference between dry and wet gangrene. (Must Know)
- 2) Repair of fracture bone.(Must Know)
- 3) Down syndrome (Must Know)
- 4) Hereditary spherocytosis. (Desirable to Know)
- 5) Transfusion reactions. (Must Know)

Section – C

Q3) Write Long answers (Any 2 out of 3)

- 1. Define inflammation. Write in detail about vascular and cellular events in acute inflammation. (Must Know)
- 2. Define carcinogens and discuss chemical carcinogenesis. (Must Know)
- 3. Classify anemias and discuss laboratory investigations in megaloblastic anaemia. (Must Know)

$2 \times 8 = 16$

 $4 \times 4 = 16$

Subject: Pathology

PAPER-II

Date:

Duration: 2hrs Maximum Marks: 40 Section B& C: 1hr 45mins

Instructions:

1. All questions are compulsory.

2. Draw neat and labelled diagram wherever necessary.

Section - B

Q 2) Write short answers (Any 4 out of 5)

1. Peptic ulcer. (Must Know)

2. Hepatocellular carcinoma (Must Know)

- 3. Vesicular mole (Desirable to Know)
- 4. Post streptococcal Glomerulonephritis. (Must Know)
- 5. Difference between pyogenic and tuberculous meningitis. (Must Know)

Section – C

Q3) Write Long answers (Any 2 out of 3)

- 1. Discuss etiopathogenesis, gross and microscopic features of myocardial infarction. (Must Know)
- 2. Classify lung tumours and discuss in details about bronchogenic carcinoma (Must Know)
- 3. Classify Diabetes mellitus. Discuss laboratory investigations and complications of diabetes mellitus. (Must Know)

с — В

 $4 \times 4 = 16$

 $2 \times 8 = 16$

PAPER -II

Subject: Pathology

Duration: 2hrs Maximum Marks : 40 Section A: 15mins

Date:

Instructions:

- 1. All questions are compulsory.
- 2. Please darken the correct box in an answer sheet.

SECTION 'A' (MCQ's)

16x0.5 = 8Marks

- Septic vegetations are seen in

 a) Bacterial endocarditis
 c) SLE
- b) Hypercoagulable stat d) RHD
- 2) The presence of endometrial glands or stroma in abnormal locations outside the uterus is termed as

a) Endometritisc) Endometrial hiperplasia

b) Endometriosisd) Adenomyosis

- 3) Atelectasis isa) Loss of lung Volumec) Loss of lung Lobule
- b) Loss of lung Lobed) All of above
- 4) 'Leather bottle stomach' results from which type of carcinoma stomach?a) Fungating typeb) Polypoidal type
 - c) Diffuse infiltrating type

b) Polypoidal typed) Ulcerative type

5) Mallory hyaline bodies are seen ina) Viral Hepatitisc) Alcoholic hepatitis

b)Autoimmune Hepatitis d)Drug induced hepatitis

- 6) On X ray onion skin appearance is characteristic ofa) Osteogenic sarcomab) Fibros
 - c) Ewings sarcoma
- b) Fibrosarcomad) Giant cell tumour

7) Hodgkins lymphoma is classified into all of the following except

- a) Nodular sclerosis
- c) Diffuse large cell type

b) Mixed cellularity typed)Lymphocyte predominance type

8) Premalignant conditions of GIT area) Familial Polyposis Colic) Ulcerative Colitis

b) Villous adenomad) All of the above

9) Nephrotic syndrome includes all of the following EXCEPT

a) Heavy Proteinuriac) Lipiduria

b) Hypoalbuminemiad) Hematuria

b) Embryonal carcinoma

10) Following are the type of germ cell tumours except

- a) Seminoma
- c) Granulosa cell tumour d) Choriocarcinoma
- 11) Leiomyomas are commonly seen in
 - a) Women after menopause
 - c) Prepubertal age

b) Women during active reproductive life

d) Elderly women

12) All of the following are true about chronic pyelonephritis EXCEPT

- a) Significant bacteriuria is not found
- b) Involvement of the kidney is bilateral and symmetric
- c) Chronic pyelonephritis associated with reflux nephritis exhibit acute recur pyelonephritis
- d) Appearance of proteinuria and focal segmental sclerosis indicate bad prognosis

13) One of the following crystal is found in alkaline urine

a) Uric acid	b) Triple phosphate
c) Oxalate	d) Cystine

14) All of the following sugars are detected by benedicts test except

a) Galactose	b) Maltose
c) Lactose	d) Sucrose

15) For the diagnosis of early diabetic nephropathy urine is tested for

a) B J Protiensb) Ketone bodiesc) Urobilinogend) Microalbuminuria

16) Kimmelstiel Wilson lesion in the glomeruli are seen in

a) S L E	b) Amyloidosis
c) Diabetes Mellitus	d) Bacterial endocarditis

PAPER -II

Subject: Pathology

Duration: 2hrs Maximum Marks: 40 Section B& C: 1hr 45mins

Date:

Instructions:

1. All questions are compulsory.

2. Draw neat and labelled diagram wherever necessary.

Section - B

Q 2) Write short answers (Any 4 out of 5)

1. Peptic ulcer.

2. Hepatocellular carcinoma

- 3. Vesicular mole
- 4. Post streptococcal Glomerulonephritis.

5. Difference between pyogenic and tuberculous meningitis.

Section - C

Q3) Write Long answers (Any 2 out of 3)

- 1. Discuss etiopathogenesis, gross and microscopic features of myocardial infarction.
- 2. Classify lung tumours and discuss in details about bronchogenic carcinoma.
- 3. Classify Diabetes mellitus. Discuss laboratory investigations and complications of diabetes mellitus.

