



MCM Peshawar



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PEDIATRICS STUDY GUIDE 2025

Message by Head of the Department of Pediatrics

Welcome to the Department of Pediatrics at Muhammad Medical College and Teaching Hospital. Our department is dedicated to providing MBBS students with an integrated and comprehensive pediatric education, emphasizing both theoretical and practical aspects. Through clinical placements, skill-based training, and up-to-date curriculum, we aim to equip future doctors with the skills necessary to deliver high-quality care for children. Our commitment is to your learning, growth, and success in the field of pediatric medicine. Engage fully and take advantage of the resources available to you.

MCM MISSION

“To proffer our graduates quality medical education by developing core knowledge, skills, and ethical attitude towards patient care. We strive to provide well trained research oriented doctors, who can provide quality healthcare to the nation”

MCM VISION

“TO BE A GLOBAL MEDICAL TEACHING INSTITUTE BY STRIVING FOR EXCELLENCE IN THE FIELD OF MEDICAL EDUCATION, HEALTHCARE AND RESEARCH”

KMU MISSION

Khyber Medical University aims to promote professional competence through learning and innovation for providing comprehensive quality health care to the nation

VISION KMU

Khyber Medical University will be the global leader in health sciences academics and research for efficient and compassionate health care.

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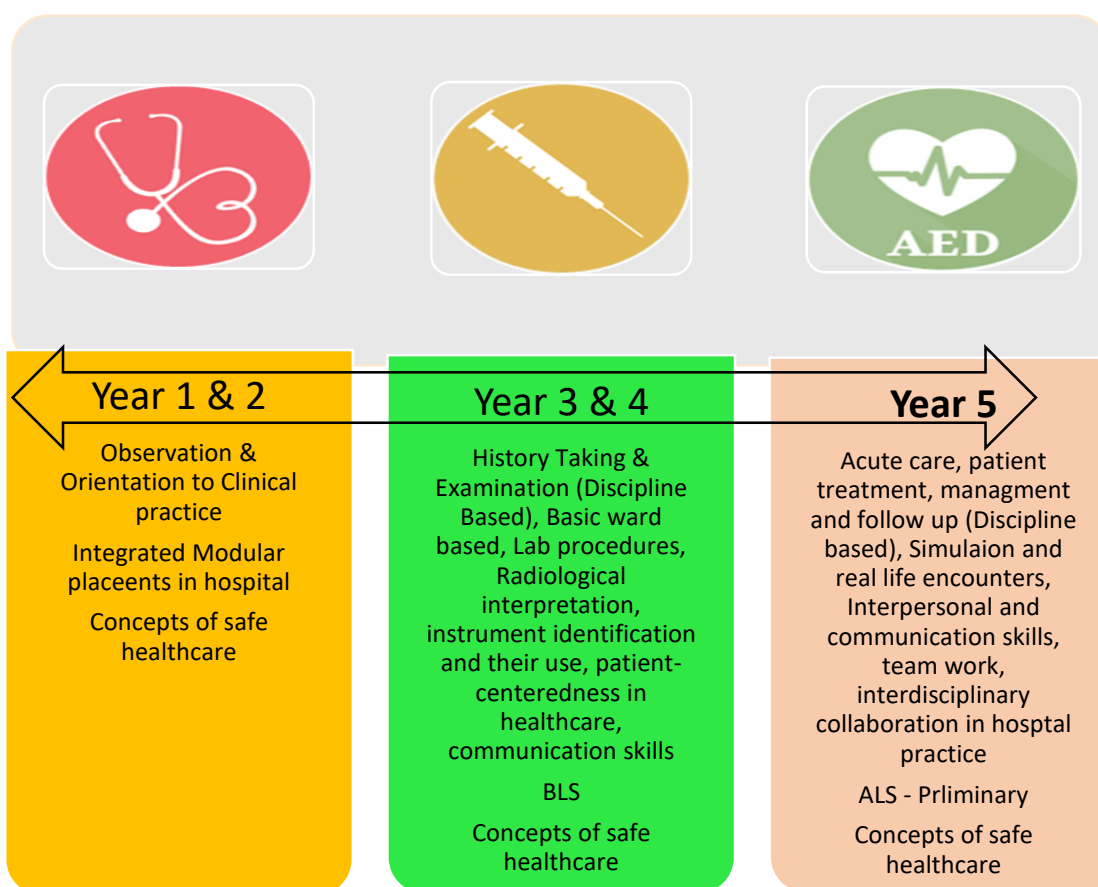
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Pediatrics is a core clinical subject in the MBBS curriculum, comprising over 300 hours of instruction as mandated by the regulatory authority for medical and dental education in Pakistan. The primary modes of teaching include clinical placements, clinical skills center sessions, and integrated modular rotations at MCM, with subject matter integrated over the five years of study. Large lecture hall sessions accommodate up to 100 students, while clinical skills are taught in smaller groups of 25, utilizing manikins, videos, and simulators. Pediatrics is taught in all three learning domains, following weekly modular themes. Additionally, students complete 300 hours of clinical placements, maintaining logbooks, ward logs, and reflective portfolios. These clinical training sessions continue from the first through the fifth year in the skills center. The curriculum is reviewed annually, incorporating feedback from faculty, students, and survey data from the Quality Enhancement Cell of MCM.

