

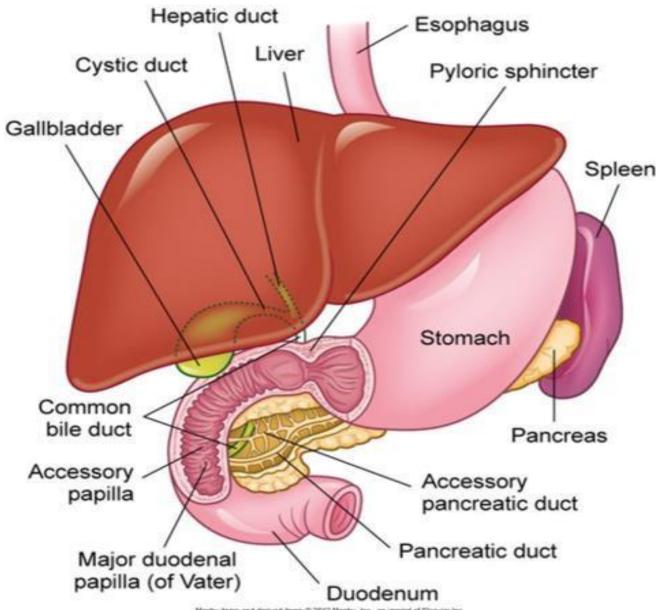
## LIAQUAT NATIONAL HOSPITAL AND MEDICAL COLLEGE



Institute for Postgraduate Medical Studies & Health Science

# GIT & HEPATOBILIARY-II MODULE

## 25th AUGUST 2025 TO 1st OCTOBER 2025



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## **STUDY GUIDE FOR GIT & HEPATOBILIARY II MODULE**

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Module name: GIT & Hepatobiliary Year: Three Duration: 6 weeks (Aug-Oct 2025)

Timetable hours: Lectures, Case-Based Integrated Learning (CBIL), Clinical Rotations, Laboratory, Practical, Demonstrations, Skills, Self-Study

#### **MODULE INTEGRATED COMMITTEE**

MODULE COORDINATOR:  • Dr. Sadia Abdul Qayoum (Forensic)	
CO-COORDINATORS:	Dr. Faiza Agha (Biochemistry)
CO-COORDINATORS:	• Dr. Syed Asad Sibtain ( <b>DHPE</b> )

#### **DEPARTMENTS & RESOURCE PERSONS FACILITATING LEARNING**

DEI ARTIVIERITS & RESCORCE I ERSONS I ACIEITATING ELARINING				
BASIC HEALTH SCIENCES	CLINICAL AND ANCILLARY DEPARTMENTS			
ANATOMY	GASTROENTEROLOGY			
Professor Zia-ul-Islam	<ul><li>Professor M. Mansoor-ul-Haq</li><li>Dr. Shahid Karim</li></ul>			
COMMUNITY MEDICINE				
Dr. Saima Zainab				
FORENSIC MEDICINE				
Professor Syed Mukkaram Ali				
MICROBIOLOGY				
Professor Shaheen Sharafat				
PATHOLOGY				
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PHARMACOLOGY				
Professor Tabassum Zehra				
DEPARTMENT of HEALTH	PROFESSIONS EDUCATION			
- Professor Sobia Ali - Professor	Nighat Huda - Dr. Afifa Tabassum			
- Dr. Yusra Nasir - Dr. Syed A	sad Sibtain - Dr. Asra Zia			
LNH&MC MANAGEMENT				
Professor Karimullah	Makki, Principal LNH&MC			
Dr. Shaheena Akbani, Director A.A & R.T LNH&MC				
STUDY GUID	E COMPILED BY:			
Department of Health Professions Education				

#### **INTRODUCTION**

#### WHAT IS A STUDY GUIDE?

It is an aid to:

- Inform students how the student learning program of the module has been organized
- Help students organize and manage their studies throughout the module
- Guide students on assessment methods, rules, and regulations

#### THE STUDY GUIDE:

- Communicates information on the organization and management of the module. This will help the student to contact the right person in case of any difficulty.
- Defines the objectives which are expected to be achieved at the end of the module.
- Identifies the learning strategies such as Interactive Lectures, small group teachings, clinical skills, demonstrations, tutorials, and case-based learning that will be implemented to achieve the module objectives.
- Provides a list of learning resources such as books, computer-assisted learning programs, weblinks, and journals, for students to consult to maximize their learning.
- Highlights information on the contribution of continuous and module examinations on the student's overall performance.
- Includes information on the assessment methods that will be held to determine every student's achievement of objectives.
- Focuses on information about examination policy, rules, and regulations.

#### **CURRICULUM FRAMEWORK**

Students will experience an integrated curriculum similar to previous modules.

**INTEGRATED CURRICULUM** comprises system-based modules such as Foundation II, Blood II, Locomotor II, Respiratory system-II, CVS-II, and GIT Liver II which links basic science knowledge to clinical problems. Integrated teaching means that subjects are presented as a meaningful whole. Students will be able to have a better understanding of basic sciences when they repeatedly learn about clinical examples.

