SRI BALAJI VIDYAPEETH

(Deemed to be University Declared u/s 3 of UGC act 1956)

Accredited by NAAC with 'A' Grade

Pondicherry - 607402.

www.sbvu.ac.in

MAHATMA GANDHI MEDICAL COLLEGE & RESEARCH INSTITUTE, PONDICHERRY

SHRI SATHYA SAI MEDICAL COLLEGE & RESEARCH INSTITUTE, KANCHEEPURAM DT



FACULTY OF ALLIED HEALTH SCIENCES B.Sc. RESPIRATORY THERAPY

2019 -2020 ONWARDS

FIRST, SECOND & THIRD YEAR SYLLABUS AND REGULATIONS
CHOICE BASED CREDIT SYSTEM (CBCS) PATTERN SYLLABUS

(As approved in the Academic Council at the meeting held on 22-05-2019)

Revisit of the syllabus and Examination pattern

(As approved in the Academic Council at the meeting held on 28-09-2020)

This B.Sc. Respiratory Therapy, CBCS Syllabus and Regulations Book has been approved by the Copyright Office, Govt. of India. The copyright registry has allotted the diary number- 632/2021-CO/L, dated 10/01/2021 under the literary work titled, "SBV Innovative Choice based Credit System Curriculum for B.Sc. Respiratory Therapy".

Copyright Registration No: L-99703/2021

INDEX

SL.NO	SUBJECT	PAGE NO
1.	Foreword	3
2.	Policy on AHS Courses	4
3.	Outline of the Choice Based Credit System (CBCS) for Undergraduate Degree Programme	9
4.	Criteria For University Examinations	10
5.	Analysis of Programme Outcome and Course Outcome of B.Sc. Respiratory Therapy	14
6.	I Year Course Content and Scheme of Examination	23
7.	Anatomy	27
8.	Physiology	34
9.	Biochemistry	41
10.	General Microbiology	47
11.	General Pathology	53
12.	I Year Elective Courses	59
13.	II Year Course Content and Scheme of Examination	77
14.	Clinical Pharmacology	81
15.	Respiratory diseases	88
16.	Cardiovascular diseases	95
17.	Diagnostic techniques in cardio respiratory diseases	101
18.	II Year Elective Courses	108
19.	III Year Course Content and Scheme of Examination	123
20.	Respiratory Therapy Techniques -I	126
21.	Respiratory Therapy Techniques -II	133
22.	Life Support System	139
23.	Cardio -Pulmonary rehabilitation	145
24.	Discipline Electives - III Year	151
25.	Question Bank	163

FOREWORD

In recent years, several innovative and need based undergraduate courses in the

realms of Faculty of Allied Health Sciences have been promulgated. These courses

are primarily oriented towards augmenting the Core academic courses in the Health

Care sector.

Although, Allied Health Science courses are in place at several institutes county wide,

mention must be made of the fact that only a few Health Science Universities offer

courses in Allied Health Sciences under a holistic umbrella. It is in the fitness of

things that Allied Health Science courses are being offered in Nodal and Thrust areas

at Sri Balaji Vidyapeeth starting from Certificate programme through Doctoral

studies.

The Undergraduate programme of Allied Health Science courses leading to B.Sc

degree has been very carefully planned taking all the three components into due

consideration, namely academics, patient care and research. Competency assumes

great importance as the graduates coming out of these programmes would either

directly or indirectly assist the Clinicians in day to day activities.

With this in view, the thrust has been laid on a common syllabus for all B.Sc

programmes during the first year of study. These subjects offered in the first year

are oriented Basic Medical Sciences, besides English as a mode of communication

which is vital for affording Global Placements to our successful candidates.

Furthermore all programmes are designed in Choice Based Credit System (CBCS)

made to suit the convenience of the students. The proficiency and competence of

the Undergraduates is fortified by the promulgation of a unique internship cum

research programme.

I wish all students success in their studies and career.

Prof. N. Ananthakrishnan

Dean - Faculty, SBV

3

POLICY ON COURSES OFFERED UNDER FACULTY OF ALLIED HEALTH SCIENCES

PREAMBLE

Sri Balaji Vidyapeeth, Deemed to be University, established under Section 3 of UGC Act, 1956, Accredited by NAAC with A Grade offers various courses under the Faculty of Medicine, Faculty of Dentistry, Faculty of Nursing Sciences and Faculty of Allied Health Sciences.

"Allied Health Professions are a distinct group of health professionals who apply their expertise to prevent disease transmission, diagnose, treat and rehabilitate people of all ages and all specialties. Together with a range of technical and support staff they may deliver direct patient care, rehabilitation, treatment, diagnostics and health improvement interventions to restore and maintain optimal physical, sensory, psychological, cognitive and social functions." - Organization of International Chief Health Professions Officers (ICHPO).

In March 2011, the Ministry of Health and Family Welfare nominated the Public Health Foundation of India (PHFI) as its technical partner and constituted the National Initiative for Allied Health Sciences (NIAHS) secretariat with a mandate to develop a framework to improve allied health training, education and regulation in the country. (Yet to be notified by Government of India).

Sri Balaji Vidyapeeth has introduced several innovative need based courses under the Faculty of Allied Health Sciences at Undergraduate and Postgraduate levels keeping in mind the initiative of Ministry of Health & Family Welfare, Government of India. In an era marked by expanding global job opportunities, these courses are bound to create an awareness among the students to suit themselves in the Health Care Team. Curricula have been designed in an objective manner and are aimed at cognitive, affective and psychomotor domains of learning. Furthermore all courses are designed in Choice Based Credit System (CBCS) made to suit the convenience of the students.

The Undergraduate courses mainly concentrate in creating professionals who form the part of the Health Care Team. The role of these professional is to ably assist the doctor in treatment as well as prognosis and in many a times form the core professional of the team. The proficiency and competence of the Undergraduates is fortified by the promulgation of a unique internship cum research programme.

The Postgraduate courses mainly aim at shaping a graduate into a full professional. Also these postgraduate courses help the graduates as well as the postgraduates to acquire specific skills on various adjunct therapies and techniques.

SUPPLY AND DEMAND

The starting of the new courses will entirely depend on

- a. Demand for the course as seen by the enrolment at other institutes.
- b. Employability after the qualification.

At present, the shortage of quality human resources is one of the major challenges faced by the public health domain in India. To redress the imbalance in human resources, the Working Group on Medical Education Training and Manpower Training of the Planning Commission (1984) prioritized training of para-professional and auxiliary personnel as follows:

- Training and development of auxiliary health professionals
- Training and development of para-health professionals
- Basic and pre-service/induction training in health care and health management
- Continuing education in health profession education.

Many new health occupations (Physician's Assistant, Optometrists, Medical Imaging Technologists, and Laboratory Technologists etc) have access over several common features in Allied Health Sciences including Basic Medical Sciences which are being effectively addressed. These processes have received support from administrators who are constantly searching for economic qualified and quality labor.

Service users are becoming more empowered through the consumerism of health, which has resulted in better access to information and user-consultation in service development and delivery. Each of these factors has the potential to influence the roles of existing professional groups and presents a challenge to workforce planners. In India, students are not aware of all the allied health courses available in the medical education system. Their career choices are generally influenced by their parents and peer groups, who themselves are unaware of the prospects in this area. By understanding that an entry-level position is just a first step, youth can realistically plan for their future and have a better understanding of what is needed for long-term success. This approach also benefits employers who need a steady inflow of workers at all levels of their organization.

POLICY ON ELIGIBILITY, ADMISSION, & COURSE DURATION OF UG DEGREE COURSES

At Sri Balaji Vidyapeeth, we empower the departments of all the constituent colleges to contribute to the development of innovative, need, value based and job oriented courses taking into considerations the interests of the stakeholders.

The Undergraduate Degree courses (B.Sc.) are presently being offered under the Choice Based Credit System (CBCS) mode as per the Guidelines of UGC. The duration of the course will be Three years with a compulsory internship of 1 year (Non Stipendiary) in any of the tertiary health care institute of the University/ Trust. The proficiency and competence of the Undergraduates is fortified by the promulgation mandatory for appearing at the University Examinations. The maximum time limit for completion of the course will be Six years. However, the Dean / Principal, AHS has the discretionary powers to extend the course duration on valid grounds (Health, Maternity, Natural Disaster, etc.).

The First year of B.Sc. (AHS) courses will be common for all the disciplines. Though the disciplines will be provisionally allotted at the time of admission itself, upon successful completion of the First year the candidates may opt for a change in the discipline or the college which will be permitted depending on the vacancy and on merit based on the First year marks.

Fourth year - Internship Programme

One-year compulsory internship in various intensive care units, outpatient departments, research center under Sri Balaji Vidyapeeth during which the students get to hone the skills and knowledge acquired in the three years of study. This year ensures their readiness to approach a patient in any setting. The students should also complete a short duration project (in their areas of interest) and also maintain and submit a log book. The degree will be awarded only upon the successful completion of the course including the internship period. The one-year compulsory internship includes postings at the respective department.

Eligibility for Admission

A candidate seeking admission in the B.Sc. Allied Health Sciences courses shall be completing the age of 17 years as on December of the admission year. The candidate shall have passed the Higher Secondary Examinations conducted by the State Board or the Central Board or its equivalent. The candidate should have studied English as one of the papers and passed the same. The candidate should have had Biology, Physics & Chemistry and have passed the same in their qualifying Examinations. Mathematics as a subject is mandatory for B.Sc. Optometry, Medical Imaging Technology and Clinical Research.

The candidate should have secured 50 percent as aggregate in the subjects of English, Biology, Physics and Chemistry at the Higher Secondary Examinations. A relaxation of 5 percent in the minimum required (50%) shall be awarded to the candidates belonging to SC/ ST communities and physically challenged candidates (Disability more than 40%). The candidates seeking relaxation should necessarily submit the relevant certificates issued by the concerned Government authorities while applying for the course and mention about the same in their application.

Lateral Entry

Candidates who have Diploma of Two years in the concerned subject from a recognized University can seek Lateral Entry to the second year of the concerned courses provided that they have studied Anatomy, Biochemistry, Physiology, Microbiology and Pathology as individual papers during their Diploma Course.

<u>Note:</u> The candidates who have completed their Diploma Course through Distance Education modes are not eligible to seek admission through Lateral Entry mode.

Shorter intrinsic training programmes of duration few weeks to a month or so will be conducted by the departments under the Supervision of the concerned HOD / Dean / Principal.

POLICY ON CHANGE OF NAME/DATE OF BIRTH

The name and date of birth of candidates will be registered in the records of the University as given in their H.S.C. Mark Statement/Transfer Certificate only. No request will be considered later, to correct the spelling of the name of the candidates.

The parents and candidates are requested to verify and confirm these entries in the H.S.C. Mark Statement / Transfer Certificate at the time of receipt of the same. Once admitted to a course of study in the University, date of birth as furnished in the HSC/School record of student and submitted to the University at the time of admission, shall be taken as final proof and no subsequent request for change of date of birth will be entertained by the University at any time under any circumstance, either during the course of study or after the completion of such study. The student should take utmost care while entering their details in SBV GARUDA portal at the time of their registration. They are responsible for any data mismatch at later stage.

Every student shall give an undertaking to this effect duly countersigned by his/her parent or guardian at the time of admission.

PAYMENT OF TUITION AND OTHERFEES

Every student shall pay tuition fee and other fee, as prescribed by the University, within the due date notified. The fees are subject to revision as per rules of the University. All fees, once paid to the University, will not be refunded or adjusted for any other purpose under any circumstance.

RULES FOR DISCONTINUANCE FROM COURSE OF STUDY

Where any student applies for discontinuance, or without any application discontinues on his/her own, from the course to which he/she has been admitted to, for any reason, either after the cut-off date prescribed by the statutory authorities/ University for admission to the first year of the course concerned or where the seat is rendered vacant without having any chance of being filled up with any other candidate from waiting list etc., such students will have to remit the tuition fee and other applicable fees for the 'Entire/Remaining Course Period'. Unless and until payment of all the prescribed fees for the entire/remaining course period is made to the University account, such student shall not be entitled to any certificate including transfer certificate, mark sheets etc., to be issued by the College/ University and to get back his/her original certificates deposited with the University at the time of admission. All students and parent will be required to furnish a declaration agreeing to the above said conditions at the time of admission.

POLICY ON RAGGING

Ragging is strictly prohibited in the University Campus. Sri Balaji Vidyapeeth strictly enforces anti-ragging measures and the campus is free from any form of ragging. Any violation will be dealt with according to the law in force and as per directives of the Supreme Court of India. The University has adopted the —Medical Council of India (Prevention and Prohibition of ragging in Medical College / Institutions) Regulations, 2009 and —UGC Regulations on curbing the menace of Ragging in Higher Educational

Institutions, 2009 and these Regulations shall be applicable to all students. These Regulations are available in the University Website.

IMPORTANT NOTE

All admissions are subject to fulfillment of all the prescribed eligibility conditions by the candidate. If it is found either at the time of admission or at a later stage, that the candidate has given false information/forged certificates or concealed material information, his/her admission shall be cancelled and the student shall be dismissed from the college immediately.

The University reserves the right to change the curriculum, course structure and the rules relating to admission, examinations, fee structure, refunds, etc.

All disputes arising in the interpretation and implementation of the provisions will be referred to the Vice-Chancellor of Sri Balaji Vidyapeeth and Vice-Chancellor's decision shall be final and binding.

In respect of matters relating to or arising out of this prospectus the jurisdiction shall lie in Puducherry alone.

FUTURE PLANS

It is planned to conduct an informal market survey and start AHS Certificate & M.Sc courses.

OUTLINE OF THE CHOICE BASED CREDIT SYSTEM (CBCS) FOR UNDERGRADUATE DEGREE PROGRAMME

Credit System Credit System (CBCS): The CBCS provides choice for students to select from the prescribed courses (core, elective or minor or soft skill courses). This is to enhance the quality and mobility of the students within and between the Universities in the country and abroad.

Credit hours

16 Theory classes = 1 credit

32 Practical/Tutorial/Clinical training/Research project = 1 credit

Subjects	Credits
Each core subjects	6 Credits
Ability Enhancement Compulsory course (AECC)	2 Credits
Skill Enhancement course (SEC)	2 Credits
Generic Elective course (GE)	4 Credits
Discipline Electives (DE)	4 Credits

Core course: A Hard core course may be a Theory, Practical (lab), clinical rotation/field work or Research Project Work which are compulsory component studied by candidate to complete the requirement of their programme.

Discipline Elective (DE) Course: An elective course which is supportive or related to the discipline/subject (i.e. supportive to core course) is called a Discipline Elective (DSE) Course.

Generic Elective (GE) Course: An elective course which is unrelated to the discipline/subject (i.e. unrelated to core course) to expand their knowledge chosen by a candidate is called a Generic Elective.

Skill Enhancement Courses (SEC): This course chosen by candidate which provides additional value-based and skill-based knowledge to increase their employability. **NPTEL/ SWAYAM / MOOC/ Other value-added online courses**

COLLEGES	PROGRAMMES WHICH INVOLVE CREDIT TRANSFER
Mahatma Gandhi Medical College and Research Institute & Shri Sathya Sai Medical College and Research Institute	B. Sc. (AHS)

Each Undergraduate student of B.Sc (AHS) is recommended to earn a minimum of <u>EIGHT</u> <u>credits</u> from the online courses offered through SWAYAM - NPTEL - MOOCs platform during their Course period. It is to be noted that the student earns the credit prior to the starting of their internship.

PROGRAMME	DESIRABLE CREDITS	NUMBER OF COURSES			
B.Sc. (AHS)	Minimum - 8 credits	Minimum - 4 Maximum - 6			

It is required of the Undergraduate students (B.Sc - AHS) that in addition to their curricular requirement of the programme, it is recommended for enhancing job opportunities for the student to earn minimum of prescribed credits from the online courses offered through SWAYAN - NPTEL - MOOCs platform that will be transferred

into the students' Statement of Marks, issued during the final year of their study. This has to be completed prior to the starting of their internship programme and students have to be informed that those who do not earn the minimum credits prescribed by SBV, it will be mentioned NIL for the details on credits transferred from ONLINE courses in their FINAL year statement of marks issued by SBV.

Credit points during Internship

For the 16 UG Internship programmes, there is a Minimum of 40 Credit points to a maximum of 45 Credit points which the students have to obtain. Credit points will be assessed based on the student's satisfactory attendance, performance in the Clinical /Camp postings / Seminars / Presentation of the logbook & Research project.

CRITERIA FOR UNIVERSITY EXAMINATIONS

Eligibility / Maximum Duration for the Award of the Degree

- a) The candidates shall be eligible for the bachelor degree when they have undergone the prescribed course of study for a period of not less than four years (3 Years + 1 Year Internship) in an institution approved by the university and have passed the prescribed examination in all subjects.
- b) A student who does not meet the minimum attendance requirement in a year must compensate the inadequacies before appearing examination.

To reaffirm the passing minimum in the University Examinations for all the Undergraduate courses offered under the Faculty of Allied Health Sciences.

- A candidate shall secure a minimum of 50% aggregate in University Core theory/ Elective theory Exams and Internal Assessment put together.
- A candidate shall secure a minimum of 50% aggregate in University Practical and Internal Assessment put together.
- For Skill based electives, a candidate shall secure a minimum of 50% aggregate in University Practical cum Viva Exams and Internal Assessment put together.

Retotaling / Revaluation and Grace Mark

There is no provision for **Retotaling / Revaluation for AHS programme**.

Grace marks up to a maximum of five marks may be awarded at the discretion of the university to a student who has failed and shall be distributed among the failed subjects.

SCHEME OF EXAMINATION

- 1) Attendance Requirements: 80% hours of learning in each Core Subjects / Electives / Practical's /Postings for appearing for the university exams.
- 2) Minimum marks required to be eligible for University Examination: 35% marks in the internal assessment (Theory / Practical) are required for the candidate to be eligible to appear in the University Examinations.
- 3) **Passing Minimum**: 50% aggregate both in theory and practical's including internal assessment marks is required for a candidate to pass in the University Examinations.

4) Submission of Record Note Books for practical examinations

Candidates appearing for practical examinations should submit bonafide Record Note Books prescribed for practical examinations, otherwise the candidates shall not be permitted to appear for the practical examinations.

GRADING

Marks obtained by candidate	Equivalent grade letter	Grade descriptor	Grade point
85 % & above	0	Outstanding	10
75-84	A+	Excellent	9
65-74	A	Very good	8
60-64	B+	Good	7
55-59	В	Above average	6
50-54	С	Average pass	5
49 & below	F	Reappear	0
	AB	Absent	0

A student obtaining $\operatorname{Grade} F$ shall be considered failed and will be required to reappear in the examination.

Conversion formula for Percentage to CGPA

Percentage divided by 9.5 = CGPA

Award of Class

Class division will be based on CGPA grade

- ≥ 7.8 grade point = Distinction Division
- ≥ 6.8 and < 7.7 grade point = First class Division
- ≥ 6.3 and < 6.7 grade point = Second class Division
- ≥ 5.2 and < 6.2 grade point = Third class Division
- < 5.2 and below Fail

Computation of SGPA and CGPA will be in accordance with the UGC Guidelines & Recommendations. It is a measure of overall cumulative performance of a student over all exams. The CGPA is the ratio of total credit points secured by a student in various courses in all exams and the sum of the total credits of all courses in all the University exams. It is expressed up to two decimal places.

Cumulative Grade Point Average (CGPA): It is a measure of overall cumulative performance of a student over all exams. The CGPA is the ratio of total credit points secured by a student in various courses in all exams and the sum of the total credits of all courses in all the University exams. It is expressed up to two decimal places.

Grade Point: It is a numerical weight allotted to each letter grade on a 10-point scale.

Transcript: Based on the credits earned, a transcript shall be issued to all the registered students after the completion of the program indicating the hours of study and structure of the curriculum delivery as prescribed in his/her curriculum and completed by the student. The transcript will display the course details, including course code, title, and number of credits, hours and type of contact hours in a semester.

INTERNAL ASSESSMENT

- 1. Continuous Internal Assessment (CIA) for all AHS programs with a minimum of 4 Assessments per year.
- 2. Internal Assessment will be done in each subject according to the scheme of examinations. The IA marks will be on the basis of performance in the assignment, class tests and practical test in the clinical areas.

Evaluation of Clinical Rotation

Lab, Clinical cum Community postings - To conduct practical's or viva based on the Heads of the concerned department's decision and the total 100 marks to be sent to COE through proper channel to find a place in the transcript.

Question Paper Pattern

The following question paper patterns shall be followed for CBCS pattern syllabi for the candidates admitted from the academic year 2019-20 onwards.

CORE SUBJECTS

For **UG NON-SEMESTER COURSES** - Each Core Subjects University Exam carries -100 marks of 80(Theory) + 20 (IA marks) which consists of

	Theory - 80 marks								
ı	Essay-type questions of either / or type -(like 1.a (or) 1.b)	2 (of either / or type)	2 x 10=20						
П	Short answer questions	6 (*1 choice)	5 x 6=30						
П	Very Short answer questions	12 (*2 choice)	10 x 3=30						

The University duration of 80 marks - 3 Hours For courses having Section A & Section B Subjects

For **Section A & Section B** Subjects University Exam carries - 50 marks for each Section consisting of 40 (Theory marks) + 10 (IA marks)

	Theory - 40 marks								
I	Essay-type questions of either / or type -(like 1.a (or) 1.b)	1 (of either / or type)	1 x 10 = 10						
II	Short answer questions	5 (*2 choice)	3 x 6= 18						
II	Very Short answer questions	5 (*1 choice)	4 x 3 = 12						

ELECTIVE SUBJECTS

For all UG NON SEMESTER COMPULSORY, GENERIC & DISCIPLINE Elective University Exam papers carries- 50 marks of 40 (Theory)+10 (IA marks) which consists of

	Theory - 40 marks								
I	Short answer questions	5 (*3 choice)	5 x 6=30						
II	Very Short answer questions	5 (*2 choice)	5 x 2=10						

^{*} Number of choices given

- For SKILL BASED ELECTIVES from 2019-20 batch onwards all UG AHS courses will have 40 marks as university Practical cum Viva examination & 10 marks as Internal Assessment = 50 marks.
- 50 marks of the COMPULSORY, GENERIC, DISCIPLINE & SKILL BASED ELECITIVES which will be converted to 100 marks in the transcript.

CONDONATION FOR SHORTAGE OF ATTENDANCE

Condonation of shortage of attendance in aggregate up to 10% in each Year may be granted by the college Academic Committee and as per regulations of university.





ANALYSIS OF PROGRAMME OUTCOME AND COURSE OUTCOME OF B.Sc. RESPIRATORY THERAPHY

FACULTY OF ALLIED HEALTH SCIENCES

CHOICE BASED CREDIT SYSTEM (CBCS)

2019 -2020 ONWARDS



PROGRAM OUTCOME AND COURSE OUTCOME ANALYSIS

INTRODUCTION

Quality assurance is a key factor in education. This requires analysis of Program Outcome (PO) and Course Outcome (CO) mapping. This analysis is an important step in outcome based education. Faculty of Allied Health Sciences education is moving from traditional teaching learning process to innovative method of teaching and learning, this need to be incorporated in to the evaluation system. Besides analyzing the mapping, to make it more objective a score need to be obtained for mapping and attainment score need to be calculated for each course and program. All these analysis help to monitor not only the performance of the program but also the individual students. This type of analysis is not routine in health career education.

TERMINOLOGIES

Program educational objective (PEO)

Program Educational Objectives are broad statements that describe what graduates are expected to attain within few years of completing their program. These are based on the needs of the society as analyzed and outlined by the regulatory bodies.

Program Outcome (PO)

Program outcomes represent broad statements that incorporate many areas of inter- related knowledge and skills developed over the duration of the program through a wide range of courses and experiences. They represent the big picture, describe broad aspects of knowledge, skill and attitude development, and encompass multiple learning experiences.

Course Outcomes (CO)

Course outcomes describe the learning that will take place across the curriculum through concise statements, made in specific and measurable terms, of what students will know and/or be able to do as the result of having successfully completed a course.

Mapping of PEO, PO and CO

Mapping (program mapping) facilitates the alignment of course-level outcomes with program outcomes. It allows faculty to create a visual map of a program. It is also used to explore how students are meeting program-level outcomes at the course level. Outcomes mapping focuses on student learning also.

Attainment score or level

Attainment score or level is defined as a measure of a student's achievement in school which compares every child to a standardized expectation for their level, regardless of individual starting points.

Bloom's Taxonomy

Bloom's Taxonomy of Learning Domains was created in 1956 under the leadership of educational psychologist Dr. Benjamin Bloom in order to promote higher order of thinking in education. It is most often used when designing educational, training, and learning processes. The three Domains of Learning are (1) Cognitive: Mental Skills (Knowledge), (2) Affective: growth in feelings or emotional areas (attitude or self) and (3) Psychomotor: manual or physical skills (skills). (Figure 1)

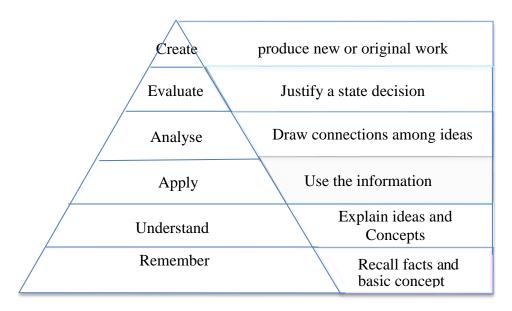


Figure 1 Bloom's taxonomy

Faculty of Allied Health Sciences under Mahatma Gandhi Medical College and Research Institute, Sri Balaji Vidyapeeth University, a health sciences university of Puducherry. It has provided the syllabus for various health care courses, where all courses have its own objectives and methodology to achieve the course outcomes. To attain the course outcomes and program outcome, the institutes use course wise marks of students and the pass percentage of the summative.

PROGRAM EDUCATIONAL OBJECTIVES (PEO)

Program educational objectives for under graduate program are as follows:

- **PEO 1:** A technical expert who genuinely gets involved in patient care and does multi-task responsibilities.
- **PEO 2:** Communicators possessing adequate communication skills to convey the required information in an appropriate manner in various health care settings.
- PEO 3: Demonstrate basic administration/management and leadership skills.
- **PEO 4:** Lifelong learner is keen on updating oneself regarding the technical advancement in the health care field and able to perform the role of a good technologist and /or, researcher and teacher.
- **PEO 5:** Technologist who understands and follows the principle of bio-ethics / ethics related to the health care system

PROGRAM OUTCOME (PO)

At the end of the 3 year of training under graduates of Respiratory Therapy Technologist Should be able to

- **RT-PO 1:** Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E- library.
- **RT-PO 2:** To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- **RT-PO 5:** To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc.
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO9:** To make students in providing primary care services are including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behavior healthy.

COURSE (CS)

B.Sc. Respiratory Therapy (RT) program under the CHOICE BASED CREDIT SYSTEM consists of following core courses namely: 1stYear B.Sc RT consists of Anatomy, Physiology, Biochemistry, Pathology, and Microbiology; 2ndYear B.Sc RT consists

of, Computer Application, Environmental Sciences, Respiratory Diseases, Cardiovascular Disease, Diagnostic Techniques in cardio respiratory disease, Clinical Pharmacology; 3rdYear B.Sc RT consist of Respiratory Therapy Techniques -I, Respiratory Therapy Techniques -II, Life Support System, Cardio-Pulmonary Rehabilitation; 4th Year - One year Internship.

Also as per the UGC guidelines, during the study period an Allied Health Science Student will be studying Two Ability Enhancement compulsory courses, four Skill enhancement courses, two Generic Elective Courses and two Discipline Elective Courses. Thus the B.Sc Respiratory Theraphy (RT) program consists of following Electives courses, namely Ability Enhancement compulsory course (AECC) consisting of English and Environmental studies, Skill enhancement courses namely Culinary Skills for optimal nutrition, Enhancing soft skill & personality, Basics of Yoga & Practice, Speaking effectively, Good Clinical Laboratory practice, Computer Applications, Library and E-resource and Public Health and Hygiene, Generic Elective Course namely Basics of Hospital Administration, Counseling and Guidance, Lifestyle Disorders, Basic Psychology, Sociology and Entrepreneurship essentials, Discipline Elective Courses namely Equipment In Respiratory Care, Basic Radiation Biology, Palliative Care, BLS & ACLS, Air Borne Infection Control. Each course has its well defined course outcome mentioned in individual course book.

MAPPING AND ANALYSIS OF CS. POS AND PEOS

The process of attainment of Cs, POs and PEOs starts from writing appropriate COs for each course in the three year plus one year internship degree program. As Undergraduate Allied Health Science program is Non-regulatory, COs and POs are defined by SBV norms. Based on this, course outcomes are refined by the respective faculty members of the course using action verbs of learning levels as suggested by Bloom Taxonomy. Then, a correlation is established between Cs and POs and Cs and PEOs on the scale of 0 to 3 ('0'being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score is calculated and is correlated with the courses as a whole not individually. The core paper & Elective course 34 x5 mapping matrix of COs-PEOs (Table.1) and core paper & Elective course 34 x10 mapping matrix of Cs-POs (Table.2) is prepared at the institute level in this regard for all courses in the program. Radar graph was plotted to find out the level of correlation between PEO-Cs (Fig.1) and PO-Cs (Fig.2).

Table 1. CO-PEO Mapping matrix

S.NO	COURSE	PEO1	PEO2	PEO3	PEO4	PEO5
1.	Anatomy(AN)	3	2	1	3	3
2.	Physiology(PHY)	2	3	2	3	3
3.	Biochemistry(BIO)	3	2	3	3	3
4.	Pathology(PAT)	3	3	3	3	3
5.	Microbiology(MIC)	3	3	3	3	3
6.	English(ENG)	2	3	2	2	2
7.	Culinary Skills for optimal	3	2	2	2	3

	nutrition (NUTRI)					
8.	Enhancing soft skill & personality (ESSP)	2	2	1	3	2
9.	Basics of Yoga & Practice	3	2	2	3	3
10.	Speaking effectively	3	3	2	3	2
11.	Basics of Hospital Administration (HOSP)	3	2	2	2	3
12.	Counseling and Guidance (COUNS)	2	2	1	3	2
13.	Lifestyle Disorders (LD)	3	2	2	3	3
14.	1 /	3	2	2	2	3
15.		3	2	2	3	3
16.	respiratory disease	3	2	2	3	3
17.	5,	3	2	2	3	3
18.	Environmental states	2	3	2	3	3
19.	Good Clinical Laboratory practice	3	3	3	2	3
20.	Computer Applications	3	2	1	3	2
21.	Library and E-resource	3	2	2	3	2
22.	Public Health and Hygiene	2	2	3	2	3
23.	Basic Psychology	3	2	2	3	3
24.	Sociology	2	3	3	3	2
25.	Entrepreneurship essentials	3	2	2	3	3
26.	Respiratory Therapy Techniques -I	3	2	2	3	3
27.	Respiratory Therapy Techniques -	3	2	2	3	3
28.	, ,	3	2	3	3	3
	Cardio- Pulmonary Rehabilitation	3	3	2	2	2
30.	Equipment In Respiratory Care	3	3	2	3	3
31.	Palliative care	3	2	3	2	2
32.	Basic Radiation Biology	3	3	2	3	3
33.	BLS & ACLS	3	2	2	3	3
34.	Air Borne Infection Control	2	3	2	3	2
	AVERAGE SCORE	2.76	2.35	2.11	2.76	2.70

CO-PEO Mapping

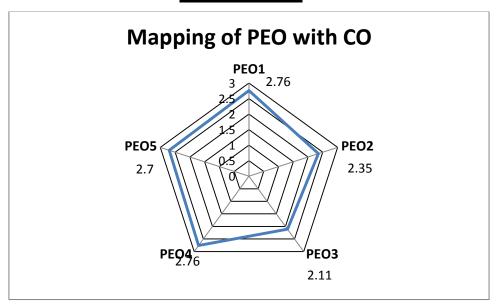


Figure 2. Mapping of Program educational objectives & course (0 - no correlation; 1 - Low correlation; 2 - Medium correlation; 3 - High correlation)

Table 2. Cs-PO Mapping matrix

S.NO	COURSE	PO1	PO2	PO 3	PO 4	PO 5	PO 6	PO 7	PO 8	PO 9	PO 10
1.	Anatomy(AN)	2	2	3	2	1	1	2	2	1	0
2.	Physiology(PHY)	2	2	3	3	2	2	3	2	2	2
3.	Biochemistry(BIO)	2	2	2	3	2	1	2	1	1	2
4.	Pathology(PAT)	3	3	2	3	3	2	2	2	1	2
5.	Microbiology(MIC)	3	3	2	3	2	1	2	2	1	2
6.	English(ENG)	2	2	1	1	0	1	1	1	2	2
7.	Culinary Skills for optimal nutrition(NUTRI)	2	2	1	0	0	3	0	1	2	3
8.	Enhancing soft skill & personality(ESSP)	2	2	2	2	1	0	2	2	2	2
9.	Basics of Yoga & Practice	0	2	1	1	0	1	0	1	0	3
10.	Speaking effectively	3	2	1	2	0	3	2	1	2	2
11.	Basics of Hospital Administration (HOSP)	3	3	2	2	1	0	2	2	2	3
12.	Counseling and Guidance(COUNS)	3	3	2	2	0	1	1	2	2	3
13.	Lifestyle Disorders (LD)	2	2	2	1	2	3	1	2	2	3

14.	Respiratory Diseases	2	2	2	2	2	3	3	3	3	2
15.	Cardiovascular Disease	2	2	3	3	3	3	3	3	3	2
16.	Diagnostic Techniques in cardio respiratory disease	2	3	2	3	3	2	3	3	3	2
17.	Clinical Pharmacology	1	2	2	2	3	3	3	3	3	2
18.	Environmental studies	1	3	1	1	2	3	1	1	2	2
19.	Good Clinical Laboratory practice	2	3	3	2	1	2	3	2	3	2
20.	Computer Applications	3	3	2	2	3	2	2	1	3	3
21.	Library and E-resource	3	2	3	2	2	1	2	1	2	0
22.	Public Health and Hygiene	3	3	1	1	2	3	2	1	2	3
23.	Basic Psychology	2	2	3	2	1	3	3	1	2	3
24.	Sociology	3	3	2	2	3	3	3	2	1	3
25.	Entrepreneurship essentials	3	3	3	2	2	2	2	1	2	2
26.	Respiratory Therapy Techniques -I	3	3	2	3	3	2	3	3	3	2
27.	Respiratory Therapy Techniques -II	3	3	2	3	3	3	3	3	3	2
28.	Life Support System	3	2	1	1	2	2	3	3	3	3
29.	Cardio- Pulmonary Rehabilitation	3	3	2	2	3	3	3	3	2	2
30.	Equipment In Respiratory Care	3	3	1	2	2	3	2	1	2	0
31.	Palliative care	3	2	1	2	2	3	1	2	2	3
32.	Basic Radiation Biology	3	2	3	2	1	2	2	1	2	2
33.	BLS & ACLS	3	2	2	3	3	2	3	3	2	1
34.	Air Borne Infection Control	1	3	1	3	1	1	2	2	1	1
	AVERAGE SCORE	2.38	2.47	1.94	2.05	1.79	2.05	2.11	1.88	2.02	2.08

^{(0 -} No correlation; 1 - Low correlation; 2 - Medium correlation; 3 - High correlation).

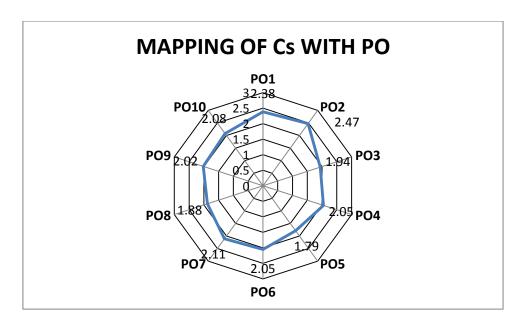


Figure 2. Mapping of Program outcome &course

(0 - No correlation; 1 - Low correlation; 2 - Medium correlation; 3 - High correlation)

ANALYSIS OF CS, POS AND PEOS

On analyzing, the average score of individual program outcome ranges from 1.79 to 2.47. It shows, there exist a strong correlation of all Cs with that of PO1 & PO2, whereas medium correlation between Cs and PO7 & PO10. Similarly, on analyzing, the average score of individual program educational objectives ranges from 2.35 to 2.76. It shows, there exist a strong correlation of all Cs with that of PEO1 & PEO4, whereas medium correlation between Cs and PEO2, PEO3 & PEO5.