PM& DC IDENTIFIED COMPETENCIES FOR PEDIATRICS

#	Patient Assessment		
	Procedures	Description	Level of Competency
1	Take a good , complete Patient history (Pre-op & post-op), baseline physiological observations as per provided formats	Measure temperature, respiratory rate, pulse rate, blood pressure, oxygen saturation, NG tube insertion and urine output	Safe to practice under indirect supervision
2	Carry out systemic examination, abdomen, chest, CNS, CVS, Vascular	Systematic approach in clinical examination. Complete all steps of examination and record appropriately	Safe to practice under indirect supervision
	Procedural Skills		
1	Carry out Venipuncture	Insert needle into the vein of a patient / simulator , take blood safely and put it in the right container, labelled correctly and promptly dispatched to laboratory	Safe to practice under indirect supervision
2	Measure capillary blood glucose	Measure the concentration of glucose in the patient's blood using the right equipment and interpret correctly.	Safe to practice under indirect supervision
	Patient Care		
1	Perform Surgical scrubbing	Follow approved processes for cleaning hands and wearing appropriate personal protective equipment before procedures and surgical operations.	Safe to practice under direct supervision

CLINICAL TRAINING OVERVIEW



GRADUATE LEARNING OUTCOMES

The outcomes of the MBBS program align with the vision and mission of KMU and MCM as well as the identified generic professional competencies for medical graduates set by the PM&DC. This alignment aims to provide optimal health care, ultimately leading to improved health outcomes for both patients and societies.

By the end of the MBBS program, our graduates will be able to

KNOWLEDGE

- Perform a complete and accurate patient-centred history and physical examination appropriate to the patient's presentation.
- Demonstrate an understanding of the scientific basis for health and disease, encompassing both foundational and emerging sciences.

- Develop a differential diagnosis and key clinical problem list following the assessment of a patient.
- Develop a management plan for key clinical problems following the assessment of a patient.
- Apply knowledge of clinical, socio-behavioral, and fundamental biomedical sciences relevant to a clinical problem.

PATIENT CARE

- Demonstrate the ability to perform an appropriately focused and comprehensive medical history and physical exam.
- Critically evaluate clinical findings and initial diagnostic test results to develop appropriate management plans, considering patient preferences, ethical principles, and cost-effectiveness.
- Synthesize new information to refine and reprioritize differential diagnoses, adhering to clinical reasoning best practices.

Professionalism

- Discuss and apply ethical standards of practice
- Demonstrate humanistic and patient-centered care, including respect, cultural sensitivity, empathy, and compassion, in their role as the patient's advocate.
- Demonstrate humanistic and patient-centered care, including respect, cultural sensitivity, empathy, and compassion, in their role as the patient's advocate.
- Consistently demonstrate the attitudes, values, and behaviors expected of a future physician, embodying the mindset and actions integral to the profession.

INTERPERSONAL AND COMMUNICATION SKILLS

- Demonstrate an understanding of how cultural issues impact responses to illness and interactions with the healthcare system.
- Apply doctor-patient communication strategies appropriate for various clinical situations
- Demonstrate honesty and integrity in all interactions with patients, families, and health care team members.

- recognize how personal beliefs and biases impact communication.
- Present patient information clearly and effectively to all members of an inter- and intra-professional healthcare team.
- Use communication technology effectively.
- Apply best practices for disclosing a medical error.
- Deliver bad news compassionately.
- Manage conflicts effectively.

SYSTEMS-BASED PRACTICE

Develop an understanding of the Pakistani healthcare system in the contexts of:

- Healthcare systems
- Patient health and health disparities
- Demonstrate a patient-centered approach to diagnosis and treatment that promotes the delivery of safe, high value, and high quality patient care
- Describe physicians' roles in promoting population health, through advocacy, community service, and community engagement.

Researcher

- Develop a plan for personal continued education.
- Apply the principles of research, critical appraisal and evidence-based medicine to learning and practice.
- Continuously engage in improving knowledge and skills through critical reflection and self-improvement.
- Demonstrate facilitation of learning for health care professionals, patients and society as part of the professional responsibility.

