

SECTION - B CURRICULA I 1. PHASE-I (FIRST M.B.B.S.)

A) Introduction

Asper the Regulations on Graduate Medical Education, the M.B.B.S. course is divided into phases-I, II, and III. During phase -I every student shall undergo a period of study of preclinical subjects for two semesters.

These subjects are-

- 1. Human Anatomy
- 2. Physiology including Bio-Physics
- 3. Biochemistry
- 4. Introduction to Community Medicine

At the end of second term there will be I professional University examination.

B) Time Distribution: -

The first two semesters (approximately 240 teaching days) shall be occupied in the phase I (pre-clinical) subjects and introduction to a broader understanding of the perspectives of medical education leading to delivery of health care.

Following minimum teaching hours are prescribed in various disciplines for two semesters.

Sr. No.	Name of The Subject	Number of Hours Allotted
1	Human Anatomy	650
2	Human Physiology	480
3	Biochemistry	240
4	Community Medicine	060
	Total	1430

Didactic lectures should not exceed 1/3 of the time schedule, 2/3 schedule should include practical and group discussions/seminars/tutorials. Learning processes should include living experiences and problem oriented approaches. Passing in phase -I is compulsory before proceeding to phase-II training.

C) Attendance: -

75% of attendance in a subjectfor appearing in the examination is compulsory provided he/she has 80% attendance in non-lecture teaching. I.e. seminars, group discussions, tutorials, demonstrations and practical's.

D) Mode of Examination: -

The University will conduct two Formative examinations in the form of Internal Assessment at departmental level and one Summative Examination at the end of completion of I phase. PATTERN OF INTERNAL ASSESMENT-

Two Formative examinations in the form of Terminal examination at the end of I semester and Preliminary examination at the end of second semester.



PATTERN FOR TERMINAL EXAMINATION-

	Theory Paper	Theory Viva	Total Theory	Practical's
MARKS	60	20	80	60

PATTERN FOR TERMINAL EXAMINATION-

	Theory Paper-I	Theory Paper-li	Theory Viva	Total Theory	Practical's
MARKS	50	50	20	120	60

CALCULATION OF INTERNAL ASSESMENT-

Cr No	Time of Firemination	Marks Allotted		
Sr.No.	Type of Examination	Theory	Practical	
1	TERMINAL	80	60	
2	PRELIMINARY	100	60	
	TOTAL MARKS	180	120	
DIVIDED BY		20 to convert it to	12 to convert it to	
		10	10	

Minimum 35 % in internal assessment in theory + practical i.e. (07 out of 20) to be eligible to appear for final examination.

E. University examination: -

There shall be one main university examination in a year at the end of second semester in the subjects of Anatomy, Physiology and Biochemistry.

Distribution of Marks: As per the following table

APPENDIX – A FIRST M.B.B.S. EXAMINATION

PAPER PATTERN FOR FINAL (UNIVERSITY EXAMINATION)

THEORY	MARKS		
PAPER –I	50		
PAPER-II	50		
THEORY VIVA	20		
TOTAL THEORY	120		
PRACTICAL	60		
TOTAL MARKS	180		

In each of the subjects a candidate must obtain 50% in aggregate with a minimum 50% in theory, 50% in Theory orals, 50% in practical and 50% in Internal Assessment.

The student must secure 50% marks in Internal Assessment also. However, even if the student secures minimum 35% marks, he/she will be allowed to appear for University Examination subject to compensating 15% marks more than minimum 50% in the concerned subject.



NATURE OF THEORY PAPER (PAPER - I & PAPER - II) FOR I MBBS.

Duration - 2 1/2 hrs Total Marks - 50

SECTION - A

Q. 1-MULTIPLE CHOICE QUESTIONS-10 (1 mark for each) 10 Marks

(Based on whole syllabus)

SECTION - B

Q.2 -LONG ANSWER QUESTION (Any two out of three) 2x8=16 Marks

(Based on topics from Must know group)

Q.3 - SHORT NOTES (Any Six out of Eight) 6x4=24 Marks

(Based on topics from Must know and Desirable to know group) (This will include minimum TWO CASE STUDIES from the list given)

MODEL TIME TABLE

PHASE -I

(Subject to modification as per local situation)

First Semester

DAY	9-10 AM	10-11 AM	11-01 PM	1-2 PM	2-3 PM	3-5 PM
Mon.	Biochemistry	Anatomy	Phy./Bio (P/T)	Lunch	Physiology	Anatomy
Tues.	Anatomy	Biochemistry	Physiology	Lunch	Anatomy	Anatomy
Wed.	Physiology	Anatomy	Phy /Bio (P/T)	Lunch	Physiology	Anatomy
Thu.	Anatomy	Physiology	Phy /Bio (P/T)	Lunch	Anatomy	Anatomy
Fri.	Biochemistry	Anatomy	Phy /Bio (P/T)	Lunch	Physiology	Anatomy
Sat.	Biochemistry	Anatomy	Anatomy (P/T)	Lunch	Physiology	Community
						Medicine
						field work

Second Semester

Jeconie	Jennester					
DAY	9-10 AM	10-11 AM	11-01 PM	1-2 PM	2-3 PM	3-5 PM
Mon.	Biochemistry	Anatomy	Anatomy (P/T)	Lunch	Physiology	Phy /Bio (P/T)
Tue.	Anatomy	Biochemistry	Anatomy (P/T)	Lunch	Anatomy	Physiology
Wed.	Physiology	Anatomy	Anatomy (P/T)	Lunch	Physiology	Phy /Bio (P/T)
Thu.	Anatomy	Physiology	Anatomy (P/T)	Lunch	Anatomy	Phy /Bio (P/T)
Fri.	Biochemistry	Anatomy	Anatomy (P/T)	Lunch	Physiology	Phy /Bio (P/T)
Sat.	Biochemistry	Anatomy	Anatomy (P/T)	Lunch	Physiology	Community Medicine field work

Note: Community Medicine lectures are arranged in consolation with other preclinical departments in the above things.



SUBJECTWISE SYLLABUS **HUMAN ANATOMY**

(I)Goal:

The broad goal of the teaching of undergraduate students in Anatomy aims at providing comprehensive knowledge of the gross and microscopic structure and development of human body to provide a basis for understanding the clinical correlation of organs or structures involved and the anatomical basis for the disease presentations.

(II)Objectives

A-Knowledge:

At the end of the course the student shall be able to

- (a) Comprehend the normal disposition, clinically relevant interrelationships, functional and cross-sectional anatomy of the various structures in the body
- (b) Identify the microscopic structure and correlate elementary ultra-structure of various organs and tissues and correlate the structure with the functions as a prerequisite for Comprehend the basics of advanced teaching in anatomy as **ENDOSCOPIC ANATOMY**

B-Skills:

- (c) Understanding the altered state in various disease processes.
- (d) Comprehend the basic structure and connections of the central nervous system to analyse the integrative and regulative functions of the organs and systems. He/she shall be able to locate the site of gross lesions according to the deficits encountered.
- (e) Demonstrate knowledge of the basic principles and sequential development of the organs and systems; recognize the critical stages of development and the effects of common teratogens, genetic mutations and environmental hazards. He/she shall be able to explain the developmental basis of the major variations and abnormalities.

At the end of the course the student shall be able to;

- (a) Identify and locate all the structures of the body and mark the topography of the living anatomy.
- (b) Identify the organs and tissues under the microscope.
- (c) Understand the principles of karyotyping and identify the gross congenital
- (d) Understand principles of newer imaging techniques and interpretation of CT scan sonogram etc.
- (e) Understand clinical basis of some common clinical procedures i.e. intramuscular and intravenous injection, lumbar puncture and kidney biopsy etc.

C-Integration:

From the integrated teaching of other basic sciences, student shall be able to comprehend and regulation and integration of the functions of the organs and systems in the body and thus interpret the anatomical basis of disease process.



(III) Detail syllabus of Human Anatomy is given under following heads.

- A) Introduction-
- B) General Anatomy
- C) Regional Anatomy

1 - Upper limb - Lower limb Ш Ш - Abdomen IV - Thorax

- Head Face Neck V V١ - Spinal Cord & Brain

- D) Micro-Anatomy 1 - General Histology - Systemic Histology Ш
- E) Developmental Anatomy

Τ - General Embryology Ш - Systemic Embryology

- F) Genetics
- G) Radiological Anatomy, USG, CT, MRI
- H) Surface Anatomy, Living & Marking
- I) Sectional Anatomy
- J) Books recommended

DETAIL SYLLABUS OF HUMAN ANATOMY

A) INTRODUCTION-

Total lecture classes -----01

Topics to be covered- students must know-Significance of Anatomy in Medical Science, subdivisions of the subject. Anatomical position, Anatomical planes, commonly used terminologies used in Gross Anatomy, Histology, Embryology, For hollow organs, for solid organs, to indicate the side, for describing muscle, for describing movements of joints.



B) GENERAL ANATOMY-

Total dissection hrs.—14					
Total LCD hrs.—02 Topics to be covered					
Nicety Know					
<u> </u>					
Appendages –					
nails, hair.					
Skin grafting					
Various classes					
of levers.					
Neuromuscular					
junction.					
Tendon synovial					
sheath.					
Haemorrhage,					
Arteriosclerosis.					
Blood brain					
barrier, Reflex					
arc					
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		Autonomic nervous system- Sympathetic-	
		Sympathetic ganglia, postganglionic fibres	
		Parasympathetic-Cranial outflow, Sacral	
		outflow.	
5	General	Bones-Definition, functions, organic and	Medicolegal and
	Osteology	inorganic components, various types of	anthropological
		classification, gross structure of long bone,	aspects.
		periosteum, parts of young bone, types of	Bone marrow
		epiphysis, blood supply of long bones.	Osteoporosis,
		Ossification- types, primary centre, secondary	Osteomalacia,
		centre, laws of ossification, epiphysis plate.	Osteodystrophy,
		Fracture, rickets, scurvy.	Osteopenia,
			Osteomyelitis,
			Osteosarcoma,
			Bone marrow
			aspiration, bone
			grafting.
6	General	Joints-Definition, General features of joint,	Kinesiology
	Arthrology	Types of classification-structural, functional	Arthritis,
		and regional.	neuropathic
		Structural classification-fibrous, cartilaginous	joint.
		and synovial.	
		Functional classification-synarthrosis,	
		amphiarthrosis and diarthrosis.	
		Regional classification- skull type, vertebral	
		and limb type.	
		Synovial joint- structure, axis of movement,	
		classification of synovial joints-according to	
		shape, axes of movement and morphology.	
		Blood supply and nerve supply of the joints.	
		Applied anatomy- dislocation, sprain.	
7	Introduction	Definition	Age
	to	Classification	determination
	Osteology	Terminology	
		Functions	
		Ossification	



DISSECTION-GgeneralAnatomy: Total Hours- 14

Sr. No.	Topic	Hours
1	Introduction to Dissection-Skin and Fascia	4
2	Introduction to Dissection-Blood Vessels, Lymphatics and lymph nodes	4
3	Introduction to Dissection-Muscles, Bone and Joints	6

A) GENERAL EMBRYOLOGY-

	Total Lectures – 16					
Sr.						
No .	Topic	Must Know	Nice to Know			
1	Introduction	Stages of Human Life	The law of			
		Prenatal – Zygote, Pre-embryonic,	recapitulation,			
		Embryonic, foetal, birth events	"Critical period",			
		Postnatal – Neonatal, infancy, childhood,	malformations,			
		prepubertal, pubertal, adolescent, adult –	USG,			
		young, middle age, old age, death events	Amniocentesis,			
		Phylogeny, Ontogeny, Trimester, Viability,	Chorionic Villus			
		abortion, miscarriage, medical termination of	Biopsy,			
		pregnancy, conceptus, abortus	Fetoscopy, etc.			
		Terms of reference: e.g. Cranial, Rostral,	Teratology,			
		Caudal, Dorsal, Ventral, Lateral, Medial,	Intrauterine			
		Median, Planes of section.	surgery,			
			History of			
			Embryology			
2	Cell Division	Types – Mitosis: stages, events occurring,	Cell cycle,			
		end result, non-disjunction and anaphase lag	cyclines and cdk,			
		Meiosis: stages, prophase I detailed, events	tumour formation,			
		occurring, end result, non-disjunction –	Mosaicism			
		aneuploidy, polyploidy, anaphase lag				
	Gametogenesis:	Definition, Stages, Spermiogenesis, Normal	Sperm bank,			
		sperm count, Azoospermia, Oligospermia,	Ovum bank, IUI			
3		structure, function and viability of sperm,	(Intra Uterine			
	Spermatogenesi	transport of sperms factors affecting	Insemination),			
	S	spermatogenesis, Hormonal control of	ICSI			
		spermatogenesis, Capacitation of sperms	(Intra ytoplasmic			
			Sperm Injection),			
			Teratogenic			
			influences.			



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5	Menstrual Cycle	Definition, Stages, Ovarian cycle, - Definition, Stages ovarian follicles, Ovulation – Definition, Time, Hormonal control, Detection, Clinical significance, Structure, Function and viability of ovum, Factors affecting Oogenesis, Hormonal control of oogenesis, viability, Transport of ovum, Difference between spermatogenesis and oogenesis. Definition, Structure of endometrium, Phases – Menstrual, Proliferative, secretory, Hormonal control, correlation with ovarian cycle, ovarian cycle, Concept of first day of last menstrual period, Menarche, Menopause, Abnormalities of menstrual cycle.	Menorrhagia, Oligomenorrhoea, Polymenorrhoea,
6	Fertilization	Definition, events occurring, sperm capacitation, Normal site of fertilization, Acrosome reaction, Zona reaction, vitelline block, Effects of fertilization, Sex determination, methods of contraception, infertility, Assisted reproductive technology.	Pregnancy tests, pathogenesis, Surrogate motherhood; Social significance Of "Sex-ratio", ethics and responsibility, cryopreservation of embryos.
7	Development in First Week	Cleavage – Definition, Type, Compaction, Morula, Blastocyst, Implantation – Definition, Normal site, Stages, Type, Decidua reaction, Normal site, Abnormal sites, Ectopic pregnancy, Placenta praevia.	"Abortion"; Chorionic Gonadotrophin – Pregnancy test, Inhibition of implantation.
8	Development in Second Week	Epiblast, Hypoblast, Amnion, Chorion, Yolk sac, Extraembryonic mesoderm and coelom, Cytotrophoblast, Syncytiotrophoblast, Fetal membranes, Chorionic villi, Bilaminar disc, Prochordal plate.	Mosaicism, Chimera.
9	Development in Third Week	Gastrulation , Primitive streak - formation and significance, Notochord – formation, functions, remnants, Neurulation - Neural	Signs of pregnancy in the first trimester,



		tube and its fate, Neural crest cells - their fate, Development of somites, Intraembryonic coelom, Allantois, Inductive significance of structures, congenital malformations – Sacrococcygeal Teratoma, neural tube defects, Spina bifida, Meningocele, anencephaly.	Role of teratogens, Alpha-fetoprotein levels.
10	Intraembryonic Mesoderm	Formation, Division – Paraxial mesoderm – somites formation, number of pairs, its division and fate, clinical significance, fate of intermediate and lateral plate mesoderm, germ layer derivatives.	Molecular regulation of somite Differentiation.
11	Fourth – Eight Week Development	Folding of the embryo: Head fold, tail fold, lateral folds, Orientation of structures before and after folding, changes occurring with folding, defects in folding – Ectopia cordis, Ectopia vesicae, Derivatives of germ layers, critical period of development.	Estimation of foetal age, ultrasound examination of foetus, Relative proportion of body segments, Details Of tissue differentiation and function, Factors influencing foetal growth.
12	Changes in Trophoblast	Development of placenta, Placental circulation, Placental membrane, Functions ofplacenta, Types of placentae	Placenta as an allograft, uterine growth during pregnancy, parturition
13	Fetal Membranes	Chorion – Formation, chorionic villi, Chorion frondosum and leave, Function, fate Amnion-formation, cavity, amniotic fluid formation, amount of fluid at term, Hydramnios, oligamnios, amniocentesis, functions, fate Yolk sac – formation, primary, secondary and tertiary yolk sac, fate, function, Allantois; Decidua;	Rh incompatibility, Haemolytic disease of newborn, Chorion Villus biopsy, trophoblastic Tumour