I YEAR

FACULTY OF ALLIED HEALTH SCIENCES SRI BALAJI VIDYAPEETH

(Deemed to be University)

Accredited by NAAC with 'A' Grade

COMMON SYLLABUS FOR ALL FIRST YEAR B.Sc. ALLIED HEALTH SCIENCES

CORE SUBJECTS

- 1. Anatomy
- 2. Physiology
- 3. Biochemistry
- 4. Pathology & Microbiology

ELECTIVES

Ability Enhancement compulsory course (AECC)

1. English

Skill enhancement course (SEC) - Choose any TWO

- 1. Culinary Skills for optimal nutrition
- 2. Enhancing soft skill &personality
- 3. Basics of Yoga & Practice
- 4. Speaking effectively

Generic Elective Course (GEC) - Choose any ONE

- 1. Basics of Hospital Administration
- 2. Counseling and Guidance
- 3. Lifestyle Disorders

SCHEME OF CREDIT BASED ACADEMIC CURRICULUM

Faculty Code	Category	Course Title	Hours					(Credit	S		
AHS	Core theory CCT	Subjects	Theory	Practical	Tutorials	Lab training	Total hours	Lecture (L)	Practical	Tutorials	Lab training	Credits
AHS	RT-1	Anatomy	80		32			5		1		6
AHS	RT-2	Physiology	80		32			5		1		6
AHS	CCT-3	Biochemistry	80		32			5		1		6
AHS		Pathology	40		16			5		1		6
AHS	RT-4	Microbiology	40		16			3		•		U
AHS	Lab training RT 1 to 4					192					6	6
AHS	AECC	English	16	34				1	1			2
AHS	SEC - 1-3	Student's choice	16	32				1	1			2
AHS	SEC - 1-3	Student's choice	16	32				1	1			2
AHS	GEC 1-3	Student's choice	64					4				4
			432	98	128	192	850	27	3	4	6	40

SCHEME OF EXAMINATION AHS - I YEAR BASIC SCIENCES

Papers	Subject	Theory		Practical		Theory	Practical	Grand Total	Min marks to
		UE	IA	UE	IA	UIA*	UIA*	(900)	pass % (450)
CCT-1	Anatomy	80	20					100	50
CCT-2	Physiology	80	20					100	50
CCT-3	Biochemistry	80	20					100	50
CCT-4	Pathology	40	10					100	50
	Microbiology	40	10					100	30
CCT -LT	Lab training Core 1 to 4						100	100	50
AECC	Ability enhancement Compulsory Course- English	80	20					100	50
SEC	Skill enhancement Course	80	20					100	50
SEC	Skill enhancement Course	80	20					100	50
GEC	Generic elective	80	20					100	50

^{*}UIA - University Internal Assessment only for Lab Trainings (No Final University Examination).

For all elective course, 40 marks for university theory and Practical cum Viva examination & 10 marks as Internal Assessment = 50 marks which will be converted to 100 marks in the transcript

ANATOMY

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES - ANATOMY

NAME OF THE SUBJECT PAPER : ANATOMY

DURATION OF THEORY CLASSES : 80 Hrs

DURATION OF TUTORIAL SESSIONS : 32 Hrs

DURATION OF LAB TRAINING : 40 Hrs

EXAMINATION : 100 Marks (80 U + 20 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 3 Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire knowledge of the normal structure of human body and its functions. To ensure that the students understand the alteration in anatomical structure and function in disease in the practice of accident and emergency care technology.

OBJECTIVES

At the end of the course, the student will be able to

- 1. Describe the anatomical terms, organization of human body and structure of cell, tissue, membranes and glands.
- 2. Describe the structure and functions of bones and joints.
- 3. Describe the structure and functions of systems in body. Have knowledge about Applied Anatomy

COURSE OUTCOMES FOR ANATOMY

At the end of the course, students will be able to...

AN-AHS-CO1: Explains the Gross and Microscopic structure of human body.

AN-AHS-CO2: Explains the normal structure and integration of the functions of the organs and systems on basis of the structure of Human body.

AN-AHS-CO3: Explains the clinical correlation of the organs and structures involved and interprets the anatomical basis of the disease presentations.

AN-AHS-CO4: Knows about the General development of human body.

AN-AHS-CO5: Outlines the knowing of the hard & soft structures of the body.

UNIT	TITLE	THEORY + TUTORIALS (80 + 32)HOURS
I	 (a) INTRODUCTION TO HUMAN BODY AS AWHOLE Terms of location, positions and planes Cell and its organelles Epithelium - Definition, classification, description with examples and functions. Glands-Classification, description of Serous and Mucous glands with examples. Basic tissues - Classification with examples. (b) LOCOMOTION ANDSUPPORT Cartilage - Different types with examples and Histology. Bone - Classification, Names of bone cells, parts of Long bone, Microscopy of Compact bone, Names of all bones, Vertebral column, Intervertebral disc, Fontanelles of Fetal Skull. Joints-Classification of Joints with examples, Synovial Joints (in detail for Medical Imaging Technology students) Muscular system: Classification of Muscular tissue and histology. 	20 + 8
II	 Names of the muscles of the body. UNIT (a) CARDIO VASCULAR SYSTEM Heart Size, Location, Chambers - Exterior & Interior - conducting System and Valves Blood supply of heart Systemic & Pulmonary circulation Branches of Aorta, Common Carotid artery, Subclavian artery, Axillary artery, Brachial artery, Superficial Palmar arch, Femoral artery and Internal Iliac artery. Peripheral pulse Inferior Venacava, Portal vein and Porto systemic anastomosis. Great Saphenous vein Dural Venous Sinuses Lymphatic System - Cisterna Chyli and Thoracic duct. Names of regionally mphatics, axillary and inguinal mph nodes in brief. (b) RESPIRATORYSYSTEM Parts of Respiratory System, Nose, Nasal Cavity, Larynx, Trachea, Lungs, Broncho pulmonary segments Histology of Trachea, Lung and Pleura Names of Para nasal air sinuses 	20 + 5
III	 (a) GASTRO- INTESTINAL SYSTEM - (10 +5hrs) Parts of GIT, Oral cavity (Tongue, Tonsil, Dentition, Pharynx, Salivary glands, Waldeyer's ring) Oesophagus, Stomach, Small & Large Intestine, Liver, Gall Bladder, Pancreas (b) URINARY SYSTEM (5hrs) Kidney, Ureter, Urinary bladder, Male & Female Urethra 	10 + 5

	(a) REPRODUCTIVE SYSTEM - (10 +2hrs)	
	 Parts of Male Reproductive system, Testis, Vas 	
	deferens, Epididymis, Prostate	
	 Parts of Female Reproductive System, Uterus, Fallopian 	
IV	tubes, Ovary	10 + 5
	Mammary gland	
	(b) ENDOCRINE GLANDS - (5hrs)	
	Names of all Endocrine glands in detail on Pituitary	
	Gland, Thyroid Gland, Parathyroid gland and Suprarenal	
	Gland.	
	NERVOUS SYSTEM - (15 +2 hrs)	
	Cerebrum, Cerebellum, Mid brain, Pons, Medulla	
	Oblongata, Spinal cord with spinal nerve	
V	Meninges, Ventricles and Cerebrospinal fluid	10 + 5
	Names of Basal nuclei	
	Blood Supply of Brain	
	Cranial Nerves	
	(a) EMBRYOLOGY	
	Spermatogenesis and Oogenesis	
	Ovulation, Fertilization	
	Fetal Circulation	
VI	Placenta	10 + 4
	(b) COURSE SPECIFICTOPICS	
	• Skin	
	• Eye	
	Arterial System and Venous Drainage System in detail	

LAB TRAINING (40 hrs)

- Histology of Types of Epithelium
- Histology of Serous, Mucous and Mixed Salivary gland
- Histology of the types of Cartilage
- Demo of all bones showing parts, radiographs of normal bones & Joints
- Histology of Skeletal (TS & LS), Smooth and Cardiac muscle
- Demonstration of Heart and Vessels of the body
- Histology of Large artery, Medium sized artery and vein, Large Vein
- Microscopic appearance of Large and Medium sized Artery and Vein, Large Vein
- Demonstration of all muscles of the body
- Pericardium
- Histology of Lymph node, Spleen, Tonsil and Thymus
- Demonstration of parts of Respiratory system
- Normal Chest radiograph showing Heart shadows
- Histology of Lung and Trachea
- Normal Angiograms
- Histology of Lymphatic tissues
- Radiographs of Abdomen IVP, Retrograde cystogram
- DemonstrationofpartsoftheUrinarysystemandHistologyofKidney,Ureter and Urinary bladder

- Demonstration of Male and Female Pelvis with organs in situ.
- Histology of Male and Female Reproductive organs
- Histology of Pituitary, Thyroid, parathyroid and Suprarenal glands
- Histology of peripheral nerve and optic nerve.
- Demo of all parts of brain

METHODS OF TEACHING

- Lecture cum discussion
- Demonstration
- Lab visit
- Practical work record

METHODS OF EVALUATION

- Written Test
- Laboratory observation Book
- Assignments
- Oral Presentations

REFERENCE BOOKS

- Cohen, Memmler: Structure & Function of Human Body, Lippincott Williams & Wilkins; Tenth edition(2012)
- Waugh: Ross & Wilson Anatomy & Physiology in health and illness Penguin Books Ltd(2010)
- Tortora: Anatomy & Physiology, John Wiley & Sons(2012)

B.Sc. ALLIED HEALTH SCIENCES - ANATOMY - BLUE PRINT

Unit No.	Unit	Weightage	ge Marks		age Marks Allotted		Knowledge / Recall		Understanding			Application		
			7 moctou	LAQ	SAQ	VSAQ	LAQ	SAQ	VSAQ	LAQ	SAQ	VSAQ		
1	I	14 %	12	•••	1	1			1					
2	II	20 %	16	1		1	1*					1		
3	III	20 %	15	1*	1	1		1				1*		
4	IV	20 %	16	1		1	1	1*	1*		1	1		
5	V	14 %	12		1				1			1		
6	VI	12 %	9		1				1					

LONG ANSWER QUESTIONS

S.No	Unit wise	Type of Question	Question has to ask
1	CVS / Respiratory System / GIT	Knowledge / Understanding	2
2	Urinary system / Reproductive system / Endocrine system	Knowledge / Understanding	2

SHORT ANSWER QUESTIONS

S. No	Unit wise	Type of Question	Question has to ask
1	Unit - I	Recall	1
2	Unit - II	Understanding	-
3	Unit - III	Understanding + Recall	2
4	Unit - IV	Understanding / Recall	1
5	Unit - V	Understanding	1
6	Unit - VI	Understanding / Recall	1

VERY SHORT ANSWER QUESTIONS

S.No	Unit wise	Type of Question	Question has to ask
1	Unit - I	Understanding / Recall	2
2	Unit - II	Understanding + Recall	2
3	Unit - III	Understanding + Recall + Application	2
4	Unit - IV	Understanding + Recall + Application	3
5	Unit - V	Understanding + Application	2
6	Unit - VI	Understanding / Application	1

The duration of Examination (University) is Three (3) hours.

The total marks for the University Examination will be 100 marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of4)

Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)

Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 marks

MODEL QUESTION PAPER FIRST YEAR B.Sc. ALLIED HEALTH SCIENCES ANATOMY

Time: 3 Hours Maximum Marks: 80

Illustrate your answers with suitable diagrams where ever necessary.

LONG ANSWER QUESTIONS - (Write any Two)

(2 X 10 = 20)

- 1. (A) Explain the Gross features of Right atrium. (OR)
 - (B) Explain the Gross features of Stomach.
- 2. (A) Explain the Gross features of Kidney. (OR)
 - (B) Explain the Gross features of Thyroid gland.

SHORT ANSWER QUESTIONS - (Write any Five)

 $(5 \times 6 = 30)$

- 1. Discuss the Classification of joints with its examples.
- 2. Discuss the boundaries and contents of superior Mediastinum.
- 3. Discuss the gross features of Right lung.
- 4. Discuss the external & internal features of 2^{nd} part of Duodenum.
- 5. Discuss the location, external features of urinary bladder.
- 6. Discuss the supports of uterus.

VERY SHORT ANSWER QUESTIONS - (Write any Ten)

(10 x3 = 30)

- 1. Write a note on Sesamoid bone.
- 2. Trace the conducting system of Heart.
- 3. List out the paranasal air sinuses.
- 4. Write a note on Pancreatic duct.
- 5. List out the parts & functions of extra hepatic biliary apparatus.
- 6. Write a note on Trigone of urinary bladder.
- 7. Enumerate the Ovarian follicles.
- 8. Enumerate the hormones of Adrenal gland.
- 9. Enumerate the layers of Scrotum.
- 10. List out the meningeal layers & its modifications.
- 11. Structure of thin skin.
- 12. Write a note on Fertilization

PHYSIOLOGY

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES - PHYSIOLOGY

NAME OF THE SUBJECT PAPER : PHYSIOLOGY

DURATION OF THEORY CLASSES : 80 Hrs

DURATION OF TUTORIAL SESSIONS : 32 Hrs

DURATION OF LAB TRAINING : 38 Hrs

THEORY EXAMINATION : 100 Marks (80 U + 20 IA)

UNIVERSITY PRACTICAL EXAMINATION : NIL

DURATION OF THEORY EXAMINATION : 3 Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge of the normal physiology of various human body systems and understand the alternation in physiology in disease and practice of accident and emergency care technology

COURSE OBJECTIVES

At the end of the course, the student will be able to

- Describe the physiology of cell, tissues, membranes and glands.
- Describe the physiology of blood and functions of heart.
- Demonstrate blood cell count, coagulation, grouping, Hb; BP and Pulse monitoring
- Describe the physiology and mechanism of respiration.
- Demonstrate Spirometry
- Describe the physiology of Excretory system

COURSE OUTCOMES FOR PHYSIOLOGY

At the end of the course, students will be able to...

PHY-AHS-CO1: Understand normal structure and functioning of the organs and organ systems of the body

PHY-AHS-CO2: Understand the regulatory mechanisms in normal and physiological variations.

PHY-AHS-CO3: Understand age-related physiological changes in the organ functions that reflect normal growth and development.

PHY-AHS-CO 4: Understand the physiological basis of diseases.

PHY-AHS- CO 5: Interpret laboratory data pertaining to normal function of organ and organ system.

UNIT	TITLE	THEORY + TUTORIALS (80+32) HOURS
I	 a. General physiology (5 + 2hrs) Structure and functions of cell and cell organelles Transport across cell membrane Homeostasis: definition and feedback mechanisms b. Hematology (10 + 2hrs) Composition and function of blood and body fluids Plasma proteins and their functions RBC: morphology, production, functions and fate Anemia: etiological & morphological classification Immunity: Types, mechanism of immune response Hemostasis and anticoagulants Blood groups: Types, cross matching and clinical importance 	15 +4
II	 Cardiovascular physiology (10 + 5 hrs) Functional anatomy Conductive system of heart: origin, spread of cardiac impulse Properties of cardiac muscle ECG: leads, principles of normal recording. Normal waves and interpretations Cardiac cycle Heart sounds, Physiological basis of murmur Cardiac output: definition, factors affecting, factors regulating and its measurement Blood pressure: total pressure, lateral pressure, importance of different pressure, measurements, factors controlling BP Shock: definition &types. 	10 + 5
III	 Respiratory physiology (10 + 5 hrs) Functional anatomy Mechanism of respiration Lung volumes and capacities: definition, normalvalues, measurements and clinical importance Transport of gases: oxygen and carbon dioxide Control of respiration: neural and chemical regulation. Dyspnoea, Asphyxia, cyanosis, periodic breathing Hypoxia: definition and types 	10 + 5
IV	 a. Gastro-intestinal physiology (5 hrs) GI secretions: saliva, gastric juice, pancreatic juice, liver& gallbladder GI motility: deglutition, gastric motility and emptying, 	15 + 3

	intestinal motility	
	GI hormones: Gerstein, Secretin, CCK - PZ, motilin, Inhibin	
	b. Renal physiology (10 + 3 hrs)	
	Nephrons: structure, types and functions	
	 Juxta glomerular apparatus 	
	RBF: definition, normal values, factor affecting	
	GFR: definition, normal values factor affecting and	
	factors regulating, measurement.	
	 Renal handlings of solutes: Na+, Cl-, Glucose, water 	
	(diuretics, diuresis), H+, ammonia	
	Renin-angiotensin- aldosterone mechanism	
	Concentration of urine - countercurrent multiplier and countercurrent evaluations.	
	and countercurrent exchanger.	
	Micturition	
	Renal dialysis	
	a. Endocrine physiology (10 + 3hrs)	
	Pituitary gland: hormones secreted and their	
	functions, applied: dwarfism, gigantism, Diabetes	
	Insipitus.	
	Thyroid gland: hormones secreted and their	
	functions, applied: hypothyroidism, hyperthyroidism	
	 Parathyroid gland: hormones secreted and their functions 	
	 Adrenal gland: hormones secreted and their functions 	
V	 Pancreas: hormones secreted and their functions, applied: 	15 + 5
	Diabetes Mellitus	
	b. Reproductive physiology (5 + 2hrs)	
	 Male reproductive system: spermatogenesis, endocrine 	
	functions of testis	
	 Female reproductive system: oogenesis, 	
	ovulation, functions of estrogen and	
	progesterone.	
	 Menstrual cycle: ovarian cycle, uterine cycle, 	
	hormonal changes, abnormalities of menstruation	
	Contraception Contraception	
	a. Nerve-Muscle physiology (5 + 5 hrs)	
	Neurons: structure, types, properties, degeneration and regeneration	
	and regeneration	
	Neuromuscular junction: transmission of impulse and its clinical applications.	
	its clinical applications	
	Skeletal muscle: structure, muscle proteins, contraction& relevation, types of contraction.	
VI	relaxation, types of contraction b. Central pervous system (5 + 3brs)	15 + 10
	b. Central nervous system (5 + 3hrs)	
	Organization of nervous system Synanso: types functions	
	Synapse: types, functions CSE structions	
	CSF : functions Canaly and a second and a second at least formations.	
	Cerebral cortex: Broca`s area and their functions	
	Cerebellum: lobes &function	
	Basal ganglia: nucleus & functions, Parkinsonism	

- Hypothalamus: functions
- c. Special senses (5 + 2 hrs)
 - Vision: Errors of refraction, visual pathway and effects of lesion
 - Hearing: functions of middle ear, Conductive deafness and nerve deafness.
 - Smell and taste: receptors and pathways

LAB TRAINING (38 hrs)

- Hemoglobinometry
- White Blood Cell Count
- Red Blood Cell Count
- Determination of Blood Groups
- · Leishman's Staining and Differential WBC Count
- Determination of Packed Cell Volume
- Erythrocyte Sedimentation Rate(ESR)
- Determination of Clotting Time, Bleeding Time
- · Recording of Blood pleasure
- Auscultation for Heart sounds
- Artificial Respiration
- Determination of Vital capacity.

METHODS OF TEACHING

- Lecture cum discussion
- Demonstration
- Lab visit
- · Practical work record

METHODS OF EVALUATION

- Written Test
- Laboratory observation Book
- Assignments
- Oral Presentations

REFERENCE BOOKS

- 1. Basics of Medical Physiology D. Venkatesh / H.H. Sudhakar Wolters Kluwer Third Edition.
- 2. Waugh: Ross & Wilson Anatomy & Physiology in health and illness Penguin Books Ltd (2010).
- 3. Principles of Physiology, Singh (H).

PHYSIOLOGY - BLUEPRINT

11-24	Court cours	AAI	Weightage	Question type						
Unit	Systems	Marks	(%)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)				
	General physiology	15	19%			2+1*				
'	Hematology	13	1 7/0	1*	1	1				
II	Cardiovascular physiology	16	20%	1	1					
III	Respiratory physiology	16	20%	1	1					
IV	Gastro-intestinal physiology	12	15%		1	1+1*				
	Renal physiology			1*		1				
.,	Endocrine physiology	42	450/		1	1				
V	Reproductive physiology	12	15%			1				
	Nerve-Muscle physiology					1				
VI	Central nervous system	09	11%		1*	1				
	Special senses					1				

Note: * represents question of choice

• The duration of Examination (University) is Three (3) hours.

• The total marks for the University Examination will be 100marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of 4)

Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)

Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

MODEL QUESTION PAPER FIRST YEAR B.Sc. ALLIED HEALTH SCIENCES PHYSIOLOGY

Total marks: 80 Duration: 3hours

LONG QUESTION ANSWER

 $(2 \times 10 = 20)$

- 1. a) Define Erythropoiesis? Describe its stages. Mention the factors influencing it. (OR)
- b) Define blood pressure. Write its normal range. Briefly explain short term regulation mechanism of blood pressure.
- 2. a) Explain how oxygen is transported in blood. Explain oxygen dissociation curve. List the factors shifting this curve to right&left.(OR)
- b) Define Glomerular filtration rate (GFR). Write its normal value. Explain the factors affecting it.

SHORT QUESTION ANSWER - Answer any 5

(5 X 6 = 30)

- 1. Define hemostasis. Briefly explain blood clotting mechanism.
- 2. Define cardiac output. Give its normal value. Describe the factors regulating it
- 3. Draw normal spirogram indicating static lung volumes and capacities.
- 4. Briefly explain the mechanism of HCl secretion in stomach.
- 5. Name the anterior pituitary hormones. Briefly explain functions of growth hormones.
- 6. Briefly describe stages of Spermatogenesis.

VERY SHORT ANSWER - Answer any 10

(10 X 3=30)

- 1. Write the functions of Golgi apparatus
- 2. Briefly explain osmosis
- 3. Briefly describe the function of Na⁺ K⁺ ATPase pump
- 4. What are anticoagulants? Name any two.
- 5. Write any 3 functions of saliva
- 6. Name any two GI hormones. Write any one function of them.
- 7. Name the cells of Juxta glomerular apparatus & mention their function
- 8. List the 3 functions of thyroid hormone
- 9. Name natural contraceptive methods
- 10. Classify muscle proteins
- 11. Classify glial cell. Write any two functions of it.
- 12. What is myopia? How it is corrected

BIOCHEMISTRY

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES - BIOCHEMISTRY

NAME OF THESUBJECTPAPER : BIOCHEMISTRY

DURATION OF THEORY CLASSES : 80hrs

DURATION OF TUTORIAL SESSIONS : 32hrs

DURATION OF LAB TRAINING : 38Hrs

THEORY EXAMINATION : 100 marks (80 U + 20IA)

UNIVERSITY PRACTICAL EXAMINATION : Nil

DURATION OF THEORY EXAMINATION : 3 hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : IYEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge of the normal biochemical functioning of human body and alterations.

OBJECTIVES

At the end of the course, the student will be able to

- 1. Identify the basic principles of biochemistry.
- 2. Synthesize the knowledge of these principles in various situations.

COURSE OUTCOMES FOR BIOCHEMISTRY

At the end of the course, students will be able to...

BIO-AHS-CO1: Correlate the integration of various aspects of biomolecules and its lab diagnosis

BIO-AHS-CO2: Explain biochemical basis and rationale of clinical laboratory tests for inborn errors of metabolism, and interpret the results.

BIO-AHS-CO3: Correlate the results of these investigations with the primary disorders of each human body system.

BIO-AHS-CO4 Follow good clinical laboratory practice as well as to handle the biological samples collected

BIO-AHS-CO5: Learn how to collect the samples and to process it for diagnostic purposes

UNIT	TITLE	THEORY + TUTORIALS (80 +32) HOURS
I	 (i) INTRODUCTION TO BIOCHEMISTRY Biophysical aspects of Biochemistry: Theory of acids and bases, Ionization of acids, Dissociation of water, Hydrogen ion concentration and concept of pH, Dissociation of acids and bases, Basic concepts in Acidosis and Alkalosis (Respiratory and Metabolic) Concept of buffering, Definition of buffers and Buffering Capacity, Chemical and Physiological buffers, Henderson Hassel Balch equation and pH - pK relationship, Glass electrode and determination of pH, Acid Base titration. ii) PROTEINS Proteins: Chemistry, Classification, properties and biomedical importance of Proteins. Hydrolytic products of proteins Classification of Amino acids and important properties iii) ENZYMES Definitions of Catalyst, Enzymes, Apo enzyme, Coenzyme, Holoenzyme, Cofactors and prosthetic group Active site Systematic classification of Enzymes Factors influencing Enzyme kinetics Enzyme units 	18 + 6
II	 i) CARBOHYDRATES Carbohydrates: Chemistry, Classification, properties and biomedical importance of carbohydrates. ii) NUCLEOPROTEINS Purine and Pyrimidine bases Ribose and Deoxy Ribose Definition of Nucleosides and Nucleotides Structure of DNA Types of RNA Biologically significant Nucleotides 	15 + 5
III	 LIPIDS Definition of Fats and Oils Classification of Lipids Saturated and Unsaturated Fatty acids Properties of Lipids Biomedical importance of Lipids with special reference to Phospho Lipids, Glycolipids and Cholesterol. 	15 + 7
IV	 ENGERY METABOLISM AND NUTRITIONAL BIOCHEMISTRY Calorific value, Respiratory Quotient, Resting Metabolic expenditure, Specific dynamic action Energy requirements Complex Carbohydrates and Role of Dietary fiber Essential Fatty acids Essential amino acids 	20 + 6

	Positive and Negative Nitrogen balance	
	Protein Energy Malnutrition	
	Biochemical functions of Vitamins	
	Biochemical functions of major and trace elements	
	 (i) CLINICAL CHEMISTRY Serum Osmolality: Significance and measurement Electrophoresis: Principles, Methodology and Diagnostic significance Principles and applications of Patrician Chromatography Simple tests to identify Carbohydrates, Lipids and Proteins in biological fluids 	
	 Qualitative estimation of Glucose, Proteins, Cholesterol, Urea, Creatinine and Uric acid and their diagnostic significance 	
V	 (ii) ENVIRONMENTALCHEMISTRY Definition of Pollutants Impact of Terrestrial, Water and air pollutants Bio pesticides Chemistry, Metabolic Transformation in the living system and role in Chemical Pathology Influence of Non-Biodegradable domestic utility items and its role in metabolic disorders Carcinogens and mutagens: qualitative and molecular pathology involved in mutagenesis and carcinogenesis Plastics and its impacts on Society Biomedical Waste and its management 	12 + 8

LAB TRAINING (38 hrs)

- Simple Color reactions of Carbohydrates and Proteins
- Qualitative estimations of Glucose, Urea, Creatinine, Total Protein and Cholesterol
- Normal constituents of Urine
- Abnormal(pathological)Urine
- Glucose Tolerance Test and its significance
- Demonstration of Electrophoresis and Interpretation of important clinical conditions based on Electrophoresis appearance
- Demonstration of Paper Chromatography and its utility in the diagnosis of inborn errors of metabolism

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOK

- 1. Essential of Biochemistry for B.Sc. Nursing Students Harbanslal, first edition.
- 2. Biochemistry U.Sathya Narayana, U.Chakrapani, fifth edition

B.Sc. ALLIED HEALTH SCIENCES - BIOCHEMISTRY (I Year) BLUE PRINT

		Marks		Knowled Reca		U	ndersta	ınding	A	pplicat	ion
Unit No.	Weight age	Allot ted	LAQ (10)	SAQ (6)	VSA Q (3)	LAQ (10)	SAQ (6)	VSAQ (3)	LAQ (10)	SAQ (6)	VSAQ (3)
I	30 %	25		1	1	1	1				
II	20%	19	1		2			1			
III	15%	12	1*	1	2						
IV	15 %	9	1*	1*	2			1			
V	20%	15		1	1 + 1*		1	1*			

The duration of Examination (University) is Three (3) hours.

The total marks for the University Examination will be 80 marks.

Long Answer Questions : 2X 10 marks = 20 marks (Choice 2 out of 4)

Short Answer Questions : 5X 6 marks = 30 marks (Choice 5 out of 6)

Very Short Answer Questions : 10 X 3 marks = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 =100marks

MODEL QUESTION PAPER FIRST YEAR B.Sc. ALLIED HEALTH SCIENCES BIOCHEMISTRY

TIME: 3 HOURS MAXIMUM MARKS:80

A. Long answer question

(2 X10=20)

1. a) Write in detail about the Hetero polysaccharides and mention its importance.

(Or)

- b) How is acid base balance maintained in the body?
- 2. a) Define and classify Lipids with suitable examples.

(Or)

b) Write in detail about the RDA, dietary sources, and biochemical role and deficiency manifestations of folic acid.

B. Short answer questions -Answer any 5 questions

(5X 6=30)

- 1. Mention dietary sources and functions of cholesterol
- 2. Define Chromatography & write any4applications
- 3. Classify Carbohydrates with a suitable example
- 4. Classify Enzymes systematically by providing one example under each class.
- 5. Define carcinogen and name any three agents that cause carcinogenesis.
- 6. List down the sources, regulation and functions of Calcium

C. Very Short answer questions -Answer any10 questions

 $(10 \times 3=30)$

- 1. Define Respiratory quotient
- 2. Define buffer
- 3. List any two functions of trace elements.
- 4. List any two impacts of plastics on society
- 5. Mention the essential fatty acids and its importance
- 6. List any 2 functions of phospholipids
- 7. Name one test to identify plasma proteins and urea.
- 8. Define osmolality
- 9. Mention any one cardiac glycoside with its function
- 10. Draw a neat labeled diagram of DNA
- 11. Define mutarotation
- 12. List any two functions of Fat soluble vitamin



SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES - GENERAL MICROBIOLOGY

NAME OF THE SUBJECT PAPER : GENERAL MICROBIOLOGY

DURATION OF THEORY CLASSES : 40 hrs

DURATION OF TUTORIAL SESSIONS : 16 hrs

DURATION OF LAB TRAINING : 38 Hrs

EXAMINATION : 50 marks (40 U+10 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire understanding of fundamentals of microbiology and identification of microorganisms. It also provides opportunities for practicing infection control measures in hospital setting.

COURSE OBJECTIVES

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

- 1. Identify common disease producing microorganisms
- 2. Explain the basic principles of microbiology and their significance in health and disease. Demonstrate skill in handling specimens.
- 3. Explain various methods of disinfection and sterilization
- 4. Identify the role of the nurse in hospital infection control system.

COURSE OUTCOMES FOR GENERAL MICROBIOLOGY

At the end of the course, students will be able to...

MIC-AHS-CO1: Sterilize the articles with physical and chemical methods

MIC-AHS-CO2: Perform with suitable culture media, methods for growth of the bacteria and perform staining techniques for identification of bacteria

MIC-AHS-CO3: Learn the structure, function of immune system and immunity by its antigenantibody reactions

MIC-AHS-CO4: Learn the how to collect & process the specimen for the diagnostic purposes MIC-AHS-CO5: Learn about the identification of fungal infections from clinical specimens and various antifungal agents used for the fungal infections.

MIC-AHS-CO6: Learn the laboratory diagnosis of Parasitic and Viral infections

MIC-AHS-CO7: Learn about the treatment and post exposure prophylaxis (PPE) of viral infections

UNIT	TITLE	THEORY + TUTORIALS (40 +16) HOURS
I	 GENERAL BACTERIOLOGY Historical introduction Classification of Microorganisms based on size, shape and structure Anatomy & Physiology of Bacteria: Nutrition, Growth Microscopy, staining techniques & Culture media, culture methods Sterilization (physical &chemical methods) Infection 	8 +2
II	IMMUNOLOGY Immune response Immunity Hyper sensitivity, Autoimmunity Complement Antigen antibody reactions	7 + 2
III	SYSTEMATIC BACTERIOLOGY Introduction: Collection transport & processing of bacteriological clinical specimen in general Pyogenic cocci Spore baring bacilli Clostridium +Bacillus Enterobacteriaceae- E.coli, Klebsiella, Salmonella, Shigella Vibrio, Pseudomonas MYCOLOGY Introduction, classification of fungi, laboratory diagnosis in general Fungi of medical importance-Opportunistic fungi	8 + 3
IV	BASICS OF PARASITOLOGY Introduction to Parasitology, Classification, Protozoa-I - Entamoeba histolytica Protozoa-II, Plasmodium spp. Cestodes: general, T.solium&T.saginata, E.granulosus Nematodes: Introduction &Classification Intestinal -Ascaris, Ancylostorma, Strongyloides Tissue-W.bancrofti	7 +3
V	 VIROLOGY Classification & General properties of Viruses, Virus Host interactions & Lab diagnosis in general DNA Viruses: Pox viruses & Adenoviruses, Herpes viruses Hepatitis virus, HIV Rabies, Polio, Arbo viruses common in India - Dengue, Chickenkuniya, Japanese encephalitis, KFD 	6 + 4
VI	HOSPITAL INFECTION AND CONTROL Causative agents and methods of transmission Systematic investigation of hospital infection Prevention and control of Hospital infections Environmental Hazards resulting from biomedical waste and preventive measures.	4 + 2

LAB TRAINING (38 hrs)

- Introduction & visit to microbiology lab + Morphology of bacteria + Identification of bacteria (Culture plates & Basic biochemical reactions)
- Gram stain, Acid fast Stain
- Spotters, Instruments, Culture media inoculated &un inoculated
- Applied Immunology(Bacterial)
- Serological tests CRP, ASO, RPR, Widal Applied Immunology (Virology) Serological tests: HIV, HBsAg(Rapid Tests)
- Stool Examination for eggs + Parasitology specimens

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory Observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS

- 1. Ananthnarayan R: Textbook of Microbiology. (2017)
- 2. Pommerville J. C: Fundamentals of Microbiology. Jones and Bartlett learning(2013)
- 3. ApurbaSastry, SandhyaBhat. Essentials of Microbiology.
- 4. Text book of Concise Microbiology by C.P.Baveja, Latest edition

BLUE PRINT - B.Sc ALLIED HEALTH SCIENCES -GENERAL MICROBIOLOGY (I Year)

				Knowledge/ Recall			Understanding			Application		
Unit No.	Unit	Weightage (%)	Marks Allotted	LAQ (10)	SAQ (6)	VSAQ (3)	LAQ (10)	SAQ (6)	VSAQ (3)	LAQ (10)	SAQ (6)	VSAQ (3)
ı	GENERAL BACTERIOLOGY	8	3	1*								1
II	BASICS OF IMMUNOLOGY	15	6			1*		1				
III	SYSTEMATIC BACTERIOLOGY	25	10				1				1*	
IV	BASICS OF PARASITOLOGY& MYCOLOGY	22	9					1				1
٧	VIROLOGY	22	9		1							1
VI	HOSPITAL INFECTION AND CONTROL	8	3		1*				1			
	TOTAL	100	40									

The duration of Examination (University) is One and Half (1 ½) hours.

The total marks for the University Examination will be 40marks.

Long Answer Questions : 1X10mark = 10 marks (Choice 1 out of2)
Short Answer Questions : 3X6marks = 18 marks (Choice 3 outof5)
Very Short Answer Questions : 4 X3 marks = 12marks (Choice 4 out of5)

TOTAL = 40 marks

MODEL QUESTION PAPER FIRST YEAR B.Sc. ALLIED HEALTH SCIENCES GENERAL MICROBIOLOGY

Time: 1½Hours Maximum Marks: 40

Illustrate your answers with suitable diagrams wherever necessary.

(A) Long answer questions

(1 X 10=10)

1. Describe the commonly used chemical disinfectants and their applications in the hospital.

(OR)

2. Classify Mycobacterium. Give an account on pathogenesis and laboratory diagnosis of pulmonary tuberculosis. Add a note on BCG vaccine.

(B) Short answer questions -Answer any 3 questions marks

(3 X6=18)

- 1. Define immunity. Describe acquired immunity.
- 2. Types of HAI & mention the causative agents.
- 3. Name the UTI cause bacteria. How to collect urine & laboratory diagnosis of E.coli.
- 4. Life cycle of malaria parasite in human.
- 5. Write about Modes of transmission of HIV.

(C) Very Short answer questions -Answer any 4 questions

 $(4 \times 3 = 12)$

- 1. Mention different color coded bags for biological waste management used in hospital with the viruses.
- 2. Prophylaxis of hepatitis B.
- 3. List FOUR bacteria causing wound infection.
- 4. Name the opportunistic fungi.
- 5. Name four arbo viral diseases common in India.