CLINICAL PLACEMENTS – MAP 2ND YEAR

<i>Content – as per PM&DC</i>	<i>MIT – (Instructional Strategy) LGF, SGF, CSC, Practical, Ward, OPD, OT, Online Blended Learning</i>	<i>Learning Domain & Level</i>	<i># of Hours</i>	<i>Assessment Tool (MCQ, SEQ, EMQ, OSPE, OSCE, CCMCQ)</i>	<i>Learning Outcome – Competency (Knowledge, Skill & Affect) Based</i>	
2nd Professional MBBS Medicine Blueprint						
<i>Peads</i>	hydrocephalus	C1,C2,C3	1	MCQ,SAQ		
	Growth Chart	C1-C2-C3	1	MCQ, EMQ, OSCE		
2nd Year	Modules	Hospital Placement	Duration	Documentation	Responsibility	Assessment
<i>Block</i>	Orientation	02 hours	Portfolio/ Logbook	DME / Respective ward/OPD/OT/Lab/ Radiology	OSCE – CSC	
	Safe Healthcare	08 hours		Different dept. in MTH – Biomedical, Lab, Fire Control etc	OSCE as part of their OSPE	
<i>Block</i>		02 Hour	Portfolio/ Logbook	Respective clinical faculty as provided by department	OSCE – CSC	
				DME	OSCE as part of their OSPE	

CHAPTER III – 3RD YEAR MBBS

<i>Content – as per PM&DC</i>	<i>MIT – (Instructional Strategy) LGF, SGF, CSC, Practical, Ward, OPD, OT, Online Blended Learning</i>	<i>Learning Domain & Level</i>	<i># of Hours</i>	<i>Assessment Tool (MCQ, SEQ, EMQ, OSPE, OSCE, CCMCQ)</i>	<i>Learning Outcome – Competency (Knowledge, Skill & Affect) Based</i>
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3rd Professional MBBS Peads Blueprint

<i>Pea ds</i>	Child with Rash	C1,C2,C3	1	MCQ,SAQ
	Assessment of newborn	C1-C2-C3	1	MCQ, EMQ, OSCE
	Management oif thalasemia	C1-C2-C3	1	MCQ, EMQ, OSCE
	Bone pain and aches in children	C1-C2-C3	1	MCQ, EMQ, OSCE
	Skeletal dysplasia	C1-C2-C3	1	MCQ, EMQ, OSCE
	Juvenile idiopathic arthritis	C1-C2-C3	1	MCQ, EMQ, OSCE
	Duchene Muscular Dystrophy	C1-C2-C3	1	MCQ, EMQ, OSCE
	Cyanotic & acynotic congenital heart disease	C1-C2-C3	1	MCQ, EMQ, OSCE
	Rheumatic Fever	C1-C2-C3	1	MCQ, EMQ, OSCE
	Congenital myopathies	C1-C2-C3	1	MCQ, EMQ, OSCE
	Cystic fibrosis & bronchiectasis	C1-C2-C3	1	MCQ, EMQ, OSCE
	Childhood pneumonia	C1-C2-C3	1	MCQ, EMQ, OSCE
	RDS	C1-C2-C3	1	MCQ, EMQ, OSCE
	Reactive airway disease	C1-C2-C3	1	MCQ, EMQ, OSCE
	ARIs	C1-C2-C3	1	MCQ, EMQ, OSCE

CLINICAL PLACEMENTS – MAP 3RD YEAR

<i>3rd Year</i>	<i>Modules</i>	<i>Hospital Placement</i>	<i>Duration</i>	<i>Documen tation</i>	<i>Responsibility</i>	<i>Assessment</i>
<i>Block</i>		Orientation Safe Healthcare	02 hours 08 hours	Portfolio/ Logbook	DME / Respective ward/OPD/OT/Lab/ Radiology Different dept. in MTH – Biomedical, Lab, Fire Control etc	OSCE – CSC OSCE as part of their OSPE
<i>Block</i>			02 Hour 02 Hour	Portfolio/ Logbook	Respective clinical faculty as provided by department DME	OSCE – CSC OSCE as part of their OSPE

CHAPTER 04 – 4TH YEAR MBBS

<i>Content – as per PM&DC</i>	<i>MIT – (Instructional Strategy) LGF, SGF, CSC, Practical, Ward, OPD, OT, Online Blended Learning</i>	<i>Learning Domain & Level</i>	<i># of Hours</i>	<i>Assessment Tool (MCQ, SEQ, EMQ, OSPE, OSCE, CCMCQ)</i>	<i>Learning Outcome – Competency (Knowledge, Skill & Affect) Based</i>
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4th Professional MBBS Peads Blueprint

<i>Peads</i>	Epilepsy	C1,C2,C3	1	MCQ,SAQ	Explain the pathophysiology, clinical features, risk factors, investigations and treatment of Tonic-Clonic epilepsy in children Explain febrile convulsions and its management Describe Infantile spasm and its management
	Cerebellar ataxias	C1-C2-C3	1	MCQ, EMQ, OSCE	Describe the clinical features and management of Friedreich's Ataxia
	Meningitis	C1-C2-C3	1	MCQ, EMQ, OSCE	Explain the etiology, pathogenesis, clinical presentation, investigations and management of Acute pyogenic meningitis in children and neonates
	TBM	C1-C2-C3	1	MCQ, EMQ, OSCE	Explain the etiology, pathogenesis, clinical presentation, investigations and management of Acute pyogenic meningitis in children
	Hereditary neuropathies	C1-C2-C3	1	MCQ, EMQ, OSCE	Describe the types, clinical features and management of hereditary neuropathies
	Hereditary hyperbilirubinemias	C1,C2,C3	1	MCQ, EMQ, OSCE	Classify hereditary hyperbilirubinemias Explain the types, clinical features, investigations and management of different hereditary hyperbilirubinemias
	Acute hepatitis A	C1,C2,C3	1	MCQ, EMQ, OSCE	Explain the Etiology, pathogenesis, clinical features, investigations and treatment of Acute viral hepatitis A infection

