

Number	COMPETENCY	Domain K/S/A/C	Level K/KH/ SH/P
IM1.1	Describe and discuss the epidemiology, pathogenesis clinical evolution and course of common causes of heart disease including: rheumatic/ valvular, ischemic, hypertrophic inflammatory	K	KH
IM1.2	Describe and discuss the genetic basis of some forms of heart failure	K	KH
IM1.3	Describe and discuss the aetiology microbiology pathogenies and clinical evolution of rheumatic fever, criteria, degree of rheumatic activity and rheumatic valvular heart disease and its complications including infective endocarditis	K	KH
IM1.4	Stage heart failure	K	KH
IM1.5	Describe ,discuss and differentiate the processes involved in R Vs L heart failure, systolic vs diastolic failure	K	KH
IM1.6	Describe and discuss the compensatory mechanisms involved in heart failure including cardiac remodelling and neurohormonal adaptations	K	KH
IM1.7	Enumerate, describe and discuss the factors that exacerbate heart dietary factors drugs etc.	K	KH
IM1.8	Describe and discuss the pathogenesis and development of common arrhythmias involved in heart failure particularly atrial fibrillation	K	KH
IM1.9	Describe and discuss the clinical presentation and features, diagnosis, recognition and management of acute rheumatic fever	K	KH
IM1.10	Elicit document and present an appropriate history that will establish the diagnosis, cause and severity of heart failure including: presenting complaints, precipitating and exacerbating factors, risk factors exercise tolerance, changes in sleep patterns, features suggestive of infective endocarditis	S	SH
IM1.11	Perform and demonstrate a systematic examination based on the history that will help establish the diagnosis and estimate its severity including: measurement of pulse, blood pressure and respiratory rate, jugular venous forms and pulses, peripheral pulses, conjunctiva and fundus, lung, cardiac examination including palpation and auscultation with identification of heart sounds and murmurs, abdominal distension and splenic palpation	S	SH
IM1.12	Demonstrate peripheral pulse, volume, character, quality and variation in various causes of heart failure	S	SH
IM1.13	Measure the blood pressure accurately, recognise and discuss alterations in blood pressure in valvular heart disease and other causes of heart failure and cardiac tamponade	S	SH
IM1.14	Demonstrate and measure jugular venous distension	S	SH
IM1.15	Identify and describe the timing, pitch quality conduction and significance of precordial murmurs and their variations	S	SH
IM1.16	Generate a differential diagnosis based on the clinical presentation and prioritise it based on the most likely diagnosis	K	KH
IM1.17	Order and interpret diagnostic testing based on the clinical diagnosis including 12 lead ECG, Chest radiograph, blood cultures	K	SH
IM1.18	Perform and interpret a 12 lead ECG	S	P

IM1.19	Enumerate the indications for and describe the findings of heart failure with the following conditions including: 2D echocardiography, brain natriuretic peptide, exercise testing, nuclear medicine testing and coronary angiogram	S	KH
IM1.20	Determine the severity of valvular heart disease based on the clinical and laboratory and imaging features and determine the level of intervention required including surgery	C	SH
IM1.21	Describe and discuss and identify the clinical features of acute and subacute endocarditis, echocardiographic findings, blood culture and sensitivity and therapy	K	KH/SH
IM1.22	Assist and demonstrate the proper technique in collecting specimen for blood culture	S	SH
IM1.23	Describe, prescribe and communicate non pharmacologic management of heart failure including sodium restriction, physical activity and limitations	S/C	SH
IM1.24	Describe and discuss the pharmacology of drugs including indications, contraindications in the management of heart failure including diuretics, ACE inhibitors, Beta blockers, aldosterone antagonists and cardiac glycosides	K	KH
IM1.25	Enumerate the indications for valvuloplasty, valvotomy, coronary revascularization and cardiac transplantation	K	KH
IM1.26	Develop document and present a management plan for patients with heart failure based on type of failure, underlying aetiology	S	SH
IM1.27	Describe and discuss the role of penicillin prophylaxis in the prevention of rheumatic heart disease	K	KH
IM1.28	Enumerate the causes of adult presentations of congenital heart disease and describe the distinguishing features between cyanotic and acyanotic heart disease	K	KH
IM1.29	Elicit document and present an appropriate history, demonstrate correctly general examination, relevant clinical findings and formulate document and present a management plan for an adult patient presenting with a common form of congenital heart disease	K	KH
IM1.30	Administer an intramuscular injection with an appropriate explanation to the patient	S	SH
IM2.1	Discuss and describe the epidemiology, antecedents and risk factors for atherosclerosis and ischemic heart disease	K	KH
IM2.2	Discuss the aetiology of risk factors both modifiable and non modifiable of atherosclerosis and IHD	K	KH
IM2.3	Discuss and describe the lipid cycle and the role of dyslipidemia in the pathogenesis of atherosclerosis	K	KH
IM2.4	Discuss and describe the pathogenesis natural history, evolution and complications of atherosclerosis and IHD	K	KH
IM2.5	Define the various acute coronary syndromes and describe their evolution, natural history and outcomes	K	KH
IM2.6	Elicit document and present an appropriate history that includes onset evolution, presentation risk factors, family history, comorbid conditions, complications, medication, history of atherosclerosis, IHD and coronary syndromes	S	SH
IM2.7	Perform, demonstrate and document a physical examination including a vascular and cardiac examination that is appropriate for the clinical presentation	S	SH

IM2.8	Generate document and present a differential diagnosis based on the clinical presentation and prioritise based on "cannot miss", most likely diagnosis and severity	S	SH
IM2.9	Distinguish and differentiate between stable and unstable angina and AMI based on the clinical presentation	S	SH
IM2.10	Order, perform and interpret an ECG	S	P
IM2.11	Order and interpret a Chest X-ray and markers of acute myocardial infarction	S	SH
IM2.12	Choose and interpret a lipid profile and identify the desirable lipid profile in the clinical context	S	SH
IM2.13	Discuss and enumerate the indications for and findings on echocardiogram, stress testing and coronary angiogram	K	KH
IM2.14	Discuss and describe the indications for admission to a coronary care unit and supportive therapy for a patient with acute coronary syndrome	K	KH
IM2.15	Discuss and describe the medications used in patients with an acute coronary syndrome based on the clinical presentation	K	KH
IM2.16	Discuss and describe the indications for acute thrombolysis, PTCA and CABG	K	KH
IM2.17	Discuss and describe the indications and methods of cardiac rehabilitation	K	KH
IM2.18	Discuss and describe the indications, formulations, doses, side effects and monitoring for drugs used in the management of dyslipidemia	K	KH
IM2.19	Discuss and describe the pathogenesis, recognition and management of complications of acute coronary syndromes including arrhythmias, shock, LV dysfunction, papillary muscle rupture and pericarditis	K	KH
IM2.20	Discuss and describe the assessment and relief of pain in acute coronary syndromes	K	KH
IM2.21	Observe and participate in a controlled environment an ACLS program	S	KH
IM2.22	Perform and demonstrate in a mannequin BLS	S	P
IM2.23	Describe and discuss the indications for nitrates, anti platelet agents, gpIIb IIIa inhibitors, beta blockers, ACE inhibitors etc in the management of coronary syndromes	K	KH
IM2.24	Counsel and communicate to patients with empathy lifestyle changes in atherosclerosis / post coronary syndromes	C/A	SH
IM3.1	Define, discuss, describe and distinguish community acquired pneumonia, nosocomial pneumonia and aspiration pneumonia	K	K
IM3.2	Discuss and describe the aetiologies of various kinds of pneumonia and their microbiology depending on the setting and immune status of the host	K	K
IM3.3	Discuss and describe the pathogenesis, presentation, natural history and complications of pneumonia	K	K
IM3.4	Elicit document and present an appropriate history including the evolution, risk factors including immune status and occupational risk	S	SH
IM3.5	Perform, document and demonstrate a physical examination including general examination and appropriate examination of the lungs that establishes the diagnosis, complications and severity of disease	S	SH

IM3.6	Generate document and present a differential diagnosis based on the clinical features, and prioritise the diagnosis based on the presentation	S	SH
IM3.7	Order and interpret diagnostic tests based on the clinical presentation including: CBC, Chest X ray PA view, Mantoux, sputum gram stain, sputum culture and sensitivity, pleural fluid examination and culture, HIV testing and ABG	S	SH
IM3.8	Demonstrate in a mannequin and interpret results of an arterial blood gas examination	S	SH
IM3.9	Demonstrate in a mannequin and interpret results of a pleural fluid aspiration	S	SH
IM3.10	Demonstrate the correct technique in a mannequin and interpret results of a blood culture	S	SH
IM3.11	Describe and enumerate the indications for further testing including HRCT, Viral cultures, PCR and specialised testing	S	SH
IM3.12	Select, describe and prescribe based on the most likely aetiology, an appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum	S	SH
IM3.13	Select, describe and prescribe based on culture and sensitivity appropriate empirical antimicrobial based on the pharmacology and antimicrobial spectrum.	S	SH
IM3.14	Perform and interpret a sputum gram stain and AFB	S	P
IM3.15	Describe and enumerate the indications for hospitalisation in patients with pneumonia	K	K
IM3.16	Describe and enumerate the indications for isolation and barrier nursing in patients with pneumonia	K	K
IM3.17	Describe and discuss the supportive therapy in patients with pneumonia including oxygen use and indications for ventilation	K	K
IM3.18	Communicate and counsel patient on family on the diagnosis and therapy of pneumonia	C/A	SH
IM3.19	Discuss, describe, enumerate the indications and communicate to patients on pneumococcal and influenza vaccines	S/C	K
IM4.1	Describe and discuss the febrile response and the influence of host immune status, risk factors and comorbidities on the febrile response	K	K
IM4.2	Describe and discuss the influence of special populations on the febrile response including: the elderly, immune suppression, malignancy and neutropenia, HIV and travel	K	K
IM4.3	Discuss and describe the common causes, pathophysiology and manifestations of fever in various regions in India including bacterial, parasitic and viral causes (e.g.Dengue, Chikungunya, Typhus)	K	K
IM4.4	Describe and discuss the pathophysiology and manifestations of inflammatory causes of fever	K	KH
IM4.5	Describe and discuss the pathophysiology and manifestations of malignant causes of fever including hematologic and lymph node malignancies	K	KH
IM4.6	Discuss and describe the pathophysiology and manifestations of malaria	K	KH
IM4.7	Discuss and describe the pathophysiology and manifestations of the sepsis syndrome	K	K
IM4.8	Discuss and describe the pathophysiology, aetiology and clinical manifestations of fever of unknown origin (FUO) including in a normal host, neutropenic host, nosocomial host and a host with HIV disease	K	K

