

AVICENNA MEDICAL & DENTAL COLLEGE



STUDY GUIDE

2025

Respiratory II

BLOCK 9- MODULE 21



Program: MBBS
Year: 3rd Professional Year
Batch No: M-22
Session: 2024-2025

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List of Abbreviations

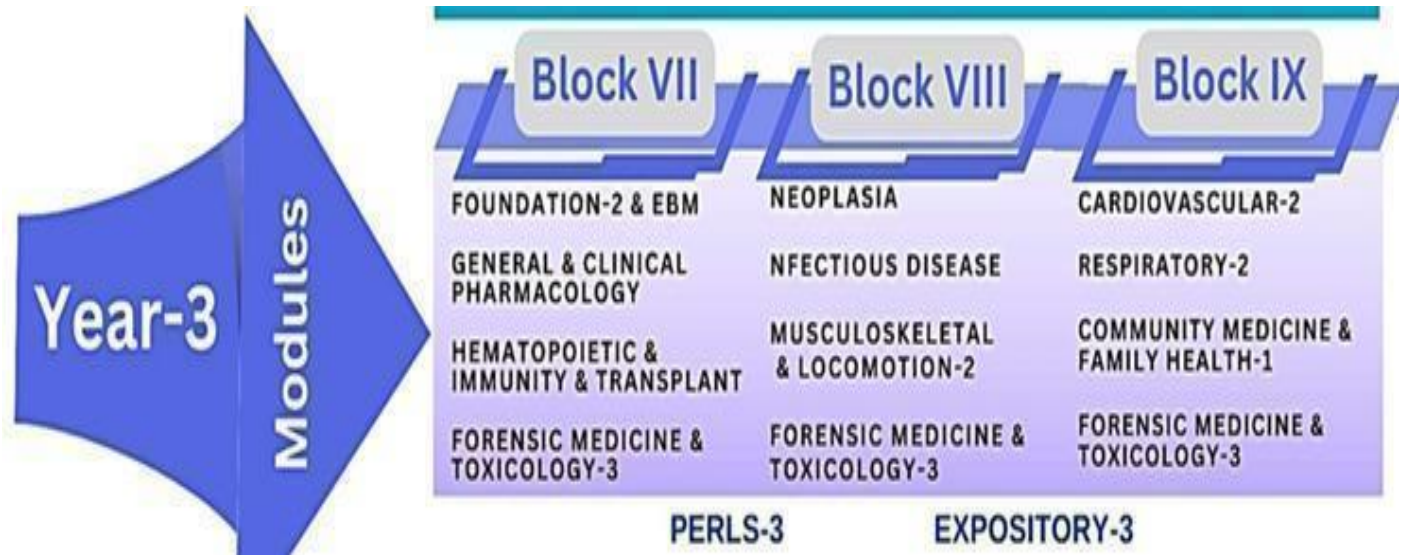
Letter	Abbreviations	Subjects
A	A	Anatomy
	ABCDE	Airway, Breathing, Circulation, Disability, Exposure
	ABG	Arterial blood gas
	ACS	Acute Coronary Syndromes
	Ag	Aging
	AKI	Acute kidney injury
	ALT	Alanine transaminase
	AMI	Acute Myocardial Infarction
	AMP	Adenosine monophosphate
	ANA	Antinuclear Antibody
	ANCA	Anti-neutrophil Cytoplasmic Antibodies
	ANS	Autonomic Nervous System
	AO	Association of osteosynthesis
	APTT	Activated Partial Thromboplastin Clotting Time
	ARDS	Acute Respiratory Distress Syndrom
	ARVC	Arrhythmogenic Right ventricular Cardiomyopathy
	ASD	Atrial Septal Defect
	AST	Aspartate aminotransferase
	ATLS	Advanced Trauma Life Support
	Au	Autopsy
	AUC	Area under the curve
	AV	Atrioventricular
B	B	Biochemistry
	BhS	Behavioral Sciences
	BHU	Basic Health Unit
	BSL	Biological Safety Level
C	C	Civics
	C-FRC	Clinical-Foundation Rotation Clerkship
	C.burnetii	Clostridium burnetii
	C.neoformans	Clostridium neoformans
	C.pneumoniae	Clostridium pneumoniae
	C.psittaci	Clostridium psittaci
	C.trachomatis	Clostridium trachomatis
	CA	cancer
	CABG	coronary artery bypass grafting
	CAD	coronary artery disease
	CBC	Complete Blood Count
	CCR5	cysteine-cysteine chemokine receptor
	CD31	cluster of differentiation 31
	CD34	cluster of differentiation 34
	CD4	cluster of differentiation 4
	CF	cystic fibrosis
	CK	Creatine kinase
	CLED	cystine lactose electrolyte deficient
	CLL	chronic lymphocytic leukemia
	CM	Community Medicine
	CML	chronic myeloid leukemia

	CMV	cytomegalo virus
	CNS	Central Nervous System
	CO	Carbon monoxide
	CO2	Carbon dioxide
	CODIS	combined DNA index system
	COPD	Chronic obstructive pulmonary disease
	COVID-19	Corona Virus Disease 2019
	COX	Cyclooxygenase
	CPR	Cardiopulmonary Resuscitation
	CR	Clinical Rotation
	CRP	Clinical Rotation CSF C- Reactive Protein
	CSF	Cerebro Spinal Fluid
	CT	Computed tomography
	CV	Cardiovascular
	CVA	Cerebral vascular accident
	CVS	Cerebrovascular system
D	D.medinensis	Dracunculus Medinensis
	DALY	Disability-Adjusted Life Year
	DCIS	Ductal Carcinoma in situ
	DCM	Dilated Cardiomyopathy Dorsal Colu
	DCMLS	Dorsal column medial lemniscus system
	DLC	Differential Leukocyte Count
	DMARDs	Disease Modifying Anti Rheumatic Drugs
	DNA	DeoxyRibonucleic Acid
	DOTS	Directly Observed Treatment Short-course
	DTP	Diphtheria, Tetanus, Pertussis
	DVI	Disaster Victim Identification
	DVT	Deep Vein Thrombosis
E	E.coli	Escherichia coli
	ECF	Extracellular Fluid
	ECG	Electrocardiography
	ECP	Emergency contraceptive pills
	ED50	Median Effective Dose
	EEG	Electroencephalogram
	EIA	Enzyme Immunoassay
	ELISA	Enzyme Linked Immunosorbent Assay
	EnR	Endocrinology & Reproduction
	ENT	Ear Nose Throat
	EPI	Expanded Programme on Immunization
	ER	Emergency Room
F	F	Foundation
	FAST	Focused Assessment with Sonography
	FEV1	Forced Expiratory Volume 1
	FM	Family Medicine
	For	Forensic Medicine
	FPIA	Fluorescent Polarization Immunoassay
	FS	Forensic Serology
	FSc	Forensic Science
	FVC	Forced Vital Capacity
G	GCS	Glasgow Coma Scale

	GFR	Glomerular Filtration Rate
	GIT	Gastrointestinal tract
	GL-MS	Gas Liquid Mass Spectrometry
	GLC	Gas Liquid Chromatography
	GLP	Guanosine Monophosphate
	GMP	Guanosine monophosphate
	GO	Gynecology and Obstetrics
	GP	General Practitioner
	GPE	General Physical Examination
	GTO	Golgi Tendon Organ
	Gynae & Obs	Gynecology and Obstetrics
H	H & E	Hematoxylin and eosin
	H. influenzae	Haemophilus influenzae
	H.pylori	Helicobacter pylori
	HAI	Healthcare Associated Infections
	HbC	Hemoglobin C
	HbS	Sickle Hemoglobin
	HbSC	Hemoglobin Sickle C Disease
	HCL	Hydrochloric Acid
	HCM	Hypertrophic Cardiomyopathy
	HHV	Human Herpesvirus
	HIT	Hematopoietic, Immunity and Transplant
	HIV	Human Immunodeficiency Virus
	HL	Hematopoietic & Lymphatic
	HLA	Human Leukocyte Antigen
	HMP	Hexose Monophosphate
	HNSS	Head & Neck and Special Senses
	HPLC	High Pressure Liquid Chromatography
I	ICF	Intra Cellular Fluid
	ID	Infectious Diseases
	IE	Infective Endocarditis
	IL	Interleukin
	ILD	Interstitial Lung Disease
	IN	Inflammation
	INR	International Normalized Ratio
	INSTIs	Integrase Strand Transfer Inhibitors
	IPV	Intrauterine Device
	IUD	Intrauterine device
	IUGR	Intra-Uterine Growth Restriction
J	JVP	Jugular Venous Pulse
L	L	Law
	LD50	Median Lethal Dose
	LDH	Lactate Dehydrogenase
	LSD	Lysergic acid diethylamide
M	M	Medicine
	MALT	Mucosa Associated Lymphoid Tissue
	MBBS	Bachelor of Medicine, Bachelor of Surgery
	MCH	Mean corpuscular hemoglobin
	MCHC	Mean Corpuscular Hemoglobin Concentration
	MCV	Mean Corpuscular Volume
	MHO2001	Mental Health Ordinance 2001
	MoA	Mechanism of action

	MRI	Mechanism of action
	MS	Musculoskeletal
	MSD	Musculoskeletal disorders
	MSDS	Minimum Service Delivery Standards
	MSK	Musculoskeletal
N	N	Neoplasia
	NEAA	Non-Essential Amino Acids
	NK cells	Natural Killer Cells
	NNRTI	Non-nucleoside Reverse Transcriptase Inhibitors
	NRTIs	Nucleoside Reverse Transcriptase Inhibitors
	NS	Neurosciences
O	NSAIDs	Non-steroidal Anti-Inflammatory Drugs
	O	Ophthalmology
	OA	Osteoarthritis
	OPC	Organophosphate
	OPV	Oral poliovirus vaccine
	Or	Orientation
	Orth	Orthopaedic
P	P	Physiology
	P.jiroveci	Pneumocystis jiroveci
	Pa	Pathology
	PAD	Pathology
	PAF	Platelet activating factor
	PBL	Problem Based Learning
	PCH	Psychiatry
	PCR	Polymerase Chain Reaction
	PDA	Patent Ductus Arteriosus
	PDGF	Platelet derived growth factor
	Pe	Pediatrics
	PEM	Protein Energy Malnutrition
	PERLs	Professionalism, Ethics, Research, Leadership
	PET	Positron Emission Tomography
	Ph	Pharmacology
	Ph	Pharmacology
	PI	Personal Identity
	PID	Pelvic inflammatory disease
	PIs	Protease inhibitors
	PMC	Pakistan Medical Commission
	PMDC	Pakistan Medical and Dental Council
	PMI	Post-Mortem Interval
	PNS	Peripheral Nervous System
	PPD	Paraphenylenediamine
	PPE	Personal Protective Equipment
	Psy	Psychiatry
	PT	Prothrombin Time
	PVC	Premature Ventricular Contraction
	PVD	Peripheral Vascular Diseases
Q	QALY	Quality-Adjusted Life Year
	QI	Quran and Islamiyat
R	R	Renal
	Ra	Radiology