Lactase deficiency	C1-C2-C3	1	MCQ, EMQ, OSCE	Describe the clinical features, investigations, complications and management of Lactase deficiency
Infectious diarrhea	C1-C2-C3	1	MCQ, EMQ, OSCE	Describe the etiology, clinical features, investigations, complications and management of infectious diarrheas in children
Celiac disease	C1-C2-C3	1	MCQ, EMQ, OSCE	Describe the etiology, clinical features, investigations, complications and management of Celiac disease
Short stature	C1-C2-C3	1	MCQ, EMQ, OSCE	<p>Describe the method to measure and plot height; and calculate height velocity</p> <p>and midparental, target height to allow early diagnosis of growth disorders in pediatric patients</p> <p>Explain the diagnostic criteria that allow to differentiate causes of growth deficiency</p> <p>Discuss the tools for better communication with patients and families and coordination of multidisciplinary care</p> <p>Discuss treatment of growth hormone deficiency or other diseases responsible for short stature and their appropriate management</p>
Congenital hypothyroidism	C1-C2-C3	1	MCQ, EMQ, OSCE	<p>Discuss the types and clinical features of hypoparathyroidism</p> <p>Discuss investigations and treatment of Hypoparathyroidism</p>
Management of Type 1 Diabetes mellitus in children	C1-C2-C3	1	MCQ, EMQ, OSCE	<p>Enumerate the blood glucose parameters and the clinical signs for an early diagnosis of diabetes in a child.</p> <p>Recognize how diabetes may present in young children or babies, in order to make the</p>

				<p>diagnosis and prevent coma or death</p> <p>Plan investigations and management plan for a newly diagnosed and a known diabetic child.</p> <p>Enumerate the different types of insulins.</p>
Acute post streptococcal glomerulonephritis (ApGN)	C1-C2-C3	1	MCQ, EMQ, OSCE	<p>Define AGN and APGN</p> <p>Describe the pathogenesis of Nephritic syndrome</p> <p>Know clinical features and differential diagnosis of ApGN</p> <p>Describe investigations required to reach a diagnosis of ApGN</p> <p>Effectively describe the treatment requires for patients with ApGN</p>
Nephrotic syndrome (NS)	C1-C2-C3	1	MCQ, EMQ, OSCE	<p>Define nephrotic syndrome</p> <p>Describe pathophysiology of nephrotic syndrome</p> <p>Classify NS in to its subtypes</p> <p>Describe clinical features of NS</p> <p>Enumerate and describe tests required to reach diagnosis of NS</p> <p>Outline treatment steps in the management of NS</p> <p>Know the complications of NS and describe its prognosis.</p>
Urinary tract infection (UTI)	C1-C2-C3	1	MCQ, EMQ, OSCE	<p>Describe the types of UTI</p> <p>Discuss prevention and management of UTI in children</p>

PEDIATRICS CARDIORESPIRATORY MODULE

5TH PROF MBBS

<i>Subject</i>	Topic	Domain of learning	Learning objective
Pediatrics	Supraventricular tachycardia	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Supraventricular tachycardia in Pediatric patients
		Affective domain	Counsel a parent of a neonate, infant and child with Supraventricular tachycardia
	Acyanotic heart disease	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Acyanotic heart disease in Pediatric patients
		Cognitive	Discuss the management of an infant and child with Acyanotic heart disease
	Ventricular Septal Defect (VSD)	Cognitive	Discuss the diagnostic workup and management for Ventricular Septal Defect
	Atrial Septal Defect (ASD)	Cognitive	Discuss the diagnostic workup and management for Atrial Septal Defect
	Aortic stenosis	Cognitive	Discuss the diagnostic and management workup for Aortic stenosis
	Coarctation of aorta	Cognitive	Explain the etiology clinical presentation of Coarctation of aorta
		Cognitive	Discuss the diagnostic workup and management for Coarctation of aorta
	Cyanotic heart disease	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Cyanotic heart disease in Pediatric patients
		Cognitive	Discuss the management of an infant and child with Cyanotic heart disease
		Psychomotor skills	Perform physical examination of a neonate and infant with Cyanotic heart disease
		Affective domain	Counsel a parent of a neonate, infant and child with Cyanotic heart disease
	Tetralogy of Fallot (TOF)	Cognitive	Explain the etiology and clinical presentation of Tetralogy of Fallot
		Cognitive	Discuss the diagnostic workup and management for Tetralogy of Fallot
	Transposition of Great Arteries (TGA)	Cognitive	Explain the etiology and clinical presentation of Transposition of Great Arteries
		Cognitive	Discuss the diagnostic workup and management for Transposition of Great Arteries