GENERAL PATHOLOGY

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES - GENERAL PATHOLOGY

NAME OF THE SUBJECT PAPER : GENERAL PATHOLOGY

DURATION OF THEORY CLASSES : 40hrs

DURATION OF TUTORIAL SESSIONS : 16hrs

DURATION OF LAB TRAINING : 38Hrs

EXAMINATION : 50 marks (40 U + 10IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE DESCRIPTION

To make the student to understand pathology laboratory reports, the normal ranges of investigations, severity and specificity of disease conditions which will help him perform International Classification of diseases to clinical pertinence.

COURSE OBJECTIVES

On completion of this subject, the student will be able to:

- Differentiate between symptoms and diseases
- Understand the needs of mandatory diagnostic procedures
- Demonstrate an understanding of the pathology of common diseases
- Understand various pathology laboratory reports
- Know about the possibilities and consequences of nosocomical infections, needle prick injuries etc., in a health care facility

COURSE OUTCOMES FOR GENERAL PATHOLOGY

At the end of the course, students will be able to...

PAT-AHS-CO1: Learns the pathophysiology of disease and its causes and progression **PAT-AHS-CO2:** Learns the etiologies, the pathogenesis, and the host response specific to a particular organ system

PAT-AHS-CO3: Learn about lab investigations and techniques in Hematology.

PAT-AHS-CO4: Learns to perform cross matching, coombs test, blood grouping and TTI **PAT-AHS-CO5:** Learns the diagnosis of disease based on the laboratory analysis of bodily fluids

UNIT	TITLE	THEORY + TUTORIALS (40 +16) HOURS
I	GENERAL PATHOLOGY (12 +3 HOURS) Basic Concepts in Cellular Adaptions Cell injury and Cell death Over view of Cellular adaption Basic Principles in Inflammatory Process General features of acute and Chronic inflammation repair. NEOPLASIA Definition of Neoplasia Differences between Benign and Malignant tumors Nomenclature	10 + 5
II	HAEMATOLOGY Structure and functions of Blood cells Objective use of anticoagulants Mechanisms of Haemostasis Tests to monitor Coagulation Blood Grouping and Blood Bank (Basic aspects on Blood Components) Basic concepts in Anemia Basic Concepts of Leukemia	10 + 3
III	BIOMEDICAL WASTE MANAGEMENT AND ENVIRONMENTAL PATHOLOGY • Biomedical waste management from perspectives of Pathology • Environment and Disease - Smoking hazards, Asbestosis and Silicosis Occupational Exposure	5 + 2
IV	 CLINICAL PATHOLOGY Collection, transport, preservation and processing of Clinical Specimen Clinical Pathology of specialized Body Fluids(CSF), Synovial fluid, Pleural Fluid Urine Examination(Urinalysis) 	5 + 2
V	 OVERVIEW OF SYSTEMIC PATHOLOGY Rheumatic Heart Disease ineffective endocarditic, atherosclerosis, IHD - Basic Concepts. Lungs: Pneumonia, COPD, Asthma, ARDS - Basic Concepts Gastrointestinal tract - Peptic Ulcer, Carcinoma Stomach, Carcinoma Colon -Basic Concepts. Liver: Hepatitis, Cirrhosis, Gall Bladder -basic 	10 + 4

- Concepts.
- Brain Tumor.
- Kidney Renal Calculi, Hydronephrosis, renal Tumor
 Basic Concepts.
- FGT Leiomyoma, Endometrial hyperplasia, Endometrial Cancer, Cervical Cancer -Basic Concepts.
- FGT Ovarian Tumor classifications Basic Concepts.
- Breast Benign and Malignant tumors Basic Concepts
- Bone Tumors Basic Concepts

LAB TRAINING (38 hrs)

- 1. Blood Grouping and Rh typing
- 2. Urine Routine
- 3. Hb, TLC, DLC
- 4. Gross Specimens
- 5. Slides

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOK

- 1. Culling Histopathology techniques
- 2. Bancroft Histopathology techniques
- 3. Todd & Sanford Clinical Diagnosis by laboratory method
- 4. Dacie & Lewis Practical Haematology
- 5. RamanicSood, Laboratory Technology (Methods and interpretation) 4thEd.

B.Sc. ALLIED HEALTH SCIENCES - PATHOLOGY (I Year)-BLUE PRINT

				Knowledge/ Recall				ndersta	anding	Application		
Unit No.	Unit	Weightage	Marks Allotted	LAQ (10)	SAQ (6)	VSAQ (3)	LAQ (10)	SAQ (6)	VSAQ (3)	LAQ (10)	SAQ (6)	VSAQ (3)
I	a) BASIC CONCEPTS IN CELLULARADAPTIONS b) BASIC PRINCIPLES IN INFLAMATORY PROCESS c) NEOPLASIA	37.5%	15	1*	2	1	-	1*	1*	1	-	-
II	HAEMATOLOGY	22.5%	9	-	1	1	-	-	-	-	-	-
III	BIOMEDICAL WASTE MANAGEMENT AND ENVIRONMENTAL PATHOLOGY	7.5%	3	-	-	-	-	-	1	-	-	-
IV	CLINICAL PATHOLOGY	7.5%	3	-	1*	1	-	-	-	-	-	-
٧	OVERVIEW OF SYSTEMIC PATHOLOGY	25%	10	1	-	-	-	-	-	-	-	-

The Duration of Examination (University) is One and Half hours (1 ½) hours.

The total marks for the University Examination will be 40 marks.

Lon Answer Questions : 10X1marks = 10 marks (Choice 1 out of 2)

Short Answer Questions : 3 X6marks = 18 marks (Choice 3 out of5)

Very Short Answer Questions : 4 X3marks = 12 marks (Choice 4 out of5)

TOTAL = 40 marks

MODEL QUESTION PAPER FIRST YEAR B.Sc. ALLIED HEALTH SCIENCES GENERAL PATHOLOGY

Time: 1½Hour Maximum Marks: 40

Illustrate your answers with suitable diagrams wherever necessary.

(A) Long Answer Questions

(1X10=10)

1. Mention the types of necrosis with examples

(Or)

2. Describe about Myocardial infarction

(B) Short Answer Question

(3X6=18)

Answer any THREE of the following

- 1. Tabulate the difference between Benign and Malignant tumors
- 2. Define anemia. Mention types of anemia, on the basis of Etiology.
- 3. Explain the mode of spread of tumors in brief.
- 4. Explain granulomatous inflammation with a neat labeled diagram
- 5. Describe the method of collection, transport and preservation of CSF

(C) Very Short Answer Questions

(4X3=12)

Answer any FOUR of the following

- 1. Define Apoptosis.
- 2. Enumerate two colors coding for various biomedical waste disposal with examples.
- 3. Define cross matching
- 4. Mention two types of Necrosis.
- 5. Define Pneumonia.

I YEAR ELECTIVE COURSES

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES ABILITY ENHANCEMENT COMPULSORY COURSE (AECC) - ENGLISH

NAME OF THE SUBJECT PAPER : ENGLISH

DURATION OF THEORY CLASSES : 16hrs

DURATION OF PRACTICAL SESSIONS : 34hrs

EXAMINATION : 100 marks (80 U + 20 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE OUTCOMES FOR ENGLISH

ENG-CO1: Speak and write grammatically correct sentences in English

ENG-CO2: Develop effective writing skills needed for clinical task

ENG-CO3: Build fluency in English needed for clinical tasks

SYLLABUS (THEORY& PRACTICALS = 16 +34 Hours)

COURSE DESCRIPTION

This course is designed to build spoken and written English competency of the students needed to function effectively in academic setup.

OBJECTIVES

On completion of this subject, the student will be able to:

- 1. Speak and write grammatically correct sentences in English.
- 2. Develop effective writing skills.
- 3. Build fluency in English

UNIT: I GRAMMAR

- 1. Remedial Grammar: Parts of speech; Types of sentences, question tags
- 2. Modal verbs;
- 3. Tenses
- 4. Concordance

UNIT: II VOCABULARY

- 1. Word formation prefixes and suffixes
- 2. Medical terminology
- 3. Words often misused or confused
- 4. Idioms and phrases

UNIT: III WRITING SKILLS

- 1. Letter writing permission, leave and other official letters
- 2. Note making methods
- 3. Jumbled sentences -cohesion
- 4. Paragraph Writing

UNIT: IV SPOKEN COMMUNICATION

- 1. Pronunciation of commonly mispronounced words
- 2. Day today conversation
- 3. Telephonic conversations
- 4. Group Discussions

UNIT: V LISTENING AND READING SKILLS

1. General Listening and reading comprehension

Textbook Recommended

- 1. Effective English Communication by Krishna Mohan and Meenakshi Raman, Tata McGraw Hill Publishing Company Limited, New Delhi.
- 2. English for Colleges and Competitive Exams by Dr. R. Dyvadatham, Emerald Publishers.

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES SKILL BASED ELECTIVE COURSE (SBEC) - CULINARY SKILLS FOR OPTIMAL NUTRITION

NAME OF THE SUBJECT PAPER : CULINARY SKILLS FOR OPTIMAL NUTRITION

DURATION OF THEORY CLASSES : 16 Hrs

DURATION OF PRACTICAL SESSIONS : 32Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT: I YEAR

COURSE OUTCOMES

NUTRI-CO1: Understand the basic food groups, their nutrient composition and function for balanced healthy diet for people of all ages & patients on dietary management for healthy life.

THEORY & PRACTICALS (DURATION 16 + 32 Hours)

UNIT-I INTRODUCTION TO FOODS AND NUTRITION

- Food-Definition of foods, nutrition and nutrients characteristics of good health
- Relation of nutrition to good health-optimal nutrition, malnutrition and over nutrition
- Classification of foods based on major nutrient content
- Food selection-factor responsible for food selection

UNIT-II FOODS GROUPS

- Basic four and five food groups-cereals, millets pulses, fruits and vegetables, fats and oils, sugar and jaggery.
- Foods and nutrients, Functions of food- energy yielding, body building and protective foods, balanced diet, vegetarian and non-vegetarian foods
- Functional Foods-Dietary supplements
- Food Adulterations-Common adulterants and method of identification, nutrition labeling and food standards

UNIT-III METHODS OF COOKING, PRESERVATION AND SENSORY EVALUATION

- Principles and techniques of sensory evaluation, Interpretation tools
- Cooking methods-moist heat, dry heat advantages and disadvantages, changes during cooking, nutrient preservation while cooking
- Preservation techniques advantages and disadvantages

UNIT-IV NUTRITIONAL REQUIREMENTS AND MEAL PLANNING

• Basic nutritional requirements through different stages of life cycle, basic principles of meal planning, revisiting concept of balanced diet.

PRACTICALS

- Introduction to cutlery and crockery
- Introduction to weights and measures
- Art of table setting
- Market survey on food labeling
- Preparation of few commonly consumed cereal preparation
- Preparation of few commonly consumed pulse dishes
- Vegetable cooking without nutrient loss
- Preparation and display of fruits salads
- A day's menu for an adult sedentary worker
- A day's menu for an 8-montholdinfant
- Nutritious snacks for preschooler
- Nutritious lunch for school going boys and girl
- Consistency modified menu foran80-year-old
- Simple test to identify food adulteration
- Sensory evaluation of prepared items

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

Reference book

- 1. Srilaksmi.B.: Food science; seventh edition(2012)
- 2. Jacqueline B .Marcus :Culinary Nutrition: The science and practice of healthy cooking: (2014)

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES SKILL BASED ELECTIVE COURSE (SBEC) - ENHANCING SOFT SKILL & PERSONALITY

NAME OF THE SUBJECT PAPER : Enhancing soft skill & personality

DURATION OF THEORY CLASSES : 16Hrs

DURATION OF PRACTICAL SESSIONS: 32Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF EXAMINATION : 1 ½ Hrs.

YEAR : I YEAR

COURSE OUTCOMES

ESSP-CO1: Foster healthy attitude and develop effective inter and intra personal skills to be an effective team worker in both academic and professional setup.

LEARNING OBJECTIVES

This course is designed to equip the students with essential soft skills needed for workplace and improve personality.

SYLLABUS

UNIT: I ASPECTS OF COMMUNICATION

- 1. Importance of communication, Process, Barriers
- 2. Nonverbal Communication

UNIT: II SPEAKING

- 1. Opening and Closing conversations
- 2. Introductions and Address Systems
- 3. Expressing Courtesy
- 4. Giving Compliments and replying to Compliments
- 5. Presentation Skills
- 6. Telephonic conversation and telephone etiquette

UNIT - III PRESCRIBED READING

- 1. White washing the Fence Episode from Tom Sawyer by Mark Twain
- 2. Bacon's Essays: Of Goodness and goodness of nature

UNIT - IV WRITING

- 1. Letter writing Letter of Complaints, Inviting and Declining an invitation
- 2. Memos and Email
- 3. Editing- Grammar, Spelling & Punctuation, Use of Dictionary & Thesaurus.

UNIT - V SOFT SKILLS

- 1. Active Listening Skills
- 2. Assertive Skills
- 3. Negotiation and Persuasive Skills
- 4. Interview Skills

Reference Books

- 1. Communication Skills for Engineers and Scientists by Sangeeta Sharma and Binod Mishra, PHI Learning Private Limited, New Delhi.
- 2. English and soft skills by S.P. Dhanavel, Orient Black Swan
- 3. Effective English Communication by Krishna Mohan and Meenakshi Raman, Tata McGraw -Hill Publishing Company Limited.
- 4. Technical Communication Principles and Practice, by Meenakshi Raman and Sangeetha Sharma, II edition, Oxford University Press.

Learning Outcome

This course is designed to help the students to

- Foster healthy attitude.
- Develop effective inter and intra personal skills to be an effective team worker.
- Communicate effectively in both academic and professional setup

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES SKILL BASED ELECTIVE COURSE (SBEC) - SPEAKING EFFECTIVELY

NAME OF THE SUBJECT PAPER : SPEAKING EFFECTIVELY

DURATION OF THEORY CLASSES : 16Hrs

DURATION OF PRACTICAL SESSIONS : 32Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF PRACTICAL EXAMINATION : 1 ½ Hrs.

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT: I YEAR

COURSE OUTCOMES

SPEAK-CO1: Speak and write grammatically correct sentences in English and Build fluency in English needed for clinical tasks.

LEARNING OBJECTIVES

- Advance the students intellectual curiosity, competency and skills in preparation for employment
- Develop critical thinking, creativity and effective communication

SYLLABUS

1. Communication Skills

• Importance of Communication skills in Public health; Communication process; Methods of communication; Types of communication: Verbal and Non-verbal; Impediments to effective communication; Feedback

2. Oral Presentation Skills

 Preparation and planning; Structure; Audio-visual aids; Creating interest and establishing a relationship with the audience; Body language; Voice and pronunciation; Review

3. Writing skills

Writing a scientific paper; Writing a proposal; Structure of an article;
 References and literature review; Peer-review process-Publication bias;
 International guidelines for publication in journals; Professional Ethics

4. Leadership in Public health

• Leadership styles and trait; Motivation skills; Interpersonal communication skills; Problem solving skills; Decision making skills; Management skills; Communication Skills

5. Manuscript writing

• Writing introduction, objectives, methodologies, major finding, discussion, conclusion and recommendation

6. Seminar presentations

• Use of computers present data and information on recent topics

LEARNING OUTCOMES

At the completion of the course, the students will-

- Develop good written and oral communication abilities
- Develop an understanding of team building and leadership skills
- Develop knowledge regarding capacities needed to work independently within diverse work environments

TEXT BOOKS

- 1. Professional Writing Skills, A self-paced training Programme by Janis Fisher Chan and Diane Lutovich.
- 2. Speaking Your Mind: Oral Presentation and Seminar Skills By Rebecca Stott, Tory Young, Cordelia Bryan Contributor Rebecca Stott, Tory Young, Cordelia Bryan.

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES SKILL BASED ELECTIVE COURSE (SBEC) - BASICS OF YOGA AND PRACTICE

NAME OF THE SUBJECT PAPER : BASICS OF YOGA AND PRACTICE

DURATION OF THEORY CLASSES : 16Hrs

DURATION OF PRACTICAL SESSIONS : 32Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF EXAMINATION : 1 ½ Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

SYLLABUS & COURSE OUTCOMES FOR BASICS OF YOGA & PRACTICE (YOGA)

YOGA CO1: Understand the respiratory system, types of breathing and benefits of meditation.

Unit	TIME(HRS)	CONTENT
1	1	Introduction to Yoga philosophy, psychology and lifestyle
2	1	A brief outline of the history of Yoga.
3	1	Cultivation of correct psychological attitudes
4	1	Asanas : Definition, Types, scope and limitations of Asanas
5	1	Pranayamas and their significance in Yogic curriculum, Types & phases of Pranayama.
6	1	Dharna and Dhyana as the keys to unlocking human potential.
7	1	Study of various aspects of Yoga: Kriyas, Bandhas, Mudras
8	1	Yoga defined as —Integration and —Harmony
9	1	Meaning of the term —Positive Health∥
10	1	Yoga, a tool to restore homeostasis
11	1	Integration of Yoga into Health Professions Education
12	1	Order of teaching the Yogic practices; Do's and Dont's of specific Yoga techniques.
13	2	Applied aspects of Yoga in various human activities like therapeutics, education and sports
14	2	Introduction to yogic concept of health and disease

Unit 15: Introduction to Yogic techniques: Methods and practices (32 hours) Asanas (26 hrs):

- Aruna Surya Namaskar
- Ardha Padmasana/Padmasana
- ArdhakatiChakrasana
- PadaHasta
- PavanaMuktasana
- Trikona
- Navasana
- Ardha -Shalabhasana
- Shalabhasana
- Makarasana
- Bhujangasana
- Dhanurasana
- Vakrasana
- Vrikshasana
- Ushtrasana
- Gomukasana
- Yoga Mudra.
- Natarajasana
- Chakra sana
- Sarvangasana
- Matsyasana
- Halasana
- Shavasana

Pranayama (6 hrs)

- Vibhaga Pranayama
- Pranava Pranayama
- Savitri Pranayama
- Chandra and SuryaNadi Pranayama
- Nadi-Shuddhi
- Sheetali and Sitkari

TEXT BOOKS

- Dayanidy G and Bhavanani AB. CYTER Practical Book. Pondicherry, India: Dhivyananda Creations; 2016.
- A primer of Yoga Theory Dr Ananda Balayogi Bhavanani, Dhivyananda Creations, Pondicherry-13
- Fundamentals of Yoga History- Compilation by Meena Ramanathan
- Basic Hatha Yoga lessons (Tamil) Dr Ananda Balayogi and Meena Ramanathan,
 Puducherry

BOOKS RECOMMENDED FOR STUDIES AND REFERENCE

- 1. A yogic approach to stress-Dr Ananda Balayogi Bhavanani, Ananda Ashram, Pondicherry
- 2. Asana, Pranayama, Mudra and Bandha. Swami Satyananda, Bihar School of Yoga, Monger
- 3. ASANAS: WHY? AND HOW? byShri. O.P. Tiwari.Kaivalyadhama,Lonavla.
- 4. Hatha Yoga practices of the Gitananda tradition by Dr Ananda Balayogi Bhavanani
- 5. Ramanathan Meena. Applied Yoga: Applications of Yoga in Different Fields of Human Activities. 3rdEd; Pondicherry, India: Sri BalajiVidyapeeth;2018
- 6. PRANAYAMA by Swami Kuvalayananda. Kaivalyadhama, Lonavla.
- 7. Yoga and sports- Swami Gitananda and Meenakshi Devi, Ananda Ashram, Pondicherry.

SYLLABUS FOR I YEAR

B.Sc. ALLIED HEALTH SCIENCES

GENERIC ELECTIVE COURSE (GEC) - BASICS OF HOSPITAL ADMINISTRATION

NAME OF THE SUBJECT PAPER : BASICS OF HOSPITAL ADMINISTRATION

DURATION OF THEORY CLASSES : 64Hrs

THEORY EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ HRS

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE OUTCOMES

HSM CO1: To familiarizes students with the basics concepts, policies of hospital management regarding the occupational safety, organizational behavior & quality management.

COURSE OBJECTIVES

- To provide orientation about the hospital functions
- To familiarize students with the basics concepts of hospital management

THEORY (DURATION 64 Hours)

UNIT: I ORGANISATION OF A HOSPITAL AND ITS DEPARTMENTS

- 1. Organogram
- 2. Vision, Mission & Values, Logo
- 3. Patient Service Points Clinical & Non-Clinical (OPD's, A&E, MHC, Wards, ICU's, OT's, etc.)
- 4. Scope of Services (Medical & Supportive Services)

UNIT: II HOSPITAL POLICIES & PROCEDURES

- 1. Registration Process
- 2. OP/IP Billing
- 3. Admission Process
- 4. Discharge Process
- 5. Financial counseling
- 6. Visitors Policy
- 7. Feedback forms.

UNIT: III MEDICAL RECORS MANAGEMENT/LEGAL ASPECTS

1. Types of Medico legal cases 2.SOP's for handling MLC

3. Medical Records -Forms, consents, registers used in hospitals

UNIT: IV QUALITY MANAGEMENT

- 1. Quality Brief Introduction
- 2. Code of Conduct for health care professionals
- 3. Patient rights & responsibilities
- 4. Incident Reporting
- 5. Quality indicators
- 6. List of Licenses to be obtained to run a Hospital College
- 7. Accreditation-ISO/NABH/JCI

UNIT: VOCCUPATIONAL SAFETY

- 1. Biomedical Waste Management
- 2. Hospital Spill Management
- 3. Usage of PPE
- 4. Emergency Codes
- 5. Fire Safety Management
- 6. Hospital Infection Control

UNIT: VI ORGANISATIONAL BEHAVIOUR

- 1. Communication with patients/health care professionals
- 2. Grooming standards
- 3. Time Management
- 4. Grievance Handling, Interdisciplinary Committee
- 5. Leadership

LEARNING OUTCOMES

Students will have an overview of hospital functions, processes and patient management.

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES GENERIC ELECTIVE COURSE (GEC) - COUNSELING AND GUIDANCE

NAME OF THE SUBJECT PAPER : COUNSELING AND GUIDANCE

DURATION OF THEORY CLASSES : 64Hrs.

EXAMINATION : 50 Marks (40 U +10IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ Hrs.

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE OUTCOMES

CG CO1: To assess a person's needs and understand their personal characteristics that will help in personal growth, wellbeing and improving their relationships with others.

LEARNING OBJECTIVES

- To understand theoretical foundations of counseling psychology
- To examine briefly the major perspectives of Counselling and to apply based on the client's needs
- Toassessone_sownneedsandmotivationsandpersonalcharacteristicsthatwill help in personal growth and wellbeing.
- To understand basic counseling skills as practiced by an effective counsellor.
- To discuss special settings and populations where Counselling could be effectively used.
- To explore ethical and legal issues for the practice of counseling profession.

SYLLABUS

UNIT I:

Introduction and definition of Counselling and Guidance, Counsellor Preparation, Qualifications, Qualities, Legal and Professional ethics

UNIT- II:

Different approaches to counselling, goals in counselling, role and functions of the counsellor.

UNIT- III:

Micro skills in Counselling- relationship building strategies and methods: Opening techniques, attending skills- verbal and non-verbal communication, Listening skills:

Open questions and closed questions, Encouragement, Paraphrasing, Reflection, Summarization, influencing skills-Reframing, genuineness and Self-disclosure.

UNIT-IV:

Macro skills in Counselling, empathy, advanced empathy, Confrontation & challenging, Resistance, transference and counter-transference

UNIT-V:

Counselling situations and Counselling across life-span.

Learning Outcome

At the end of this course, the students will be able to: Demonstrate basic knowledge in counseling (concepts, theories, ethical issues, basic skills, etc.)

SYLLABUS FOR I YEAR B.Sc. ALLIED HEALTH SCIENCES GENERIC ELECTIVE COURSE (GEC) - LIFESTYLE DISORDERS

NAME OF THE SUBJECT PAPER : LIFESTYLE DISORDERS

DURATION OF THEORY CLASSES : 64Hrs

EXAMINATION : 50 Marks (40 U +10IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ Hrs.

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : I YEAR

COURSE OUTCOMES

LD CO1: To understand the relevance, significance and implications of lifestyle disorders for the betterment of human life quality.

THEORY (64 Hours)

UNIT I Modern Life style disorders

Desk bound and sleeping habits, junk food, anxiety. Food poisoning, Acidity.

UNIT II Dietary disorders

Food groups and concept of a balanced diet, obesity, metabolic syndrome, hypertension- their causes and prevention through dietary and lifestyle modifications

UNIT III Social health problems

Smoking, alcoholism, drug dependence and Acquired Immune Deficiency Syndrome (AIDS).

UNIT IV Gastrointestinal disorders

Stomach disorders-Gastritis, Ulcer, Amoebiasis, Constipation, piles Common ailment- cold, cough, fevers, diarrhea, constipation- their causes and dietary

LEARNING OUTCOMES

To understand the relevance, significance and implications of lifestyle disorders for the betterment of human life quality

Text Books

- 1. Text book of Clinical Biochemistry-Carl.A. Burtis and EdwardR.Ashwood
- 2. Text Book of Medical Biochemistry-Dr.M.N.Chatterjee and Rane Shinde

Reference Books

1. P. Singh MD. Textbook of Nutrition and Health; First Ed; 2008; Academic Excellence Biochemistry with Clinical Correlation- Thomas M.Devl

II YEAR

B.Sc - RESPIRATORY THERAPY FACULTY OF ALLIED HEALTH SCIENCES SRI BALAJI VIDYAPEETH

(Deemed to be University)
Accredited by NAAC with 'A' Grade

II- YEAR

CORE SUBJECTS

- 1. Clinical Pharmacology
- 2. Respiratory diseases
- 3. Cardiovascular diseases
- 4. Diagnostic techniques in cardio respiratory diseases

ELECTIVES

Ability Enhancement compulsory course (AECC)

1. Environmental studies

Skill enhancement course (SEC) - Choose any TWO

- 1. Good Clinical Laboratory practice
- 2. Computer Applications
- 3. Library and E-resource
- 4. Public Health and Hygiene

Generic Elective Course (GEC) - Choose any ONE

- 1. Basic Psychology
- 2. Sociology
- 3. Entrepreneurship essentials

AHS Course Content Second year B.Sc. Respiratory Therapy (RT)

Faculty code	Category	Course title			Но	ours		Credits				
AHS	Core theory RT	Subjects	Theory	Practical	Tutorials	Clinical training	Total hours	Lecture	Practical	Tutorials	Clinical training	Total credits
AHS	RT -5	Clinical Pharmacology	80		32			5		1		6
AHS	RT -6	Respiratory diseases	80		32			5		1		6
AHS	RT -7	Cardiovascular disease	80		32			5		1		6
AHS	RT -8	Diagnostic Techniques in cardio- respiratory diseases	64	64				4	2			6
AHS	RT-CT 1	Clinical Training RT 5 to 8				192					6	6
AHS	AECC	Environmental Science	16	32				1	1			2
AHS	SEC - 1-3	Student's choice	16	32				1	1			2
AHS	SEC - 1-3	Student's choice	16	32				1	1			2
AHS	GEC - 1-3	Student's choice	64					4				4
			416	160	96	192	864	26	5	3	6	40

SCHEME OF EXAMINATION

Papers	Subject	Theory		Practical		Theory	Practical	Grand total 1000	Min marks to pass % (500)
		UE	IA	UE	IA	UIA*	UIA*		(333)
RT -5	Clinical Pharmacology	80	20					100	50
RT -6	Respiratory diseases	80	20					100	50
RT -7	Cardiovascular disease	80	20					100	50
RT -8	Diagnostic Techniques in cardio- respiratory diseases	80	20	80	20			200	100
RT-CT 1	Clinical Training RT 5 to 8						100	100	50
AECC	Ability enhancement Compulsory Course - Environmental Science	80	20					100	50
SEC	Skill enhancement Course	80	20					100	50
SEC	Skill enhancement Course	80	20					100	50
GEC	Generic elective	80	20					100	50

For all elective course, 40 marks for university theory and Practical cum Viva examination & 10 marks as Internal Assessment = 50 marks which will be converted to 100 marks in the transcript.



PAPER RT- 5 CLINICAL PHARMACOLOGY

NAME OF THE SUBJECT PAPER : CLINICAL PHARMACOLOGY

DURATION OF THEORY CLASSES : 80 HOURS

DURATION OF TUTORIAL SESSION : 32 HOURS

THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

PRACTICAL EXAMINATION : NIL

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : II YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- RT-PO 1: Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E-library.
- **RT-PO 2:** To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- **RT-PO 5:** To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO 8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behaviour healthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies:

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- PUL CO-2: Learn &practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice Chest Physiotherapy

COURSE CONTENT

UNIT	TITLE	THEORY+ PRACTICAL (80+32) HOURS
1	 A. INTRODUCTION TOPHARMACOLOGY Definitions Sources Common Terminologies used Types / Classification Pharmacodynamics: Actions, Therapeutics, Adverse Effect, Toxic Effect Pharmacokinetics: Absorption, Distribution, Metabolism, Interaction and Excretion Review: Routes and principles of administration of drugs Indian Pharmacopoeia (IP): Legal issues rational use of drugs B. CLINICALPHARMACOLOGY Drugs -Nomenclature Mode of action ofdrugs Routes ofadministration Drug dose calculation - Dilution, infusionrate Medical gases: O2;N20 Neuromuscular Blockingagents Antimicrobial drugs, Anti-Viraland Anti-Fungal agents-basic concepts-Antimicrobial Resistance Antisepticagents 	25 + 8
II	 A. DRUGS USED FOR CENTRAL NERVOUSSYSTEM Sedatives, hypnotics, opioid analgesics, general anaesthetics, CNS stimulants, anticonvulsants, local anaesthetics, NSAIDS. B. DRUGS USED FOR AUTONOMIC NERVOUSSYSTEM Parasympathetic agents, Parasympathetic Blocking agents, SympatheticAgents Sympathetic BlockingAgents 	20 + 8
III	 A. DRUGS USED FOR CARDIOVASCULAR SYSTEM Drugs for congestive cardiac failure, Antiarrhythmic drugs, Antihypertensivedrugs Antianginal drugs, diuretics, Coagulants and Anticoagulants, Cardiac stimulants, Drugs usedin the treatment of shock, Plasmaexpanders B. DRUGS USED FOR ENDOCRINE AND METABOLICDISORDERS: Insulin and oral anti diabetic agents, corticosteroids, thyroxin anti-thyroiddrugs. 	20 + 8
IV	 A. DRUGS USED FOR RESPIRATORYSYSTEM Drugs for cough and bronchialasthma Respiratory stimulants, histamine&antihistamine B. DRUGS USED FOR GASTRO INTESTINALSYSTEM H2 antagonist, proton pump inhibitors, Antacids, Emetics and antiemetic. Diarrhoea. 	15 + 8

PRACTICALS

- 1. Drugs identification (spotters)
- 2. Identification of drugs by chemical test, poisoning symptoms & treatment Route of drug administration

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS

- 1. Egan's Fundamentals of respiratory care- 12th revised edition (2020) by Craig L. Scanlon
- 2. Clinical application of mechanical ventilation- 4th edition by Chang D.W
- 3. Respiratory care exam review -4th edition by GaryPersing
- 4. Principles of Critical Care 3rd edition by FarokUdwadia
- 5. Irwine & Rippe's -Intensive Care Medicine 8th edition
- 6. Marinosthe little ICU Book 2nd edition by Paul L. Marino
- 7. Text Book of Critical Care 6th edition by Vincent Shoemaker
- 8. Pharmacology for dental and Allied Health Sciences 4th edition by Padmaja Udaykumar

BLUEPRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)
	A)Introduction to Pharmacology	45	12	1*	1*	1
	B) Clinical Pharmacology	15		-	1	1
	A) drugs used for central nervous system		12	1*	1	1+1*
II	B)drugs used for autonomic nervous system	15		-	-	1+1*
III	A)drugs used for cardiovascular system	38.75	31	1	1	2
	B)drugs used for endocrine and metabolic disorders:	30.73	31	-	1	1
IV	A) drugs used for respiratory system	31.25	25	1	-	1
	B) drugs used for gastro intestinal system			-	1	2
		100	80			
	Note	: * represents q	uestion of c	hoice	I	1

• The duration of Examination (University) is Three (3) hours.

• The total marks for the University Examination will be 100 marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of 4)

Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)

Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

RT -9 CLINICAL PHARMACOLOGY MODEL QUESTION PAPER

TIME: 3 HOURS MAXIMUM MARKS: 80

A. Long answer questions

(2 X 10 = 20)

- 1.a) Explain in detail about routes and principles of Administration of drugs
- b) Explain in detail about Anti-Hypertensive drugs and brief about the drugs used in treatment of Congestive Cardiac Failure
- 2.a Explain in detail about Sympathetic and Parasympathetic Agents
- b)Explain in detail about the drugs used in treatment of Bronchial Asthma

B. Short answer questions -Answer any 5 questions

 $(5 \times 6 = 30)$

- 1. Pharmacodynamics and Actions
- 2. Neuromuscular blocking agents
- 3. Explain in brief about Sedatives and Hypnotics
- 4. Explain in brief about Diuretics
- 5. What are the Anti Diabetic drugs and Insulin
- 6. Proton Pump Inhibitors

C. Very Short answer questions -Answer any 10

 $(10 \times 3 = 30)$

- 1. Common Terminologies used in Pharmacology
- 2. Antiviral Drugs
- 3. Local Anesthetic Drugs
- 4. Parasympathetic blocking agents
- 5. NSAID's
- 6. Sympathetic blocking agents
- 7. Anti-Anginal Drugs
- 8. Drugs used in Treatment of Shock
- 9. Anti-thyroid agents
- 10. Anti-Histamines
- 11. Antacids
- 12. Anti-Emetics

RESPIRATORY DISEASES

RT -6 RESPIRATORY DISEASES

NAME OF THE SUBJECT PAPER : RESPIRATORY DISEASE

DURATION OF THEORY CLASSES : 80 HOURS

DURATION OF TUTORIAL SESSION : 32 HOURS

THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

PRACTICAL EXAMINATION : NIL

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : II YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.

- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- RT-PO 1: Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E-library.
- **RT-PO 2:** To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- RT-PO 5: To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behavior healthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies:

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- PUL CO-2: Learn &practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice Chest Physiotherapy

COURSE CONTENT

UNIT	TITLE	THEORY+ TUTORIAL 80+32
I	 A. Introduction to Respiratory system Classification of Pulmonary diseases & Symptoms of respiratory disorders Cough & approach to cough; Hemoptysis- causes and emergency management; Dyspnea - types and causes; Chest pain; wheezing Cyanosis- acute and chronic causes Differentiating cardiac and respiratory causes Patient contact techniques Verbal & Non-verbal communication, Patient interview and exam- Conflict and conflict resolution Medical History Taking: components of history, categories, common errors in history taking. Maternal and perinatal / neonatal history, medication history. 	16+ 4
II	 A: Record keeping: Legal aspects of record keeping, components of medical record, POMR, review data in patient record, respiratory care orders, and progress notes. B: Clinical laboratory data interpretation Physical examination of the patient: Chest topography (identification of imaginary lines and topographical landmarks) & assessment of the chest. Sensorium, emotional state and ability to co-operate, level of pain. 	16+ 4
III	A: Examination of the respiratory and cardiovascular system. • Lung sounds (including demonstration) • Heart sounds (including demonstration) • Assessment of other body systems: Abdominal organs, neurological status, skin and its extremities, temperature, digestive and • renal system, reproductive system. • Nutritional assessment: Types of diets, caloric needs • Universal precautions Vital signs / Bedside assessment of the patient	16+8
IV	 a) Principles of infection control: Infection control strategies in the hospital setting. Importance of best infection control practices in Respiratory care b) Bronchial hygiene therapy (BHT) Physiology of airway clearance, goals and indications Lung expansion therapy (LET) Causes and types of atelectasis 	16+8

	CPT Chest physical therapy (CPT) Indications, ideal patient for therapy, preparing the patient for the procedure, techniques, classification of exercises, physiologic response to exercises, monitoring • during the procedure • Breathing exercises: different deep breathing exercises, design a • programme- intensity, frequency, duration and mode • Basic life support (BLS) adult • Basic life support (BLS) pediatric • Foreign body airway obstruction and management Pulmonary Disease-1 • Applied aspects of anatomy and physiology of lungs • Upper respiratory tract infections • Lung abscess & bronchiectasis • Pulmonary Tuberculosis • Pneumonia (community acquired)	
V	 Pneumonia (hospital acquired) COPD Pneumothorax Pleural diseases & pleural effusion Pulmonary edema and management ALI/ARDS/Severe acute respiratory distress syndrome 	16

16+8

Pulmonary Disease 2

(SARS)

- Toxic inhalation & smoke inhalational injury
- Acute respiratory failure
- Interstitial lung diseases
- Occupational lung disease
- Sleep disorders
- Asthma
- Lung cancer
- Pulmonary hypertension
- Flail chest, diseases of the mediastinum and the chest wall
- Snake bite, near drowning, poisoning, hanging, Tetanus poisoning, burn injury.
- Mechanics of breathing including compliance and resistance Neuromuscular and Restrictive lung disorders.
- poisoning, burn injury.