	RA	Radiology
	RBCs	Red Blood cells
	RCM	Restrictive Cardiomyopathy
	RDA	Recommended Dietary Allowance
	Re	Respiratory
	RF	Rheumatoid factor
	RFLP	Restriction Fragment Length Polymorphism
	Rh	Rheumatology
	RHC	Rural Health Center
	RIA	Radioimmunoassay
	RMP	Resting Membrane Potential
	RNA	Ribonucleic Acid
	RTA	Road Traffic Accident
S	S	Surgery
	S.pneumonia	Streptococcus pneumoniae
	SA	Sinoatrial
	SCC	Squamous-cell carcinoma
	Se	Sexology
	Sec	Section
	SIDS	Sudden Infant Death Syndrome
	SLE	Systemic Lupus Erythematosus
	SOP	Standard Operating Procedure
T	TB	Tuberculosis
	TBI	Traumatic Brain Injury
	TCA	Tricarboxylic acid cycle
	TCBS	Thiosulphate Citrate Bile salts Sucrose
	TD50	Median Toxic Dose
	TGA	Transposition of the Great Arteries
	Th	Thanatology
	TLC	Thin Layer Chromatography
	TNF	Tumor Necrotic Factor
	TNM	Tumor Necrotic Factor
	TOF	Tetralogy of Fallot
	Tox	Toxicology
	Tr	Traumatology
	TSI	Triple Sugar Iron
U	USG	Ultrasonography
	UTI	Urinary Tract Infections
	UV	Ultraviolet
V	VAP	Ventilator-Associated Pneumonia
	Vd	Volume of Distribution
	VEGF	Vascular Endothelial Growth Factor
	VSD	ventricular septal defect
W	W. bancroft	Wuchereria bancroft
	WBCs	White Blood Cells
	WHO	World Health Organization
Z	ZN Staining	Ziehl-Neelsen Staining



Introduction to the Study Guide

Welcome to the Avicenna Medical & Dental College Study Guide!

This guide serves as your essential resource for navigating the complexities of your medical education at Avicenna Medical & Dental College. It integrates comprehensive details on institutional framework, curriculum, assessment methods, policies, and resources, all meticulously aligned with UHS, PMDC and HEC guidelines.

Each subject-specific study guide is crafted through a collaborative effort between the Department of Medical Education and the respective subject departments, ensuring a harmonized and in-depth learning experience tailored to your academic and professional growth.

Objectives of the Study Guide

1. Institutional Understanding:

- Gain insight into the college's organizational structure, vision, mission, and graduation competencies as defined by PMDC, setting the foundation for your educational journey.

2. Effective Utilization:

- Master the use of this guide to enhance your learning, understanding the collaborative role of the Department of Medical Education and your subject departments, in line with PMDC standards.

3. Subject Insight:

- Obtain a comprehensive overview of your courses, including detailed subject outlines, objectives, and departmental structures, to streamline your academic planning.

4. Curriculum Framework:

- Explore the curriculum framework, academic calendar, and schedules for clinical and community rotations, adhering to the structured guidelines of UHS & PMDC.

5. Assessment Preparation:

- Familiarize yourself with the various assessment tools and methods, including internal exam and external exam criteria, and review sample papers to effectively prepare for professional exams.

6. Policies and Compliance:

- Understand the institutional code of conduct, attendance and assessment policies, and other regulations to ensure adherence to college standards and accrediting body requirements.

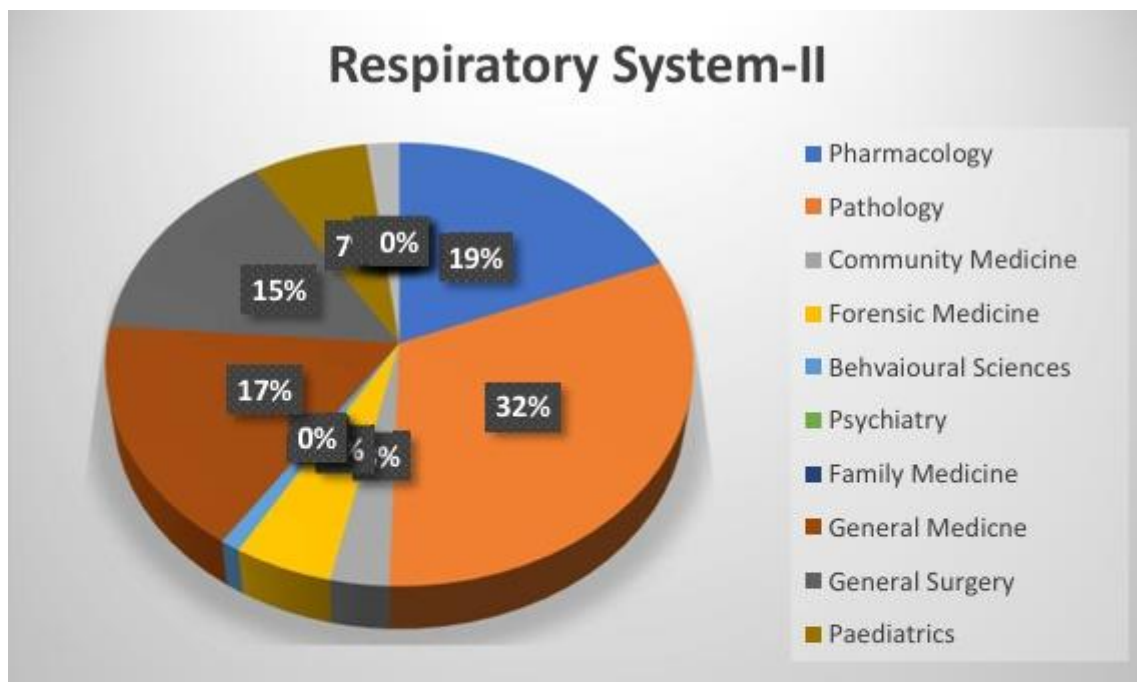
7. Learning Resources:

- Utilize the learning methodologies, infrastructure resources, and Learning Management System to maximize your educational experience and academic success.

This guide, meticulously developed in collaboration with your subject departments, is designed to support your academic journey and help you achieve excellence in accordance with the highest standards set by PMDC and HEC.

Introduction to Module

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



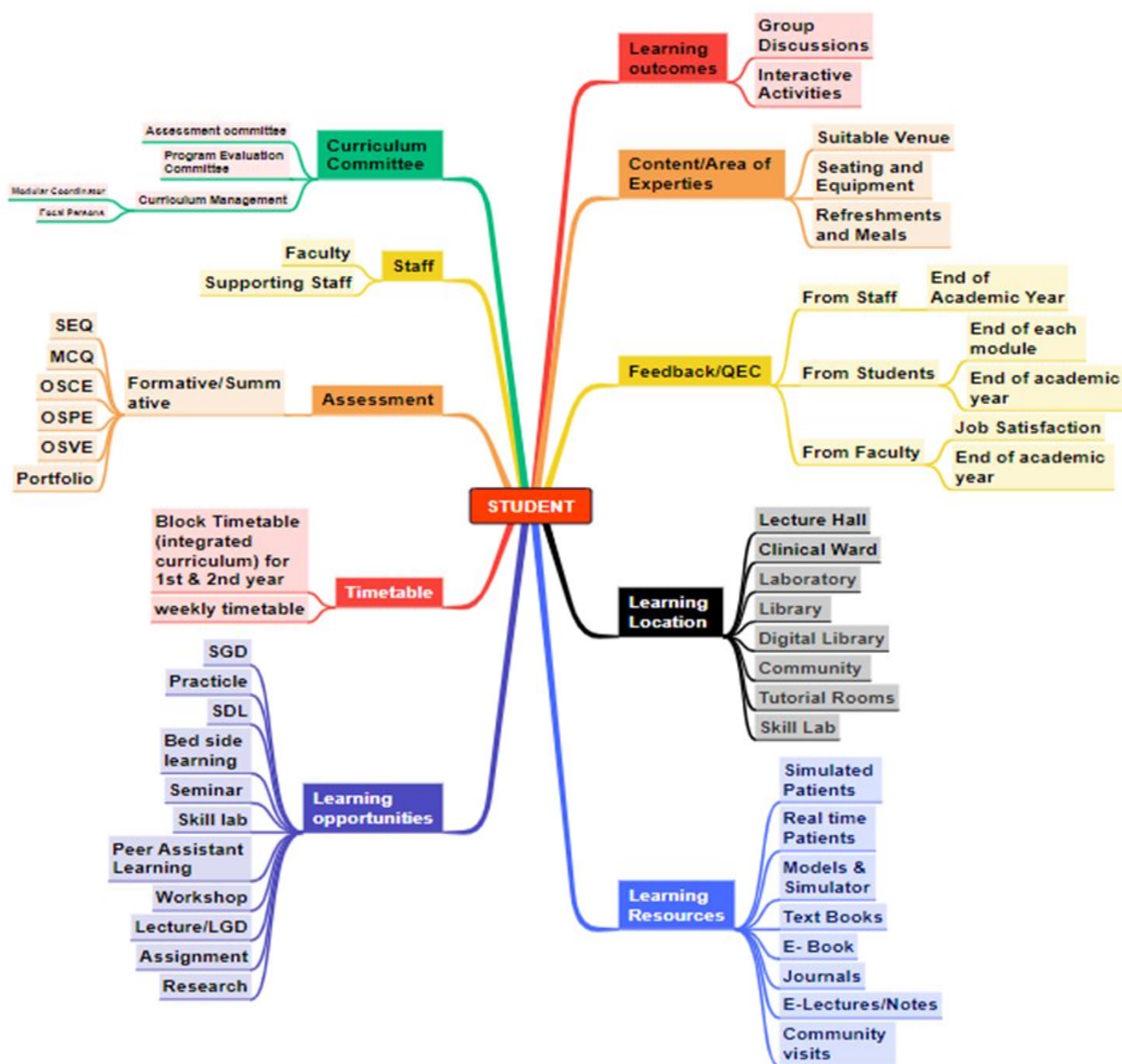
Module Weeks	Recommended Minimum Hours
03	101

