## Course Content Second MBBS (from October 2020) Subject: Pathology (Theory and Practical)

(Based on Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 1; page nos.160-203)

- 1. Total Teaching hours : 230 hours
- 2. A. Lectures (hours): 80
  - B. Self-directed learning (hours): 12
  - C. Clinical postings (hours): NIL
  - D. Small group teachings/tutorials/Integrated teaching/Practicals (hours): 138

		Lectures	Small	SDL
Competency Nos.	Topics & Subtopics		group teaching	
		80	138	12
		hours	hours	hours
PA1.1 - 1.3	Introduction to Pathology	1	2	
	Core: common definitions and terms, role of pathologist,			
	branches of pathology			
	Practicals: histological techniques, working of a microscope			
	Non-core: history and evolution of pathology			
PA2.1 – 2.8	Cell injury and adaptations	6	6	
	Core: Cell injury, necrosis, apoptosis, intracellular			
	accumulations, cell death, cellular adaptations, calcification,			
	disorders of pigment metabolism, Non-core: cellular aging			
PA3.1-3.2	Amyloidosis- Core: Pathogenesis and pathology of amyloidosis	1	2	
PA4.1 – 4.4	Inflammation	4	4	
	Core: Acute and chronic inflammation, mediators of			
	inflammation, granulomatous inflammation, including TB			
PA5.1	Healing and repair- Core: Repair and wound healing	1	-	
PA6.1- 6.7	Hemodynamic disorders	4	6	
	Core: Edema, hyperemia, congestion, hemorrhage, shock,			
	thrombosis, embolism, ischemia, infarction			
PA7.1-7.5	Neoplasia	5	6	
	Core: Definition and classification of neoplasia, molecular			
	basis of cancer, carcinogenesis, effects of tumour on host,			
	paraneoplastic syndrome, laboratory diagnosis of cancer			
	Non-core: Immunology and immune response to cancer			
PA8.1-8.3	Basic diagnostic cytology	-	2	
	<i>Core</i> : Diagnostic role of cytology, extoliative cytology			
PA9.1-9.37	Immunopathology	5	2	
	<i>Core</i> : Principles of immunity, hypersensitivity reactions, HLA			
	system, transplant rejection, autoimmunity, systemic lupus			
	erythematosus, pathology of HIV/AIDS			
PA10.1-10.4	Infections and infestations- Core: Malaria, cysticercus, leprosy,	-	2	1
	Non-core: Common bacterial, viral, protozoal, and helminthic diseases			

		Lectures	Small	SDL
Competency	Topics & Subtopics		group	
Nos.			teaching	
		80	138	12
		hours	hours	hours
PA11.1-11.3	Genetic and pediatric diseases-	1	-	1
	Non-core: Mutations, Tumors and tumour-like conditions of			
	infancy and childhood, common storage disorders			
PA12.1-12.3	Environmental and nutritional disease	-	2	
	<i>Core</i> : Air pollution, tobacco, alcohol, protein calorie			
	malnutrition, starvation, obesity			
PA13.1-13.5	Introduction to hematology	2	8	
	<i>Core</i> : Hematopolesis and extramedullary hematopolesis,			
	definition and classification of anemia, anticoagulants,			
	Investigations in anemia, peripheral smear examination	1		
PA14.1-14.3	<b>Nicrocytic anemia</b> - <i>core</i> : iron metabolism, microcytic	1	4	
	nypochromic anemia, peripheral smear in microcytic anemia			
PA15.1-15.4	Macrocytic anemia	1	4	
	Core: Vitamin B12 metabolism. Etiology and pathogenesis of			
	B12 deficiency, laboratory investigations in macrocytic			
	Anerria, megaloblastic anerria			
	mon-core. differences between megalobiastic and non-			
DA16 1 16 7		2	6	
PA10.1-10.7	Core: Definition and classification of hemolytic anemia	2	0	
	nathogenesis features hematological indices sickle cell			
	anemia thalassemia nerinheral smear nicture in hemolytic			
	anemia, classification, clinical features of hemolytic anemia			
PA17.1-17.2	Aplastic anemia- Non-core: Etiology, pathogenesis, findings,	1	2	
	bone marrow aspiration and biopsy	-	-	
PA18.1-18.2	Leukocyte disorders	2	2	
	<i>Core</i> : Leukocytosis, leukopenia, acute and chronic leukemia	-	-	
PA19,1-19,7	Lymph node and spleen	2	2	
	<i>Core</i> : Lymphadenopathy, TB lymphadenitis, Hodgkin's	2	2	
	disease, non-Hodgkin's lymphoma, splenomegaly			
PA20.1	Plasma cell disorders- Core: Multiple myeloma	-	2	
PA21.1-21.5	Hemorrhagic disorders	3	4	
	<i>Core:</i> Normal hemostasis, vascular and platelet disorders, ITP.			
	hemophilia, clotting disorders, DIC, Vitamin K deficiency			
PA22.1-	Blood banking and transfusion	2	4	1
22.7	Core: Blood group systems, compatibility testing, blood			
	components, transfusion transmitted infections, transfusion			
	reactions, autologous transfusion			
PA23.1-23.3	Clinical Pathology		12	
	Core: Urine analysis, Body fluids, semen analysis, thyroid			
	function tests, renal function tests, liver function tests			
PA24.1-24.7	Gastrointestinal tract:- Core: Etiology, pathogenesis,	5	4	
	pathology, morphology and clinical features of: oral cancer,			