$2 \times 8 = 16$

 $4 \times 4 = 16$

1

Resolution No. 1.3.7.1 of BOM-51/2017: Resolved to continue the current Internal Assessment pattern for MBBS (i.e. 5 marks for Day-to-day assessment) for Pre and Para Clinical subjects (Anatomy, Physiology, Biochemistry, Microbiology, Pharmacology, Pathology and FMT). For rest of the subjects, Internal Assessment is to be calculated from terminal/Post end exam marks and Prelims examination, with immediate effect.

Resolution No. 1.3.8.8 of BOM-51/2017: Resolved to:

 Introduce problem case discussion (problem based learning) in all paraclinical subjects on topics identified from batch entering in IInd MBBS in 2017-18 onwards. [Annexure-VI]

Problem based learning topics for undergraduates (MBBS)

2. Pathology

- Diabetes Mellitus
- Anaemias a) Iron Deficiency, b) Megaloblastic c) Hemolytic
- Hepatitis

Resolution No. 1.3.8.13 of BOM-51/2017: Resolved to approve the topics for vertical and horizontal integrated teaching in IInd MBBS Curriculum from batch entering in IInd MBBS in 2017-18 onwards.

Pathology

1. Topics for Integrated Teaching (Horizontal)

1	Auto immune disorders	Horizontal
2	Tuberculosis	Horizontal
3	Malaria	Horizontal
4	Urine Examination & UTI	Horizontal
Topics	for Integrated Teaching (Vertical)	
5.	HIV/AIDS	Vertical
6	Fungal Infection	Vertical
	Typhoid	Vertical
7		
7	Ischemic heart disease	
	Ischemic heart disease Rheumatic heart disease	Vertical

2nd mBBS, Pathology

Resolution No. 1.3.8.11 of BOM-51/2017: Resolved to approve the topics to be included under Bioethics in UG. [Annexure-IX]

Bioethics Topics for UG/PG

Topics for II-MBBS Pathology Syllabus

- 1. Blood Transfusion.
- 2. Integrity

Resolution No. 4.2.1 of BOM-53/2018: Resolved that the printed format of the Medico-legal examination proforma (sexual violence) may be provided to 2nd MBBS students during practical's in formative and summative assessments **[Annexure-X]**, to be applicable from batch entering into 2nd MBBS 2017-18 onwards.

Anneslure 30 For item NO. 4

CONFIDENTIAL

Annexure - X

31

Medico-legal Examination Report of Sexual Violence

	Name of the Hospital OPD No Inpatient No.) .	,			
2.	Name	••••		• • • • • • •		
З.	Address					
4.	Age (as reported) Date of Birth (if known)					
5.	Sex (M/F/Others)					
6.	Date and Time of arrival in the hospilal					
7.						
8.						
9.	MLC NoPolice Station.					
10.	Whether conscious, priented in time and place and person Security			• • • • • • • • •		
	Any physical/intellectual/psychosocial disability					
(Int	erpreters or special educators will be needed where the survivor ha	s spec	iatre	eds	such	
12. I	nearing/speech disability, language barriers, intellectual or psychos Informed Consent/refusal D/o or S/o eby give my consent for: medical examination for treatment this medico legal examination	ociald	lisəbi	lity.)	 E i	
12. I her a)	nearing/speech disability, language barriers, intellectual or psychos informed Consent/refusal D/o or S/o eby give my consent for: medical examination for treatment	ocial d	lisabi	lity.) No		
12. her a) b) c) l sl: exp	nearing/speech disability, language barriers, intellectual or psychos Informed Consent/refusal 	ves Yes Yes Yes Yes		lity.) No No No		
12. her a) b) c) l sl: exp	nearing/speech disability, language barriers, intellectual or psychos Informed Consent/refusal 	ves Yes Yes Yes Yes	this	lity.) No No No		

If special educator/Interpreter/support person has helped, then his/her name and signature.....

Name & signature of survivor or parent/Guardian/person in whom the child reposes trust in case of child (<12 yrs) With date, time & place Name & signature/thumb impression of Witness ****** With Date, time and place 13. Marks of identification (Any scar/mole) (1)..... (2)..... Left Thumb impression 14. Relevant Medical/Surgical history : Onset of menarche (in case of girls) Yes No Age of onset..... Menstrual history - Cycle length and duration Last menstrual period..... Menstruation at the time of incident - Yes/ No, Menstruation at the time of examination - Yes/ No Was the survivor pregnant at time of incident - Yes/No. If yes duration of pregnancy weeks Contraception use: Yes/No...... If yes - method used: Vaccination status - Tetanus (vaccinated/not vaccinated). Hepatitis B (vaccinated/not) (vaccinated) 63

3

(I) Date of incident/s being reported (ii) Time	e of incident/s	(iii) Location/s
(iv)Estimated duration : 1-7 days 1 week to 2-6 months	2 months	• • • • • • • • • • • • • • • • • • •
(v) Number of Assailant(s) and	·····	
name/s (vi) Sex of assallant(s) (s)	Approx or – relationship w	. Age of assallant ith the
(vir) Description of Micident in the words of the national Narrator of the incident: survivor/informant (speci	mator: fy name and relation	on to survivor)
If this space is insufficient use extra page		
5 B. Type of physical violence used if any (De	scribe);	
5 B. Type of physical violence used if any (De	scribe): Burned with	۱
5 B. Type of physical violence used if any (De Hit with (Hand, fist, blunt object, sharp object)	••• ••••••••	
5 B. Type of physical violence used if any (De Hit with (Hand, fist, blunt object, sharp object) Biting	Burned with	
5 B. Type of physical violence used if any (De Hit with (Hand, fist, blunt object, sharp object) Biting Pinching	Burned with Kicking	۰
^	Burned with Kicking Pulling Hair	
5 B. Type of physical violence used if any (De Hit with (Hand, fist, blunt object, sharp object) Biting Pinching	Burned with Kicking Pulling Hair Banging head	
5 B. Type of physical violence used if any (De Hit with (Hand, fist, blunt object, sharp object) Biting Pinching Violent shaking	Burned with Kicking Pulling Hair Banging head	

.