Ebstein anomaly	Cognitive	Explain the etiology and clinical presentation of Ebstein anomaly
	Cognitive	Discuss the diagnostic workup and management for Ebstein anomaly
Total Anomalous Pulmonary Venous Drainage or Connections (TAPVC)	Cognitive	Explain the etiology and clinical presentation of TAPVC
	Cognitive	Discuss the diagnostic workup and management for TAPVC
Truncus arteriosus	Cognitive	Explain the etiology and clinical presentation of Truncus arteriosus
	Cognitive	Discuss the diagnostic workup and management for Truncus arteriosus
Tricuspid atresia	Cognitive	Explain the etiology and clinical presentation of Tricuspid atresia
	Cognitive	Discuss the diagnostic workup and management for Tricuspid atresia
Congestive Cardiac Failure (CCF)	Cognitive	Discuss the clinical presentation and the diagnostic workup and management needed for Congestive Cardiac Failure in Pediatric patients
	Psychomotor skills	Take history and perform physical examination of a neonate, infant and child with Congestive Cardiac Failure
	Affective domain	Counsel the parents of a neonate, infant and child with Congestive Cardiac Failure
Cardio-myopathy	Cognitive	Discuss the management algorithm of an infant and child with Cardiomyopathy
Cystic fibrosis	Cognitive	Explain the etiology and clinical presentation of Cystic fibrosis
	Cognitive	Discuss the diagnostic workup and management for Cystic fibrosis
Rheumatic fever	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Rheumatic fever in Pediatric patients
	Cognitive	Discuss the management of an infant and child with Rheumatic fever
	Psychomotor skills	Perform physical examination of a neonate, infant with Rheumatic fever
	Affective domain	Counsel a parent of a neonate, infant and child with Rheumatic fever
Acute Respiratory Infections (ARI)	Cognitive	Explain the clinical presentation and diagnostic workup needed for Acute Respiratory Infections
	Cognitive	Discuss the management of an infant and child with Acute Respiratory Infections
	Psychomotor skills	Perform physical examination of a neonate, infant with Acute Respiratory Infections
	Affective domain	Counsel a parent of a neonate, infant and child with Acute Respiratory Infections

Croup	Cognitive	Explain the clinical presentation and diagnostic workup needed for Croup
	Cognitive	Discuss the management of an infant and child with Croup
Pneumonia	Cognitive	Explain the clinical presentation and diagnostic workup needed for Pneumonia
	Cognitive	Discuss the management of an infant and child with Pneumonia

PEDIATRICS CARDIORESPIRATORY MODULE 5TH PROF MBBS

	Learning Domain & Level	Domain of learning	# of Hours
Pediatrics	Supraventricular tachycardia	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Supraventricular tachycardia in Pediatric patients
		Affective domain	Counsel a parent of a neonate, infant and child with Supraventricular tachycardia
	Acyanotic heart disease	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Acyanotic heart disease in Pediatric patients
		Cognitive	Discuss the management of an infant and child with Acyanotic heart disease
	Ventricular Septal Defect (VSD)	Cognitive	Discuss the diagnostic workup and management for Ventricular Septal Defect
	Atrial Septal Defect (ASD)	Cognitive	Discuss the diagnostic workup and management for Atrial Septal Defect
	Aortic stenosis	Cognitive	Discuss the diagnostic and management workup for Aortic stenosis
	Coarctation of aorta	Cognitive	Explain the etiology clinical presentation of Coarctation of aorta
		Cognitive	Discuss the diagnostic workup and management for Coarctation of aorta
	Cyanotic heart disease	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Cyanotic heart disease in Pediatric patients
		Cognitive	Discuss the management of an infant and child with Cyanotic heart disease
		Psychomotor skills	Perform physical examination of a neonate and infant with Cyanotic heart disease
		Affective domain	Counsel a parent of a neonate, infant and child with Cyanotic heart disease
	Tetralogy of Fallot (TOF)	Cognitive	Explain the etiology and clinical presentation of Tetralogy of Fallot
		Affective domain	Discuss the diagnostic workup and management for Tetralogy of Fallot
	Transposition of Great Arteries (TGA)	Cognitive	Explain the etiology and clinical presentation of Transposition of Great Arteries
		Cognitive	Discuss the diagnostic workup and management for Transposition of Great Arteries
	Ebstein anomaly	Cognitive	Explain the etiology and clinical presentation of Ebstein anomaly
		Cognitive	Discuss the diagnostic workup and management for Ebstein anomaly