IM4.9	Elicit document and present a medical history that helps delineate the aetiology of fever that includes the evolution and pattern of fever, associated symptoms, immune status, comorbidities, risk factors, exposure through occupation, travel and environment and medication use	S	SH
IM4.10	Perform a systematic examination that establishes the diagnosis and severity of presentation that includes: general skin mucosal and lymph node examination, chest and abdominal examination (including examination of the liver and spleen)	S	SH
IM4.11	Generate a differential diagnosis and prioritise based on clinical features that help distinguish between infective, inflammatory, malignant and rheumatologic causes	K	SH
IM4.12	Order and interpret diagnostic tests based on the differential diagnosis including: CBC with differential, peripheral smear, urinary analysis with sediment, Chest X ray, blood and urine cultures, sputum gram stain and cultures, sputum AFB and cultures, CSF analysis, pleural and body fluid analysis, stool routine and culture and QBC	K	SH
IM4.13	Perform and interpret a sputum gram stain	S	SH
IM4.14	Perform and interpret a sputum AFB	S	SH
IM4.15	Perform and interpret a malarial smear	S	SH
IM4.16	Enumerate the indications and describe the findings in tests of inflammation and specific rheumatologic tests, serologic testing for pathogens including HIV, bone marrow aspiration and biopsy	K	KH
IM4.17	Observe and assist in the performance of a bone marrow aspiration and biopsy in a simulated environment	S	SH
IM4.18	Enumerate the indications for use of imaging in the diagnosis of febrile syndromes	K	KH
IM4.19	Assist in the collection of blood and wound cultures	S	SH
IM4.20	Interpret a PPD (Mantoux)	S	SH
IM4.21	Develop and present an appropriate diagnostic plan based on the clinical presentation, most likely diagnosis in a prioritised and cost effective manner	K	KH
IM4.22	Describe and discuss the pharmacology, indications, adverse reactions, interactions of antimalarial drugs and basis of resistance	K	KH
IM4.23	Prescribe drugs for malaria based on the species identified, prevalence of drug resistance and national programs	S	SH
IM4.24	Develop an appropriate empiric treatment plan based on the patient's clinical and immune status pending definitive diagnosis	C	SH
IM4.25	Communicate to the patient and family the diagnosis and treatment	C	SH
IM4.26	Counsel the patient on malarial prevention	C	SH
IM5.1	Describe and discuss the physiologic and biochemical basis of hyperbilirubinemia	K	K
IM5.2	Describe and discuss the aetiology and pathophysiology of liver injury	K	K
IM5.3	Describe and discuss the pathologic changes in various forms of liver disease	K	K
IM5.4	Describe and discuss the epidemiology, microbiology, immunology and clinical evolution of infective (viral) hepatitis	K	K

IM5.5	Describe and discuss the pathophysiology and clinical evolution of alcoholic liver disease	K	K
IM5.6	Describe and discuss the pathophysiology, clinical evolution and complications of cirrhosis and portal hypertension including ascites, spontaneous bacterial peritonitis, hepatorenal syndrome and hepatic encephalopathy	K	K
IM5.7	Enumerate and describe the causes and pathophysiology of drug induced liver injury	K	K
IM5.8	Describe and discuss the pathophysiology, clinical evolution and complications cholelithiasis and cholecystitis	K	K
IM5.9	Elicit document and present a medical history that helps delineate the aetiology of the current presentation and includes clinical presentation, risk factors, drug use, sexual history, vaccination history and family history	S	SH
IM5.10	Perform a systematic examination that establishes the diagnosis and severity that includes nutritional status, mental status, jaundice, abdominal distension ascites, features of portosystemic hypertension and hepatic encephalopathy	S	SH
IM5.11	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology for the presenting symptom	K	KH
IM5.12	Choose and interpret appropriate diagnostic tests including: CBC, bilirubin, function tests, Hepatitis serology and ascitic fluid examination in patient with liver diseases.	S	KH
IM5.13	Enumerate the indications for ultrasound and other imaging studies including MRCP and ERCP and describe the findings in liver disease	K	K
IM5.14	Outline a diagnostic approach to liver disease based on hyperbilirubinemia, liver function changes and hepatitis serology	S	SH
IM5.15	Assist in the performance and interpret the findings of an ascitic fluid analysis	S	KH
IM5.16	Describe and discuss the management of hepatitis, cirrhosis, portal hypertension, ascites spontaneous, bacterial peritonitis and hepatic encephalopathy	K	KH
IM5.17	Enumerate the indications, precautions and counsel patients on vaccination for hepatitis	K/C	SH
IM5.18	Enumerate the indications for hepatic transplantation	K	K
IM6.1	Describe and discuss the symptoms and signs of acute HIV seroconversion	K	KH
IM6.2	Define and classify HIV AIDS based on the CDC criteria	K	KH
IM6.3	Describe and discuss the relationship between CDC count and the risk of opportunistic infections	K	KH
IM6.4	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related opportunistic infections	K	KH
IM6.5	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related malignancies	K	KH
IM6.6	Describe and discuss the pathogenesis, evolution and clinical features of common HIV related skin and oral lesions	K	KH
IM6.7	Elicit document and present a medical history that helps delineate the aetiology of the current presentation and includes risk factors for HIV, mode of infection, other sexually transmitted diseases, risks for opportunistic infections and nutritional status	S	SH
IM6.8	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology for the presenting symptom	S	SH

IM6.9	Choose and interpret appropriate diagnostic tests to diagnose and classify the severity of HIV-AIDS including specific tests of HIV, CDC	K	KH
IM6.10	Choose and interpret appropriate diagnostic tests to diagnose opportunistic infections including CBC, sputum examination and cultures, blood cultures, stool analysis, CSF analysis and Chest radiographs	S	KH
IM6.11	Enumerate the indications and describe the findings for CT of the chest and brain and MRI	K	K
IM6.12	Enumerate the indications for and interpret the results of: pulse oximetry, ABG, Chest Radiograph	K	KH
IM6.13	Describe and enumerate the indications and side effects of drugs for bacterial, viral and other types of diarrhea	K	K
IM6.14	Perform and interpret AFB sputum	S	P
IM6.15	Demonstrate in a model the correct technique to perform a lumbar puncture	S	SH
IM6.16	Discuss and describe the principles of HAART, the classes of antiretrovirals used, adverse reactions and interactions	K	K
IM6.17	Discuss and describe the principles and regimens used in post exposure prophylaxis	K	K
IM6.18	Enumerate the indications and discuss prophylactic drugs used to prevent HIV related opportunistic infections	K/C	K
IM6.19	Counsel patients on prevention of HIV transmission	C	SH
IM6.20	Communicate diagnosis, treatment plan and subsequent follow up plan to patients	C	SH
IM6.21	Communicate with patients on the importance of medication adherence	C	SH
IM6.22	Demonstrate understanding of ethical and legal issues regarding patient confidentiality and disclosure in patients with HIV	K/A	SH
IM6.23	Demonstrate a non-judgemental attitude to patients with HIV and to their lifestyles	A	SH
Topic: Rheumatologic problems Number of competencies: (27) Number of procedures that require certification: (NIL)			
IM7.1	Describe the pathophysiology of autoimmune disease	K	KH
IM7.2	Describe the genetic basis of autoimmune disease	K	KH
IM7.3	Classify cause of joint pain based on the pathophysiology	K	KH

IM7.4	Develop a systematic clinical approach to joint pain based on the pathophysiology	K	KH
IM7.5	Describe and discriminate acute, subacute and chronic causes of joint pain	K	KH
IM7.6	Discriminate, describe and discuss arthralgia from arthritis and mechanical from inflammatory causes of joint pain	K	KH
IM7.7	Discriminate, describe and discuss distinguishing articular from periarticular complaints	K	KH
IM7.8	Determine the potential causes of joint pain based on the presenting features of joint involvement	K	KH
IM7.9	Describe the common signs and symptoms of articular and periarticular diseases	K	KH
IM7.10	Describe the systemic manifestations of rheumatologic disease	K	KH
IM7.11	Elicit document and present a medical history that will differentiate the aetiologies of disease	S	SH
IM7.12	Perform a systematic examination of all joints, muscle and skin that will establish the diagnosis and severity of disease	S	SH
IM7.13	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K/S	KH
IM7.14	Describe the appropriate diagnostic work up based on the presumed aetiology	K	KH
IM7.15	Enumerate the indications for and interpret the results of : CBC, anti- CCP, RA, ANA, DNA and other tests of autoimmunity	K	SH
IM7.16	Enumerate the indications for arthrocentesis	K	K
IM7.17	Enumerate the indications and interpret plain radiographs of joints	K	SH
IM7.18	Communicate diagnosis, treatment plan and subsequent follow up plan to patients	C	SH
IM7.19	Develop an appropriate treatment plan for patients with rheumatologic diseases	K	KH
IM7.20	Select, prescribe and communicate appropriate medications for relief of joint pain	K/C	SH
IM7.21	Select, prescribe and communicate preventive therapy for crystalline arthropathies	K/C	SH
IM7.22	Select, prescribe and communicate treatment option for systemic rheumatologic conditions	K/C	SH
IM7.23	Describe the basis for biologic and disease modifying therapy in rheumatologic diseases	K	KH
IM7.24	Communicate and incorporate patient preferences in the choice of therapy	C/A	SH
IM7.25	Develop and communicate appropriate follow up and monitoring plans for patients with rheumatologic conditions	C	SH
IM7.26	Demonstrate an understanding of the impact of rheumatologic conditions on quality of life, well being, work and family	A	SH
IM7.27	Determine the need for specialist consultation	K	K
IM8.1	Describe and discuss the epidemiology, aetiology and the prevalence of primary and secondary hypertension	K	KH
IM8.2	Describe and discuss the pathophysiology of hypertension	K	KH
IM8.3	Describe and discuss the genetic basis of hypertension	K	KH
IM8.4	Define and classify hypertension	K	KH
IM8.5	Describe and discuss the differences between primary and secondary hypertension	K	KH