		Umbilical cord – formation,	
		length, contents, abnormalities	
14	Multiple	Twins- monozygotic, dizygotic	Conjoint twins,
	Pregnancies and	Teratogenesis – enumeration of factors	Triplets, twin
	Teratogenesis	causing congenital malformations, concept	transfusionsyndro
		of critical period.	me,
			superfecundation,
			superfetation.
15	Body Cavities,	Coelomic cavity, Subdivisions, related parts	Diaphragmatic
	Primitive	i.e. cardiogenic area, Septum Transversum,	hernias,
	Mesenteries and	Somatopleure, Splanchnopleure, Mesentery -	respiratory
	Diaphragm	formation, functions, fate, development of	distress
		diaphragm	

D) GENERAL HISTOLOGY-

	Total Lectures 11			
Sr.No.	Topic	Must Know	Nice to Know	
1	Microscope	Light microscope: Parts, Magnification,	Electron	
		Resolution.	microscope, Micro	
			techniques, H & E	
			staining.	
2	Cytology	Cell, Cytoplasm and nucleus,	Specialisations of	
		Cytomembranes, Unit membrane, Cell	cell surface,	
		organelles.	Sarcoplasmic	
		Nucleus- Structure, nuclear envelope,	reticulum of muscle,	
		chromatin, nucleolus	Endocytosis,	
			Exocytosis,	
			movement of	
			microvilli, Barr	
			bodies	
3	Epithelial	Definition, Classification, Structure of	Nutrition, Renewal,	
	Tissue	various types & Subtypes of epithelia.	Innervation, Metapla	
		Surface modifications -	sia	
		Cilia; Microvilli; Stereocilia;		
		Cell junctions and junctional complexes		
		Glands- Classification; Unicellular and		
		Multicellular;		
		Exocrine, Endocrine, Paracrine.		
		Apocrine, Merocrine, Holocrine; Exocrine:		
		Simple, Compound; Tubular, alveolar,		
		tubuloalveolar, Serous, Mucous, Mixed.		
4	Connective	Classification, Structure, Fibres, Ground	Glycosaminoglycans	



	Tissue	Substance, Cells,	,
		Loose Areolar Tissue,	Synthesis of
		Adipose Tissue.	Collagenfibres
5	Cartilage	Hyaline (Costal) Section, Hyaline (Articular)	Growth: Interstitial,
		Section, Fibrous Section,	Appositional
		Elastic Section,	
		Perichondrium, Functions	
6	Bone	Compact, Cancellous, bone; Ossification,	Endochondral
		Woven, Lamellar bone, Periosteum, Osteons,	Ossification,
		Volkmann's canals	Intramembranous
		Developing bone LS	Ossification
7	Muscle	Skeletal muscle, Smooth, (Plain) muscle,	Innervation,
	Tissue	Cardiac muscle Intercalate disc, Syncytium,,	Motor end plate,
		Sarcomere, I and A bands, Myofibrils,	Red fibres,
		myofilaments, Actin, Myosin, Troponin,	White fibres,
		Tropomyosin, Sarcoplasmic Reticulum, "T"	Regeneration
		tubules, Triads.	
8	Nervous	Neurons, types,	Meissner's
	Tissue	Neuroglia, types,	corpuscles, Pacinian
		Myelinated nerve fibre LS,	corpuscle, Synapses
		Non-myelinated nerve fibre,	
		Peripheral nerve T.S,	
		Nodes of Ranvier	
9	Blood	Classification,	Diapedesis,
	Vessels	Large sized (Elastic)artery Medium	Blood Brain Barrier,
		sized(Muscular) artery,	Thermoregulation
		Arteriole; Capillary, Sinusoid,	
		Medium sized vein TS	
10	Lymphoid	T cells, B cells;	Blood-Thymus
	Tissue	Mucosa Associated Lymphoid Tissue	Barrier, Open and
		(MALT)	Closed Circulation
		Humoral immunity,	in the Spleen
		Cell mediated immunity,	
		Lymph node section,	
		Thymus section,	
		Spleen section,	
		Tonsil section	
11	Integumenta	Skin - Types; Epidermis and	Renewal of
	ry System	dermis; variouscells, Sebaceous& Sweat	epidermis, Acne
		glands, Erector pili muscle, Appendages of	
		skin.	



D) SUPERIOR EXTREMITY-

Total lectures hrs08
Total dissection hrs.—42
Total LCD hrs08
Topics to be covered.

	Topics to be covered.		
Sr.	Name of The	Must Know	Nice to Know
No.	Topic		
1	Introduction	Limb buds, dermatomes	
2	Mammary gland	Gross features, blood supply, lymphatic	Mammography,
		drainage, applied anatomy- mastitis,	fine needle
		fibroadenoma, Paude-orange.	biopsy,
			mastectomy
3	Axilla	Definition, boundaries, contents, axillary	Axillary sheath,
		artery, brachial plexus, axillary lymph nodes.	clavipectoral
		Brachial plexus- formation, relations,	fascia.
		branches, erb's paralysis, klumpke's	
		paralysis, winging of scapula.	
4	Nerves of upper	Musculocutaneous nerve- Root value,	Intercostobrachial
	limb	formation, course, relations, branches and	nerve.
		applied anatomy.	Cutaneous
		Axillary nerve - Root value, formation,	innervations of
		course, relations, branches, applied anatomy	upper limb.
		and Hilton's law.	Quadrilateral
		Median nerve- Root value, formation,	space syndrome.
		course, relations, branches, and applied	Median nerve
		anatomy-hand of benediction, pointing index,	entrapment.
		ape thumb and carpal tunnel syndrome.	
		Radial nerve-Root value, formation, course,	
		branches, distribution and applied anatomy-	
		lesion at axilla, arm. Posterior interosseous	
		nerve. Wrist drop, Saturday night palsy.	
		Ulnar nerve -Root value, formation, course,	
		relations, branches, distribution and applied	
		anatomy-claw hand, ulnar paradox.	
		Ulnar nerve in hand. Posterior interosseous	
		nerve.	
5	Joints of upper	Shoulder girdle -Bones contributing, joints	Mid-carpal joint,
	limb	involved, ligaments, movements and applied	carpo-metacarpal
		anatomy.	joints,
		Shoulder joint - Classification, peculiarity,	interphalangeal
		articulating surfaces, ligaments, factors	joint.



		D. f. Paul University	
		stabilizing the joint, movements, applied	Painful arc
		anatomy- dislocation, rotator cuff tendinitis,	syndrome.
		frozen shoulder.	Radio-ulnar
		Analysis of abduction at shoulder joint.	bursitis.
		Elbow joint- Classification, bones	
		contributing and movements.	
		Wrist joint- Bones contributing, classification,	
		ligaments and movements.	
		Radio-ulnar joints- Superior, middle and	
		inferior, pronation and supination, applied	
		anatomy-pulled elbow, colles's fracture,	
		smith fracture.	
		Carpo-metacarpal joint of thumb-	
		Classification, bones contributing, ligaments,	
		movements, applied anatomy-Bennett's	
		fracture.	
6	Arteries of upper	Axillary Artery- formation, parts, course,	Variations of
	limb	relations, branches, applied anatomy.	division
		Brachial Artery- course, relation, branches,	Volkmann's
		clinical anatomy,	ischemic
		Radial Artery- Origin, course, relation,	contracture
		branches, clinical anatomy.	Aberrant ulnar
		Ulnar Artery- Origin, course, relation,	artery
		branches, clinical anatomy.	Superficial
			palmar arterial
			arch
			Deep palmar
			arterial arch-
7	Arm	Anterior compartment-	
		Muscles-Origin, Insertion, Nerve supply,	
		Blood supply, Action	
		Artery	
		Nerves	
		Cubital fossa-boundaries, contents, applied	
		anatomy	
		Posterior compartment-	
		Muscles origin, insertion, nerve supply,	
		blood supply, action	
		Artery	
		Nerves	
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8	Forearm	Front of forearm-	
		Muscles- Origin, Insertion, Nerve supply,	
		Blood supply, Action	
		Artery	
		Nerves	
		Relationship of structures on front of wrist	
		Back of forearm-	
		Muscles- Origin, Insertion, Nerve supply,	
		Blood supply, Action.	
		Artery	
		Nerves	
		Extensor retinaculum- Attachments,	
		compartments, functions.	
9	Hand	Flexor retinaculum- Attachments, relations	Dupuytren's
		Intrinsic muscles-	contracture.
		lumbricals, interossei- nerve supply, action	Space of Parona
		anatomical snuff box- boundaries, clinical	
		importance	
		Ulnar nerve in hand	
		Fascial spaces of the hand, carpal tunnel	
		syndrome	
		first carpometacarpal joint	
10	Myology	Muscles of arm and forearm and hand-	Volkmann's
		Attachments, nerve supply, action	ischemic
		Biceps Brachii- Origin, Insertion, Nerve	contracture
		supply, Blood supply, Action	Triangle of
		Deltoid- Origin, Insertion, Nerve supply,	Auscultation
		Blood supply, Action	
		Triceps brachii- origin, insertion, nerve	
		supply, action	
		Muscles of forearm -	
		Muscles of hand- lumbricals, interossei-	
		attachments, action, nerve supply	
		Thenar muscles attachments, action, nerve	
		supply	
		Muscular spaces- Quadrangular and	
		Triangular, contents, applied anatomy.	
11	Demonstrations	Identification , Region, Anatomical position,	Weight
		Parts, Joints formed, attachment, ossification.	transmission in
		Clavicle – Line of force transmission,	upper limb
		commonest site of fracture.	Clavicle – Eight
		Scapula – Movements of scapula.	shape Bandage
L		The state of seapara	



	I	T	Ι
		Humerus – Neck of Humerus, Nerve related	Scapula –
		to Humerus, carrying angle	Fracture scapula
		Radius and Ulna– Pronation and supination.	Humerus –
		Carpals – Identification of individual carpals	Supracondylar
		in an articulated hand, Carpal tunnel	spur, Angle of
		syndrome.	humeral torsion,
			Fracture
			Radius and Ulna-
			Colle's fracture,
			smith's fracture,
			Subluxation of
			head of radius
			Carpals,
			Metacarpals,
			Phalanges –
			Fracture
			scaphoid, Mallet
			finger, Bennett's
			fracture, Trigger
			finger.
12	Radiology	Principles of plain and contrast radiographs.	Estimation of age
	23	Identification of gross anatomical features in	by radiographs.
		plain and contrast radiographs.	3
		Diagnostic procedures, Technical details (e.g.	
		dye).	
		PLAIN X-RAY	
		Shoulder region	
		Arm	
		Elbow region	
		Fore arm	
		Wrist and hand	
13	Living Anatomy	Bony Landmarks-Palpation of:	Bony landmarks
		Clavicle, Spine of scapula, Inferior angle,	(palpation of:
		Coracoid process, Head and styloid processes	Epicondyles of
		of radius and ulna, Heads of metacarpals	humerus,
		(knuckles).	Olecranon
		Joints (demonstration of movements):	process of ulna,
		Shoulder joint, Elbow joint, Radio-ulnar	Pisiform, Hook
		joints, Wrist joint, 1st carpo-metacarpal joint.	of Hammate
		Muscles (demonstration of action):	Joints
		Principle of testing: Trapezius, Serratus	(demonstration of
		anterior, Pectoralis major, Deltoid, Biceps	movements):
		anterior, i ectorario major, Dettoia, Diceps	mo vements).



	Brachii, Brachioradialis, Brachialis,	Shoulder girdle,
	Supinators.	MP and IP joints
	Nerves: Ulnar	Muscles
	Vessels (Palpation of):	(demonstration of
	Axillary artery, Brachial artery, Radial artery	action):
	Others:	Principle of
	Anatomical snuff-box (boundaries)	testing:
		Latissimus dorsi,
		Extensors at the
		elbow,
		Supinators, Wrist
		extensors, Wrist
		flexors, Small
		muscles of the
		hand
		Nerves:
		Dermatomes
		Ulnar nerve
		thickening in
		Leprosy
		Others: Axillary
		groups of lymph
		nodes

DISSECETION-- SUPERIOR EXTRIMITY: Total Hours- 42

Sr. No.	Торіс	Hours
1	Surface anatomy & bony landmarks of upper limb Mammary gland	6
2	Pectoral region	4
3	Axilla- Axillary artery, Brachial plexus	6
4	Back & scapular region	4
5	Anterior compartment of arm	2
6	Posterior compartment of arm	2
7	Shoulder joint	4
8	Cubital fossa	2
9	Forearm & hand	4
10	Extensor compartment of forearm	4
11	Dorsum of Hand	2
12	Part completion	2



D) INFERIOR EXTREMITY-

Total lectures hrs09
Total dissection hrs—38
Total LCD hrs07
Topics to be covered

	Topics to be covered			
Sr No	Name of The Topic	Must Know	Niceto Know	
1	Introduction	Venous and Lymphatic drainage, long and short saphenous veins Applied anatomy,Calf pump,	Venous thrombosis	
		Trendelenburg's test Varicose veins Deep fascia of thigh/fascia lata		
2	Femoral triangle	Boundaries, contents, Femoral sheath, Femoral canal, Applied anatomy, Femoral hernia		
3	Adductor canal	Boundaries, Contents, Applied anatomy		
4	Medial side of thigh	Muscles- Attachments, Nerve supply, Action		
5	Gluteal region	Boundaries, Muscles, Structures under cover of Gluteus maximus, applied anatomy, Intramuscular injections	Trochanteric, Cruciate anastomosis	
6	Popliteal Fossa	Shape, Boundaries, Contents, Applied anatomy,		
7	Neurology	Nerves- Femoral, Sciatic, Obturator, Common Peroneal, Tibial Nerve Plexuses- Lumbar, Sacral, Femoral Nerve- Origin, Root value, Course, Branches, distribution, Applied Anatomy Sciatic Nerve- Origin, Root value, Course, Branches, Distribution, Applied Anatomy, Obturator- Origin, Root value, Course, Relation, Branches, Distribution, Applied anatomy, Nerve entrapment syndrome Common peroneal Origin, Root value, Course, Relation, Branches, Distribution, Applied Anatomy, foot drop		