Module Committee

Name	Designation	Department
Prof. Dr. Gulfreen Waheed	Principal & Director	Medical Education
Dr. Saba Iqbal	Associate Director	Medical Education
Dr. Ijlal Zehra	Head	Assessment Cell
Dr. Javaid Shabkhez Rab	Coordinator	Medical Education
Dr. Salar Arsalan	Demonstrator	Medical Education
Dr. Huma Fatima	Demonstrator	Medical Education
Ms. Tamzeela	Co-Coordinator	Medical Education
Mr. Adeel	Head	Student Affairs
Prof. Dr. Saeed Afzal	Head	Pathology
Dr. Majid	Focal Person	Pathology
Prof. Dr. Asma Saeed	Head	Pharmacology
Dr. Azka	Focal Person	Pharmacology
Prof. Dr. Rana Akhtar	Head	Community Medicine
Dr. Usman Sheikh	Focal Person	Community Medicine
Prof. Dr. Zainab	Head	Forensic Medicine
Dr. Anwar	Focal Person	Forensic Medicine
Prof. Dr. Hassan Khan	Head	Surgery Unit-1
Prof. Dr. Khalid Nizami	Head	Surgery Unit-2
Dr. Sumaira	Focal Person	General Surgery
Prof. Dr. Muzammil	Head	Medicine Unit-1
Prof. Dr. Waheed Ahmed	Head	Medicine Unit-2
Dr. Usman	Focal Person	General Medicine
Dr. Usman	Focal Person	Psychiatry
Dr. Usman	Focal Person	Family Medicine
Dr. Farhat	Head	Behavioural Sciences
Dr. Uzma	Focal Person	Paediatrics

Curriculum Map

This pictorial, vertical and horizontal presentation of the course content and extent shows the sequence in which various systems are to be covered. Curricular map to cover all the subjects and modules and the time allocated to study of the systems for the undergraduate programs offered at four colleges at campus are as follows:



Timetable

AVICENNA MEDICAL & DENTAL COLLEGE

TIME TABLE		M-22 3rd Year MBBS	SESSION 2024-2025						Week-30
DATE	DAY								BLOCK # IX
									MODULE - 21
DATE	DAY	8.00-9.00		9.00-10.00	10.00-11.00		12.00-12.30	12.30-1.30	1.30-3.30
6-Oct	MON	LECTURE PATHOLOGY LECTURE HALL3		CFRC CLINICAL ROTATION PRACTICAL		LECTURE COM. MEDICINE LECTURE HALL3	BREAK	LECTURE MEDICINE LECTURE HALL3	TUTORIAL IN 3 BATCHES
7-Oct	TUE	8.00-10.00			10.00-10.30	10.30-12.30		12.30-1.30	1.30-3.30
		GRAND TEST PHARMACOLOGY			BREAK	OSPE/VIVA		CFRC CLINICAL ROTATION PRACTICAL	
8-Oct	WED	8.00-9.00		9.00-10.00	10.00-11.00	11.00-12.00	12.00-12.30	12.30-1.30	1.30-3.30
		LECTURE BEH.SCIENCES LECTURE HALL3		LECTURE FOR.MEDICINE LECTURE HALL3	LECTURE COM. MEDICINE LECTURE HALL3	TUTORIAL IN 3 BATCHES	BREAK	CFRC CLINICAL ROTATION PRACTICAL	
9-Oct	THU	8.00-2.00							
		COMMUNITY FIELD VISIT							
10-Oct	FRI	8.00-9.00		9.00-10.00	10.00-11.00	11.00-12.00	12.00-1.00	1.00-2.00	2.00-3.30
		CoLECTURE COM. MEDICINE LECTURE HALL3		LECTURE PHARMACOLOGY LECTURE HALL3	LECTURE PATHOLOGY LECTURE HALL3	TUTORIAL IN 3 BATCHES	LECTURE PATIENT SAFETY LECTURE HALL3	JUMMA BREAK	SDL

Prepared by DME

AVICENNA MEDICAL & DENTAL COLLEGE

TIME TABLE		M-22	SESSION 2024-2025							Week-31
DATE	DAY	3rd Year MBBS								BLOCK # IX
										MODULE - 21
DATE	DAY	8.00-9.00	9.00-10.00	10.00-11.00	11.00-12.00	12.00-12.30	12.30-1.30	1.30-3.30		
13-Oct	MON	LECTURE PATHOLOGY LECTURE HALL3	CFRC CLINICAL ROTATION PRACTICAL			LECTURE COM. MEDICINE LECTURE HALL3	BREAK	LECTURE PHARMACOLOGY LECTURE HALL3	TUTORIAL IN 3 BATCHES	
14-Oct	TUE	8.00-10.00		10.00-10.30	10.30-12.30		12.30-1.30	1.30-3.30		
		GRAND TEST FORENSIC MEDICINE		BREAK	OSPE/VIVA		CFRC CLINICAL ROTATION PRACTICAL			
15-Oct	WED	8.00-9.00	9.00-10.00	10.00-11.00	11.00-12.00	12.00-12.30	12.30-1.30	1.30-3.30		
		LECTURE MEDICINE LECTURE HALL3	LECTURE COM. MEDICINE LECTURE HALL3	LECTURE FOR.MEDICINE LECTURE HALL3	TUTORIAL IN 3 BATCHES	BREAK	CFRC CLINICAL ROTATION PRACTICAL			
16-Oct	THU	8.00-2.00								
		COMMUNITY FIELD VISIT								
17-Oct	FRI	8.00-9.00	9.00-10.00	10.00-11.00	11.00-12.00	12.00-1.00	1.00-2.00	2.00-3.30		
		LECTURE SURGERY LECTURE HALL3	LECTURE PHARMACOLOGY LECTURE HALL3	LECTURE PATHOLOGY LECTURE HALL3	TUTORIAL IN 3 BATCHES	LECTURE PERLs LECTURE HALL3	JUMMA BREAK	SDL		

Prepared by DME

AVICENNA MEDICAL & DENTAL COLLEGE

TIME TABLE		M-22 3rd Year MBBS	SESSION 2024-2025						Week-32						
DATE	DAY								BLOCK # IX						
									MODULE - 22						
DATE	DAY	8.00-9.00		9.00-10.00		10.00-11.00		11.00-12.00		12.00-12.30	12.30-1.30		1.30-3.30		
20-Oct	MON	LECTURE PATHOLOGY LECTURE HALL3		CFRC CLINICAL ROTATION PRACTICAL				LECTURE COM. MEDICINE LECTURE HALL3		BREAK	LECTURE PHARMACOLOGY LECTURE HALL3		TUTORIAL IN 3 BATCHES		
21-Oct	TUE	8.00-10.00				10.00-10.30		10.30-12.30				12.30-1.30		1.30-3.30	
		GRAND TEST PATHOLOGY				BREAK		OSPE/VIVA				CFRC CLINICAL ROTATION PRACTICAL			
		8.00-9.00		9.00-10.00		10.00-11.00		11.00-12.00		12.00-12.30		12.30-1.30		1.30-3.30	
22-Oct	WED	LECTURE FOR.MEDICINE LECTURE HALL3		LECTURE PATHOLOGY LECTURE HALL3		LECTURE COM. MEDICINE LECTURE HALL3		TUTORIAL IN 3 BATCHES		BREAK	CFRC CLINICAL ROTATION PRACTICAL				
23-Oct	THU	8.00-2.00													
		COMMUNITY FIELD VISIT													
24-Oct	FRI	8.00-9.00		9.00-10.00		10.00-11.00		11.00-12.00		12.00-1.00		1.00-2.00		2.00-3.30	
		LECTURE COM. MEDICINE LECTURE HALL3		LECTURE PHARMACOLOGY LECTURE HALL3		LECTURE FOR.MEDICINE LECTURE HALL3		TUTORIAL IN 3 BATCHES		LECTURE PERLS LECTURE HALL3		JUMMA BREAK		SDL	

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Allocation of Hours

week#	Pharmacology	Pathology	For.Medicine	Com.Medicine	Beh. Science	Surgery	Medicine	Paeds	Gynae	Bio	Phy	PERLs	Patient Safety	Clinical Rotation/ Practical	Tutorial	Assessment	SDL
Week-1	5	6	3	1	1	1	1					1	1	7	6		4
Week-2	5	6	2	1		1	1			1	1	1	1	7	6		4
Week-3																	
Week-4	5	5	2	1	1	1				1	1	2	1	7	6		4
Week-5	4	5	2	1			1			1		1	1	7	6	4	4
Week-6	5	5	2	1			1					2	1	7	5	4	4
Week-7	4	3	2	1						1		1		7	3.5	4	3
Week-8	5	5	2	1		1				1		1		7	6	4	4
Week-9	5	5	2	1		1								7	6	4	4
Week-10	5	5	2			1						1		7	6	4	4
Week-11	4	4	2									1	1	5	5.5	7	4
Week-12	3	6	2		1	1	1					1		7	4		4
Week-13	3	6	2			1	1	1		1			1	5	4.5		3
Week-14	3	6	2			1	1		1			1	1	7	6	4	4
Week-15	3	6	2	1		1	1					1	1	7	6	4	4
Week-16	3	6	2	1			1					1	1	7	6	4	4
Week-17	2	6	2	1		1	1	1				1	1	7	6	4	4
Week-18	2	6	2			1	1		1			1	1	7	6	4	4
Week-19																	
Week-20																	
Week-21																	
Week-22																	
Week-23	2	7	2			3	2					1	1	7	7		4
Week-24	2	6	2			2	2					1	1	7	6	4	4
Week-25	2	5	2			1	1							7	4	4	4
Week-26	2	6	2			2	2					1	1	7	6	4	4
Week-27	1	2	1	2	1	2	2					1	1		5.5	7	3
Week-28	1	2	1	2		1	1					2	1	7	7		4
Week-29	2	2	1	2			2						1	7	5.5	4	4
Week-30	1	2	1	3	1		1						1	7	5.5	4	4
Week-31	2	2	1	2		1	1					1		7	5.5	4	4
Week-32	2	2	2	3								1		7	5.5	4	4
Week-33	1	2	2	3		1						1		7	5.5	4	4
Week-34	2	2	2	2		1	2					2	1	7	7	4	4
Week-35	2	2	2	3		1	2					1	1	7	7	4	4
Week-36	2	2	2	2		2	3					1	1	7	7	4	4
Week-37	2	2	2	3		1	2					1	1	7	7	4	4
Week-38	2	2	2	2		1	2					2	1	7	7	4	4
Week-39	2	2	2			1	3					3		7	7	4	4
Week-40														2.5	1	7	2
Total Hours	96	141	64	40	5	32	39	2	2	6	2	36	24	229.5	200.5	121	135

Modular Outcomes

Module Name	Modular Outcomes
Block 9 Module 21 Respiratory II	<ul style="list-style-type: none">• Integrate foundational concepts to address clinical respiratory issues.• Interpret common respiratory symptoms with accuracy in assessments.• Outline management plans for prevalent respiratory diseases during case discussions.• Utilize a problem-solving approach to accurately diagnose respiratory emergencies in simulated scenarios.• Demonstrate understanding of respiratory tract malignancies and referral criteria by the end of the module.• Identify the morphological features of common respiratory tract diseases in practical examinations.• Demonstrate effective communication strategies in patient interactions, evaluated through peer and instructor feedback.