15 C.

١.	Emotional abuse or violence if any (insulting, cursing, belittling, terrorizing)
ü.	Use of restraints if any
₩i.	Used or threatened the use of weapon(s) or objects if any
ív.	Verbal threats (for example, threats of killing or hurting survivor or any other person in whom the survivor is interested; use of photographs for blackmalling, etc.) If any:
v. vi.	Luring (sweets, chocolates, money, job) if any: Any other:

15 D.

()

i. Any H/O drug/alcohol intoxication:

ii. Whether sleeping or unconscious at the time of the Incident:

15 E. If survivor has left any marks of injury on assailant/s, enter details:

15 F. Details regarding sexual violence:

Was penetration by penis, fingers or object or other body parts (Write Y=Yes, N=No, DNK=Don't know) Mention and describe body part/s and/or object/s used for penetration.

	Penetralion			Т Ел	nission (of Semen
Orifice of Victim	By Penis	By body part of self or assailant or third party (finger, tongue or any other)	By Object	Yes	NO	Don't know
Genitalia (Vagina and/or urethra)						
Anus	······································					
Mouth						
Oral sex pe	erformed by a	assallant on survivor				·····
			Y		N	DNK
		self by survivor	Y		N	DNK

Maatuhatus	· · · · · · · · · · · · · · · · · · ·) N] DNK
Masturbation of Assailant by Survivor, Forced Manipulation of genitals of assailant by survivor	Υ Υ	N	DNK
Exhibitionism (perpetrator displaying genitals)	Y	N	DNK
Did ejaculation occur outside body orifice (vagina/anus/mouth/urethra)?	Y	N	DNK -

If yes, describe where on the body			
Kissing, licking or sucking any part of survivor's body	Y	N	If Yes, describe
Touching/Fondling	Ŷ	N	lf Yeş, describe
Condom used*	Y	N	DNK
If yes status of condom	Y	N	DNK
Lubricant used*	Y	N	DNK
If yes, describe kind of lubricant used			
If object used, describe object:	- Sink - samin and from uptables, Borosoman - arrow beam	·····	
Any other forms of sexual violence			n han a faith a faith a faith ann a fair ann a' fair ann an fair ann an ann ann an ann ann ann ann ann

* Explain what condom and lubricant is to the survivor

and a second second

Post Incident has the survivor	Yes/No/Do Not know	Remarks
Changed clothes		
Changed undergarments		
Cleaned/washed clothes		
Cleaned/washed undergarments		
Bathed		:
Douched		
Passed Urine		
Passed stools	1	
Rinsing of mouth/Brushing/ Vomiting (Circle any or all as appropriate)		

H/o vaginal/anal/oral bleeding/discharge since the incident of sexual violence.....

H/o painful urination/ painful defecation/ fissures/ abdominal pain/pain in genitals or any other part since the incident of sexual violence

16.	General Physical Examination-
i,	Is this the first examination.
il.	Pulse
iii.	TempResp. Rate
Ī٧.	Pupils
V,	Any observation in terms of general physical wellbeing of the survivor

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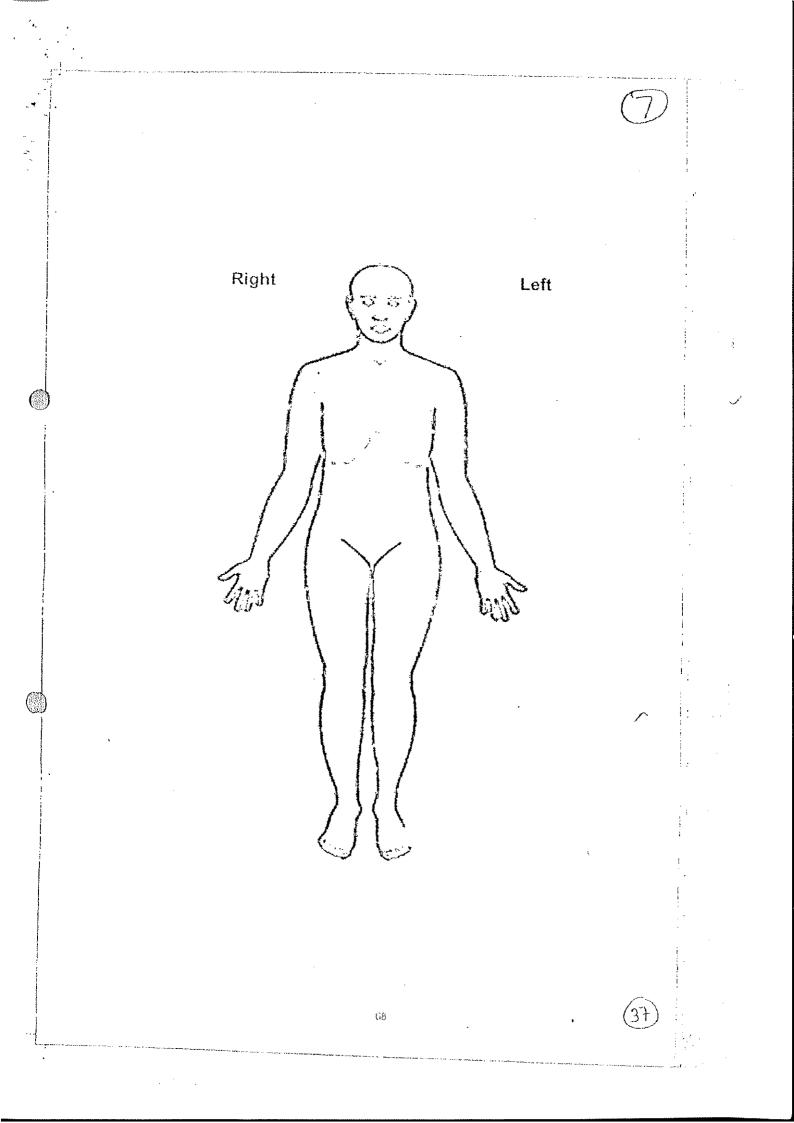
17. Examination for injuries on the body if any