	T		
8		Femoral Artery- Origin, Extent,	Intermittent
	limb	Course, Relations, Branches, Applied	claudication,
		Anatomy, used for ligation, passing a	Clinical
		cannula or catheter.	significance of
		Popliteal Artery - Origin, Extent,	anastomosis
		Course, Relations, Branches, Applied	around Knee
		Anatomy, Recording blood pressure	
		Anterior Tibial Artery Origin,	
		Extent, Course, Termination, Relations,	
		Applied Anatomy	
		Posterior Tibial Artery Origin,	
		Extent, Course, Termination, Relations,	
		Applied Anatomy	
		Dorsalis Pedis Artery- Origin, Extent,	
		Course, Termination, Relations, Applied	
		Anatomy, easily felt between tendons of	
		extensor hallucis longus and first tendon	
		of extensor digitorum longus.	
	T ' 4 C1 1' 1		C1
9	Joints of lower limb	Hip joint, Knee joint, Ankle joint,	Shenton's line
		Tibiofibular joints, Subtalar joint,	Subtalar joint
		Talocacaneonavicular joint	
		Hip joint- Classification, Peculiarity,	
		Articulating surfaces, Ligaments,	
		Relations, Blood supply, Movements,	
		Applied Anatomy- congenital	
		dislocation, coxa vera, Perthes' disease,	
		Osteoarthritis, fracture of neck of femur	
		Knee joint - Classification, Peculiarity,	
		Articulating surfaces, Ligaments,Bursae	
		around knee joint, Relations, Blood	
		supply, Movements, Locking and	
		unlocking, Applied Anatomy- Injuries	
		to menisci and collateral ligaments, knee	
		joint replacement	
		Ankle joint -Classification, Articulating	
		surfaces, Ligaments, Relations, Blood	
		supply, Movements, Applied Anatomy-	
		sprains, Dislocation,	
10	Myology	Muscles of front of thigh, back of	
		thigh, medial side of thigh-	
		attachments, blood supply, nerve	
		supply, action	



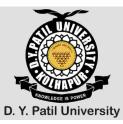
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		Muscles of front of leg- attachments,	
		blood supply, nerve supply, action	
		Muscles of lateral side- attachments,	
		blood supply, nerve supply, action	
		Inverters, Evertors of foot	
		Muscles of medial side of leg and	
		Dorsum of foot- attachments, blood	
		supply, nerve supply, action	
		Muscles of Back of leg- calf muscles,	
		Tendoachillis Reflex	
		Muscles of sole	
11	Arches of foot	Classification, Formation, Factors	Pes cavus
		responsible maintaining arches,	claw foot
		Functions, Applied Anatomy	equinovarus
12	Demonstrations	Identification, region, anatomical	Applied aspects:
		position; parts, joints formed,	walking and
		ossification.	transmission of
		Femur – Blood supply of head of	weight, Angle of
		femur, Neck shaft angle, Fracture neck	femoral Torsion,
		Femur.	bone grafts.
		Tarsals - identification of individual	
		tarsals in an articulated foot.	
		Calcaneus – Calcaneal spur	
13	Radiology	Principles of plain and contrast	
		radiographs.	
		Identification of gross anatomical	
		features in plain and contrast	
		radiographs.	
		Diagnostic procedures, Technical details	
		(e.g. dye).	
		Hip region	
		Knee region	
		Leg	
		Ankle region	
		Foot	
14	Living Anatomy	Bony Landmarks -Palpation of:	Bony landmarks
		Anterior superior iliac spine, Iliac crest,	-palpation of:
		Adductor tubercle, Head and neck of	Tubercle of the
		fibula, Lateral and medial malleoli,	iliac crest,
		Tibial tuberosity, Subcutaneous surface	Ischial
		of tibia.	tuberosity,
		Joints (demonstration of movements):	Greater
	i e	1	i



Hip,Knee,Ankle, Subtalar Joints	trochanter,
Muscles (demonstration of action):	Patella
Hip-Flexors, Extensors, Abductors,	Nerves:
adductors	Dermatomes,
Knee: Flexors, Extensors,	Sciatic,
Ankle: Dorsiflexors, Plantar flexors	Common
Subtalar: Invertors, Evertors	peroneal,
Nerves:	Obturator
Tibial, Common peroneal, Femoral	Thickening of
Vessels(palpation of):	common
Femoral, Popliteal, Dorsalis pedis,	peroneal nerve
Posterior tibial	in Leprosy
Tendons:	Others:
Semitendinosus, Semimembranosus,	Ligamentum
Biceps femoris, Iliotibial tract	patellae,
	Inguinal lymph
	nodes
	Tendons:

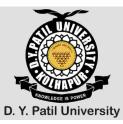
DISSECTION-- INFERIOR EXTREMITY: Total Hours- 38

Sr.	Торіс	Hours
No.		
1	Lower Limb- Surface Landmarks and Incision for dissection	2
2	Superficial fascia and Great Saphenous Vein	2
3	Anterior compartment of Thigh- Femoral Triangle	2
4	Muscles of Anterior compartment of Thigh and Femoral Nerve	2
5	Medial compartment of Thigh –Muscles and obturator nerve,	2
	Adductor canal	
6	Gluteal Region- Surface Landmarks and superficial & deep fascia,	2
	Gluteus maximus muscle, Tensor fascia lata	
7	Structure under gluteus maximus muscle	4
8	Popliteal fossa	4
9	Posterior compartment of thigh	2
10	Hip joint	4
11	Anterior and lateral compartment of leg	4
12	Posterior compartment of leg	2
13	Sole of foot	2
14	Knee Joint	2
15	Part completion	2



F) ABDOMENAND PELVIS

<u> </u>	<u>ABDOMENAND</u>	Total lectures hrs20	
		Total dissection hrs—84	
		Total LCD hrs10	
		Topics to be covered	
Sr.	Name of The	Must Know	Niceto Know
No.	Topic	Wast Milot	Triceto Kilow
1	Anterior	Umbilicus, inguinal ligament, inguinal canal,	Types of Inguinal
1	abdominal wall	rectus sheath, spermatic cord, testes with its	Hernia,
	abdommai wan	covering,	Tierma,
		surgical incisions of abdomen	
		Quadrants and regions of anterior abdominal	
		wall	
2	Spermatic cord	Beginning. end, course, contents, coverings,	
	1	applied anatomy, vasectomy	
3	Testes	External features, coverings, structure, blood	
		supply, venous drainage, nerve supply	
4	Peritoneum	Lesser omentum, omental bursa, epiploic	Peritoneal fossae
		foramen, peritoneal folds, Hepatorenal	laparoscopy
		pouch, pouch of Douglas	laparotomy
			internal hernia
5	Abdominal	Morphology, Relations, Blood supply,	Peptic ulcer
	organs	Lymphatics, Nerve supply, Applied	Splenic circulation
		Anatomy of following organs-	Splenic vascular
		Stomach	segments
		Spleen	Liver biopsy
		Liver	Duct system of
		Biliary apparatus	Pancreas
		Pancreas	Hydronephrosis
		Small Intestine	Pheochromocytoma
		Large intestine and vermiform appendix	surgical approach
		Kidneys, Ureters,	to Kidney stones
		Urinary Bladder- Mechanism of micturition	Gastroscopy
		Suprarenal glands.	Achlorhydria
		Endoscopic laparoscopy, Gastroscopy,	Splenectomy
		Colonoscopy, ERC-Endo retrograde Cysto	Liver transplant
		cholangiography	Renal transplant
			Cushing' disease
			Stones in ureter.
6	Pelvic organs	Morphology, Relations, Blood supply,	Cystoscopy
		Lymphatics, Nerve supply, Applied	Hysterectomy,
		Anatomy of following organs-	Cancer, Fistula,



Urinary Bla	dder and Urethra-Supports of Fissures, Piles	
	chanism of micturition, Stones	
in bladder	,	
Uterus		
	Uterine tubes- ovarian cyst,	
	, complications	
	male urethra.	
	Anal canal- supports of rectum.	
	y-Cystoscopy, Ureteroscopy	
	fossa, Pudendal canal, Perianal Ischiorectal hern	ia
	genital diaphragm, Male urethra,	ıa
penis, Periar	·	
	nterior abdominal wall Psoas abscess	
External obl		a
Internal obli		a
Rectus abdo	•	
Transverse a		
Actions)	ertion, Nerve supply	
Psoas major		
Quadratus lu		
Thoracoabdo		
Insertion,		
Relations,		
Developmen		
Thoracolum		
	ces and muscles	
	n, Anatomical position; Parts, Anatomical basis	
	ed, Description, Attachments, disc prolaps	
relation, Oss	_	ion,
Bony Pelv		
	etween male and Female pelvis. Lumbarisation.	
	plain and contrast radiographs. Oral	
Identification	n of gross anatomical features in cholecystogram	
	ntrast radiographs.	
Diagnostic	procedures, Technical details	
(e.g. dye).		
Plain X-ray.		
Barium mea		
Barium mea	follow through Barium enema.	
Intravenous		
muavenous	urogram	



12	Living	Bony Landmarks (Palpation of)
	Anatomy	Anterior superior iliac spine, Pubic tubercle
		Joints (demonstration of movements):
		Intervertebral
		Muscles (demonstration of action):
		Obliques, Transversus abdominis, Rectus
		abdominis
		Nerves:
		Dermatomes
		Others:
		Enlarged liver, spleen, kidneys, abdominal
		quadrants and regions; Position of
		superficial and deep inguinal rings; renal
		angle; McBurney's point.

DISSECTION -- ABDOMEN & PELVIS: Total Hours- 84

Sr.	TOPIC	Hours
No.	TOTIC	Hours
1	Anterior Abdominal Wall- Muscles, Rectus Sheath & Inguinal	8
_	Canal	
2	Male External Genitalia	6
3	Abdominal Cavity & Peritoneum	6
4	Stomach	4
5	Coeliac Trunk	4
6	Spleen	4
7	Duodenum	4
8	Pancreas	2
9	Portal Vein	2
10	Small Intestines	4
11	Large Intestines – Caecum & V. Appendix	4
12	Liver & Gall Bladder	4
13	Kidney, Ureter	4
14	Supra Renal Gland	2
15	Post wall of abdomen	4
16	Perineum & Perineal Pouches /Ischio rectal fossa, Pudendal canal	6
17	Urinary Bladder, Prostate, Urethra	6
18	Rectum & Anal Canal	4
19	Uterus, Vagina, Ovary, Broad ligament	4
20	Part Completion	2



G) THORAX

l			
		Total lectures hrs08	
		Total dissection hrs—40	
		Total LCD hrs06	
		Topics to be covered	
Sr.	Name of The Topic	Must Know	Nice to Know
No.			
1	Thoracic inlet	Boundaries, Partition at inlet, structures passing through inlet,	
2	Thoracic outlet	Boundaries, Diaphragm at outlet, Structures passing through Diaphragm, major openings and their levels, Minor openings in outlet, Importance of minor openings	
3	Thoracic wall	Typical intercostals space, boundaries and contents Intercostal muscles-extent, direction of fibres, nerve supply, blood supply, action Respiratory movements- Principles of movements, factors producing increase in diameter of thorax, respiratory muscles, bucket handle and pump handle movements	Pigeon chest
4	Pleura	Pulmonary and parietal pleura Pulmonary ligament Recesses of pleura Nerve supply, blood supply, lymphatic drainage of pleura Applied anatomy	Pleurisy Pneumothorax Pleural effusion Importance of recesses
5	Lungs	Features Fissures and lobes Root of lung- arrangement of structures in the root Relations at the root Broncho-pulmonary segments- applied anatomy	Segmental resection
6	Mediastinum	Boundaries, Divisions, Contents Middle, Superior and Posterior mediastina Boundaries, Contents, Applied Anatomy	Mediastinitis, Mediastinoscopy Mediastinal syndrome Coarctation of Aorta, Aneurysm



7	Pericardium	Fibrous and serous pericardium	Referred pain,
		Contents, Sinuses	Pericardial
		Blood supply, Nerve supply	effusion
8	Heart	Anatomical position, Location, surfaces	Fallot's' Tetralogy
		and borders, Interior of all chambers,	Patent Ductus
		conducting system of Heart, Vessels of	arteriosus
		heart	
		Right atrium, Left ventricle	
		Blood supply of Heart	
		Applied anatomy- heart sounds, cardiac	
		pain, tachycardia, Palpitation, aortic	
		incompetence, coronary angiography,	
		angioplasty	
9	Oesophagus	Curvatures, constrictions, Relations,	
		blood supply	
10	Thoracic duct	Course, Relation, Tributaries, Applied	
		Anatomy, Variations	
11	Osteology	Identification and parts of vertebrae,	Fracture ribs, flail
		ribs and sternum	chest,
		Identification of T1, T9, T10, T11,	compression
		T12, vertebrae and atypical ribs – 1, 2,	fracture of
		11, 12. Relations, Attachments,	vertebra, sternum
		Ossification.	puncture.
		Movements of ribs.	
12	Radiology	Principles of plain and contrast	
		radiographs.	
		Identification of gross anatomical	
		features in plain and contrast	
		radiographs.	
		Diagnostic procedures, Technical details	
		(e.g. dye).	
		X-ray Chest, Barium swallow	
13	Living Anatomy	Bony Landmarks-Palpation of:	
		Sternal angle, counting of rib spaces,	
		Joints (demonstration of movements):	
		Intervertebral	
		Muscles	
		(demonstration of action): respiratory	
		movements	
		Others:	
		Apex beat	



DISSECTION--THORAX: Total Hours – 40

Sr.	Торіс	Hours
No.		
1	Thoracic Wall – Intercostal Spaces	4
2	Thoracic Cavity – Mediastinum	6
3	Pleura	2
4	Lung	6
5	Pericardium	4
6	Heart	8
7	Post. Mediastinum	8
8	Part Completion	2

H) HEAD, NECK AND FACE

	n) head, neck and face						
		Total lectures hrs16					
	Total dissection hrs—116 Total LCD hrs14						
		Topics to be covered					
Sr.	Name of The Topic	Must Know	Nice to Know				
No.							
1	Deep cervical fascia	Layers of deep fascia,					
		attachments,					
		Carotid sheath- relations,					
		contents					
		Ansa cervicalis.					
2	Triangles of neck	Anterior Triangle- boundaries,	Surgical neck incision,				
		sub-division, contents,					
		Digastric Triangle- boundaries,					
		contents					
		Carotid Triangle boundaries,					
		contents, common carotid artery,					
		carotid sinus, external carotid					
		artery and its branches					
		Muscular triangle boundaries,					
		contents, infra hyoid muscles.					
3	Glands	Thyroid gland- Situation and					
		extent, Dimensions, Capsules,					
		Blood supply, Venous and					
		lymphatic drainage, Nerve					
		supply, Applied Anatomy					
		Parathyroid Gland- Position,					



	D. 1. Tauli Offiver Sity						
		blood supply, Nerve supply					
		Parotid Gland- External					
		features, Capsules, Relations,					
		Parotid duct, Blood supply,					
		Nerve supply, Lymphatic					
		drainage, Applied Anatomy					
		Submandibular gland-					
		Features, Superficial and deep					
		part, Wharton's duct, Blood					
		supply, Lymphatic drainage,					
		Nerve supply					
		Sublingual salivary gland-					
		Relations					
		Submandibular ganglion					
		Pituitary gland- Introduction,					
		Relation, Sub division, Blood					
		supply, Lymphatic drainage,					
		Nerve supply, Hormones,					
		Applied Anatomy.					
4	Scalp	Extent, structure, Blood supply,	Cephalhematoma				
	1	Venous and Lymphatic drainage,					
		Nerve supply, Applied Anatomy,					
		Dangerous area of face.					
5	Palate	Hard palate					
		Soft palate- Structure, Muscles,					
		Nerve supply, Blood supply,					
		Movements and functions,					
		Development, Applied					
		Anatomy, Cleft palate.					
6	Tongue	External features, Papillae of					
		tongue, Muscles of tongue,					
		Blood supply, Venous and					
		lymphatic drainage, Nerve					
		supply, Motor and Sensory nerve					
		supply, Applied Anatomy.					
7	Larynx	Situation and extent, Size,	Laryngoscopy				
'	Larynx	constitution of larynx, Cartilages	Tracheostomy				
		of larynx, Paired and unpaired	Laryngectomy				
		•	Laryngeetomy				
		Cavity of larynx, Intrinsic					
		muscles of larynx, Nerve supply,					
		action of muscles, Movements of					