METHODS OF TEACHING

- 1.Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS

- Egan's Fundamentals of respiratory care- 12th revised edition (2020). (Craig L. Scanlon)
- Clinical application of mechanical ventilation- 4th edition: Chang D.W
- Respiratory care exam review -4th edition by GaryPersing
- Principles of Critical Care 3rd edition by FarokUdwadia
- Irwine&Rippe's -Intensive Care Medicine 8th edition
- Marinosthe little ICU Book 2nd edition by Paul L. Marino
- Text Book of Critical Care 6th edition by Vincent Shoemaker

BLUE PRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)
ı	Intro to respiratory system	31.25	25	1*	1	1+1
1	Differentiating cardiac and respiratory causes	31.23		1	-	1
II	Record keeping			-	1*	1*
	Lab data interpretation	3.75	3	-	-	1
III	Examination of CVS and RS	15	12	1*	1	1
IV	Infection control	18.75	15	-	-	1
1 4	Bronchial hygiene therapy	10.73		-	1	1+1*
	СРТ			-	1	1
٧	Pulmonary diseases and disorders -1	31.25	25	1	1	1
	Pulmonary diseases and disorders -2			-	-	1
		100	80			

Note: * represents question of choice

- The duration of Examination (University) is Three (3) hours.
- The total marks for the University Examination will be 100 marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of 4)
Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)
Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

RT -6 RESPIRATORY DISEASES MODEL QUESTION PAPER

TIME: 3 HOURS MAXIMUM MARKS: 80

A. Long answer questions

(2 X 10 = 20)

1.a) What are the indications, Contraindications, techniques and procedure for performing CPT (OR)

b) ARDS- Explain in detail

2.a)Bronchial Hygiene therapy

(OR)

b)COPD -Explain in detail

B. Short answer questions -Answer any 5 questions

(5 X 6 = 30)

- 1. Pneumothorax Signs and Symptoms
- 2. Cyanosis- Causes and management
- 3. Breathing Exercise and types
- 4. ILD Pathophysiology and Diagnosis
- 5. Asthma- Signs, Symptoms Diagnosis
- 6. Near drowning

C. Very Short answer questions -Answer any 10

 $(10 \times 3 = 30)$

- 1. Cough and its Types
- 2. Upper respiratory tract infections
- 3. Pleural effusion and its management
- 4. Toxic inhalation
- 5. Hemoptysis and its management
- 6. Vital signs
- 7. Chest wall deformities
- 8. Lung sounds
- 9. Dyspnea and causes
- 10. What are the clinical signs of Consolidation of lung?
- 11. Acute respiratory failure
- 12. What is the management of near drowning?



RT -7 CARDIOVASCULAR DISEASE

NAME OF THE SUBJECT PAPER : CARDIOVASCULAR DISEASE

DURATION OF THEORY CLASSES : 80 HOURS

DURATION OF TUTORIAL SESSION : 32 HOURS

UNIVERSITY THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

UNIVERSITY PRACTICAL EXAMINATION : NIL

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : II YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVE

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- **RT-PO 1:** Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E-library.
- **RT-PO 2:** To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- **RT-PO 5:** To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc.
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO 8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behaviour healthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies:

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- PUL CO-2: Learn &practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice Chest Physiotherapy

COURSE CONTENT

UNIT	TITLE	THEORY+ TUTORIAL (80+32)
ı	Shock Cardiogenic Heart Failure • Systolic Failure • Diastolic Failure • Right ventricular Failure • Acute left ventricular failure	20+ 8
II	Pulmonary Disorders	20+ 8
III	Myocardial Infarction Valvular Heart Disease • Mitral Stenosis • Mitral Regurgitation Endocarditis Myocarditis and Cardiomyopathy	20+8
IV	Congenital Heart Diseases TOF Atrial Septal Defect Ventricular Septal Defect Patent Ductus Arteriosus Arrhythmias Tachy Arrhythmias Brady Arrhythmias	20+8

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS:

- Fundamentals of respiratory care
- Egan's Craig L. ScanlonFor mechanical ventilation:
- David Chang Susan Pilbeum Mc -Taire Tobin
- Gary PersingPe.Oh -critical care medicine FarokhUdwadia -intensive care
- IrwineRippe -intensive care principles and procedures Paul Marino -the ICU
- Text Book of Critical Care, Shoemaker, Ayres, Greensick, Holbrook

BLUEPRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)		
	Shock	11.25	9	-	1*	1		
'	Heart Failure	11.23		1*	-	1+1		
II	Pulmonary Disorders	23.75	19	1	1	1		
	Myocardial Infarction		40	1	1	1		
	Valvular Heart Disease	50		-	1	1+1		
III	Endocarditis			-	-	1		
	Myocarditis and Cardiomyopathy			-	1	1*		
IV	Congenital Heart Diseases	15	12	1*	-	1		
	Arrhythmias	15	12	-	1	1+1*		
		100	80					
	Note: * represents question of choice							

• The duration of Examination (University) is Three (3) hours.

• The total marks for the University Examination will be 100 marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of 4)
Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)
Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

RT 7 Cardiovascular Disease MODEL QUESTION PAPER

TIME: 3 HOURS MAXIMUM MARKS: 80

A. Long answer questions

(2 X 10 = 20)

1.a) Explain heart failure? What are the signs symptoms, types, causes, diagnosis and management of heart failure?

(OR)

- b) Explain in detail about Pulmonary Thromboembolism?
- 2. a) What is called Atherosclerosis? What are the signs, symptoms, diagnosis, and treatment for CAD?

. (OR)

b) Congenital heart diseases - Cyanotic and acyanotic Heart diseases with its types, signs and symptoms? What is the diagnosis of CHD?

B. Short answer questions -Answer any 5 questions

 $(5 \times 6 = 30)$

- 1. Explain Cardiogenic shock?
- 2. What is called pulmonary arterial hypertension? Causes and treatment?
- 3. Explain coronary artery diseases? What are its signs and symptoms?
- 4. Explain Rheumatic heart diseases? Causes symptoms management of RHD? Describe its ECHO features.
- 5. Explain dilated cardiomyopathy? Diagnosis of DCMP? Explain its features.
- 6. ECG features of Ventricular Arrhythmias?

C. Very Short answer questions -Answer any 10

 $(10 \times 3 = 30)$

- 1. Types of heart failure.
- 2. Signs and symptoms of heart failure
- 3. Features of RHD in echo
- 4. M mode in Mitral Regurgitation
- 5. Types of cardiac arrhythmias
- 6. Types of Tachycardia
- 7. Causes of CAD
- 8. What is called as Infective endocarditis?
- 9. Cardiac chambers and cardiac values.
- 10. What is called as Myocarditis
- 11. Features of TOF?
- 12. What is called as Infective endocarditis?

DIAGNOSTIC TECHNIQUES IN CARDIO RESPIRATORY DISEASE

RT 8 DIAGNOSTIC TECHNIQUES IN CARDIO RESPIRATORY DISEASE

NAME OF THE SUBJECT PAPER : DIAGNOSTIC TECHNIQUES IN CARDIO

RESPIRATORY DISEASE

DURATION OF THEORY CLASSES : 64 HOURS

DURATION OF PRACTICAL SESSION : 64 HOURS

UNIVERSITY THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

UNIVERSITY PRACTICAL EXAMINATION : YES

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : II YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- **RT-PO 1:** Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E- library.
- **RT-PO 2:** To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- **RT-PO 5:** To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO 8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behavior healthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies:

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- **PUL CO-2:** Learn &practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice Electrocardiography.

COURSE CONTENT

UNIT	TITLE	THEORY+ PRACTICAL 64 HOURS
I	 Introduction to PFT lab: Spirometry & history of spirometry, Instrumentation, calibration and quality control, infection control, dead space, terms and symbols, volume at ATPS and BTPS. SPIROMETRY -2 Bedside assessment of pulmonary function: Spirometry, V-T studies, V-F studies, P-V studies Pulmonary function studies: Spirogram, normal volumes and capacities, lung volume measurement, flow rate measurement, flow volume measurement, closing volume measurement, exercise testing, bronchodilator reversibility testing. 	16
II	Interpretations: PEFR* Diffusion studies: Instrumentation and interpretation* Advanced PFT: Lung volumes measurement Interpretation of PFT data* Electrical conduction system of the heart The normal ECG & standardization of conventional lead positions of 12 lead ECG* Cardiac arrhythmias: Sinus arrhythmia, sinus bradycardia, sinus Tachycardia, atrial flutter and atrial fibrillation. Disorders and techniques Cardiac arrhythmias: Premature atrial contractions, junctional rhythms, ventricular arrhythmias, MI, ventricular fibrillation Factors affecting cardiac output- Preload, after load, myocardial contractility, SVR Central venous catheterization: Routes, techniques and uses. Interpretation of data obtained from central venous catheter Pulmonary artery catheterization: Techniques and interpretation of data obtained	16
III	TECHNIQUES Arterial line insertion & ABP monitoring: Anatomical locations for insertion, Sampling and procedure of insertion. PROCEDURES Imaging studies: Values and limitations of chest X-ray Conventional and special radiological views, Chest X-Ray Interpretation. Review of clinical findings and history. Preparation of viewing film. Normal anatomy on chest x-ray. Technical evaluation of chest x-ray. *	16

	Diseases: Introduction to Pulmonary Diseases and Chest Radiographs Atelectasis, Pneumothorax, Pneumonia, Pulmonary tuberculosis, Occupational lung diseases, Pulmonary edema, COPD, Restrictive lung diseases etc.	
IV	 Diagnostics: Advanced Imaging: Cardio-thoracic CT AND MRI Ultrasound Imaging of the lungs: Instrumentation Blood gas analysis: Interpretation of ABG reports- Status of oxygenation, ventilation, and acid base status. Interpretation of venous blood samples Pulse Oximetry - Principles and Theory Capnography - Principles and Theory Echocardiography - Principles and Theory* TMT - Principles and Theory* Polysomnography - Basics of Instrumentation* Polysomnography - Hooking up 	16

PRACTICAL EXERCISE: 64 hours

- 1. PFT Procedure
- 2. PFT Interpretation
- 3. ABG Interpretation
- 4. X-ray Interpretation
- 5. ECG Leads Placement
- 6. ECG Interpretation
- 7. Polysomnography Connections and recording

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS

- Egan's Fundamentals of respiratory care- 12th revised edition (2020).(Craig L. Scanlon)
- Clinical application of mechanical ventilation- 4th edition by Chang D.W
- Respiratory care exam review -4th edition by GaryPersing
- Principles of Critical Care 3rd edition by FarokUdwadia
- Irwine&Rippe's -Intensive Care Medicine 8th edition
- Marinosthe little ICU Book 2nd edition by Paul L. Marino
- Text Book of Critical Care 6th edition by Vincent Shoemaker

BLUEPRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)
	Spirometry 1	20	16	-		1
'	Spirometry 2	20	10	1	-	1+1*
II	Interpretations	22.5	18	1*	1	1
	Disorders and techniques	22.3	10	-	1	1
	Techniques		27	-	1*	1+1
III	Procedures	33.75			1	1+1
	Disease			1*	1	1
IV	Diagnostics	23.75	19	1	1	1+1*
IV		100	80			

Note: * represents question of choice

- The duration of Examination (University) is Three (3) hours.
- The total marks for the University Examination will be 100 marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of 4)

Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)

Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

RT-8 Diagnostic Techniques in cardio respiratory disease MODEL QUESTION PAPER

TIME: 3 HOURS MAXIMUM MARKS: 80

A. Long answer questions

(2 X 10 = 20)

1. a) Spirogram - Explain in detail about normal volume and capacity, flow volume and its measurement

(OR)

b) Explain in detail about Cardiac Arrhythmias

2. a) ABG - Explain in detail

(OR)

b) Pulmonary Tuberculosis - Explain in detail about Pathophysiology, Signs, Symptoms, diagnosis and treatment

B. Short answer questions -Answer any 5 questions

(5 X 6 = 30)

- 1. Leads and Position of ECG
- 2. Explain in brief about Pulmonary Artery Catheterization
- 3.. Explain in brief about Restrictive lung Disease
- 4.. Discuss in brief about the anatomy of thorax in Chest X-ray
- 5. Explain in brief about Pneumothorax
- 6. Discuss ABP monitoring in brief

C. Very Short answer questions -Answer any 10

 $(10 \times 3 = 30)$

- 1. What is an Atrialflutter?
- 2. PEFR
- 3. Write the Management of VF
- 4. Write in short about factors affecting Cardiac output
- 5. Management of Pulmonary Tuberculosis
- 6. Diagnosis of COPD
- 7. Preparation of viewing X-ray films
- 8. Discuss in short about ABG technique
- 9. Define Pulse oximetry
- 10. Write in short about TMT Techniques
- 11 Mention any three Findings of Tuberculosis in MRI
- 12. Polysomnography Techniques

II YEAR ELECTIVE COURSES

II YEAR ELECTIVE COURSE CONTENT ABILITY ENHANCEMENT COMPULSORY COURSE (AECC) ENVIRONMENTAL STUDIES

NAME OF THE SUBJECT PAPER : ENVIRONMENTAL STUDIES

DURATION OF THEORY CLASSES : 16 hrs

DURATION OF PRACTICAL SESSIONS : 32 hrs

EXAMINATION : 100 marks (80 U + 20 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ hrs
YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

SYLLABUS

UNIT-I (Renewable and Non — renewable resources)

The multidisciplinary nature of environmental studies - Definition, scope and importance - Need for public awareness.

- 1 Forest resources: Use and over-exploitation, deforestation, case studies. Timber extraction, mining, dams and their effects on forests and tribal people.
- 2 Water resources: Use and over-utilization of surface and ground water, floods, drought, conflicts over water, dams-benefits and problems.
- 3 Mineral resources: Use and exploitation, environmental effects of extracting and using mineral resources, case studies.
- 4 Food resources: World food problems, changes caused by agriculture andovergrazing, effects of modern agriculture, fertilizer-pesticide problems, water logging, salinity, case studies.
- 5 Energy resources: Growing energy needs, renewable and non-renewableenergy resources, use of alternate energy sources, case studies.
- 6 Land resources: Land as a resource, land degradation, man induced Landslides, soil erosion and desertification. Role of an individual in conservation of natural resources. Equitable use of resources for sustainable lifestyles.

UNIT-II (Ecosystems)

Concept of an ecosystem - Structure and function of an ecosystem Producers, consumers and decomposers — Energy flow in the ecosystem-Ecological succession- Food chains, food webs and ecological pyramids —Introduction, types, characteristic features, structure and function of the following ecosystem:

- Forest ecosystem
- Grassland ecosystem
- Desert ecosystem
- Aquatic ecosystems (Ponds, streams, lakes, rivers, ocean estuaries)

UNIT-III (Biodiversity and its conservation)

Introduction - Definition: genetics, species and ecosystem diversity

- Biogeographically classification of India
- Value of Biodiversity: Consumptive use, productive use, social, ethicalaesthetic and option values

- Biodiversity at global, national and local levels
- India as a mega- diversity nation
- Hot-spots of biodiversity-Threats to biodiversity: habitat loss, poachingof wildlife, man wildlife conflicts
- Endangered and endemic species of India
- Conservation of biodiversity: In-situ and Ex-situ conservation ofbiodiversity

UNIT-IV (Environmental Pollution)

Definition- causes, effects and control measures of:

- Air pollution
- Water pollution
- Soil pollution
- Marine pollution
- Noise pollution
- Thermal pollution
- Nuclear pollution
- Solid waste Management: causes, effects and control measures of urbanand industrial wastes — role of an individual in prevention of pollution —Pollution case studies — Disaster management: floods, earthquake, cyclone and landslides.

UNIT-V

Social Issues and the Environment: From unsustainable to sustainable development — Urban problems and related to energy — Water conservation, rain water harvesting, watershed management —Resettlement and rehabilitation of people; its problems and concerns. Case studies - Environmental ethics: issues and possible solutions climate change, global warming, acid rain, ozone layer depletion, nuclear accidents and holocaust.

- Wasteland reclamation Consumerism and waste products Environmental Protection Act — Air (Prevention and Control of Pollution) Act — Water (Prevention and control of Pollution) Act — Wildlife Protection Act — Forest Conservation Act - Issues involved in enforcement environmental legislation — Public awareness
- Human Population and the Environment: Population growth, variation among nations — Population explosion — Family welfare Programmes —Environment and human health- Human Rights - Value Education- HIV/ AIDS - Women and Child Welfare- Role of Information Technology in Environment and Human Health — Case Studies.

FIELD WORK

- 1. Visit to local area to document environmental assets- river/ forest/ grassland / hill / mountain
- 2. Visit to a local polluted site Urban / Rural / Industrial / Agricultural
- 3. Study of common plants, insects, birds
- 4. Study of simple ecosystems- pond, river, hill slopes, etc.

TEXT BOOKS RECOMMENDED

- 1. Agarwal, K.C. Environmental Science, Nidi Publishers.
- 2. BharuchaErach, The Biodiversity of India, Mapin Publication.
- 3. Brunner RC, Hazardous waste incineration, McGraw Hill Publishers.
- 4. Iaclhav H, Environmental Protection and Laws, Himalaya Publication.
- 5. Odum EP, fundamentals of Ecology, WB Sannders Publication.

TEACHING LEARNING ACTIVITIES

The course content in Environmental Studies will be covered by:

- 1. Interactive Lectures
- 2. Group Discussions
- 3. Field Visits

SKILL- BASED ELECTIVE COURSES - II YEAR GOOD CLINICAL LABORATORY PRACTICE

NAME OF THE SUBJECT PAPER : Good Clinical Laboratory practice

DURATION OF THEORY CLASSES : 16 Hrs

DURATION OF PRACTICAL SESSIONS : 32 Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF EXAMINATION : 1 ½ Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

THEORY & PRACTICALS (DURATION 16 + 32 Hours)

Learning Objective

- To understand the relevance, importance and basic concepts of good laboratory practices
- To apply the knowledge to become familiar with the basic laboratory skills

UNIT I: INTRODUCTION

Introduction to Bioethics and Biosafety. Biosafety Guidelines and Regulations. Legal and Socio-economic Impacts of Biotechnology. Use of Genetically Modified Organisms and their Release in the Environment. Hazardous Materials used in Biotechnology their Handling and Disposal.

UNIT II: GOOD LABORATORY PRACTICE PRINCIPLE

Test Facility Organization and Personnel: Management responsibility, Study director_s responsibility, safety measures and personal responsibility. Quality assurance program. Facilities: Test System Facilities, Facilities for Handling test and Reference Substances. Archive Facilities. Waste Disposal, Animal Care Facilities, Animal Supply Facilities.

UNIT III: STANDARDED OPERATING PROCEDURES

Definition, Initiation of SOP, Preparation of SOP, Administration, Distribution and Implementation. Maintenance of laboratory records. Formatting SOP, Reagent/materials certification, Certification of analysts, Certification of laboratory facilities. Documentation and maintenance of record.

UNIT IV: DATE REPORTING AND STORAGE

Performance of study, Study plan, Conduct of study, Reporting of results. Archival storage of records and reports.

Learning Outcome

To understand the implications of good laboratory practices

SKILL- BASED ELECTIVE COURSES - II YEAR COMPUTER APPLICATIONS

NAME OF THE SUBJECT PAPER : COMPUTER APPLICATIONS

DURATION OF THEORY CLASSES : 16 Hrs

DURATION OF PRACTICAL SESSIONS : 32 Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF EXAMINATION : 1 ½ Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

THEORY & PRACTICALS (DURATION 16 + 32 Hours)

UNIT - I - Introduction to Computers

- Concepts of Computers
- Hardware and software trends and technology
- Classification of computers
- Application of computers in Laboratories

UNIT - II - Operating System

- Introduction
- Types of operating systems
- Windows

UNIT - III -Multimedia

- Types and uses
- Computer aided teaching and testing

UNIT — IV -Internet

- Introduction to Internet
- Use of Internet and e-mail
- Statistical packages

LIST OF PRACTICAL EXERCISES

- 1. Computer operating systems like MS~DOS and WINDOWS
- 2. Study of software packages like Chem Draw, Tinker and Microsoft package. Unit Typing text in MS word- manipulating text- formatting the text using different font sizes, bold, italics, Bullets and numbering pictures, file insertion aligning the text and justify choosing paper size adjusting margins- header and footer, inserting page numbers in a document printing a file with options using spell check and grammar find and replace mail merge inserting tables in a document.

Creating table in MS - Excel - cell editing - using formulas and functions - manipulating data with excel - using sort function to sort numbers and alphabets - drawing graphs and charts using data in excel - auto formatting - inserting data from other worksheets Preparing new slides using MS- POWER POINT - inserting slides - slide transition and animation - using templates - different text and font sizes - slides with sounds - inserting clip arts, pictures, tables and graphs - presentation using wizards.

Internet- using search engine - Google search - Exploring the text Explorer and Navigator - uploading and downloading of files and images E mail ID creation - sending messages - attaching files in E- mail

TEACHING LEARNING ACTIVITIES

The course content in Computer Applications will be covered by:

- 1. Interactive Lectures
- 2. Lab

SKILL- BASED ELECTIVE COURSES - II YEAR Library and E-resource

NAME OF THE SUBJECT PAPER : Library and E-resource

DURATION OF THEORY CLASSES : 16 Hrs

DURATION OF PRACTICAL SESSIONS : 32 Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF EXAMINATION : 1 ½ Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

THEORY & PRACTICALS (DURATION 16 + 32 HOURS)

Course Objectives

- To enable the students to understand at different levels of information systems in the society
- and their functions.
- To enable the students apply their knowledge in various library practice.
- To enable the students to understand the basic concepts of the Health Sciences.

UNIT: 1

Evolution, growth and development of LIS in India-current trends.

Type of libraries: Academic, Public and special Libraries (Health Science Libraries).

UNIT: 2

Library concepts & Degislation: Five laws of Library science, Professional ethics of librarian, Delivery of books and newspaper act/IntellectualProperty/Plagiarism.

UNIT: 3

Library Association and International Bodies: Library Association -ILA, IASCIC, ALA, IFLA and UNESCO, SALIS, MLAI (Medical Library Association of India).

UNIT: 4

Library Rules & Dipramping Regulation, Stock Verification, Annual Reports, Budgets, Library buildings, furniture, equipment's.

SKILL- BASED ELECTIVE COURSES - II YEAR PUBLIC HEALTH AND HYGIENE

NAME OF THE SUBJECT PAPER : Public Health and Hygiene

DURATION OF THEORY CLASSES : 16 Hrs

DURATION OF PRACTICAL SESSIONS : 32 Hrs

PRACTICAL EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY THEORY EXAMINATION

DURATION OF EXAMINATION : 1 ½ Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

THEORY & PRACTICALS (DURATION 16 + 32 Hours)

Learning objectives

- To understand the concepts, significance and relevance of public health and hygiene
- To understand the health hazards as associated with public health andhygiene

I Introduction

Definition and Concept of Public Health, historical aspects, public health system in India and in the rest of world

II Aspects of health

Indicators of health, Determinants of Health, (Social, Economic, Cultural, Environmental, Education, Genetics, Food and Nutrition). Burden and prevention of disease. Environmental health- sanitation, air, water pollution, waste management. Mental health.

III Epidemology

Introduction, principles and concepts, study design, analysis methods, presentation and interpretation of epidemiological data

IV Hygiene concepts

Definition, importance, personal hygiene, medical hygiene, food hygiene, industrial hygiene.

Learning outcomes

• To understand public health and hygiene issues, their relevance and significance as can be practiced in real-life situations.

Text Books

- 1. Introduction to Public Health, Raymond L. Goldsteen, Karen Goldsteen, David G. Graham, 2011, Springer publishing company
- 2. Introduction To Community Health Nursing, KasturiSundarRao, 4th edition, Bi Publications Pvt Ltd
- 3. Concepts of Epidemiology, Raj S Bhopal, 2002, Oxford University press

Reference Books

- 1. A Treatise On Hygiene And Public Health, BirendraNathGhosh, 9th edition, Calcutta Scientific Publishing Co
- 2. An Introduction to Public Health, Caryl Thomas, 1949, John Wright and SonsLtd.,

GENERIC ELECTIVE COURSES - II YEAR BASIC PSYCHOLOGY

NAME OF THE SUBJECT PAPER : Basic Psychology

DURATION OF THEORY CLASSES : 64 Hrs

EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ Hrs

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

THEORY (64 Hours)

LEARNING OBJECTIVES

After complete ting the course the student can able to

- To identify the emerging specialties
- To understand the behavior and mental processes
- How the theories and principles of psychology may be applied to individual, societal and global issue
- Explain the application of psychology in Allied Health Sciences

Unit I: Introduction

Introduction to applied Psychology, Scientific methods in Psychology, Application of Psychology: Psychology in Industry, community, family, education, health, self development, Human relations. Scope of psychology with special relevance to Allied Health Sciences.

Unit II: various cognitive processes and their application

Factors affecting learning, Importance of studying Psychology of learning in relation to Allied Health Sciences

Memory and forgetting, Kinds of remembering, the nature of forgetting, Improving memory, relevance to Allied Health Sciences

Intelligence, Normal distribution of intelligence levels, Intelligence Testing, Intelligence tests, Uses and abuses of intelligence tests, relevance of intelligence and aptitude for Allied Health Sciences

Unit-III: Life style, Health, Stress and Coping Behavior

Cultural evolution, Life style choices and consequences, Healthy and Unhealthy life styles. Nutrition, Physical fitness, Smoking and Drinking. Stress and Health, The biological basis of stress, Stress and Physical functioning, Coping with stress, Adjustment a lifelong process. Cognitive 27 ppraisal and Stress, Stressful life styles,

Coping with everyday stress, Sources of stress, Coping styles and Strategies, Stress inoculation training.

Unit IV: Psychology of Vulnerable Individuals

Psychology of the challenged, types of disability, effects of disability, psychology of women, women and health, dealing with alcoholics and their families, post-traumatic stress disorder, psychology of the sick and ill, how patients react to chronic illness, effects of illness and hospitalization

REFERENCE BOOKS

- 1. Clifford T. Morgan, Richard a. King, John R. Weis and John Schopler, —Introduction to Psychology 7th Edition. Tata McGraw Hill Book Co. New Delhi, 1993.
- 2. Ernest R. Hillgard, Richard C. Atkinson, Rita L. Atkinson, —Introduction to Psychology 6th Edition, Oxford IBH publishing Co. Pvt. Ltd., New Delhi, 1975.
- 3. Baron.A. Robert, Psychology, Pearson Education Vth Ed., 2002
- 4. Psychology -the science of behavior -fifth edition1982-Neil Carson-William Bulkist-Allyn and Bacon.

GENERIC ELECTIVE COURSES - II YEAR SOCIOLOGY

NAME OF THE SUBJECT PAPER : SOCIOLOGY

DURATION OF THEORY CLASSES : 64 Hrs

EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ Hrs
YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

THEORY (64 Hours)

Unit 1: Sociology: Discipline and Perspective

- Thinking Sociologically
- Emergence of Sociology, Sociology as a science; Sociology and Common Sense
- Some Basic Concepts: Association; Aggregates: Community, Categories, Groups and its Forms; Status and Role; Norms and Values.
- Individual and Society; Socialization: Concept and Agencies; Culture -meaning and characteristics; Types of culture popular, elitist, folk, and consumer cultures; Pluralism and Multiculturalism, Culture and Personality.

Unit 2: Sociology and Other Social Sciences

- Sociology and Social Anthropology
- Sociology & Psychology
- Sociology & History

Unit 3: Human Society

- Social Institutions and Social Processes
- Social control: meaning, agencies and mechanisms
- Conformity and Deviance.
- Social Change, definition, factors, Social Mobility Readings
- 1. Anthony Giddens: Sociology
- 2. G. Rocher: A General Introduction to Sociology
- 3. George Ritzer. Encyclopaedia of sociology
- 4. Harry M. Johnson Sociology

GENERIC ELECTIVE COURSES - II YEAR ENTREPRENEURSHIP ESSENTIALS

NAME OF THE SUBJECT PAPER : Entrepreneurship essentials

DURATION OF THEORY CLASSES : 64 Hrs

EXAMINATION : 50 Marks (40 U + 10 IA)

NO UNIVERSITY PRACTICAL EXAMINATION

DURATION OF THEORY EXAMINATION : 1 ½ Hrs.

YEAR IN WHICH THE SUBJECT PAPER IS TAUGHT : II YEAR

THEORY (64 Hours)

LEARNING OBJECTIVES

- To understand the fit between you and your entrepreneurial ambitions
- To find a problem worth solving
- To identify your customers
- To develop a solution for your customers' problems and problem solution
- To build and demonstrate an MVP
- To structure a business model around the problem, customer, and solution and present your Business Model Canvas

UNIT - I ORIENTATION

What is entrepreneurship - myths about entrepreneurship - impact of an entrepreneur and social entrepreneurship - wealth building and making an impact

IDEA/PROBLEM

What is a business opportunity and how to identify it - Methods for finding and understanding problems - (Observation, Questioning, DT, Jobs to be done (JTBD) - Introduction to Design Thinking - Process and Examples - Generate ideas that are potential solutions to the problem identified.

UNIT - II

CUSTOMER

The difference between a consumer and a customer (decision maker); Market Types, Segmentation and Targeting, Defining the personas; Understanding Early Adopters and Customer Adoption Patterns - Identify the innovators and early adopters for start-up - Basics of Lean Approach and Canvas; Types of Business Models (b2b; b2c)

UNIT - III

BUSINESS MODEL AND VALIDATION

Introduction to Risks; Identify and document your assumptions (Hypotheses); Identify the riskiest parts of Plan - Develop the Solution Demo - Sizing the Opportunity - Building an MVP (Minimum Viable Product)

UNIT - IV

MONEY AND TEAM

Revenue Streams: Basics of how companies make money - Understand income, costs, gross and net margins - Identify primary and secondary revenue streams - Pricing and Costs - Financing Your New Venture - Team Building: Role of a good team in a venture's success; What to look for in a team; How do you ensure there is a good fit? Defining clear roles and responsibilities

UNIT - V

MARKETING AND SALES

Positioning - channels and strategy - sales planning - Importance of project management to launch and track progress - Understanding time management, workflow, and delegation of tasks-Business regulation: Basics of business regulations of starting and operating a business - Importance of being compliant and keeping proper documentation

LEARNING OUTCOMES

- This course will give the students the foundational experience of the entire cycle of entrepreneurship, through a combination of theory and practice.
- Students will learn what it takes to be an entrepreneur, recognizing business opportunities and the basics to create launch and manage new businesses.
- The participating students will create a _campus venture' or a "real" venture of their own
 to practice the concepts taught during the program. The course is built in a modular
 fashion such that colleges can tailor their offerings to cover either the entire offering
 (idea to an MVP) or limit to building a business model.

III YEAR

B.Sc - RESPIRATORY THERAPY FACULTY OF ALLIED HEALTH SCIENCES SRI BALAJI VIDYAPEETH

(Deemed to be University)
Accredited by NAAC with 'A' Grade

III YEAR

CORE SUBJECTS

- 1. Respiratory Therapy Techniques -I
- 2. Respiratory Therapy Techniques -II
- 3. Life Support System
- 4. Cardio Pulmonary rehabilitation

Discipline Elective Course (DEC) - Choose any TWO

- 1. Basic Radiation Biology
- 2. Palliative care
- 3. Equipment in respiratory care
- 4.BLS & ACLS
- 5. Air borne infection control

AHS COURSE CONTENT THIRD YEAR B.SC. RESPIRATORY THERAPY (RT)

Faculty code	Category	Course title	Hours Credits			ts						
AHS	Core theory RT	Subjects	Theory	Practical	Tutorials	Clinical training	Total hours	Lecture	Practical	Tutorials	Clinical training	Total credits
AHS	RT -9	Respiratory Therapy Techniques -I	80		32			5		1		6
AHS	RT -10	Respiratory Therapy Techniques -II	64	64				4	2			6
AHS	RT -11	Life support system	64	64				4	2			6
AHS	RT -12	Cardio- pulmonary rehabilitation	80		32			5		1		6
AHS	RT-CT 2	Clinical Training RT 9 to 12				256					8	8
AHS	DE 1-8	Student's choice	64					4				4
AHS	DE 1-8	Student's choice	64					4				4
			416	128	64	256	864	26	4	2	8	40

SCHEME OF EXAMINATION

		The	eory		Prac	tical	Grand	Min pass marks (450)	
Papers	Subject	UE	IA	UE	IA	UIA*	total (900)		
RT -9	Respiratory Therapy Techniques -I	80	20				100	50	
RT -10	Respiratory Therapy Techniques -II	80	20	80	20		200	100	
RT -11	Life Support System	80	20	80	20		200	100	
RT -12	Cardio -Pulmonary rehabilitation	80	20				100	50	
RT-CT 2	Clinical Training RT 9 to 12					100	100	50	
DEC	Discipline elective	80	20				100	50	
DEC	Discipline elective	80	20				100	50	

RESPIRATORY THERAPY TECHNIQUES -I

RT -9 RESPIRATORY THERAPY TECHNIQUES -I

NAME OF THE SUBJECT PAPER : RESPIRATORY THERAPY TECHNIQUES -I

DURATION OF THEORY CLASSES : 80 HOURS

DURATION OF TUTORIAL SESSION : 32 HOURS

UNIVERSITY THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

UNIVERSITY PRACTICAL EXAMINATION : NIL

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : III YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- **RT-PO 1:** Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E-library.
- **RT-PO 2:** To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- RT-PO 5: To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO 8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behaviourhealthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- PUL CO-2: Learn & practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice Electrocardiography.

COURSE CONTENT

UNIT	TITLE	THEORY+ TUTORIAL HOURS 80+32
I	Monitoring in mechanical ventilation: Concepts of monitoring, vital Signs General monitoring	11+13
II	 Modes of ventilation conventional modes, dual control modes, APRV, NAVA, Bi Level Positive end expiratory pressure (PEEP) therapy. Ventilator Graphics: volume ventilation with constant flow, pressure ventilation, PSV, P-V loops, F-V loops. Analyzing the ventilation strategy using waveforms Managing ventilator patient: Strategies to improve ventilation, improve oxygenation, acid base electrolyte balance, fluid electrolyte nutrition balance and management, trouble shooting of ventilator alarms and events Lung recruitment strategies: Disease specific applications of mechanical ventilation Independent lung ventilation Prone ventilation Percutaneous dilatational tracheostomy Care of the accessories: Care of ventilator circuit, Care of artificial airway, humidification, strategies for preventing infection Pharmacotherapy for mechanical ventilation: Drugs for improving ventilation, steroids, NMBs, sedation, anxiolitics, narcotics Sedation and paralysis in ventilation Aerosol therapy for a mechanically ventilated patient 	12+13
III	Weaning of mechanical ventilation: Techniques, evidence based practices in weaning, recommendations, factors for weaning failure, pharmacotherapy during weaning, SBT trials, RSBI, tracheostomy weaning, long term, communication. Withholding and withdrawing ventilator support. Trouble shooting the ventilator	12+13

	 Alarms and limits Assessment of outcome of mechanical ventilation Transport of a mechanically ventilated(in hospital & intra hospital) Mechanical ventilation in pediatric patients 	
	 Acid base balance, Clinical approach to acid base problems excretion, acid base disturbances 	
IV	Equipments Modes of non invasive support Fine tuning of the patient on NIV & synchronization Quality control practices in NIV Pediatric NIV- CPAP, Bubble CPAP etc Disease specific application of non invasive ventilation: COPD, Asthma, OHA, acute respiratory failure, as a weaning tool, CHF, ILD, NMD and quadriplegia. Care of the patient on NIV- humidification, preventing pressure sores, airway clearance, physiotherapy, weaning from NIV. Home ventilation- Invasive and non-invasive methods Assessment of the home care patient & patient selection criteria Monitoring and complications of NIV Ventilator associated pneumonia Ethical and medico legal aspects of assisted ventilation	12+12

METHODS OF TEACHING

- Lecture cum discussion
- Demonstration
- Lab visit
- Practical work record

METHODS OF EVALUATION

- Written Test
- Laboratory observation Book
- Assignments
- Oral Presentations

REFERENCE BOOKS

- Egan's Fundamentals of respiratory care- 12th revised edition (2020). (Craig L. Scanlon)
- Clinical application of mechanical ventilation- 4th edition: Chang D.W
- · Respiratory care exam review -4th edition by GaryPersing
- Principles of Critical Care 3rd edition by FarokUdwadia
- Irwine&Rippe's -Intensive Care Medicine 8th edition
- Marinosthe little ICU Book 2nd edition by Paul L. Marino
- Text Book of Critical Care 6th edition by Vincent Shoemaker

BLUEPRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)	
	a) monitoring of mechanical ventilation			1*	-	1*	
I	b)General monitoring			-	1*	1	
	c)Hemodynamic monitoring	18.75	15	-	1	1	
Ш	a) Modes of ventilation			1	-	1+1	
	b) Lung recruitment strategies	27.5	22	-	1	1	
III	a)Weaning of mechanical ventilation			1	1	1	
	b) Trouble shooting the ventilator	31.25	25	-	-	1+1	
	a)Equipment			-	1	1	
IV	b. Disease specific application	22.5	18	1*	1	1+1*	
		100	80				
Note: * represents question of choice							

- The duration of Examination (University) is Three (3) hours.
- The total marks for the University Examination will be 100 marks.