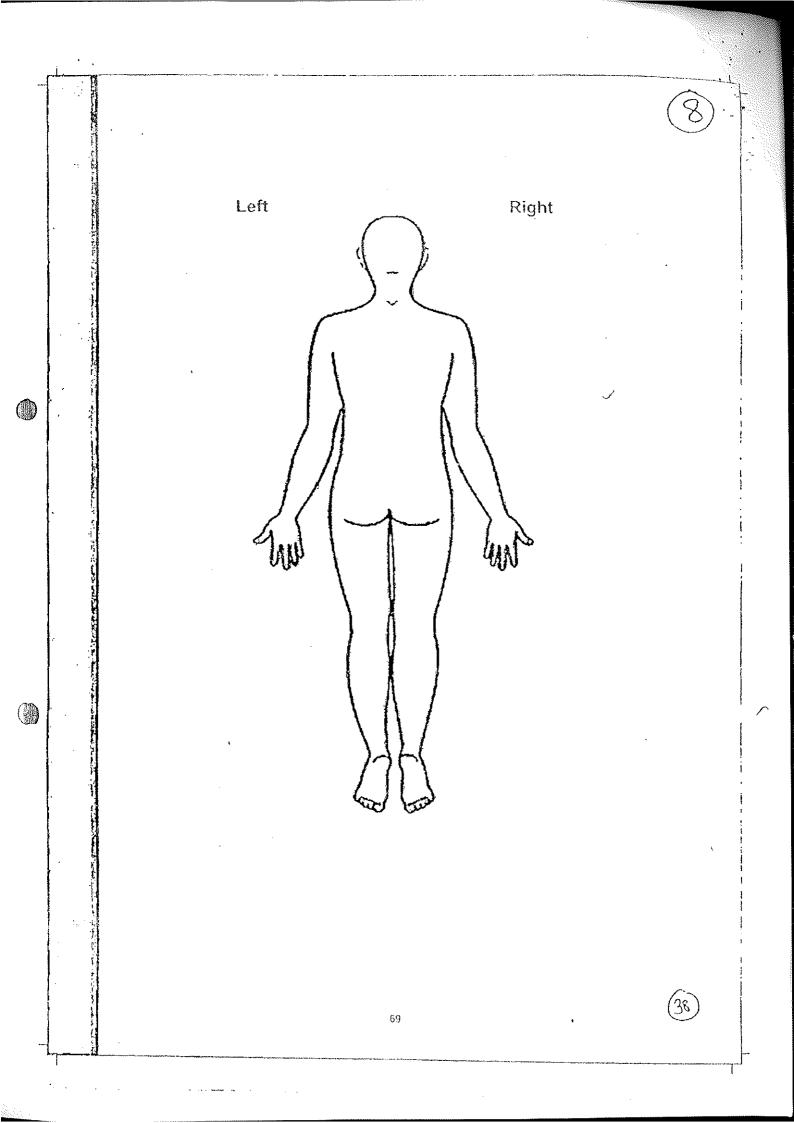
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The pattern of injuries sustained during an incident of sexual violence may show considerable variation. This may range from complete absence of injuries (more frequently) to grievous injuries (very rare).

(Look for bruises, physical torture injuries, nail abrasions, teeth bite marks, cuts, lacerations, fracture, tenderness, any other injury, boils, lesions, discharge specially on the scalp, face, neck, shoulders, breast, wrists, forearms, medial aspect of upper arms, thighs and buttocks) Note the Injury type, site, size, shape, colour, swelling signs of healing simple/grievous, dimensions.)