		-	
		vocal folds, Blood supply and	
		venous drainage, Mechanism of	
		speech	
8	Pharynx	Dimensions, Boundaries, Parts,	Killian's dehiscence
		Structure, Muscles	Eustachian catarrh
		Waldeyer's lymphaticring,	
		Palatine tonsil- Blood supply,	
		Venous and Lymphatic drainage,	
		Nerve supply, Applied Anatomy	
		Deglutition- stages	
		Auditory tube - Bony and	
		cartilaginous part, Relation,	
		Blood supply, Venous drainage,	
		Nerve supply,Function, Applied	
		Anatomy	
9	Orbit	Features, Contents, Visual axis,	
		Extraocular muscles, Voluntary	
		and involuntary, Vessels of	
		orbit, Ophthalmic veins, Nerves	
		of orbit, Ciliary ganglion	
10	Eye ball	Cornea,	Graft, transplantation
		Ciliary body,	
		Lens, Cataract	
11	Styloid apparatus	Structures attached to styloid	
		process	
12	Nasal cavity	Nasal septum- Bony and	
		cartilaginous part, Blood supply,	
		Venous drainage, Lymphatic	
		drainage, Nerve supply	
		Lateral wall of Nose- Conchae	
		and meatuses, Features,	
		openings in meatuses, Blood	
		supply, Venous drainage,	
		Lymphatic drainage, Nerve	
		supply	
		Paranasal Sinuses- Frontal and	
		maxillary sinus, Openings,	
		Applied Anatomy, Sinusitis	
		Pterygopalatine fossa-	
		Boundaries, Communication,	
		contents	
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13	Ear	Tympanic Membrane- Surfaces,	Inner ear- bony and
		layers, Blood supply, Venous	membranous labyrinth,
		drainage, Lymphatic drainage,	semi-circular ducts, blood
		Nerve supply, Applied Anatomy	supply of labyrinth,
		Middle Ear- shape, size, parts,	vestibulocochlear nerve
		communication, contents,	
		boundaries, ear ossicles, muscles	
		of middle ear, functions, blood	
		supply, venous drainage,	
		lymphatic drainage, nerve	
		supply, applied anatomy, otitis	
		media	
		Mastoid Antrum- Boundaries,	
		Mastoid air cells, Blood supply,	
		Venous drainage, Lymphatic	
		drainage, Nerve supply, Applied	
		Anatomy, Mastoid Abscess	
14	Meninges	Dura mater-outer	
		Arachnoid mater- middle	
		Pia mater- inner	
		Layers of dura mater- Endosteal	
		and Meningeal	
		Falx cerebri, Falx cerebella,	
		Diaphragma sellae, Tentorium	
		cerebella	
15	Joints	Temporomandibular joint-	
		Type, articular surfaces,	
		ligaments, articular disc,	
		relations, blood supply, nerve	
		supply, movements, muscles	
		producing movements, applied	
		anatomy, dislocation	
16	Myology	Sternomastoid - origin, insertion,	
		nerve supply, action	
		Digastric-	
		Mylohyoid	
		Hyoglossus	
		Muscles of facial expression-	
		facial nerve palsy	
		Muscles of Mastication	
		Muscles of larynx	
		Muscles of Pharynx	
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		Muscles of Tongue			
		Muscles of Palate			
		Extra ocular muscles			
17	Angiology	Subclavian Artery- Origin, Parts,			
		Course, Relations, Branches			
		Internal carotid			
		External carotid			
		Vertebral			
		Lingual			
		Facial			
		Maxillary			
18	Venous sinuses	Emissary veins			
		Cavernous sinus- Relations,			
		Tributaries, Draining channels			
		Superior sagittal sinus-			
		Tributaries			
		Inferior sagittal sinus			
19	Veins	External jugular vein- Course,			
		Relations, Tributaries,			
		Internal Jugular Vein Course,			
		Relations, Tributaries,			
		Venous Drainage of Face- Facial			
		vein, Deep facial vein,			
		Dangerous area of face			
20	Neurology	Facial nerve- Functional			
		components, Nuclei, Course and			
		relation, Branches and			
		distribution, Applied Anatomy			
		Maxillary Nerve- Trunk,			
		Division, Relation, Applied			
		Anatomy			
		Mandibular Nerve- Course and			
		relation, Branches and			
		distribution, Applied Anatomy			
21	Osteology	Identification, Anatomical	Dental formula, Fractures		
		position, Parts, Foramina in the	of the skull, Age of		
		skull, Structures passing through	dentition, Cervical rib, Disc		
		them, Norma basalis, Verticalis,	Herniation.		
		frontalis, Lateralise, Occipitalis			
		and interior of cranial cavity			
		Foetal skull: Fontanelles,			
		Mandible: Age changes.			



22	Radiology	Principles of plain and contrast	Water's view
		radiographs.	
		Identification of gross	
		anatomical features in plain and	
		contrast radiographs.	
		Diagnostic procedures,	
		Technical details (e.g. dye).	
		X-ray skull plain	
		Plain X-ray cervical region	
23	Living Anatomy	Bony landmarks (Palpation of):	Bony landmarks
		Nasion, Glabella, Mastoid	(palpation of):
		process, Suprameatal Triangle,	Inion, Zygoma.
		Zygomatic arch, Angle of	Joints (demonstration of
		mandible, Head of Mandible,	movements):
		Joints (Demonstration of	Cervical joints
		movements):	Muscles (demonstration of
		Temporomandibular	action)
		joint, Atlanto-occipital joint	neck flexors and extensors
		Muscles (Demonstration of	Others:
		action):	Cervical lymph nodes.
		Of mastication, of facial	
		expression, sternocleidomastoid	
		Nerves:	
		Cranial nerves (I to XII) testing	
		Vessels (Palpation of):	
		Superficial Temporal Artery,	
		Facial Artery, Common Carotid	
		Artery, External Carotid Artery	
		Others:	
		Symphysis Menti, Hyoid bone,	
		Thyroid cartilage, Cricoid	
		cartilage, Tracheal rings,	
		Suprasternal notch, Transverse	
		process of atlas, Spine of	
		c7,thyroid gland	



DISSECTION-- HEAD, NECK, FACE: Total Hours-116

Sr. No.	Торіс	Hours
1	Introduction to skull	2
2	Scalp	2
3	Facial Muscles	4
4	Deep Cervical Fascia	6
5	Triangles of Neck	6
6	Posterior Triangle of Neck	4
7	Anterior Triangle of Neck	8
8	Deep Dissection of Neck - Thyroid Gland	6
9	Suboccipital Triangle	4
10	Removal of Brain from Cranial Cavity	6
11	Lacrimal Apparatus	2
12	Orbit & Extraocular Muscles and Ciliary ganglion	6
13	Parotid Region	6
14	Submandibular Region	6
15	Temporal & Infratemporal Region	8
16	TM Joint	4
17	Pharynx, Soft palate & Tonsil	6
18	Nasal Cavity & Paranasal Air Sinuses	6
19	Tongue	4
20	Larynx	8
21	Cranial Meninges & Dural Sinuses	6
22	Ear	4
23	Part Completion	2

I) CENTRAL NERVOUS SYSTEM

	ij certifice recitions					
Total lecture hrs09						
		Total dissection hrs.—50				
		Total LCD hrs06				
		Topics to be covered				
Sr.	Name of The Topic	Must Know Nice to Know				
No.						
1	Spinal cord	Features, Meningeal coverings,				
		enlargements, Cauda equina,				
		internal structure, Spinal nerves,				
		spinal segments, Nuclei, Tracts,				



		Descending and Ascending	
		tracts, Blood supply, Applied	
		anatomy	
2	Spinal cord tracts	Descending tracts - Pyramidal,	
	•	or corticospinal, Extrapyramidal	
		tracts,	
		Ascending tracts - Lateral,	
		spinothalamic tract	
3	Brain stem	Introduction, parts	
		Medulla oblongata- External	
		features, Internal structure,	
		Applied Anatomy	
		Pons - External features, Internal	
		structure, Applied Anatomy	
		Midbrain- Sub divisions,	
		Internal structure, Clinical	
		anatomy	
		Development of Brain stem	
4	Cranial nerve nuclei	Functional component	
		General somatic efferent nuclei	
		Special Visceral efferent nuclei	
		General Visceral efferent nuclei	
		General Visceral afferent nuclei	
		Special Visceral afferent nuclei	
5	Medulla oblongata	Transverse section through	
		lower part passing through	
		pyramidal decussation	
6	Pons	Section at level of facial	
		colliculus	
		TS of upper pons	
7	Midbrain	Section at the level of superior	
		and inferior colliculi	
8	Cerebellum	Location, External features,	
		parts, Morphological and	
		functional division, Connections,	
		Grey matter, Nuclei, Blood	
		supply, Functions, Applied	
		Anatomy	
9	Cerebrum	Introduction, Features, External	
		features, Sulci and Gyri,	
		Functional areas, Motor and	
		Sensory areas, Applied Anatomy	



10)	Thalamus	and	Basal	Structure	and	nuclei,	
		ganglia			Connections	and	functions,	
					Applied Anato	my,		
					Basal Ganglia-	Featur	res, Corpus	
					striatum, Ca	audate	nucleus,	
					lentiform nucle	eus		

DISSECTION-- CENTRAL NERVOUS SYSTEM: Total Hours -50

Sr.	Topic	Hours
No.		
1	Spinal Cord	4
2	Brain Stem	6
3	4 th Ventricle	4
4	Cerebrum – External features	6
5	Cerebrum – Functional Areas	2
6	Cerebellum	6
7	3 rd Ventricle & Lateral ventricle	6
8	Internal capsule & white mater of Cerebrum	4
9	Thalamus & Basal Ganglia	4
10	Sections of Brain	6
11	Part Completion	2

I) SYSTEMIC EMBRYOLOGY

	Total No. Of Lectures -21					
Sr.	r. Topic Must Know		Nice to Know			
No.						
1	Respiratory	Development of larynx, trachea,	Respiratory distress			
	System	bronchi, lungs, tracheo-oesophageal	syndrome, premature birth,			
		fistula	other anomalies			
2	Cardiovascular	Cardiogenic area	Development of			
	System	Endothelial heart tubes - parts,	Major veins, anomalies of			
		folding, walls, external appearance,	lymphatic system, clinical			
		sinus venosus, chambers of heart,	features of anomalies,			
		internal septation, Interatrial septum,	prosthetic valves, grafting,			
		transplantation, surgical				
		formation and fate, spiral septum,	correction			
		fate of each part of heart tube,				
		pericardium, pericardial sinuses,				
		septum transversum, aortic arches -				



fate, congenital anomalies, foetal circulation – path, shunts, changes after birth Congenital anomalies of heart – ASD, VSD, Fallot's tetralogy, PDA, Anomalies of arch of aorta Gut tube – derived from, parts, mesentery FOREGUT – derivatives – post laryngeal part oesophagus, stomach, duodenum, , artery, development of liver, pancreas and gall bladder, congenital anomalies Development of spleen and congenital anomalies MIDGUT – derivatives, artery, rotation and fixation, physiological herniation, effects of rotation, errors of rotation, Vitello-Intestinal Duct, Omphalocele, Meckel's diverticulum, caecum and appendix, congenital anomalies, HIND GUT –derivatives, artery, congenital anomalies, HIND GUT –derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary System Development of Kidneys – pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands Male Reproductive System First pronephric of ovary, uterus, fallopian tubes, cervix, vagina, ambiguous genitalia and anbiguous genitalia and anbiguous genitalia and ambiguous genitalia and and genitalia and ambiguous genitalia and ambiguous genitalia and ambiguous genitalia and and genitalia and ambiguous genitalia a			•	
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duodenum, , artery, development of liver, pancreas and gall bladder, congenital anomalies Development of spleen and congenital anomalies MIDGUT — derivatives, artery, rotation and fixation, physiological herniation, effects of rotation, errors of rotation, Vitello-Intestinal Duct, Omphalocele, Meckel's diverticulum, caecum and appendix, congenital anomalies, HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary Development of Kidneys — pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter — ureteric bud, derivatives, congenital anomalies, cloaca — urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis — gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			_	
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congenital anomalies MIDGUT — derivatives, artery, rotation and fixation, physiological herniation, effects of rotation, errors of rotation, Vitello-Intestinal Duct, Omphalocele, Meckel's diverticulum, caecum and appendix, congenital anomalies, HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary Development of Kidneys — pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter — ureteric bud, derivatives, congenital anomalies, cloaca — urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Development of Testis — gonadal Reproductive System Details of development of male urethra, female urethra urethra External genitalia, ambiguous genitalia and hermaphroditism External genitalia, ambiguous genitalia and hermaphroditism 6 Female Development of ovary, uterus, External genitalia,			congenital anomalies	
MIDGUT – derivatives, artery, rotation and fixation, physiological herniation, effects of rotation, errors of rotation, Vitello-Intestinal Duct, Omphalocele, Meckel's diverticulum, caecum and appendix, congenital anomalies, HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary Development of Kidneys – pronehros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Development of Testis – gonadal Reproductive Gystem testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			Development of spleen and	
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of rotation, Vitello-Intestinal Duct, Omphalocele, Meckel's diverticulum, caecum and appendix, congenital anomalies, HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary System Development of Kidneys – pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			rotation and fixation, physiological	
Omphalocele, Meckel's diverticulum, caecum and appendix, congenital anomalies, HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary System Development of Kidneys - pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter - ureteric bud, derivatives, congenital anomalies, cloaca - urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis - gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			herniation, effects of rotation, errors	
caecum and appendix, congenital anomalies, HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary System Development of Kidneys - pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter - ureteric bud, derivatives, congenital anomalies, cloaca - urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis - gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			of rotation, Vitello-Intestinal Duct,	
anomalies, HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary System Development of Kidneys - pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter - ureteric bud, derivatives, congenital anomalies, cloaca - urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis - gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			Omphalocele, Meckel's diverticulum,	
HIND GUT -derivatives, artery, congenital anomalies, cloaca, anal canal 4 Urinary System Development of Kidneys – pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			caecum and appendix, congenital	
congenital anomalies, cloaca, anal canal 4 Urinary Development of Kidneys – pronehros, mesonephros, metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis – gonadal ridge, processus vaginalis, descent of System External genitalia, ambiguous genitalia and hermaphroditism External penitalia, ambiguous genitalia and hermaphroditism External genitalia, ambiguous genitalia and hermaphroditism			anomalies,	
Canal			HIND GUT -derivatives, artery,	
4 Urinary System Development of Kidneys - pronehros, mesonephros, male urethra, female urethra			congenital anomalies, cloaca, anal	
System Kidneys – pronehros, mesonephros, male urethra, female metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies Male Reproductive System Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands Female Urethra External genitalia, ambiguous genitalia and hermaphroditism			canal	
metanephros, ascent of kidney, rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies Male Reproductive System Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands External genitalia and hermaphroditism	4	Urinary	Development of	Details of development of
rotation, blood supply, congenital anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,		System	Kidneys – pronehros, mesonephros,	male urethra, female
anomalies ureter – ureteric bud, derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			metanephros, ascent of kidney,	urethra
derivatives, congenital anomalies, cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive ridge, processus vaginalis, descent of System testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			rotation, blood supply, congenital	
cloaca – urinary bladder, urachus, urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System Pevelopment of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			anomalies ureter - ureteric bud,	
urethra, Pronephric and mesonephric ducts, congenital anomalies 5 Male Reproductive System System Bernal Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			derivatives, congenital anomalies,	
ducts, congenital anomalies 5 Male Reproductive System System Development of Testis – gonadal ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			cloaca – urinary bladder, urachus,	
5 Male Reproductive System System Reproductive			urethra, Pronephric and mesonephric	
Reproductive ridge, processus vaginalis, descent of testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			ducts, congenital anomalies	
System testis, anomalies in descent, mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,	5	Male	Development of Testis – gonadal	External genitalia,
mesonephric duct's derivatives and remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,		Reproductive	ridge, processus vaginalis, descent of	ambiguous genitalia and
remnants, development of seminal vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,		System	testis, anomalies in descent,	hermaphroditism
vesicle and prostate glands 6 Female Development of ovary, uterus, External genitalia,			mesonephric duct's derivatives and	
6 Female Development of ovary, uterus, External genitalia,			remnants, development of seminal	
			vesicle and prostate glands	
Reproductive fallopian tubes, cervix, vagina, ambiguous genitalia and	6	Female	Development of ovary, uterus,	External genitalia,
		Reproductive	fallopian tubes, cervix, vagina,	ambiguous genitalia and