Learning Objectives

Week No.	Total Hours	Mode of Teaching	Code	Learning Objective	Topic	Reference	Facilator
Week:30	PHARMACOLOGY						
Week:30	1	Lecture	CV2-Ph-003	.Explain general strategies used in pharmacological treatment of cardiac arrhythmias	cardiac arrhythmias	Katzung edition 16	Dr. Asma Saeed
Week:30	2	Tutorial	CV2-Ph-003	Explain general strategies used in pharmacological treatment of cardiac arrhythmias	cardiac arrhythmias	Katzung edition 16	demonstrator
Week:30	PATHOLOGY						

Week:30	3	Lecture	CV2-Pa-1	<p>Define aneurysm and differentiate between true and false aneurysms.</p> <p>Classify aneurysms based on their morphology (saccular, fusiform) and etiology (atherosclerotic, mycotic, and congenital).</p> <p>Understand the underlying mechanisms leading to aneurysm formation, including vessel wall weakening, genetic factors (e.g., Marfan syndrome, Ehlers-Danlos syndrome), and role of atherosclerosis.</p> <p>Identify the common sites where aneurysms form (e.g., aortic aneurysms, cerebral aneurysms, popliteal</p>	Aneurysm	Robbins 10th edition chapter 11	DR MUNAZZA
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				aneurysms) and explain why certain areas are more prone to aneurysm development.			
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Week:30	4	Lecture	CV2-Pa-2	<p>Define vascular tumors, Classify vascular tumors, Understand the underlying mechanisms involved in the development of vascular tumors, including genetic mutations, environmental factors (e.g., radiation, exposure to chemicals), and infections (e.g., HHV-8 in Kaposi sarcoma). Discuss the role of angiogenesis and endothelial cell Proliferation in tumor formation. Identify the characteristic clinical presentations of common vascular tumors (e.g., skin lesions in hemangiomas, liver involvement in cavernous hemangiomas, purple plaques in Kaposi sarcoma).</p>	Vascular Tumor	Robbins 10th edition chapter 11	DR MUNAZZA
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				<p>Correlate the size, location, and aggressiveness of the tumor with its clinical manifestations.</p> <p>Discuss the diagnostic techniques used to detect and evaluate vascular tumors, including biopsy, histopathology (e.g.,</p>			
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Week:30	5	Tutorial	CV2-Pa-2	Define and classify vascular tumors.	Vascular Tumor	Robbins 10th edition chapter 11	Demonstrators
Week:30	FOR.MEDICINE						
Week:30	6	Lecture	For3-Tox-007 For3-Tox-008	Enlist medico-legal implications of poisoning cases Comprehend different laws relating to poisons & drugs Enlist important relevant points of Rule 8, Rule 13 & Rule 14 of the Dangerous Drug Act Enlist WHO recommendations being incorporated in the Drug act 1976 Enlist the WHO criteria for Drug Dependence	Laws related to Drugs & poisons Analytical techniques	NRA 1st Ed. Ch. 2,3,4 Parikh 7th Ed. Ch. 36,37,38	Dr. Ambreen

Week:30	7	Tutorial	For3-Tox-025	<p>Label salient differentiating features of poisonous and non-snakes. Identify snake bite wound. Apply the tourniquet above the site of bite of a patient.</p>	<p>Irritant Animal Poisons (Snakes-Elapids Vipers Hydrophidate or seasnakes)</p>	Parikh 7th Ed. Ch. 40-45	Demonstrators
Week:30	COM.MEDICINE						
Week:30	8	Lecture	CMFH1-CM-002	<p>To describe the different epidemiological methods including descriptive, analytic and experimental Approaches (Lecture 2)</p>	Epidemiology	K. Park Ch # 3	Prof Rana Akhtar

Week:30	9	Lecture	CMFH1-CM-002	To describe the different epidemiological methods including descriptive, analytic and experimental Approaches (Lecture #3)	Epidemiology	K. Park Ch # 3	Prof Rana Akhtar
Week:30	10	Lecture	CMFH1-CM-002	To describe the different epidemiological methods including descriptive, analytic and experimental Approaches (Lecture #4)	Epidemiology	K. Park Ch # 3	Prof Rana Akhtar
Week:30	MEDICINE						
Week:30	11	Lecture	CV2-M008	Define Valvular Heart Disease	Valvular heart diseases	Dr. Naresh	
Week:30	12	Lecture	CV2-M009	Define congenital heart disease as structural or functional defects of the heart and great	Congenital heart diseases	Dr. Naresh	

				vessels present at birth.		
Week:30	Patient Safety					
Week:30	13	Lecture	Learn to use tools (e.g., Excel) & SPSS for making managing patient data.	Expository writing	Dr. Usman	
Week:30	SDL					
Week:30	14	Self Directed Learning				
Week:30	15	Self Directed Learning				
Week:30	16	Self Directed Learning				
Week:30	17	Self Directed Learning				
Week:30	CLINICAL ROTATION / PRACTICAL					

Week:30	18	PRACTICAL	For3-Tox-026	<p>Identify poison. Describe identifying features. Identify features of chronic arsenic poisoning Identify chronic lead poisoning on x rays Identify chronic lead poisoning (basophilic stippling) on blood cell slide Collect samples to be sent to the chemical examiner</p>	<p>Irritant Metallic poisons – (Inorganic metallic origin- Arsenic, Mercury, Lead, Copper Nonmetallic irritant poisons- Phosphorus</p>	<p>Parikh 7th Ed. Ch. 41-45 Practical copy</p>	Demonstrators
Week:30	19	PRACTICAL	CMFH1-CM-007	<p>To assess the application of standards and Quality assurance indicators for prescription and dispensing and administration of the drugs To assess the application of standards and Quality assurance indicators for patients' rights and education</p>	<p>MSDS (Working Pharmacies & Medical and Surgical OPDS)</p>	<p>Parikh 7th Ed. Ch. 41-45 Practical copy</p>	Demonstrators

Week:30	20	CLINICAL ROTATION	ID-M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Registator
Week:30	21	CLINICAL ROTATION	ID-M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Registator

Week:30	22	CLINICAL ROTATION	ID-M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Registator
Week:30	23	CLINICAL ROTATION	ID-M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Registator

Week:30	24	CLINICAL ROTATION	ID-M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Registator
Week:30	ASSESSMENT						
Week:30	25	GRAND TEST					
Week:30	26	GRAND TEST					
Week:30	27	OSPE/VIVA					
Week:30	28	OSPE/VIVA					
Week:30	WHOLE CLASS TUTORIAL (FORENSIC MEDICINE)						

Week:30	29	Tutorial	For3-Tox-025	Label salient differentiating features of poisonous and non-snakes. Identify snake bite wound. Apply the tourniquet above the site of bite of a patient.	Irritant Animal Poisons (Snakes-Elapids Vipers Hydrophidate or seasnakes)	Parikh 7th Ed. Ch. 40-45	Demonstrators
Week:30	30	Tutorial	For3-Tox-025	Label salient differentiating features of poisonous and non-snakes. Identify snake bite wound. Apply the tourniquet above the site of bite of a patient.	Irritant Animal Poisons(Snakes-Elapids Vipers Hydrophidate or seasnakes)	Parikh 7th Ed. Ch. 40-45	Demonstrators
Week:30	31	COMMUNITY FIELD VISIT					
Week:30	32	COMMUNITY FIELD VISIT					
Week:30	33	COMMUNITY FIELD VISIT					
Week:30	34	COMMUNITY FIELD VISIT					

Week:30	35	COMMUNITY FIELD VISIT
Week:30	36	COMMUNITY FIELD VISIT
Week:30	37	COMMUNITY FIELD VISIT

We ek No.	T ot al H ou rs	Mode of Teachi ng	Cod e	Learning Objective	Topic	Reference	Facilator
We ek: 31	PHARMACOLOGY						

We ek: 31	1	Lectur e	CV 2- Ph- 004	."Classify drugs used in cardiac failure and describe their mechanism of action, pharmacological effects, uses, adverse effects, interactions and contraindications. Describe the cardiovascular effects of Dopamine, Dobutamine, Phosphodiesterase Enzyme Inhibitors, ACE Inhibitors and ARBs, Beta Blockers, directly acting vasodilators in Cardiac Failure."	cardiac failure	Katzung edition 16	Dr.Azka Khan
We ek: 31	2	Lectur e	CV 2- Ph- 004	Role of Diuretics, Renin–Angiotensin–Aldosterone System Inhibitors, Beta-blockers, Digitalis glycosides, Nitrates and Hydralazine, Ivabradine and their combination; Anticoagulation, Antiarrhythmic therapy, and Statin, etc	cardiac failure	Katzung edition 16	Dr.Azka Khan