Scalp examination for areas of tenderness (if hair pulled out/ dragged by hair)	· · ·
Facial bone injury: orbital blackening, tenderness	
Petechial haemorrage in eyes and other places	
Lips and Buccal Mucosa / Gums	•
Behind the ears	
Ear drum	
Neck, Shoulders and Breast	
Upper limb	
Inner aspect of upper arms	·
Inner aspect of thighs	
Lower limbButtocks	
Other, please specify	
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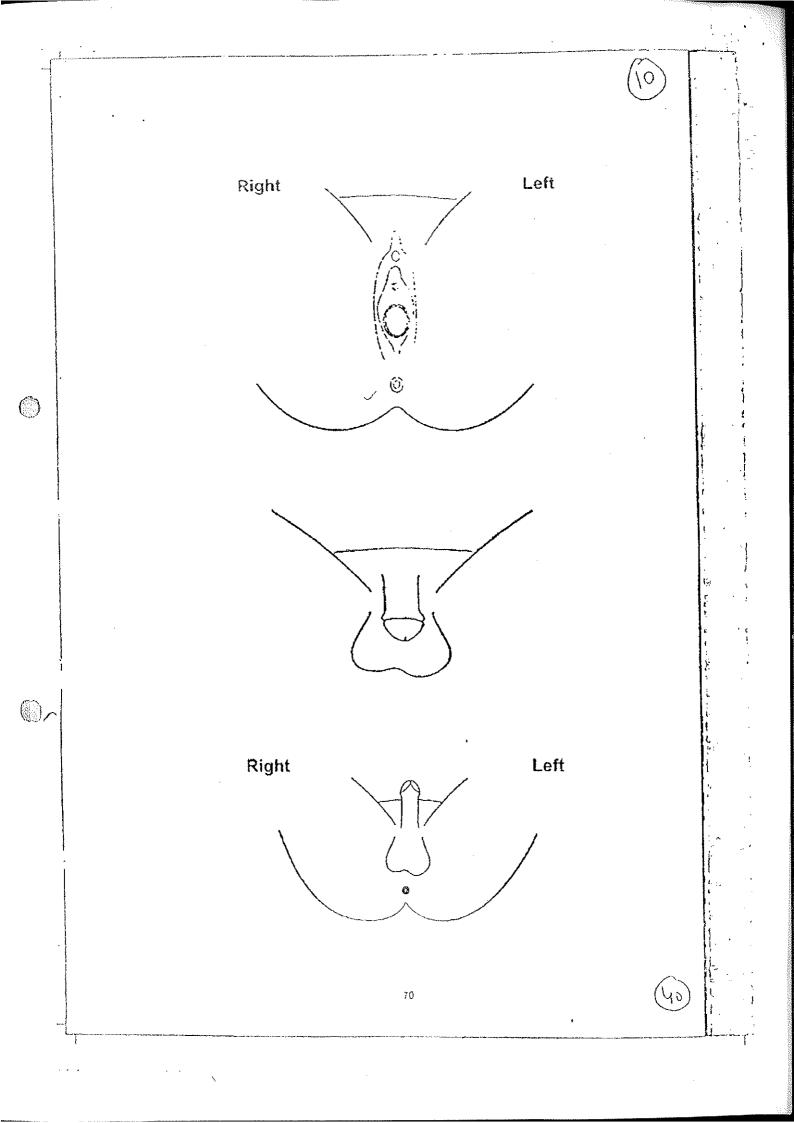
18. Local examination of genital parts/other orifices':

()

THE REAL PROPERTY.

A. External Genitalia: Record findings and state NA where not applicable.

Body parts to be examined	Findings	
Urethral meatus & vestibute		
Labia majora		
Labia minora	***************************************	
Fourchette & Introitus		
Hymen Perineum		
External Urethral Meatus	********	
Penis	······································	······································
Scrolum	Malannagerging and a second and an an an and a second and a	
Tesles	-	
Clitoropenis		
Labioscrotum		
Any Other		
P/S findings if performed P/V findings if performed Record reasons if P/V of P/S ex C. Anus and Rectum (encircle Bleeding/tear/discharge/oe	amination performed	
D. Oral Cavity - (encircle the re Bleeding/ discharge/ tear/oe	blevant) dema/tenderness	
9. Systemic examination:		
Central Nervous System: Cardio Vascular System:		



- 20. Sample collection/investigations for hospital laboratory/ Clinical laboratory
- 1) Blood for HIV, VDRL, HbsAg
- 2) Urine test for Pregnancy/
- 3) Ultrasound for pregnancy/internal Injury
- 4) X-ray for Injury
- 21. Samples Collection for Central/State Forensic Science Laboratory
- 1) Debris collection paper
- Clothing evidence where available (to be packed in separate paper bags after air drying)

List and Details of clothing worn by the survivor at time of incident of sexual violence

3) Body evidence samples as appropriate (duly labeled and packed separately)

Collected/Not Collected	Reason for not collecting
	· · · · · · · · · · · · · · · · · · ·
······································	
	1
*** ······	
	Collected/Not Collected

4) Genital and Anal evidence (Each sample to be packed, sealed, and labeled separately-to be placed in a bag)

* Swab sticks for collecting samples should be moistened with distilled water provided.

	Collected/Not Collected	Reason for not collecting
Matted pubic hair		
Pubic hair combing (mention if shaved)		
Cutting of pubic hair (mention if shaved)		at <u>en non en en</u>
Two Vulval swabs (for semen examination and DNA testing)		
Two Vaginal swabs (for semen examination and DNA testing)		
Two Anal swabs (for semen examination and DNA testing)		
Vaginal smear (alr-dried) for semen examination		······································
Vaginal washing	······································	
Urethral swab		
Swab from glans of penis/clitoropenis		

*Samples to be preserved as directed till handed over to police along with duly attested sample seal.

22. Provisional medical opinion

Samples collected (for FSL), awaiting reports

Samples collected (for hospital laboratory)

Clinical lindings

Additional observations (if any)

23. Treatment prescribed:

Treatment	Yes	NO	Type and comments
ST) prevention treatment			
Emergency contraception			
Wound treatment			
Tetanus prophylaxis			
Hepatitis B vaccination		·····	
Post exposure prophylaxis for HIV	-l		
Counselling		! !	
Olher			

24. Date and time of completion of examination This report contains number of sheets and number of envelopes.

> Signature of Examining Doctor Name of Examining Doctor Seal

Place:

25. Final Opinion (After receiving Lab reports)

Place:

Signature of Examining Doctor

1'

Name of Examining Doctor

Seal

COPY OF THE ENTIRE MEDICAL REPORT MUST BE GIVEN TO THE SURVIVOR/ VICTIM FREE OF COST IMMEDIATELY

Resolution No. 4.5.2.1 of BOM-55/2018: Resolved to introduce training in 'Research Methodology' for 3rd Semester MBBS students entering in 3rd Semester from September 2018 onwards. It was further resolved that responsibility of this training will be with Pharmacology department.