**LEARNING EXPERIENCES**: Case-based integrated discussions, and skills acquisition in the skills lab. Computer-based assignments, learning experiences in clinics, wards, and outreach centers

#### **LEARNING METHODOLOGIES**

The following teaching/learning methods are used to promote better understanding:

- Interactive Lectures
- Tutorial
- Case- Based Learning (CBL)
- Clinical Experiences
  - Clinical Rotations
- Skills session
- Self-Directed Learning

**INTERACTIVE LECTURES:** In a large group, the Interactive Lectures introduce a topic or common clinical conditions and explains the underlying phenomena through questions, pictures, videos of patients' interviews, exercises, etc. Students are actively involved in the learning process.

**TUTORIAL:** This format helps students to clarify concepts, and acquire skills or desired attitudes. Sessions are structured with the help of specific exercises such as patient cases, interviews, or discussion topics. Students exchange opinions and apply knowledge gained from Interactive Lectures, tutorials, and self-study. The facilitator's role is to ask probing questions, summarize, or rephrase to help clarify concepts.

 CASE-BASED LEARNING (CBL): A small group discussion format where learning is focused on a series of questions based on a clinical scenario. Students discuss and answer the questions by

applying relevant knowledge gained previously in clinical and basic health sciences during the module and constructing new knowledge. The CBIL will be provided by the concerned department.

**CLINICAL LEARNING EXPERIENCES:** In small groups, students observe patients with signs and symptoms in hospital wards, clinics, and outreach centers. This helps students relate knowledge of the module's basic and clinical sciences and prepare for future practice.

CLINICAL ROTATIONS: In small groups, students rotate in different wards like Medicine, Pediatrics, Surgery, Obs & Gyne, ENT, Eye, Family Medicine clinics, outreach centers & Community Medicine experiences. Here students observe patients, take histories and perform supervised clinical examinations in outpatient and inpatient settings. They also get an opportunity to observe medical personnel working as a team. These rotations help students relate basic medical and clinical knowledge in diverse clinical areas

**SKILLS SESSION:** Skills relevant to the respective module are observed and practiced where applicable in the skills laboratory.

**SELF-DIRECTED LEARNING** Students assume responsibilities for their learning through individual study, sharing and discussing with peers, and seeking information from Learning Resource Center, teachers, and resource persons within and outside the college. Students can utilize the time within the college's scheduled hours of self-study.

## **MODULE 6: GIT & HEPATOBILIARY**

#### **INTRODUCTION**

Gastrointestinal and liver diseases impose a substantial burden on health, and are responsible for approximately 8 million deaths per year worldwide. Diarrheal disease is the eight leading cause of death globally and is responsible for 1.4 million deaths in 2015. Pakistan is one of the countries in MENA (Middle East and North Africa) region with the highest overall burden of Gastrointestinal and Liver Diseases including esophageal cancers, diarrheal diseases, hepatitis and cirrhosis.

This module aims to equip medical undergraduates with the essential knowledge and skills required for dealing with prevalent GI disorders in the local context. This is the second module on gastrointestinal tract in MBBS course. This module will provide an integrative understanding of molecular processes and physiological pathways underpinning healthy and disease states in the gastrointestinal tract and Hepatobiliary system. It will focus on common infections of the gastrointestinal tract, molecular factors influencing the host —pathogen interaction, the mode-of-action of common gastrointestinal therapeutics, environmental interactions, including metabolic, genetic and nutritional disorders and cancerous and non-cancerous gastrointestinal diseases.

#### **COURSE OBJECTIVES AND STRATEGIES**

At the end of the module the students will be able to:

#### **ANATOMY**

TOPICS & OBJECTIVES	LEARNING STRATEGIES
Overview and Congenital abnormalities of GIT	
Describe the gross anatomy of GIT	]
Discuss the clinical features of common congenital anomalies of GIT including Atresia, fistulae, duplications, Diaphragmatic Hernia, Omphalocele, Gastroschisis. Ectopia, Meckel diverticulum, Congenital hypertrophic pyloric stenosis, Hirschsprung disease	Interactive Lecture
Discuss the relevant investigation of common congenital anomalies of GIT	1

#### **GASTROENTEROLOGY**

TOPICS & OBJECTIVES	LEARNING STRATEGIES
1. Abdominal Examination	Small Group
Perform correct abdominal examination on a patient	Session
2. Approach to patients with gastritis	Case Based
Discuss the approach to a patient with Hepatitis	Discussion

### **COMMUNITY MEDICINE**

TOPICS & OBJECTIVES	LEARNING STRATEGIES
1. Introduction to nutrition	
Define Nutrition	
Classify micro and macronutrients	
List the diseases caused by micronutrient deficiencies	Interactive
Explain prevention of micronutrient deficiencies	Lecture/Small Group
2. Balanced diet and bioavailability of nutrients	
Describe the composition of macronutrient in balanced diet	
Describe standard nutrient intake and recommendation	
Calculate energy value from macronutrient	
3. Food hygiene and food poisoning	Small Group