Long Answer Questions $: 2 \times 10 = 20 \text{ marks}$ (Choice 2 out of 4) Short Answer Questions $: 5 \times 6 = 30 \text{ marks}$ (Choice 5 out of 6) Very Short Answer Questions $: 10 \times 3 = 30 \text{ marks}$ (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

PAPER RT - 9 Respiratory Therapy Techniques-I <u>MODEL QUESTION PAPER</u>

TIME: 3 HOURS MAXIMUM MARKS: 80

A. Long answer questions

(2 X 10 = 20)

- 1. a) Explain in detail about chest inspection and auscultation (OR)
 - b) Explain in detail about Modes of Mechanical Ventilation
- 2. a) Explain in detail about weaning (OR)
 - b) Indications, monitoring and complications of NIV

B. Short answer questions -Answer any 5 questions

(5 X 6 = 30)

- 1. Explain in brief about biomedical engineering aspects in Mechanical ventilators
- 2.Swan Ganz Catheter Insertion and Indication
- 3. Discus in brief about the Aerosol Therapy for Mechanically Ventilated Patients
- 4. What is withdrawing and withholding of Ventilated support
- 5. What are modes of NIV
- 6.VAP Discuss in brief

C. Very Short answer questions -Answer any 10

 $(10 \times 3 = 30)$

- 1. General monitoring of CPAP
- 2. Fluid Electrolyte Analysis
- 3. How is PCWP measured for the diagnosis of heart failure
- 4. PV loop and FV loop
- 5. PEEP
- 6. Prone Ventilation
- 7. Tracheostomy weaning
- 8. Alarms and limits in Mechanical Ventilators
- 9. Quality Control in NIV
- 10. Intra Hospital transport of critically ill patients
- 11. Acute Respiratory Failure
- 12. Ethics and legal aspects of MV patients

RESPIRATORY THERAPY TECHNIQUES II

RT-10 RESPIRATORY THERAPY TECHNIQUES II

NAME OF THE SUBJECT PAPER : RESPIRATORY THERAPY TECHNIQUE II

DURATION OF THEORY CLASSES : 64 HOURS

DURATION OF TUTORIAL SESSION : 64 HOURS

THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

PRACTICAL EXAMINATION : YES

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : III YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- **RT-PO 1**: Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E- library.
- **RT-PO 2**: To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4**: To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- **RT-PO 5:** To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- RT-PO 10: To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behaviour healthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies:

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- PUL CO-2: Learn &practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice Mechanical Ventilation

COURSE CONTENT

UNIT	TITLE	THEORY+ PRACTICAL (64) HOURS
ı	Oxygen therapy: Principles and theory High flow oxygen therapy* Low flow oxygen therapy* Aerosol Therapy: Indication ;Procedure; Complications* Humidification: Different types of humidification* HME vs. heated humidifier*	20
II	 Procedures: Suctioning: methods; Indications; Contraindications; Procedure and Complications* Intercostal drainage - Insertion, complication* Endo tracheal tube intubation: Indications; Routes of intubation; Difficult intubation; Complications* 	20
III	 Advanced procedures Transport of Critically ill patients* Extra Corporeal Membrane Oxygen (ECMO) Therapy * Protective lung ventilation* Liquid ventilation* Advances in ventilation* Intensive care unit Physiotherapy in ICU* Bronchoscopy: Maintenance and assisting in suite and ICU* Management of RTA cases in ICU* 	24

PRACTICAL EXERCISE 64 HOURS

- 1. Oxygen Delivering devices spotters
- 2. Intubation equipment's
- 3. Chest Physiotherapy

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS

- 1. Egan's Fundamentals of respiratory care- 12th revised edition (2020). (Craig L. Scanlon)
- 2. Clinical application of mechanical ventilation- 4th edition: Chang D.W
- 3. Respiratory care exam review -4th edition by GaryPersing
- 4. Principles of Critical Care 3rd edition by FarokUdwadia
- 5. Irwine&Rippe's -Intensive Care Medicine 8th edition
- 6. Marinos The little ICU Book 2nd edition by Paul L. Marino
- 7. Text Book Of Critical Care 6th edition by Vincent Shoemaker

BLUEPRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)
	Oxygen therapy	30	24	1*	1+1*	3
•	Aerosol Therapy	30	21	-	1	1+1*
II	Procedures	23.75	19	1	1	1+1*
III	Advanced procedures	46.25	37	1*	1	1+2
	Intensive care unit	10.23	37	1	1	1+1
		100	80			

Note: * Represents question of choice

- The duration of Examination (University) is Three (3) hours.
- The total marks for the University Examination will be 100 marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of 4)

Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)

Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

Paper RT-10 RESPIRATORY THERAPY TECHNIQUES -II <u>MODEL QUESTION PAPER</u>

TIME: 3 HOURS MAXIMUM MARKS: 80

A. Long answer questions

(2 X 10 = 20)

1. a) Explain in detail about Indications, Contraindication, Routes and complications of Endo Tracheal Intubation

(OR)

- b) High Flow Oxygen Therapy
- 2. a) Explain in detail about ECMO

(OR)

b) Management of RTA in Critical Care Unit

B. Short answer questions -Answer any 5 questions

 $(5 \times 6 = 30)$

- 1. Discuss in brief about Low Flow Oxygen Therapy.
- 2. Principles and theory of Oxygen therapy
- 3. Classify different types of Humidification
- 4. Inter Costal Drainage Discuss in brief
- 5. What is protective lung ventilation?
- 6. Mention the types of bronchoscope and how do you assist it in ICU

C. Very Short answer questions -Answer any 10

 $(10 \times 3 = 30)$

- 1. Write any three Uses of nasal cannula and Reservoir bags
- 2. What are the Indications for HFNO
- 3. What is an Oxygen concentrator
- 4. What is Heated Humidifier
- 5. Indications for Aerosol therapy
- 6. Suctioning procedure
- 7. Difficult Intubation
- 8. What are the advances in Mechanical Ventilation
- 9. What is Liquid Ventilation
- 10. What are the Complications during transport of critically ill patient
- 11. Mention the Indication of CPT in ICU
- 12. Write in short about the maintenance of a Bronchoscope

LIFE SUPPORT SYSTEM

PAPER RT -11 LIFE SUPPORT SYSTEM

NAME OF THE SUBJECT PAPER : LIFE SUPPORT SYSTEM

DURATION OF THEORY CLASSES : 64 HOURS

DURATION OF TUTORIAL SESSION : 64 HOURS

UNIVERSITY THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

UNIVERSITY PRACTICAL EXAMINATION : NIL

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : III YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- **RT-PO 1:** Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E-library.
- **RT-PO 2:** To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- **RT-PO 5:** To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc.
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO 8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behaviour healthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies:

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- PUL CO-2: Learn &practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice BLS and ACLS.

COURSE CONTENT

UNIT	TITLE	THEORY+ PRACTICAL (64 HOURS
	Basic Life SupportRecognition of Cardiac arrest	
I	 Respiratory arrest AED Lay rescuer Resuscitation* 	16
II	Advanced Cardiac Life support Tachyarrhythmia Bradyarrythmia Pulse less arrest	16
III	 Critical Care: Difference between Synchronized Cardio version / Defibrillation* Advanced Trauma Life support Primary Survey: A, B, C, D, E Secondary Survey: Head-to-toe evaluation; Complete history and physical examination; Reassessment of all vital signs 	16
IV	Management of critically ill: Shock in ICU* Dialysis in ICU* Thermoregulation in ICU* Surfactant replacement therapy	16

PRACTICALS: 64 hours

- 1. Crash cart spotters
- 2. Emergency drugs for cardiac arrest
- 3. CPR
- 4. Defibrillator- parts and function

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS

- Egan's Fundamentals of respiratory care- 12th revised edition (2020). (Craig L. Scanlon)
- Clinical application of mechanical ventilation- 4th edition: Chang D.W
- · Respiratory care exam review -4th edition by GaryPersing

- Principles of Critical Care 3rd edition by FarokUdwadia
- Irwine&Rippe's -Intensive Care Medicine 8th edition
- Marinos The little ICU Book 2nd edition by Paul L. Marino
- Text Book Of Critical Care 6th edition by Vincent Shoemaker

BLUEPRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)
I	Basic Life Support	31.25	25	1	1	3
II	Advanced Cardiac Life support	11.25	9	-	1+1*	1+1*
	Critical Care			1*	1	3
III	Advanced Trauma Life support	30	24	1*	1	1+1*
IV	Management of critically ill	27.5	22	1	1	2
		100	80			

Note: * represents question of choice

• The duration of Examination (University) is Three (3) hours.

• The total marks for the University Examination will be 100 marks.

Long Answer Questions : 2 X 10 = 20 marks (Choice 2 out of 4)
Short Answer Questions : 5 X 6 = 30 marks (Choice 5 out of 6)
Very Short Answer Questions : 10 X3 = 30 marks (Choice 10 out of 12)

TOTAL = Theory 80 + IA 20 = 100 mark

RT-11 Life support system MODEL QUESTION PAPER

TIME: 3 HOURS **MAXIMUM MARKS: 80** A. Long answer questions (2 X 10 = 20)1. a) Explain in detail about Automated External Defibrillator (OR) b) What is Synchronized Cardio Version? Explain in detail 2. a) Advanced Trauma Life Support (OR) b) Diagnosis and management of Shock in ICU (5 X 6 = 30)B. Short answer questions -Answer any 5 questions 1. Explain in brief about Cardiac Arrest 2. What is bradyarrhythmia and how do you treat 3. What is Pulseless Electrical Activity and how do you diagnose it 4.. What are the types of Defibrillator? 5. Assessment of vital signs 6. .Surfactant Therapy C. Very Short answer questions -Answer any 10 $(10 \times 3 = 30)$ 1. . Mention the 4 elements of BLS 2. What are the 7 steps of CPR 3. What does ABCD stand for in ATLS 4. Explain in short about Lay Rescuer 5. What causes Tachyarrhythmia 6. What is the initial treatment for PEA 7. Mention the 5 main components of secondary patient assessment 8. What are the 6 life threatening conditions in critical care? 9. Head to toe evaluation in ATLS 10. What is thermoregulation in ICU

11. Mention the Defibrillator uses in various heart conditions

12. What is continuous Dialysis in ICU

CARDIO- PULMONARY REHABILITATION

RT -12 CARDIO- PULMONARY REHABILITATION

NAME OF THE SUBJECT PAPER : CARDIO PULMONARY REHABILITATION

DURATION OF THEORY CLASSES : 80 HOURS

DURATION OF TUTORIAL SESSION : 32 HOURS

UNIVERSITY THEORY EXAMINATION : 100 MARKS (80 U+ 20 IA)

DURATION OF THEORY EXAMINATION : 3 HOURS

UNIVERSITY PRACTICAL EXAMINATION : NIL

YEAR IN WHICH SUBJECT PAPER IS TAUGHT : III YEAR

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital.
- Will demonstrate appropriate personal behaviors consistent with professional and expectations.

PROGRAM OUTCOMES

- **RT-PO 1:** Performs the duty as a Respiratory Therapy mastering computer application with good written and communication ability and also skilled at computer applications including E-library.
- RT-PO 2: To gain knowledge about laboratory safety precautions, biomedical waste management adhering to the environmental needs of the society, and preventing the spread of infectious diseases.
- RT-PO 3: Understanding the structure and functions of Lung anatomy
- **RT-PO 4:** To learn the general procedures and interpretation of Respiratory therapy which includes PFT, Mechanical Ventilation, NIV and ABG.
- **RT-PO 5:** To make students assist during administration and monitoring of cardiopulmonary resuscitation and Bronchoscopy
- **RT-PO 6:** To make students understand the pharmacological principles pertaining to the drugs used in clinical practice such as aerosol therapy etc.
- **RT-PO 7:** To make students participate and coordinate emergency resuscitative measures in acute surgical situations including trauma and Chest Physiotherapy.
- **RT-PO 8:** To make students in assisting super specialty surgeries like cardiothoracic vascular procedures like ICD and tracheostomy.
- **RT-PO 9:** To make students in providing primary care services including performing examinations, differential diagnosis and routine monitoring in various outpatient departments.
- **RT-PO 10:** To identify various life style disorders and with due counselling & guidance advising the patients with proper diet, hygiene and Yoga to keep the body, mind, soul and behaviour healthy.

COURSE OUTCOME

The students must acquire the relevant knowledge & learn the skills about the following competencies:

- PUL CO-1: Learn relevant applied anatomy and physiology of pulmonary system.
- PUL CO-2: Learn &practice pulmonary disorders.
- **PUL CO-3:** Learn & practice diagnostic procedures such as Pulmonary Function Testing and imaging studies.
- PUL CO-4: Learn & practice CPR.

COURSE CONTENT

UNIT	TITLE	THEORY+ TUTORIAL 80 + 32 HOURS
ı	 Basic Concepts Historical perspective of pulmonary rehabilitation Basic concepts of pulmonary rehabilitation PR - definition and characteristics 	20 + 8
II	Therapeutic Practices	20 + 8
Ш	 Educating the patient and family in health management Rehabilitation in the pediatric patients with pulmonary disease. Rehabilitation in non - COPD lung disease Rehabilitation for long term Tracheostomy patient. 	20 + 8
IV	Medical Ethics & the Relevant Medico-legal Aspects: Responsibilities and duties, Ethical behavior & conduct, Medico-legal Aspects its relation to consumer Protection act, Basics of computer application. Ethical and legal implications of practice in Respiratory Care Treatment Palliative cardio respiratory care DNR & DNI: End of life issues	20 + 8

METHODS OF TEACHING

- 1.Lecture cum discussion
- 2.Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS

- Egan's Fundamentals of respiratory care- 12th revised edition (2020).(Craig L. Scanlon)
- Clinical application of mechanical ventilation- 4thedition: Chang D.W
- Respiratory care exam review -4th edition by GaryPersing
- Principles of Critical Care 3rd edition by FarokUdwadia
- Irwine&Rippe's -Intensive Care Medicine 8th edition
- Marinosthe little ICU Book 2nd edition by Paul L. Marino
- Text Book of Critical Care-6th edition by Vincent Shoemaker

BLUEPRINT

UNIT	SYSTEMS	WEIGHTAGE %	MARKS ALLOTED (TOTAL 80)	LAQ (2 out of 4)	SAQ (5 out of 6)	VSAQ (10 out of 12)
I	Basic Concepts	7.5	6	1*	1*	1+1
II	Therapeutic Practices	42.5	34	1	1	1+1
	Rehabilitation	42.5	34	1	1	1+1
III	Rehabilitation program	27.5	22		1	1+1
IV	Ethics	22.5	18	-	1	1+1*
٧	Treatment	22.3	10	1*	1	1+1*
		100	80			

Note: * represents question of choice

PAPER RT 12 CARDIO - PULMONARY REHABILITATION MODEL QUESTION PAPER

TIME: 3 HOURS MAXIMUM MARKS: 80

A. Long answer questions

(2 X 10 = 20)

1. a) Explain in detail about basic concepts of Pulmonary Rehabilitation

(OR)

- b) Rehabilitation program in COPD
- 2. a) Obstructive sleep apnea

(OR)

b) Discuss in detail about Rehabilitation in long term Tracheostomy Patients

B. Short answer questions -Answer any 5 questions

(5 X 6 = 30)

- 1. Discuss in brief about characteristics of Pulmonary rehabilitation
- 2. Explain in detail about breathing exercises
- 3. Polysomnography Indication and techniques
- 4. Pulmonary rehabilitation program in Paediatric Patients
- 5. What are the responsibilities and duties in medical aspects
- 6. End of life issues Discuss in brief

C. Very Short answer questions -Answer any 10

 $(10 \times 3 = 30)$

- 1. What are benefits of Pulmonary Rehabilitation?
- 2. Contraindications of Pulmonary Rehabilitation
- 3. What is ventilator muscle training?
- 4. Tobacco Dependence treatment
- 5. What is the pathophysiology of Nicotine addiction
- 6. Explain in short about assessment of Nutritional status in COPD
- 7. What is the care of patients with Permanent Tracheostomy
- 8. Inspiratory muscle training in Pulmonary Rehabilitation
- 9. Discuss medical legal aspects in PR
- 10. PSR in Pulmonary Disease
- 11. DNR explain in short
- 12. Outcomes of DNI

DISCIPLINE ELECTIVES - III YEAR

B.Sc. RESPIRATORY THERPY DECIPLINE ELECTIVE -I: EQUIPMENTS IN RESPIRATORY CARE

NAME OF THE SUBJECT PAPER : EQUIPMENTS IN RESPIRATORY CARE

DURATION OF THEORY CLASSES : 64 HOURS

DURATION OF TUTORIAL SESSION : NIL

THEORY EXAMINATION : 50 MARKS (40 U+ 10 IA)

DURATION OF THEORY EXAMINATION: 1 1/2 HOURS

PRACTICAL EXAMINATION : NIL

COURSE DESCRIPTION

The course is designed to assist students to acquire the knowledge about individual to work in health care sector. Respiratory therapists will work as part of a medical team of physicians, nurses, to manage patient care by assisting with medical procedures. They are trained to perform variety of procedures- giving medication, aerosol therapy, pulmonary function tests, oxygen therapy, blood gas analysis, air way management, medical ventilation and monitoring devices. They are committed to respiratory wellness and disease prevention. They can also assist patients in the rehabilitation programs of cessation of cigarette smoking.

OBJECTIVES

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

- Will demonstrate the ability to understand, apply and evaluate relevant clinical information to their role as respiratory care therapist
- Will demonstrate the technical proficiency in all skills involved in their role as Respiratory therapist
- Will perform a complete assessment of critically ill patient's oxygenation, ventilation and hemodynamic status and develop an appropriate respiratory care plan.
- Will Describe appropriate infection control strategies implemented in the ICU
- Will comprehend the role of the respiratory therapist in disaster preparedness and management.
- Explains patient's education process in asthma management, chronic obstructive pulmonary disease (COPD) management, pulmonary rehabilitation, discharge planning and tobacco smoking cessation.
- Will be a Team member in the Code Blue or Emergency Team of the hospital

COURSE CONTENT

UNIT	TITLE	THEORY
I	 a) Equipments in Respiratory Care- I Medical Gas Pipelines Oxygen Flow meters b) Equipments in Respiratory Care- II Humidifiers Heat & Moisture Exchanger Heated Humidifier Defibrillators Capnography Pulse Oximeter 	16
II	 Cuff Pressure manometer Peak Expiratory flow meter AMBU Spirometer Artificial airways 	16
III	 Advanced Various routes of O2 administration Aerosol therapy Nebulizer - Jet, Ultrasoni 	16
IV	 a) Intensive Care Unit ICD System NIV Ventilator O2 Analyser Laryngoscope Bronchoscope 	16
I	c) Equipments in Respiratory Care- i • Medical Gas Pipelines • Oxygen Flow meters d) Equipments in Respiratory Care- ii • Humidifiers Heat & Moisture Exchanger Heated Humidifier • Defibrillators • Capnography • Pulse Oximeter	16
II	Cuff Pressure manometer Peak Expiratory flow meter AMBU Spirometer Artificial airways	16

METHODS OF TEACHING

- 1. Lecture cum discussion
- 2. Demonstration
- 3. Lab visit
- 4. Practical work record

METHODS OF EVALUATION

- 1. Written Test
- 2. Laboratory observation Book
- 3. Assignments
- 4. Oral Presentations

REFERENCE BOOKS:

- •Egan's Fundamentals of respiratory care- 12th revised edition (2020).
- (Craig L. Scanlon)
- •Clinical application of mechanical ventilation- 4th edition:

Chang D.W

- Respiratory care exam review -4th edition by GaryPersing
- Principles of Critical Care 3rd edition by FarokUdwadia

DEC -I :EQUIPMENTS IN RESPIRATORY CARE MODEL QUESTION PAPER

TIME: 1 1/2 HOURS MAXIMUM MARKS: 40

(A) Short Answer (Answer any Five)

(5x6=30)

- 1. Heat Moisture Exchanger Types and Working principle.
- 2. Abnormal waveforms of a Capnograph and its treatment.
- 3. Pitfalls of a Pulseoximeter.
- 4. Safety Mechanisms in AMBU.
- 5. Factors affecting Aerosol Therapy.
- 6. Power Source or Input power of a Ventilator.
- 7. Describe about MacIntosh Blade and explain the technique of insertion.

(B) Very Short Answer (Any FIVE)

(5x2=10)

- 1. Relative Humidity.
- 2. Beer's and Lambert's law.
- 3. Indications of a Peak Flow Meter.
- 4. Nasal Prongs.
- 5. Isothermic Saturation Boundary.
- 6. Oropharyngeal Airway Indications, Contraindications and Technique.
- 7. Venturi Principle.
- 8. Describe Miller Blade.

Discipline elective II - Basic Radiation Biology

NAME OF THE SUBJECT PAPER : Basic Radiation Biology

DURATION OF THEORY CLASSES : 64 Hrs.

THEORY EXAMINATION : 50 Marks (40 U + 10 IA)

PRACTICAL EXAMINATION : NIL

DURATION OF THEORY EXAMINATION : 1 1/2 Hrs.

LEARNING OBJECTIVES

 To gain fundamental knowledge regarding the interactions of radiation with the

biological systems at molecular, cellular and systemic levels leading to death,

cancer and mutation

- To understand mechanisms underlying biological responses of humans (and other living beings) to ionizing and non-ionizing radiation
- To gain insight into the various applications of radiation in biomedicine as well

as approaches for protecting the biological systems from harmful effects of radiation

SYLLABUS

Unit I

Fundamentals of radiation physics and radiation chemistry (6 h)

- Electromagnetic radiation and radioactivity
- Radiation sources and radionuclides
- Measurement units of exposed and absorbed radiation
- Interaction of radiation with matter, excitation and ionization
- Radiochemical events relevant to radiation biology
- Interaction of radiation with biomolecules: Nucleic acids, proteins, lipids and carbohydrates

Unit II

Cellular effects of radiation (12 h)

- Effects of ionizing and non-ionizing radiation on cells, DNA, chromosomes and
 - membrane
- Clonogenic cell survival; Concept of RBE and OER
- Recovery from sub-lethal and potentially lethal damage
- Repair of radiation-induced DNA damage; various DNA repair pathways
- Division delay and cell cycle check points
- Radiation-induced cell death; apoptosis, necrosis and autophagy
- Radiation-induced mutation

- Low dose hypersensitivity
- Bystander effects
- Radiation-induced alterations in signal transduction

Unit III

- 1. Radiation-induced cytogenetic damage and biological dosimetry (9 h)
 - Radiation-induced cytogenetic damage; Chromosome aberrations (CA) and micronuclei formation (MN)
 - Dosimetry using CA, MN and mutation assays
 - Biomarkers of radiation exposure
- 2. Systemic effects of radiation (6 h)
 - Acute, delayed and late effects of radiation (with particular reference to nervous
 - system, gastrointestinal and hematopoitic syndrome).
 - Radiation-induced carcinogenesis

Unit IV

- 1. Modification of cellular and systemic responses to radiation (6 h)
 - Protection, mitigation and therapy of radiation damage
 - Biological basis of ICRP recommendations
 - Radio sensitization of tumors
 - Tumor Physiology and Radiation Response
 - Immune modulation and radiation response of tumors
- 2. Applications in Radiation Medicine (6 h)
 - Radiation Therapy: External beam therapy, Brachy therapy and
 - radiosurgery
 - Therapeutic nuclear medicine
 - Sterilization of medical products

LEARNING OUTCOMES

 At the end of the course, students will learn about the biological effects of radiation with good understanding of the benefits and risks of using radiation in a variety of applications

Discipline elective III - Palliative care

NAME OF THE SUBJECT PAPER : Palliative Care

DURATION OF THEORY CLASSES : 64 Hrs.

THEORY EXAMINATION : 50 Marks (40 U + 10 IA)

PRACTICAL EXAMINATION : NIL

DURATION OF THEORY EXAMINATION : 1 1/2 Hrs.

COURSE DESCRIPTION

This virtual one-day course is designed to offer physicians, nurses, social workers and other clinicians the information and skills needed to provide high quality palliative care to patients with serious illnesses in a variety of practice settings. It addresses the assessment and management of current challenges in palliative care, including the physical, psychological, social, and spiritual/existential sources of suffering experienced by patients and their families.

LEARNING OBJECTIVES

Upon completion of this activity, participants will be able to:

Access and manage physical, psychological, social, and spiritual/existential sources of suffering for patients and their families dealing with serious illnesses or towards the end of life

- Develop practical strategies for discussing patient fears, hopes, goals, and wishes
 for care in the face of serious illness and at the end of life, including balancing
 hope and honesty in discussing treatment options and dealing with the ethical,
 psychosocial and spiritual issues that arise
- Improve the access to quality palliative care for all people with serious illness regardless of setting, diagnosis, prognosis or age
- Describe key issues and principles of pain management with opioids, including equianalgesic dosing, common side effects, addiction, tolerance, and dependence

LEARNING OUTCOMES

- Interactive learning formats include: Q&A, panel presentations, and case based discussions and ask the expert sessions.
- The course is designed to change both learner competence and performance in practice for primary and specialty palliative care practitioners.

SYLLABUS CONTENT

1. Basic principles

- Definitions of palliative care; general palliative care; specialist palliative care
- Evolving nature of palliative care over the course of illness
- Re-adaptation and rehabilitation

· Personal qualities and attributes of palliative medicine

2. Physical care

- Initial Assessment detailed history and examination
- Management of life limiting, progressive disease
- Management of vaginal discharge and bleeding
- Diagnosis of rectovaginal, rectovesical and vesicovaginal fistulae
- · Management of Urgency and dysuria/anuria

3. Psychosocial care

- Social and Family Relationships
- Communication with patients and relatives
- Psychological responses of patients and careers to life-threatening illness and loss
- Attitudes and responses of doctors and other professionals
- Patient and family finance

4. Culture, language, religion and spirituality

5. Ethics

• Theoretical ethics, applied ethics

6. Legal framework, teamwork and management

DEC III - Palliative care Model Question Paper

TIME: 1 1/2 HOURS MAXIMUM MARKS: 40

(A) Short Answer (Answer any FIVE)

(5x6=30)

- 1. Indications and importance of providing palliative care
- 2. Principles of palliative care
- 3. Distinguish between palliative care and hospice care
- 4. Non pharmacological management for pain under palliative care
- 5. Psychosocial factors influencing palliative care

(B) Very Short Answer (Any FIVE)

(5x2=10)

- 1. Signs of physiological death
- 2. Stages of palliative care
- 3. Definition of palliative care
- 4. Rehabilitation verses palliative care
- 5. Palliative care under hospital settings
- 6. Phases of rehabilitation
- 7. Pharmaco therapy for pain for patients under palliative care
- 8. Importance of palliative care

DISCIPLINES ELECTIVE IV- BASIC LIFE SUPPORT

NAME OF THE SUBJECT PAPER : Basic Life Support

DURATION OF THEORY CLASSES : 64 Hrs.

THEORY EXAMINATION : 50 Marks (40 U + 10 IA)

PRACTICAL EXAMINATION : NIL

DURATION OF THEORY EXAMINATION : 1 1/2 Hrs.

COURSE DESCRIPTION:

The course is designed to assist students to acquire knowledge of Basic life support (BLS). BLS is the foundation for saving lives after cardiac arrest. They will learn the skills of high -quality cardiopulmonary resuscitation (CPR) for victim of all ages and will practice delivery of these skills both as a single rescuer and as a member of a multi rescuer team. The skill that they learn from this course will enable them to recognize cardiac arrest, active the emergency response system early, and respond quickly and confidently.

OBJECTIVES:

- Describe the importance of high quality CPR and its impact on survival
- Describe all of the steps of the chain of survival
- Apply the BLS concepts of the chain of survival
- Perform high quality CPR for adult, child & infant
- Describe the importance of team in multi rescuer resuscitation
- Describe the technique for relief of foreign-body airway obstruction for adult or child
- Describe the technique for relief of foreign-body airway obstruction for an infant
- Demonstrated the appropriate use of an AED.

UNIT	TOPICS	KEY OUTCOMES	TOTAL HOURS(64)
1.	Unit-I Basics Life Support	 Airway management, Cardio pulmonary resuscitation. Chain of survival, 2- person CPR, Approach to syncope, restless patient & pediatric patient. Chocking relief for adults, children & infants. 	12 hrs
2.	Unit-II Advance Cardiac Life Support	 Recognition and early management of respiratory and cardiac arrest. Recognition and early management of peri-arrest conditions such as symptomatic bradycardia. Airway management including intubation. Effective communication as a member & leader of a resuscitation team. Automated external defibrillator for adults & children. Ventilation techniques(Adult, infants). 	13 hrs
3.	Unit-III Pediatric Advance Life Support	 Review of child & infant CPR Review of child AED Understand how to properly apply team dynamic. Recognition of cardio pulmonary arrest early & application of CPR within 10 sec. Differentiation between compensated and decompensated shock. Early intervention for the treatment of shock. 	13 hrs
4.	Unit-IV Bio Medical waste	 Sources of health care waste Health hazards & treatment disposal of health care waste. Types of incinerations Bio-Medical waste management in India and its category. Advantage and disadvantages of disposal options. 	13 hrs
5.	Unit-V Palliate Care	 Pathophysiology and common causes of breathlessness, cough, haemoptysis, orthopnea. Assessment and management of 	13 hrs

pleural and pericardial effusion, stridor, superior vena cava obstruction. • Prevention and management of	
pulmonary embolism.	

DEC -IV BASIC LIFE SUPPORT Model Question Paper

TIME: 1 1/2 HOURS MAXIMUM MARKS: 40

(A) Short Answer (Answer Any FIVE)

(5x6=30)

- 1. Define Hazardous waste? Explain the various methods involved in storage and transport of hazardous waste.
- 2. What is ACLS? Draw the algorithm BLS surgery and critical concept of high quality CPR.
- 3. Explain and draw AED algorithm.
- 4. Explain the various treatment and disposal methods of biomedical waste.
- 5. Explain post cardiac arrest care algorithm.

(B) Very Short Answer (Any Five)

(5x2=10)

- 1. Define CPR and explain its procedure.
- 2. Explain essential criteria of BLS.
- 3. How to maintain the peri cardiac arrest in responsive patients.
- 4. List out 5H'S & 5T'S.
- 5. Write the important safety measure to be followed during exposure to hazardous waste.
- 6. Use of AED pads in children less than 8 years.
- 7. What are the steps involved in pediatric CPR.
- 8. What is AED.

DECIPLINE ELECTIVE -V: AIR BORNE INFECTION CONTROL

NAME OF THE SUBJECT PAPER : AIR BORNE INFECTION CONTROL

DURATION OF THEORY CLASSES : 64 HOURS

DURATION OF TUTORIAL SESSION : NIL

THEORY EXAMINATION : 50 MARKS (40 U+ 10 IA)

DURATION OF THEORY EXAMINATION : 1 1/2 HOURS

PRACTICAL EXAMINATION : NIL

Learning Objectives:

- Describe how pathogenic organisms may be spread in healthcare settings.
- Identify the factors which influence the outcome of an exposure to pathogenic organisms in healthcare settings.
- List strategies for prevention of transmission of pathogenic organisms.
- Describe how infection prevention concepts are applied in a professional practice

SYLLABUS

UNIT - 1: Transmission and control of infection in healthcare setting

- Introduction
- Pathogen or infectious agent
- Portal of entry
- Reservoir
- Transmission
- · Common vehicle to transmit the infections and
- Transmission of infections.

UNIT - 2: Factors Influencing the Outcome of Exposures

- Host Factors
- Pathogen or Infectious Agent Factors
- Environmental Factors

UNIT - 3: Methods to prevent the spread of pathogenic organisms in healthcare settings

- Respiratory Hygiene/Cough Etiquette: these measures apply to patients, visitors, and healthcare workers with signs of respiratory infection.
- Safe injection practice
- For patients infected with organisms other than blood borne pathogens
- Control of routes of transmission

UNIT - 4: Standard precautions

- Hand hygiene
- Use of PPE whenever there is an expectation of possible exposure to blood or body fluid

QUESTION BANK

B.Sc. AHS I YEAR

PAPER-1: ANATOMY

UNIT: 1 GENERAL ANATOMY

HUMAN CELL

Q. NO	TOPICS	TYPE
1.	Discuss the Cell & its Organelles.	SAQ

EPITHELIUM

Q.NO	TOPICS	TYPE
1.	Classification of Epithelium with its examples.	SAQ
2.	Draw the neat label diagram of Simple epithelium with its examples.	SAQ
3.	Draw the neat label diagram of Compound epithelium with its examples.	SAQ
4.	Write a note on Goblet cell.	VSAQ
5.	Write a note on Basement membrane of epithelium.	VSAQ

GLANDS

Q.NO	TOPICS	TYPE
1.	Classification of Glands with its examples.	SAQ
2.	Discuss the Microscopic structure of Mucous / Serous / Mixed salivary gland with its examples.	SAQ

CARTILAGE

Q.NO	TOPICS	TYPE
1.	Discuss the Microscopic structure of Hyaline cartilage / Elastic cartilage / White fibro cartilage with its examples.	SAQ
2.	Classification of Cartilage with its examples.	VSAQ
3.	Write a note on Perichondrium.	VSAQ

BONE

Q.NO	TOPICS	TYPE
1.	Classification of Bones with its examples.	SAQ
2.	Draw & Discuss the Microscopic structure of Compact bone (T.S)	SAQ
3.	Discuss the blood supply of long bone.	SAQ
4.	List out the bones in region wise.	SAQ
5.	State the parts of growing long bone.	VSAQ
6.	State the parts of adult long bone.	VSAQ
7.	Write a note on Periosteum.	VSAQ
8.	Write a note on carpal bones.	VSAQ
9.	Write a note on Sesamoid bone.	VSAQ
10.	Write a note on Fontanellae of fetal skull.	VSAQ
11.	Write a note on Haversion system of compact bone.	VSAQ
12.	List out the structural differences between the Bone & Cartilage.	VSAQ

JOINTS

Q.NO	TOPICS	TYPE
1.	Classification of Joints with its examples.	SAQ
2.	Classification of Synovial joint with its examples.	SAQ
3.	Discuss the structure of synovial joint.	SAQ
4.	Classification of Cartilagenous joint with its examples.	SAQ

MUSCULAR TISSUE

Q.NO	TOPICS	TYPE
1.	Draw & Discuss the Microscopic structure of Skeletal muscle /	SAQ
	Cardiac muscle / Smooth muscle with its examples.	SAQ
2.	Classification of muscular tissue with its examples.	VSAQ
3.	State the muscles of mastication & its nerve supply.	VSAQ
4.	List out the microscopic structural differences between the types	VSAQ
	of muscles.	