Resolution No. 4.5.2.3 of BOM-55/2018: Resolved to provide the printed standard format of the Medico-legal examination (Age,Alcoholic,Weapon,Injury,Death,Potency,Sickness,Fitness) to 2nd MBBS students during practical examination in formative and summative assessments. **[Annexure-34-A,B,C,D,E,F,G,H]**

Recd. on 18/11/2018 **Examination for Determination/Estimation of Age** Annexure - 34-A To. The Reference : Your Letter No. _____ Dated_____ Name : Age stated : ; Sex : ; Occupation : _____ Marital status : Address : Brought by Police Constable : ______ No. : _____; P.S. _____ Identified by : . Date and Time of Examination : Place of Examination : Consent : Signature of Examinee (If minor below 12 yrs. consent of Parents/Guardian) Examined in presence of :_____ (If female) (Signature of female attendant) Identification marks : 1._____ 2._____ Education : Birth Date : **Physical Examination :** 2. Weight : _____kg 1. Height : ____cm 3. Chest girth at the level of nipple : cm 4. Abdominal girth at the level of navel : cm 5. General build and appearance : 6. Hairs : Pubic : _____, Axillary : _____, Facial : _____, Scalp : _____

7. Development of breasts :	
8. Development of genitals :	
9. Onset of Puberty :	
Voice :	Adam's apple :
Date of menarche : 10. Dental Status :	Adam's apple : Regularity of menses :
10. Dental Status :	
	Upper Jaw (Maxillary Teeth)
	Lower Jaw (Mandibular Teeth)
	isower saw (manufoular Teeth)
11. Advised X-ray :	
a.	
Ь.	
С.	
X-ray' plate No.: a	bc.
Dated :	bc

Provisional Age Certificate

On clinical examination of the individual, age is about ______ years. However, the final opinion regarding the age should be collected from this office after submission of the Radiological report and the birth certificate.

Signature

(Dr.

)

Designation & Seal

Place : _____
Date : _____

Age Certificate

То			
The			
Reference : Age estimation of		, Dated _	
Sir,			
I, Dr		, after going thro	ough the findings
of			· · · · · · · · · · · · · · · · · · ·
Physical examination report No.			
X' ray plate No.		, Dated	
Radiological Examination report No		, Dated	Į
and the Date of Birth Certificate No		, Datec	£
produced before me,			
I am of the opinion that the indivi	dual's age is a	bout	years
		Signature	
	(Dr.	-)
		Designation & Sea	1

Place : _____
Date : _____

· .

Examination / Certification of Alcoholic

	A Model Scheme of Examination		Annequire -34-B
То,			(Anneaure Sta
The Investigating Officer I	P.S.		
Reference : Your letter No.		Dated :	
I am forwarding herewith	the result of	my examination of	
Name :		Son / daughter / wife / widow	of
Age :	Sex : M/F	Weight :	
Address :			
Consent for examination :			
n a		Signature / Thumb impression	of Examinee
Identification Marks : 1. 2.			
Brought by P.C. Name :		No. P.S.	
Date and time of examinat	ion :		
Place of examination :			
History :			
a. Alleged case -			
 b. Related to alcohol - c. Illness - 			
General behaviour :			
Clothing :			
Attitude :			
Memory :		Mental alertness :	
Pulse :		Respiration :	
Temperature :		Blood pressure :	
Skin :		85	
Smell of alcohol, if any :			

Lips :	Tongue :
Eye :	Pupils :
Conjunctiva :	
Muscle co-ordination :	
Gait :	Speech :
Handwriting	
Reflexes :	
Systemic examination :	
Respiratory System :	
Cardio-vascular System :	
Gastro-intestinal Tract :	
Laboratory investigations : a. Blood (5 to 10 ml venous blood) Preservat b. Urine (10 to 20 ml - 2 samples) Preservati c. Expired air :	
Diagnosis :	
Opinion : I am of the opinion that -	

- The above person has consumed alcohol and is under its influence. 1.
- 2. The above person has consumed alcohol and is not under its influence.
- 3.

Place :

Date :

Time :

The above person has not consumed alcohol.

Signature

(Dr. Designation & Seal

)

¢

Form 'A'

ź	See	$\mathbf{p}_{\mathbf{r}}$	do.	No	3)
ŧ	ove	IX U	nc.	1101	31

(Certificat or has not	te by Registered Medical Practitior consumed an intoxicant)	her showing whether a person examined by him has		
Serial No	•	Name & location of the		
		Dispensary or Hospital		
Certified t	that Shri / Smt / Kum	Resident of		
was broug	ght to this Hospital / Dispensary by	· ·		
		(Here state the Name & Designation of the Officer)		
on	at	A.M. / P.M. & was examined by me		
	at			
A clinical	examination of the above person c	lisclosed the following :		
Age:	Years, Weight :	kg,Height :cm		
Breath :	Smelling / Not smelling of Alcol	nol / Ganja / Bhang.		
Speech :	Incoherent / Normal			
Gait :	Unsteady / steady			
Pupils	Dilated / Normal			
Additiona	al remarks, if any :			
I find that	t the above named person			
	HAS CONSUMED	Alcohol / Ganja / Bhang		

HAS NOT CONSUMED ANY INTOXICANT

I also find that he / she is not under the influence of alcohol.