IM8.6	Define, describe and discuss and recognise hypertensive urgency and emergency	K	KH
IM8.7	Describe and discuss the clinical manifestations of the various aetiologies of secondary causes of hypertension	K	KH
IM8.8	Describe, discuss and identify target organ damage due to hypertension	K	KH
IM8.9	Elicit document and present a medical history that includes: duration and levels, symptoms, comorbidities, lifestyle, risk factors, family history, psychosocial and environmental factors, dietary assessment, previous and concomitant therapy	K	SH
IM8.10	Perform a systematic examination that includes : an accurate measurement of blood pressure, fundus examination, examination of vasculature and heart	S	SH
IM8.11	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	S	SH
IM8.12	Describe the appropriate diagnostic work up based on the presumed aetiology	K	KH
IM8.13	Enumerate the indications for and interpret the results of : CBC, Urine routine, BUN, Cr, Electrolytes, Uric acid, ECG	K	KH
IM8.14	Develop an appropriate treatment plan for essential hypertension	K	KH
IM8.15	Recognise, prioritise and manage hypertensive emergencies	S	SH
IM8.16	Develop and communicate to the patient lifestyle modification including weight reduction, moderation of alcohol intake, physical activity and sodium intake	C	SH
IM8.17	Perform and interpret a 12 lead ECG	S	P
IM8.18	Incorporate patient preferences in the management of HTN	A/C	SH
IM8.19	Demonstrate understanding of the impact of Hypertension on quality of life, well being, work and family	A	SH
IM8.20	Determine the need for specialist consultation	K	KH
IM9.1	Define, describe and classify anemia based on red blood cell size and reticulocyte count	K	KH
IM9.2	Describe and discuss the morphological characteristics, aetiology and prevalence of each of the causes of anemia	K	KH
IM9.3	Elicit document and present a medical history that includes symptoms, risk factors including GI bleeding, prior history, medications, menstrual history, and family history	S	SH
IM9.4	Perform a systematic examination that includes : general examination for pallor, oral examination, DOAP session of hyper dynamic circulation, lymph node and splenic examination	S	SH
IM9.5	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	S	SH
IM9.6	Describe the appropriate diagnostic work up based on the presumed aetiology	S	SH
IM9.7	Describe and discuss the meaning and utility of various components of the hemogram	K	KH
IM9.8	Describe and discuss the various tests for iron deficiency	K	KH
IM9.9	Order and interpret tests for anemia including hemogram, red cell indices, reticulocyte count, iron studies, B12 and folate	S	SH
IM9.10	Describe, perform and interpret a peripheral smear and stool occult blood	S	SH
IM9.11	Describe the indications and interpret the results of a bone marrow aspirations and biopsy	K	KH

IM9.12	Describe, develop a diagnostic plan to determine the aetiology of anemia	K	KH
IM9.13	Prescribe replacement therapy with iron, B12, folate	S	SH
IM9.14	Describe the national programs for anemia prevention	K	KH
IM9.15	Communicate the diagnosis and the treatment appropriately to patients	C	SH
IM9.16	Incorporate patient preferences in the management of anemia	C	SH
IM9.17	Describe the indications for blood transfusion and the appropriate use of blood components	K	KH
IM9.18	Describe the precautions required necessary when performing a blood transfusion	K	KH
IM9.19	Assist in a blood transfusion	S	SH
IM9.20	Communicate and counsel patients with methods to prevent nutritional anemia	C	SH
IM9.21	Determine the need for specialist consultation	K	KH
IM10.1	Define, describe and differentiate between acute and chronic renal failure	K	KH
IM10.2	Classify, describe and differentiate the pathophysiologic causes of acute renal failure	K	KH
IM10.3	Describe the pathophysiology and causes of pre renal ARF, renal and post renal ARF	K	KH
IM10.4	Describe the evolution, natural history and treatment of ARF	K	KH
IM10.5	Describe and discuss the aetiology of CRF	K	KH
IM10.6	Stage Chronic Kidney Disease	K	KH
IM10.7	Describe and discuss the pathophysiology and clinical findings of uraemia	K	KH
IM10.8	Classify, describe and discuss the significance of proteinuria in CKD	K	KH
IM10.9	Describe and discuss the pathophysiology of anemia and hyperparathyroidism in CKD	K	KH
IM10.10	Describe and discuss the association between CKD glycemia and hypertension	K	KH
IM10.11	Describe and discuss the relationship between CAD risk factors and CKD and in dialysis	K	KH
IM10.12	Elicit document and present a medical history that will differentiate the aetiologies of disease, distinguish acute and chronic disease, identify predisposing conditions, nephrotoxic drugs and systemic causes	S	SH
IM10.13	Perform a systematic examination that establishes the diagnosis and severity including determination of volume status, presence of edema and heart failure, features of uraemia and associated systemic disease	S	SH
IM10.14	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K	KH
IM10.15	Describe the appropriate diagnostic work up based on the presumed aetiology	K	SH
IM10.16	Enumerate the indications for and interpret the results of : renal function tests, calcium, phosphorus, PTH, urine electrolytes, osmolality, Anion gap	K	KH

IM10.17	Describe and calculate indices of renal function based on available laboratories including FENa (Fractional Excretion of Sodium) and CrCl (Creatinine Clearance)	S	SH
IM10.18	Identify the ECG findings in hyperkalemia	S	SH
IM10.19	Enumerate the indications and describe the findings in renal ultrasound	K	KH
IM10.20	Describe and discuss the indications to perform arterial blood gas analysis: interpret the data	S	P
IM10.21	Describe and discuss the indications for and insert a peripheral intravenous catheter	S	P
IM10.22	Describe and discuss the indications, demonstrate in a model and assist in the insertion of a central venous or a dialysis catheter	S	SH
IM10.23	Communicate diagnosis treatment plan and subsequent follow up plan to patients	C	SH
IM10.24	Counsel patients on a renal diet	K	SH
IM10.25	Identify and describe the priorities in the management of ARF including diet, volume management, alteration in doses of drugs, monitoring and indications for dialysis	K/C	KH
IM10.26	Describe and discuss supportive therapy in CKD including diet, anti hypertensives, glycemic therapy, dyslipidemia, anemia, hyperkalemia, hyperphosphatemia and secondary hyperparathyroidism	K	KH
IM10.27	Describe and discuss the indications for renal dialysis	C/A	KH
IM10.28	Describe and discuss the indications for renal replacement therapy	C	KH
IM10.29	Describe discuss and communicate the ethical and legal issues involved in renal replacement therapy	C/A	KH
IM10.30	Recognise the impact of CKD on patient's quality of life well being work and family	A	K
IM10.31	Incorporate patient preferences in to the care of CKD	A/C	KH
IM11.1	Define and classify diabetes	K	KH
IM11.2	Describe and discuss the epidemiology and pathogenesis and risk factors and clinical evolution of type 1 diabetes	K	KH
IM11.3	Describe and discuss the epidemiology and pathogenesis and risk factors economic impact and clinical evolution of type 2 diabetes	K	KH
IM11.4	Describe and discuss the genetic background and the influence of the environment on diabetes	K	KH
IM11.5	Describe and discuss the pathogenesis and temporal evolution of microvascular and macrovascular complications of diabetes	K	KH
IM11.6	Describe and discuss the pathogenesis and precipitating factors, recognition and management of diabetic emergencies	K	KH
IM11.7	Elicit document and present a medical history that will differentiate the aetiologies of diabetes including risk factors, precipitating factors, lifestyle, nutritional history, family history, medication history, co-morbidities and target organ disease	S	SH
IM11.8	Perform a systematic examination that establishes the diagnosis and severity that includes skin, peripheral pulses, blood pressure measurement, fundus examination, detailed examination of the foot (pulses, nervous and deformities and injuries)	S	SH
IM11.9	Describe and recognise the clinical features of patients who present with a diabetic emergency	K	KH

IM11.10	Generate a differential diagnosis and prioritise based on clinical features that suggest a specific aetiology	K	KH
IM11.11	Order and interpret laboratory tests to diagnose diabetes and its complications including: glucoses, glucose tolerance test, glycosylated hemoglobin, urinary micro albumin, ECG, electrolytes, ABG, ketones, renal function tests and lipid profile	S	SH
IM11.12	Perform and interpret a capillary blood glucose test	S	P
IM11.13	Perform and interpret a urinary ketone estimation with a dipstick	S	P
IM11.14	Recognise the presentation of hypoglycaemia and outline the principles on its therapy	K	KH
IM11.15	Recognise the presentation of diabetic emergencies and outline the principles of therapy	K	KH
IM11.16	Discuss and describe the pharmacologic therapies for diabetes their indications, contraindications, adverse reactions and interactions	K	KH
IM11.17	Outline a therapeutic approach to therapy of T2Diabetes based on presentation, severity and complications in a cost effective manner	K	KH
IM11.18	Describe and discuss the pharmacology, indications, adverse reactions and interactions of drugs used in the prevention and treatment of target organ damage and complications of Type II Diabetes including neuropathy, nephropathy, retinopathy, hypertension, dyslipidemia and cardiovascular disease	K	KH
IM11.19	Demonstrate and counsel patients on the correct technique to administer insulin	S/C	SH
IM11.20	Demonstrate to and counsel patients on the correct technique of self monitoring of blood glucoses	S/C	SH
IM11.21	Recognise the importance of patient preference while selecting therapy for diabetes	A	KH
IM11.22	Enumerate the causes of hypoglycaemia and describe the counter hormone response and the initial approach and treatment	K	KH
IM11.23	Describe the precipitating causes,	K	KH
	pathophysiology, recognition, clinical features, diagnosis, stabilisation and management of diabetic ketoacidosis		
IM11.24	Describe the precipitating causes, pathophysiology, recognition, clinical features, diagnosis, stabilisation and management of Hyperosmolar non ketotic state	K	KH
IM12.1	Describe the epidemiology and pathogenesis of hypothyroidism and hyperthyroidism including the influence of iodine deficiency and autoimmunity in the pathogenesis of thyroid disease	K	K
IM12.2	Describe and discuss the genetic basis of some forms of thyroid dysfunction	K	K
IM12.3	Describe and discuss the physiology of the hypothalamopituitary - thyroid axis, principles of thyroid function testing and alterations in physiologic function	K	K
IM12.4	Describe and discuss the principles of radio iodine uptake in the diagnosis of thyroid disorders	K	KH
IM12.5	Elicit document and present an appropriate history that will establish the diagnosis cause of thyroid dysfunction and its severity	S	SH
IM12.6	Perform and demonstrate a systematic examination based on the history that will help establish the diagnosis and severity including systemic signs of thyrotoxicosis and hypothyroidism, palpation of the pulse for rate and rhythm abnormalities, neck palpation of the thyroid and lymph nodes and cardiovascular findings	S	SH
IM12.7	Demonstrate the correct technique to palpate the thyroid	S	SH