SKIN

Q.NO	TOPICS	TYPE
1.	Draw & Discuss the Microscopic structure of Thick / Thin skin.	SAQ
2.	Classification / Types of skin with its example.	VSAQ
3.	List out the structural differences between the types of skin.	VSAQ

UNIT: 2 CARDIOVASCULAR SYSTEMS

MEDIASTINUM

Q.NO	TOPICS	TYPE
1.	Definition, location & general boundary / outline boundary of Mediastinum.	SAQ
2.	Discuss the boundaries & contents of Superior mediastinum.	SAQ
3.	Discuss the boundaries & contents of Inferior mediastinum.	SAQ

HEART

Q.NO	TOPICS	TYPE
1.	Explain the gross features of Right atrium under following headings - a) Definition, b) location, c) external features, d) internal features, e) Function, f) arterial supply.	LAQ
2.	Describe the Blood supply of Heart.	LAQ
3.	Discuss the location & External features of Heart.	SAQ
4.	Discuss the Valves of Heart. (A.V -valve & Semilunar valve)	SAQ
5.	Discuss the Systemic & Pulmonary circulation of Heart.	SAQ
6.	Discuss the Right coronary artery / Left coronary artery under following headings - a) Origin, b) course, c) branches.	SAQ
7.	Write a note on Apex of Heart.	VSAQ
8.	List out the chambers & great blood vessels of Heart.	VSAQ
9.	Trace the conducting system of Heart.	VSAQ
10.	State the definition, layers, sinuses & nerve supply of Pericardium.	VSAQ

BLOOD VESSELS

Q.NO	TOPICS	TYPE
1.	Describe the Portal vein under following headings - a) Definition, b) formation, c) location, d) course, e) branches, f) Parts, g) Tributaries.	LAQ
2.	Explain the Cavernous sinus under following headings - a) Definition, b) location, c) measurement, d) extension, e) relations, f) Tributaries, g) communications.	LAQ
3.	Parts & branches of Aorta	SAQ

4.	Discuss the origin, course, parts & branches of Subclavian artery.	SAQ
5.	Discuss the origin, course, parts & branches of Axillary artery.	SAQ
6.	Discuss the origin, course & branches of Brachial artery.	SAQ
7.	Discuss the origin & branches of Internal iliac artery.	SAQ
8.	Discuss the origin, course & branches of External carotid artery.	SAQ
9.	Discuss the origin, parts, course & branches of Internal carotid artery.	SAQ
10.	Classification of Dural venous sinuses.	SAQ / VSAQ
11.	Enumerate the branches of Brachial artery.	VSAQ
12.	State the branches of Radial & Ulnar artery.	VSAQ
13.	State the branches of Femoral artery.	VSAQ
14.	List out the sites of Peripheral pulse.	VSAQ
15.	List out the sites of Porto caval anastomosis.	VSAQ
16.	State the formation, course & termination of Great saphenous vein / Short saphenous vein.	VSAQ
17.	Write a note on Cysterna chyli.	VSAQ
18.	Formation, location & branches of Superficial palmar arch / Deep palmar arch.	VSAQ

UNIT: 3 RESPIRATORY SYSTEM

Q.NO	TOPICS	TYPE
1.	Explain the Larynx under following headings - a) Definition, b) location, c) extension, d) measurement, e) Skeletal framework, f) function.	LAQ
2.	Explain the Lung under following headings - a) Definition, b) location, c) coverings, d) weight & Colour, e) external features, f) medial surface impression, g) hilum, h) Root of lung, i) blood supply, j) note on Bronchopulmonary segments.	LAQ
3.	Discuss the definition, formation & structures opening in the Lateral wall of nose.	SAQ
4.	Discuss the definition, extension, measurement, external feature of Trachea.	SAQ
5.	Discuss the definition, layers, parts of layers, recesses, nerve supply of Pleura.	SAQ / VSAQ
6.	State the parts of Respiratory system.	VSAQ
7.	Enumerate the structures forming the Nasal septum.	VSAQ
8.	Write a note on Carina.	VSAQ
9.	Write a note on Bronchopulmonary segments.	VSAQ
10.	List out the Para nasal air sinuses.	VSAQ
11.	Enumerate the muscles of Respiration & state its nerve supply.	VSAQ

UNIT: 4 DIGESTIVE SYSTEMS

Q.NO	TOPICS	TYPE
1.	Describe the Tongue under following headings - a) Definition, b) location, c) parts, d) external features, e) muscles, f) Nerve supply.	LAQ
2.	Explain the Pharynx under following headings - a) Definition, b) location, c) extension, d) sub-division, e) Muscles forming the pharynx, f) nerve supply.	LAQ

		ı
3.	Explain the Stomach under following headings - a) Definition, b) location, c) capacity, d) measurement, e) External features, f) Parts, g) relations, h) blood supply.	LAQ
4.	Describe the Duodenum under following headings - a) Definition, b) location, c) parts, d) measurement, e) external features, f) Internal features (2 nd part), g) blood	LAQ
5.	supply. Explain the Liver under following headings - a) Definition, b) location, c) Colour, d) weight, e) external features, f) Relations, g) bare area, h) Porta hepatis, i) blood supply,	LAQ
	j) function. Explain the Pancreas under following headings -	
6.	 a) Definition, b) location, c) anatomical & functional parts, d) measurement, e) Colour, f) external features, g) relations, h) Duct of pancreas, i) Blood supply. 	LAQ
7.	Discuss the location & external features of Tongue.	SAQ
8.	Discuss the parts, muscles of Tongue & state its nerve supply.	SAQ
9.	Discuss the location, external features, parts & blood supply of stomach.	SAQ
10.	Discuss the external & internal features of the 2 nd part of Duodenum.	SAQ
11.	Discuss the Caecum under following headings - a) Definition, b) location, c) measurement, d) types, e) external features, f) Internal features, g) blood supply.	SAQ
12.	Discuss the Appendix under following headings - a) Definition, b) location, c) parts, d) measurement, e) position, f) Blood supply.	SAQ
13.	Discuss the characteristic features / cardinal features of Large intestine.	SAQ
14.	Discuss the Extra hepatic biliary apparatus under following headings - a) Definition, b) parts, c) measurement, d) function, e) Note on gall bladder.	SAQ
15.	Discuss the definition, location, origin, course & branches of Coeliac trunk.	SAQ
16.	List out the parts of Digestive system.	VSAQ
17.	State the parts & papillae of Tongue.	VSAQ
18.	State the nerve supply of Tongue.	VSAQ
19.	Enumerate the muscles of Tongue.	VSAQ
20.	State the extension & sub-divisions of Pharynx.	VSAQ
21.	State the extension & constrictions of Esophagus.	VSAQ
22.	List out the structural differences between the Jejunum & Ileum.	VSAQ
23.	State the location & types of Caecum.	VSAQ
24.	State the location / parts & position of Appendix.	VSAQ
25.	Write a note on Porta hepatis.	VSAQ
26. 27.	Write a note on bare area of Liver. Write a note on Pancreatic duct.	VSAQ VSAQ
28.	Enumerate the parts & function of Biliary apparatus.	VSAQ
29.	Classification of Salivary glands.	VSAQ
30.	State the branches of Superior mesenteric artery.	VSAQ
31.	State the branches of Inferior mesenteric artery.	VSAQ
32.	State formation of Marginal artery / artery of Drummond.	VSAQ
	· · · · · · · · · · · · · · · · · · ·	

UNIT: 5 URINARY SYSTEM

Q.NO	TOPICS	TYPE
1.	Explain the Kidney under following headings - a) Definition, b) location, c) measurement, d) Colour, e) external features, f) Hilum, g) relations, h) coverings, i) internal features, j) Blood supply.	LAQ
2.	Explain the Urinary bladder under following headings - a) Definition, b) location, c) shape, d) measurement, e) capacity, f) External features, g) relations, h) supports, i) Internal features (Trigone of urinary bladder), j) blood supply, k) role.	LAQ
3.	Discuss the location & relations of Kidney.	SAQ
4.	Discuss the extension, parts, measurement, constrictions & blood supply of Ureter.	SAQ
5.	Discuss the external features & supports of Urinary bladder.	SAQ
6.	State the parts of Urinary system.	VSAQ
7.	Write a note on hilum of kidney.	VSAQ
8.	State the extension, parts & constrictions of ureter.	VSAQ
9.	Write a note on Trigone of urinary bladder.	VSAQ
10.	State the definition, extension & parts of Male urethra.	VSAQ
11.	Write a note on Female urethra.	VSAQ

UNIT: 6 REPRODUCTIVE SYSTEMS MALE REPRODUCTIVE SYSTEM

Q.NO	TOPICS	TYPE
1.	 Explain the Testis under following headings - a) Definition, b) location, c) measurement, d) shape, e) external features, f) Coverings, g) internal features, h) functions, i) blood supply. 	LAQ
2.	Describe the Prostate gland under following headings - a) Definition, b) location, c) shape, d) measurement, e) shape, f) External features, g) lobes, h) coverings, i) blood supply.	LAQ
3.	Discuss the location, external features, layers & blood supply of Scrotum.	SAQ
4.	Discuss the External & internal features of Testis.	SAQ
5.	Discuss the External features, lobes & coverings of Prostate.	SAQ
6.	State the parts of Male Reproductive system.	VSAQ.
7.	Enumerate the layers of Scrotum & state its nerve supply.	VSAQ.
8.	State the parts & role of Epididymis.	VSAQ.
9.	State the coverings of Testis & Prostate.	VSAQ.
10.	State the coverings & contents of Spermaticcord.	VSAQ.

FEMALE REPRODUCTIVE SYSTEM

Q.NO	TOPICS	TYPE
1.	Explain the Mammary gland under following headings - a) Definition, b) location, c) extension, d) shape, e) structures / features, f) Blood supply.	LAQ
2.	 Explain the Uterus under following headings - a) Definition, b) location, c) shape, d) measurement, e) external features, f) Positions, g) relations, h) supports, i) blood supply. 	LAQ

3.	Discuss the Gross structure of Mammary gland.	SAQ
4.	Discuss the location & external features of Uterus.	SAQ
5.	Discuss the location, position & supports of Uterus.	SAQ
6.	Discuss the external & internal features of Ovary.	SAQ
7.	State the parts of Female Reproductive system.	VSAQ
8.	State the parts & role of Fallopian tube.	VSAQ
9.	Enumerate the ovarian follicles.	VSAQ
10.	State the parts & positions of Uterus.	VSAQ

UNIT: 7 ENDO CRINE SYSTEM

Q.NO	TOPICS	TYPE
1.	Describe the Thyroid gland under following headings - a) Definition, b) location, c) hormones, d) peculiarities, e) external features, f) Parts, g) relations, h) coverings, i) blood supply, j) Functions.	LAQ
2.	Explain the Pituitary gland under following headings - a) Definition, b) location, c) shape, d) measurement, e) external features & hormones, f) Blood supply.	LAQ
3.	Explain the Suprarenal gland under following headings - a) Definition, b) location, c) measurement, d) external features, e) Internal features, f) hormones, g) blood supply.	LAQ
4.	Discuss the external features of Thyroid gland, state its coverings & blood supply.	SAQ
5.	Discuss the external features & hormones of Pituitary gland.	SAQ
6.	Discuss the external & internal features of Suprarenal gland & state its hormones.	SAQ
7.	List out the Endocrine glands.	VSAQ
8	Classification of Endocrine glands.	VSAQ
9.	State the location & blood supply of Thyroid gland.	VSAQ
10.	State the location & hormones of Pituitary gland.	VSAQ
11.	State the location & hormones of Parathyroid gland.	VSAQ

UNIT: 8 NERVOUS SYSTEM

Q.NO	TOPICS	TYPE
1.	Classification of Nervous system.	SAQ
2.	Discuss the Cerebrum under following headings -	SAQ
	a) Definition, b) location, c) external features.	JAQ
3.	Discuss the external features & blood supply of Cerebrum.	SAQ
4.	Discuss the Supero-lateral surface of Cerebrum.	SAQ
	Discuss the Cerebellum under following headings -	SAQ
5.	a) Definition, b) location, c) nucleus, d) functions, e) blood	
	supply.	
6.	Discuss the Spinal cord under following headings -	
	a) Definition, b) location, c) extension, d) measurement, e)	SAQ
	coverings,	JAQ
	f) Blood supply.	
7.	Discuss the extension & external features of Spinal cord.	SAQ
8.	Discuss the location & external features of Midbrain.	SAQ
9.	Discuss the location & external features of Pons.	SAQ
10.	Discuss the location & external features of Medulla oblongata.	SAQ
11.	Discuss the blood supply of Brain.	SAQ
12.	Discuss the formation of Circle of Willis.	SAQ
13.	Classification of Cranial nerves.	SAQ /

		VSAQ
14.	State the parts of Brain.	VSAQ
15.	Write a note on Sulci & Gyri.	VSAQ
16.	State the location & nucleus of Cerebellum.	VSAQ
17.	State the layers of Meninges & its space.	VSAQ
19.	State the layers of meninges & its modification.	VSAQ
18.	State the modification of Spinal meninges.	VSAQ
20.	Enumerate the cranial nerves emerges from Midbrain / Pons /	VSAQ
	Medulla oblongata.	
21.	List out the Cranial nerves.	VSAQ
22.	List out the Basal nuclei	VSAQ
23.	State the location & parts of Corpus callosum.	VSAQ

UNIT: 9 GENERAL EMBRYOLOGY

Q.NO	TOPICS	TYPE
1.	Discuss the stages of Spermatogenesis.	SAQ
2.	Discuss the stages of Oogenesis.	SAQ
3.	Discuss the Placenta under following headings -	SAQ
	a) Definition, b) external features, c) functions.	
4.	Write a note on Fertilization & state its phases.	VSAQ
5.	Write a note on Implantation.	VSAQ
6.	Write a note on Ovulation.	VSAQ

PAPER 2 - PHYSIOLOGY

UNIT - I

GENERAL PHYSIOLOGY

Very short answer questions (VSAQ)

- 1. Draw labeled diagram of human cell and mention any four functions of cell organelles.
- 2. Explain one function of
 - a) Mitochondria, b). Golgi apparatus
 - c) Endoplasmic reticulum d) Ribosome
- 3. Give two differences between mitosis and meiosis.
- 4. Name the phases of mitosis
- 5. Name different types of intercellular connections?
- 6. Classify various mechanisms of transport across cell membrane.
- 7. Describe different mechanism of passive transport across the cell membrane
- 8. Describe different mechanism of active transport across the cell membrane
- 9. Define osmosis. Give examples.
- 10. Define symport. Give one example.
- 11. Define antiport. Give one example.
- 12. Define homeostasis. Name the types of feedback mechanisms involved in homeostasis with one example.
- 13. Briefly explain negative feedback mechanisms with examples.
- 14. Briefly explain positive feedback mechanisms with examples.
- 15. Give normal values of i) Intracellular fluid (ICF), ii) Extracellular fluid (ECF), iii) plasma and iv) Interstitial fluid

HEMATOLOGY (BLOOD)

Long answer questions (LAQ)

- 1. What is erythropoiesis? Describe the stages and factors influencing it.
- 2. What is anemia? Describe the types of anemia. Give the blood picture in each of them.
- 3. What s immunity? Explain its types.
- 4. Explain the mechanism of hemostasis.
- 5. Explain intrinsic and extrinsic mechanisms of blood clotting.
- 6. Name the blood group systems. Explain the basis for its classification. Add a note on its clinical importance.

Short answer questions (SAQ)

- 1. Briefly describe the composition of blood.
- 2. Write the functions of blood.
- 3. List the plasma proteins. Write its functions.
- 4. What is Erythropoiesis? List its stages.
- 5. Define anemia with types. Explain iron deficiency anemia.
- 6. Briefly explain ABO and Rh system.
- 7. Erythroblastosis fetalis.
- 8. Define hemostasis with stages.
- 9. Name the clotting factors.
- 10. Define immunity. What are its types?

Very short answer questions (VSAQ)

- 1. Classifications of WBC.
- 2. Functions of neutrophil.
- 3. What is Phagocytosis?
- 4. Functions of eosinophil.
- 5. Functions of basophil.
- 6. Functions of lymphocytes.
- 7. Functions of red blood cell (RBC).
- 8. Write the normal values of hemoglobin in adults male and female.
- 9. Functions of hemoglobin.
- 10. Functions of platelets.
- 11. What is hemophilia?
- 12. What is anticoagulant?
- 13. Name any two anticoagulants.
- 14. Name the blood group systems.
- 15. Define Landsteiner's law.

Mismatch transfusion.

UNIT - II

CARDIOVASCULAR SYSTEM

Long answer questions (LAQ)

- 1. Define cardiac cycle. Explain with the help of a diagram the mechanical and pressure changes during cardiac cycle.
- 2. Draw a labelled diagram showing the innervations of heart. Describe the regulation of heart rate.
- 3. Define blood pressure. Give its normal values. Write the factors controlling blood pressure.
- 4. Define cardiac output and cardiac index. Give its normal values. Describe the factors regulating cardiac output.
- 5. What is shock? What are its types? Discuss the cardiovascular compensatory changes that occur during shock.

Short Answer Questions (SAQ)

- 1. Write the difference between pulmonary and systemic circulation.
- 2. Briefly describe the conducting system of heart.
- 3. Draw labeled diagram of conducting system of heart.
- 4. List out the properties of cardiac muscle. Briefly explain any two properties.
- 5. Draw a normal Lead II ECG indicating its waves and segments.
- 6. Define blood pressure (BP). What are the components of it and write its normal range.
- 7. List the factors affecting blood pressure
- 8. Define cardiac cycle. List the events during cardiac cycle.
- 9. Define shock. Name its types.
- 10. Briefly explain the types of heart sounds.

Very Short Answer Questions (VSAQ)

- 1. Write any two differentiating points between pulmonary and systemic circulation.
- 2. Define blood pressure.
- 3. What is systolic blood pressure? Write its normal value.
- 4. What is diastolic blood pressure? Write ifs normal value.
- 5. Define pulse. Write its normal range.
- 6. Write any two difference between tachycardia and bradycardia
- 7. Define cardiac output. Write its normal values.
- 8. Define stroke volume. Write its normal values.
- 9. What is electrocardiogram (ECG)?
- 10. List any four properties of cardiac muscle

UNIT III

RESPIRATORY SYSTEM

Long answer questions (LAQ)

- 1. Describe the mechanics of breathing.
- 2. Explain oxygen transport in the blood. Describe the oxygen dissociation curve.
- 3. Discuss the transport of carbon dioxide in the blood.
- 4. Name the respiratory centers. Explain the neural regulation of respiration.
- 5. Classify hypoxia. Describe the types with suitable examples.

Short answer questions (SAQ)

- 1. Briefly explain the mechanism of inspiration.
- 2. Briefly explain the mechanism of expiration.
- 3. Draw labeled diagram of pontine and medullary respiratory centers.
- 4. Briefly explain the transport of oxygen in the blood
- 5. Briefly explain the transport of carbon dioxide in the blood.
- 6. Draw labeled diagram of normal spirogram indicating lung volume and capacities.
- 7. Define and give normal values of lung volumes.
- 8. Define and give normal values of lung capacities.
- 9. What is surfactant? Give its function.
- 10. Define hypoxia. List its various types.
- 11. Classify and explain any one type of hypoxia.

Very short answer questions (VSAQ)

- 1. Name the inspiratory muscles.
- 2. Name the expiratory muscles.
- 3. Name the respiratory and non-respiratory functions of lungs.
- 4. Write any four functions of respiratory system.
- 5. Function of surfactant.
- 6. Name the respiratory centers.
- 7. Normal values of lung volumes.
- 8. Normal values of lung capacities.
- 9. Draw labeled diagram of respiratory center.
- 10. List the types of hypoxia
- 11. Vital Capacity.
- 12. What is dead space?
- 13. What is hypoxia?

- 14. What is dyspnea?
- 15. What is cyanosis?
- 16. What is periodic breathing?

UNIT - IV

IV - GASTRO-INTESTINAL PHYSIOLOGY

Long Answer Questions (LAQ)

- 1. Describe the phase and control of deglutition. Add a note on its applied importance.
- 2. Write the composition of saliva? Describe the regulation of salivary secretion. Discuss its functions.
- 3. Describe the composition and phases of gastric secretion. Briefly explain the HCl secretion in stomach.
- 4. Describe the phases of pancreatic secretion.

Short Answer Questions (SAQ)

- 1. Give the composition and functions of saliva?
- 2. Give composition and functions of gastric secretion?
- 3. Briefly explain mechanism of HCl secretion
- 4. Give composition and functions of pancreatic secretion?
- 5. Briefly explain entero-hepatic circulation with neat diagram.
- 6. Briefly explain the functions of liver.
- 7. Classify gastro intestinal (GI) hormones and write its actions of any two hormones.
- 8. Peptic ulcer.

Very Short Answer Questions (VSAQ)

- 1. What is mastication?
- 2. What is deglutition?
- 3. Write any four functions of saliva.
- 4. Write any four functions of liver.
- 5. Functions of pancreatic juice.
- 6. Name any four GI hormones.
- 7. Functions of gastrin.
- 8. Functions of secretin.
- 9. Functions of cholecystokinin pancreozymin.
- 10. What are the movements of stomach?
- 11. What are the movements of small intestine?
- 12. What are the movements of large intestine?
- 13. Write any four functions of bile.
- 14. What is the difference between liver and gall bladder bile?

UNIT - IV

RENAL PHYSIOLOGY (EXCRETORY SYSTEM)

Long Answer Questions (LAQ)

- 1. Describe the mechanism of urine formation.
- 2. Define GFR (Glomerular filtration rate). Write its normal values. Briefly explain the factors affecting GFR.
- 3. Describe the Structure and functions of juxta glomerular apparatus

- 4. Draw a labeled diagram showing nerve supply to the urinary bladder. Explain the mechanism of micturition. What is a neurogenic bladder?
- 5. Describe the role of counter current multiplier and exchange system in concentrating urine.
- 6. Discuss the role of different buffer systems in regulation of acid base balance.

Short Answer Questions (SAQ)

- 1. Briefly explain the functions of kidney.
- 2. Briefly explain the formation of urine.
- 3. Briefly explain mechanism behind voiding of urine.
- 4. Define GFR (Glomerular filtration rate). Write its normal values. List the factors affecting GFR.
- 5. What is the normal renal blood flow? How is it measured?
- 6. List the Special features of renal blood flow.
- 7. List any three differences between Cortical and Juxtamedullary nephrons.
- 8. Draw a labeled diagram of juxtaglomerular apparatus. What are its functions?
- 9. With a flow chart and suitable diagram, indicate the process of micturition reflex.
- 10. Briefly explain the role of ADH (Anti-diuretic hormone) on kidney?
- 11. Briefly explain renal dialysis.

Very Short Answer Questions (VSAQ)

- 1. Draw labeled diagram of a nephron.
- 2. Draw labeled diagram of filtration membrane
- 3. Write any four functions of kidney.
- 4. Functions of macula densa and Juxtaglomerular cells
- 5. What are the steps of urine formation?
- 6. Give one substances used to measure GFR and renal plasma flow.
- 7. What is micturition reflex?
- 8. What is cystometrogram?
- 9. Filtration fraction.
- 10. Define renal clearance.
- 11. Name the types of renal clearance.
- 12. List any three differences between cortical and medullary nephrons.
- 13. What is diuresis?
- 14. What is diuretics?
- 15. Name any two diuretics.
- 16. Give two functions of skin?

UNIT - V

V - ENDOCRINE PHYSIOLOGY

Short Answer Questions (SAQ)

- 1. List the anterior pituitary (Adenohypophysis) hormones. Give any two hormone functions.
- 2. Mention the physiological role of GH (Growth hormone). Add a note on its hyper and hypo secretion.
- 3. Name the posterior pituitary hormones. Give their functions.
- 4. Name the adrenal cortical and medullary hormones. Mention the functions of glucocorticoids.
- 5. Mention the functions of aldosterone.

- 6. Name the thyroid hormones. Write its functions.
- 7. Name the hormones synthesized by pancrease. Mention their role in maintaining blood glucose.
- 8. Explain the actions of hormones on hyperglycemia and hypoglycemia.

Very Short Answer Questions (VSAQ)

- 1. Name any four hypothalamic hormones.
- 2. Name the anterior pituitary (Adenohypophysis) hormones.
- 3. List the posterior pituitary (Neurohypophysis) hormones
- 4. What is diabetes mellitus? What are its types?
- 5. What is the difference between gigantism and agromegaly?
- 6. What is dwarfism?
- 7. Name the thyroid hormones.
- 8. Write any two functions of thyroid hormones.
- 9. What is Grave's disease?
- 10. What is myxedema?
- 11. What is cretinism?
- 12. What is the difference between myxedema and cretinism?
- 13. Functions of parathormone.
- 14. Functions of mineralocorticoids (Aldosterone).
- 15. Functions of glucocorticoids.
- 16. What is Cushing's syndrome?
- 17. What is Addison's disease?
- 18. What is the difference between diabetes mellitus and diabetes insipidus?
- 19. Name the hormones secreted by pancrease.
- 20. Name the diabetogenic and antidiabetogenic hormones.
- 21. Functions of insulin.
- 22. Functions of glucagon.
- 23. What is diuresis? What are its types?
- 24. Functions of adrenal medullary hormone.
- 25. What is fight or flight response?

V- REPRODUCTIVE SYSTEM

Short answer questions (SAQ)

- 1. What is spermatogenesis? Mention its stages.
- 2. Briefly explain the ovarian cycle.
- 3. Briefly explain ovulation with hormonal regulations.
- 4. What is menstrual cycle? Briefly explain its phases.
- 5. Briefly explain any two female contraceptive methods.
- 6. List the contraceptive methods in male and female.
- 7. Explain the IUCD (Intrauterine contraceptive device).
- 8. List the functions of estrogen.
- 9. List the functions of progesterone.

Very short answer questions (VSAQ)

- 1. Write any two functions of testosterone.
- 2. What is menarche and menopause?
- 3. What is menstrual cycle?
- 4. List the placental hormones.
- 5. List the functions of Follicular stimulating hormone (FSH).
- 6. List the functions of sertoli cells

- 7. Functions of placenta.
- 8. Name the factors influencing spermatogenesis.
- 9. What is fertilization?

UNIT - VI NERVE MUSCLE PHYSIOLOGY

Short answer questions (SAQ)

- 1. Draw the labeled diagram of neuromuscular junction (NMJ).
- 2. Briefly explain the ionic basis of action potential in a neuron.
- 3. Briefly explain the steps of neuromuscular transmission of signal impulse.
- 4. With the help of a flow chart, depict the steps of muscle contraction.
- 5. Briefly explain the excitation contraction coupling in a skeletal muscle
- 6. Write any four differences between skeletal, cardiac and smooth muscles.
- 7. Myasthenia gravis

Very short answer questions (VSAQ)

- 1. Describe the structure of a neuron.
- 2. Give the normal value of resting membrane potential of i) motor neuron and ii) skeletal muscle.
- 3. Give normal resting membrane potential of neuron and skeletal muscle.
- 4. List any two properties of nerve fibers.
- 5. Name any two neuromuscular blocking agent
- 6. Draw the structure of sarcomere
- 7. Name the muscle proteins.
- 8. List any four properties of skeletal muscle.
- 9. Rigor mortis

VI - CENTRAL NERVOUS SYSTEM (CNS)

Short answer questions (SAQ)

- 1. Briefly explain the divisions of nervous system.
- 2. With a flow chart and suitable diagram briefly explain the synaptic transmission of excitatory postsynaptic potential (EPSP).
- 3. With a flow chart and suitable diagram briefly explain the synaptic transmission of inhibitory postsynaptic potential (IPSP).
- 4. Briefly explain the functions of cerebral cortex.
- 5. What are the functions of cerebellum?
- 6. What are the functions of basal ganglia?
- 7. What are the functions of hypothalamus?

Very short answer questions (VSAQ)

- 1. Name any four properties of synapse.
- 2. Write any two functions of thalamus.
- 3. Functions of medulla oblongata.
- 4. Functions of cerebro spinal fluid (CSF).
- 5. Name any two neurotransmitters.
- 6. Name any four hypothalamic hormones.
- 7. Name the anterior pituitary (Adenohypophysis) hormones.
- 8. List the posterior pituitary (Neurohypophysis) hormones

VI - SPECIAL SENSES

Short answer questions (SAQ)

- 1. Trace the visual pathway with a neat labeled diagram
- 2. Explain the errors of refraction
- 3. Trace the auditory pathway with a neat labeled diagram

- 4. Functions of Middle ear.
- 5. Trace the olfactory pathway.

Very short answer questions (VSAQ)

- 1. Name the receptors for vision, smell, taste and hearing.
- 2. Functions of eye
- 3. List the primary colors of vision
- 4. Accommodation reflex.
- 5. What are the functions of rods and cones in eye?
- 6. Explain the terms ageusia, hypogeusia, dysgeusia.
- 7. Name the primary taste sensations

PAPER-3: BIOCHEMISTRY

UNIT-I: INTRODUCTION TO BIOCHEMISTRY

Long answer questions

(10 marks)

- 1. How is acid base balance maintained in the body?
- 2. Write in detail about Acid base disorders

Short Questions

(6 marks)

- 1. Discuss the different buffer system of acid base homeostasis.
- 2. What is the normal PH of blood? How is it maintained?
- 3. Explain the role of lungs in acid base system
- 4. Glass electrode and determination of pH
- 5. Explain the Metabolic acidosis & Metabolic alkalosis
- 6. Explain the Respiratory acidosis & Respiratory alkalosis
- 7. Role of kidney in the regulation of blood pH
- 8. Biochemical assessment of acid base balance

Very Short answer questions:

(3 marks)

- 1. Define pH. What is the normal values of blood & urine PH
- 2. Define buffer and give 2 examples.
- 3. Define acid/ base with example
- 4. Write any 2 conditions for acid base imbalance.
- 5. What is Henderson Hasselbalch equation
- 6. Define Anion gap with example
- 7. List out any 2 causes & symptoms for Respiratory acidosis & alkalosis
- 8. List out any 2 causes & symptoms for Metabolic acidosis & alkalosis
- 9. Define isoelectric PH.

PROTEINS

Long answer questions

(10 marks)

- 1. Define proteins & detail in classification of Proteins with suitable examples
- 2. Describe the different levels of protein structure in detail with suitable diagram

Short Questions (6 marks)

- 1. What are Essential amino acids & mention its clinical significance
- 2. Mention any five biologically important peptides & its clinical role
- 3. Define Protein denaturation & causes, characteristics with example
- 4. Classify amino acids in detail with example.
- 5. Explain Transamination & Give one example.
- 6. Functions of plasma proteins
- 7. Define Electrophoresis & its clinical significance
- 8. Define Chromatography & its clinical significance
- 9. Explain the secondary structural organization of proteins
- 10. Mention the hydrolytic products of proteins
- 11. Precipitation reactions of protein
- 12. Define peptide bond formation & characteristics of peptide bond
- 14. Determination protein structure
- 15. Biological functions of amino acids 16 Biological functions of proteins.

Very Short answer questions:

(3 marks)

- 1. Name any 4 agents causing denaturation of protein
- 2. Name any 2 defense & buffer proteins
- 3. Name the Sulphur containing essential amino acid& functions.
- 4. Explain oxidative deamination with example
- 5. Explain decarboxylation with example
- 6. Mention the Properties of proteins
- 7. Name the conjugated protein with example
- 8. Name the derived protein with example
- Define A:G ratio
- 10. Nutritional classes of proteins with example
- 11. Define zwitterion
- 12. Fibrous & globular proteins

ENZYMES

Long answer questions

(10 marks)

- 1. Classify enzymes? Explain any 4 factors affecting the enzymes activity
- 2. Explain the different types of enzyme inhibition with suitable examples

Short Notes (6 marks)

- 1. How are enzymes classified and give one example for each class?
- 2. Explain factors affecting enzyme activity
- 3. Mention the clinical applications of enzymes and how they are useful in diagnosis of disease
- 4. Explain the features of active site of enzyme
- 5. Explain the competitive inhibition with suitable example
- 6. Explain the non-competitive inhibition with suitable example
- 7. What are the Co enzymes & Explain the features with example
- 8. Explain the regulation of enzyme activity
- 9. Define Iso-enzyme? Give two examples and its importance in clinical diagnosis
- 10. Explain the types of specificity

Very Short answer questions

(3 marks)

- 1. Define Enzymes & Catalyst
- 2. Define Active site
- 3. What is Co- enzymes, mention any 2 examples with significance.
- 4. Define Enzyme unit
- 5. Define Apo enzyme& Holoenzymes
- 6. What is Suicide Inhibition
- 7. List any 3 Therapeutic uses of enzymes.
- 8. Plasma enzymes
- 9. Define km
- 10. Koshland's induced fit theory
- 11. Fischer's template theory
- 12. Prosthetic groups
- 13. Examples of Metalloenzymes &Metal activated enzymes

UNIT II - CARBOHYDRATES

Long answer questions

(10 marks)

- 1. Write in detail about the Polysaccharides and mention its importance.
- 2. Properties of Monosaccharides
- 3. Define Carbohydrates & detail in classification of carbohydrates with examples
- 4. Explain the reaction of Monosaccharides.

Short Questions (6 marks)

- 1. Define carbohydrate and classify with examples
- 2. Write a note on Mucopolysaccharides & mention one function of each
- 3. Differentiate between Glycogen and Starch
- 4. Define Mutarotation
- 5. List out the functions of carbohydrates
- 6. Explain the Clinical importance of monosaccharides
- 7. Properties of monosaccharides
- 8. Explain Homopolysaccharides & mention their function
- 9. Write a note on Disaccharides
- 10. Define glycosides? Name any 3 glycosides & mention their function

Very Short answer questions

(3marks)

- 1. What is heparin? Mention its composition & function
- 2. List any 2 reducing sugars
- 3. List any 4 functions of glycoprotein
- 4. Difference between glycoprotein & proteoglycan
- 5. Why is sucrose a non-reducing sugar
- 6. Mention the clinical application of Inulin & Dextran
- 7. Difference between reducing and non-reducing sugars
- 8. Define invert sugar
- 9. What is cellulose? Mention its function
- 10. Note on Anomers
- 11. Define Epimers with examples
- 12. Biological importance of mannitol
- 13. Optical isomerism with examples.
- 14. Define amino sugars with examples
- 15. Define glycosides

NUCLEIC CHEMISTRY

Short Answer Questions

(6 marks)

- 1. List any 5 synthetic analog bases and mention its function
- 2. Short notes on types of RNA & mention its function
- 3. Define nucleoside and nucleotide by giving suitable examples.
- 4. Describe the structure of t-RNA and mention its function
- 5. List the important functions of nucleotides
- 6. Give a detailed account on Secondary structure of DNA
- 7. Difference between DNA and RNA
- 8. Difference between Purines and Pyrimidines

Very Short Answer Questions

(3 marks)

- 1. Name the purine and pyrimidine bases of DNA & RNA
- 2. Differentiate Ribose and Deoxy ribose.
- 3. Name any 4 minor bases
- 4. Draw a neat labeled diagram of DNA
- 5. Mention the types of DNA and give 3 points each
- 6. What are the biological important bases and its function
- 7. Define Chargaff's rule
- 8. Functions of nucleic acid
- 9. What is ribosomal RNA
- 10. Draw a neat labeled diagram of t-RNA

UNIT III - LIPIDS

Long answer questions

(10 marks)

- 1. what are lipids? classify them. Give biological significance of lipids.
- 2. what are fatty acids? classify them. Give biological significance of polyunsaturated fattyacids
- 3. Explain the phospholipids with examples and its function.

