CBME timetable:3RD PHASE MBBS PART 1(MBBS batch 2021): Session to start from 01/03/2024

Lectures: 25 hrs,**SDL**: 5 hrs, **Seminars, demonstration/DOAP**:35 hrs

Classes allotted on Wednesday and Saturdays in "master timetable"

Lectures: 25 hrs

Lectur e numb er	COMPETENCY NUMBER	BRIEF TITLE OF LECTURE	NAME OF TEACHER/FACI LITATOR	DATE	WEEK (Wedn esday 9-10 am)
	7.1	PHYSIOLOGICAL CHANGES	Dr Vikrant/ Dr Meenakshi	6/3/2024	1 st Wedne sday from start of classes
	9.1, 9.2	ABORTION, CONSENT	Dr Vikrant/ Dr Meenakshi	13/3/2024	2
	9.3	ACUTE ABDOMEN	Dr Vikrant/ Dr Meenakshi	20/3/2024	3
	9.4	GTD	Dr Meenakshi/Dr Vikrant	27/3/2024	4
	9.5	HYPEREMESIS GRAVIDARUM	Dr Meenakshi/Dr Vikrant	3/4/2024	5
	10.1	АРН	Dr Meenakshi/Dr Vikrant	10/4/2024	6
	11.1	MULTIPLE PREGNANCY	Dr Manta/Dr Kamal	24/4/2024	7
	12.1	PIH,ECLAMPSIA	Dr Manta/Dr Kamal	1/5/24	8
	12.1	PIH, ECLAMPSIA	Dr Manta/Dr Kamal	8/5/24	9
	12.2	ANEMIA IN PREGNANCY	Dr Kamal/Dr Mamta	15/5/24	10
	12.3	DIABETES	Dr Kamal/Dr Mamta	22/5/24	11
	12.4	HEART DISEASE	Dr Kamal/Dr Mamta	29/5/24	12
	12.5	UTI	Dr Ajay/Dr Ashok	5/6/24	13
	12.6	LIVER DISEASE	Dr Ajay/Dr Ashok	12/6/24	14

12.8	Rh INCOMPATABILITY	Dr Ajay/Dr Ashok	19/6/24	15
13.1	LABOUR PHYSIOLOGY	Dr Ashok/Dr Ajay	26/6/24	16
13.2	PROM, PERTERM LABOUR	Dr Ajay/Dr Ashok	3/7/24	17
14.2	MECH OF LABOUR, obstructed labour	Dr Ajay/Dr Ashok	10/7/24	18
14.3, 16.1,16.2,16	.3 RUPTURE UTERUS,PPH, INVERSION, BLOOD TRANSFUSION	Dr Amit/Dr Nidhi	24/7/24	19
14.3, 16.1,16.2	RUPTURE UTERUS,PPH, INVERSION, BLOOD TRANSFUSION	Dr Amit/Dr Nidhi	31/7/24	20
16.3	IUGR	Dr Amit/Dr Nidhi	7/8/24	21
16.3	IUGR	Dr Nidhi/Dr Amit	14/8/24	22
17.1,17.2,17.3	LACTATION, BREAST FEEDING	Dr Nidhi/Dr Amit	21/8/24	23
18.1,18.2,18.3,18.	4 NEWBORN, RESUSCITATION,ASPH YXIA	Dr Nidhi/Dr Amit	28/8/24	24
All competencies addressed	Formative assessment	Dr Ashok Verma/ Dr Meenakshi	4/9/23	25

SEMINARS

	COMPETENC Y NUMBER	BRIEF TITLE	Moderator/facilitato r	Date	Studen t roll no	From 21st Saturday after DOAP finished(each Saturday)
1	7.1	PHYSIOLOGICAL CHANGES IN PREGNANCY	Dr Apra	20/7/24	1	21 st Saturday
2	8.7	VACCINATION IN PREGNANCY	Dr Shikha	27/7/24	2	22
3	9.1,9.2	ABORTIONS	Dr Meenakshi Rana	3/8/24	3	23