Define food borne illness	Discussion
Discuss physical, biological and chemical hazards of food	
Describe the preservation of food	
Define fortification	
Explain food adulteration	
4. Assessment of nutritional status- Growth Chart	
Describe nutritional assessment	
Explain Nutritional Care Process (NCP)	
List the tools for nutritional status	
Explain the importance of Growth Charts	
5. Malnutrition and prevention	
Define malnutrition	
Classify malnutrition	
Explain the process of assessment of malnutrition	
Discuss control and prevention of malnutrition	
6. Hepatitis, its types and prevention	
Classify Hepatitis	
Discuss the clinical features of Hepatitis	
Explain the epidemiological triangle of Hepatitis	
Explain the control and prevention of Hepatitis	Interactive
Discuss the Hepatitis control programme in Pakistan	Lecture
7. Enteric Fever and its prevention	
Describe enteric fever	
Discuss the epidemiology of enteric fever	
Describe the measures of control and prevention of enteric fever	
8. Diarrheal diseases and its prevention	
Describe diarrheal disease	
Classify diarrheal disease	
Describe the epidemiology of diarrheal diseases	
Explain the clinical features, assessment and diagnostic criteria of diarrheal diseases	
Discuss measure of control and prevention of diarrheal diseases	
9. Cholera and its prevention	Tutorial
Describe cholera disease	
Describe the epidemiology of cholera.	
List risk factors of cholera	
Discuss the measures of control and prevention of Cholera	
10. Worm infestations and their prevention	
Describe worm infestation	
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Classify medically important worms	
Describe the epidemiology of worm infestations	
List the risk factors of worm infestation	
Discuss measures of control and prevention of worm infestations	
11. Amoebiasis and its prevention	
Describe Amoebiasis	
Describe epidemiology of Amoebiasis	Interactive Lecture
Discuss risk factors of Amoebiasis	
Discuss measures of control and prevention of Amoebiasis	
12. Zoonotic Diseases and its prevention	
Describe Zoonosis	
Classify medically important zoonotic diseases	Tutorial
Describe epidemiology of zoonotic diseases	Tutorial
Describe Scabies	
Discuss measures of control and prevention of zoonotic diseases	
13. Leishmaniasis and its prevention	
Describe Leishmaniasis	
Discuss epidemiology of Leishmaniasis	Interactive Lecture
List risk factors of Leishmaniasis	Leotare
Discuss measures of control and prevention of Leishmaniasis	
14. Water Pollution and Water Related Diseases	
Describe water pollution	
List the sources of water pollution	
Classify water related diseases	
Discuss control and prevention of water related diseases	Interactive Lecture
15. Water Purification	Leotone
Describe Water purification	
Enumerate the methods of water purification	
Explain WHO standards for water safety	
16. School Health Services	
Define School Health	
List the components of School Health	
Define the responsibilities of the School Health team members	
Define the functions of School Health Program	Interactive Lecture
Highlight the importance of research in School Health Program	
Discuss health promotion in the context of schools	
17. Travel Medicine	
Describe travel medicine	
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Describe epidemiology in travel medicine	
Explain the risk for travelers	
List the pathogens causing common travelers diseases	
Discuss the control measures for disease prevention among travelers	
Discuss the role of international health regulation for travelers	
18. Anorexia Nervosa	
Define anorexia nervosa using current diagnostic criteria (DSM-5)	Interactive
Evaluate the public health impact of anorexia nervosa	Lecture
Identify risk factors contributing to anorexia nervosa	
Understand the stepped-care model in treating anorexia nervosa	
19. Bulimia Nervosa	
Define bulimia nervosa using current diagnostic criteria (DSM-5)	
Evaluate the public health impact of bulimia nervosa	
Identify risk factors contributing to bulimia nervosa	
Understand the stepped-care model in treating a bulimia nervosa	

## **FORENSIC MEDICINE**

TOPICS & OBJECTIVES	LEARNING STRATEGIES	
1. Regional Injuries-I (Head, injuries to scalp & Fractures of Skull)		
Describe Injuries of the scalp including forensic aspects of anatomy of the scalp and their medico legal aspects		
Enumerate the types of fractures of the skull and their forensic aspects	Interactive Lecture	
Explain the mechanism of production of fractures of the skull and their medico legal significance		
2. Regional Injuries-II (Intracranial hemorrhages)		
Describe the types of intracranial haemorrhages along with forensic anatomy of blood vessels commonly involved		
List the signs and symptoms of different types of intracranial haemorrhages and methods to diagnose them		
Explain the medico legal aspects of intracranial hemorrhages		
3. Regional Injuries-III (Brain Injuries, Spinal Injuries)		
Enumerate the different types of injuries to the brain and spine		
Explain the mechanisms of brain injuries such as Concussion/Contusion/ Irritation, Coup and contre coup injuries		
Describe the mechanism and sign and symptoms of brain injuries to boxers		
Discuss Spinal injuries with special emphasis on Railway spine		
Describe the medico legal aspects of brain and spinal injuries		
4. Regional Injuries-IV (Injuries of Face, Neck, Chest, Abdomen, Pelvis)		
Describe the common injuries of medico legal significance to the face and neck including		
i. Cervical fractures		
ii. Whiplash injuries		
iii. Homicidal and suicidal cut throat		