Short Questions (6 marks)

- 1. Explain in detail about Sphingomyelins & their function
- 2. Write a short note on Micelles, Bio membranes
- 3. Write a short note on Sphingophospholipids
- 4. Write a short note on Liposomes
- 5. Write a short note on Triacylglycerol
- 6. What is saturated fatty acid and give three examples with biological significance
- 7. What are prostaglandins? Mention their function
- 8. What is unsaturated fatty acid? Explain the types and biological significance
- 9. Write a short note on Properties of fatty acids
- 10. Write a short note on Essential Fatty Acids?
- 11. Write a short note on Trans fatty acids
- 12. Write a short note on cholesterol
- 13. Describe briefly about the classifications of lipids with suitable examples
- 14. What are the compounds formed from cholesterol?
- 15. Write in detail about the lipoprotein & its functions

Very Short answer questions

(3 marks)

- 1. Lung surfactant
- 2. Saponification number
- 3. lodine number
- 4. Acid number
- 5. What are Apo Lipoproteins?
- 6. Respiratory Distress Syndrome (RDS)
- 7. Define halogenation
- 8. What is rancidity of lipids?
- 9. Omega 3 Fatty acids
- 10. Cardiolipin
- 11. Free Fatty Acids

- 12. Leukotriene's (LTs)
- 13. Thromboxane's (Tx)
- 14. Write the products formed due to complete hydrolysis of triacylglycerol
- 15. What is cephalin

UNIT IV - ENGERY METABOLISM AND NUTRITIONAL BIOCHEMISTRY

Long answer questions

(10 marks)

- 1. Write in detail about the RDA, dietary sources, biochemical role and deficiency manifestations of folic acid/vitamin B12/calcium /lron
- 2. Explain the RDA, dietary sources, biochemical role and deficiency manifestations of vitamin A/ vitamin D/ vitamin C/ vitamin K

Short Notes (6 marks)

- 1. List out the clinical significance of Vitamin E/ Vitamin K
- 2. Coenzymes & functions of any 1 B-complex vitamin (Thiamine/ Riboflavin/ Niacin/Pyridoxine/ Folic acid etc.)
- 3. Explain the Vitamin E has selenium sparing action.
- 4. Discuss the steps involved in digestion & absorption of calcium/ phosphorous / iron
- 5. How plasma calcium level is regulated
- 6. Functions of copper/ selenium/ zinc
- 7. Role of proteins in diets
- 8. Describe protein energy malnutrition
- 9. Nutritional value of protein
- 10. Dietary role of different lipids
- 11. Dietary fiber
- 12. Thermogenic effect of food
- 13. Obesity
- 14. Define nitrogen balance & Mention the factor that causes positive & negative nitrogenbalance
- 15. Define BMR & factor affecting BMR
- 16. What are Essential Amin Acids? Mention their clinical importance
- 17. Explain the RDA, sources, biochemical role and deficiency of sodium / potassium
- 18. What are Essential Fatty Acids? Mention their clinical importance.

Very Short answer questions

(3marks)

- 1. Write any 3 causes for Tetany
- 2. Define Heme proteins/ non heme proteins
- 3. Hemochromatosis/ Hemosiderosis
- 4. Iron deficiency anemia
- 5. Wilson's disease
- 6. Fluorosis
- 7. Define balanced diet
- 8. Define calorific values & Its significance
- 9. Define Respiratory quotient
- 10. What is Glycemic index
- 11. What is pellagra
- 12. Ceruloplasmin

UNIT V CLINICAL CHEMISTRY

Short Notes (6marks)

- 1. Detail account on basic principle, methodology and diagnostic significance of electrophoresis.
- 2. Detail account on basic principle, methodology and diagnostic significance of paperchromatography
- 3. Short notes on Osmolality, significance and measurement.
- 4. write about the different types of electrophoresis & application of each type
- 5. Explain the method of cholesterol /urea /glucose estimation
- 6. write about the different types of electrophoresis & application of each type

Very Short answer questions

(2 marks)

- 1. Define Osmolality/ Osmolarity
- 2. Write the principle of (GOD-POD) method
- 3. List any 3 simple test to identify Carbohydrates, lipids and proteins
- 4. Mention the normal values of glucose/ cholesterol/ protein/ urea/ creatinine
- 5. Define osmolal gap
- 6. what is Rf value
- 7. Write the principle of Molisch test /Benedict's test
- 8. List out the normal/abnormal constituents of urine

ENVIRONMENTAL CHEMISTRY

Short Notes (6 marks)

- 1. Explain in detail about biomedical waste management
- 2. Write short notes on air pollution
- 3. Write short notes on Acid Rain.
- 4. Write short notes on carbon monoxide
- 5. Write short notes on mutagenesis.
- 6. Explain in detail about bio pesticides & its types
- 7. Explain briefly about the harm full effects of plastics to human health

Very Short answer questions

(3marks)

- 1. Define pollutants & give 2 examples
- 2. What are biomedical wastes?
- 3. Name five categories of bio pesticides
- 4. Write about biological water borne disease
- 5. What are the problems caused by plastics?
- 6. Name some chemicals causing water borne disorders
- 7. What is Bio-degradable & Non-biodegradable Waste?
- 8. Define greenhouse effects
- 9. What is Ames test?
- 10. What is meant by carcinogens, and list any three chemicals causing carcinogens
- 11. What is biosafety?

PAPER 4A - GENERAL MICROBIOLOGY

UNIT -I: GENERAL BACTERIOLOGY 10 MARKS

- 1. Discuss the methods of collection and transportation of specimens.
- 2. Define the terms sterilization, disinfection and antisepsis. Name various agents used for sterilization and discuss the role of hot air oven in sterilization.
- 3. Define the terms sterilization. Discuss the role of moist heat in sterilization and their sterility control methods.
- 4. Discuss the various types of disinfectants and discuss the role of halogens in chemical disinfection.

6 MARKS

- 1. Write a short note on contribution of Louis Pasteur.
- 2. Write a short note on contribution of Robert Koch.
- 3. Write a short note on contribution of Edward Jenner.
- 4. Write a short note on Koch postulates.
- 5. Tabulate the difference between prokaryotes and Eukaryotes .
- 6. Draw a labeled diagram of a bacterial cell. Describe the cell wall of bacteria.
- 7. Draw a labeled diagram of Autoclave. Describe the structure and functioning.
- 8. Draw a labeled diagram of Hot air oven. Describe the structure and functioning.
- 9. Tabulate the difference between differentiate between flagella and fimbria.
- 10. Write a short note on spores.
- 11. Describe bacterial growth curve.
- 12. What are culture media? Classify and discuss them in brief.
- 13. Discuss in detail anaerobic methods of cultivation of bacteria.
- 14. Discuss the methods of preservation of microorganisms.
- 15. Write a short note on phenols as disinfectant.
- 16. Write a short note on Aldehydes as disinfectant.
- 17. Write a short note on Antimicrobial sensitivity testing.
- 18. Discuss the methods of collection and transportation of specimens.
- 19. Outline the steps in Gram staining and interpretation.
- 20. Outline Ziehl-Neelsen staining procedure and interpretation.
- 21. Name the different types of hospital wastes and discuss in detail the methods of disposal of hospital wastes

- 1. Write four functions of bacterial cell wall.
- 2. Write four differences between gram positive & gram negative bacterial cell wall.
- 3. What is protoplast & spheroplast.
- 4. What are the functions of capsule.
- 5. How will you classify bacteria based on position of flagella.
- 6. Write four examples of spore producing bacteria.
- 7. Write four examples of capsule producing bacteria.
- 8. Write four examples of capnophilic bacteria.
- 9. Write four examples of strict aerobic bacteria.
- 10. Write four examples of strict anaerobic bacteria.

- 11. Write four examples of microaerophilic bacteria.
- 12. Define sterilization.
- 13. Define disinfectant.
- 14. Name the types of filters and their uses.
- 15. What is cold sterilization.
- 16. Define inspissation.
- 17. What is an agar? write its role in preparation of media.
- 18. Name four selective media.
- 19. Name four differential media.
- 20. Name four transport media.
- 21. Write the composition of TSI agar.
- 22. Write the principles of catalse test.
- 23. Write the principles of oxidase test.
- 24. Name the two motile and non-motile organisms

UNIT -2: IMMUNOLOGY

6 MARKS

- 1. Discuss the mechanism of innate and acquired immunity.
- 2. What is hypersensitivity? Classify hypersensitivity reactions? Describe in detail about type I reactions.
- 3. Discuss the principle and clinical applications of immunofluorescence technique.
- 4. Discuss the principle and clinical applications of ELISA technique.
- 5. Describe the structure and functions of Ig M, Ig G & Ig A.
- 6. Write a short notes on autoimmunity.
- 7. Discuss about delayed type hypersensitivity.
- 8. Describe about phagocytosis process.
- 9. Herd immunity.
- 10. Type III Hypersensitivity.

3 MARKS

- 1. Write the difference between active & passive immunity.
- 2. Define Immunity.
- 3. Write two examples of each, live attenuated bacterial & viral vaccines.
- 4. Write two examples of each , killed bacterial & viral vaccines
- 5. Write four difference between live & killed vaccines.
- 6. Define hapten.
- 7. What is heterophile antigen? write two examples.
- 8. Write two uses of ELISA.
- 9. Define hypersensitivity.
- 10. Difference between immediate and delayed type of hypersensitivity.
- 11. Define autoimmunity

UNIT -3 SYSTEMIC BACTERIOLOGY

- 1. Discuss the pathogenicity and laboratory diagnosis of Staphylococcus aureus.
- 2. Name various organism causing sore throat and discuss in detail the laboratory diagnosis of diphtheria.
- 3. Classify Streptococci. Discuss the pathogenesis and lab diagnosis of *S.pyogenes*.

- 4. Classify the Clostridia of medical importance. Describe the pathogenesis, laboratory diagnosis of gas gangrene.
- 5. Classify Mycobacteria. Give an account on pathogenesis and laboratory diagnosis of pulmonary tuberculosis. Add a note on BCG vaccine.
- 6. Discuss the morphology, pathogenesis and laboratory diagnosis of syphilis.
- 7. Discuss in detail about pathogenesis and laboratory diagnosis of enteric fever.
- 8. List the diarrhea causing bacteria. Write in detail about pathogenesis and laboratory diagnosis of *vibrio*.

6 MARKS

- 1. Name four causative agents of enteric fever and explain about WIDAL test.
- 2. Name the UTI causing bacteria. How to collect urine & laboratory diagnosis of *E.coli*.
- 3. Describe about Toxin produced by staphylococcus aureus.
- 4. Discuss about prophylaxis of diphtheria.
- 5. Difference between Streptococcus viridians & Streptococcus pneumoniae.
- 6. Coagulase test.
- 7. Tetanus.
- 8. Explain about morphology and pathogenicity of Bacillus anthracis.
- 9. Classification of shigella and explain the antigenic structure and toxins produced by Shigella.
- 10. Weil's diseases.
- 11. Laboratory diagnosis of syphilis
- 12. Discuss the pathogenicity of Chlamydia.

- 1. Name the pigments produced by *Pseudomonas*.
- 2. Name two toxins produced by *Clostridium tetani*.
- 3. Define Asepsis.
- 4. Enumerate any four diseases caused by Streptococcus pyogenes.
- 5. Gas gangrene.
- 6. Name four first line drugs used to treat tuberculosis infections.
- 7. List four species of Shigella.
- 8. List the cultivation methods of leprae.
- 9. MRSA.
- 10. ASO
- 11. CRP
- 12. Non -gonococcal urethritis (NGU).
- 13. Name two selective media for V.cholera
- 14. Significant bacteriuria.
- 15. Meningitis.
- 16. Selective medium of Salmonella
- 17. VDRL and RPR.
- 18. Name two transport and enrichment media for V. cholerae.
- 19. What are coliform bacilli? write two examples.
- 20. Actinomycosis
- 21. List the atypical mycobacteria.
- 22. Ghon's focus.
- 23. BCG vaccine
- 24. Name the two beta hemolytic bacteria.

UNIT -4: VIROLOGY

10 MARKS

- 1. Name two RNA viruses. Name four methods of transmission of Hepatitis B virus infection in man. Mention the schedule of Hepatitis B vaccination.
- 2. Mention the modes of transmission of HIV in humans. Draw a neat diagram of HIV and label the parts. List the tests available for the confirmation of HIV in the microbiology laboratory.
- 3. Describe the laboratory diagnosis and prophylaxis of poliomyelitis.
- 4. Explain the laboratory diagnosis and prophylaxis of Rabies.

6 MARKS

- 1. Describe the serological markers of Hepatitis B virus.
- 2. Describe the prophylaxis of polio virus.
- 3. Complications of dengue virus.
- 4. Write a short note on adenovirus.
- 5. Infectious mononucleosis.
- 6. List the opportunistic infections in AIDS patient.

3 MARKS

- 1. Name four DNA virus.
- 2. Name four RNA virus
- 3. Haemorrhagic causing virus.
- 4. MMR vaccine.
- 5. Draw a neat labeled diagram of HIV.
- 6. Rabies vaccine.
- 7. List the cultivation methods of virus.

UNIT -5: PARASITOLOGY

6 MARKS

- 1. Difference between amoebic and bacillary dysentery.
- 2. Describe the life cycle of Entamoeba histolytica.
- 3. Describe the life cycle of Giardia lamblia
- 4. Describe the life cycle of Malaria
- 5. Describe the life cycle of hookworm
- 6. Describe the life cycle of Roundworm
- 7. Lab diagnosis of Plasmodium.
- 8. Describe the lab diagnosis of parasitological samples.

- 1. Morphology of E. histolytica.
- 2. Black water fever.
- 3. Vectors.
- 4. Morphology of Leishmania.
- 5. Peripheral blood smear of Malaria.
- 6. Dog tapeworm.
- 7. Cysticercus bovis.
- 8. Cysticercus cellulose.
- 9. Microfilaria.

UNIT -6: MYCOLOGY

6 MARKS

- 1. Discuss the laboratory diagnosis of fungal infections.
- 2. Write a short notes on zygomycosis.
- 3. Aspergillosis
- 4. Describe about systemic mycoses.
- 5. Cryptococcosis Lesions caused & Laboratory diagnosis.
- 6. Discuss the opportunistic mycoses.
- 7. Describe the morphology & cultural characteristics of Dermatophytes.
- 8. Describe the morphology& cultural characteristics of Candida albicans

3 MARKS

- 1. SDA
- 2. Name two selective culture media for Candida spp.
- 3. Name two selective culture media for Cryptococcus spp.
- 4. What is germ tube test.
- 5. Mention four fungal laboratory contaminants .
- 6. Name four dimorphic fungus.
- 7. Name two examples of yeast.
- 8. Name four opportunistic fungus.
- 9. Name four superficial mycoses.
- 10. Mycetoma

UNIT -7: HOSPITAL INFECTION CONTROL

6 MARKS

- 1. Biomedical waste management.
- 2. Write a short note on universal precaution.
- 3. Write a short note on universal precaution.
- 4. Mode of transmission of infections.
- 5. Write short note on the vaccines recommended for health care workers.
- 6. Recall the procedure to be followed for sharp injury to health care workers.
- 7. Describe the prevention of Nosocomial infections.

- 1. Define segregations.
- 2. List four infectious waste.
- 3. Define land filling.
- 4. What is HICC? List two roles of HICC.
- 5. List two techniques used for the treatment of infectious waste.
- 6. Define universal precautions.
- 7. Define PPE.
- 8. List four methods to control the Hospital acquired infections.

PAPER 4B - GENERAL PATHOLOGY

LONG ANSWER (10 MARKS)

- 1. Mention the types of necrosis with two example each
- 2. Mention the types of cellular adaptations with one example each
- 3. Mention the types of cell injury and describe the changes seen in each type
- 4. Describe the morphological alterations in reversible cell injury
- 5. Describe the morphological alterations in irreversible cell injury

SHORT ANSWERS (6 MARKS)

- 1. Tabulate the differences between exudate and transudate
- 2. Tabulate the differences between benign and malignant tumor
- 3. Define Gangrene. Mention the types of gangrenes with one example each
- 4. Mention the factors that influence wound healing and repair
- 5. Tabulate the differences between acute and chronic inflammation
- 6. Describe the principle chemical mediators of inflammation
- 7. Tabulate the differences between necrosis and apoptosis
- 8. Write a short note on apoptosis
- 9. Describe causes and morphological features of chronic inflammation
- 10. Explain granulomatous inflammation with a neat labeled diagram
- 11. Tabulate the differences between dry and wet gangrene
- 12. Explain mode of spread of tumors in brief
- 13. Adverse effects of smoking
- 14. Write a short note on asbestosis
- 15. Write a short note on silicosis

VERY SHORT ANSWERS

(3 MARKS)

- 1. Define apoptosis. Mention two examples.
- 2. List the cardinal signs of acute inflammation
- 3. Define acute inflammation reaction and mention its outcome
- 4. Define chronic inflammation and give 2 examples
- 5. Mention the components of granulation tissue
- 6. Mention the parts of microscope
- 7. Give 2 examples of granulomatous inflammation
- 8. Define neoplasia
- 9. Define hypertrophy. Give 2 example
- 10. Define atrophy. Give 2 example
- 11. Define hyperplasia. Give 2 example
- 12. Define metaplasia. Give 2 example
- 13. Define reversible cell injury and mention two features
- 14. Define phagocytosis.
- 15. Define Virchow triad

HAEMATOLOGY

SHORT ANSWERS (6 MARKS)

- 1. Define anemia. Mention the types of anemia on the basis of etiology.
- 2. Classify leukemia. Mention general features of acute leukemia.
- 3. Enumerate various color codlings of various biomedical waste disposal with 4 examples

- 4. Describe the collection. transport, preservation and processing of clinical specimen
- 5. Describe the structure and function of different types of WBC'S with a neat labeled diagram
- 6. Write a short note on occupational health hazards.
- 7. Describe mechanism of homeostasis
- 8. Describe various types anticoagulant and its uses with its color coding
- 9. Explain microscopic examination of urine samples.
- 10. Describe the method of collection, transport, preservation of CSF.
- 11. Write short note on Coomb's test
- 12. Define anemia . Mention the general clinical features and basic interpretation of anemia.
- 13. Classify hemolytic anemia and mention in brief the laboratory findings

VERY SHORT ANSWERS

(3 MARKS)

- 1. Define Landstenier's Law
- 2. Define blood group
- 3. Mention the normal platelet count and function of platelets.
- 4. Mention the types of transfusion transmitted infection
- 5. Mention 2 causes of Eosinophilia.
- 6. Mention 2 causes of Neutrophilia.
- 7. Mention 4 preservative of urine and its indication
- 8. Define cross matching
- 9. Mention Principle of major cross matching
- 10. Mention Principle of minor cross matching
- 11. Write about the principle of benedicts test.
- 12. Write about biomedical waste management.

SYSTEMIC PATHOLOGY

LIVER

- 1. Define Cirrhosis. (3M)
- 2. Describe in detail about viral hepatitis. (6M)
- 3. Mention the various stages of alcoholic liver disease(3M)
- 4. Describe in detail about gall stones. (6M)
- 5. Write about the etiology, pathogenesis and clinical features of chronic cholecystitis. (10M)

BRAIN TUMOURS

1. Classify brain tumours (3M)

KIDNEY

- 1. Mention the types of renal calculi.(3M)
- 2. Describe the clinical features of renal stones. (3M)
- 3. Define hydronephrosis (3M)
- 4. Classify renal tumours. (3M)

BONE TUMOURS

- 1. Classify bone tumours(3M)
- 2. Give two examples of benign bone tumors. (3M)
- 3. Give two examples of malignant bone tumours (3M)

FEMALE GENITAL TRACT

- 1. Classify ovarian tumours(3M)
- 2. Describe the types of endometrial hyperplasia and risk factors associated with it.(6M)
- 3. Write a short note on risk factors for endometrial cancer. (6M)
- 4. Describe the etiopathogenesis and risk factors for cervical cancer. (10M)

BREAST

- 1. Describe the risk factors and clinical features of breast carcinoma. (10M)
- 2. Give 2 example of benign breasts tumour (3M)
- 3. Give 2 example of malignant breast tumours. (3M)

CARDIOVASCULAR SYSTEM

RHEUMATIC HEART DISEASES

1. Enumerate the modified Jones criteria for rheumatic heart disease(6M)

INFECTITVE ENDOCARDITIS

- 1. List the causative organisms for infective endocarditis(3M)
- 2. Enumerate the Dukes criteria for infective endocarditis. (6M)

ARTHEROSCLEROSIS

- 1. Enumerate the risk factors for atherosclerosis. (6M)
- 2. Mention two complications of atherosclerosis (3M)\
- 3. Mention the types of Ishemic heart disease. (3M)
- 4. Write in detail about myocardial infarction. (10M)

RESPIRATORY SYSTEM

LUNG INFECTIONS

- 1. Describe the various Stages of Pneumonia. (6M)
- 2. Define Pneumonia.(6M)

COPD

- 1. Define emphysema.(3M)
- 2. Define chronic bronchitis. (3M)
- 3. Define broncheactasis.(3M)
- 4. Tabulate the differences between chronic bronchitis and emphysema.(6M)
- 5. Mention various systemic effects of smoking (3M)

ASTHMA

- 1. Describe the etiopathogenesis and clinical features of bronchial asthma.(6M)
- 2. Define ARDS(3M)
- 3. Give 2 examples for conditions associated with ARDS.(3M)

GASTROINTESTINAL SYSTEM

- 1. Enumerate the clinical features of peptic ulcer. (3M)
- 2. Describe the Risk factors and clinical features of carcinoma stomach. (10M)
- 3. Describe the Risk factors and clinical features of carcinoma colon. (10M)

ABILITY ENHANCEMENT COMPULSORY ELECTIVES **AECC-1- ENGLISH QUESTION BANK**

UNIT-1 - GRAMMAR

Six Mark Questions

- 1. Define grammar, Explain the types of grammar with example.
- 2. What do you mean by noun and Explain its type with examples?
- 3. Write a brief note on types of sentences with examples.
- 4. How many types of tenses are there?

Two Mark Questions

- 1. Define verb.
- 2. Define Adjective with example.
- 3. Define Adverb with example.
- 4. Define Gerund and preposition.
- 5. What do you mean by conjunction and interjection?
- 6. How many types of tenses are there?
- 7. He Said, "My father is ill".(Change the sentence into indirect speech)
- 8. He said to her, "Where are you going"? (Change the sentence into indirect speech)
- 9. They said that they can't live without water. (change the sentence into direct speech)
- 10. Radha said, "I am very busy now". (Change the sentence into indirect speech) 11. She says that she is a little bit nervous. (change the sentence into direct speech) 12. You are busy, _____? (Fill the sentence with suitable question tag) 13. Helmet makes driving safe, _____? (Fill the sentence with suitable question 14. Dogs cannot fly, _____? (Fill the sentence with suitable question tag) 15. She was talking, ______?(Fill the sentence with suitable question tag) 16. He won't come today_____?(Fill the sentence with suitable question tag) 17. He _____ (drink)tea every morning. (Fill the sentence with suitable tense) 18.1 enjoy_____(read) at a cafe. (Fill the sentence with suitable tense) 19. We_____(see) a film last night. (Fill the sentence with suitable tense) 20. They went home, after they_____(finish) their work. (Fill the sentence with suitable tense) 21. I_____(stay) here till you return.(Fill the sentence with suitable tense) 22.1_____ do it tomorrow. (Fill the sentence with modal verb)
- 23. _____ you help me with the house work, please? (Fill the sentence with modal verb)
- 24.1 _____ speak English.(Fill the sentence with modal verb)
- 25. The doctor_____ see you now. (Fill the sentence with modal verb)
- 26. He ______ be the love of my life. (Fill the sentence with modal verb)
- 27. All_____ submit your notebook. (Fill the sentence with modal verb)
- 28. Seetha loves Rama. (Change the sentence to passive voice)
- 29. The story has been read by me. (Change the sentence to active voice)
- 30. Do you speak English well? (Change the sentence to passive voice)
- 31. Open the door (Change the sentence to passive voice)
- 32. Let the T.V be watched by them. (Change into active voice)
- 33. He admitted his guilt. (Change the simple sentence into complex sentence)
- 34. In-spite of his hard work, he failed. (Change the simple sentence into compound sentence)

- 35. It was raining, but they went out. (Change the compound sentence into simple sentence)
- 36. He failed to prove that he was innocent. (Chance the complex sentence into simple sentence)
- 37. If you do not work hard, you will fail. (Change the complex sentence into compound sentence)
- 38. Everest is _____ highest mountain in the world. (Fill up with the suitable article)
- 39. The rose is _____ beautiful flower. (Fill up with the suitable article)
- 40. _____ umbrella is useful in rain. (Fill up with the suitable article)
- 41. Do you paly _____ Piano? (Fill up with the suitable article)
- 42. _____ unicorn is a special creature. (Fill up with the suitable article)
- 43. Red _____ danger. (Fill up with suitable prepositions)
- 44. I acted _____him. (Fill up with suitable prepositions)
- 45. Mr. Kumar is _____ the office. (Fill up with suitable prepositions)
- 46. I am ready _____ help. (Fill up with suitable prepositions)
- 47. Put it _____ (Fill up with suitable prepositions)
- 48. Bharath is the cleverest of all the boys in the class. (Identify the degrees of comparison)
- 49. Seetha is taller than Geetha. (Identify the degrees of comparison)
- 50. Hyderabad is not so hot as Chennai. (Identify the degrees of comparison)
- 51. I am not so strong as he. (Identify the degrees of comparison)
- 52. Mumbai is bigger than Hyderabad. (Identify the degrees of comparison)

UNIT-2: VOCABULARY

Six Mark Questions

- 1. Define vocabulary and explain its types.
- 2. How to improve our vocabulary.
- 3. Write the uses of Dictionary.

Two Mark Questions

1. Use a prefix to make the word meaningful:

Possible

- 2. Use a prefix to make the word meaningful: Legal
- Legai
- 3. Use a suffix to make the word meaningful:

Beautv

4. Use a suffix to make the word meaningful:

Clever

5. Use a suffix to make the word meaningful:

Danger

6. Give the antonym:

Weak

7. Give the antonym:

Open

8. Give the antonym:

Narrow

9. Give the antonym:

Expand

10. Give the antonym:

Superior

11. Give the synonym:

Incredible

12. Give the synonym:

Ecstatic

13. Give the synonym:

Rest

14. Give the synonym:

Behavior

15. Give the synonym:

Tired

16. Use the following idioms / phrases into sentence:

In black and white

17. Use the following idioms / phrases into sentence:

Get away

18. Use the following idioms / phrases into sentence:

Come forward

19. Use the following idioms / phrases into sentence:

Break down

20. Use the following idioms / phrases into sentence:

Look after someone

21. Write any two words miss used or confused?

22. Define Homophones.

23. Use the homophonic words in the sentences.

Write & right

24. Use the homophonic words in the sentences.

Whole & hole

25. Use the homophonic words in the sentences.

Weight & wait

26. Use the homophonic words in the sentences.

Sell & cell

27. Use the homophonic words in the sentences.

Sum & some

UNIT-3: WRITING SKILLS (Six Mark Questions)

1. Make a precise of the following passage and suggest a heading:

Effective speaking depends on effective listening. It takes energy to concentrate on hearing and to concentrate on understanding what has been heard. Incompetent listeners fail in a number of ways. First, they may drift. Their attention drifts from what the speaker is saying. Second, they may counter. They find counter-arguments to whatever a speaker may be saying. Third, they compete. Then, they filter. They exclude from their understanding those parts of the message which do not readily fit with their own frame of reference. Finally, they react. They let personal feelings about a speaker or subject override the significance of the message which is being sent. What can a listener do to be more effective? The first key to effective listening is the art of concentration. If a listener positively wishes to concentrate on receiving a message his chances of success are high. It may need determination. Some speakers are difficult to follow, either because of voice problems or because of the form in which they send a message. There is then a particular need for the determination of a listener to concentrate on what is being said. Concentration is helped by alertness. Mental alertness is helped by physical alertness. It is not simply physical fitness, but also positioning of the body, the limbs and the head. Some people also find it helpful to their concentration if they hold the head slightly to one side. One

useful way for achieving this is intensive note-taking, by trying to capture the critical headings and sub-headings the speaker is referring to. Note-taking has been recommended as an aid to the listener. It also helps the speaker. It gives him confidence when he sees that listeners are sufficiently interested to take notes; the patterns of eye-contact when the note-taker looks up can be very positive; and the speaker's timing is aided-he can see when a note-taker is writing hard and can then make effective use of pauses. Posture too is important. Consider the impact made by a less competent listener who pushes his chair backwards and slouches. An upright posture helps a listener's concentration. At the same time it is seen by the speaker to be a positive feature amongst his listeners. Effective listening skills have an impact on both the listener and the speaker.

2. Make a precise of the following passage and suggest a heading:

Despite all the research every one of us catches cold and most of us catch it frequently. Our failure to control one of the commonest of all ailments sometimes seems ridiculous. Medical science regularly practises transplant surgery and has rid whole countries of such killing diseases as Typhus and the Plague. But the problem of common cold is unusually difficult and much has yet to be done to solve it. It is known that a cold is caused by one of a number of viral infections that affect the lining of the nose and other passages leading to the lungs but the confusing variety of viruses makes study and remedy very difficult. It was shown in 1960 that many typical colds in adults are caused by one or the other of a family of viruses known as rhinoviruses, yet there still remain many colds for which no virus has as yet been isolated. There is also the difficulty that because they are so much smaller than the bacteria which cause many other infections, viruses cannot be seen with ordinary microscopes. Nor can they be cultivated easily in the bacteriologist's laboratory, since they only grow within the living cells of animals or plants. An important recent step forward, however, is the development of the technique of tissue culture, in which bits of animal tissue are enabled to go on living and to multiply independently of the body. This has greatly aided virus research and has led to the discovery of a large number of viruses. Their existence had previously been not only unknown but even unsuspected. The fact that we can catch a cold repeatedly creates another difficulty. Usually, a virus strikes only once and leaves the victim immune to further attacks. Still, we do not gain immunity from colds. Why? It may possibly be due to the fact that while other viruses get into the bloodstream where antibodies can oppose them, the viruses causing cold attack cells only on the surface. Or it may be that immunity from one of the many different viruses does not guarantee protection from all the others. It seems, therefore, that we are likely to have to suffer colds for some time yet.

3. Make a precise of the following passage and suggest a heading:

There is nothing more frustrating than when you sit down at your table to study with the sincerest of intentions and instead of being able to finish the task at hand, you find your thoughts wandering. However, there are certain techniques that you can use to enhance your concentration. "Your concentration level depends on a number of factors," says Samuel Ghosh, a social counsellor. "In order to develop your concentration span, it is necessary to examine various 2 facets of your physical and internal environment," she adds. To begin with one should attempt to create the physical environment that is conducive to focussed thought. Whether it is the radio, TV or your noisy neighbours, identify the factors that make it difficult for you to focus. For instance, if you live in a very noisy neighbourhood, you could try to plan your study hours in a nearby library. She disagrees with the notion that people can concentrate or study in an environment with distractions like a loud television, blaring music etc. "If you are distracted

when you are attempting to focus, your attention and retention powers do not work at optimum levels," cautions Ghosh. "Not more than two of your senses should be activated at the same time," she adds. What that means is that music that sets your feet tapping is not the ideal accompaniment to your books. Also do not place your study table or desk in front of a window. "While there is no cure for a mind that wants to wander, one should try and provide as little stimulus as possible. Looking out of a window when you are trying to concentrate will invariably send your mind on a tangent," says Ghosh. The second important thing, she says, is to establish goals for oneself instead of setting a general target and then trying to accomplish what you can in a haphazard fashion. It is very important to decide what you have to finish in a given span of time. The human mind recognizes fixed goals and targets and appreciates schedules more than random thoughts. Once your thoughts and goals are in line, a focussed system will follow. She recommends that you divide your schedule into study and recreation hours. When you study, choose a mix of subjects that you enjoy and dislike and save the former for the last so that you have something to look forward to. For instance, if you enjoy verbal skill tests more than mathematical problems, then finish Maths first. Not only will you find yourself working harder, you will have a sense of achievement when you wind up. Try not to sit for more than 40 minutes at a stretch. Take a very short break to make a cup of tea or listen to a song and sit down again. Under no circumstances, should one sit for more than one and a half hours. Short breaks build your concentration and refresh your mind. However, be careful not to overdo the relaxation. It may have undesired effects.

4. Make a precise of the following passage and suggest a heading:

Research has shown that the human mind can process words at the rate of about 500 per minute, whereas a speaker speaks at the rate of about 150 words a minute. The difference between the two at 350 is quite large. So a speaker must make every effort to retain the attention of the audience and the listener should also be careful not to let his mind wander. Good communication calls for good listening skills. A good speaker must necessarily be a good listener. Listening starts with hearing but goes beyond. Hearing, in other words is necessary but is not a sufficient condition for listening. Listening involves hearing with attention. Listening is a process that calls for concentration. While, listening, one should also be observant. In other words, listening has to do with the ears, as well as with the eyes and the mind. Listening is to be understood as the total process that involves hearing with attention, being observant and making interpretations. Good communication is essentially an interactive process. It calls for participation and involvement. It is quite often a dialogue rather than a monologue. It is necessary to be interested and also show or make it abundantly clear that one is interested in knowing what the other person has to say. Good listening is an art that can be cultivated. It relates to skills that can be developed. A good listener knows the art of getting much more than what the speaker is trying to convey. He knows how to prompt, persuade but not to cut off or interrupt what the other person has to say. At times the speaker may or may not be coherent, articulate and well organized in his thoughts and expressions. He may have it in his mind and yet he may fail to marshal the right words while communicating his thought. Nevertheless, a good listener puts him at ease, helps him articulate and facilitates him to get across the message that he wants to convey. For listening to be effective, it is also necessary that barriers to listening are removed. Such barriers can be both physical and psychological. Physical barriers generally relate to hindrances to proper hearing whereas psychological barriers are more fundamental and relate to the interpretation and evaluation of the speaker and the message.

5. Make a precise of the following passage and suggest a heading:

The term dietary fibres refers collectively to indigestible carbohydrates present in plant foods. The importance of these dietary fibres came into the picture when it was observed that the people having diet rich in these fibres, had low incidence of coronary heart disease, irritable bowel syndrome, dental caries and gall stones. The foodstuffs rich in these dietary fibres are cereals and grains, legumes, fruits with seeds, citrus fruits, carrots, cabbage, green leafy vegetables, apples, melons, peaches, pears etc. These dietary fibres are not digested by the enzymes of the stomach and the small intestine whereas most of other carbohydrates like starch and sugar are digested and absorbed. The dietary fibres have the property of holding water and because of it, these get swollen and behave like a sponge as these pass through the gastrointestinal tract. The fibres add bulk to the diet and increase transit time in the gut. Some of these fibres may undergo fermentation in the colon. In recent years, it has been considered essential to have some amount of fibres in the diet. Their beneficial effects lie in preventing coronary heart disease, and decreasing cholesterol level. The fibres like gums and pectin are reported to decrease postprandial (after meals) glucose level in the blood. These types of dietary fibres are recommended for the management of certain types of diabetes. Recent studies have shown that the fenugreek (Methi) seeds, which contain 40 per cent gum, are effective in decreasing blood glucose and cholesterol levels as compared to other gum containing vegetables. Some dietary fibres increase transit time and decrease the time of release of ingested food in colon. The diet having less fibres is associated with colon cancer and the dietary fibres may play a role in decreasing the risk of it. The dietary fibres hold water so that stools are soft, bulky and readily eliminated. Therefore, high fibre intake prevents or relieves constipation. The fibres increase motility of the small intestine and the colon and by decreasing the transit time there is less time for exposure of the mucosa to harmful toxic substances. Therefore, there is a less desire to eat . and the energy intake can be maintained within the range of requirement. This phenomenon helps in keeping a check on obesity. Another reason in helping to decrease obesity is that the high-fibre diets have somewhat lower coefficients of digestibility. The dietary fibres may have some adverse effects on nutrition by binding some trace metals like calcium, magnesium, phosphorus, zinc and others and therefore preventing their proper absorption. This may pose a possibility of nutritional deficiency especially when diets contain marginal levels of mineral elements. This may become important constraints on increasing dietary fibres. It is suggested that an intake of 40 grams dietary fibres per day is desirable.

- 6. Write a letter to your uncle thanking him for the birthday present he had sent for you.
- 7. Write a letter to your mother about your daily routine.
- 8. Write a letter to your younger brother who has grown very weak. Suggest ways how he can improve his health.
- 9. Write a letter to your younger brother who has grown very weak. Suggest ways how he can improve his health.
- 10. Write a letter to your father requesting him to buy you a cycle.
- 11. Write an application to your Principal requesting him to grant leave. Also mention reason/reasons.
- 12. You are Nirmal/Nirmala, a student of Government High School, Gurgaon. Write an application to the Principal of your school, requesting him to allow you full fee concession.

- 13. Write an application to the Principal of your school to allow you to change your section.
- 14. You have lost your library card. Write a letter to the librarian to issue you a duplicate card.
- 15. Write a letter to the Chairman of the Municipal Board regarding insanitary conditions of the locality you live in.