Week: 31	3	Tutorial	CV 2- Ph- 004	<p>"Classify drugs used in cardiac failure and describe their mechanism of action, pharmacological effects, uses, adverse effects, interactions and contraindications.</p> <p>Describe the cardiovascular effects of Dopamine, Dobutamine, Phosphodiesterase Enzyme Inhibitors, ACE Inhibitors and ARBs, Beta Blockers, directly acting vasodilators in Cardiac Failure."</p>	cardiac failure	Katzung edition 16	demonstrator
Week: 31	PATHOLOGY						

Week: 31	4	Lecture	CV 2- Pa- 003	<p>Define cardiac tumors and differentiate between primary and secondary (metastatic) cardiac tumors. Classify primary cardiac tumors into benign (e.g., myxoma, rhabdomyoma, fibroma) and malignant (e.g., angiosarcoma, rhabdomyosarcoma). Discuss the possible genetic and molecular mechanisms involved in the development of cardiac tumors, including familial syndromes associated with cardiac tumors (e.g., Carney complex, tuberous sclerosis). Describe how cardiac tumors can disrupt normal cardiac function through obstruction, embolization, or invasion of adjacent structures.</p>	Cardiac Tumors	Robbins 10th edition chapter 12	DR MUNAZZA
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We ek: 31	5	Lecture	CV 2-S- 001	Discuss the Pathophysiology of Peripheral Vascular Diseases Identify key risk factors for peripheral vascular diseases Differentiate between the types of PVD, such as peripheral artery disease (PAD) and venous insufficiency. Discuss the role of embolism and thrombosis in the etiology of acute limb ischemia	Peripheral Vascular Diseases (PVD)	Robbins 10th edition chapter 11	DR MUNAZZA
We ek: 31	6	Tutorial	CV 2-S- 001	Discuss the Pathophysiology of Peripheral Vascular Diseases Identify key risk factors for peripheral vascular diseases Differentiate between the types of PVD, such as peripheral artery disease (PAD) and venous insufficiency. Discuss the role of embolism and thrombosis in the etiology of acute limb ischemia	Peripheral Vascular Diseases (PVD)	Robbins 10th edition chapter 11	Demonstrator

We ek: 31	FOR.MEDICINE						
We ek: 31	7	Lectur e	For 3- Tox - 009 For 3- Tox - 010	<p>Classify corrosive poisons.</p> <p>Describe sources, physical and chemical properties. Explain mechanism of action.</p> <p>Write the fatal dose and fatal period.</p> <p>Describe the clinical features of the poison.</p> <p>Manage the patient clinically.</p> <p>Explain the autopsy findings</p> <p>Describe medico-legal aspects.</p> <p>Define Vitriol age.</p> <p>Apply the relevant section of qisas and diyat act to the hurt caused by the poison.</p> <p>Classify corrosive poisons.</p> <p>Describe sources, physical and chemical properties.</p>	<p>Corrosives</p> <p>Mineral acids-</p> <p>Sulfuric acid</p> <p>Nitric acid</p> <p>Hydrochloric acid</p> <p>Strong alkalis</p> <p>Organic acid –</p> <p>Oxalic acid,</p> <p>Carbolic acid,</p> <p>Hydrocyanic acid</p>	Parikh 7th Ed. Ch. 39, 40	Dr. Zainab

We ek: 31	8	Tutori al	For 3- Tox - 027	Diagnose a case of insecticide poisoning Explain laboratory investigations Manage a case of insecticide poisoning	Agricultural poisons – Organophosphates, Carbamates, Chlorinated Hydrocarbon, Endrin Paraquet Aluminum Phosphide	Parikh 7th Ed. Ch. 53	Demonstrators
We ek: 31	COM.MEDICINE						
We ek: 31	9	Lectur e	CM FH 1- CM - 002	To differentiate between association & causation. Investigation of an outbreak or an epidemic	Epidemiology	K. Park Ch # 3	Prof Rana Akhtar
We ek: 31	10	Lectur e	CM FH 1- CM - 002	To conduct a community diagnosis and interpret its findings. To describe research and survey methodologies	Epidemiology	K. Park Ch # 3	Prof Rana Akhtar

We ek: 31	MEDICINE						
We ek: 31	11	Lectur e	Re2 - M0 01	Correlate Clinical features of bronchial asthma to its pathogenesis Describe investigations of a patient with asthma Enlist features of acute severe asthma Enlist features of life-threatening asthma Medicine Discuss the step-wise therapy of stable asthma Discuss the management of acute severe asthma	Bronchial asthma	Dr. Shamshad	
We ek: 31	PERLs						
We ek: 31	12	Lectur e	Cultural/religious views on Do Not Resuscitate				Dr. Saba Iqbal
We ek: 31	SURGERY						
We ek: 31	13	Lectur e	Re2 - S00 1	Surgical approach to lung cancer resection, Complications of lung resection Management of Lung metastases	lung cancer resection Lung Metastasis	B & L	Dr. Shoaib

We ek: 31	SDL	
We ek: 31	14	Self Directed Learning
We ek: 31	15	Self Directed Learning
We ek: 31	16	Self Directed Learning
We ek: 31	17	Self Directed Learning
We ek: 31	CLINICAL ROTATION / PRACTICAL	

We ek: 31	18	PRAC TICA L	For 3- Tox - 027	Recognize autopsy features Collect, preserve and dispatch the specimens to chemical examiner Perform bedside test for certain pesticides (aluminium phosphide	Agricultural poisons – Organophosphates, Carbamates, Chlorinated Hydrocarbon, Endrin Paraquet, Aluminum Phosphide	Parikh 7th Ed. Ch. 53 Practical copy	Demonstrators
We ek: 31	19	PRAC TICA L	For 3- Tox - 027	Recognize autopsy features Collect, preserve and dispatch the specimens to chemical examiner Perform bedside test for certain pesticides (aluminium phosphide	Agricultural poisons – Organophosphates, Carbamates, Chlorinated Hydrocarbon, Endrin Paraquet, Aluminum Phosphide	Parikh 7th Ed. Ch. 53 Practical copy	Demonstrators

Week: 31	20	CLINICAL ROTATION	ID-M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Medical Faculty
Week: 31	21	CLINICAL ROTATION	ID-M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Medical Faculty

We ek: 31	22	CLINI CAL ROTA TION	ID- M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Medical Faculty
We ek: 31	23	CLINI CAL ROTA TION	ID- M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Medical Faculty

We ek: 31	24	CLINI CAL ROTA TION	ID- M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Medical Faculty
We ek: 31	25	CLINI CAL ROTA TION	ID- M 007	Record and present the complete history, physical examination findings, laboratory data, differential diagnosis, and therapeutic plan in a systematic, concise, and coherent manner, both in writing and orally	Managment	Log book	Medical Faculty

We ek: 31	ASSESSMENT						
We ek: 31	26	GRAND TEST					
We ek: 31	27	GRAND TEST					
We ek: 31	28	OSPE/VIVA					
We ek: 31	29	OSPE/VIVA					
We ek: 31	WHOLE CLASS TUTORIAL (Pathology)						
We ek: 31	30	Tutori al	CV 2- Pa- 2	Define and classify vascular tumors.	Vascular Tumor	Robbins 10th edition chapter 11	Demonstrators
We ek: 31	31	Tutori al	CV 2- Pa- 2	Define and classify vascular tumors.	Vascular Tumor	Robbins 10th edition chapter 11	Demonstrators
We ek: 31	32	COMMUNITY FIELD VISIT					

We ek: 31	33	COMMUNITY FIELD VISIT
We ek: 31	34	COMMUNITY FIELD VISIT
We ek: 31	35	COMMUNITY FIELD VISIT
We ek: 31	36	COMMUNITY FIELD VISIT
We ek: 31	37	COMMUNITY FIELD VISIT

Wee k No.	To tal Ho urs	Mode of Teachin g	Cod e	Learning Objective	Topic	Reference	Facilator
Wee k:32	PHARMACOLOGY						

Wee k:32	1	Lecture	CV2 -Ph- 005	Classify Anti-Hyperlipidemic Drugs Describe their Mechanism of Action, Uses, Adverse Effects and Drug Interactions Enlist combination therapies for treatment of hyperlipidemias	AntiHyperlipidemi c / AntiDyslipidemias	Katzung edition 16	Dr. Azka Khan
Wee k:32	2	Lecture	Re2- Ph- 001	Discuss the role of different drugs in the prevention & treatment of asthma Describe the mechanism of action & adverse effects of Beta 2 agonists used in asthma Describe the mechanism of action, actions & adverse effects of Methylxanthines Describe mechanism of action and adverse effects of Mast Cell Stabilizers	antiasthmatics	Katzung edition 16	Dr. Asma Saeed

Week:32	3	Tutorial 1	CV2-Ph-005	<p>Classify Anti-Hyperlipidemic Drugs</p> <p>Describe their Mechanism of Action, Uses, Adverse Effects and Drug Interactions</p> <p>Enlist combination therapies for treatment of hyperlipidemias</p>	AntiHyperlipidemic / AntiDyslipidemias	Katzung edition 16	demonstrator
Week:32	PATHOLOGY						
Week:32	4	Lecture	Re2-Pa-002, Re2-Pa-004	<p>Define asthma Classify asthma Discuss pathogenesis of atopic and non -atopic asthma Define emphysema</p> <p>Classify types of emphysema Describe protease-antiprotease imbalance hypothesis for development of emphysema</p>	Bronchial asthma, Emphysema	Robbins 10th edition chapter 15	DR NABILA

Week:32	5	Lecture	Re2-Pa-003	Define chronic bronchitis, Describe the pathogenesis of chronic bronchitis, Discuss the pathogenesis of bronchiectasis, Describe gross and microscopic morphological features of bronchitis. Describe gross and microscopic features of bronchiectasis.	Chronic Bronchitis	Robbins 10th edition chapter 15	DR NABILA
Week:32	6	Tutorial	Re2-Pa-003	Define chronic bronchitis, Describe the pathogenesis of chronic bronchitis, Discuss the pathogenesis of bronchiectasis.	Chronic Bronchitis	Robbins 10th edition chapter 15	Demonstrator
Week:32	FOR.MEDICINE						