- iv. Chest injuries including traumatic asphyxia, injuries to ribs, lungs, heart with special emphasis on penetrating injuries and Commotio Cordis
- Describe the abdominal injuries with medico legal aspects of rupture of liver, spleen, injuries to abdominal aorta and intestines
- Discuss Pelvic injuries of medico legal significance

#### 5. Special Trauma-Road Traffic Accidents

- Explain the various causes of road traffic accidents
- Discuss briefly the fitness certificate for driving license
- Describe the various types of injuries to pedestrians, driver and passengers
- Discuss the use of air bags and seat belt syndrome
- Explain the injuries to motor cyclists with special stress on tail gating
- List the Complications of run over injuries with their medico legal significance

#### 6. Special trauma (Blast Injuries)

- Define common terms related to blast injuries
- Classify explosives
- Discuss the physics of bomb blast
- Describe the various types of blast injuries
- Discuss the management of blast injuries

#### 7. Causes of death due to trauma

• Describe the immediate and delayed (remote) causes of death due to wounds

#### 8. Forensic Psychiatry-I

- State the salient features of Mental Health Ordinance 2001
- Define insane person as per law
- · Differentiate between Legal and Medical Insanity

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Describe subjective disorders as delusions, ha legal significance	llucinations, illusion, obsession, impulse and their medico
9. Forensic Psychiatry-II	
Define the various terms of medico legal signi psychopath, twilight state	ficance such as affect, fugue, confabulation, I.Q,

• Discuss legal tests of insanity i.e. McNaughton's Rule

- · List motives of feigned insanity
- Differentiate between true and feigned insanity
- Explain the procedure of admission in a mental hospital
- Discuss the civil and criminal responsibilities of insane

#### 10. Metallic Poisons-Arsenic and Mercury

· Explain the sign and symptoms, diagnosis, treatment, postmortem findings and medico legal importance of acute and chronic poisoning by Arsenic and Mercury

#### 11. Metallic Poisons-Lead and Copper

• Explain the sign and symptoms, diagnosis, treatment, postmortem findings and medico legal importance of acute and chronic poisoning by Lead and Copper

#### 12. Food poisoning

- Enumerate the types of food poisoning
- Differentiate between Toxin type and Infection type of food poisoning
- · Explain the sign and symptoms, diagnosis, and postmortem findings of food poisoning
- Discuss role of forensic expert in cases of food poisoning

#### 13. Opium & its derivative poisons

- Enumerate the derivatives of Opium
- Explain the sign and symptoms, diagnosis, treatment, postmortem findings and medico legal importance of Opium poisoning

#### 14. Corrosives poisoning

• Discuss the sign and symptoms, treatment and medico legal significance of corrosive poisons; including HCL, H2SO4, Nitric acid, Vitriolage

#### 15. Organic Acids and Alkalies

- Discuss the sign and symptoms, treatment and medico legal significance of:
- Oxalic acid
- Carbolic acid ii.
- iii. Salicylic acid
- Hydrocyanic acid & cyanides,
- Alkalies; Caustic Soda and Caustic Potash

#### 16. Non Metallic Poison- Phosphorus

Discuss the sign and symptoms, treatment and medico legal significance of Phosphorus

#### 17. Therapeutic poisons-II (Barbiturates, Diazepam and Tranquilizer) and common household poisons

- Describe the mode of action, signs and symptoms depending upon concentration in blood, treatment and postmortem findings of therapeutic poisons Barbiturates, Diazepam and Tranquilizer
- Enumerate common household poisons
- Discuss the sign and symptoms, treatment and medico legal significance of common household poisons

#### 18. Drug addiction and dependence

Lecture

Interactive

Small Group Discussion

Define drug addiction and dependence
 List the drugs that cause addiction and dependence
 Discuss their sign and symptoms, treatment and medico legal significance

### **MICROBIOLOGY**

TOPICS & OBJECTIVES	LEARNING STRATEGIES
1. Infections of the upper Gastrointestinal tract	
List the microorganisms which causes infections of oral cavity & upper GI tract	
Discuss the important properties of Helicobacter pylori and Candida	
Describe the pathogenesis, epidemiology clinical findings and laboratory diagnosis of H. Pylori & Candida	
2. Infectious enterocolitis due to Escherichia coli and Mycobacterium tuberculosis	
Define the term diarrhea	
List the infectious causative agents of diarrhea	
Discuss the characteristics of inflammatory and non-inflammatory diarrhea.	
Discuss important properties, pathogenesis and clinical findings, laboratory diagnosis, treatment and prevention of diarrhea caused by Escherichia coli	
Discuss briefly the role of Mycobacterium tuberculosis in causing diarrhea	Interactive
3. Infectious enterocolitis due to Salmonella species and Shigella	
Describe the important properties of Salmonella and Shigella	
List the different species of Salmonella	
Discuss diarrhea caused by Salmonella and Shigella	
• Discuss the pathogenesis, clinical findings, laboratory diagnosis, treatment and prevention of typhoid fever and Shigella	
4. Role of viruses in infecting gastrointestinal tract	
List the important viruses that cause gastrointestinal tract infections	
• Discuss the important properties, replicative cycle, transmission, epidemiology, pathogenesis, clinical findings, laboratory diagnosis, treatment and prevention of Polio and Rota viruses	
5. Intestinal protozoa	
Classify major protozoan pathogens	
• Discuss the diseases, important properties, pathogenesis, epidemiology, clinical findings, laboratory diagnosis, treatment and prevention of Entamoeba histolytica and Giardia lambdia	
Discuss briefly the minor intestinal protozoa	