(N.B. : Blood from the body of the above named was / was not collected by me for chemical examination)

"Certified that the procedure laid down under the rule (4) of Bombay Prohibition Medical Examination and Blood Test Rule 1959 has been followed."

Date :	
Time :	A.M. / P.M.

Signature Designation

Signature / Thumb impression of the Person examined.

Marks of identification of the person examined in case he refuses to give his signature or thumb impression

		Form "B"
		No
From,		
The Casualty N	Medical Officer, / Assis	tant Professor in Forensic Medicine
MGM Medica	l College and Hospital,	
Aurangabad	•	
To,		
The Director		
	ce Laboratory & Chem	ical Anchurr
GOVE OF MELIA	rashtra, Mumbai	Date :
Sir / Madam,		
I am forwardin	g herewith a parcel by	post / with Shri
01	containing	ml. of Blood and / or Urine sample collected by
	ai	A.M. / P.M. from the body of Shri / Shrimati / Kumari
:		of who
was produced b	efore me for medical e	xamination and/or collection of Blood and / or Urine from
ins / net bouy	бу	and parameter to that the
Blood and / or l	Urine and issue a certif	icate (in duplicate) regarding the result of the tests.

"Certified that the procedure laid down under the rule (4) of Bombay Prohibition Medical Examination Blood Test Rule 1959 has been followed".

Yours faithfully,

(Dr.

)

Casualty Medical Officer Assistant Professor in Forensic Medicine MGM Medical College and Hospital, Aurangabad

Facsimile of the Seal or Monogram used for Sealing the Phial containing Blood and/or Urine

Examination of the Weapon

То				Annexure-34-c
The Investigating O	fficer,			
Police Station		11.11.11.11.11.11.11.11.11.11.11.11.11.		
Reference : Your let	ter No.		Dated	
Sir,				,
With reference to the with the injuries of	e above letter, I am se	ending the report about	weapon sen	t sealed in connection
		Kind of weap		
Description of the w				
Blade : Is of		, Texture :		
		, Thick		
		, Point :		
		, Hilt : Size :		
		, Texture :		
		readth / Circumference		
		nd it to C.A. for furthe		
Injuries possible :				, ,
Injuries impossible :				
Identification marks	if any on the weapon			
(Put the signature on	the weapon)			
The weapon packed,	sealed and handed or	ver to P.CN	lo	P.S
Place :				
Date & Time :				
Receipt of weapon &	report		Signature	
		(Dr.)
		Dec	ionation & S	aal

Designation & Seal

Examination / Certification of the Injured (Injury Report/Certificate) То Annexure-34-D The Investigating Officer. Police Station Reference : Your Letter No. _____ Dated _____ Sir. I am forwarding herewith the report of examination of : Name of Injured : ______ Son/Wife/Daughter/Widow of _____ Surname ______ resident of ______ Age: ______ Sex _____Occupation_____ Brought by PC ______ No. _____ P.S. _____ Consent for examination : Signature of Witness Signature of Examinee Identification marks: 1. 2.

History :

Sr. No.	Type of injury	Size of injury	Situation over the body	Nature of injury	Probable weapon	Age of injury	Advice

Remark

Place :

Date :

Signature

)

Designation & Seal

(Dr

Receipt

Form No. 4

(For hospital in patient death, not to be used for still birth)

MEDICAL CERTIFICATE OF CAUSE OF DEATH

(To be sent to Registrar of Births and Deaths along with Death Report form no. 2)

Name of Hospital :

I do hereby certify that the person whose particulars are given below died in Hospital in Ward No.

on ______ at _____ A.M. / P.M.

Name of the deceased :

Addres	s of norm	al Residenc	e:				sta	ntistical	office	
			Occupation	Religion	Age at Death				Detailed list	
	yrs	Bírth	status S, M, W or D			If und yea Months			ler 24 urs Min.	code
				4	Cause of D	eath		terval be iset and		vorox
1. Imm	ediate C	ause :		a)					uono, up	.p.o.d
State th	e disease	, injury or c	omplication		Due to :					
			ode of dying	or as a c	onsequence	e of				
		lure, asthen	ia, etc.							
	dent cau			b)						
			ving rise to the		Due to :					
above c	ause, sta	ing underly	ring condition la							
2 Othe	r sionific	ant conditio	ne	C)	F					
			of related to the							
		ion causing								
		Natural /	Accident / Suic	ide / Homici	de (specify) : How di	d the ini	ury occu	ur?	
IF DFC	TEASED	WAS A FF				· · · · · · · · · · · · · · · · · · ·				
				· ?		Yes/N	0			
Was the death associated with pregnancy? Was there a delivery?			•	Yes/No						
		**								
Name oi	rubber-st	amp of instit	ution :	Serial Nu	mber of inst	itution			Date of	report
Date an	d Time :					Signat	ture and	address	of	
				(Dr.)	
			· · · · · · · · · · · · · · · · · · ·			Desig	nation &	Seal		
			be detached a			lative of th	ie deceas			*****
Certifie	d that Sh		າງ					,	Reside	ent of
			was admi							
Date Ti	me :						Signati	are		
				(Dr.		~)	
						Desig	nation &	Seal	,	

For use by

EXAMINATION OFA CASE FOR DETERMINATION OF POTENCY

	FM No/		/20	
	Date : /	/	/ 20	
To,			Annexure-34-F	
Defense a Very letter / order no	Datad		or CP and the Reservation and Country All Country and	
Reference : Your letter / order no.				
Name of the individual				
Age as stated:, Sex: Ma	rital status (If married, du	uratior	ı)	
Address :				
Occupation :				
Brouught by (Name, signature & designation	.)			
Date, place & time of examination :				
Light arrangement				
Consent :				
Q - Are you willing to be examined by me examination will include physical examination assessment. The examination by dept of U to evaluate your potency. You have right	nation, laboratory investi Jrology would also inclu	gation de adr	ns and psych ministration	ological of drugs

court of law.