	Total Anomalous Pulmonary Venous Drainage or Connections (TAPVC)	Cognitive	Explain the etiology and clinical presentation of TAPVC
		Cognitive	Discuss the diagnostic workup and management for TAPVC
	Truncus arteriosus	Cognitive	Explain the etiology and clinical presentation of Truncus arteriosus
		Cognitive	Discuss the diagnostic workup and management for Truncus arteriosus
	Tricuspid atresia	Cognitive	Explain the etiology and clinical presentation of Tricuspid atresia
		Psychomotor skills	Discuss the diagnostic workup and management for Tricuspid atresia
	Congestive Cardiac Failure (CCF)	Affective domain	Discuss the clinical presentation and the diagnostic workup and management needed for Congestive Cardiac Failure in Pediatric patients
		Cognitive	Take history and perform physical examination of a neonate, infant and child with Congestive Cardiac Failure
		Affective domain	Counsel the parents of a neonate, infant and child with Congestive Cardiac Failure
	Cardio-myopathy	Cognitive	Discuss the management algorithm of an infant and child with Cardiomyopathy
	Cystic fibrosis	Cognitive	Explain the etiology and clinical presentation of Cystic fibrosis
		Cognitive	Discuss the diagnostic workup and management for Cystic fibrosis
	Rheumatic fever	Cognitive	Discuss the clinical presentation and the diagnostic workup needed for Rheumatic fever in Pediatric patients
		Cognitive	Discuss the management of an infant and child with Rheumatic fever
		Cognitive	Perform physical examination of a neonate, infant with Rheumatic fever
		Cognitive	Counsel a parent of a neonate, infant and child with Rheumatic fever
	Acute Respiratory Infections (ARI)	Cognitive	Explain the clinical presentation and diagnostic workup needed for Acute Respiratory Infections
		Cognitive	Discuss the management of an infant and child with Acute Respiratory Infections
		Psychomotor skills	Perform physical examination of a neonate, infant with Acute Respiratory Infections
		Affective domain	Counsel a parent of a neonate, infant and child with Acute Respiratory Infections
	Croup	Cognitive	Explain the clinical presentation and diagnostic workup needed for Croup

		Affective domain	Discuss the management of an infant and child with Croup
	Pneumonia	Cognitive	Explain the clinical presentation and diagnostic workup needed for Pneumonia
		Cognitive	Discuss the management of an infant and child with Pneumonia

PEADS RENAL MODULE

<i>S.No</i>	<i>Subject</i>	<i>Topic</i>	<i>Learning objective</i>	<i>Faculty</i>
1	Pediatrics	Nephrotic Syndrome	Discuss the clinical presentation, the diagnostic workup and management for suspected GN and Nephrotic Syndrome in Pediatric patients.	
2			Take a history from a patient with Nephrotic Syndrome.	
3			Perform physical examination of a patient with suspected GN and Nephrotic Syndrome	
4			Effectively counsel a child and his/her parents with nephrotic syndrome	
5		Acute Kidney Injury (AKI)	Discuss the clinical presentation, the diagnostic workup and management for Acute Kidney Injury in Pediatric patients.	
6		Chronic Renal Failure (CKD)	Discuss the clinical presentation, the diagnostic workup and management for Chronic Renal Failure in Pediatric patients	
7		Hypospadias	Discuss the types, complications, and management of a child with Hypospadias	

PEADS NEUROSCIENCES-3 MODULE

	<i>subject</i>	<i>Topic</i>	<i>Learning objectives</i>	<i>Faculty</i>
1	Paediatrics	Epilepsy	<p>Discuss the diagnostic work up and management for children with seizures and Epilepsy</p> <p>Perform a consultation with a child having epilepsy under supervision emphasizing history and examination.</p> <p>Write a prescription for a child with Tonic-Clonic and Petit-mal epilepsy</p> <p>Counsel and educate the Parents/guardian of a child with epilepsy.</p>	
2		Meningitis	<p>Discuss the diagnostic work up and management for children with Headache</p> <p>Discuss the diagnostic work up and managements for children suspected of Meningitis</p> <p>Explain the short term and long term sequelae of meningitis</p> <p>Describe assessing the initial triad symptoms of meningitis in children</p>	
3		Big head	Explain the diagnostic and therapeutic approach to a child with big head	
4		Hereditary neuropathies	Classify hereditary neuropathies and discuss their clinical features, investigations and management	
5		Congenital malformations- Spina Bifida/myelomeningocele	<p>Explain the clinical features, investigations, and management of a pa child with Spina Bifida/Myelomeningocele</p> <p>Discuss and counsel the pts regarding the changes in the lifestyle of patients with congenital malformations</p>	

PEADS MULTISYSTEM-3 MODULE

	subject	Topic	Learning objectives	Faculty
1	Paediatrics	Protein calorie malnutrition	<p>Discuss the causes of malnutrition in developing countries - Describe the different forms of protein-energy malnutrition - Describe the symptoms of severe protein-energy malnutrition in children - Outline the treatment needed to treat a malnourished child - Define the criteria that classifies protein-energy malnutrition</p> <p>Discuss the causes of malnutrition in developing countries - Describe the different forms of protein-energy malnutrition - Describe the symptoms of severe protein-energy malnutrition in children - Outline the treatment needed to treat a malnourished child - Define the criteria that classifies protein-energy malnutrition Explain the different causes, forms, classification, clinical features, and management of PMC</p>	
2		Porphyria	<p>Classify porphyria</p> <p>Explain the etiology, pathogenesis, clinical features and treatment of different types of porphyria</p>	
3		Down syndrome	Explain the risk factor, chromosomal aberrations, clinical features and complications of Down Syndrome	
4		Collagen disorders	Classify collagen disorders and their clinical features	
5		Glycogen storage diseases	Classify glycogen storage disease and their clinical features	
6		Mucopolysaccharidoses	Describe the clinical features and complications of mucopolysaccharidosis	
7		Galactosemia and Phenylketonuria	Describe the clinical features, investigations and complications of Galactosemia and Phenylketonuria	
8		Kawasaki disease	<p>Explain the clinical features, investigations, management, prognosis and complications of Kawasaki syndrome</p> <p>Explain the clinical features, investigations, management, prognosis and complications of SLE in childre</p>	