		TYPES,				
		MANAGEMENT				
4	12.1	PIH: THEORIES,	Dr Sapna	10/8/24	4	24
		EARLY DIAGNOSIS				
5	12.2	ANEMIA IN	Dr Deepika Kapil	17/8/24	5	25
		PREGNANCY:				
		INVESTIGATIONS,				
		INDICES				
6	12.3	DIABETES:	Dr Apra	24/8/24	6	26
_		OHA,INSULINS			_	+
7	12.4	HEART DISEASE:	Dr Shikha	31/8/24	7	27
		ANTICOAGULATIO				
		N, COAGULATION				
		TESTS AND INTERPRETATION				
8	12.7	HIV: screening,	Dr Meenakshi	7/9/24	8	28
0	12.7	risk factors,	Di Mechakshi	7/3/24	0	20
		mgt,PMTC,				
		HAART, PEP				
9	12.8	Rh	Dr Sapna	14/9/24	9	29
		INCOMPATIBILITY:	'			
		PATHOLOGICAL				
		NNJ,EXCHANGE				
		TRANSFUSION				
1	13.1	PARTOGRAM	Dr Deepika Kapil	21/9/24	10	30
0						
1	13.2	POST DATE	Dr Apra	28/9/24	11	31
1		PREGNANCY				
1	15.1	EPISIOTOME,	Dr Shikha	5/10/24	12	32
2		CS,VACCUM,FORC				
	46.4	EPS BANKING	5 44 11:	10/10/21	40	
1	16.1	BLOOD BANKING	Dr Meenakshi	19/10/24	13	33
3		AND BLOOD PRODUCTS				
		TRANSFUSION,				
		INDICATIONS,HAZ				
		ARDS				
1	16.3	IUGR: FETAL USG,	Dr Sapna	2/11/24	14	34
4		DOPPLER		_,,		
1	17.2	BREAST FEEDING	Dr Deepika Kapil	9/11/24	15	35
5						
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Self Directed Learning/Small Group Discussion: 5HRS

	COMPETENCY	BRIEF TITLE	Moderation:	Date	Wednesday
	NUMBER		Student roll no		after 25 theory
			/teacher		classes finished
					(26 th week
					onwards
1	7.1	PHYSIOLOGICAL	16, Dr Vikrant	11/9/24	26 th

		CHANGES IN PREGNANCY: COMPARE AND CONTRAST BIOCHEMICHAL CHANGES			Wednesday
2	8.4	CTG MACHINE AND ADVANCES	17, Dr Meenakshi	18/9/24	27
3	10.1	APH: FLUID/BLOOD MGT	18, Dr Ashok Verma	25/9/23	28
4	8.6	COUNSEL REGARDING APPROPRIATE NUTRITION IN PREGNANCY	19, Dr Mamta	9/10/24	29
5	12.3	DIABETIC DIET, GLYCEMIC INDEXPLAN A DIET FOR NORMAL BMI	20, Dr Ajay	16/10/24	30

DEMONSTRATION/DOAP: 20 HRS: 1st 20 Saturdays (9-10 am in groups; 1-30,31-60,61-90,91-120) in groups. Competencies grouped and planned in table below this table:

	COMPETENCY NUMBER	BRIEF TITLE/ specific objectives:
1.	8.4, 14.1	DIAMETERS OF PELVIS, skull
2.	8.4,14.1	Mechanism of labour in occipito anterior and posterior
3.	8.4,14.1	Mechanism of labour in breech
4.	8.6	COUNSELLING APPROPRIATE NUTRITION TO PREGNANT
5.	8.6	COUNSELLING APPROPRIATE NUTRITION TO PREGNANT
6.	9.4	HTD: H MOLE, low risk and high risk GTN
7.	12.1	ECLAMPSIA MANAGEMENT, magsulf, dilantin, diuretics, fluid therapy,antihypertensives, right anaesthesia/ analgesia
8.	13.1	PARTOGRAPHIC MANAGEMENT OF LABOUR: partograph components, plotting by all students
9.	13.2	PRETERM LABOUR: TOCOLYTICS, ANTIBIOTICS
10.	13.3, 13.4, 13.5, 13.3,	TECHNIQUE OF ARM, STAGES OF LABOUR: DIAGNOSIS, NORMAL, VAGINAL DELIVERY,
	13.4, 13.5,15.2	EPISIOTOMY TECHNIQUE, LA, BLOCKS
11.	13.3, 13.4, 13.5, 13.3,	TECHNIQUE OF ARM, STAGES OF LABOUR: DIAGNOSIS, NORMAL, VAGINAL DELIVERY,
	13.4, 13.5,15.2	EPISIOTOMY TECHNIQUE, LA, BLOCKS
12.	15.1, 20.2	CONSENT FOR VARIOUS PROCEDURES: CORRECT METHOD AND DOCUMENTATION
13.	16.2	INVERSION UTERUS ; DIAGNOSIS & MANAGEMENT
14.	18.1,18.2,18.3, 18.4	BIRTH ASPHYXIA, STEPS OF NEONATAL RESUSCITATION, TREATMENT OF ASPHYXIA,
		PRINCIPLES OF RESUSCITATION
15.	18.1,18.2,18.3, 18.4	BIRTH ASPHYXIA, STEPS OF NEONATAL RESUSCITATION, TREATMENT OF ASPHYXIA,
		PRINCIPLES OF RESUSCITATION