#### 6. Intestinal Cestodes

- Discuss the diseases, important properties, pathogenesis, epidemiology, clinical findings, laboratory diagnosis, treatment and prevention of:
- i. Taenia solium
- ii. Taenia saginata
- iii. Diphyllobothrium latum
- iv. Hymenolepis nana
- v. Dipylidium caninum

#### 7. Trematodes

- Discuss the diseases, important properties, pathogenesis, epidemiology, clinical findings, laboratory diagnosis, treatment and prevention of:
- i. Schistosoma
- ii. Clornorchis
- iii. Paragonimus
- iv. Faschiola Fasciolopsis
- v. Heterophyes

#### 8. Intestinal Nematodes-I

- Discuss the diseases, important properties, pathogenesis, epidemiology, clinical findings, laboratory diagnosis, treatment and prevention of:
- i. Enterobius vermicularis
- ii. Ascaris lumbricoides
- iii. Strongyloides

#### 9. Intestinal Nematodes-II

- Discuss the diseases, important properties, pathogenesis, epidemiology, clinical findings, laboratory diagnosis, treatment and prevention of:
- i. Ancylostoma and Necator
- ii. Trichuris trichura
- iii. Trichinella

#### 10. Anaerobic infections of the Gastrointestinal tract (peritonitis and appendicitis)

- List the microorganisms causing peritonitis and appendicitis
- Discuss briefly acute appendicitis and peritonitis
- Discuss in detail the important properties, pathogenesis, epidemiology, clinical findings, laboratory diagnosis, treatment and prevention of Bacteriodes and Prevotella

#### 11. Hepatotropic Viruses-I

• Discuss the important properties, summary of replicative cycle, transmission, epidemiology pathogenesis, clinical finding, laboratory diagnosis, treatment and prevention of Hepatitis B, C and D

#### 12. Hepatotropic viruses -II

• Discuss the important properties, summary of replicative cycle, transmission, epidemiology pathogenesis, clinical finding, laboratory diagnosis, treatment and prevention of Hepatitis A, E and G

#### 13. Bacterial and Parasitic infections relating to the liver

List the important protozoa, Cestodes and trematodes infecting the liver	
Discuss in detail the important properties, pathogenesis, epidemiology, clinical finding, laboratory diagnosis, treatment and prevention of Leptospira, Echinococcosis granulosus, Echinococcosis multilocularis	
14. Stool Detailed Report	
List the clinical indications of stool detailed report	
Describe the methods of doing stool DR	Practical
Discuss the physical, chemical and microscopic features of stool DR with regards to infectious and non-infectious causes	Tractical
Identify the eggs of important worms	
15. Infectious enterocolitis due to Vibrio cholera, Campylobacter jejuni, Yersenia enterocolitica	
Discuss the important properties, pathogenesis, clinical findings, laboratory diagnosis, treatment and prevention of vibrio cholera, Campylobacter jejuni and Yersinia enterocolitica	
16. Food Poisoning	
Define food poisoning	Interactive
List the causative microorganisms of food poisoning	Lecture
Discuss briefly food poisoning due to Staphylococcus Aureus & Listeria	
Discuss the important properties, pathogenesis,epidemiology,clinical findings, laboratory diagnosis, treatment and prevention of Bacillus and Clostridia	
Discuss antibiotic associated pseudomembranous colitis due to Clostridium Difficile	
17. Lab diagnosis of enteric fever & GIT pathogens	Tutorial
Discuss the important tests in diagnosing enteric fever	- Tutorial

## **PATHOLOGY**

TOPICS & OBJECTIVES	
1. Lesions of oral cavity (Inflammatory/reactive, precancerous and cancerous)	
Discuss apthous ulcers & fibroproliferative lesions of oral cavity	
Discuss the characteristic features of precancerous oral cavity lesions	
List the risk factors for oral cancer especially squamous cell carcinoma	
Discuss the pathogenesis, molecular biology and morphology of squamous cell carcinoma	
2. Inflammation & neoplasms of salivary glands	Interactive Lecture
Discuss sialadenitis and mucocele	Eccture
Classify common benign and malignant tumors of salivary glands	
Describe the characteristic features, pathogenesis and morphology of the most common salivary gland tumors	
3. Esophageal obstruction, achalasia, esophagitis & Barrett esophagus	
Explain esophageal obstruction, varices and achalasia	
Classify esophagitis	
Discuss the risk factors, pathogenesis, morphology and clinical features of Barrett esophagus	
4. Esophageal tumors	
Classify tumors of esophagus	Interactive