GIT Module Year-5 (MBBS)

<i>S.No</i>	<i>Subject</i>	<i>Topic</i>	<i>Learning Objectives</i>	<i>Faculty</i>
1	Paediatrics	Vomiting	Explain the diagnostic and therapeutic approach to a neonate and infant with persistent vomiting	
2		Hyperbilirubinemias	Discuss the diagnostic approach and management of a neonate and infant with jaundice.	
			Take history and perform physical examination of a child with jaundice	
			Counsel a child and his parents with Gilbert syndrome.	
3		Malabsorption and celiac disease	Explain the diagnostic workup and management of a patient with Malabsorption due to celiac disease. Counsel a child and his/her parents regarding dietary advice regarding celiac disease	
4		Acute diarrhea	Explain the diagnostic workup and management of a patient acute watery diarrhea Assess the state of hydration in a child with acute diarrhea	
5		Chronic diarrhea	Explain the diagnostic workup and management of a patient with chronic diarrhea.	

ENDOCRINE AND REPRODUCTION-3 MODULE YEAR-5 (MBBS)

S.No	Subject	Topic	Learning Objectives	Faculty
1	Paediatrics	Short stature	Discuss the diagnostic approach and management of a child with short stature	
2		Thyroid disorders	Explain the neonatal screening for hypothyroidism	
			Explain the diagnostic approach and management of a child with suspected Cretinism	
			Discuss the complications of Cretinism	
			Take history and perform physical examination of a child with hypothyroidism/cretinism	
3		Type-1 DM	Explain the diagnostic approach, screening and management of a Child with suspected Type-1 Diabetes Mellitus	
			Take history and perform physical examination of a patient with Type 2 DM	
			Counsel a newly diagnosed patient and parents with type 1 DM	
4		The neonate	Discuss the types and management of common problems of preterm and term babies	
			Discuss the principles of neonatal care	
			Observe the care of a neonate in nursery	
			Take history and perform physical examination of a neonate	

5TH PROF MBBS CLINICAL PLACEMENT 2025

CLERKSHIP POSTING

PHASE-A

Batch	W-01 To W-06	W-07 To W-12	W-13 To W-18	W-19 To W-24
Date	17 th March to 25 April 2025	28 th April To 6 th May 2025	09 th May To 18 th July	21 st July To 29 th August
Batch A	General Medicine	General Surgery	OBG	Peads
Batch-B	General Surgery	General Medicine	Peads	OBG
Batch-C	OBG	Peads	General Medicine	General Surgery
Batch-D	Peads	OBG	General Surgery	General Medicine

Alfred

DEPARTMENT OF MEDICAL EDUCATION

MCM 3rd Prof MBBS Hospital clinical placement 2023-24

Bat ch	W- 01	W- 02	W- 03	W- 04	W- 05	W- 06	W- 07	W- 08	W- 09	W- 10	W- 11	W- 12	W- 13	W- 14	W- 15	W- 16	W- 17	W- 18	W- 19	W- 20	W- 21	W- 22	W- 23	W- 24
A-1	Med	Med	Med	Surg	Surg	Surg	Pea d	Pea d	Pea d	OBS/ Gyne	OBS/ Gyne	OBS/ Gyne	Pulm o	Anes thesi a	Endo	Orth & Trau	Gastr o	Neuro sur	Eye	Eye	ENT	ENT	ENT	ENT
A-2	Surg ery	Surg ery	Surg ery	Med	Med	Med i	OBS /Gy /Gy ne	OBS /Gy /Gy ne	OBS /Gy /Gy ne	Pea d	Pea ds	Pea d	Orth & Trau	Gastr o	Neur osur	Pulm o	Anes thesi a	Endo	ENT	ENT	ENT	ENT	ENT	ENT
B-1	Pea ds	Pea ds	Pea ds	OBS /Gy /Gy ne	OBS /Gy /Gy ne	OBS /Gy ne	Med	Med	Med	Pea d	Surg	Surg	Eye	Eye	Eye	ENT	ENT	ENT	ENT	ENT	ENT	ENT	ENT	ENT
B-2	OBS /Gy ne	OBS /Gy ne	OBS /Gy ne	Pea d	Pea d	Pea d	Surg	Surg	Surg	Med	Med	Med	ENT	ENT	ENT	ENT	ENT	ENT	ENT	ENT	ENT	ENT	ENT	ENT
C-1	Eye	Eye	Eye	ENT	ENT	ENT	Pul mo	Ane sthe sia	End o	Orth o & Trau ma	Gastro	Neur osur gery	Med	Med	Med	Surg	Surg	Surg	Surg	Surg	Surg	Surg	Surg	Surg
C-2	ENT	ENT	ENT	Eye	Eye	Eye	Orth & Trau	Gast ro	Neu rosur gery	Pulm o	Anesth esia	Endo	Surg	Surg	Surg	Med	Med	Med	Med	Med	Med	Med	Med	Med
D-1	Pul mo	Ane sthe sia	End o	Orth o & Trau ma	Gast ro	Neur osur gery	Eye	Eye	Eye	ENT	ENT	ENT	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d
D-2	Orth o & Trau ma	Urol ogy	Neu rosur gery	Pul mo	Ane sthe sia	End o	ENT	ENT	ENT	Eye	Eye	Eye	OBS/ Gyne	OBS/ Gyne	OBS/ Gyne	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d	Pea d