		Lectures	Small	SDL
Competency	Topics & Subtopics		group	
Nos.			teaching	
		80	138	12
		hours	hours	hours
	peptic ulcer disease, polyp, carcinoma stomach, tubercular			
	intestine, inflammatory bowel disease, carcinoma colon			
PA25.1-25.6	Hepatobiliary system:	5	6	
	<i>Core</i> : Bilirubin metabolism, etiopathogenesis and	•	Ū	
	classification of jaundice, henatic failure, nathology			
	complications consequences and laboratory diagnosis of viral			
	henatitis: pathophysiology of alcoholic liver disease and			
	cirrhosis: portal hypertension: hepatocellular carcinoma			
	Interpretation of liver function tests: Serology panel in viral			
	henatitis (small group)			
PA26.1-26.7	Respiratory system:	4	4	
	<i>Core</i> : Etionathogenesis mornhology and complications of	•	•	
	nneumonia lung abscess chronic obstructive airway disease			
	bronchiectasis tuberculosis occupational lung disease lung			
	tumours Non-core: nleural tumours mesothelioma			
ΡΔ27 1-	Cardiovascular system:	5	6	1
27.10	<i>Core</i> : Arteriosclerosis aneurysm heart failure ischemic heart	5	Ŭ	-
27120	disease laboratory diagnosis of acute coronary syndrome			
	rheumatic fever and heart disease infective endocarditis			
	nericarditis nericardial effusion Non-core: cardiomyonathies			
PA28 1-	Urinary tract	6	4	2
28.16	Core: Histology of kidney clinical syndromes acute renal	Ŭ	•	-
20.10	failure, chronic renal failure, acute glomerulonenhritis.			
	glomerular manifestations in systemic disease, diseases of			
	tubular interstitium, acute tubular necrosis, acute and chronic			
	pyelonephritis, reflux nephropathy, vascular diseases of			
	kidney, cystic diseases of kidney, urinary calculi and			
	obstructive uropathy, renal tumours			
	<i>Non-core</i> : thrombotic angiopathies, urothelial tumours			
PA29.1-29.5	Male genital tract:	1	2	
	<i>Core</i> : Testicular tumours, carcinoma penis, benign prostatic			
	hyperplasia, carcinoma prostate. <i>Non-core</i> : prostatitis			
PA30.1-30.9	Female genital tract:	1	6	2
	<i>Core</i> : Pathogenesis, etiology, pathology, diagnosis, and			
	progression of: carcinoma cervix, carcinoma endometrium.			
	leiomvoma, leiomvosarcoma, ovarian tumours, gestational			
	trophoblastic neoplasms. <i>Non-core</i> : cervicitis, endometriosis,			
	adenomyosis, endometrial hyperplasia			
PA31.1-31.4	Breast-	1	2	
	<i>Core</i> : Benign breast disease, carcinoma breast,			
	Non-core: gynecomastia			
PA32.1-32.9	Endocrine system	4	4	2
	<i>Core</i> : etiology, pathogenesis, pathology and iodine			
	dependency of: goiters, thyrotoxicosis, hyperthyroidism,			

		Lectures	Small	SDL
Competency	Topics & Subtopics		group	
Nos.			teaching	
		80	138	12
		hours	hours	hours
	hypothyroidism; epidemiology, etiopathogenesis, pathology,			
	laboratory diagnosis, complications of diabetes mellitus			
	Non-core: hyperparathyroidism, pancreatic cancer, adrenal			
	insufficiency, Cushing syndrome, adrenal neoplasms			
PA33.1-33.5	Bone and soft tissue	1	4	1
	Core: Osteomyelitis, bone tumours, soft tissue tumors			
	Non-core: Rheumatoid arthritis, Paget's disease of bone			
PA34.1-34.4	Skin	1	4	
	Core: Squamous cell carcinoma, basal cell carcinoma			
	Non-core: Nevus, melanoma,			
PA35.1-35.3	Central nervous system	2	4	
	Core: CSF findings in meningitis, CNS tumours			
PA36.1	Eye- Non-core: Retinoblastoma			1
AETCOM 2.4	Working in a health care team		2	
AETCOM 2.8	What does it mean to be family member of a sick patient?		2	

#### Subject: Pathology LIST OF PRACTICALS

#### **GENERAL PATHOLOGY**

- 1. Histological techniques, tissue processing, microscopy
- 2. Intracellular accumulations, calcification
- 3. Cellular adaptations
- 4. Disorders of pigment metabolism
- 5. Amyloidosis
- 6. Acute inflammation
- 7. Chronic inflammation and repair
- 8. Tuberculosis and leprosy
- 9. Hemodynamic disturbances
- 10. Neoplasia
- 11. Infections and infestations

#### HEMATOLOGY

- 1. Collection of specimens, anticoagulants, normal hematopoiesis
- 2. Hemoglobin estimation: Interpretation of report
- 3. Hematocrit and Erythrocyte sedimentation rate: Interpretation of report
- 4. Complete blood count: Interpretation of report (without flags) from automated cell counter
- 5. Preparation of peripheral smear and performing differential leukocyte count, interpretation of peripheral smear
- 6. Investigations of anemia
- 7. Investigations of leukemia
- 8. Plasma cell dyscrasias
- 9. Investigation of bleeding and clotting disorders
- 10. Blood banking: Performing blood grouping and interpretation of results