Answer given - Yes / No

Name, signature of the person giving consent with Date -

Witness to the consent - Name, signature & Date -

Identification marks-

1.

2.

History

1. Do you have erectile dysfunction ? - Yes / No

If yes

a. Since how long have you noticed the erectile dysfunction?

b. Did the problem being abruptly or insidiously?

- c. Do you have inability to achieve or maintain an erection or both ?
- d. Are you able to penetrate or not?
- e. Whether partial penetration or ejaculation before penetration?
- f. Do you ever get normal or near normal erection (During masturbation with other partner, early morning)
- 2. H/o any major illness HT / DM / TB / Vascular disease / Endocrinal diseases etc.
- 3. H/o STD -
- 4. H/o mental illness -
- 5. Any stress-
- 6. Family environment-
- 7. Any history of medication / for what ailment / duration of medication
- 8. H/o Drug abuse Nicotine / Ganja /Alcohol / other
- 9. H/o any head injury / spinal injury / any operation on genitals -
- 10. H/o aversion dislike / dejection / for any particular sex partner

Obsevations

General examination

Gen	eral built and appearance	· •					
Weig	ght : kg	Height :	cm				
Teet	h :	Total	1 No. :				
Seco	ondary sexual characters	:					
Bear	rd :		Moustache :				
Axil	lary hairs :		Pubic hairs :				
Brea	ast development / Gynae	comastia if any :					
Any	marks of injury / scar of	the body :					
Loca	al examination : (Along	with Urology department) d	one in ward no				
a.	Penis :						
	Circumcised / Non-Circ	umeised :					
	Stretched penile length	"					
	Length when erect -						
	Circumference (flaccid & erect) :						
	Disease / deformity / in	ury (if any) :					
	Sensation over glans pe	nis :					
	Foreskin (Retractable / Non-retractable) :						
	Dorsal penile pulsation :						
	Any Discharge :						
	Smegma :		1				
	Hygine :						

Scrotum : b. Pendulous or not : Developmental defects : Deformities : Cremasteric reflex : Testes : e. Whether present in scrotum or not : Size : Consistency : Prostate (Per rectal examination) : đ. Bulbocavernous reflex : e. Any evidence of S.T.D £ Effect of administration of ______in _____dose _____After _____minutes g. Result :

SYSTEMIC EXAMINATION

- C.N.S. :
- R. S. :
- C. V. S. Pulse : BP:

Femoral artery :

Dorsalispedis artery :

• G.I.T. :

Laboratory Investigations (If required)

- 1. CBC :
- 2. Hb:
- 3. BSL (Fasting & PP) :
- 4. Sr. FSH :
- 5. Sr. LH :
- 6. Sr. testosterone & Oestrogen :
- 7. Sr. prolactin :
- 8. VDRL :
- 9. USG/Colour doppler :
- 10. TFT (TSH, T3, T4):
- 11. LFT:
- 12. HbA1C:

Opinion :After detailed examination i.e. based on physical examination, psychiatric evaluation and examination by urologist, we are of the following opinion". There is nothing to suggest that the above examined person is incapable to perform sexual intercourse ". / The person is in capable of performing sexual intercourse due to.....

Place :

Date _____

Signature Name & Qualification : Designation Registration No. :

MEDICAL SICKNESS / UNDER TREATMENT CERTIFICATE

Signature of the applicant(Ge	Annexyse-34-1
(Go	overnment servant / Private)
I Dr	after careful
	rtify that Mr. / Mrs./ Ms
	whose signature is given above was suffering
	and was under my treatment for the same as
	hat a period of absence from duty of
with effect from	n is absolutely necessary for restoration
of his / her health	source in the second seco
He / She was advised rest for a period of	days
Identification marks:	
1)	
2)	
Hospital No.	
Date:	Authorised Medical Attendant Seal & Reg. No.

MEDICAL FITNESS CERTIFICATE

Signature of the applicant	
(Gove	rnment servant / Private)
1 Dr	after careful
personal examination of the case hereby certi	fy that Mr. / Mrs. / Ms
	whose signature is given above was suffering and was under my treatment for the same.
He / She recovered completely from the illness	and he/she is fit to resume his / her duty with effect
from	
Identification marks:	
1)	
2)	
1	
Hospital No.	
	Authorised Medical Attendant Seal & Reg. No.

.

X

Certificate of Physical Fitness

This is to Certify that I have examined Shri / Sm	nt/Kum. Annexyre-34-H
	who signed below in my presence and who
is a candidate for employment for the post of	in
the department / office	at
I could not discover that he / she has any diseas	se (communicable or otherwise) constitutional
weakness or bodily infirmity, except	I do consider / do not consider
this is a disqualification for such an employment.	
He / she	age is according to his / her own
statement years and by appearance ab	out years.
Identification marks:	
1)	
2)	
Signature of the applicant :	
(Government se	rvant / Private)
Houmital No.	
Hospital No.	
Date: Aut	thorised Medical Attendant
Sea	l & Reg. No.