Explain the etiology and pathogenesis of esophageal tumors	Lecture/
Identify the morphology and common clinical features of esophageal tumors	Tutorial
5. Gastritis, Stress related mucosal disease, Chronic Gastritis	
Define Gastritis	
Describe its pathogenesis, morphology & clinical features	
Define stress related mucosal disease	
iscuss its pathogenesis, morphology & clinical features  kplain the pathogenesis, morphology & clinical features of chronic gastritis (with special emphasis on I. Pylori gastritis and autoimmune eosinophilic, lymphocytic & granulomatous gastritis)	
• Discuss risk factors, pathogenesis, morphology, clinical features & complications of peptic ulcer disease	
Define mucosal atrophy, intestinal metaplasia, dysplasia & gastritis cystica in relation to gastritis	
Discuss hypertrophic gastropathies	
7. Gastric polys & tumors of stomach	
Discuss the types, sites, risk factors & morphology of gastric polyps.	
Classify gastric tumors based on macroscopic and microscopic grounds	Interactive Lecture/
<ul> <li>Discuss epidemiology, risk factors, pathogenesis, molecular biology, morphology and clinical features of gastric adenoma &amp; adenocarcinoma</li> </ul>	Tutorial
Explain gastric lymphoma, carcinoid tumor and gastrointestinal stromal tumors	
8. Intestinal obstruction/ Ischemic bowel diseases/ Angiodysplasia	
Describe types of intestinal obstructions	
Discuss the risk factors and morphology of intestinal obstructions	
Describe the pathogenesis, morphology, clinical features of Ischemic bowel disease	
Define Angiodysplasia	
Discuss the pathogenesis and morphology of Angiodysplasia	
9. Malabsorption & Diarrhea	Tutorial
Define malabsorption & diarrhea	
Classify diarrhea	
<ul> <li>Enumerate different malabsorption diseases including Cystic fibrosis, Celiac disease, environmental enteropathy, Autoimmune enteropathy, Lactase deficiency &amp; Abetalipoproteinemia</li> </ul>	
<ul> <li>Discuss the pathogenesis, risk factors, morphology and clinical features of Celiac disease</li> </ul>	
Discuss etiopathogenesis of Whipple disease	
<ol> <li>Irritable bowel syndrome (IBS), Inflammatory bowel disease (IBD), Indeterminate colitis &amp; Colitis associated neoplasia</li> </ol>	
Define irritable bowel syndrome and inflammatory bowel disease	
Explain its pathogenesis & clinical features	Interactive
Describe its types (Crohn & ulcerative colitis) and their pathogenesis	Lecture
<ul> <li>Explain the morphology and clinical features of both types of IBD</li> </ul>	
Differentiate between Crohn & ulcerative colitis	
Define intermediate colitis	
Describe long term complications of ulcerative colitis & Crohn disease	
Define diversion colitis, microscopic colitis, sigmoid diverticulosis & graft versus host disease	
11. Polyps of small & large intestine (Familial adenomatous polyposis FAP)	
Classify non-neoplastic & neoplastic polyps of intestine	1

	VIODOLL		
Describe its morphology & clinical features			
Discuss briefly gastrointestinal polyposis syndromes			
12. Tumors of small & large intestines, Hemorrhoids, appendicitis, Peritonitis, tumors of anal canal & peritoneum			
Classify tumors of intestines	Tutorial		
Discuss the risk factors and pathogenesis of adenoma-adenocarcinoma sequence  Describe the gross and microscopic features of intestinal tumors  Discuss the clinical features, grading and staging of intestinal tumors			
		• Discuss briefly tumors of anal canal, hemorrhoids, acute appendicitis, tumors of appendix, peritonitis & peritoneal mesothelioma	
		13. General features of liver diseases	
Describe the mechanism of injury & repair			
Elaborate the laboratory diagnosis of hepatic diseases			
Describe acute & chronic liver failure			
Explain morphology & clinical features of liver failure			
Define acute-on-chronic liver failure	Interactive		
14. Hepatitis; Viral, Autoimmune & Drug Induced	Lecture		
Discuss the morphological features of viral hepatitis			
Define autoimmune & drug induced hepatitis			
Describe clinicopathlogic features, morphology & diagnostic criteria of autoimmune hepatitis	7		
Describe patterns of drug & toxin induced hepatic injury			
Define clinicopathologic syndromes of viral hepatitis, chronic hepatitis & carrier state			
15. Alcoholic & Non-Alcoholic Liver Disease (NAFLD)			
Explain the pathogenesis, morphology & clinical features of Alcoholic Liver Disease	Tutorial		
• Define non-alcoholic liver disease & World Health Organization criteria for the metabolic syndrome			
Discuss the pathogenesis, morphology & clinical features of NAFLD			
16. Storage and metabolic disorders of liver			
List the types of storage & metabolic disorders of liver			
• Discuss the genetic alterations, pathogenesis, morphology & clinical presentation of Hemochromatosis, Wilson disease and $\alpha 1$ anti-trypsin deficiency			
17. Cholestatic Diseases, Autoimmune Cholangiopathies. & structural anomalies of the biliary tree			
Explain bilirubin & bile formation	Interactive		
Describe pathophysiology & causes of jaundice	Lecture		
<ul> <li>Discuss pathogenesis &amp; morphology of cholestasis, large bile duct obstruction, cholestasis of sepsis, primary hepatolithiasis, neonatal cholelithiasis &amp; biliary atresia</li> </ul>			
• Describe the pathogenesis, morphology & clinical features of primary biliary cirrhosis, primary sclerosing cholangitis			
Define choledochal cyst & fibropolycystic disease			
18. Circulatory Disorders, Hepatic complications of organ or Hematopoietic stem cell transplantation, Hepatic diseases associated with pregnancy	Tutorial		
Describe the clinical manifestation & morphology of various circulatory disorders of liver			
Describe morphology of graft-versus host disease & liver graft rejection, preeclampsia & eclampsia, acute fatty liver of pregnancy & intrahepatic cholestasis of pregnancy			
19. Tumors of liver			