	System	Paramesonephric duct – derivatives	hermaphroditism
		and remnants	
7	Pharyngeal	Ectodermal clefts- cervical sinus,	Other congenital anomalies
	Arches and	auricle	of face, oblique facial cleft,
	Face	Mesodermal derivatives— skeletal,	Treacher Collin's syndrome
		muscle mass, arterial arches,	
		pretrematic and post trematic nerves	
		Endodermal pouches – tubo –	
		tympanic recess, tonsil, thymus,	
		parathyroid, thyroid	
		Derivatives from floor of pharynx –	
		Tongue and its correlation with nerve	
		supply, congenital anomalies	
		Thyroid – development and	
		congenital anomalies	
		Development of palate – primitive	
		palate, secondary palate, cleft palate	
		Development of face – Mandibular	
		process, maxillary process,	
		frontonasal process, cleft lip	
8	Nervous	Neural tube— derived from,	Sequence of myelination of
O	System	flexures, parts, derivatives - spinal	tracts, relative shortening of
	System	cord and brain i.e. Fore brain, mid	spinal cord vis-à-
		brain, hind brain, ventricles,	visvertebral column,
		Histogenesis, functional classification	genetic and teratologic
			•
		of nuclear groups Congenital anomalies –	factors in neural tube defects
			defects
		anencephaly, Spina bifida,	
		Meningocele, Meningomyelocele,	
		hydrocephalus	
		Neural crest cell - derivatives	
9	Development	General organization, development	Development of choroid,
	Of	of lens and anomalies, retina, cornea,	eye lid, conjunctiva,
	Eye Ball	optic nerve, detachment of retina	lacrimal gland, coloboma of
			iris, congenital glaucoma,
			Cyclops
	Development	External	Internal ear
10	of Ear	Ear, middle ear	
11	Endocrine	Development of pituitary — Rathke's	Histogenesis
	Glands	pouch, neural tube extension,	
	l .	<u> </u>	



		Craniopharyngioma	
		Development of Suprarenal - cortex	
		from intermediate mesoderm,	
		medulla from neural crest cells, foetal	
		cortex, its fate, definitive cortex,	
		congenital anomalies	
		Thyroid and parathyroid –	
		thyroglossal duct, it's course,	
		derivatives, congenital anomalies,	
		pharyngeal pouches, caudal	
		pharyngeal complex	
12	Muscular	Myotomes, local differentiation,	Rare syndromes of
	System	myotonic fusion, splits and migration,	muscular defects and
		correlation with motor innervation,	genetic deficiencies
		common anomalies and anatomic	
		variations	
13	The Limbs	General Principles, Rotations -	Congenital malformations,
		dermatome distribution	Teratogenic influences
14	Integumentary	Development of epidermis, dermis,	Histogenesis, congenital
	System	epidermal ridges, sweat gland,	anomalies, development of
		sebaceous gland, mammary gland	tooth, hair, nails

J) SYSTEMIC HISTOLOGY

(د	STSTEIVIIC HIST		
	Total No. Of Lectures -15		
Sr.No.	Topic	Must Know	Nice to Know
1.	Respiratory	Olfactory mucosa;	Air Blood Barrier,
	System	Epiglottis; Trachea, Lung, Bronchus,	Double spirally
		bronchiole, alveolar duct, sac, alveoli,	arranged bronchial
		pulmonary type I and II cells	smooth muscle.
	Alimentary		
	System		
2	Oral Tissues	Lip, Tongue, Taste	Tooth,
		buds, Papillae; Salivary glands	Developing tooth,
			Striated duct,
			Ion transport
3	GI Tract	Basic organization - 4 layers,	Pernicious anaemia,
		Oesophagus with glands,	Ulcer,
		Stomach – Fundus: Chief cells, Parietal	Gastritis,
		cells, intrinsic factor;	Hirschsprung's
		Stomach Pylorus: Duodenum Brunner's	disease or
		glands,	Megacolon
		Small intestine - with Peyer's patch,	
		Appendix, Large intestine.	



4	Accessory	Pancreas: Exocrine, islets of Langerhans,	Liver as an
	Digestive	acinar cells, Centro acinar cells;	endocrine gland,
	Glands	Liver: Hepatic lobule, portal lobule; portal	Diabetes mellitus,
		acinus;	Cirrhosis of liver,
		Gall bladder	Gall stones
5	Urinary	Basic organization;	Juxtaglomerular
	System	Nephron - Parts, Podocytes,	Apparatus,
		Collecting system,	Urethra
		Kidney - Cortex Medulla, Ureter,	
		Urinary bladder.	
6	Male	Basic organization; Gonads, Tract,	Blood Testis
	Reproductive	Accessory glands,	Barrier, Stages of
	System	Testis section;	Spermatogenesis
		Epididymis section;	Penis, Seminal
		Vas deferens section;	vesicle
		Prostate section	
7	Female	Basic organization; Gonads, Tract,	Stages of maturation
	Reproductive	Accessory glands;	of ovarian follicle,
	System	Ovary - with Corpus Luteum;	Phases of
		Fallopian tube;	menstruation
		Uterus; Cervix; Vagina, Mammary gland	
		Active, & Passive.	
8	Endocrine	Pituitary:	Hypothalamo-
	System	Adenohypophysis; Neurohypophysis;	pituitary Portal
		Thyroid: Follicular, Para follicular cells;	system
		Parathyroid: Chief cells, Oxyphil cells,	Synthesis of thyroid
		Adrenal gland	hormone.
	Nervous		
	System		
9	Central	Basic organization;	Neuronal circuit of
		Cerebrum; Cerebellum	cerebellum
10	Peripheral	Sensory ganglia; Autonomic	Receptors -
		ganglia (sympathetic ganglion); Peripheral	Proprioceptors,
		nerve TS & LS	Exteroceptive,
			Introceptive
	Special		
	Senses		
11	Visual	Eyeball Cornea;	Keratoplasty,
		Sclerocorneal junction, Canal of	Eye donation,
		Schlemm;	Cataract
		Lens,	
		Retina, Optic nerve	



SECTIONAL ANATOMY

I) Superior extremity / Upper Limb

- a) Mid arm (Insertion of coracho brachialis) T.S.
- b) Hand Cross section

II) Inferior Extremity / Lower Limb

- a) Mid-thigh (Passing through adductor canal) T.S.
- b) T.S. of leg just below soleal line.
- c) Sagittal section of foot.

III) Abdomen

- a) T.S. at Trans pyloric plane (L1)
- b) Mid sagittal of pelvic region in males
- c) Mid sagittal of pelvic region in females

IV) Thorax

a) T.S. at sternal angle (T4)

V) Head Neck and Face

a) T.S. at C4 level

VI) Brain

- a) Spinal cord: Cervical, thoracic, lumbar, sacral
- b) Medulla oblongata: Sensory and motor decussation,

Mid olivary level.

- c) Pons Upper part & lower part
- d) Mid brain -

At level of sup. Colliculus. At level of inf. Colliculus.

Self-Dissected Learning (SDL)

Sr.No.	Topic
1	Lungs (Gross, Histology, Embryology)
2	Kidney (Gross, Histology, Embryology)
3	Abdominal wall incision
4	Palmar Spaces
5	Mid-Tarsal Joints



CASE BASE LEARNING

Sr.No.	Topic
1	Lower Limb -Varicose Vein
2	Upper Limb - lump in Mammary Gland
3	Thorax - Mediastinal shift
4	Abdomen - Appendicitis
5	Pelvis – Prolapse of Uterus
6	HNF – Bell's Palsy/Squint
7	Neuroanatomy - Cerebellar Ataxia
8	Lymphoid Tissue - Lymphoma
9	Pancreas - Diabetes
10	Thyroid –Goitre
11	Eye ball – Hypermetropia



DEPARTMENT OF ANATOMY THEORY – QUESTION PAPER PATTERN FOR PAPER I

[Head Neck Face, Central Nervous System, Upper Limb and Thorax; Including Systemic Histology, Systemic Embryology and Sectional Anatomy]

Total Marks: 50 Duration: 2 ½ hrs.

SECTION - A

Q.1 Multiple choice questions 10 questions 10 X 1 = 10 marks

(Based on whole syllabus)

SECTION - B

- Q.2 Long answer question (ANY TWO OUT OF THREE) 2x8=16 marks
- a) Head Neck Face and Central Nervous System
- b) Thorax
- c) Upper Limb
- Q.3 Short notes (ANY SIX OUT OF EIGHT) $6 \times 4 = 24 \text{ marks}$
- a) CNS
- b) Sectional Anatomy
- c) Systemic Histology
- d) Systemic Embryology
- e) Thorax
- f) HNF
- g) Upper Limb
- h) Systemic Embryology



DEPARTMENT OF ANATOMY THEORY – QUESTION PAPER PATTERN FOR PAPER II

[Abdomen, Pelvis, Perineum, Lower Limb; Including Systemic Histology, Systemic Embryology, Sectional Anatomy, General Anatomy, General Histology, General Embryology and Genetics]

Total Marks: 50 Duration: 2 ½ hrs.

SECTION - A

Q.1 Multiple choice questions 10 questions 10 X 1 = 10 marks (Based on whole syllabus)

SECTION - B

- Q.2 Long answer question (ANY TWO OUT OF THREE) $2 \times 8 = 16 \text{ marks}$
- a) Abdomen
- b) Pelvis
- c) Lower Limb
- Q.3 Short notes (ANY SIX OUT OF EIGHT)

 $6 \times 4 = 24 \text{ marks}$

- a) Perineum
- b) Sectional Anatomy
- c) Systemic Histology
- d) Systemic Embryology
- e) Genetics
- f) General Anatomy
- g) General Histology
- h) General Embryology

There is no change in the pattern of practical examination for preclinical subjects.



HUMAN BIOCHEMISTRY Human Biochemistry – Phase I M.B.B.S.

i) Goal :-

The broad goal of the teaching of undergraduate students in biochemistry is to make them understand the scientific basis of the life processes at the molecular level and to orient them towards the application of the knowledge acquired in solving clinical problems.

ii) **Objectives:-**

a) Knowledge

At the end of the course, the student shall be able to:

- 1) describe the molecular and functional organization of a cell and list its subcellular components;
- 2) delineate structure, function and inter-relationships of biomolecules and consequences of deviation from normal;
- summarize the fundamental aspects of enzymology and clinical application wherein regulation of enzymatic activity is altered;
- describe digestion and assimilation of nutrients and consequences of malnutrition;
- 5) integrate the various aspects of metabolism and their regulatory pathways;
- explain the biochemical basis of inherited disorders with their associated sequelae;
- describe mechanisms involved in maintenance of body fluid and pH homeostasis; 7)
- outline the molecular mechanisms of gene expression and regulation, the principles of genetic engineering and their application in medicine.
- 9) Summarize the molecular concept of body defences and their application in medicine;
- 10) Outline the biochemical basis of environmental health hazards, biochemical basis of cancer and carcinogenesis;
- 11) familiarize with the principles of various conventional and specialized laboratory investigations and instrumentation analysis and interpretation of given data;
- 12) suggest experiments to support theoretical concepts and clinical diagnosis;

b) SKILLS

At the end of the course, the student shall be able to:

- 1) make use of conventional techniques / instruments to perform biochemical analysis relevant to clinical screening and diagnosis;
- 2) analyse and interpret investigative data;
- Demonstrate the skills of solving scientific and clinical problems and decision making.



c) INTEGRATION

The knowledge acquired in biochemistry shall help the students to integrate molecular events with structure and function of the human body in health and disease.

A) Total no. of teaching hours allotted to Human Biochemistry – 240 hrs.

B) Theory examination:

There will be two papers, each of two & half hours duration. Each paper will be of 50 marks with two sections-A & B. Short notes from each paper will consist of **at least two case studies**.

C) Paper wise distribution of theory topics :

Structural formulae are not obligatory.

Paper – I: 50 marks 2 ½ hrs duration

<u>Ist M.B.B.S. Biochemistry Paper – I</u>

Must know:

- **01. Chemistry of Proteins:** General nature of amino acids, various ways of classification of amino acids, biologically important peptides, classification, properties and biological importance of proteins. Structural organization of proteins. Plasma proteins-functions, clinical significance of various fractions, methods of separation (only principle).
- **O2. Metabolism of proteins:** Biochemical aspects of digestion & absorption of proteins. Fate of amino acids in the body (Deamination, Transamination, Transdeamination, Decarboxylation), Fates of ammonia (Disposal of ammonia through glutamate, glutamine and urea), Metabolism of glycine, aromatic & sulphur containing amino acids and their inborn errors.
- **03. Enzymes:** General nature, classification of enzymes, specificity & mode of action of enzymes, factors affecting enzyme activity. Enzyme inhibitions (kinetics not required). Clinical importance (Diagnostic, therapeutic and as a laboratory reagent) of enzymes and isoenzymes. Regulation of enzymatic activity.
- **04. Biological oxidation:** General concept of oxidation & reduction. Role of enzymes and coenzymes. Electron transport chain. Substrate level and oxidative phosphorylation, theories of oxidative phosphorylation. Role of uncouplers and inhibitors.
- **05. Haemoglobin:** Chemistry & functions of haemoglobin. Types of normal & abnormal haemoglobins (HbS, HbM & Thalassemia). Haemoglobin derivatives (Oxyhaemoglobin, carboxyhaemoglobin, carbaminohaemoglobin, methaemoglobin, haemin and haematin). Synthesis and breakdown of haemoglobin, Porphyria (in brief), Fate of bilirubin, different types of Jaundice.
- **06. Vitamins:** General nature, classification, sources, active forms and metabolic role, deficiency manifestations, daily requirement and hypervitaminosis.



- 07. Chemistry and Metabolism of Purines and Pyrimidines: Nucleosides and nucleotides. Biologically important free nucleotides, Biosynthesis of purines(sources of ring & regulatory steps only, conversion of IMP to GMP & AMP) and salvage pathway, Biosynthesis of pyrimidines, Breakdown of purines and pyrimidines, Gout, Lesch-Nyhan Syndrome.
- 08. Chemistry of nucleic acids: Structure & functions of DNA & RNA, Genetic code, DNA Replication, Transcription, Translation. Post-transcriptional modifications and posttranslational modifications. Inhibitors of protein biosynthesis.
- 09. Molecular mechanism of gene expression and regulation:
 - A) Lac operon model
- B) Mutations
- 10. Genetic engineering: Recombinant DNA, Restriction endonuclease, Chimeric molecule, Gene library. Applications of recombinant DNA technology in relation to medicine.