#### SYSTEMIC PATHOLOGY

- 1. Lymphoma
- 2. Splenomegaly
- 3. Gastrointestinal tract: Ulcers
- 4. Intestinal polyp and carcinoma intestine
- 5. Cirrhosis and hepatocellular carcinoma
- 6. Pneumonia, bronchiectasis
- 7. Pulmonary tuberculosis and bronchogenic carcinoma
- 8. Atherosclerosis
- 9. Left ventricular hypertrophy, myocardial infarction, lab diagnosis of MI
- 10. Rheumatic heart disease and infective endocarditis
- 11. Chronic contracted kidney, glomerulonephritis, pyelonephritis
- 12. Urinary calculi, Renal cell carcinoma,
- 13. Male genital tract
- 14. Female genital tract: Carcinoma cervix, Carcinoma endometrium
- 15. Leiomyoma, Ovarian tumours
- 16. Gestational trophoblastic disease
- 17. Breast
- 18. Thyroid
- 19. Bone and soft tissue tumours
- 20. Skin
- 21. CNS tumours

#### **CLINICAL PATHOLOGY**

- 1. Urine analysis: Interpretation of physical, chemical and microscopic examination results
- 2. Semen analysis: Lecture demonstration, interpretation of report
- 3. Basic cytological techniques: FNAC and exfoliative cytology (Lecture demonstration)
- 4. CSF examination: Lecture demonstration and interpretation of reports
- 5. Body fluids: Interpretation of serous effusion reports
- 6. Interpretation of kidney function tests
- 7. Investigations in jaundice
- 8. Investigations in diabetes mellitus

#### AUTOPSY

Indications and technique, autopsy findings in common conditions like myocardial infarction, cirrhosis, portal hypertension, bronchogenic carcinoma, miliary tuberculosis, renal cell carcinoma etc.

#### Suggested LIST OF SPECIMENS

- 1. Fatty liver
- 2. Vesicular mole (hydropic change)
- 3. Cardiac hypertrophy
- 4. Kidney- atrophy
- 5. Large white kidney-amyloidosis
- 6. Anthracosis
- 7. Hemochromatosis- Prussian blue reaction
- 8. Acute appendicitis
- 9. Serofibrinous pericarditis
- 10. Abscess- lung/ liver
- 11. Tubercular lymph node- caseation, matted lymph nodes
- 12. CVC Liver
- 13. Splenic infarct
- 14. Renal infarct
- 15. Myocardial infarction
- 16. Leiomyoma
- 17. Squamous papilloma
- 18. Hemangioma-Liver
- 19. Intestinal polyp
- 20. Squamous cell carcinoma-skin/cervix/penis
- 21. Adenocarcinoma- intestine
- 22. Melanoma
- 23. Enlarged lymph node: Hodgkin's disease
- 24. Benign ulcer-Peptic ulcer
- 25. Tubercular intestine
- 26. Amebic ulcer
- 27. Malignant ulcer- Carcinoma stomach
- 28. Cirrhosis
- 29. Hepatocellular carcinoma
- 30. Pulmonary tuberculosis
- 31. Miliary tuberculosis
- 32. Rheumatic heart disease mitral stenosis
- 33. Small contracted kidney
- 34. Renal cell carcinoma
- 35. Hydronephrosis
- 36. Urinary calculi
- 37. Wilm's tumour

- 38. Carcinoma penis
- 39. Seminoma
- 40. Carcinoma cervix
- 41. Carcinoma endometrium
- 42. Dermoid cyst
- 43. Ovarian cystadenoma
- 44. Leiomyoma
- 45. Carcinoma breast
- 46. Goitre
- 47. Solitary thyroid nodule
- 48. Giant cell tumour
- 49. Fibroadenoma of breast
- 50. Lipoma
- 51. Metastatic (Liver/Lung)
- 52. Fat necrosis
- 53. Meningioma

#### LIST OF SLIDES

- 1. Cloudy swelling-kidney
- 2. Fatty liver
- 3. Hyaline change in leiomyoma
- 4. Benign prostatic hyperplasia
- 5. Squamous metaplasia
- 6. Calcification
- 7. Amyloidosis- kidney
- 8. Nevus
- 9. Anthracosis
- 10. Acute appendicitis
- 11. Acute pyogenic meningitis
- 12. Tubercular lymphadenitis (Caseous necrosis, granuloma)
- 13. Tuberculoid leprosy
- 14. Lepromatous leprosy
- 15. Pulmonary edema
- 16. CVC lung
- 17. CVC liver
- 18. Thrombus
- 19. Renal infarct
- 20. Myocardial infarction
- 21. Capillary hemangioma
- 22. Squamous papilloma
- 23. Squamous cell carcinoma
- 24. Adenocarcinoma
- 25. Actinomycosis
- 26. Rhinosporidiosis
- 27. Cysticercosis
- 28. PS-Malaria
- 29. Eosinophilia
- 30. Neutrophilia
- 31. Microcytic anemia
- 32. Macrocytic anemia
- 33. Sickle cell anemia
- 34. Acute leukemia

- 35. Chronic myeloid leukemia
- 36. Hodgkin's disease
- 37. Peptic ulcer
- 38. Tubercular intestine
- 39. Adenocarcinoma intestine
- 40. Cirrhosis
- 41. Lobar pneumonia
- 42. Bronchopneumonia
- 43. Pulmonary tuberculosis
- 44. Atherosclerosis
- 45. Myocardial infarction
- 46. Crescentic glomerulonephritis
- 47. Chronic pyelonephritis
- 48. Renal cell carcinoma
- 49. Benign prostatic hyperplasia
- 50. Seminoma
- 51. Fibroadenoma
- 52. Carcinoma breast
- 53. Colloid goiter
- 54. Papillary carcinoma thyroid
- 55. Basal cell carcinoma
- 56. Melanoma
- 57. Lipoma
- 58. Osteogenic sarcoma
- 59. Giant cell tumour