Week:32	7	Lecture	For3 - Tox- 017	<p>Define Alcohols</p> <p>Describe different alcohol beverages with different alcohol concentrations.</p> <p>Explain toxicokinetic of alcohols</p> <p>Reproduce clinical features of acute ethyl alcohol poison. Correlate different clinical features with different BAC. Outline clinical management of poisoning</p> <p>Describe the laboratory investigation and samples to be sent to the chemical examiner.</p> <p>Describe protocol of examination of a drunken person. Describe autopsy findings.</p> <p>Reproduce medicolegal aspects.</p>	Inebriants –Ethyl Alcohol / Methanol,	Parikh 7th Ed. Ch. 50	Dr. Zainab
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Week:32	8	Lecture	For3 - Tox-015	Classify barbiturates. Know fatal dose and fatal period. Describe clinical features. Explain clinical management. Describe autopsy findings. Reproduce medico legal importance	Sedatives and Hypnotics – Barbiturates	Parikh 7th Ed. Ch. 51	Dr. Zainab
Week:32	9	Tutorial	For3 - Tox-028	Identify the poison Describe identifying features Diagnose a case of deliriant poisoning Explain lab investigation Manage the case Recognize autopsy features Collect, preserve and dispatch the specimens to chemical examiner	Deliriant Poisons – Dhatura, Cannabis Sativa	Parikh 7th Ed. Ch. 54	Demonstrators
Week:32	COM.MEDICINE						

Wee k:32	10	Lecture	CM FH1 - CM- 002	To understand the principles and methods of disease Screening.	Screening	K. Park Ch # 4	Prof Rana Akhtar
Wee k:32	11	Lecture	CM FH1 - CM- 002	Criteria of Disease/Criteria of Test, Validity: Sensitivity/Specificity	SCREENING 2	K. park Ch # 4	Prof Rana Akhtar
Wee k:32	12	Lecture	CM FH1 - CM- 003	PPV/FP/NPV/FN/Yield/Border Line/Examples	SCREENING 3	K. park Ch # 4	Prof Rana Akhtar
Wee k:32	PERLs						
Wee k:32	13	Lecture	End-of-life decisions, ventilator use				Dr. Javaid
Wee k:32	SDL						

Wee k:32	14	Self Directed Learning					
Wee k:32	15	Self Directed Learning					
Wee k:32	16	Self Directed Learning					
Wee k:32	17	Self Directed Learning					
Wee k:32	CLINICAL ROTATION / PRACTICAL						
Wee k:32	18	PRACT ICAL	For3 - Tox- 028	Identify the poison Describe identifying features Diagnose a case of deliriant poisoning	Deliriant Poisons – Dhatura, Canabis Sativa	Parikh 7th Ed. Ch. 54 Practical copy	Demonstrators
Wee k:32	19	PRACT ICAL	For3 - Tox- 028	Identify the poison Describe identifying features Diagnose a case of deliriant poisoning	Deliriant Poisons – Dhatura, Canabis Sativa	Parikh 7th Ed. Ch. 54 Practical copy	Demonstrators

Wee k:32	20	CLINI CAL ROTA TION	MS2 -M 002	Elicit symptom of “swelling” in history in terms of location, duration, pattern and any family or drug history.	General Medicine	Log Book	Medical Faculty
Wee k:32	21	CLINI CAL ROTA TION	MS2 -M 002	Elicit symptom of “swelling” in history in terms of location, duration, pattern and any family or drug history.	General Medicine	Log Book	Medical Faculty
Wee k:32	22	CLINI CAL ROTA TION	MS2 -M 002	Elicit symptom of “swelling” in history in terms of location, duration, pattern and any family or drug history.	General Medicine	Log Book	Medical Faculty
Wee k:32	23	CLINI CAL ROTA TION	MS2 -M 002	Elicit symptom of “swelling” in history in terms of location, duration, pattern and any family or drug history.	General Medicine	Log Book	Medical Faculty

Wee k:32	24	CLINI CAL ROTA TION	MS2 -M 002	Elicit symptom of “swelling” in history in terms of location, duration, pattern and any family or drug history.	General Medicine	Log Book	Medical Faculty
Wee k:32	25	CLINI CAL ROTA TION	MS2 -M 002	Elicit symptom of “swelling” in history in terms of location, duration, pattern and any family or drug history.	General Medicine	Log Book	Medical Faculty
Wee k:32	ASSESSMENT						
Wee k:32	26	GRAND TEST					
Wee k:32	27	GRAND TEST					
Wee k:32	28	OSPE/VIVA					
Wee k:32	29	OSPE/VIVA					
Wee k:32	WHOLE CLASS TUTORIAL (COMMUNITY MEDICINE)						
Wee k:32	30	Tutoria l	CM FH1 -	PPV/FP/NPV/FN/Yield/Border Line/Examples	SCREENING 3	K. park Ch # 4	Demo

			CM-003				
Week:32	31	Tutorial 1	CM FH1 - CM-003	PPV/FP/NPV/FN/Yield/Border Line/Examples	SCREENING 3	K. park Ch # 4	Demo
Week:32	32	COMMUNITY FIELD VISIT					
Week:32	33	COMMUNITY FIELD VISIT					
Week:32	34	COMMUNITY FIELD VISIT					
Week:32	35	COMMUNITY FIELD VISIT					
Week:32	36	COMMUNITY FIELD VISIT					
Week:32	37	COMMUNITY FIELD VISIT					

Operational Definitions

Traditional & Innovative Teaching Methodologies

Sr.	Pedagogical Methodologies	Description
1.	Lectures	Traditional method where an instructor presents information to a large group of students (large group teaching). This approach focuses on delivering theoretical knowledge and foundational concepts. It is very effective for introducing new topics.
2.	Tutorial	Tutorials involve small group discussion (SGD) where students receive focused instruction and guidance on specific topics.
3	Demonstrations	Demonstrations are practical displays of techniques or procedures, often used to illustrate complex concepts or practices, particularly useful in dental education for showing clinical skills.
4	Practicals	Hands-on sessions where students apply theoretical knowledge to real-world tasks. This might include lab work, clinical procedures, or simulations. Practicals are crucial for developing technical skills and understanding the application of concepts in practice.
5.	Student Presentations	Students prepare and deliver presentations on assigned topics. This method enhances communication skills, encourages students to explore topic in-depth. It also provides opportunities for peer feedback and discussion.
6.	Assignment	Tasks given to students to complete outside of class. Assignments can include research papers, case studies, or practical reports. They are designed to reinforce learning, assess understanding, and develop critical thinking and problem-solving skills.
7.	Self-directed Learning	Students take initiative and responsibility for their own learning process. Students are encouraged to seek resources, set goals, and evaluate their progress. This is a learner-centered approach where students take the initiative to plan, execute, and assess their own learning activities. This method promotes independence, critical thinking, and lifelong learning skills.

8.	Flipped Classroom	In this model, students first engage with learning materials at home (e.g., through videos, readings) and then use class time for interactive activities, discussions, or problem-solving exercises. This approach aims to maximize in-class engagement and application of knowledge.
9.	Peer-Assisted Learning (PAL)	A collaborative learning approach where students help each other understand course material. PAL involves structured peer tutoring, study groups, or collaborative tasks. It enhances comprehension through teaching, reinforces learning, and builds teamwork skills.
10.	Team-based Learning (TBL)	A structured form of small group learning where students work in teams on application-based tasks and problems. Teams are responsible for achieving learning objectives through collaborative efforts, promoting accountability, and deeper understanding of the material.
11.	Problem-based Learning (PBL)	Students work on complex, real-world problems without predefined solutions. They research, discuss, and apply knowledge to develop solutions. PBL fosters critical thinking, problem-solving skills, and the ability to integrate knowledge from various disciplines.
12.	Academic Portfolios	<p>A collection of student's work that showcases learning achievements, reflections, and progress over time.</p> <p>Portfolios include assignments, projects, and self-assessments. They provide a comprehensive view of student development, highlight strengths and areas for improvement, and support reflective learning (experiential learning)</p>
13.	Seminar	A seminar is an academic or professional setting where individuals discuss, present, and explore specific topics, often with expert guidance

AVICENNA MEDICAL & DENTAL COLLEGE
DEPARTMENT OF MEDICAL EDUCATION

Internal Assessment Policy

Introduction

This policy outlines the guidelines for internal assessment of students at Avicenna Medical and Dental College. Internal assessment plays a crucial role in evaluating a student's progress, understanding their strengths and weaknesses, and providing timely feedback. This policy aims to ensure fairness, consistency, and transparency in the internal assessment process.

Internal Assessment Components

The internal assessment for each course will be comprised of the following components:

1. Attendance

- Attendance will be recorded regularly and will contribute to the overall internal assessment score.
- Students are expected to maintain a minimum attendance of 75% to be eligible for internal assessment marks.

2. Continuous Assessment

- Continuous assessment will be based on regular assignments, quizzes, presentations, and other activities conducted throughout the semester.
- These assessments will evaluate students' understanding of the course material, their critical thinking skills, and their ability to apply knowledge to real-world scenarios.

3. Grand Test and Module Exams

- Grand tests and module exams will be conducted to assess students' comprehensive understanding of the course content.
- These exams will be designed to evaluate both theoretical knowledge and practical skills.

4. Attitude and Behavior

- Students' attitude towards learning, participation in class activities, and adherence to college rules and regulations will be assessed.
- This component will evaluate students' professionalism, teamwork skills, and ethical conduct.

5. Logbook and Portfolio

- Students will be required to maintain a logbook and portfolio to document their learning journey.
- The logbook will include reflections on lectures, tutorials, and practical sessions.
- The portfolio will showcase students' best work, including assignments, projects, and research papers.

Assessment Criteria and Weighting

The following table outlines the weighting of each component in the internal assessment:

Component	Marks	Percentage
Attendance	6	2%
Continuous Assessment	12	4%
Grand Test and Module Exams	30	10%
Attitude and Behavior	10	3%
Logbook and Portfolio	2	1%
Total	60	20%

Assessment Procedures

- **Faculty Responsibility:** Faculty members will be responsible for designing and administering the internal assessments in accordance with the course syllabus and this policy.
- **Marking and Grading:** Faculty members will mark and grade the assessments using a transparent and consistent marking scheme. Candidates shall be required to score at least 50% marks in the internal assessment in each subject to become eligible for admission to professional examinations.
- **Feedback:** Faculty members will provide timely and constructive feedback to students on their performance.
- **Record-Keeping:** Faculty members will maintain accurate records of all internal assessments, including marks and feedback.
- **Moderation:** Internal assessments will be moderated by the course coordinator or the head of the department to ensure fairness and consistency.