Desirable to know:

- 11. Introduction to Biochemistry as a basic science for the study of medicine, It's importance in clinical practice.
- **12. Cell:** Molecular and functional organization of cell & it's subcellular components.
- 13. Nutrition: Balance diet for normal adult, Quality of dietary protein, SDA, Protein energy malnutrition (Kwashiorkar and Marasmus).
- 14. Molecular concept of body defence and their applications:
 - A) Immunoglobulins-structure & functions,
 - B) Free radicals enzymatic and non-enzymatic antioxidants.

Nice to know:

15. Molecular Diagnostics

Case studies to be discussed in Paper I

- 1. 01.Phenylketonuria
- 2. 02.Albinism
- 3. 03. Vitamin A deficiency
- 4. 04.Scurvy
- 5. 05.Pellagra
- 6. 06.Vitamin B₁₂ deficiency
- 7. 07.Rickets
- 8. 08.Osteomalacia
- 9. 09.Kwashiorkar
- 10. 10.Gout
- 11. 11.Thalasaemia major

Paper – II: 50 marks 2 ½ hrs duration <u>Ist M.B.B.S. Biochemistry Paper – II</u>

Must know:



- **01. Chemistry of Carbohydrates:** Classification and Biochemical importance, Chemistry and functions of monosaccharides (including isomerism), disaccharides and polysaccharides including Glycosaminoglycans (mucopolysaccharides).
- **02. Metabolism of Carbohydrates:** Biochemical aspects of digestion and absorption of carbohydrates. Synthesis & breakdown of glycogen, Glycolysis, Rapoport-Leubering cycle, Citric acid cycle, Gluconeogenesis, HMP shunt pathway and its biological significance, Uronic acid pathway(only significance). Metabolism of Galactose & Galactosemia. Blood sugar level and its regulation, Oral GTT and Glycosuria, Biochemistry of diabetes mellitus.
- **03. Chemistry of Lipids**: Classification and Biological importance of triacyl glycerol, phospholipids, glycolipids, fatty acids (PUFA), prostaglandins, steroids and lipoproteins, rancidity.
- **04. Metabolism of Lipids**: Biochemical aspects of digestion and absorption of lipids, Beta oxidation, Biosynthesis of saturated fatty acids only, Cholesterol biosynthesis, transport(role of HDL & LDL), excretion. Ketogenesis, ketolysis and ketosis. Adipose tissue metabolism, lipolysis and re-esterification. Fatty liver and Atherosclerosis.
- **05. Metabolic interrelationships** of carbohydrate, lipid and protein metabolism.
- **06. Hormones**: General characteristics and Mechanism of action hormone action. cAMP-the second messenger, phosphatidyl inositol/calcium system as second messenger.
- **07. Mineral metabolism**: Study of (i) Calcium and phosphorous,(ii) Sodium, potassium & Chloride, (iii) Magnesium, copper and iodine, (iv) Iron, (v) Manganese, selenium, zinc, and fluoride. Their importance in body in brief.
- 08. Water and Electrolyte balance and imbalance.
- 09. Acid base balance and imbalance.
- **10. Organ function tests**: (i) Liver function tests, (ii) Kidney function tests, (iii) Thyroid function tests
- **11. Detoxication mechanisms (Bio-transformations):** Oxidation, reduction, hydrolysis, conjugation.
- **12. Investigation techniques (LCD topics):** Colorimeter, Flamephotometer, Electrophoresis, Chromatography.

Desirable to know:

- **13. Radioisotopes:** Uses of radioisotopes (therapeutic, diagnostic), hazards and precautions in Handling.
- 14. Metabolic changes during starvation.

Nice to know:

- **15. Environmental Biochemistry:** Definition, chemical stress, air and water pollution.
- 16. Biochemistry of cancer: Carcinogens, Mechanism of carcinogenesis, Tumour markers.



Case studies to be discussed in Paper II

- 1. Diabetes Mellitus
- 2. Galactosaemia
- 3. Von-Gierkes disease
- 4. Lactose Intolerance
- 5. Glucose-6-P dehydrogenase
- 6. Atherosclerosis/Myocardial Infarction
- 7. Hypothyroidism/ Hyperthyroidism
- 8. Iron deficiency anaemia
- 9. Metabolic acidosis
- 10. Dehydration
- 11. Jaundice

HUMAN BIOCHEMISTRY Human Biochemistry - Phase I M.B.B.S.

THEORY PRACTICALS INTERNAL ASSESSMENT



Paper I 50 marks	Q.A Long	20 marks	Theory	10 marks
Paper II 50 marks	Q.B Short	15 marks	Practical	10 marks
Viva-voce 20 marks	Q.C Spots	10 marks		
	Q.D Case study	/ 10 marks		
	Q.E Journal	05 marks		

Total: 120 marks 60 marks 20 marks

Total 200 marks examination

Passing Head	Total Marks	Minimum for Passing
A. Theory + Viva-voce	120	60
B. Practicals		
C. Internal	60	30
Assessment		
	20	10 *
Total	200	110

INTERNAL ASSESSMENT

EXAMINATION	<u>T</u>	HEORY_	PRACTICAL
A) Terminal	Paper	60 marks	60
	Viva-voce	20 marks	
B) Preliminary	Paper – I	50 marks	60
	Paper – II	50 marks	
	Viva-voce	20 marks	
Total		200 marks	120 marks
		(divided by 20 to	(divided by 12 to

convert to 10) convert to 10) * Minimum 35 % in internal assessment in theory + practicals (ie. 7 out of 20) to be eligible

Theory - Question paper pattern for Paper I & II

Total Marks: 50 Duration: 2 ½ hrs

Section - A

Q.1 Multiple choice questions 10 questions (10x1) 10 marks

(Based on whole syllabus)

to appear for final examination.

Section - B

Q.2 Long answer question (any two out of three) (2x8) 16 marks

(Based on topics from Must know group)

Q.3 Short notes (any six out of eight) (6x4) 24 marks

(Based on topics from Must know & Desirable to know group) This will include minimum two case studies from the list given

> **Details of Biochemistry Examination** For Preliminary & University Examination Paper - I & II



Total Marks: 50 Duration: 2 ½ hrs

Section - A

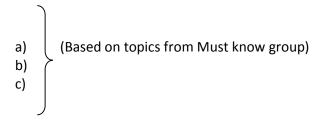
Q.1 Multiple choice questions 10 questions (10x1) = 10 marks

(Based on whole syllabus)

SECTION – B

Q.2.L.A.Q – (Any two out of Three)

(2X8) = 16 marks



Q. 3. Short Notes (Six out of Eight)

(6x4) = 24 marks

a) b) (Based on topics from Must know & Desirable to know group) c) This will include minimum two case studies from the list given d) e) f) g) h)

D) Practical:

Practical examination in Biochemistry will be of Two hours duration and for 60 marks.

Pattern for practical examination:

Q.A	Long experiment (from Group A)	20 marks
Q.B	Short experiment (from Group B)	15 marks
Q.C	Spot identification (from Group C)	10 marks
Q.D	Case study	10 marks
Q.E	Journal	05 marks

Group A:

Blood sugar estimation, Blood urea estimation, Serum protein estimation, Serum uric acid estimation, Serum creatinine estimation, Serum bilirubin estimation, CSFanalysis, Alanine



aminotransferase (SGPT), aminotransferase(SGOT), Alkaline Aspartate Serum phosphatase(ALP), Serum amylase

Group B:

Urine creatinine estimation, Serum phosphorus, Serum cholesterol estimation, Tests for monosaccharides, Tests for disaccharides, Precipitation reactions of proteins, Colour reactions of proteins, Physical characteristics and normal organic constituents of urine, Urine report(abnormal constituents of urine)

Group C:

Identification of slide under microscope, Identification of Hb-derivative, Use of reagent, Identification & significance of test, Identification & use of instrument/glassware, Identification of GTT, chromatogram, and electrophoretogram

Candidates will be allowed to use flow chart for quantitative exercise only. There will be table viva on Q.A & Q.B exercise. **SYLLABUS FOR PRACTICALS:**

A) Experiments:

- 1. **Tests for Monosaccharides**
- 2. Teasts for disaccharides
- 3. Precipitation reactions of proteins
- 4. Colour reactions of proteins
- Urine Physical characteristics and normal organic constituents 5.
- Urine report Physical characteristics and abnormal constituents 6.
- Estimation of Blood sugar 7.
- 8. Estimation of Blood urea
- 9. Estimation of Serum creatinine
- 10. Estimation of Urine creatinine
- 11. Estimation of Serum total proteins, albumin and determination of A/G ratio
- 12. Estimation of Serum inorganic phosphorus
- 13. Estimation of Serum uric acid
- 14. Estimation of Serum bilirubin
- 15. Estimation of C.S.F. sugar & proteins
- 16. Estimation of Serum alkaline phosphatase activity
- 17. Estimation of Serum amylase
- 18. Estimation of Serum alanine aminotransferase(SGPT) activity
- 19. Estimation of Serum aspartate aminotransferase(SGOT) activity
- 20. Spectroscopy of Hb-derivatives (Practical/Demonstration)
- Estimation of Serum cholesterol (Practical/Demonstration)

B) Lecture cum demonstrations:

- pH measurement 1.
- 2. Colorimetry



- 3. Electrophoresis
- 4. Chromatography
- 5. Flamephotometry

APPOINTMENT OF EXAMINERS:

There shall be at least four examiners out of whom not less than 50% examiners must be external examiners. Of the four examiners, the senior most internal examiner will act as Chairman/Convenor. The chairman/convenor will make the distribution of Practical/vivavoce, so that all examiners will examine each candidate.

BOOKS RECOMMENDED FOR BIOCHEMISTRY:

Text Books:

- 1. Textbook of Biochemistry by Dr.Mrs.Pankaja Naik
- 2. Textbook of Biochemistry for Medical Students by Rafi
- 3. Medical Biochemistry by A. R. Aroor
- 4. Medical Biochemistry by U.Satyanarayan
- 5. Textbook of Medical Biochemistry by Rajinder Chawla, Tarek H. Metwally, Suchanda Sahu
- 6. Biochemistry for Medical students by D.M.Vasudevan & Shreekumari

Reference Books:

- 1. Harper's Biochemistry by Murray, Granner, Mayes, Rodwel
- 2. Medical Biochemistry by N.V.Bhagwan
- 3. Biochemistry by L.Stryer
- 4. Biochemistry by Orten & Neuhans

TOPICS OF THE LECTURES AND APPROXIMATE NUMBER OF LECTURES, HUMAN **BIOCHEMISTRY - FIRST PHASE- M.B.B.S.**

Lectures

1.	Introduction to Biochemistry, Cell structure and function.	1
2.	Chemistry of Carbohydrates.	4



3.	Chemistry of Proteins.	4
4.	Chemistry of Lipids.	4
5.	Chemistry of Nucleo proteins.	2
6.	Enzymes.	6
7.	Biological oxidation.	2
8.	Chemistry and functions of Haemoglobin; abnormal haemoglobin.	2
9.	Carbohydrate Metabolism.	6
10.	Protein Metabolism.	6
11.	Lipid Metabolism.	6
12.	Integration of metabolism and metabolic changes during starvation.	2
13.	Mechanism of hormones action.	1
14.	Vitamins (Fat & Water soluble)	6
15.	Nutrition.	2
16.	Purines and Pyrimidine metabolism.	2
17.	Chemistry and functions of Nucleic acids.;	5
	Protein biosynthesis, Gene expression, mutations.	
18.	Genetic engineering and it applications.	2
19.	Biochemistry of cancer.	1
20.	Radioisotopes.	1
21.	Haemoglobin metabolism, liver function tests, Detoxification mechanisms.	3
22.	Kidney function tests, Thyroid function tests	2
23.	Mineral Metabolism.	4
24.	Water and Electrolyte Balance.	2
25.	Acid base balance,	2
26.	Environmental Biochemistry.	1
27.	Molecular concept of body defence.	2

PUNISHMENT

If a student/candidate is found to be guilty in the examination then the provision of punishment is as follows-



BL 526 The Board Categories of Unfair Means Resorted to by candidate at the examinations and the quantum of punishment for each category thereof shall be as follows-

Sr. No.	Nature of Malpractice	Quantum of Punishment
a)	Possession of copying material	Annulment of the performance of
		the candidate at the examination in
		full
b)	Actual copying from the copying	Exclusion of the candidate from
	material	examination for one additional
		examination
c)	Possession of another student's answer	Exclusion of the candidate from
	books	examination for one additional
		examination (both the candidates)
d)	Possession of another candidate's	Exclusion f the candidate(s) from
	answer book and actual evidence of	examination for two additional
	copying there from	examinations. (Both the candidates)
e)	Mutual/Mass copying	Exclusion of the candidates from
		examination for two additional
		examinations.
f)	Smuggling-out or smuggling in answer	Exclusion of the candidate from
	book as copying material	examination for two additional
		examinations.
g)	Smuggling-in of written answer book	Exclusion of the candidate from
	based on the question paper se at the	examination for three additional
	examination	examinations.
h)	Smuggling-in of written answer book	Exclusion of the candidate from
	forging signature of the invigilator on the	examination for four additional
	answer book or supplement	examinations.
i)	Attempt to forge the signature of the	Exclusion of the candidate from
	invigilator on the answer book or	examinations for four additional
	supplement	attempts
j)	Interfering with or counterfeiting of	Exclusion of the candidate from
	university seal or answer books or office	examination for four additional
	stationery used in the examinations.	attempts
k)	Answer book, main or supplement	Exclusion of the candidate from
,	written outside the examination hall or	examination for four additional
	any book.	attempts other insertion in answer
l)	To bribe or attempting to bribe any of	Exclusion of the candidate from
	the person/s connected with the	examination for four additional
	<u> </u>	



	conduct of examinations	attempts.
m)	Using obscene language/violence/threat	Exclusion of the candidate from
	at the examination centre by a candidate	examination for four additional
	at the examiners.	attempts. Examination to
		invigilators/center-in-charge.
n)	Impersonation at the examination.	Exclusion of the candidate from
		examination for five additional
		attempts (both the candidate if
		impersonator is student of the
		university)
o)	Revealing identity in any form in the	Annulment of the performance of
	answer written or in any other part of	the candidate at the examination in
	the answer book by the student at the	full.
	examination	
p)	Found having written on palms or on the	Annulment of the performance of
	body, or on the clothes while in the	the candidate at the examination in
	examination	full.
q)	All other malpractices not covered in the	Annulment of the performance of
	aforesaid categories	the candidate at the examination in
		full and severe punishment
		depending upon the gravity of the
		offence.



HUMAN PHYSIOLOGY

I) GOAL:

The broad goal of the teaching of undergraduate students in physiology aims at providing the student comprehensive knowledge of the normal functions of the organ systems of the body to facilitate an understanding of the physiological basis of health and diseases.

II) EDUCATIONAL OBJECTIVES:

- 1) At the end of the course, the student will be able to: describe the normal functions of all the organ systems, their regulatory mechanisms and interactions of the various systems for well-coordinated total body function.
- 2) Understand the relative contribution of each organ system in the maintenance of the milieu interior (homeostasis).
- 3) Explain the physiological aspects of normal growth and development.
 - a. Analyse the physiological responses and adaptation to environmental stresses.
- 4) Comprehend the physiological principles underlying pathogenesis and treatment of disease.
- 5) Correlate knowledge of physiology of human reproductive system in relation to National Family Welfare Programme.