IM12.8	Generate a differential diagnosis based on the clinical presentation and prioritise it based on the most likely diagnosis	K	KH
IM12.9	Order and interpret diagnostic testing based on the clinical diagnosis including CBC, thyroid function tests and ECG and radio iodine uptake and scan	S	SH
IM12.10	Identify atrial fibrillation, pericardial effusion and bradycardia on ECG	S	SH
IM12.11	Interpret thyroid function tests in hypo and hyperthyroidism	S	SH
IM12.12	Describe and discuss the iodisation programs of the government of India	K	KH
IM12.13	Describe the pharmacology, indications, adverse reaction, interactions of thyroxine and antithyroid drugs	K	KH
IM12.14	Write and communicate to the patient appropriately a prescription for thyroxine based on age, sex, and clinical and biochemical status	S/C	SH
IM12.15	Describe and discuss the indications of thionamide therapy, radio iodine therapy and surgery in the management of thyrotoxicosis	K	KH
IM13.1	Describe the clinical epidemiology and inherited & modifiable risk factors for common malignancies in India	K	K
IM13.2	Describe the genetic basis of selected cancers	K	K
IM13.3	Describe the relationship between infection and cancers	K	K
IM13.4	Describe the natural history, presentation, course, complications and cause of death for common cancers	K	K
IM13.5	Describe the common issues encountered in patients at the end of life and principles of management	K	K
IM13.6	Describe and distinguish the difference between curative and palliative care in patients with cancer	K	K
IM13.7	Elicit document and present a history that will help establish the aetiology of cancer and includes the appropriate risk factors, duration and evolution	S	K
IM13.8	Perform and demonstrate a physical examination that includes an appropriate general and local examination that excludes the diagnosis, extent spread and complications of cancer	S	SH
IM13.9	Demonstrate in a mannequin the correct technique for performing breast exam, rectal examination and cervical examination and pap smear	S	K
IM13.10	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	K
IM13.11	Order and interpret diagnostic testing based on the clinical diagnosis including CBC and stool occult blood and prostate specific antigen	S	K
IM13.12	Describe the indications and interpret the results of Chest X Ray, mammogram, skin and tissue biopsies and tumor markers used in common cancers	K	KH
IM13.13	Describe and assess pain and suffering objectively in a patient with cancer	K	KH
IM13.14	Describe the indications for surgery, radiation and chemotherapy for common malignancies	K	KH
IM13.15	Describe the need, tests involved, their utility in the prevention of common malignancies	K	KH
IM13.16	Demonstrate an understanding and needs and preferences of patients when choosing curative and palliative therapy	A/C	KH
IM13.17	Describe and enumerate the indications, use, side effects of narcotics in pain alleviation in patients with cancer	K	KH
IM13.18	Describe and discuss the ethical and the medico legal issues involved in end of life care	K	KH

IM13.19	Describe the therapies used in alleviating suffering in patients at the end of life	K	KH
IM14.1	Define and measure obesity as it relates to the Indian population	K	K
IM14.2	Describe and discuss the aetiology of obesity including modifiable and non-modifiable risk factors and secondary causes	K	K
IM14.3	Describe and discuss the monogenic forms of obesity	K	K
IM14.4	Describe and discuss the impact of environmental factors including eating habits, food, work, environment and physical activity on the incidence of obesity	K	K
IM14.5	Describe and discuss the natural history of obesity and its complications	K	K
IM14.6	Elicit and document and present an appropriate history that includes the natural history, dietary history, modifiable risk factors, family history, clues for secondary causes and motivation to lose weight	S	SH
IM14.7	Perform, document and demonstrate a physical examination based on the history that includes general examination, measurement of abdominal obesity, signs of secondary causes and comorbidities	S	SH
IM14.8	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	SH
IM14.9	Order and interpret diagnostic tests based on the clinical diagnosis including blood glucose, lipids, thyroid function tests etc.	S	SH
IM14.10	Describe the indications and interpret the results of tests for secondary causes of obesity	K	KH
IM14.11	Communicate and counsel patient on behavioural, dietary and lifestyle modifications	C	SH
IM14.12	Demonstrate an understanding of patient's inability to adhere to lifestyle instructions and counsel them in a non - judgemental way	A/C	SH
IM14.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for obesity	K	K
IM14.14	Describe and enumerate the indications and side effects of bariatric surgery	K	K
IM14.15	Describe and enumerate and educate patients, health care workers and the public on measures to prevent obesity and promote a healthy lifestyle	K	K
IM15.1	Enumerate, describe and discuss the aetiology of upper and lower GI bleeding	K	KH
IM15.2	Enumerate, describe and discuss the evaluation and steps involved in stabilizing a patient who presents with acute volume loss and GI bleed	S	SH
IM15.3	Describe and discuss the physiologic effects of acute blood and volume loss	K	K
IM15.4	Elicit and document and present an appropriate history that identifies the route of bleeding, quantity, grade, volume loss, duration, etiology, comorbid illnesses and risk factors	S	SH
IM15.5	Perform, demonstrate and document a physical examination based on the history that includes general examination, volume assessment and appropriate abdominal examination	S	SH
IM15.6	Distinguish between upper and lower	S	KH
	gastrointestinal bleeding based on the clinical features		
IM15.7	Demonstrate the correct technique to perform an anal and rectal examination in a mannequin or equivalent	S	SH

IM15.8	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	SH
IM15.9	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, PT and PTT, stool examination, occult blood, liver function tests, H.pylori test.	S	SH
IM15.10	Enumerate the indications for endoscopy, colonoscopy and other imaging procedures in the investigation of Upper GI bleeding	K	KH
IM15.11	Develop, document and present a treatment plan that includes fluid resuscitation, blood and blood component transfusion, and specific therapy for arresting blood loss	S	KH
IM15.12	Enumerate the indications for whole blood, component and platelet transfusion and describe the clinical features and management of a mismatched transfusion	K	K
IM15.13	Observe cross matching and blood / blood component transfusion	S	SH
IM15.14	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of pressors used in the treatment of Upper GI bleed	K	K
IM15.15	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy of acid peptic disease including Helicobacter pylori	K	K
IM15.16	Enumerate the indications for endoscopic interventions and Surgery	K	K
IM15.17	Determine appropriate level of specialist consultation	S	K
IM15.18	Counsel the family and patient in an empathetic non-judgmental manner on the diagnosis and therapeutic options	S	SH
Topic: Diarrheal disorder Number of competencies: (17) Number of procedures that require certification : (NIL)			
IM16.1	Describe and discuss the aetiology of acute and chronic diarrhea including infectious and non infectious causes	K	K
IM16.2	Describe and discuss the acute systemic consequences of diarrhea including its impact on fluid balance	K	K
IM16.3	Describe and discuss the chronic effects of diarrhea including malabsorption	K	K
IM16.4	Elicit and document and present an appropriate history that includes the natural history, dietary history, travel , sexual history and other concomitant illnesses	S	SH
IM16.5	Perform, document and demonstrate a physical examination based on the history that includes general examination, including an appropriate abdominal examination	S	SH

IM16.6	Distinguish between diarrhea and dysentery based on clinical features	S	KH
IM16.7	Generate a differential diagnosis based on the presenting symptoms and clinical features and prioritise based on the most likely diagnosis	S	SH
IM16.8	Choose and interpret diagnostic tests based on the clinical diagnosis including complete blood count, and stool examination	S	SH
IM16.9	Identify common parasitic causes of diarrhea under the microscope in a stool specimen	S	SH
IM16.10	Identify vibrio cholera in a hanging drop specimen	S	SH
IM16.11	Enumerate the indications for stool cultures and blood cultures in patients with acute diarrhea	K	KH
IM16.12	Enumerate and discuss the indications for further investigations including antibodies, colonoscopy, diagnostic imaging and biopsy in the diagnosis of chronic diarrhea	K	KH
IM16.13	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for parasitic causes of diarrhea	K	K
IM16.14	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy for bacterial and viral diarrhea	K	K
IM16.15	Distinguish based on the clinical presentation Crohn's disease from Ulcerative Colitis	S	SH
IM16.16	Describe and enumerate the indications, pharmacology and side effects of pharmacotherapy including immunotherapy	K	K
IM16.17	Describe and enumerate the indications for surgery in inflammatory bowel disease	K	K
IM17.1	Define and classify headache and describe the presenting features, precipitating factors, aggravating and relieving factors of various kinds of headache	K	KH
IM17.2	Elicit and document and present an appropriate history including aura, precipitating aggravating and relieving factors, associated symptoms that help identify the cause of headaches	S	SH
IM17.3	Classify migraine and describe the distinguishing features between classical and non classical forms of migraine	K	KH
IM17.4	Perform and demonstrate a general neurologic examination and a focused examination for signs of intracranial tension including neck signs of meningitis	S	SH
IM17.5	Generate document and present a differential diagnosis based on the clinical features, and prioritise the diagnosis based on the presentation	S	SH
IM17.6	Choose and interpret diagnostic testing based on the clinical diagnosis including imaging	S	SH
IM17.7	Enumerate the indications and describe the findings in the CSF in patients with meningitis	K	K
IM17.8	Demonstrate in a mannequin or equivalent the correct technique for performing a lumbar puncture	S	SH
IM17.9	Interpret the CSF findings when presented with various parameters of CSF fluid analysis	S	SH
IM17.10	Enumerate the indications for emergency care admission and immediate supportive care in patients with headache	K	K
IM17.11	Describe the indications, pharmacology, dose, side effects of abortive therapy in migraine	K	KH
IM17.12	Describe the indications, pharmacology, dose, side effects of prophylactic therapy in migraine	K	KH