- Note: each sub batch will comprise of 04 students (A1: 13 students and A2: 12 students)
- Posting Timing: 09:00 to 12:00pm Evening Timing: 03:00pm to 06:00pm

Tips to Prevent Coronavirus Transmission



Wash your hands frequently



Cough and sneeze into the elbow



Dispose of used tissues immediately



Avoid contact with others



Avoid crowds and public gatherings



Avoid touching your face



Clean all shared surfaces frequently



Avoid all nonessential travel



Call ahead before going to a clinic or hospital



Isolate yourself if sick or at risk of complications



Work from home if possible



Wear a mask if you are sick, have COVID-19, or are caring for someone with it



MCM Peshawar



Hotel Road, Yousaf Abad, Peshawar



091-2814151 / 091-2814174

Remember the **P A S S** Word

Pull

Pull the pin (or other motion) to unlock the extinguisher.



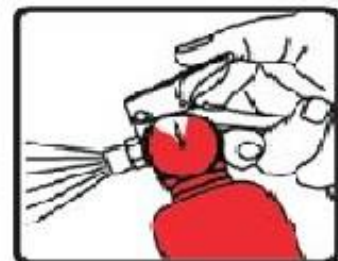
Aim

Aim at the base (bottom) of the fire and stand 6 - 10 feet away.



Squeeze

Squeeze the lever to discharge the agent.



Sweep

Sweep the spray from left to right until the flames are totally extinguished.





THE KHYBER MEDICAL UNIVERSITY EXAMINATIONS REGULATIONS, 2008

1. These regulations may be called "The Khyber Medical University Examinations Regulations, 2008" in terms of Section 24(1)(c) and 28(1)(C) of The Khyber Medical University Act, 2006 (NWFP Act No. 1 of 2007).
2. These Regulations shall come into force at once.
3. Eligibility to appearing in the University: A student shall be eligible to appear in a professional examination if he / she fulfil the following conditions:
 - a. Has passed all the subjects of the previous examination.
 - b. Has undergone the specified period of theoretical and practical courses and clinical training including demonstrations for the said examination to the satisfaction of the Department concerned.
 - c. No student is eligible for university examination without having attended at least 75% of lecturers, demonstrations, tutorials and practical / clinical work both in-patient and out-patient departments in that academic session.
 - d. Has his / her name submitted to the Controller of Examination KMU by the Principal on clearance by the Head of Institute / teacher concerned?
 - e. Has paid the requisite fees for the examination to the KMU and has cleared all the college / hostel dues.
 - f. Any student who fails to clear the 1st Professional MBBS Part-I examination in FOUR chances availed or un-availed after becoming eligible for the examination shall cease to become eligible for further medical education in Pakistan.
 - g. Any student who fails to clear the 1st Professional MBBS Part-II examination in FOUR chances availed or un-availed after becoming eligible for the examination shall cease to become eligible for further medical education in Pakistan.
 - h. Maximum of FOUR chances availed or un-availed will be allowed to a student to clear First Professional BDS Examination. If a student fails to pass First Professional BDS in stipulated FOUR chances, his / her name will be struck off the college. He / she will be considered ineligible (to undertake) BDS studies any where in the country.
 - i. The Principal will not forward the examination form of any student unless he / she produces clearance certificate from the college cashier, hostel warden and the college librarian.
 - j. A student who fails in part of the exam and does not avail two consecutive chances will have to clear all the subjects in the subsequent chances. However there is no bar on the number of chances except for 1st Professional as described in f & g.
1. Each theory and Practical / Oral examination shall be of at least three hours duration.
2. The minimum passing marks in each subject shall be 50% each in theory and practical.

A student who fails in theory or in practical examination of a subject shall be considered to have failed in the subject and will have to reappear both in theory and practical.
3. Any student who fails both in annual and supplementary examinations in any subject including part-I and part-II of 1st Professional examination shall not be promoted to the