Appeal Process

Students who have concerns about their internal assessment marks may appeal to the concerned faculty member or the head of the department. The appeal process will be handled promptly and fairly.

The internal assessment policy is designed to promote student learning, assess their progress, and provide a fair and transparent evaluation system. Faculty members and students are expected to adhere to this policy to ensure the integrity of the internal assessment process.

Attendance Requirement & Internal Assessment Criteria

The institution follows the regulations for examinations of the UHS in letter and spirit. The students require **75% attendance** in all academic sessions and **50% passing marks** with internal assessments and send-up examinations to be eligible for the UHS Professional Examinations.

Assessment Guidelines

Assessment in medical & dental education is a critical component designed to ensure that medical & dental students acquire the necessary knowledge, skills, and competencies required for effective medical & dental practice.

Assessment drives learning! – George E. Millar

You will encounter a variety of assessment methods, each serving a specific purpose.

- Written examinations, including multiple-choice and essay questions, will test your grasp of theoretical concepts and subject matter.
- Practical assessments will require you to demonstrate your clinical skills and ability to apply knowledge in real-world scenarios.

- Clinical exams will evaluate your communication skills and reasoning abilities through case discussions and problem-solving exercises.
- Clinical skills and work-place based assessments will observe your hands-on proficiency and patient management capabilities.

At Avicenna Medical & Dental College, internal assessments are systematically conducted throughout each academic year of the MBBS program, as per the guidelines established by the University of Health Sciences (UHS). These assessments, overseen by the Assessment Cell, adhere to either the Annual Subject-Based System or the Integrated/Modular System, depending on the curriculum structure.

Notably, beginning with the 2024-25 academic year, the weightage of internal assessments will be increased from 10% to 20%. The UHS administers professional examinations independently, organizing them at designated neutral sites and appointing external examiners to ensure objectivity and fairness.

Internal Assessment Weightage	20%	100%
External Assessment Weightage	80%	

Assessment Schedule

<div> Avicenna Medical & Dental College 3rd Year MBBS (M-22) Test Schedule Block-9</div>					
Week	Date	Day	Subject	Test	Topic
28th	23-Sep-25	Tue	All Subjects	Lecture	Lecture Time Divided
29th	30-Sep-25	Tue	Com.Medicine	Grand Test	All the topics covered till Health system in Pakistan
				OSPE+VIVA	
30th	7-Oct-25	Tue	Pharamcology	Grand Test	Antihypertensives, drugs in ischemic heart disease, drugs used in Cardiac Arrhythmias
				OSPE+VIVA	
31st	14-Oct-25	Tue	For.Medicine	Grand Test	Law, legal procedures, medical jurisprudence, General toxicology
				OSPE+VIVA	
32nd	21-Oct-25	Tue	Pathology	Grand Test	CVS
				OSPE+VIVA	
33rd	28-Oct-25	Tue	Com.Medicine	Grand Test	Epidemiology & Screening
				OSPE+VIVA	
34th	4-Nov-25	Tue	Pharamcology	Grand Test	Drugs used in cardiac failure, AntiHyperlipidemi c / AntiDyslipidemias, antiasthmatics, COPD, anti tussive
				OSPE+VIVA	
35th	11-Nov-25	Tue	Medicine	Grand Test	All the covered topics
				OSPE+VIVA	
36th	18-Nov-25	Tue	Surgery	Grand Test	All the covered topics
				OSPE+VIVA	
37th	25-Nov-25	Tue	Pathology	Grand Test	Respiratory
				OSPE+VIVA	
38th	2-Dec-25	Tue	Com.Medicine	Grand Test	Environmental Health, Immunity, Health communication & education, Clinical entrepreneur ship
				OSPE+VIVA	
39th	9-Dec-25	Tue	For.Medicine	Grand Test	Asphyxial deaths and injuries, Special Toxicology
				OSPE+VIVA	
39th	12-Dec-25	Fri	Integrated	Module Exam:	Whole Syllabus
				VIVA/OSPE	
40th	16-Dec-25	Tue	Integrated	Block-9 Exam	Whole Syllabus of Module- 20,21,22,23
	17-Dec-25	Wed		OSPE+VIVA	
End Of Block-9					
41st	Winter Vacations-21st Dec-28th Dec,2025				
LSE/Send-Up Exam: 24th Nov,2025- 10th Dec,2025					
42nd	31-Dec-25	Wed	Block-7 Exam	LSE/Send-Up	Whole Syllabus of Module-12,13,14 &15
42nd	1-Jan-26	Thu	SDL		
42nd	2-Jan-26	Fri	SDL		
42nd	3-Jan-26	Sat	Day Off		
43rd	4-Jan-26	Sun	Day Off		
43rd	5-Jan-26	Mon	Block-8 Exam	LSE/Send-Up	Whole Syllabus of Module-16,17,18 &19
43rd	6-Jan-26	Tue	SDL		
43rd	7-Jan-26	Wed	SDL		
43rd	8-Jan-26	Thu	SDL		
43rd	9-Jan-26	Fri	Block-9 Exam	LSE/Send-Up	Whole Syllabus of Module-20,21,22 &23
43rd	10-Jan-26	Sat	Day Off		
44th	11-Jan-26	Sun	Day Off		
44th	12-Jan-26	Mon	Block-7	OSPE/ VIVA	
44th	13-Jan-26	Tue	Block-8	OSPE/ VIVA	
44th	14-Jan-26	Wed	Block-9	OSPE/ VIVA	

Table of Specification

MBBS 3 rd Professional							
Block-9							
Subject	Written Exam			Oral/Practical/Clinical Exam			
	MCQ (1 mark)	SEQ (5 mark each)	Marks	OSPE /OSCE (8 marks each observed)	OSCE (10 marks each observed)	OSVE (14 marks each observed)	Marks
Pharmacology	09	02	19	02	-	01	30
Pathology	12	02	22	02	-	-	16
Family Medicine	05	-	05	-	-	-	-
Community Medicine	27	03	42	03	-	01	38
Surgery	10	01	15	-	-	-	-
Medicine	10	01	15	01	-	-	08
Forensic	15	01	20	02	-	01	30
Behavioral	02	-	02	-	-	-	-
Patient Safety	-	-	-	-	-	-	-
CFRC	-	-	-	01	-	-	08
PERLs + Expository	-	-	-	-	01	-	10
Total	90	10x5=50	140	11 stations x 08 = 88	01 stations x 10 = 10	03 stations x 14=42	140

YEAR-3		
A.	Block 7 (Foundation-II + Hematopoietic, Immunity & Implant + General Pharmacology + Forensic Medicine & Toxicology-I)	Marks
		350
B.	Block 8 (Musculoskeletal & Locomotion-II + Infectious Diseases + Neoplasia + Forensic Medicine & Toxicology - II)	350
C.	Block 9 (Cardiovascular-II + Respiratory II + Community Medicine & Public Health + Family Medicine I + Forensic Medicine & Toxicology - III)	350
	Total	1050

Recommended Books & Reading Resources

Anatomy

Snell's Clinical Anatomy 10th ed.

Langman's Medical Embryology 12th ed

Medical Histology by Laiq Hussain Siddiqui 8th edition.

General Anatomy by Laiq Hussain Siddiqui 6th edition.

Biochemistry

Harpers illustrated Biochemistry (latest edition). Rodwell.V.W MCGrawHill publishers.

Lippincott illustrated Review (latest edition). Kluwer.W.

Essentials of Medical Biochemistry vol 1&2 by Mushtaq Ahmed.

Pathology

Vinay Kumar, Abul K. Abbas and Nelson Fausto Robbins and Cotran, Pathologic basis of disease. WB Saunders.

Robbins and Cotran Pathological Basis of Disease. Kumar, V., Abbas, A. and Aster, J. Latest Edition

Richard Mitchall, Vinay Kumar, Abul K. Abbas and Nelson Fausto Robbins and Cotran, Pocket Companion to Pathologic basis of diseases, Saunders Harcourt.

Walter and Israel. General Pathology. Churchill Livingstone.

Robbins & Kumar, Medical Microbiology and Immunology Levinson.

General Medicine

Principles and Practice of Medicine by Davidson (latest edition)

Clinical Medicine by Parveen J Kumar & Michael Clark

Oxford Handbook of Medicine

Macleod's Clinical Examination book

Medicine and Toxicology by C.K. Parikh

Hutchison's Clinical Methods by Michael Swash. 21st edition

Pharmacology And Therapeutics

Katzung and Trevor's Pharmacology: Examination and Board Review- 15th Edition

Basic and Clinical Pharmacology by Bertram G Katzung (case scenarios only) - 16th Edition-

Current Medical Diagnosis and Treatment- reference book –Edition-2024

Basic and Clinical Pharmacology by Bertram G Katzung (case scenarios only) - 15th Edition

Basic and Clinical Pharmacology by Katzung, McGraw-Hill. 16th Edition.

Pharmacology by Champe and Harvey, Lippincott Williams & Wilkins 8th Edition.

Katzung Basic and Clinical pharmacology, Lippincott Illustrated reviews.

Clinical Pathology Interpretations by A. H. Nagi

Behavioural Sciences

Handbook of Behavioural Sciences by Prof. Mowadat H.Rana, 3rd Edition

Medical and Psychosocial aspects of chronic illness and disability 6th edition by Donna R.Falvo and Beverly E.Holland,

Integrating behavioral sciences in healthcare, Asma Humayun,2003, 1st edition

Community medicine

Parks Textbook of Preventive and Social Medicine. K. Park

Public Health and Community Medicine by Ilyas Ansari

MSDS manual of Government of Punjab

Text book of Community Medicine by Park J E. Latest Edition

Surgery

Bailey & Love's Short Practice of Surgery (latest edition)

Browse's Introduction to the Symptoms & Signs of Surgical Disease 4th Edition

Bailey & Love Short Practice of Surgery, Clinical Surgery pearls by Dayananda Babu RACS for Surgical Audits.