16.	18.1,18.2,18.3, 18.4	BIRTH ASPHYXIA, STEPS OF NEONATAL RESUSCITATION, TREATMENT OF ASPHYXIA,
		PRINCIPLES OF RESUSCITATION
17.	19.1	PUERPERIUM: NORMAL AND ABNORMAL
18.	19.3, 19.4	TUBAL LIGATION: CONSENT, METHODS, IUCD INSEETION AND REMOVAL
19.	19.3, 19.4	TUBAL LIGATION: CONSENT, METHODS, IUCD INSEETION AND REMOVAL
20.	19.3, 19.4	TUBAL LIGATION: CONSENT, METHODS, IUCD INSEETION AND REMOVAL

DETAILED PLAN FOR DEMONSTRATION/DOAP

Demonstration/DOAP plan: 9-10AM (FIRST 20 SATURDAYS) FROM START OF SESSION

Group A: Roll no 1-30

Group B: Roll no 31-60

Group C: Roll no 61-90

Group D: Roll no 91-120

DEMONSTRATIO N ROOM-OBG	FACULTY BLOCK	LABOUR ROOM, POST OP WARD, MTY OT	LABOUR ROOM, POST OP WARD, MTY OT, OPD
Dr Apra/Dr	Dr Shikha/Dr Apra	Dr Deepika Kapil/Dr Sapna	Dr Sapna Bharti/Dr Meenakshi
Shikha	,JR3,JR2,JR1	JR3,JR2,JR1	Rana JR3,JR2,JR1
JR1,JR2,JR3			
Group A (1-30)	Group B (31-60)	Group C (61-90)	Group D (91-120)
OG8.4,14.1	OG9.4, 8.6,12.1,13.2,	OG	18.1,18.2,18.3,18.4,19.1,19.3,
		13.1,13.3,13.4,13.5,15.2,20.2,	19.4,
		16.2,	
Diameters of	H mole	Partograph	Neonatal resuscitation, steps
<mark>skull, pelvis</mark>			
Mechanism of	Drugs: anti HT, Fluids,	Monitoring of labour, stages	Birth asphyxia
labour in OA	Magsulf, LA,		
Mechanism of	Tocolytics,	Conduct of NVD	Puerperium-
labour in OP	antihypertensives,		normal/abnormal:
	fluids, Frusemide		management
Mechanism of	Contraceptives	Episiotomy, vacuum, forceps	Tubal ligation, consent,
labour in Breech			
Mechanism of	Counselling	CS, consent	IUCD: INSERTION AND
labour in	appropriate nutrition		REMOVAL METHOD
face/brow/transv			
<mark>erse lie</mark>			

DEMONSTRATIO	FACULTY BLOCK	LABOUR ROOM, POST OP	LABOUR ROOM, POST OP
N ROOM-OBG		WARD, MTY OT	WARD, MTY OT, OPD

Dr Apra/Dr Shikha JR1,JR2,JR3	Dr Shikha/Dr Apra ,JR3,JR2,JR1	Dr Deepika Kapil/Dr Sapna JR3,JR2,JR1	Dr Sapna Bharti/Dr Meenakshi Rana JR3,JR2,JR1
Group A (1-30)	Group B (31-60)	Group C (61-90)	Group D (91-120)
OG8.4,14.1	OG9.4, 8.6,12.1,13.2,	OG 13.1,13.3,13.4,13.5,15.2,20.2, 16.2,	18.1,18.2,18.3,18.4,19.1,19.3, 19.4,
Diameters o skull, pelvis	H mole	Partograph	Neonatal resuscitation, steps
Mechanism of	Drugs: anti HT, Fluids .	Monitoring of labour, stages	Birth asphyxia
<mark>labour in OA</mark>	Magsulf, LA,		
Mechanism of	Tocolytics,	Conduct of NVD	Puerperium-
labour in OP	antihypertensives,		normal/abnormal :
	fluids, Frusemide		management
Mechanism of	Contraceptives	Episiotomy, vacuum, forceps	Tubal ligation, consent,
<mark>labour in Breech</mark>			
Mechanism of	Counselling	CS, consent	IUCD: INSERTION AND
<mark>labour </mark>	appropriate nutrition		REMOVAL METHOD
in			
face/brow/transverse lie			