IM17.13	Describe the pharmacology, dose, adverse reactions and regimens of drugs used in the treatment of bacterial, tubercular and viral meningitis	K	KH
IM17.14	Counsel patients with migraine and tension headache on lifestyle changes and need for prophylactic therapy	A/C	SH
IM18.1	Describe the functional and the vascular anatomy of the brain	K	KH
IM18.2	Classify cerebrovascular accidents and describe the aetiology, predisposing genetic and risk factors pathogenesis of hemorrhagic and non hemorrhagic stroke	K	KH
IM18.3	Elicit and document and present an appropriate history including onset, progression, precipitating and aggravating relieving factors, associated symptoms that help identify the cause of the cerebrovascular accident	S	SH
IM18.4	Identify the nature of the cerebrovascular accident based on the temporal evolution and resolution of the illness	K	KH
IM18.5	Perform, demonstrate & document physical examination that includes general and a detailed neurologic examination as appropriate, based on the history	S	SH
IM18.6	Distinguish the lesion based on upper vs lower motor neuron, side, site and most probable nature of the lesion	K/S	SH
IM18.7	Describe the clinical features and distinguish, based on clinical examination, the various disorders of speech	K/S	SH
IM18.8	Describe and distinguish, based on the clinical presentation, the types of bladder dysfunction seen in CNS disease	K	KH
IM18.9	Choose and interpret the appropriate diagnostic and imaging test that will delineate the anatomy and underlying cause of the lesion	S	KH
IM18.10	Choose and interpret the appropriate diagnostic testing in young patients with a cerebrovascular accident (CVA)	S	SH
IM18.11	Describe the initial supportive management of a patient presenting with a cerebrovascular accident (CVA)	K	KH
IM18.12	Enumerate the indications for and describe acute therapy of non hemorrhagic stroke including the use of thrombolytic agents	K	KH
IM18.13	Enumerate the indications for and describe the role of anti platelet agents in non hemorrhagic stroke	K	KH
IM18.14	Describe the initial management of a hemorrhagic stroke	K	KH
IM18.15	Enumerate the indications for surgery in a hemorrhagic stroke	K	K
IM18.16	Enumerate the indications describe and observe the multidisciplinary rehabilitation of patients with a CVA	S	KH
IM18.17	Counsel patient and family about the diagnosis and therapy in an empathetic manner	A/C	SH
IM19.1	Describe the functional anatomy of the locomotor system of the brain	K	KH
IM19.2	Classify movement disorders of the brain based on distribution, rhythm, repetition, exacerbating and relieving factors	K	KH
IM19.3	Elicit and document and present an appropriate history including onset, progression precipitating and aggravating relieving factors, associated symptoms that help identify the cause of the movement disorders	S	SH
IM19.4	Perform, demonstrate and document a physical examination that includes a general examination and a detailed neurologic examination using standard movement rating scales	S	SH
IM19.5	Generate document and present a differential diagnosis and prioritise based on the history and physical examination	S	SH

IM19.6	Make a clinical diagnosis regarding on the anatomical location, nature and cause of the lesion based on the clinical presentation and findings	S	SH
IM19.7	Choose and interpret diagnostic and imaging tests in the diagnosis of movement disorders	S	SH
IM19.8	Discuss and describe the pharmacology, dose, side effects and interactions used in the drug therapy of Parkinson's syndrome	K	KH
IM19.9	treatment of movement disorders		
IM20.1	Enumerate the local poisonous snakes	K	KH
	and describe the distinguishing marks of each		
IM20.2	Describe, demonstrate in a volunteer or a mannequin and educate (to other health care workers / patients) the correct initial management of patient with a snake bite in the field	S	SH
IM20.3	Describe the initial approach to the stabilisation of the patient who presents with snake bite	K	KH
IM20.4	Elicit and document and present an appropriate history, the circumstance, time, kind of snake, evolution of symptoms in a patient with snake bite	S	SH
IM20.5	Perform a systematic examination, document and present a physical examination that includes general examination, local examination, appropriate cardiac and neurologic examination	S	SH
IM20.6	Choose and interpret the appropriate diagnostic testing in patients with snake bites	S	SH
IM20.7	Enumerate the indications and describe the pharmacology, dose, adverse reactions, hypersensitivity reactions of anti snake venom	K	KH
IM20.8	Describe the diagnosis, initial approach stabilisation and therapy of scorpion envenomation	K	KH
IM20.9	Describe the diagnosis initial approach stabilisation and therapy of bee sting allergy	K	KH
IM21.1	Describe the initial approach to the	K	KH
	stabilisation of the patient who presents with poisoning		
IM21.2	Enumerate the common plant poisons seen in your area and describe their toxicology, clinical features, prognosis and specific approach to detoxification	K	KH
IM21.3	Enumerate the common corrosives used in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH
IM21.4	Enumerate the commonly observed drug overdose in your area and describe their toxicology, clinical features, prognosis and approach to therapy	K	KH
IM21.5	Observe and describe the functions and role of a poison center in suspected poisoning	S	KH
IM21.6	Describe the medico legal aspects of suspected suicidal or homicidal poisoning and demonstrate the correct procedure to write a medico legal report on a suspected poisoning	S	KH

IM21.7	Counsel family members of a patient with suspected poisoning about the clinical and medico legal aspects with empathy	A/C	SH
IM21.8	Enumerate the indications for psychiatric consultation and describe the precautions to be taken in a patient with suspected suicidal ideation / gesture	K	KH
IM22.1	Enumerate the causes of hypercalcemia and distinguish the features of PTH vs non PTH mediated hypercalcemia	K	KH
IM22.2	Describe the aetiology, clinical manifestations, diagnosis and clinical approach to primary hyperparathyroidism	K	KH
IM22.3	Describe the approach to the management of hypercalcemia	K	KH
IM22.4	Enumerate the components and describe the genetic basis of the multiple endocrine neoplasia syndrome	K	KH
IM22.5	Enumerate the causes and describe the clinical features and the correct approach to the diagnosis and management of the patient with hyponatremia	K	KH
IM22.6	Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hyponatremia	K	KH
IM22.7	Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hypokalemia	K	KH
IM22.8	Enumerate the causes and describe the clinical and laboratory features and the correct approach to the diagnosis and management of the patient with hyperkalemia	K	KH
IM22.9	Enumerate the causes and describe the clinical and laboratory features of metabolic acidosis	K	KH
IM22.10	Enumerate the causes of describe the clinical and laboratory features of metabolic alkalosis	K	KH
IM22.11	Enumerate the causes and describe the clinical and laboratory features of respiratory acidosis	K	KH
IM22.12	Enumerate the causes and describe the clinical and laboratory features of respiratory alkalosis	K	KH
IM22.13	Identify the underlying acid based disorder based on an ABG report and clinical situation	S	KH
Topic: Nutritional and Vitamin Deficiencies Number of competencies: (05) Number of procedures that require certification: (NIL)			
IM23.1	Discuss and describe the methods of nutritional assessment in an adult and calculation of caloric requirements during illnesses	K	KH

IM23.2	Discuss and describe the causes and consequences of protein caloric malnutrition in the hospital	K	KH
IM23.3	Discuss and describe the aetiology, causes, clinical manifestations, complications, diagnosis and management of common vitamin deficiencies	K	KH
IM23.4	Enumerate the indications for enteral and parenteral nutrition in critically ill patients	K	KH
IM23.5	Counsel and communicate to patients in a simulated environment with illness on an appropriate balanced diet	S	SH
IM24.1	Describe and discuss the epidemiology, pathogenesis, clinical evolution, presentation and course of common diseases in the elderly	K	KH
IM24.2	Perform multidimensional geriatric assessment that includes medical, psycho-social and functional components	S	SH
IM24.3	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of acute confusional states	K	KH
IM24.4	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of vascular events in the elderly	K	KH
IM24.5	Describe and discuss the aetiopathogenesis clinical presentation identification, functional changes, acute care, stabilization, management and rehabilitation of depression in the elderly	K	KH
IM24.6	Describe and discuss the aetiopathogenesis causes, clinical presentation, difference in discussion presentation identification, functional changes, acute care, stabilization, management and rehabilitation of dementia in the elderly	K	KH
IM24.7	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of personality changes in the elderly	K	KH
IM24.8	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of osteoporosis in the elderly	K	KH
IM24.9	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of CVA in the elderly	K	KH
IM24.10	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of COPD in the elderly	K	KH
IM24.11	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of the elderly undergoing surgery	K	KH
IM24.12	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of degenerative joint disease	K	KH
IM24.13	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of falls in the elderly	K	KH
IM24.14	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of common fractures in the elderly	K	KH
IM24.15	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of vision and visual loss in the elderly	K	KH
IM24.16	Describe and discuss the principles of physical and social rehabilitation, functional assessment, role of physiotherapy and occupational therapy in the management of disability in the elderly	K	KH