Classify liver tumors	
Discuss the molecular profile, pathogenesis and morphology of benign liver tumors	
<ul> <li>Discuss the risk factors, pathogenesis, morphology, clinical features and diagnosis of malignant tumors of liver</li> </ul>	
20. Pathological diseases, and tumors of gall bladder	
• Discuss the etiology, pathogenesis, gross morphological & histological features of different types of cholecystitis, cholelithiasis	
Discuss risk factors, pathogenesis, morphology and diagnosis of carcinoma of gall bladder	Lata va ations
21. Non neoplastic diseases of pancreas	Interactive Lecture
• Describe non-tumorous conditions of Pancreas including congenital anomalies, acute and chronic pancreatitis	
22. Neoplastic cysts, Neoplasms of Pancreas	
Discuss Congenital cysts & Pseudocysts	
Discuss cystic neoplasm of Pancreas	
• Describe precursors to pancreatic cancers, and the pathogenesis, morphology & clinical features of pancreatic carcinoma	
Define Acinar cell carcinoma & Pancreatoblastoma	
23. Laboratory diagnosis of liver disease	Tutorial
Discuss the liver function tests	Tutorial
24. Histopathology of oral cavity, salivary glands, pre-malignant & malignant lesions of esophagus	
Describe the morphology of:	
i. Leucoplakia & eythroplakia	
ii. Most common salivary gland tumors	
iii. Barrett esophagus	
iv. Squamous cell carcinoma & adenocarcinoma of esophagus	
25. Histopathology of gastric diseases and gastric tumors	
Describe the morphological features of gastritis, and peptic ulcer disease	
Discuss morphological features of gastric polyps, adenoma & adenocarcinoma	
26. Histopathology of polyps & intestinal tumors	Practical
Classify intestinal polyps	
Discuss intestinal polyps	
Discuss the morphological features of intestinal tumors	
27. Biochemical tests to identify microorganisms especially of the GIT	
Identify lactose and non-lactose fermenting colonies on MacConkeys agar	
Discuss the importance of:	
i. Triple sugar iron agar test	
ii. Sulphur Indole Motility agar test	
iii. Citrate utilization test	
iv. Urease test	

### **PHARMACOLOGY**

TOPICS & OBJECTIVES	LEARNING STRATEGIES	
1. Prokinetics and Anti-Emetics		
Classify prokinetic and anti-emetic agents	ical pharmacology of those agents  Antagonists (as potent anti-emetics)  Interactive Lecture/ Tutorial  antagonists	
Discuss the basic & clinical pharmacology of those agents		
2. Serotonin Agonists & Antagonists (as potent anti-emetics)		
• Explain the mechanism(s) of action, therapeutic uses, adverse effects, and contraindications of serotonin agonists and antagonists		
• Explain the role of serotonin, its agonists and antagonists in different clinical conditions		
Discuss the basic and clinical pharmacology of serotonin agonists and antagonists		
3. Drugs used in Acid Peptic Disorder including H. Pylori-I & II		
Classify drugs used in the treatment of acid peptic disorder including H. Pylori		
Discuss the basic & clinical pharmacology of drugs used in acid peptic disease		
• Discuss drug regimens used in the treatment of acid peptic diseases including treatment of H. Pylori associated ulcers		
• Discuss the clinical uses, adverse effects, pharmacokinetics and pharmacodynamics of notable drugs		
4. Drug Management of Viral Hepatitis (Anti-Viral Drugs-II)	viral hepatitis	
Explain different treatment strategies for viral hepatitis		
• Discuss the basic & clinical pharmacology of drug groups used in viral hepatitis including role of Interferons		
• Discuss the basic and clinical pharmacology of various drug regimens used in viral hepatitis		
5. Laxatives (drugs used in constipation)		
Classify laxatives/purgatives		
• Explain the pharmacokinetics and dynamics and adverse effects of laxatives/ purgatives		
6. Treatment of Amebiasis (Anti-Protozoal Drugs-II) & Diarrhea & Irritable Bowel Syndrome (IBS)		
Classify drugs used in the treatment of Amebiasis	Tutorial	
Explain the basic & clinical Pharmacology of drugs used in the treatment of Amebiasis	Tutorial	
Discuss various drug regimens used in the treatment of amebiasis, diarrhea and IBS		
7. Anti-Diarrheal Drugs & Treatment of Irritable Bowel Syndrome (IBS)		
Classify anti-diarrheal drugs	Interactive Lecture/	
Discuss drug treatment of infectious diarrhea	Case- Based	
Explain the basic & clinical pharmacology of anti-diarrheal drugs	Integrated Learning	
Discuss the drug treatment of IBS		
8. Anti-Helminthic Drugs		
Classify drugs used in the treatment of helminthic infections	Tutorial	
Describe basic and clinical pharmacology of anti-helminthic drugs		
9. Treatment of Typhoid Infection	Interactive	