SERIAL NUMBER	Saturday 9-10am: Week no- (from start of	Brief competency/specific objectives			
	classes)	Group A (1-30)	Group B (31-60)	Group C (61-90)	Group D (91-120)
1. 02/3/24	1	Diameters of skull, pelvis	H mole	Partograph	Neonatal resuscitation, steps
2. 9/3/24	2	Mechanism of labour in OA	Drugs: anti HT, Fluids, Magsulf, LA,	Monitoring of labour, stages	Birth asphyxia
3. 16/3/24	3	Mechanism of labour in OP	Tocolytics, antihypertensives, fluids, Frusemide	Conduct of NVD	Puerperium- normal/abnormal: management
4. 23/3/24	4	Mechanism of labour in Breech	Contraceptives	Episiotomy, vacuum, forceps	Tubal ligation, consent,
5. 30/3/24	5	Mechanism of labour in face/brow/transverse lie	Counselling	CS	IUCD: INSERTION AND REMOVAL METHOD
6. 06/4/24	6	H mole	Partograph	Neonatal resuscitation, steps	Diameters of skull, pelvis
7. 13/4/24	7	Drugs: anti HT, Fluids, Magsulf, LA,	Monitoring of labour, stages	Birth asphyxia	Mechanism of labour in OA
8. 20/4/24	8	Tocolytics, antihypertensives, fluids, Frusemide	Conduct of NVD	Puerperium- normal/abnormal: management	Mechanism of labour in OP
9. 27/4/24	9	Contraceptives	Episiotomy, vacuum,	Tubal ligation,	Mechanism of labour

			forceps	consent,	<mark>in Breech</mark>
10. 4/5/24	<mark>10</mark>	Counselling	CS	IUCD: INSERTION	Mechanism of labour
				AND REMOVAL	<mark>in</mark>
				METHOD	face/brow/transverse
					<mark>lie</mark>
11. 11/5/24	<mark>11</mark>	Partograph	Neonatal Neonatal	Diameters of skull,	H mole
			resuscitation, steps	<mark>pelvis</mark>	
12. 18/5/24	<mark>12</mark>	Monitoring of labour,	Birth asphyxia	Mechanism of labour	Drugs: anti HT, Fluids,
		stages		<mark>in OA</mark>	Magsulf, LA,
13. 25/5/24	<mark>13</mark>	Conduct of NVD	Puerperium-	Mechanism of labour	Tocolytics,
			normal/abnormal:	<mark>in OP</mark>	antihypertensives,
			management		fluids, Frusemide
14. 01/6/24	14	Episiotomy, vacuum,	Tubal ligation,	Mechanism of labour	Contraceptives
		forceps	consent,	<mark>in Breech</mark>	
15. 08/6/24	<mark>15</mark>	CS	IUCD: INSERTION AND	Mechanism of labour	Counselling
			REMOVAL METHOD	<mark>in</mark>	
				face/brow/transverse	
				<mark>lie</mark>	
16. 15/6/24	<mark>16</mark>	Neonatal	Diameters of skull,	H mole	Partograph
		resuscitation, steps	<mark>pelvis</mark>		
17. 22/6/24	<mark>17</mark>	Birth asphyxia	Mechanism of labour	Drugs: anti HT, Fluids,	Monitoring of labour,
			<mark>in OA</mark>	Magsulf, LA,	stages
18. 29/6/24	<mark>18</mark>	Puerperium-	Mechanism of labour	Tocolytics,	Conduct of NVD
		normal/abnormal:	in OP	antihypertensives,	
		management <u></u>		fluids, Frusemide	
19 . 06/7/24	<mark>19</mark>	Tubal ligation,	Mechanism of labour	Contraceptives	Episiotomy, vacuum,
		consent,	<mark>in Breech</mark>		forceps
20. 13/7/24	<mark>20</mark>	IUCD: INSERTION AND	Mechanism of labour	Counselling	CS
		REMOVAL METHOD	in		
			face/brow/transverse		
			<mark>lie</mark>		

Two internal examinations are mandatory and shall count towards marks in university examinations. Logbooks must be regularly filled and signed. For any queries Dr Meenakshi (Assistant Professor OBG) may be contacted who is in charge for this batch of MBBS.

In Charge Curriculum committee

DRPGMC Tanda

H.P