IM24.17	Describe and discuss the aetiopathogenesis, clinical presentation, identification, functional changes, acute care, stabilization, management and rehabilitation of hearing loss in the elderly	K	KH
IM24.18	Describe the impact of the demographic changes in ageing on the population	K	KH
IM24.19	Enumerate and describe the social problems in the elderly including isolation, abuse, change in family structure and their impact on health.	K	KH
IM24.20	Enumerate and describe social interventions in the care of elderly including domiciliary discussion services, rehabilitation facilities, old age homes and state interventions	K	KH
IM24.21	Enumerate and describe ethical issues in the care of the elderly	K	KH
IM24.22	Describe and discuss the aetiopathogenesis, clinical presentation, complications, assessment and management of nutritional disorders in the elderly	K	KH
IM25.1	Describe and discuss the response and the influence of host immune status, risk factors and comorbidities on zoonotic diseases (e.g. Leptospirosis, Rabies) and non-febrile infectious disease (e.g. Tetanus)	K	K
IM25.2	Discuss and describe the common causes, pathophysiology and manifestations of these diseases	K	K
IM25.3	Describe and discuss the pathophysiology and manifestations of these diseases	K	KH
IM25.4	Elicit document and present a medical history that helps delineate the aetiology of these diseases that includes the evolution and pattern of symptoms, risk factors, exposure through occupation and travel	S	SH
IM25.5	Perform a systematic examination that establishes the diagnosis and severity of presentation that includes: general skin, mucosal and lymph node examination, chest and abdominal examination (including examination of the liver and spleen)	S	SH
IM25.6	Generate a differential diagnosis and prioritise based on clinical features that help distinguish between infective, inflammatory, malignant and rheumatologic causes	K	SH
IM25.7	Order and interpret diagnostic tests based on the differential diagnosis including: CBC with differential, blood biochemistry, peripheral smear, urinary analysis with sediment, Chest X ray, blood and urine cultures, sputum gram stain and cultures, sputum AFB and cultures, CSF analysis, pleural and body fluid analysis, stool routine and culture and QBC	K	SH
IM25.8	Enumerate the indications for use of newer techniques in the diagnosis of these infections	K	KH
IM25.9	Assist in the collection of blood and other specimen cultures	S	SH
IM25.10	Develop and present an appropriate diagnostic plan based on the clinical presentation, most likely diagnosis in a prioritised and cost effective manner	K	KH
IM25.11	Develop an appropriate empiric treatment plan based on the patient's clinical and immune status pending definitive diagnosis	C	SH
IM25.12	Communicate to the patient and family the diagnosis and treatment of identified infection	C	SH
IM25.13	Counsel the patient and family on prevention of various infections due to environmental issues	C	SH
IM26.1	Enumerate and describe professional qualities and roles of a physician	K	KH

IM26.2	Describe and discuss the commitment to lifelong learning as an important part of physician growth	K	KH
IM26.3	Describe and discuss the role of non maleficence as a guiding principle in patient care	K	KH
IM26.4	Describe and discuss the role of autonomy and shared responsibility as a guiding principle in patient care	K	KH
IM26.5	Describe and discuss the role of beneficence of a guiding principle in patient care	K	KH
IM26.6	Describe and discuss the role of a physician in health care system	K	KH
IM26.7	Describe and discuss the role of justice as a guiding principle in patient care	K	KH
IM26.8	Identify discuss medicolegal, socioeconomic and ethical issues as it pertains to organ donation	K	KH
IM26.9	Identify, discuss and defend medicolegal, sociocultural, economic and ethical issues as it pertains to rights, equity and justice in access to health care	K	KH
IM26.10	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to confidentiality in patient care	K	KH
IM26.11	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to patient autonomy, patient rights and shared responsibility in health care	K	KH
IM26.12	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to decision making in health care including advanced directives and surrogate decision making	K	KH
IM26.13	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to decision making in emergency care including situations where patients do not have the capability or capacity to give consent	K	KH
IM26.14	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as it pertains to research in human subjects	K	KH
IM26.15	Identify, discuss and defend, medicolegal,socio-cultural and ethical issues as they pertain to consent for surgical procedures	K	KH
IM26.16	Identify, discuss and defend medicolegal, socio-cultural, professional and ethical issues as it pertains to the physician patient relationship (including fiduciary duty)	K	KH
IM26.17	Identify, discuss physician's role and responsibility to society and the community that she/ he serves	K	KH
IM26.18	Identify, discuss and defend medicolegal, socio-cultural, professional and ethical issues in physician- industry relationships	K	KH
IM26.19	Demonstrate ability to work in a team of peers and superiors	S	SH
IM26.20	Demonstrate ability to communicate to patients in a patient, respectful, non threatening, non judgemental and empathetic manner	S	SH
IM26.21	Demonstrate respect to patient privacy	S	SH
IM26.22	Demonstrate ability to maintain confidentiality in patient care	S	SH
IM26.23	Demonstrate a commitment to continued learning	S	SH
IM26.24	Demonstrate respect in relationship with patients, fellow team members, superiors and other health care workers	S	SH
IM26.25	Demonstrate responsibility and work ethics while working in the health care team	S	SH
IM26.26	Demonstrate ability to maintain required documentation in health care (including correct use of medical records)	S	SH
IM26.27	Demonstrate personal grooming that is adequate and appropriate for health care responsibilities	S	SH

IM26.28	Demonstrate adequate knowledge and use of information technology that permits appropriate patient care and continued learning	S	SH
IM26.29	Communicate diagnostic and therapeutic options to patient and family in a simulated environment	S	SH
IM26.30	Communicate care options to patient and family with a terminal illness in a simulated environment	S	SH
IM26.31	Demonstrate awareness of limitations and seeks help and consultations appropriately	S	SH
IM26.32	Demonstrate appropriate respect to colleagues in the profession	S	SH
IM26.33	Demonstrate an understanding of the implications and the appropriate procedures and response to be followed in the event of medical errors	S	SH
IM26.34	Identify conflicts of interest in patient care and professional relationships and describe the correct response to these conflicts	S	SH
IM26.35	Demonstrate empathy in patient encounters	S	SH
IM26.36	Demonstrate ability to balance personal and professional priorities	S	SH
IM26.37	Demonstrate ability to manage time appropriately	S	SH
IM26.38	Demonstrate ability to form and function in appropriate professional networks	S	SH
IM26.39	Demonstrate ability to pursue and seek career advancement	S	SH
IM26.40	Demonstrate ability to follow risk management and medical error reduction practices where appropriate	S	SH
IM26.41	Demonstrate ability to work in a mentoring relationship with junior colleagues	S	SH
IM26.42	Demonstrate commitment to learning and scholarship	S	SH
IM26.43	Identify, discuss and defend medicolegal, sociocultural, economic and ethical issues as they pertain to in vitro fertilisation donor insemination and surrogate motherhood	K	KH
IM26.44	Identify, discuss and defend medicolegal, socio-cultural professional and ethical issues pertaining to medical negligence	K	KH
IM26.45	Identify, discuss and defend medicolegal, socio-cultural professional and ethical issues pertaining to malpractice	K	KH
IM26.46	Identify, discuss and defend medicolegal, socio-cultural professional and ethical issues in dealing with impaired physicians	K	KH
IM26.47	Identify, discuss and defend medicolegal, socio-cultural and ethical issues as they pertain to refusal of care including do not resuscitate and withdrawal of life support	K	KH
IM26.48	Demonstrate altruism	S	SH
IM26.49	Administer informed consent and appropriately address patient queries to a patient being enrolled in a research protocol in a simulated environment	S	SH
	Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication. Column D: K – Knows, KH - Knows How, SH - Shows how, P- performs independently, Column F: DOAP session – Demonstrate, Observe, Assess, Perform.		

Core Y/ N	Suggested Learning methods	Suggested Assessment methods	Horizontal Integration	Vertical Integration		
Y	Lecture, Small group discussion	Written/ Viva voce	Forensic Medicine	Pathology, Physiology		
N	Lecture, Small group discussion	Written		Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology, Microbiology		
Y	Lecture, Small group discussion	Written/ Viva voce	Pharmacology	Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce	Pharmacology	Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce	Pharmacology	Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce	Pharmacology	Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce	Forensic Medicine, Pharmacology	Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce	Forensic Medicine, Pharmacology	Pathology, Microbiology		
Y	Bedside clinic	Skill assessment		Forensic Medicine, Pharmacology		
Y	Bedside clinic, DOAP session	Skill assessment		Forensic Medicine, Pharmacology		
Y	Bedside clinic, DOAP session	Skill assessment		Forensic Medicine, Psychiatry		
Y	Bedside clinic, DOAP session	Skill assessment		Pathology, Physiology		
Y	Bedside clinic, DOAP session	Skill assessment	General Surgery	Pathology		
Y	Bedside clinic, DOAP session	Skill assessment		Pharmacology		
Y	Bedside clinic, Small group discussion	Skill assessment		Pathology		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				

N	Lecture, Small group discussion, Bedside clinic	Skill assessment		Radiodiagnos		
Y	Small group discussion, Lecture, Bedside clinic	Written/ Skill assessment				
Y	Bedside clinic, Small group discussion, Lecture	Skill assessment	Physiology			
Y	DOAP session	Skill assessment	Physiology	Microbiology		
Y	Lecture, Small group discussion	Skill assessment	Physiology			
Y	Lecture, Small group discussion	Viva voce/written	Physiology	Pharmacology		
Y	Lecture, Small group discussion, Bedside clinic	Viva voce/written	Physiology			
Y	Bedside clinic, Skill assessment, Small group discussion	Bedside clinic/ Skill assessment/written	Pediatrics	Physiology, Biochemistry		
Y	Bedside clinic, Small group discussion	Written	Pediatrics	Physiology, Biochemistry		
Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment/written	Pediatrics	Physiology, Biochemistry		
Y	Bedside clinic, Small group discussion	Skill assessment/ written	Pediatrics	Physiology, Biochemistry		
Y	Bedside clinic, Skill assessment	Log book documentation of completion		Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce	Psychiatry	Pathology, Physiology, Community Medicine		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry		
Y	Lecture, Small group discussion	Written/ Viva voce	Psychiatry	Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce	AETCOM	Pathology		
Y	Bedside clinic, DOAP session	Skill assessment	Psychiatry			
Y	Bedside clinic, DOAP session	Skill assessment				

Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment	Respiratory Medicine			
Y	Bedside clinic, DOAP session	Skill assessment	Anesthesiology , General Surgery			
Y	Bedside clinic, DOAP session	Skill assessment	Orthopedics			
Y	Bedside clinic, DOAP session	Skill assessment	Orthopedics, Physical Medicine & Rehabilitation	Biochemistry		
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Ophthalmology			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics, Physical Medicine & Rehabilitation	Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce	ENT			
Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine		
Y	Lecture, Small group discussion	Written/ Viva voce	Psychiatry	Pharmacology , Biochemistry		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
N	DOAP session	NA	Physiology, Biochemistry			
Y	DOAP session	Skill assessment	Microbiology, Community Medicine			
Y	Lecture, Small group discussion	Written/ Viva voce	Microbiology, Community Medicine	Pharmacology		
Y	DOAP session	Skill assessment	Microbiology	AETCOM		
Y	Lecture, Small group discussion	Short note/ Viva voce		Human Anatomy, Pathology, Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Microbiology		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment		Microbiology		

Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment	Microbiology, Pharmacology	Radiodiagnos is, Microbiology		
Y	Bedside clinic, DOAP session	Skill assessment		AETCOM		
Y	DOAP session	Skill assessment		Community Medicine, General Medicine		
Y	DOAP session	Skill assessment		Microbiology		
Y	Bedside clinic, DOAP session	Skill assessment		Radiodiagnos is, Microbiology		
Y	Bed side clinic, DOAP session	Skill Assessment/ Written/ Viva voce		Pharmacology , Microbiology		
Y	Bedside clinic, DOAP session	Skill assessment/ Written/ Viva voce		Pharmacology , Microbiology		
Y	DOAP session	Skill assessment		Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	DOAP session	Skill assessment				
Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Written		Microbiology		
Y	Lecture, Small group discussion	Written		Microbiology		
Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine		
Y	Lecture, Small group discussion	Written		Microbiology		
Y	Lecture, Small group discussion	Written		Pathology, Microbiology		
Y	Lecture, Small group discussion	Written		Microbiology		
Y	Lecture, Small group discussion	Written				
Y	Lecture, Small group discussion	Written		Microbiology		

Y	Bedside clinic, DOAP session	Skill assessment		Microbiology		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Written/ Viva voce				
Y	Bedside clinic, Skill assessment	Skill assessment		Pathology, Microbiology		
Y	DOAP session	Log book/ documentation		Microbiology		
Y	DOAP session	Log book/ documentation		Microbiology		
Y	DOAP session	Log book/ documentation/ Skill assessment		Microbiology		
N	Lecture, Small group discussion	Written		Pathology		
N	Skills lab	Log book/ documentation/ DOAP session		Pathology		
N	Lecture, Small group discussion	Written/ Viva voce				
Y	DOAP session	Log book/ documentation		Microbiology		
Y	DOAP session	Log book/ documentation		Microbiology		
Y	Bedside clinic, Skill assessment	Skill assessment				
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
Y	Small group discussion	Skill assessment		Microbiology, Pharmacology		
Y	DOAP session	Skill assessment				
Y	DOAP session	Skill assessment		AETCOM		
Y	DOAP session	Skill assessment		Microbiology, Pharmacology		
Y	Lecture, Small group discussion	Written/Viva voce		Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology		

Y	Lecture, Small group discussion	Written/ Viva voce	Obstetrics & Gynaecology	Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		General Surgery		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment		Pathology		
Y	Bedside clinic, Small group discussion	Viva voce/ Written	General Surgery	Radiodiagnos		
Y	Bedside clinic, Small group discussion	Viva voce/ Written		Pathology, Microbiology		
Y	DOAP session	documentation in log book				
Y	Written, Small group discussion	Skill assessment/ Written/ Viva voce	General Surgery	Pharmacology		
Y	Written, Small group discussion	Written/ Viva voce		Microbiology		
Y	Written, Small group discussion	Written/ Viva voce	General Surgery			
Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Short notes/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Short notes/ Viva voce		Pathology, Microbiology		
Y	Lecture, Small group discussion	Short notes/ Viva voce		Pathology, Microbiology		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment				

Y	Bedside clinic, DOAP session, Small group discussion	Written/ Skill assessment		Pathology, Microbiology		
Y	Bedside clinic, DOAP session, Small group discussion	Written/ Skill assessment				
N	Small group discussion, Lecture, Bedside clinic	Written/ Viva voce		Radiodiagnos is		
Y	Bedside clinic, DOAP session, Small group discussion	Written/ Skill assessment				
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology , Microbiology		
Y	DOAP session	Skill assessment		Microbiology		
Y	Simulation	Skill assessment		Microbiology		
Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology, Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Microbiology		
Y	DOAP session	Skills assessment		AETCOM		
Y	DOAP session	Skills assessment		AETCOM		
Y	DOAP session	Skills assessment		AETCOM		
Y	DOAP session, Small group discussion	Viva voce/ Written/ Skill Assessment		AETCOM		
Y	Small group discussion	observation by teacher		AETCOM		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
N	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce				

Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment	Orthopedics			
Y	Bedside clinic, Small group discussion	Skill assessment/ Written				
Y	Bedside clinic, Small group discussion	Skill assessment/ Written				
Y	Bedside clinic, Small group discussion	Skill assessment/ Written		Pathology		
Y	Small group discussion, Lecture	Written/ Viva voce	Orthopedics			
Y	Bedside clinic, Small group discussion	Skill assessment/ Written	Orthopedics	Radiodiagnos		
Y	DOAP session	Skill assessment/ Written				
Y	Bedside clinic, Small group discussion	Skill assessment/ Written				
Y	DOAP session	Skill assessment/ Written	Orthopedics	Pharmacology		
Y	DOAP session	Skill assessment/ Written		Pharmacology		
Y	DOAP session	Skill assessment/ Written		Pharmacology		
Y	Bedside clinic, Small group discussion	Skill assessment/ Written		Pharmacology		
Y	DOAP session	Skill assessment		AETCOM		
Y	DOAP session	Skill assessment				
Y	DOAP session	Skill assessment				
Y	Small group discussion, Lecture	Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology		
N	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		

Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Small group discussion	Skill assessment/ Written/ Viva voce				
Y	Small group discussion	Skill assessment/ Written/ Viva voce				
Y	Small group discussion	Written/ Viva voce		Pharmacology		
Y	DOAP session	Skill assessment/ Written		Pharmacology		
Y	DOAP session	Skill assessment				
Y	DOAP session	documentation in log book/ skills station				
Y	DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	observation by faculty				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Bed side clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology		
Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology		
Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology		
P	Bedside clinic, DOAP session	Skill assessment/ Written		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology		

Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology		
Y	Bedside clinic, DOAP session	Skill assessment/ Written		Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology , Community Medicine		
Y	DOAP session	Skill assessment				
Y	DOAP session	Skill assessment				
Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce/ Skill assessment				
Y	Bedside clinic	document in log book				
Y	DOAP session	Skill assessment				
Y	Lecture, Small group discussion	Written				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce				
Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce				
Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce		Pathology		

Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce		Pathology		
Y	DOAP session, Small group discussion	Skill assessment/ Written/ Viva voce				
N	Lecture, Small group discussion	Written/ Viva voce		Radiodiagnosi s		
Y	DOAP session	documentation in log book				
Y	DOAP session, Bedside clinic	documentation in logbook				
N	DOAP session	Skill assessment with model				
Y	DOAP session	Skill assessment				
Y	DOAP session	Skill assessment				
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion, Bedside clinic	observation by faculty				
Y	Lecture, Small group discussion, Bedside clinic	observation by faculty				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
N	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Small group discussion, Lecture	Written/ Viva voce				

Y	Small group discussion, Lecture	Written/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment		Pathology		
Y	Bedside clinic, DOAP session	Skill assessment		Pathology, Biochemistry		
Y	Bedside clinic, DOAP session	Skill assessment		Pathology, Biochemistry		
Y	Small Group discussion, Lecture	Written/ Viva voce				
Y	Small Group discussion, Lecture	Written/ Viva voce				
Y	Small Group discussion, Lecture	Written/ Viva voce		Pharmacology		
Y	Small Group discussion, Lecture	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
Y	DOAP session	Skill assessment		Pharmacology		
Y	DOAP session	Skill assessment				
Y	DOAP session	faculty observation				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce				
N	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology		
N	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Short notes		Pathology, Physiology		
Y	Lecture, Small group discussion	Short notes/ Viva voce				
Y	Bedside clinic	Skill assessment/ Short case				
Y	Bed side clinic, DOAP session	Skill assessment	General Surgery			
Y	Bedside clinic, DOAP session	Skill assessment	General Surgery			

Y	Bedside clinic, small group discussion	Short case	General Surgery			
Y	Bedside clinic, DOAP session	Skill assessment	General Surgery			
Y	Bedside clinic, lab	Skill assessment	General Surgery			
Y	Bedside clinic, lab	Skill assessment	General Surgery			
Y	Lecture, Bedside clinic	Short note		Community Medicine		
Y	Lecture, Small group discussion	Viva voce/ Short note	General Surgery	Pharmacology		
Y	Skill assessment	Skill assessment		Pharmacology		
Y	Bedside clinic, Small group discussion	Short note/ Viva voce	General Surgery	Pharmacology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Biochemistry		
N	Lecture, Small group discussion	Short note/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology		
N	Lecture, Small group discussion	Short note/ Viva voce				
N	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology		
Y	Bedside clinic	Skill assessment/ Short case	General Surgery			
Y	Bedside clinic	Skill assessment/ short case	General Surgery			
Y	Bedside clinic	Skill assessment/ Short case	General Surgery	Human Anatomy		
Y	Bedside clinic	Skill assessment/ Short case	General Surgery			
Y	Bedside clinic	Skill assessment/ Short case				
Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Radiodiagnos is		
Y	Bedside clinic, Small group discussion	Short note/ Viva voce	General Surgery	Pharmacology		
Y	Bedside clinic, Small group discussion	Short note/ Viva voce	General Surgery	Pharmacology		
Y	Bedside clinic, Small group discussion	Short note/ Viva voce		Pathology		
Y	Bedside clinic, small group discussion	Short note/ Viva voce		AETCOM		
Y	Bedside clinic, Small group discussion	Short note/ Viva voce	Anesthesiology	Pharmacology		
Y	Bedside clinic, Small group discussion	Short note/ Viva voce		AETCOM		