#### CASE-BASED LEARNING

- 1. Microcytic anemia
- 2. Macrocytic anemia
- 3. Hemolytic anemia
- 4. Multiple myeloma
- 5. Hepatitis
- 6. Obstructive jaundice
- 7. Hemolytic jaundice
- 8. Nephrotic syndrome
- 9. Meningitis

#### CHARTS

- 1. Interpretation of microcytic anemia
- 2. Interpretation of macrocytic anemia
- 3. Interpretation of hemolytic anemia
- 4. Interpretation of acute leukemia
- 5. Interpretation of chronic leukemia
- 6. Interpretation of multiple myeloma
- 7. Interpretation of bleeding disorder
- 8. Interpretation of clotting disorder
- 9. Interpretation of Liver disorders
- 10. Interpretation of Renal disorders
- 11. Interpretation of Thyroid disorders
- 12. Interpretation of acute myocardial infarction
- 13. Pyogenic meningitis
- 14. Tubercular meningitis
- 15. Viral meningitis
- 16. Diabetes mellitus

#### Paper wise distribution of topics for Prelim & MUHS Annual Examination Year: Second MBBS Subject: Pathology

Paper	Section	Topics
	A	Topics of the paper I
		General Pathology:
		1. Cell injury and adaptation
		2. Amyloidosis
		3. Inflammation and repair
		4. Tuberculosis and leprosy
		5. Hemodynamic disturbances
		6. Immunopathology
		7. Neoplasia
		8. Infections and infestations
		9. Basic diagnostic cytology
		10. Histological techniques, tissue processing
		11. Genetic and pediatric diseases
		12. Environmental and nutritional diseases
		Hematology
		1. Introduction to hematology
		2. Microcytic anemia
		3. Macrocytic anemia
		4. Hemolytic anemia
		5. Apidsuc anemia
		6. Leukocyte disorder
		7. Lymph hode and spieen
		8. Plasma cell disorders
		9. Hemorrhagic disorders
		AFTCOM 2.4 and 2.8
	A	Topics of the paper II
		Systemic Pathology
		1. Gastrointestinal tract
		2. Hepatobiliary system
		3. Respiratory system
		4. Cardiovascular system
		5. Urinary tract
		6. Male genital tract
		7. Female genital tract
		8. Breast
		9. Endocrine system
		10. Bone and soft tissue
		11. Skin
		12. Central nervous system
		Clinical Pathology
		1. Urine analysis
		2. Body fluid analysis
		3. CSF analysis
		4. LIVER TUNCTION TEST
		5. Kenal function test
		<ul> <li>Diabetes mellitus</li> <li>Thyraid function tast</li> </ul>
		7. Ingroid function test

## Second MBBS

## Internal Assessment

## Subject: Pathology

## Applicable w.e.f October 2020 onwards examination for batches admitted from June 2019 onwards

	I-Ex	cam (After 3 months , J	an)	II-Exa	m (After 7 months, N	Prelims (July)			
Phase	Theory	Practical (Including 10 Marks for Journal & Log Book )	Total Marks	Theory	Practical Including 10 Marks for Journal & Log Book	Total Marks	Theory	Practical	Total Marks
Second MBBS	100	100	200	100	100	200	Paper 1 -100 Paper 2 -100	100	300

- 1. There will be 3 internal assessment examinations in Pathology. The structure of the internal assessment theory examinations should be similar to the structure of University examinations.
- 2. It is mandatory for the students to appear for all the internal assessment examinations.
- 3. First internal assessment examination will be held in January, second internal assessment examination will be held in May and third internal assessment examination will be held in July.
- 4. A student who has not taken minimum required number of tests for Internal Assessment each in theory and practical will not be eligible for University examinations.
- There will be only one additional examination for absent students (due to genuine reason) after approval by the Institutional Grievances Committee. It should be taken after preliminary examination and before submission of internal assessment marks to the University.
- 6. Internal assessment marks for theory will be out of 400 and practical will be out of 200.

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- 7. Reduce total theory internal assessment to 40 marks and total practical internal assessment to 40 marks. Students must secure at least 50% marks of the total marks (combined in theory and practical; not less than 40% marks in theory and practical separately) to be eligible for appearing University examination
- 8. Conversion Formula for calculation of marks in internal assessment examinations

	First IA	Second IA	Third IA (Prelim)	Total	Internal assessment marks: Conversion formula (out of 40)	Eligibility to a University exa (after convers (40% separate Practical, 50%	ppear for final amination sion out of 40) ely in Theory & 5 Combined)
Theory	100	100	200	400	Total marks obtained	16	
					10	(Minimum)	Total of Theory +
Practical	50	50	100	200	Total marks obtained 16 Practica		Practical Must be 40.
					05	(Minimum)	

While preparing Final Marks of Internal Assessment, the rounding-off marks shall done as illustrated in following table

Internal Assessment Marks	Final rounded marks
15.01 to 15.49	15
15.50 to 15.99	16

9. Internal assessment marks will reflect as separate head of passing at the summative examination.

10.Internal assessment marks will not to be added to marks of the University examinations and will be shown separately in mark list.