III) SKILL:

At the end of the course the student shall be able to:

- 1) Conduct experiments designed for study of physiological phenomena.
- 2) Interpret experimental/investigative data.
- 3) Distinguish between normal & abnormal data derived as a result of tests which he/she has performed and observed in the laboratory.

IV) INTEGRATION:

At the end of the integrated teaching the student shall acquire an integrated knowledge of organ structure and function and its regulatory mechanisms.



V) COURSE CONTENT:

Theory

List of topics.

A) GENERAL PHYSIOLOGY. (5 hours)

Must know.

- Introduction to Physiology
- Branches of Physiology
- Functional organization of human body.
- External and internal environment
- Homeostasis, Biofeedback mechanisms

Cell Physiology:

- Transport across cell membrane.
- Stem Cells & Cloning

B) HEMATOLOGY: (15 hours)

Must know

- 0 Composition of blood
- Functions of blood 0
- Plasma proteins: Types, concentration, functions.
- Erythrocytes: Morphology, functions, normal count, physiological variations in 0 normal count & anaemia, polycythemia.
- Haemopoesis: general concepts 0
- Erythropoiesis: stages, Sites, regulation, reticulocyte & its clinical significance. 0
- Haemoglobin: Functions, normal values, physiological variations. 0
- Fate of erythrocytes: life span, Catabolism of Hb, bilirubin metabolism, jaundice. 0
- Physiological basis of anaemia, nutritional anaemia. 0
- Polycythemia: Primary & secondary.
- Leukocytes: differences between R.B.C. & W.B.C., types of W.B.C.s normal count & differential W.B.C. count, physiological variations, properties, functions of W.B.C.s, Granulopoiesis – stages, regulation, Lymphopoiesis.
- Pathological variations in total & differential W.B.C. count.



- Immunity: definition, concept of antigen & antibody, types of immunity-Innate & Acquired, & their mechanism, cell mediated & humoral immunity, B lymphocytes, T lymphocytes & their types.
- Primary & secondary response, basis of vaccination.
- Blood groups: Landsteiner's law,
- ABO System type A & B antigen, ABO system & inheritance, relation to transfusion, cross matching major & minor.
- Rh System inheritance, Rh incompatibility & blood transfusion, Erythroblastosis foetalis.
- Blood transfusion: indications, storage of blood & changes during storage, transfusion reactions.
- Monocyte macrophage system: Classification, functions, functions of spleen.
- Haemostasis: definition, basic mechanisms of Haemostasis,
- Platelets: structure, normal count & variations, functions, role in platelet plug formation, Haemostasis & clot retraction.
- Blood coagulation: Coagulation factors in plasma, basic mechanism of blood clotting, intrinsic & extrinsic pathways & difference between two pathways, role of calcium in coagulation, role of vitamin K, fate of clot.
- Anticoagulants commonly used & their mechanism of actions, blood coagulation tests – bleeding time, clotting time.
- Haemophilia.
- Body fluid compartments: role of water in body & its distributions, different body fluid compartments & composition of their fluid.
- Blood volume: normal value, physiological & pathological variations, blood volume regulation in detail (To be taken at end of lectures on C.V.S, kidney and endocrines)

Desirable to know

- Physical properties of blood.
- Plasma proteins: Plasmapheresis, role of liver in plasma protein synthesis, relationship of diet & plasma protein synthesis.
- R.B.C.: advantages of biconcave shape.
- Bone marrow structure and cellular elements.



- Common Haemoglobinopathies (Hbs, Hbc, Thalassaemia)
- Method of determination of life span of R.B.Cs.
- Types of jaundice.
- Polycythemia effects on haemodynamics,.
- Immunity: Antibody structure & types, antigen antibody reactions.
- Blood group: M. N. system, other blood groups.
- Thrombocytosis, thrombocytopenia purpura.
- Anticoagulants: used in vitro & in vivo.
- Other blood coagulation tests.
- Classification of haemorrhagic diseases, D.I.C.
- Measurement of: total body water, blood volume, plasma volume, I.C.F. volume.

Nice to know

- Blood component therapy.
- Effects of splenectomy.
- Plasmin system.

C) NERVE (5 hours)

Must know:

- Distinctive histological features relevant to functions of nerve fibers.
- Classification of nerve fibers: based on structure, diameter, functions and only for sensory nerves.
- R.M.P. definition, production & maintenance, method of measurement, significance.
- Action potential: definition,

Phases – depolarization, repolarisation, ionic basis of depolarization & repolarisation.

Production & propagation of A.P.,

Properties of A.P., significance.

- Properties of nerve fibers.
- Strength duration curve: chronaxie and factors affecting it.
- Factors affecting conduction in a nerve.



Desirable to know:

- Experimental techniques to study the mechanism of production of R.M.P. & A.P.: patch clamp, voltage clamp
- Methods of recording of A.P.

D) MUSCLE (7 hours)

Must know.

- Classification of muscles,
- Structure of skeletal muscle:
- Electron microscopic structure, muscle proteins contractile, regulatory, structural & enzymatic.
- Sarcoplasmic tubular system: concept of sarcoplasmic triads & their functions.
- Neuromuscular transmission: Physiologic anatomy, events, N-M blocking & its clinical significance, applied aspect – myasthenia gravis.
- Excitation contraction coupling.
- Molecular basis of skeletal muscle contraction: sliding filament theory, power stroke - cross bridge cycle, role of calcium.
- Energetics: fuel used by skeletal muscle at rest & in exercise, metabolic pathways involved to yield A.T.P.,
- Oxygen debt: definition, types (lactic, alactic), incurring of debt, repaying the debt, significance.
- Properties of skeletal muscle: excitability, refractory period (absolute, relative), conductivity, contractility - types (isometric, isotonic), effects of summations (multiple motor unit summation, frequency summation & tetanizibility), all or none law, extensibility & elasticity, fatiguability.
- Factors affecting development of tension in the muscle:
 - a) Number of motor units contracting- type of muscle, number of muscle fibers in each unit activated, supraspinal influences.
 - b) length tension relationship
 - c) frequency of stimuli, duration of stimulation
 - d) load
 - e) type of contraction



- f) Chemical composition of muscle fibers and ions.
- E.M.G. (in brief)
- Skeletal muscle circulation.
- Smooth muscle: structure, distribution, types, molecular mechanism of contraction, properties, regulation and disorders.

Desirable to know

- Heat liberated during various phases of contraction, Fenn effect.
- Recording of muscle activity.

Nice to know

E.M.G. details.

E) RESPIRATORY PHYSIOLOGY (15 hours)

Must know:

- Physiologic anatomy
- Functions of respiratory system, non respiratory functions of lung
- Mechanics of respiration:

Ventilation:

Inspiratory & expiratory muscles, intraplural pressure, lung & thoracic compliance, factors affecting compliance, work of breathing, surface tension forces, role of surfactant, airway resistance and elastic resistance.

- Lung volumes and capacities. Measurement, physiological significance (tidal volume, vital capacity, forced vital capacity – details)
- Pulmonary ventilation, alveolar ventilation, alveolar dead space, applied aspect, Maximum breathing capacity & breathing reserve.

Diffusion of Gases:

Exchange of respiratory gases at alveolar - capillary membrane, factors affecting diffusion.



Gas Transport:

- Transport of oxygen, role of Haemoglobin, oxygen dissociation curve & factors affecting it.
- Transport of carbon dioxide

Control of Breathing:

Neural control – higher centers, reflexes.

Chemical control – central & peripheral chemoreceptor's, role of CO₂, O₂, H⁺

Pulmonary Circulation

- Characteristics
- Ventilation perfusion ratio
- Respiratory adjustment in exercise.
- Hypoxia: types & high altitude hypoxia.
- Artificial respiration and cardiopulmonary Resuscitation
- Pulmonary function tests principles

Desirable to know.

- Method of determination of dead space, residual volume, functional residual capacity.
- Oxygen therapy: indications, hazards of hyperbaric oxygen & use.

Nice to know

- Concept of P₅₀
- Positive pressure breathing.

F) CARDIOVASCULAR PHYSIOLOGY (20 hours)

Must know:

- Introduction, functions & importance of the system.
- General organization.
- Structure of heart, pericardium, myocardium, endocardium, nerve supply, Histology, details of cell junctions, syncytium, contractile & conducting fibers.
- Properties of cardiac muscle: excitability, conductivity, contractility, autorhythmicity, all or none law, long refractory period.
- Junctional tissues of heart, pacemaker potential, action potential of cardiac muscle.



- Generation & conduction of cardiac impulse.
- ECG: lead arrangement, normal waves & their significance with reference to lead II
- Cardiac cycle: pressure volume changes, heart sounds & their clinical significance, correlation of pressure, volume, ECG, heart sounds in cardiac cycle.
- Heart rate & its regulation.
- Haemodynamics definition ,blood flow, resistance
- Cardiac output: normal values, physiological variations, factors affecting cardiac output – details, regulation, methods of measurement of cardiac output – old methods in short and newer methods like echocardiography its principles and its uses in detail.
- Blood pressure:

Normal levels, measurement, determinants, short term & long term regulation - details.

- Capillary circulation, tissue fluid formation.
- Lymphatic system: Anatomy & structure, formation of lymph, composition of lymph, functions of lymphatic system, lymph flow, factors affecting it & Pathophysiology of oedema.
- Regional circulation: Physiologic anatomy, factors affecting, special features: coronary, cerebral, skin, portal
- Adaptation of cardiopulmonary system to various grades of exercise.
- Haemorrhagic shock stages & compensatory mechanisms, effects on body, physiological basis of treatment in brief.

Desirable to know:

- Ion channel & receptors (physiological, pharmacological & clinical significance)
- E.C.G. electrical axis of heart, heart blocks, arrhythmias, ischaemia, infarctions.
- Heart sounds: murmurs & their clinical significance.

Nice to know

Experimental methods of studying cardiovascular physiology,

G) RENAL PHYSIOLOGY (10 hours)

Must know:

- General introduction, structure & functions of kidney.
- Renal circulation: special features from functional point of view.



- Concept of clearance: to study renal physiology, for:
- a) GFR Inulin, Creatinine, basic principle of radioisotope method.
- b) Renal blood flow PAH
- c) Concentration & dilution of urine free water.
- Formation of urine:
- 1) Glomerular stage GFR (definition, dynamics, factors affecting & measurement))
- 2) Tubular stage Reabsorption & secretion.
 - a) Sodium, potassium, glucose: details
 - b) Handling of water concentration & dilution of urine.
 - c) Secretion of H⁺
- 3) Role of kidney in acid base balance.
- Physiology of micturition: basic reflex & control, cystometrogram.
- Artificial kidney: basic principles of dialysis.

Desirable to know:

- Disorders of micturition..

Nice to know

- Experimental studies for renal functions

H) BODY TEMPERATURE REGULATION: (2 hours)

Must know:

- Homeothermia Balance between heat gain & heat loss.
- Regulation of body temperature,

Desirable to know:

- Hyperthermia, Hypothermia.

I) ALIMENTARY SYSTEM: (12 hours,

Must know:

- General introduction & organizational plan, innervations and blood supply.

Salivary secretion:

- General principles & basic mechanisms of secretion, composition, and functions of saliva, mechanism & regulation of salivary secretion.



Mastication and deglutition:

- Three phases of deglutition- physiologic anatomy, mechanism & control

Gastric secretion:

- Functional anatomy, histology, functions of stomach, composition of gastric juice, cellular mechanism of gastric secretion of acid, pepsin, intrinsic factor, other enzymes, phases of gastric secretion, regulation of gastric secretion.
- Gastric mucosal barrier, experiments to study regulation of gastric juice secretion, disorders of secretion, peptic ulcer, inhibitors of gastric secretion
- Gastric Motility:

Electrical activity of stomach, pylorus, emptying of the stomach-pyloric pump, regulation, factors promoting & inhibiting emptying.

Pancreatic secretion:

- Structure, composition & mechanism of secretion of electrolytes & enzymes, regulation of secretion.
- Liver & gall bladder:

Microscopic structure, functions of liver, composition of bile, cellular mechanism of bile formation, enterohepatic circulation of bile salts, control of secretion, concentration & storage of bile in gall bladder. Filling & evacuation of gall bladder functions of gall bladder

Intestinal secretion:

- Structure, innervations.
- Composition & mechanism of secretion of small intestinal juice, regulation of secretion.
- Secretion of large intestine: mucous, water, electrolyte.
- Motility of small intestine:
 - Structure & innervations, electrical activity of smooth muscle, resting membrane potential, slow waves, spike potentials, rhythmic segmenting contractions, peristalsis, control – neural & hormonal, functions of ileoceacal valve.
- Motility of large intestine:
- Structure & innervation, mixing & mass movements, defecation reflex and its control



- G.I. hormones: in brief.

Digestion & absorption:

Digestion & absorption of - carbohydrate,

- Proteins

- Fats

Absorption of water, electrolytes and vitamins.

Desirable to know:

- Effects of vagotomy, abnormal gastric motility, vomiting.
- Barium meal studies, endoscopy, biopsy.
- Pathophysiology of small intestinal motility, paralytic ileus, diarrhea, obstruction.
- Pathophysiology of colonic motility, irritable bowel syndrome, drugs, constipation.
- Pancreatic function tests.
- Gall stone, effects of removal of gall bladder

Nice to know

- Disturbances of esophageal motility, spasm, achalasia, hiatus hernia.
- Methods for study of intestinal absorption.
- Effects of hepatectomy.

J) NUTRITION: (2 hours)

Must know:

- concept of balanced diet
- factors affecting caloric requirements
- Requirements of various nutrients, sources, daily needs.
- Nutrition under special conditions pregnancy, lactation, growing child.

K) ENDOCRINE SYSTEM (10 hours)

Must know:

- Introduction
- Endocrine functions of Hypothalamus releasing hormones, Mechanism of hormone action
- Anterior pituitary hormones:

Functions, regulation, disorders.

Posterior pituitary hormones, ADH, Oxytocin. Functions, regulation, disorders.



Thyroid:

hormone: synthesis, fate, functions, regulation, disorders.

- Parathyroid:

hormone: synthesis, functions, regulation, disorders – tetany.

- Adrenal cortex: and medulla.

hormone: secretion, functions, regulation, disorders

- Pancreatic hormones: secretion, functions, regulation, disorders.

Desirable to know:

- Radioimmuno assays.

Nice to know

- Experimental studies.

L) REPRODUCTIVE PHYSIOLOGY: (8 hours)

Must know:

- Sex chromosomes, sex determination, sex differentiation
- Functional anatomy of reproductive system.
- Puberty: changes in males & females and its control.
- Spermatogenesis: stages & regulation Semen analysis.
- Testosterone: actions & regulation.
- Male sexual act.
- Menstrual cycle & ovarian cycle:

Phases & hormonal regulation.

- Menopause.
- Ovulation: indicators & importance
- Fertilization, implantation of ovum.
- Functions of placenta
- Physiology of pregnancy;



- Maternal changes during pregnancy
- Parturition: in brief stages and mechanism.
- Lactation: initiation ,maintenance and control.

Advantages of breast-feeding.

- Contraception: to be taken as integrated topic.

Desirable to know:

- Sex chromosomes: Barr bodies.
- Development of genitals & gonads

Nice to know

- Precocious & delayed puberty.