Patent Safety

Patient Safety Curriculum Guide: Multi Professional Guide

Microbiology

Levinson's review of Microbiology

Medical Microbiology and Immunology by Levinson and Jawetz,

Pediatrics Medicine

Nelson Textbook of Pediatrics

Basis of Pediatrics by Pervez Akbar Khan

Gynecology

Gynecology by Ten Teachers

Infection Control

National Guidelines Infection Prevention and control, National Institute of Health Pakistan

Biosafety

Biosafety in Microbiological and Biomedical Laboratories, 6th Edition (CDC, USA)

WHO Laboratory Biosafety Manual, Fourth Edition, And Associated Monographs

WHO safe management of wastes from healthcare facilities chapter 7 -8 page 77-99, 105-125)

Family medicine

Oxford Handbook of General Practice, 5th Edition

Orthopedics

Apley and Solomon's System of Orthopaedics and Trauma by Ashley Blom (Editor)

Rheumatology

Davidson's Principles and Practice of Medicine

Clinical Medicine by Parveen J Kumar & Michael Clark

Hutchison's Clinical Methods by Michael Swash

Radiology

Aids to Radiological Differential Diagnosis by Chapman S. and Nakielny R. 4th edition.

Elsevier Science Limited; 2003.

Forensic Medicine

Knight's Forensic Pathology by Barnard Knight 3rd edition

G. Principles and Practice of Forensic Medicine by Prof. Nasib R. Awan, 2nd edition

Forensic DNA Typing – 2nd Edition, Author: John M. Butler

Parikh's Textbook of Medical Jurisprudence, Forensic Medicine and Toxicology by C.K. Parikh 6th Ed., CBS Publisher.

Gun Shot Wounds 2nd edition by V.J.Deimaio

Knight B. Simpson's Forensic Medicine.

Knight and Pekka. Principles of Forensic Medicine

Forensic Pathology

Forensic pathology 2nd edition by V.J.Deimaio CRC press Boca Raton London New York

Washington DC

Toxicology

Principles of clinical toxicology 3rd edition Thomas. Gossel CRC press Taylor and Francis group

Forensic Sciences

Fundamentals of Forensic Science- 3rd Edition: Author: Max M Houck, Jay A. Siegel

TextBook of forensic medicine and toxicology Principles and Practice 5th edition by Krishan Vig

Biomedical ethics

Principles of Biomedical ethics, 8th edition by Tom. L. Beauchamp, James F. Childress.

Evidence Based Medicine

Databases for the latest articles/manuscripts

Clinical Practice Guidelines- local and international - (within last 3 years)

Books (Latest edition-within last 5 years)

Pediatrics

Nelson's Book of Pediatric 22 edition Illustrated book of Pediatrics, Pervaiz Akbar textbook pediatrics medicine

Islamiyat

Standard Islamiyat (compulsory) for B.A, BSc, MA, MSc, MBBS by Prof M Sharif Islahi.

Ilmi Islamiyat(compulsory) for BA, BSc & equivalent.

About Avicenna Medical College

Avicenna Medical & Dental College is a purpose-built, fully equipped institution with experienced and excellence-driven faculty to train high-quality dental professionals in Pakistan.

Avicenna Medical & Dental College runs under the umbrella of Abdul Waheed Trust. Abdul Wahid Trust is a non-profit social welfare organization and registered under the Societies Act with the Registrar of Societies. The Trust is legalized through a Trust Deed that bears necessary rectifications. The Trust Deed is further supported by its Memorandum and Article of Association that authorizes the establishment and operation of the Medical College, the Dental College, the Nursing College, the Allied Health Sciences College, and other activities in the healthcare sector.

In 2009, Avicenna Medical & Dental College was recognized by the Pakistan Medical & Dental Council. With the advent of advanced tools and technology in every field of health science, medicine today has shot up to the greater end of the gamut with superior choice and promises in medical therapy in the very vicinity of the common man. AVMDC promises to be one such neighborhood.

Infrastructure Resources

Sr .	Infrastructure Resources	Description
1.	Lecture Hall	Each year has a dedicated lecture hall, totaling five lecture halls for the five professional years. These halls are equipped with modern audiovisual aids to support effective teaching and learning.
2.	Tutorial Room	The college's tutorial rooms, each with a capacity of 30, are specifically designed to support small group discussions and interactive sessions. These rooms facilitate personalized instruction, enabling more engaged and effective learning through direct interaction between students and instructors.
3.	Lab	The college is equipped with state-of-the-art laboratories for practical and clinical work. Each lab is designed to support various disciplines, to facilitate hands-on learning.
4.	Library on campus	A huge library occupies a full floor and has 260 seats including study carrels and group-discussion tables. Latest reference books of Basic and Clinical Sciences along with national & international journals are available in the library.
5.	Digital Library	The digital library offers access to a vast collection of e-books, online journals, research databases, and other digital resources. It supports remote access and provides tools for academic research and learning.
6.	Learning Management System (LMS)	The LMS is a comprehensive online platform that supports course management, content delivery, student assessment, and communication. It provides tools for tracking progress, managing assignments, and facilitates ongoing academic activities.

6.	Phantom Labs	Specialized Phantom Labs are available for advanced simulation and practice in dental procedures. These labs provide high-fidelity models and simulators that help students refine their clinical skills in a controlled environment.
7.	Mess & Cafeteria	<p>The College has its own on-campus Mess which caters to 600 students. All food items including dairy, meat, and vegetables are sourced organically and bought in at the time of cooking, in order to ensure that students get freshly cooked meals at all times</p> <p>Students form the Mess committee which decides the mess menu in consultation with other students. The Mess offers fresh food to all residents three times a day. However, day scholars are also welcome to use the Mess facility at a reasonable cost.</p> <p>Two 50- inch LCD screens provide students an opportunity to get entertained during their meal times.</p>
8.	Gymnasium & Sports	<p>We recognize sports as a pivotal key to shape and maintain students' personality and good health. The College has indoor and outdoor sports facilities to help enhance the cognition and capacity to learn. There is a proper sports section for various games like basketball, football, volleyball, and cricket.</p> <p>The gym itself is fully equipped with modern machinery both for students and faculty.</p>
9.	IT Lab	The IT Lab is equipped with modern computers and software available for students who need access for academic purposes.
10.	Auditorium	The college has a spacious auditorium equipped with advanced audio-visual facilities. It is used for large-scale lectures, guest presentations, and academic conferences, providing a venue for students to engage with experts and participate in important educational events.
11.	Examination Halls	The college provides dedicated examination halls that are designed to accommodate a large number of students comfortably. These halls are equipped with necessary facilities to ensure a smooth and secure examination process, including proper seating arrangements, monitoring systems, and accessibility features.

7-Star Doctor Competencies (PMDC)

According to national regulatory authority PMDC, a Pakistani medical/dental graduate who has attained the status of a 'seven-star doctor' is expected to demonstrate a variety of attributes within each competency. These qualities/ generic competencies are considered essential and must be exhibited by the individual professionally and personally.

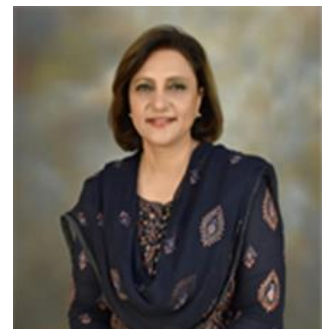
1. Skillful / Care Provider.
2. Knowledgeable / Decision Maker.
3. Community Health Promoter / Community Leader.
4. Critical Thinker / Communicator
5. Professional / Lifelong learner.
6. Scholar / Researcher
7. Leader/ Role Model / Manager

Message from the Principal

As a Co-Founder and Co-Chairperson, I have been involved in planning, construction and accreditation of Avicenna Medical College by the Pakistan Medical and Dental Council (PM&DC) and its affiliation with the esteemed University of Health Sciences (UHS). It is a pleasure to see Avicenna Medical College develop, progress and achieve maximum academic excellence in a short period since its inception in 2009. The institution has lived up to its mission of training and producing medical graduates of international standards. Three batches have passed out as Doctors, who currently are serving in the country and abroad while several have opted for post-graduation and are on road to progress. We have achieved several milestones since 2009 including the recognition of our College for FCPS training by College of Physicians and Surgeons of Pakistan (CPSP), establishment of College of Nursing and Avicenna Dental College.

Principal

Prof. Dr. Gulfreen Waheed
MBBS, FCPS, MHPE, PhD Scholar - HPE
Avicenna Medical & Dental College



Message from the Chairman

The Avicenna Medical & Dental College is a project of Abdul Waheed Trust which is a Non-profitable, Non-governmental, Non-political & Social organization, working for the welfare of Humanity and based on Community empowerment. Avicenna Medical College has its own 530 bedded Avicenna teaching Hospital (Not for Profit hospital) within the College Campus & 120 bedded Aadil Hospital, at 15 minutes' distance. Separate comfortable hostels for boys & girls are provided on the campus.

Our students benefit from the state of the art College Library with facilities of Internet & online Journals that remain open 15 hours a day, for our students & faculty members. I am particularly pleased with the hard work by the Faculty and Students in the achievement of historic 100% results for all the classes. It is a rare achievement and speaks of dedication of the Faculty and Staff. Our motto is Goodness prevails and we aim at producing Doctors' who are knowledgeable, competent in clinical skills and ethical values.

Avicenna Medical College & Hospital was founded to provide quality health care services to the deserving patients belonging to the rural areas near Avicenna Hospital as well as to provide quality medical education of international standard to our students. The Hospital provides all medical services and Lab diagnostics to the local population at minimal cost. So far by the grace of Allah Almighty the number of patients being treated and operated upon at our Hospital is increasing every day as there is no other public or charity hospital in the circumference of 20km. We have already established two Satellite Clinics in the periphery which are providing outdoor care while admission cases are brought to the Hospital in Hospital transport.

Following the success of our reputable Medical College and Hospital, we were able to successfully establish Avicenna Dental College which is recognized by the Pakistan medical & Dental Council & University of Health Sciences. To date, we have enrolled five batches in our dental college and we aim to achieve the same level of success for our dental students as our medical students.

Chairman
Abdul Waheed Sheikh
Avicenna Medical & Dental College





Avicenna Medical & Dental College



Vision

The vision of **Avicenna Medical & Dental College** is to become a college that thrives to achieve improvement in healthcare of masses through creative delivery of educational programs, innovative research, commitment to public service and community engagement in a environment that supports diversity, inclusion, creative thinking, social accountability, life-long learning and respect for all.

Mission

The mission of **Avicenna Medical and Dental College** is to educate and produce competent, research oriented healthcare professionals with professional commitment and passion for life-long learning from a group of motivated students through quality education, research and service delivery for the improvement of health status of the general population.