## Second MBBS Practical Mark's Structure

## Applicable w.e.f October 2020 onwards examination for batches admitted from June 2019 onwards

	Subject: Pathology (I term)												
			Practical		O		Total						
Seat No.													
	OSPE	PS/DLC	CBC report interpretation	Blood group	Histopathology slide	Total	Gross specimen General Pathology	Hematology		Log book	Practical & Oral		
Max. Marks	10	5	5	5	5	30	7	8	15	5	50		

	Subject: Pathology (II term)											
Practical					0		Total					
Seat									Practical & Oral			
NO.	OSPE	Urine report interpretation	Histopathology slide	Total	Gross specimen Systemic Pathology	Clinical pathology	Total	Log book	Total			
Max. Marks	20	5	5	30	7	8	15	5	50			

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## Subject: Pathology Prelim Examination

				Practical								
Seat No.											Total	Practical & Oral
	OSPE	PS/DLC	Urine interpretation	CBC report interpretation	Blood group	Histopathology slide	Logbook	Total	Gross specimens	Clinical and hematology	Total	Total (G + )
Max. Marks	32	10	10	5	5	8	10	80	10	10	20	100

## Subject: Pathology M.U.H.S. Final Exam.

				Practical							
Seat No.							Total			Total	Practical & Oral
	OSPE	PS/DLC	Urine interpretation	CBC report interpretation	Blood group	Histopathology slide		Gross specimens	Clinical and hematology	Total	Total (G + J)
	Α	В	С	D	E	F	G	н	I	J	К
Max. Marks	32	10	10	5	5	8	70	15	15	30	100

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#### For Urine examination

Students are not expected to perform urine examination, but to interpret results. Clinical cases with urinary findings may be given to them for interpretation.

#### Suggested OSPE stations

- 1. Clinical chart interpretation (Clinical Pathology) 5 marks
- 2. Clinical chart interpretation (Clinical Pathology) 5 marks
- 3. Clinical chart interpretation (CSF) 5 marks
- 4. Clinical chart interpretation (Hematology)- 5 marks
- 5. Slides (3)- Hematology, benign, inflammatory- 6 marks
- 6. Specimens (3)- 6 marks

#### Subject: Pathology

#### LIST OF PRACTICALS

#### **GENERAL PATHOLOGY**

- 1. Histological techniques, tissue processing, microscopy
- 2. Intracellular accumulations, calcification
- 3. Cellular adaptations
- 4. Disorders of pigment metabolism
- 5. Amyloidosis
- 6. Acute inflammation
- 7. Chronic inflammation and repair
- 8. Tuberculosis and leprosy
- 9. Hemodynamic disturbances
- 10. Neoplasia
- 11. Infections and infestations

#### HEMATOLOGY

- 1. Collection of specimens, anticoagulants, normal hematopoiesis
- 2. Hemoglobin estimation: Interpretation of report
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- 4. Complete blood count: Interpretation of report (without flags) from automated cell counter
- 5. Preparation of peripheral smear and performing differential leukocyte count, interpretation of peripheral smear
- 6. Investigations of anemia
- 7. Investigations of leukemia
- 8. Plasma cell dyscrasia
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#### SYSTEMIC PATHOLOGY

- 1. Lymphoma
- 2. Splenomegaly
- 3. Gastrointestinal tract: Ulcers
- 4. Intestinal polyp and carcinoma intestine
- 5. Cirrhosis and hepatocellular carcinoma
- 6. Pneumonia, bronchiectasis
- 7. Pulmonary tuberculosis and bronchogenic carcinoma
- 8. Atherosclerosis
- 9. Left ventricular hypertrophy, myocardial infarction, lab diagnosis of MI
- 10. Rheumatic heart disease and infective endocarditis
- 11. Chronic contracted kidney, glomerulonephritis, pyelonephritis
- 12. Urinary calculi, Renal cell carcinoma,
- 13. Male genital tract
- 14. Female genital tract: Carcinoma cervix, Carcinoma endometrium
- 15. Leiomyoma, Ovarian tumours
- 16. Gestational trophoblastic disease
- 17. Breast
- 18. Thyroid
- 19. Bone and soft tissue tumours
- 20. Skin
- 21. CNS tumours

#### **CLINICAL PATHOLOGY**

- 1. Urine analysis: Interpretation of physical, chemical and microscopic examination results
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- 4. CSF examination: Lecture demonstration and interpretation of reports
- 5. Body fluids: Interpretation of serous effusion reports
- 6. Interpretation of kidney function tests
- 7. Investigations in jaundice
- 8. Investigations in diabetes mellitus

#### AUTOPSY

Indications and techniques, autopsy findings in common conditions like myocardial infarction, cirrhosis, portal hypertension, bronchogenic carcinoma, miliary tuberculosis, renal cell carcinoma etc.

#### LIST OF SPECIMENS

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- 2. Vesicular mole (hydropic change)
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- 6. Anthracosis
- 7. Hemochromatosis- Prussian blue reaction
- 8. Acute appendicitis
- 9. Serofibrinous pericarditis
- 10. Abscess- lung/ liver
- 11. Tubercular lymph node- caseation, matted lymph nodes
- 12. CVC Liver
- 13. Splenic infarct
- 14. Renal infarct
- 15. Myocardial infarction
- 16. Leiomyoma
- 17. Squamous papilloma
- 18. Hemangioma-Liver
- 19. Intestinal polyp
- 20. Squamous cell carcinoma-skin/cervix/penis
- 21. Adenocarcinoma- intestine
- 22. Melanoma
- 23. Enlarged lymph node: Hodgkin's disease
- 24. Benign ulcer-Peptic ulcer
- 25. Tubercular intestine
- 26. Amebic ulcer
- 27. Malignant ulcer- Carcinoma stomach
- 28. Cirrhosis
- 29. Hepatocellular carcinoma
- 30. Pulmonary tuberculosis
- 31. Miliary tuberculosis
- 32. Bronchectasis
- 33. Bronchogenic carcinoma
- 34. Atherosclerosis
- 35. Myocardial infarction