M) SPECIAL SENSES (8 hours)

Must know:

- Eye:

Functional anatomy of eye, optics, microscopic structure of retina with retinal circuits, image formation,

Photochemistry of vision (photopic & scotopic vision, dark & light adaptation),

Pupillary reflexes, Accommodation reaction, Errors of refraction and their correction, Colour vision - physiological & neural basis, accepted theory of colour vision, classifications, basis of colour blindness and tests of colour blindness, significance.

Visual pathway - processing of information at different levels in visual pathway, organization of visual cortex. Effects of lesion at different levels in visual pathway,

Movements of eyeballs: functions & control.

- Ear:

Physics of sound, decibel system,

Functions of external ear,

Functional anatomy of middle ear, functions of middle ear in detail, assessment of functions of middle ear, Functional anatomy of cochlea, functions of inner ear, place principle, theories of hearing.

- Audiometry,



Auditory pathway & important features, auditory cortex (role in hearing & speech development)

- Taste:

Functional anatomy of taste buds, different taste modalities, pathway, factors affecting taste sensation,

- Smell:

Functional anatomy of receptors, primary olfactory sensations, pathway, factors affecting smell sensation.

Desirable to know:

- Resolution of images,
- Electrophysiology of internal ear: cochlear micro phonics.

Nice to know

- Electrophysiology of retina.
- Theories of hearing.

N) CENTRAL NERVOUS SYSTEM: (50 hours)

Must know

- Outline of nervous system.
- 1) General nervous system:

Synapse: definition, physiological anatomy, sequence of events of synaptic transmission, properties, (state the property & its significance), significance of synaptic transmission, applied aspect.

Neurotransmitters – in brief.

Receptors: definition, classification (basis of each classification with Example), properties (state each property with underlying mechanism & significance), significance (homeostasis, conscious awareness of environment,tone,posture, protection).

Sensations: different modalities, classification with examples and significance Sensation of touch, pain, proprioception: details of each



Reflexes: definition, classification (basis of classification with example), reflex arc & its components, properties (state each property with basis & importance)

Stretch reflex – definition, muscle spindle (details with innervation, role of gamma motor neurons) role of supra spinal control – in brief, functions of stretch reflex (regulation of muscle tone) inverse stretch reflex.

Polysynaptic reflexes: withdrawal reflex.

2) Tracts:

Ascending & descending tracts: details of each tract – (situation & extent in spinal cord, origin, course & termination, collaterals, somatotopic arrangement, functions, applied aspect, tests)

Ascending tracts: Basic plan of somatosensory pathway for conscious sensation, pathway from head, face region.

Descending tracts: pyramidal tracts - details, extra pyramidal tracts, Differences between UMN & LMN lesions.

3) Sections at various levels in CNS:

a) Spinal transection – spinal animal.

Complete – 3 stages – spinal shock, stage of recovery and stage of reflex failure – details of each stage.

Incomplete Transection

Hemisection

- b) Low midbrain section decerebrate animal : Decerebrate rigidity. (Classical & ischaemic with mechanisms, characteristics features, physiological significance)
- c) High midbrain section High decerebrate animal.
- d) Thalamic or Decorticate animal.

4) Posture & Equilibrium.

Definition, classification of postural reflexes.

(Details of each reflex and its function.)

regulation of posture (integrating centers at various levels of CNS) vestibular apparatus: Physiologic anatomy, mode of function of utricle & saccule and semicircular canals, vestibulo occular & vestibulo spinal reflexes.

5) Thalamus:



Functional classification of Thalamic nuclei, with connections of different nuclear groups, functions of thalamus, thalamic syndrome.

- 6) Hypothalamus: Functional classification of different hypothalamic nuclei, connections in brief, functions in details.
- 7) Limbic system: Parts of limbic system, connections in brief, functions.
- 8) Reticular formation:

Introduction, anatomy in brief, functional divisions.

- (A) Ascending reticular activating system details with connections & role in sleep wakeful cycle, applied aspect.
- (B) Descending reticular system role in regulation of muscle tone by pontine & medullary regions.
- (C) Visceral centres.

9) E. E. G.:

Definition, different waves, characteristics & functional significance of each wave, physiological variation, clinical application in brief.

10) Sleep & Wakefulness:

Concept of alertness & wakefulness with their physiological basis,

Definition of sleep, stages of sleep correlated with EEG, sleep cycle – types of sleep, salient features of NREM & REM sleep, physiological effects of sleep on different systems of the body, Neurophysiological mechanisms of sleep, functions of sleep.

11) Cerebellum:

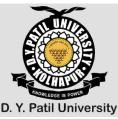
Introduction, functional classification, intracortical circuit, deep cerebellar nuclei, connections of different lobes, functions of cerebellum, cerebellar function tests, effects of lesion in brief.

12) Basal Ganglia:

Introduction, classification of nuclei, connections, intracortical circuits, functions, lesions - Parkinsonism.

13) Cerebral Cortex:

Gross anatomy & divisions, concept of Broadmann's mapping with diagram, Parietal lobe – anatomical & functional divisions, details of each functional part as regards connections, topographic organisation, functions.



Frontal lobe – excitomoter Cortex – anatomical & functional parts, details of each part as regards connections, topographic organisation, functions.

Prefrontal Cortex – different areas, connections in brief, functions, effects of lobectomy.

14) speech -

Afferent and efferent mechanisms and role of cortical centers in speech, concept of cerebral dominance, development of speech, vocalization.

15) Memory:

Definition, stages, types, physiological basis, factors affecting, applied – amnesias in brief.

16) Learning:

Definition, types with examples, stages, factors influencing, role of motivation (positive & negative reinforcement, reward & punishment), physiological basis – role of different parts of CNS, structural, biochemical changes.

17) Conditioned reflexes:

Definition, difference between unconditioned & conditioned reflexes, development of conditioned reflexes, properties, significance.

18) Autonomic nervous system:

Organization and functions of Parasympathetic & Sympathetic and their control.

19) CSF:

Introduction, composition, normal CSF pressure, formation & circulation, functions, applied aspect – brief, blood brain barrier, blood CSF barrier.

Desirable to know:

General nervous system:

Neurotransmitters – details, susceptibility of synapse to hypoxia & drugs etc., Mechanisms of referred pain, differences between superficial & deep pain, central analgesia system, supraspinal control of stretch reflex – details.

Thalamus - applied aspects – effects of lesions.

Hypothalamus - applied aspects – effects of lesions

Reticular formation – effects of lesion

EEG – Method of recording, abnormal patterns.

Basal Ganglia – lesions, involuntary movements.

Cerebellum – Embryology, evolution, effects of stimulation & ablation.



Cerebral cortex – effects of stimulation & ablation in different regions.

Speech - aphasias.

Nice to know

Experimental studies – effects of stimulation & ablation.

Sleep, wakefulness – effects of sleep deprivation, disorders.

• Topics to be asked as applied questions in theory.

A brief history and diagnosis to be provided.

- Erythroblastosis foetalis
- 2. Haemophilia, purpura
- 3. Myasthenia gravis
- 4. Peptic ulcer
- 5. Oedema
- 6. Jaundice and anaemia due to mismatched transfusion
- 7. Myxoedema
- 8. Cretinism
- 9. Hyperthyroidism
- 10. Tetany
- 11. Acromegaly, Gigantism
- 12. Respiratory distress syndrome
- 13. Parkinsonism
- 14. Asthma
- 15. Hemiplegia
- 16. Spinal cord injury
- 17. Deafness
- 18. Haemorrhagic shock
- 19. Cushing's syndrome
- 20. Dwarfism
- Recent diagnostic Techniques:
- 1) Ultra Sonography
- 2) C.T. Scan
- 3) M.R.I.
- 4) Angiography
- 5) E.L.I.S.A. techniques



Books recommended:

1) Textbooks of Physiology:

Guyton - Textbook of Physiology

Ganong - Review of Medical Physiology

A.K. Jain - Text book of Physiology Vol. I & II

2) Reference Books:

Best and Taylor - Physiological basis of medical practice

Berne & levy. - Principles of Physiology

Dr. V.G. Ranade - Laboratory Manual and Journal of Physiology

Practicals

(A) Haematology

Hb%, R. B. C. ,W. B. C. ,Differential, B.T.C.T. Blood group, ABO system Rh typing, Blood Indices.

- (B) Clinical examination -
 - -Introduction of Bioethics as a part of clinical examination.
 - -Clinical examination of all systems
 - Practical Artificial respiration in Man and demonstration on cardiopulmonary

resuscitation on manikin.

(C) Human experiments

Stethography, Spirometry, Ergography, Perimetry, Tests for physical fitness,.

(D) Demonstrations

Reticulocyte count. Platelet count, P. C. V., E. S. R, osmotic fragility, peripheral blood smear, and bone marrow slides,

E.M.G. S.D. curve, conduction velocity of nerve (Human), E.C.G., E.E.G., Audiometry, H.R.T. (Human reaction time)

Visit to blood bank, wards to show common disorders or video tapes (list given in appendix I), X-rays (list given in appendix II)

Animal experiments on frogs,

a) Skeletal muscle:

Effect of graded stimuli,

Simple muscle twitch



Genesis of tetanus,

Effect of load on skeletal muscle

Fatigue.

b) Cardiac muscle.

normal cardiogram, effect of temperature, properties of cardiac muscle, effect of vagal stimulation and phenomenon of vagal escape. effect of drugs (Acetyl choline, Adrenaline, Nicotine) on frog's heart. perfusion of isolated frogs heart with effects of Na^+ , K^+ and Ca^{++} , and demonstration of Starling's law Historical land marks, Nobel laureates



APPENDIX I

List of common disorders to be shown during ward visits or using video tapes.

- 1. Generalised Oedema
- 2. Anaemia
- 3. Jaundice
- 4. Hepatomegaly
- 5. Splenomegaly
- 6. Ascites
- 7. Myxoedema
- 8. Cretinism
- 9. Hyperthyroidism
- 10. Dwarfism
- 11. Acromegaly
- 12. Facial nerve paralysis
- 13. Hemiplegia
- 14. Paraplegia
- 15. Parkinsonism
- 16. Cerebellar dysfunction.

APPENDIX II

List of X-rays to be shown along with clinical examinations to improve understanding.

- 1. Normal X-ray chest
- 2. Consolidation of lung
- 3. Pleural effusion showing mediastinal shift
- 4. Collapse of lung / cavity in lung
- 5. Hyper inflated lungs in emphysema
- 6. Left ventricular hypertrophy showing shift of apex beat
- 7. Barium meal follow through oesophagus, stomach, small and large intestine

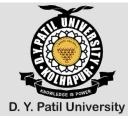


VII) EVALUATION:

PAPER PATTERN FOR TERMINAL EXAMINATION IN PHYSIOLOGY.

PAPER PATTERN FOR	RTERMINAL	EXAMINATION IN	I PHYSIOLOGY.		
THEORY TOTA	AL: 60 Marks	s	TOTAL TIME : 2	2 ½ Hours	
		SECTION -	A		
Q. 1 -	M.C.Q. - 20) (20x1)	20 Marks	30 Minutes
		SECTION – B	_		20 Marks
Q. 2- Write notes on:	(and a. b. c. d.	y THREE out of Fo	ur)	(3x4)	12 Marks
Q. 3- Long Answer Q	uestion: (an	y ONE out of two)	(1x8)	08 Marks
		SECTION -	<u>- C</u>		20 Marks
Q. 4- Write notes on:	(and a. b. c. d.	y THREE out of Fo	ur)	(3x4)	12 Marks
Q. 5 –Long Answer Q	uestion (any	ONE out of two)		(1x8)	08 Marks
40 Marks					
				de de de de	

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Practical Pattern for terminal examination

Practical - Viva -		60 marks 20 marks	(to be added to theory)
Practical -		60 Marks	
	A) I	Haematology	-10 Marks
	B)	Clinical Exam – I (RS)	– 10 Marks
		Clinical Exam – II (CVS)	– 10 Marks
	C)	Case history	-10 Marks
	D)	X-ray	- 5 Marks
	E)	Journal	– 5 Marks
	F)	Short Exercise in the f	form of spotting – 10 Marks
	>	Which includes charts	on
	1.	Amphibian Experimer	nts
	2.	Human experiments	
	3.	Calculations	
	4.	Endocrine conditions	
		Total	- 60 Marks



Details of Physiology Examination. For Preliminary & University Examination

Paper – I

Topic: (CVS, Endocrinology, GIT, Respiratory System, Reproductive system, Temp. Regulation & Exercise Physiology)

Total Marks -50		Du	ration -2 ¹ / ₂ hrs
Q. 1 - M.C.Q10	SECTION - A	(10x1)	10 Marks
	<u>SECTION</u> – B		40 Marks
Q. 2 Long answer question (any (Based on topics from Must k	•	2 x 8	8 = 16 Marks
Q.3 Short notes (any SIX out of E (Based on topics from Must k a) b) c) d) e) f) g)	E IGHT) now & Desirable to know group)	6 x ·	4 = 24 Marks
•	******		



Paper – II

Topic: (General Physiology, Nerve & Muscle, Blood, Excretory, CNS, Special senses)

tal Marks -50		Duration -2½ hrs
Q. 1 - M.C.Q. - 10	SECTION - A	(10x1) 10 Marks
	<u>SECTION</u> – B	40 Marks
Q. 2- Long answer question (a (Based on topics from Must know	-	(2 x 8) 16 Marks
Q.3 Short notes (any SIX out o (Based on topics from Must know	<u> </u>	(6 x 4) 24 Marks
a) b) c) d) e) f) g)		



PRELIMINARY & UNIVERSITY PRACTICAL EXAMINATION IN PHYSIOLOGY

Practical: Viva :		60 Marks 20 Marks (added to theory)		
Practical:	A) H	Haematology	-10	Marks
	B) Cl	inical Exam – I (RS & CV:	S) - 10 M	Marks
	Clinical Exam – II (C.N.S &		& Abdomen) – 10 Marks	
	C)	Case history		-10 Marks
	D)	X-ray		- 05 Marks
	E)	Journal		– 05 Marks
	F)	Short Exercise in the fo	orm of spotting	– 10 Marks
	Which includes charts on		on	
	1.	Amphibian Experiment	:S	
	2.	Human experiments		
	3.	Calculations		
	4. Endocrine conditions			

Total

- 60 Marks



PHYSIOLOGY 1ST M.B.B.S.

UNIVERSITY EXAMINATION PATTERN

I	HEORY		<u>PRACTICALS</u>	<u>IN</u>	NTERNAL ASSESSMENT
Marks	Paper I	- 50 Marks	Haematology	- 10 Marks	Theory - 10
Marks	Paper II	- 50 Marks	Clinical I	- 10 Marks	Practical - 10
	Viva-voce	- 20 Marks	Clinical II Case History X-ray Journal Spotting	10 Marks10 Marks05 Marks05 Marks10 Marks	
Total		- 120 Marks		- 60 Marks	- 20 Marks

Total 200 marks examination

Passing Head	Total Marks	Minimum for Passing
D. Theory + Viva-voce	120	60
E. Practicals		
F. Internal	60	30
Assessment		
	20	10 *
Total	200	100

INTERNAL ASSESSMENT

EXAMINATION	THEOR	<u>Y</u>	PRACTICAL
A) Terminal	Paper	- 60 Marks	60 Marks
	Viva-voce	- 20 Marks	
B) Preliminary	Paper – I	50 Marks	60 Marks
	Paper – II	50 Marks	
	Viva-voce	20 Marks	
Total		200 Marks	120 Marks
	(divided by 20 to	convert to 10)	(divided by 12 to convert to 10)

* Minimum 35 % in internal assessment in theory + practicals (i.e. 7 out of 20) to be eligible to appear for final examination.