Y	Bedside clinic, Small group discussion	Short note/ Viva voce		AETCOM		
Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology		
N	Lecture, Small group discussion	Short note/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology, Community Medicine		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pathology		
Y	Bedside clinic, Skills lab	Skill assessment				
Y	Bedside clinic, Skills lab	Skill assessment				
Y	Bedside clinic, Skills lab	Skill assessment/ Short note/ Viva voce				
Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce				
Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce				
Y	Bedside clinic, Skills lab	Skill assessment				
Y	Bedside clinic, Skills lab	Skill assessment				
Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology		
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery			
Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery	Pathology		
Y	DOAP session, Small group discussion, Lecture	Written/ Viva voce/ Skill assessment	General Surgery	Pathology		
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery	Pathology, Physiology		
Y	Bedside clinic	Skill assessment	General Surgery			
Y	Bedside clinic, Skills lab	Skill assessment	General Surgery			
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery			
Y	DOAP session	Skill assessment	General Surgery			

Y	Bedside clinic, Skills lab	Skill assessment/ Short note/ Viva voce	General Surgery			
Y	Bedside clinic, DOAP session, Small group discussion	Skill assessment/ Short note/ Viva voce	General Surgery	Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce	General Surgery			
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery	Pathology		
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery	Pathology		
Y	Bedside clinic	Short note/ Viva voce/ Skill assessment	General Surgery	Pathology		
Y	Lecture, Small group discussion	Short note/Viva voce	General Surgery	Pharmacology		
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery	Pharmacology , Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery			
Y	Small group discussion		General Surgery			
Y	DOAP session	Skill assessment	General Surgery			
Y	Lecture, Small group discussion	Short note/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	Bedside clinic, Skills lab	Skill assessment		Microbiology, Pathology		
Y	Bedside clinic, Skills lab	Skill assessment				

Y	Lecture, Small group discussion	Short note/ Viva voce				
Y	Bedside clinic, Skills lab	Skill assessment/ short note/ Viva voce				
Y	Bedside clinic, Skills lab, Small group discussion	Skill assessment/ Short note/ Viva voce		Microbiology, Pathology		
Y	DOAP session	Skill assessment		Microbiology		
Y	DOAP session	Skill Assessment		Microbiology		
Y	Lecture, Small group discussion	Written/ Viva voce		Microbiology		
Y	Lecture, Small group discussion	Written/ Viva voce	General Surgery	Pathology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology , Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology , Microbiology		
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery	Pathology		
Y	Lecture, Small group discussion	Short note/ Viva voce		Pharmacology		
Y	Lecture, Small group discussion	Short note/ Viva voce	General Surgery			
Y	Lecture, Small group discussion	Short note/ Viva voce		Human Anatomy		
Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment				
Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment				
Y	Bedside clinic, Small group discussion	Bedside clinic/ Skill assessment				
Y	Bedside clinic, Small group discussion	Bedside clinic/ skill assessment				
Y	Lecture, Small group discussion, Bedside clinic	Skill Assessment				
Y	Small group discussion, Bedside clinic	Skill Assessment		Microbiology, Pathology		
Y	DOAP session	Skill assessment		Microbiology, Pathology		
Y	Small group discussion, Bedside clinic	Skill assessment		Microbiology, Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		

Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
N	DOAP session	Skill Assessment	Psychiatry	Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy		
Y	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Bedside clinic	Skill assessment		Pathology		
Y	Bedside clinic, Small group discussion	Skill Assessment				
Y	Bedside clinic, DOAP session	Skill Assessment				
Y	Bedside clinic, DOAP session	Skill Assessment		Physiology		
N	Bedside clinic, DOAP session	Skill Assessment		Physiology		
Y	Small group discussion, Bedside clinic	Written/ Viva voce		Physiology		
Y	Bedside clinic, DOAP session, Small group discussion	Written/ Viva voce/ Skill assessment		Radiodiagnosi s		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce	General Surgery			
Y	Lecture, Small group discussion	Written/ Viva voce	Physical Medicine & Rehabilitation			
Y	DOAP session	Skill assessment				
Y	Lecture, Small group discussion	Written/ Viva voce		Human Anatomy, Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Bedside clinic	Skill assessment				
Y	Bedside clinic	Skill assessment				
Y	Bedside clinic	Skill assessment				

Y	Bedside clinic	Skill assessment				
Y	Bedside clinic, Small group session	Skill assessment/ Written/ Viva voce		Radiodiagnos		
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
	discussion		Surgery			
Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology		
Y	DOAP session	Skill assessment/ Written/ Viva voce		Forensic Medicine		
Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine		
Y	Bedside clinic, DOAP session	Skill assessment		Forensic Medicine		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology		
Y	Lecture, Small group discussion	Written/ Viva voce		Forensic Medicine, Pharmacology		
Y	DOAP session	document in log book		Forensic Medicine, Pharmacology		
Y	Lecture, Small group discussion, DOAP session	Written/ Viva voce/ Skill assessment		Forensic Medicine, Pharmacology		

Y	DOAP session	Skill assessment		Forensic Medicine, Pharmacology		
Y	DOAP session	Skill assessment		Forensic Medicine, Psychiatry		
N	Lecture, Small group discussion	Written/ Viva voce		Pathology, Physiology		
N	Lecture, Small group discussion	Written/ Viva voce	General Surgery	Pathology		
N	Lecture, Small group discussion	Written/ Viva voce		Pharmacology		
N	Lecture, Small group discussion	Written/ Viva voce		Pathology		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
N	Lecture, Small group discussion	Written/ Viva voce		Physiology		
N	Lecture, Small group discussion	Written/ Viva voce		Physiology		
N	Lecture, Small group discussion	Written/ Viva voce		Physiology		
N	Lecture, Small group discussion	Written/ Viva voce		Physiology		
N	Lecture, Small group discussion	Written/ Viva voce		Physiology		
Y	Lecture, Small group discussion	Written/ Viva voce	Pediatrics	Physiology, Biochemistry		

Y	Lecture, Small group discussion	Written/ Viva voce	Pediatrics	Physiology, Biochemistry		
Y	Lecture, Small group discussion	Written/ Viva voce	Pediatrics	Physiology, Biochemistry		
Y	Lecture, Small group discussion	Written/ Viva voce	Pediatrics	Physiology, Biochemistry		
Y	DOAP session	Skill assessment				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment		Psychiatry		
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture Small group discussion	Written/ Viva voce	Psychiatry			
Y	Lecture, Small group discussion	Written/ Viva voce	AETCOM			
N	Lecture, Small group discussion	Written/ Viva voce	Psychiatry			
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce	Respiratory Medicine			
Y	Lecture, Small group discussion	Written/ Viva voce	Anesthesiology, General Surgery			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics, Physical Medicine & Rehabilitation			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics			
Y	Lecture, Small group discussion	Written/ Viva voce	Ophthalmology			
Y	Lecture, Small group discussion	Written/ Viva voce	Orthopedics, Physical Medicine & Rehabilitation			

Y	Lecture, Small group discussion	Written/ Viva voce	ENT			
Y	Lecture, Small group discussion	Written/ Viva voce		Community Medicine		
Y	Lecture, Small group discussion	Written/ Viva voce	Psychiatry			
Y	Lecture, Small group discussion	Written/ Viva voce				
Y	Lecture, Small group discussion	Written/ Viva voce	AETCOM			
Y	Lecture, Small group discussion	Written/ Viva voce		Physiology, Biochemistry		
Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine		
Y	Lecture, Small group discussion	Written		Microbiology, Community Medicine		
Y	Lecture, Small group discussion	Written		Microbiology		
Y	Bedside clinic, DOAP session	Skill assessment		Community Medicine		
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Written/ Viva voce				
Y	Bedside clinic, Skill assessment	Skill assessment		Pathology, Microbiology		
N	Lecture, Small group discussion	Written/ Viva voce				
Y	DOAP session	Log book documentation		Microbiology		
Y	Bedside clinic, Skill assessment	Skill assessment				
Y	DOAP session	Skill assessment		Microbiology, Pharmacology		
Y	DOAP session	Skill assessment		AETCOM		
Y	DOAP session	Skill assessment		Community Medicine, General Medicine		
Y	Small group discussion	Written/ Viva voce				

Y	Small group discussion	Written/ Viva voce				
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Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Bedside clinic, DOAP session	Skill assessment				
Y	Small group discussion	Skill assessment/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce				
Y	Small group discussion	Skill assessment/ Viva voce				
Y	Small group discussion	Skill assessment				

Y	Small group discussion	Skill assessment/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce				
N	Small group discussion	Skill assessment/ Viva voce				
N	Small group discussion	Skill assessment/ Viva voce				
Y	Small group discussion	Skill assessment/ Viva voce				
Y	Bedside clinic, DOAP session	Skill assessment/ Viva voce				
N	Small group discussion	Skill assessment/ Viva voce				
Y	Small group discussion	Skill assessment/ Viva voce				
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N	Small group discussion	Skill assessment/ Viva voce				
N	Small group discussion	Skill assessment/ Viva voce				
N	Small group discussion	Written/ Viva voce		Obstetrics & Gynaecology		
N	Small group discussion	Written/ Viva voce				
N	Small group discussion	Written/ Viva voce				
N	Small group discussion	Written/ Viva voce				
Y	Small group discussion	Written/ Viva voce				
Y	Small group discussion	Written/ Viva voce				
Y	Bedside clinic, DOAP session	Written/ Viva voce				

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