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Discuss the drug regimens used in typhoid infection along with their basic and clinical pharmacology	
10. Preparation of Tyrode solution	
Demonstrate the preparation of Tyrode solution for practical setup	
State its contents and their quantities for solution preparation	
List its experimental uses	Practical
Explain the method of calculation for preparation of various strength of solution used experimentally	
11. Evaluate the effects of given drug on the intestine of Rabbit	
Demonstrate the effect of different drugs on the isolated piece of Rabbit's intestine by using Power Lab     System	

Apart from attending daily scheduled sessions, students too should engage in self-study to ensure that all the objectives are covered



## **LEARNING RESOURCES**

SUBJECT	RESOURCES	
	TEXT BOOKS	
ANATOMY	1. K.L. Moore, Clinically Oriented Anatomy	
COMMUNITYMEDICINE	1. Community Medicine by Parikh 2. Community Medicine by M Illyas 3. Basic Statistics for the Health Sciences by Jan W Kuzma	
FORENSIC MEDICINE	<ol> <li>Nasib R. Awan. Principles and practice of Forensic Medicine 1st ed. 2002.</li> <li>Parikh, C.K. Parikh's Textbook of Medical Jurisprudence, Forensic Medicine and Toxicology. 7th ed.2005.</li> <li>REFERENCE BOOKS</li> <li>Knight B. Simpson's Forensic Medicine. 11th ed.1993.</li> <li>Knight and Pekka. Principles of forensic medicine. 3rd ed. 2004</li> <li>Krishan VIJ. Text book of forensic medicine and toxicology (principles and practice). 4th ed. 2007</li> <li>Dikshit P.C. Text book of forensic medicine and toxicology. 1st ed. 2010</li> <li>Polson. Polson's Essential of Forensic Medicine. 4th edition. 2010.</li> <li>Rao. Atlas of Forensic Medicine (latest edition).</li> <li>Rao.Practical Forensic Medicine 3rd ed ,2007.</li> <li>Knight: Jimpson's Forensic Medicine 10th 1991,11th ed.1993</li> <li>Taylor's Principles and Practice of Medical Jurisprudence. 15th ed.1999</li> <li>WEBSITES:         <ul> <li>www.forensicmedicine.co.uk</li> </ul> </li> </ol>	
PATHOLOGY/MICROBIOLOGY	1. Robbins &Cotran,Pathologic BasisofDisease,9thedition. 2. RapidReviewPathology, 4theditionbyEdwardF. GoljanMD  WEBSITES: 1. http://library.med.utah.edu/WebPath/webpath.html 2. http://www.pathologyatlas.ro/	
PHARMACOLOGY	A. TEXTBOOKS  1. Lippincot Illustrated Pharmacology 2. Basic and Clinical Pharmacology byKatzung	

#### **ASSESSMENT METHODS:**

- MCQs (Multiple Choice Questions)
- Objective Structured Practical/Clinical Examination (OSPE or OSCE)
- MCQs and unobserved OSPE will be conducted on the LNH&MC Moodle platform
- Observed OSPE will constitute multiple examiner-based stations

#### **Internal Evaluation**

- Students will be assessed comprehensively through multiple methods.
- 20% marks of internal evaluation will be added to JSMU final exam. That 20% includes mid-module & end of module examinations, mid-term & pre-professional examinations.

#### **Formative Assessment**

Individual departments may hold quizzes or short answer questions to help students assess their learning. The marks obtained are not included in the internal evaluation

#### For JSMU Examination Policy, please consult the JSMU website!

More than 75% attendance is needed to sit for the internal and final examinations



#### **LNH&MC EXAMINATION RULES & REGULATIONS**

- Students must report to the examination hall/venue, 30 minutes before the exam.
- The exam will begin sharply at the given time.
- No student will be allowed to enter the examination hall after 15 minutes of the scheduled examination time.
- Students must sit according to their roll numbers mentioned on theseats.
- <u>Cell phones are strictly not allowed in the examination hall.</u>
- If any student is found with a cell phone in any mode (silent, switched off, or on) he/she will not be allowed to continue their exam.
- No students will be allowed to sit in exams without University Admit Card, LNMC College ID Card, and Lab Coat.
- Students must bring the following stationary items for the exam: Pen, Pencil, Eraser, and Sharpener.
- Indiscipline in the exam hall/venue is not acceptable. Students must not possess any written material or communicate with their fellow students

## **SCHEDULE:**

WEEKS	3 <sup>RD</sup> YEAR	MONTH
CMEEKS	GIT & HEPATOBILIRAY II MODULE	25 <sup>th</sup> August 2025
6 WEEKS		
		1 <sup>st</sup> October 2025
	PRE PROF. EXAMINATION	

<sup>\*</sup>Final dates will be disclosed later