- 36. Small contracted kidney
- 37. Renal cell carcinoma
- 38. Hydronephrosis
- 39. Urinary calculi
- 40. Wilm's tumour
- 41. Carcinoma penis
- 42. Seminoma
- 43. Carcinoma cervix
- 44. Carcinoma endometrium
- 45. Dermoid cyst
- 46. Ovarian cystadenoma
- 47. Leiomyoma
- 48. Carcinoma breast
- 49. Goitre
- 50. Solitary thyroid nodule
- 51. Giant cell tumour
- 52. Fibroadenoma of breast
- 53. Lipoma
- 54. Metastasis of Liver/Lung
- 55. Fat necrosis
- 56. Meningioma

#### LIST OF SLIDES

- 1. Cloudy swelling-kidney
- 2. Fatty liver
- 3. Hyaline change in leiomyoma
- 4. Benign prostatic hyperplasia
- 5. Squamous metaplasia
- 6. Calcification
- 7. Amyloidosis- kidney
- 8. Nevus
- 9. Anthracosis
- 10. Acute appendicitis
- 11. Acute pyogenic meningitis
- 12. Tubercular lymphadenitis (Caseous necrosis, granuloma)
- 13. Tuberculoid leprosy
- 14. Lepromatous leprosy
- 15. Pulmonary edema
- 16. CVC lung /Liver
- 17. Thrombus
- 18. Renal infarct
- 19. Myocardial infarction
- 20. Capillary hemangioma
- 21. Squamous papilloma
- 22. Squamous cell carcinoma
- 23. Adenocarcinoma
- 24. Actinomycosis
- 25. Rhinosporidiosis
- 26. Cysticercosis
- 27. PS-Malaria

- 28. Eosinophilia
- 29. Neutrophilia
- 30. Microcytic anemia
- 31. Macrocytic anemia
- 32. Sickle cell anemia
- 33. Acute leukemia
- 34. Chronic myeloid leukemia
- 35. Hodgkin's disease
- 36. Peptic ulcer
- 37. Tubercular intestine
- 38. Adenocarcinoma intestine
- 39. Cirrhosis
- 40. Lobar pneumonia
- 41. Bronchopneumonia
- 42. Pulmonary tuberculosis
- 43. Atherosclerosis
- 44. Myocardial infarction
- 45. Crescentic glomerulonephritis
- 46. Chronic pyelonephritis
- 47. Renal cell carcinoma
- 48. Benign prostatic hyperplasia
- 49. Seminoma
- 50. Fibroadenoma
- 51. Carcinoma breast
- 52. Colloid goiter
- 53. Papillary carcinoma thyroid
- 54. Basal cell carcinoma
- 55. Melanoma
- 56. Lipoma
- 57. Osteogenic sarcoma
- 58. Giant cell tumour

#### **CASE-BASED LEARNING**

- 1. Microcytic anemia
- 2. Macrocytic anemia
- 3. Hemolytic anemia
- 4. Multiple myeloma
- 5. Hepatitis
- 6. Obstructive jaundice
- 7. Hemolytic jaundice
- 8. Nephrotic syndrome
- 9. Meningitis

#### CHARTS

- 1. Interpretation of microcytic anemia
- 2. Interpretation of macrocytic anemia
- 3. Interpretation of hemolytic anemia
- 4. Interpretation of acute leukemia
- 5. Interpretation of chronic leukemia

- 6. Interpretation of multiple myeloma
- 7. Interpretation of bleeding disorder
- 8. Interpretation of clotting disorder
- 9. Interpretation of Liver disorders
- 10. Interpretation of Renal disorders
- 11. Interpretation of Thyroid disorders
- 12. Interpretation of acute myocardial infarction
- 13. Pyogenic meningitis
- 14. Tubercular meningitis
- 15. Viral meningitis
- 16. Diabetes mellitus

#### f. Books recommended:

a) Text book of Pathology by Robbins

- b) Text book of General Pathology Part I & II by Bhende and Deodhare c) Clinical Pathology by Talib
- d) Text book of Pathology by Harsh Mohan e) Text book of Pathology by Muir

f) Haematology De Gruchi

g) IAPM text book of Pathology

Reference books:

a) Anderson's text book of Pathology Vol I & II

b) Oxford text book of Pathology Vol. I, II & III

c) Pathology by Rubin and Farber

d) Pathologic basis of Disease Robbins

#### MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK FORMAT / SKELETON OF QUESTION PAPER

1.	Course	e and Yea	r:	Secor	nd M	RRS	1							2. Subject Code	•	
				(applic	cable w	p.e.f.	, Septemb	er 2(	021 &	onward	ds examinatio	ons	)	2	·	
3.	Subjec	et (PSP	) :	PATH	IOLO	GY										
	_	(TT)	:	_	_	_										
4.	Paper	:	:	Ι	5.	Tot	tal Marks	:	100	6.	Total Time	:	3 Hrs.	7. Remu. (Rs)	: Rs. 300/- : Rs. 350/-	
9.	Web	Pattern	:	[]	10	). We	b Skeleto	n :	[]	11	. Web Syllabu	s :	[]	12. Web Old QP	: []	
Inst	Instructions:       SECTION "A" MCQ         1)       Put Image in the appropriate box below the question number once only.         2)       Use blue ball point pen only.         3)       Each question carries One mark.         4)       Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.															
							SECTI	ON	"A" N	1CQ (2	20 Marks)					
1.	Multi	ple Choi	ice Q	uestion	s (Tota	1 20 1	MCQ of	One	mark	each. A	At least 5 shou	ıld l	be scenari	io-based MCQ)		(20 x1=20)
	a)	b)	c)	d)	e)	f)	g) h)	)	i)	j)						
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2.	SA a)	AQ - AE	ICO	M Modu	ule (2.4	1 and	2.8)									(7x1=7)
3.	Sh a)	ort Ansv t	ver Q ))	c)	s (Any d)	y 3 oi	ut of 4)									(/x3=21)
4.	Lo a)	ong Ans	wer (	Questior	ns (Stru	icture	ed)								(	12x1=12)
5	Sh a)	ort answ b	er qu	uestions c)	(Any d)	y 4 ou	ut of 5) e)									(7x4=28)
6	Lo	ong Answ	ver Q	uestion	s (Stru	cture	d)									(12x1=12)
	a)															

## MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK FORMAT / SKELETON OF QUESTION PAPER

1.	Course and	Year	S (a	econd 1	MB e w.e	BS e.f. September	2021 & onw	vards	examinations,	)	2. Subject Code	:
3.	Subject (PS)	SP) T)	: P. :	ATHOI	LOC	GΥ						
4.	Paper :		:	II	5.	Total Marks	: 100	6.	Total Time	: 3 Hrs.	7. Remu. (Rs) 8. Remu. (Rs)	: Rs. 300/- : Rs. 350/-
9.	Web Pattern	1	: [	]	10.	Web Skeleton	:[]	11	. Web Syllabus	: [ ]	12. Web Old QP	:[]

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							SEC	CTIO	N "A'	' MCQ	(20 Marks)	
1.	Multip	ole Cho	ice Qu	estion	s (To	tal 20	MCÇ	) of O	ne ma	rk each	. At least 5 should be scenario-based MCQ)	(20 x1=20)
	a)	b)	c)	d)	e)	f)	g)	h)	i)	j)		
	k)	1)	m)	n)	o)	p)	q)	r)	s)	t)		

Instructions:	<ol> <li>Use blue/black ball point pen only.</li> <li>Do not write anything on the blank portion of the question paper. If written anything, such type of ac considered as an attempt to resort to unfair means.</li> <li>All questions are compulsory.</li> <li>The number to the right indicates full marks.</li> <li>Draw diagrams wherever necessary.</li> <li>Distribution of syllabus in Question Paper is only meant to cover entire syllabus within the stipula Question paper pattern is a mere guideline. Questions can be asked from any paper's syllabus into any Students against that the Question is out of syllabus.</li> </ol>	et will be ated frame. The question paper.
	been done.	astrioution nus
	() Use a common answerbook for all sections.	
2. Short Answ	ver Questions (Any 4 out of 5)	(7x4=28)
a) t	) c) d) e)	
3. Long Ansv a)	ver Question Structured	(12x1=12)
4 Short answ	er question (Any 4out of 5)	(8x3=24)
b) b	) c) d) e)	
5 Long Ansv a)	ver Questions (Scenario Based )	(12x1=12)

## Competency Based Medical Education Year: Second MBBS

Subject: Pathology Learning Resource Material

## **Books recommended:**

a)Text book of Pathology by Robbins b)Text book of General Pathology Part I & II by Bhende and Deodhare c)Clinical Pathology by Talib d)Text book of Pathology by Harsh Mohan e)Text book of Pathology by Muir f)Haematology De Gruchi g)IAPM text book of Pathology

## Reference books:

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# Maharashtra University of Health Sciences Nashik



# PATHOLOGY LOGBOOK FOR PHASE SECOND MBBS STUDENTS AS PER COMPETENCY BASED CURRICULUM

# Preface

The Medical Council of India has revised the undergraduate medical education curriculum so that the Indian Medical Graduate (IMG) is able to recognize **"Health for all"** as a national goal. He/she should also be able to fulfil his/her societal obligations. The revised curriculum has specified the competencies that a student must attain and clearly defined teachinglearning strategies for the same. With this goal in mind, integrated teaching, skill development, AETCOM and self-directed learning have been introduced. There would be emphasis on communication skills, basic clinical skills and professionalism. There is a paradigm shift from the traditional didactic classroom-based teaching to learning environments where there is emphasis on learning by exploring, questioning, applying, discussing, analysing, reflecting, collaborating and doing. The recognition of this need is enshrined by a greatly enhanced allocation of time to these methods and also the assessment techniques. With this view in mind the log book has been designed as per the guidelines of competency based curriculum.

Name	of the	College
------	--------	---------

Admission Year: \_\_\_\_\_

\_\_\_\_\_

## CERTIFICATE

This is to certify that,

Mr/Ms.\_\_\_\_\_

Roll No. \_\_\_\_\_\_ has satisfactorily attended/completed all assignments mentioned in this logbook as per the guidelines prescribed by Medical Council of India, for Phase II MBBS Competency Based Curriculum in the subject of Pathology.

Date: \_\_\_/\_\_\_/\_\_\_\_

Place: \_\_\_\_\_

**Teacher Incharge** 

Professor and Head Department of Pathology

#### Instructions

- 1. This logbook is prepared as per the guidelines of MCI for implementation of Competency based curriculum for Phase II MBBS students in the subject of Pathology.
- 2. Students are instructed to keep their logbook entries up to date.
- 3. Students also have to write reflections on AETCOM Module 2.4 and 2.8) Reflections should be structured using the following guiding questions:
  - What happened? (What did you learn from this experience)
  - So what? (What are the applications of this learning)
  - What next? (What knowledge or skills do you need to develop so that you can handle this type of situation?)
- 4. The logbook assessment will be based on multiple factors like
  - Attendance
  - Active participation in the sessions
  - Timely completions
  - Quality of write up of reflections
  - Overall presentation

## CONTENTS

S.No	Торіс	Signature of the teacher	Remarks

S.No	Торіс	Signature of the	Remarks
		teacher	

S.No	Торіс	Signature of the teacher	Remarks

## **ASSESSMENT OF LOG BOOK**

Sr.No	Description	Maximum Marks	Marks obtained	Signature of Teacher
1	Completion of Journal- I term	5		
2	Completion of Journal- II term	5		
3	Performance in case based learning	3		
4	Participation in seminars, research projects, quiz etc	3		
5	Reflections on AETCOM Module * 2.4 , 2.8	2		
6	Attendance Records	2		
7	Total marks obtained for log book	20		

\* AETCOM – Competencies for IMG, 2018, Medical Council of India.

# The following skills have been performed by the student and are certified by the teacher as follows:

		Date	Teacher's signature
1.	Preparation of peripheral smear		
2.	Interpretation of liver function tests and viral serology panel		
3	Interpretation of CSF in meningitis		

## PRACTICAL TOPICS IN PATHOLOGY

# Students are expected to write briefly about the topics and draw labelled diagrams of relevant slides in their journal, and get it assessed from their teacher.

#### **GENERAL PATHOLOGY**

- 1. Histological techniques, tissue processing, microscopy
- 2. Intracellular accumulations, calcification
- 3. Cellular adaptations
- 4. Disorders of pigment metabolism
- 5. Amyloidosis
- 6. Acute inflammation
- 7. Chronic inflammation and repair
- 8. Tuberculosis and leprosy
- 9. Hemodynamic disturbances
- 10. Neoplasia
- 11. Infections and infestations

#### HEMATOLOGY

- 1. Collection of specimens, anticoagulants, normal hematopoiesis
- 2. Hemoglobin estimation: Interpretation of report
- 3. Hematocrit and Erythrocyte sedimentation rate: Interpretation of report
- 4. Complete blood count: Interpretation of report (without flags) from automated cell counter
- 5. Preparation of peripheral smear and performing differential leukocyte count, interpretation of peripheral smear
- 6. Investigation of anemia
- 7. Investigation of leukemia
- 8. Plasma cell dyscrasia
- 9. Investigation of bleeding and clotting disorders
- 10. Blood banking: Performing blood grouping and interpretation of results

#### SYSTEMIC PATHOLOGY

- 1. Lymphoma
- 2. Splenomegaly
- 3. Gastrointestinal tract: Ulcers
- 4. Intestinal polyp and carcinoma intestine
- 5. Cirrhosis and hepatocellular carcinoma
- 6. Pneumonia, bronchiectasis
- 7. Pulmonary tuberculosis and bronchogenic carcinoma
- 8. Atherosclerosis
- 9. Left ventricular hypertrophy, myocardial infarction, lab diagnosis of MI
- 10. Rheumatic heart disease and infective endocarditis
- 11. Chronic contracted kidney, glomerulonephritis, pyelonephritis
- 12. Urinary calculi, Renal cell carcinoma,
- 13. Male genital tract
- 14. Female genital tract: Carcinoma cervix, Carcinoma endometrium
- 15. Leiomyoma, Ovarian tumours
- 16. Gestational trophoblastic disease
- 17. Breast
- 18. Thyroid

- 19. Bone and soft tissue tumours
- 20. Skin
- 21. CNS tumours

#### **CLINICAL PATHOLOGY**

- 1. Urine analysis: Interpretation of physical, chemical and microscopic examination results
- 2. Semen analysis: Lecture demonstration, interpretation of report
- 3. Basic cytological techniques: FNAC and exfoliative cytology (Lecture demonstration)
- 4. CSF examination: Lecture demonstration and interpretation of reports
- 5. Body fluids: Interpretation of serous effusion reports
- 6. Interpretation of kidney function tests
- 7. Investigations in jaundice
- 8. Investigations in diabetes mellitus

#### AUTOPSY

Indications and techniques, autopsy findings in common conditions like myocardial infarction, cirrhosis, portal hypertension, bronchogenic carcinoma, miliary tuberculosis, renal cell carcinoma etc.

## **Reflection on AETCOM 2.4**

Topic: Working in a health care team Date:

Signature of Teacher-in- charge

## **Reflection on AETCOM 2.8**

Topic: What does it mean to be a family member of a sick patient? Date:

## Signature of Teacher-in- charge

## Participation in Seminars, Research Projects, Quiz

S.No	Activity	Date	Signature of Teacher

Signature of Teacher-in- charge

## **Attendance Record of the Student**

S. No	Term	Theory (%)	Practical (%)	Signature of the Student	Signature of the Teacher
Α	l Term				
В	ll Term				
С	Overall attendance				

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.

## Details of attending extra classes [For poor attendance (if any)]

S.No	Date	Period	Total hrs	Signature of student	Signature of Teacher

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.

S.No	Exam	Theory	Practical including viva and	Signature of student	Signature of Teacher
			log book		
1	l Internal Assessment	/ 100	/ 50		
2	II Internal Assessment	/ 100	/ 50		
3	III Internal Assessment (Prelim)	/ 200	/ 100		
4	Internal Assessment marks	/ 400	/ 200		
5	Remedial exam (if any)	/ 200	/ 100		
6	Internal Assessment marks after conversion	/ 100	/ 100		

#### **Records of Internal Assessment examinations**

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.