Rearrange the following jumbled sentences to meaningful sentences:

- 1.are machines/to think/robots/that use/a computer brain
- 2.are sent/computer brain/in the robot's parts/messages/from the/to motors
- 3.can be/to do/of work/robots/programmed/many kinds
- 4.is the/computer science/concerned with/robotics/field/and engineering/creating robots

Two Mark Questions

- 1. How is note making important in your profession?
- 2. How many types of letters are there?
- 3. Define skimming.

UNIT-4: SPOKEN COMMUNICATION

Six Mark Questions

- 1. Write a Dialogue between a shopkeeper and a customer.
- 2. Write a Dialogue between two friends on the topic of air pollution.
- 3. Write a Dialogue between two new comers in college campus.
- 4. Write a Dialogue between a Nurse and a doctor.
- 5. Write a Dialogue between a student and a teacher.
- 6. Why is phonetics important in studying English.
- 7. Write a conversation two friends discussing about the online classes.
- 8. Describe a brief note on group discussion.
- 9. What are the good qualities of debater?

Two Mark Questions

- 1. Write a short note on hazards of cell phone usage?
- 2. Describe your favorite friend.
- 3. Define pronunciation.
- 4. Define intonation.
- 5. Write any two words in British English and American English.
- 6. Define debate.

UNIT-5: LISTENING AND READING SKILLS

Six Mark Questions

- 1. Read the following and answer the questions given below
 - "I Have a Dream" is a public speech delivered by American civil rights activist Martin Luther King Jr. during the March on Washington for Jobs and Freedom on August 28, 1963, in which he calls for an end to racism in the United States and called for civil and economic rights. Delivered to over 250,000 civil rights supporters from the steps of the Lincoln Memorial in Washington, D.C., the speech was a defining moment of the civil rights movement.
 - Beginning with a reference to the Emancipation Proclamation, which freed millions of slaves in 1863, King observes that: "one hundred years later, the Negro still is not free". Toward the end of the speech, King departed from his prepared text for a partly improvised peroration on the theme "I have a dream", prompted by Mahalia Jackson's cry: "Tell them about the dream, Martin!" In this

part of the speech, which most excited the listeners and has now become its most famous, King described his dreams of freedom and equality arising from a land of slavery and hatred. Jon Meacham writes that, "With a single phrase, Martin Luther King Jr. joined Jefferson and Lincoln in the ranks of men who've shaped modern America". The speech was ranked the top American speech of the 20th century in a 1999 poll of scholars of public address.

- Q1. What issues does Martin Luther King's speech address?
- 1.Continuation of racism
- 2. End to racism and civil and economic rights
- 3. Civil rights
- 4.Civil War
- Q2. What pushes King to speak: "I have a dream"?
- 1.He reads out the Emancipation Proclamation
- 2.He is prompted by Mahalia Jackson
- 3.he is overwhelmed by the crowd
- 4.Licoln had asked him to give the speech.
- Q3. From the last paragraph, give one word for "to leave"
- 1.Departed
- 2. Proclamation
- 3.Improvised
- 4.Address
- Q4. What is the name of martin Luther King's famed speech?
- 1. The Emancipation Proclamation
- 2.An Improvisation
- 3. A Peroration
- 4.1 Have a Dream
- Q5.In front of whom does King speak?
- 1. The civil rights supporters
- 2.His friends
- 3.Lincoln
- 4. The Negroes

Read the following and answer the questions given below

Conflict had existed between Spain and England since the 1570s. England wanted a share of the wealth that Spain had been taking from the lands it had claimed in the Americas.

Elizabeth I, Queen of England, encouraged her staunch admiral of the navy, Sir Francis Drake, to raid Spanish ships and towns. Though these raids were on a small scale, Drake achieved dramatic success, adding gold and silver to England's treasury and diminishing Spain's supremacy. Religious differences also caused conflict between the two countries. Whereas Spain was Roman Catholic, most of England had become Protestant. King Philip II of Spain wanted to claim the throne and make England a Catholic country again. To satisfy his ambition and also to retaliate against England's theft of his gold and silver, King Philip began to build his fleet of warships, the Spanish Armada, in January 1586.

Philip intended his fleet to be indestructible. In addition to building new warships, he marshaled 130 sailing vessels of all types and recruited more than 19,000 robust

soldiers and 8,000 sailors. Although some of his ships lacked guns and others lacked ammunition, Philip was convinced that his Armada could withstand any battle with England.

The martial Armada set sail from Lisbon, Portugal, on May 9, 1588, but bad weather forced it back to port. The voyage resumed on July 22 after the weather became more stable.

The Spanish fleet met the smaller, faster, and more maneuverable English ships in battle off the coast of Plymouth, England, first on July 31 and again on August 2. The two battles left Spain vulnerable, having lost several ships and with its ammunition depleted. On August 7, while the Armada lay at anchor on the French side of the Strait of Dover, England sent eight burning ships into the midst of the Spanish fleet to set it on fire. Blocked on one side, the Spanish ships could only drift away, their crews in panic and disorder. Before the Armada could regroup, the English attacked again on August 8.

Although the Spaniards made a valiant effort to fight back, the fleet suffered extensive damage. During the eight hours of battle, the Armada drifted perilously close to the rocky coastline. At the moment when it seemed that the Spanish ships would be driven onto the English shore, the wind shifted, and the Armada drifted out into the North Sea. The Spaniards recognized the superiority of the English fleet and returned home, defeated.

Q1.Sir Francis Drake added wealth to the treasury and diminished Spain's ____. unlimited power unrestricted growth territory treaties

Q2. King Philip recruited many ___ soldiers and sailors.

warlike strong accomplished timid inexperienced

Q3. The Armada set sail on May 9, 1588.

complete warlike independent isolated

Q4. The two battles left the Spanish fleet .

open to change triumphant open to attack defeated discouraged

Q5. The Armada was __ on one side.

closed off damaged alone circled

2. Read the following and answer the questions given below

Opera refers to a dramatic art form, originating in Europe, in which the emotional content is conveyed to the audience as much through music, both vocal and

instrumental, as it is through the lyrics. By contrast, in musical theater an actor's dramatic performance is primary, and the music plays a lesser role. The drama in opera is presented using the primary elements of theater such as scenery, costumes, and acting. However, the words of the opera, or libretto, are sung rather than spoken. The singers are accompanied by a musical ensemble ranging from a small instrumental ensemble to a full symphonic orchestra.

- 1. It is pointed out in the reading that opera ----.
 - A) has developed under the influence of musical theater
 - B) is a drama sung with the accompaniment of an orchestra
 - C) is not a high-budget production
 - D) is often performed in Europe
 - E) is the most complex of all the performing arts
- 2. We can understand from the reading that ----.
 - A) people are captivated more by opera than musical theater
 - B) drama in opera is more important than the music
 - C) orchestras in operas can vary considerably in size
 - D) musical theater relies above all on music
 - E) there is argument over whether the music is important or the words in opera
- 3. It is stated in the reading that ----.
 - A) acting and costumes are secondary to music in musical theater
 - B) many people find musical theater more captivating than opera
 - C) music in musical theater is not as important as it is in opera
 - D) an opera requires a huge orchestra as well as a large choir
 - E) opera doesn't have any properties in common with musical theater.

Read the following passage and answer the questions given below.

Dolphins are regarded as the friendliest creatures in the sea and stories of them helping drowning sailors have been common since Roman times. The more we learn about dolphins, the more we realize that their society is more complex than people previously imagined. They look after other dolphins when they are ill, care for pregnant mothers and protect the weakest in the community, as we do. Some scientists have suggested that dolphins have a language but it is much more probable that they communicate with each other without needing words. Could any of these mammals be more intelligent than man? Certainly the most common argument in favor of man's superiority over them that we can kill them more easily than they can kill us is the least satisfactory. On the contrary, the more we discover about these remarkable creatures, the less we appear superior when we destroy them.

- 1. It is clear from the passage that dolphins ----.
- A) don't want to be with us as much as we want to be with them
- B) are proven to be less intelligent than once thought
- C) have a reputation for being friendly to humans
- D) are the most powerful creatures that live in the oceans
- E) are capable of learning a language and communicating with humans
- 2. The fact that the writer of the passage thinks that we can kill dolphins more easily than they can kill us ----.

- A) means that they are better adapted to their environment than we are
- B) shows that dolphins have a very sophisticated form of communication
- C) proves that dolphins are not the most intelligent species at sea
- D) does not mean that we are superior to them
- E) proves that Dolphins have linguistic skills far beyond what we previously thought
- 3. One can infer from the reading that ----.
- A) dolphins are quite abundant in some areas of the world
- B) communication is the most fascinating aspect of the dolphins
- C) dolphins have skills that no other living creatures have such as the ability to think
- D) it is not usual for dolphins to communicate with each other
- E) dolphins have some social traits that are similar to those of humans.

Read the following and answer the questions given below.

Naval architects never claim that a ship is unsinkable, but the sinking of the passenger-and-car ferry Estonia in the Baltic surely should have never have happened. It was well designed and carefully maintained. It carried the proper number of lifeboats. It had been thoroughly inspected the day of its fatal voyage. Yet hours later, the Estonia rolled over and sank in a cold, stormy night. It went down so quickly that most of those on board, caught in their dark, flooding cabins, had no chance to save themselves: Of those who managed to scramble overboard, only 139 survived. The rest died of hypothermia before the rescuers could pluck them from the cold sea. The final death toll amounted to 912 souls. However, there were an unpleasant number of questions about why the Estonia sank and why so many survivors were men in the prime of life, while most of the dead were women, children and the elderly.

- 1. One can understand from the reading that ----.
 - A) the lifesaving equipment did not work well and lifeboats could not be lowered
 - B) design faults and incompetent crew contributed to the sinking of the Estonia ferry
 - C) 139 people managed to leave the vessel but died in freezing water
 - D) naval architects claimed that the Estonia was unsinkable
 - E) most victims were trapped inside the boat as they were in their cabins
- 2. It is clear from the passage that the survivors of the accident ----.
 - A) helped one another to overcome the tragedy that had affected them all
 - B) were mostly young men but women, children and the elderly stood little chance
 - C) helped save hundreds of lives
 - D) are still suffering from severe post-traumatic stress disorder
 - E) told the investigators nothing about the accident
- 3. According to the passage, when the Estonia sank, ----.
 - A) there were only 139 passengers on board
 - B) few of the passengers were asleep
 - C) there were enough lifeboats for the number of people on board
 - D) faster reaction by the crew could have increased the Estonia's

chances of survival

E) all the passengers had already moved out into the open decks

6.Medical report writing.

You are a staff nurse in the psychiatry ward.Mr.Rammohan aged 40 was admitted in your ward with the complaint of Dengue .Write a report of this to your clinical instructor.

7. Medical report writing.

You are a staff nurse in the psychiatry ward.Ms.lalitha aged 34 was admitted in your ward with the complaint of Alzheimer disorder(memory loss) .Write a report of this to your clinical instructor.

8. Medical report writing.

You are a staff nurse in the psychiatry ward.Mr.Ranjith aged 50 was admitted in your ward with the complaint of Obsessive compulsive disorder .Write a report of this to your clinical instructor.

9. Medical report writing.

You are a staff nurse in the special ward.Mrs. Jaya priya aged 30 was admitted in your ward with the complaint of Diarrhea .Write a report of this to your clinical instructor.

10.Medical report writing.

You are a staff nurse in the psychiatry ward.Mr.Vijay aged 20 was admitted in your ward with the complaint of Anxiety disorder .Write a report of this to your clinical instructor.

- 11. Write a Comprehensive Report on the outbreak of Covid-19 in your Locality.
- 12. Write a Comprehensive Report on the outbreak of Malaria in your Locality.
- 13. Write a Comprehensive Report on the outbreak of Dengue in your Locality.
- 14. Write a Comprehensive Report on the outbreak of Cholera in your Locality.
- 15. Write a Comprehensive Report on the outbreak of Pneumonia in your Locality.

Two Mark Questions

- 1. How to make effective reading?
- 2. What are the types of reading?
- 3. Why medical report writing is important in your profession?
- 4. What are the skills you should have for successful Telephone conversation

SECOND YEAR

PAPER 5- CLINICAL PHARMACOLOGY

UNIT 1: ANTISIALOGUES, ANTIEMETICS

6 Marks

- 1. Compare and contrast pharmacology of atropine & glycopyrolate.
- 2. Discuss briefly about the indications, contraindications systemic effects, and adverse effects of glycopyrolate.
- 3. Discuss briefly about the pharmacodynamics &clinical uses of atropine.
- 4. Discuss briefly about mechanism of action, uses& adverse effects of proton pump inhibitors.
- 5. Classification of antiemetic's.
- 6. Write about the mechanism of action & pharmacokinetics of ondanseteron?
- 7. Write the clinical uses of atropine?
- 8. Mention the clinical use of glycopyrolate?
- 9. Mention the types of muscarinic receptors & their location?
- 10. Mention the drugs used to treat PONV?
- 11. What are the prophylactic drugs used for PONV?

3 Marks

- 1. What is meant by atropine flush?
- 2. What is meant by atropine fever?
- 3. Mention any 2 clinical uses of atropine?
- 4. Mention any 2 clinical uses of glycopyrolate?
- 5. What is the premedication dose of glycopyrolate?
- 6. Mention any 2 adverse effects of ondanseteron?
- 7. Mention any 2 adverse effects of metaclopromide?
- 8. Mention the clinical uses of dexamethasone?
- 9. Mention the adverse effects of dexamethasone?
- 10. Mention any 2 clinical uses of ondanseteron?
- 11. Mention any 2 clinical uses of metaclopromide?
- 12. Mention the vagolytic dose of atropine.
- 13. Mention the antisialogue of glycopyrolate

UNIT 2: SEDATIVES/ANXIOLYTICS AND NARCOTICS

- 1. What is the mechanism of action and clinical uses of benzodiazepines?
- 2. Explain about the systemic effects of diazepam?
- 3. Write any 5 clinical uses of midazolam?
- 4. Explain about the pharmacokinetics of midazolam?
- 5. Compare & contrast of neuroaxial opioids v/s intravenous opioids?
- 6. Describe the pharmacokinetics of morphine?
- 7. How are the pharmacokinetics of fentanyl different from morphine?
- 8. List the commonly used opioids agonist and there relative potencies?
- 9. What are the different types of opioids receptors and the effects at these receptors?
- 10. Discuss the routes of delivery for analgesic drugs with example?
- 11. Classification of opioids receptors?

- 12. Write short note on opioids antagonist?
- 13. Discuss briefly about the clinical uses, adverse effects of pentazocine?
- 14. Mention the clinical uses & adverse effects of fentanyl?
- 15. Classifications of NSAIDS?
- 16. Explain briefly about paracetamol poisoning -clinical features, toxicity and treatment.
- 17. Classifications of OPIODS?

- 1. Write about benzodiazepine antagonist?
- 2. Clinical uses of lorazepam?
- 3. Mention any 4 clinical use of midazolam?
- 4. Mention the dose of diazepam for induction & sedation?
- 5. Mention the dose of midazolam for premedication & sedation?
- 6. What are the side effects of morphine?
- 7. What about naloxone?
- 8. Write about transdermal fentanyl patch?
- 9. Mention the side effects of diclofenac?
- 10. Clinical uses of paracetamol?
- 11. Write dose of fentanyl, morphine for induction?

UNIT 3: H2 BLOCKERS & ANTACIDS

3 Marks

- 1. Name any 2 drugs for treating peptic ulcer disease?
- 2. Mention the clinical uses of ranitidine?
- 3. Mention the adverse effects of ranitidine?
- 4. Write about the pharmacokinetics of ranitidine?
- 5. Clinical uses of cimetidine.
- 6. Clinical uses of famotidine.
- 7. Mention the advantage of gelusil?
- 8. Mention any 2 indications for using sodium citrate?
- 9. Mention the advantages of muccine gel?

UNIT 4: INDUCTION AGENTS

10 Marks

- 1. Discuss briefly about the mechanism of action, systemic effects of propofol?
- 2. Explain about the pharmacokinetics, pharmacodynamics of thiopentone sodium?
- 3. Discuss briefly about the pharmacokinetics, systemic effects of ketamine?
- 4. Compare & Contrast pharmacology of thiopentone and propofol.
- 5. Compare& Contrast pharmacology of ketamine and propofol.

- 1. Discuss briefly about the systemic effects of thiopentone sodium?
- 2. Explain about the pharmacokinetics of thiopentone?
- 3. Discuss briefly about the complication of thiopentone?
- 4. Discuss briefly about the systemic effects of propofol?
- 5. Mention the complication of propofol?

- 6. Explain about the clinical uses of propofol?
- 7. Mention the advantage & contraindication of ketamine?
- 8. Explain briefly about the systemic effects of ketamine?
- 9. Mention the clinical uses of ketamine?

- 1. Mention any 4 physical properties of thiopentone sodium?
- 2. Mention the composition of propofol?
- 3. Mention any 2 physical properties of propofol?
- 4. Write any 2clinical uses of ketamine?
- 5. Mention any 4 contraindications of ketamine?
- 6. Any 2 clinical uses of propofol?
- 7. Write about Etomidate?
- 8. What are the drugs that decrease ICT?
- 9. Mention the advantage of Etomidate?
- 10. What is meant by dissociate ANAESTHESIA?
- 11. Mention the clinical uses of thiopentone sodium?
- 12. Mention the contraindication of thiopentone?

UNIT 5: MUSCLE RELAXANTS

6 Marks

- 1. Classify neuromuscular blockers?
- 2. Describe the difference between phase1 and phase2 block?
- 3. Describe the mechanism of action of NMBD at neuromuscular junction?
- 4. Discuss about the systemic effect of depolarizing agents?
- 5. Distinguish between steroidal & benzyl Isoquinolinium compound?
- 6. What are the factors prolonging the nm blockade?
- 7. Explain briefly about the pharmacokinetics & adverse effects of vecuronium?
- 8. Write about the clinical effects & pharmacokinetics of atracurium?
- 9. Mention the clinical uses of neostigmine?
- 10. Compare & contrast non-depolarizing and depolarizing muscle relaxants.
- 11. Write about the systemic effects of NMBDS?

3 Marks

- 1. What are the signs of adequate reversal?
- 2. How is succinvlcholine metabolized?
- 3. What is the intubating dose of succinylcholine?
- 4. Mention the side effects of succinylcholine?
- 5. What is the choice of NMBD influenced by?
- 6. Difference between cisatracurium&atracurium?
- 7. What are the drugs which decreases pseudo cholinesterase?
- 8. Name the conditions increasing pseudo cholinesterase?

UNIT 6: INHALATIONAL AGENTS

- 1. Discuss the factors which increase & decrease MAC?
- 2. Discuss the factors which influence transfer of inhaled anesthetic from machine to lungs?

- 3. What is a blood gas partition co efficient? Mention BG coefficient for the drugs?
- 4. What is second gas effect?
- 5. What is diffusion hypoxia?
- 6. Discuss the effects of inhaled anesthetics on mean arterial pressure, cardiac output, SVR?
- 7. What are the effects of inhaled anesthetics on cerebral blood flow?
- 8. Mention the properties of nitrous oxide?
- 9. Discuss about the systemic effects, contraindication of N2O?
- 10. Discuss briefly about MAC? Write MAC value for any 4 agents?

- 1. What are the MAC values of isoflurane?
- 2. Mention the complication of halothane agents?
- 3. Mention the anesthetic properties of isoflurane?
- 4. Mention the anesthetic properties of desflurane?
- 5. What are the agents that increase ICT?
- 6. Write about laughing gas?
- 7. Mention the contraindication of nitrous oxide?

UNIT 7: REVERSAL AGENTS

3 Marks

- 1. Mention the dose of neostigmine?
- 2. Mention the adverse effects of neostigmine?
- 3. What is the dose of atropine for reversal?
- 4. What is the dose of glycopyrolate for reversal?
- 5. Mention some conditions where atropine is preferred to glycopyrrolate for reversal?

UNIT 8: LOCAL ANESTHETICS

10 Marks

- 1. Write about the classification of local anesthetics? Compare any 2 local anesthetics.
- 2. Explain the mechanism of action of local anesthetics. Discuss the preparation & therapeutic uses of xylocaine& bupivacaine?
- 3. Write about the various concentrations of bupivacaine and its clinical uses.

6 Marks

- 1. Discuss briefly about local anesthetic toxicity?
- 2. What are the available preparation of xylocaine& one clinical uses of each?
- 3. Explain briefly about the systemic effects of LA?
- 4. Classification of local Anesthetic drugs?
- 5. Compare & contrast bupivacaine &levo-bupivacaine.
- 6. Write about the clinical uses & advantages of Ropivacaine.

- 1. Mention any 2 clinical uses of 2% lignocaine jelly?
- 2. Mention the indication of emia ointment & its adverse effects?

- 3. What are the available percentage of xylocaine?
- 4. Name the drugs used for epidural ANAESTHESIA?
- 5. Clinical symptoms of toxic reactions of LA?
- 6. Mention the advantages of amide linked local anesthetic?
- 7. Mention the disadvantage of ester linked local anesthetic?
- 8. Mention thetoxicdose of lignocaine & bupivacaine?
- 9. List out the difference between xylocaine 2% and xylocard 2%?
- 10. Mention the advantages of lignocaine with adrenaline 2%?
- 11. Mention the contraindications of lignocaine with adrenaline %?

UNIT 9: EMERGENCY DRUGS

6 Marks

- 1. Discuss the mode of administration, dilution, dosage, systemic effects, indications, side effects of adrenaline?
- 2. Classification of diuretics.
- 3. Mention the clinical uses of adrenaline?
- 4. Write about dopaminergic receptors and drugs acting on it?
- 5. Mention the therapeutic uses of nor adrenaline?
- 6. Discuss briefly about the systemic effects& clinical uses of dobutamine?
- 7. Explain briefly about pharmacokinetics & clinical uses of ephedrine?
- 8. Clinical uses of xylocard?
- 9. Mention the clinical uses, systemic effects, dosage& mode of administration of vasopressin?
- 10. Classify oral hypoglycemic agents?

3 Marks

- 1. Write any 2 clinical uses of furosemide?
- 2. Write any 2 drugs for bronchial asthma treatment?
- 3. Mention the therapeutic uses of hydrocortisone?
- 4. Write any 4 indications of steroid therapy?
- 5. Role of oxytocin during LSCS?
- 6. Name any 2 uterine relaxants used clinically?
- 7. Write about adverse effects of furosemide?
- 8. Name any four emergency conditions in which hydrocortisone is used?
- 9. Name the drugs used in hypertensive emergencies?
- 10. Name any 2 side effects of insulin?
- 11. Mention any 2 anticonvulsant drugs?
- 12. Mention four drugs for congestive heart failure?

UNIT 10: SYSTEMIC DRUGS

- 1. What are the drugs used in anaphylactic shock?
- 2. Mention the location of alpha receptors?
- 3. Mention the location of beta receptors?
- 4. Define inotropes? Name any 2 drugs?
- 5. Mention the indications of dopamine?
- 6. Mention the indications of dobutamine?
- 7. Write the dosage atropine and glycopyrolate?

- 1. Classify anti arrhythmic drugs with suitable examples?
- 2. Explain the mechanism of action & therapeutic uses of any one class of anti arrhythmic drug?
- 3. Write about classification of bronchodilators add note on theophylline?
- 4. Classify antihypertensive drugs?
- 5. Classify beta blockers. Write about the clinical uses & adverse effects of beta blockers?
- 6. Therapeutics uses & adverse effects of beta blockers?
- 7. Classify antihistamines. Explain briefly the clinical uses of antihistamines?
- 8. Explain the mechanism of action, pharmacodynamics of NTG?
- 9. Mention the clinical uses & adverse effects of NTG?
- 10. Compare & contrast NTG &SNP?
- 11. Classification of diuretics?
- 12. Clinical uses of furosemide?
- 13. Discuss about clinical uses & adverse effects of metformin?
- 14. Classify oral hypoglycemia agents?
- 15. Mention the uses & adverse effects of mannitol?
- 16. Discuss in detail about the clinical uses& adverse effects and mechanism of action of calcium channel blockers?
- 17. Mention any 5 adverse effects of systemic steroids on prolonged drug therapy?

UNIT 11: MISCELLANEOUS DRUGS

3 Marks

- 1. Write about the composition of ringer lactate?
- 2. Mention the contraindication of RL?
- 3. Write about haemaccel?
- 4. Mention any 2 clinical uses of protamine?
- 5. Mention the clinical uses of ketorolac?
- 6. Name any 2 antipsychotic drugs?
- 7. List out the commonly used surgical prophylactic antibiotics?
- 8. Mention the commonly uses IV fluids inside the OT?
- 9. Difference between crystalloids and colloids?

PAPER 6 - RESPIRATORY DISEASES

- 1. Write in detail the definition aetiology, pathogenesis, clinical features and management of Asthma.
- 2. Diagnosis and treatment of Pulmonary Tuberculosis.
- 3. Classify pulmonary hypertension. Drugs used in treatment of Pulmonary hypertension.
- 4. Pulmonary Fibrosis Definition, Pathogenesis, Clinical Features, Diagnostic Criteria and Management.
- 5. Hypoventilation and Hyperventilation Causes and Management.

- 6. Pulmonary embolism Clinical Features, Pathogenesis, Diagnostic Criteria and Management.
- 7. Chest Trauma Types, Complications and Management.
- 8. Write the definition, causes, treatment and preventive strategies of Hospital acquired pneumonia (HAP).
- 9. Aetiology, Clinical features, diagnosis and management of Bronchiectasis.
- 10. Classify write the causes and management of respiratory failure.
- 11. Write in detail about examination on thorax and lungs.
- 12. Adult Respiratory Distress Syndrome Pathogenesis, Ventilatory and Non Ventilatory Management.
- 13. GullianBarre Syndrome -Pathogenesis, Diagnosis, Clinical Assessment and Management.
- 14. Define COPD. Write a note on it's etiology, pathophysiology, clinical features and management.
- 15. Define ARDS, write on its pathophysiology, ventilatory and non ventilatory management.
- 16. Write in detail about acid base regulation.
- 17. Define ventilator associated pneumonia? What are the risk factors for VAP? Write the preventive measures for VAP?
- 18. Describe the various methods to diagnose pulmonary tuberculosis.
- 19. Classify and elaborate the drugs used in the management of asthma.
- 20. Classify pneumothorax, Clinical features, Diagnosis management of pneumothorax.
- 21. Classify pulmonary diseases, write the clinical features and management of Idiopathic pulmonary fibrosis.
- 22. Write the aetiology, pathogenesis, diagnosis and management of acute pulmonary thrombo-embolism.

- 1. Enumerate on Breathing Patterns.
- 2. Respiratory Acidosis Causes, Compensation and Management.
- 3. Stepwise Management of Acute Exacerbation of Chronic Obstructive
- 4. Pulmonary Disease.
- 5. Ventilation Perfusion Mismatch.
- 6. Enumerate on Chest Wall Deformities.
- 7. Thrombolysis in Pulmonary Embolism.
- 8. Community acquired pneumonia (CAP).
- 9. Modified wells criteria.
- 10. Idiopathic pulmonary fibrosis (IPF).
- 11. Management of Pneumothorax.
- 12. Kyphoscoliosis.
- 13. Chronic bronchitis.

- 14. Causes of bronchiectasis.
- 15. Management of acute exacerbation of chronic obstructive pulmonary disease
- 16. (COPD).
- 17. Non Ventilatory Management of Adult respiratory Distress Syndrome.
- 18. Henderson Hasselbach Equation.
- 19. Postural Drainage and Chest Physiotherapy in Bronchiectasis.
- 20. Enumerate on Vesicular and Adventitious Breath Sounds.
- 21. GullianBarre Syndrome Diagnostic Criteria and Management.
- 22. Diabetic Ketoacidosis.
- 23. GOLD criteria for diagnosing COPD.
- 24. Pleural Effusion Diagnosis and Management.
- 25. Diagnostic Criteria for Pulmonary Fibrosis.
- 26. Hypoventilation Definition, Causes and Management.
- 27. Beta 2 agonist.
- 28. Blue bloaters and pink puffers.
- 29. Dyspnea definition, grades and management.
- 30. Flail chest definition, complication and management.
- 31. Tension pneumothorax and its management.
- 32. Chest physiotherapy.
- 33. Briefly explain on shunt and dead space.
- 34. Postural Drainage and Chest Physiotherapy in Atelectasis.
- 35. VAP Prevention Bundle.
- 36. Anti Tuberculus Treatment.
- 37. Stepwise Management of Acute Exacerbation of Chronic Obstructive
- 38. Pulmonary Disease.
- 39. Pink Puffers and Blue Bloaters.
- 40. Tension Pneumothorax.
- 41. Pulmonary Embolism Diagnosis and Management.
- 42. Berlin definition for ARDS.
- 43. Causes of respiratory acidosis.
- 44. Management of Pulmonarythrombo-embolism.
- 45. Diagnosis of Pulmonary tuberculosis.
- 46. Pulmonary function test (PFT) findings in Idiopathic pulmonary fibrosis.
- 47. Management of acute exacerbation of bronchial asthma.
- 48. Tension pneumothorax- diagnosis and management.
- 49. Management of bronchiectasis.
- 50. Ventilator management of ARDS.
- 51. Postural Drainage and Chest Physiotherapy in Atelectasis.
- 52. Draw, label and explain the 2 bottle Intercostal drain (ICD) system.
- 53. Respiratory alkalosis.
- 54. GullianBairre syndrome (GBS).
- 55. Chronic bronchitis and Emphysema.

- 56. Define VAP and explain VAP bundle.
- 57. Classify pulmonary hypertension.

- 1. Borg Scale.
- 2. Acid Fast Bacilli Stain.
- 3. Pulmonary Embolism Severity Index.
- 4. Metabolic Alkalosis.
- 5. Berlin Definition.
- 6. Hypertensive Crisis.
- 7. Indications for Mechanical Ventilation in GullianBarre syndrome.
- 8. Open Pneumothorax.
- 9. Define Ventilator Associated Pneumonia.
- 10. Define A-a gradient.
- 11. Metabolic acidosis.
- 12. VAP prevention bundle.
- 13. Hypoventilation and its causes. 5. Write a note on V/Q mismatch.
- 14. Pulmonary fibrosis diagnostic criteria.
- 15. Glosgow coma scale.
- 16. Auscultatory sounds.
- 17. Classification of pulmonary diseases.
- 18. Causes of metabolic acidosis.
- 19. Salbutamol.
- 20. MMRC grading of dyspnoea.
- 21. Streptococcus pneumonia.
- 22. Dead space.
- 23. Wheeze.
- 24. Clinical findings in large pleural effusion.
- 25. Define COPD.
- 26. Causes of hypoventilation.
- 27. Light's criteria.
- 28. Shunt.
- 29. Ipratropium bromide.

- 30. Peak expiratory flow rate (PEFR).
- 31. Cheyne- Stokes breathing.
- 32. Flail chest.
- 33. Empyema.
- 34. Name four restrictive lung diseases.
- 35. Write an ATT prescription for a 60kg man with sputum positive pulmonary tuberculosis.
- 36. Define asthma.
- 37. Acid fast bacilli.
- 38. Heparin.
- 39. Role of spacer device.
- 40. Clinical findings in lung collapse.
- 41. Define clubbing and grades of clubbing.
- 42. Causes of type 2 respiratory failure.
- 43. Lactic acidosis.
- 44. Crackles.
- 45. GOLD definition of COPD.
- 46. Rifampicin.
- 47. Flail chest.
- 48. PEFR in asthma.
- 49. Management of sub-massive pulmonary embolism.
- 50. Write five causes of haemoptysis.
- 51. Gene Xpert.
- 52. GINA definition of asthma.
- 53. Draw a single bottle system.
- 54. Virchow's triad.

PAPER 7 - CARDIOVASCULAR DISEASES

10 Marks

- 1. Myocardial Infarction Definition, Etiology, Risk Factors, Pathogenesis, Diagnosis and Management.
- 2. Define Arrhythmia. Enumerate on Tachyarrhythmias and their management.
- 3. Pulmonary Embolism Pathogenesis, Clinical Features and Management
- 4. Classify congenital heart diseases. Write note on pathophysiology and management Tetralogy of Fallot.
- 5. Write the Dana point classification for Pulmonary hypertension. Write the drugs used in the management of Pulmonary hypertension.
- 6. Write the causes, Pathophysiology and management of Cardiogenic pulmonaryoedema.
- 7. Ventricular tachycardia Diagnosis, Features, and Management.
- 8. Anticoagulation and Thrombolysis in Pulmonary Embolism.
- 9. Pulmonary edema etiology, pathogenesis, clinical features, diagnosis, Ventilator and non entilator management.
- 10. Classification of arrhythmias, diagnosis and treatment for tachyarrhythmias.
- 11. Define shock and its types. Explain on cardiogenic shock clinical features, diagnosis and treatment.
- 12. Definition, types, pathogenesis clinical features, diagnosis and management of Pulmonary edema?
 - 13 Write in detail about causes, types, diagnosis and management of heart failure.
 - 14. How does coronary artery disease lead to Myocardial infarction? What are clinical manifestations, diagnosis and management of both?
 - 15. What is pulmonary hypertension? Explain about its pathogenesis, clinical features, diagnosis and management.
 - 16. Explain in detail about congenital heart diseases.
 - 17. What are acute cardiac emergencies? Write in detail about one condition.
 - 18. Write in detail about pathogenesis, clinical features, diagnosis and management of pulmonary embolism? What are the responsibilities of respiratory therapist in managing such patients?
 - 19. Explain in detail about endocarditis and myocarditis.
 - 20. What are arrhythmias? Explain in detail about ventricular tachy-arrhythmias

- 1. Difference between cardio version and defibrillation.
- 2. Management of acute pulmonary thromboembolism.
- 3. Duke's criteria.
- 4. Ventricular septal defect.
- 5. Myocarditis.
- 6. Pericardial tamaponade.
- 7. Mitral stenosis.
- 8. Types of heart failure.
- 9. Obstructive Shock.
- 10.. Mitral Stenosis Definition and Severity.

- 11. Pulmonary Fibrosis Definition and Diagnostic Criteria.
- 12. Types of cardiomyopathy.
- 13. Endocarditis Diagnosis and Management.
- 14. Tetralogy of Fallot Left to right Shunt.
- 15. Enumerate on Bradyarrythmias and Management.
- 16. Pulmonary Hypertension Signs and Symptoms, Clinical Classification.
- 17. 1. Vasopressors.
- 18.. Right Ventricular Failure.
- 19. Medical Management of Pulmonary Edema.
- 20. Fibrinolysis Criteria and Contraindications.
- 21. Mitral Regurgitation Severity and management.
- 22. Myocarditis Pathogenesis and management.
- 23. Atrial Fibrillation.
- 24. Atrial Septal defect.
- 25. NSTEMI.
- 26. Ionotropic.
- 27. Diagnosis criteria of Endocarditis.
- 29. Atrial fibrillation Diagnosis and treatment.
- 30. Fibrinolysis criteria and contraindications.
- 31. Right ventricular failure.
- 32. Bedside cardiac assessment.
- 33. Write in detail about strategies for diagnosis of pulmonary embolism.
- 34. What is TOF? Write in detail about the same.
- 35. Explain about prophylaxis for pulmonary embolism.
- 36. What are the medical and surgical management of mitral valvular disorders?
- 37. Write about causes and management of cardiomyopathies.
- 38. What is atrial fibrillation and write its symptoms?
- 39. Differences between atrial and ventricular tachycardia.
- 40. Write about cardiac rehabilitation.
- 41. What are the types of heart failure and how will you differentiate it?
- 42. Write about mitral valvular heart disease.
- 43. Write a brief note on endocarditis.
- 44. Write the differences between tachy-arrhythmias and brady-arrhythmias.
- 45. Write in detail about ventricular septal defect.
- 46. Risk factors and prevention for coronary artery disease.
- 47. Write about diagnosis and management of myocardial infarction.

- 1. Wells score.
- 2. Aspirin.
- 3. ECG findings Atrial fibrillation.
- 4. Cardiac enzymes.
- 5. TIMI score.
- 6. Arterial blood gas findings in Pulmonary embolism.
- 7. Unstable angina.

- 8. Causes of right to left shunt.
- 9. Asystole.
- 10. Complete heart block.
- 11. Normal pulse rate define tachycardia and bradycardia.
- 12. Name three congenital heart diseases.
- 13. List the risk factors for hypertension.
- 14. List the causes for tricuspid valve regurgitation.
- 15. What are the various ABG findings in patients with acute pulmonary embolism?
- 16. What are the causes of cardiogenic shock?
- 17. What are the symptoms of right sided heart failure?
- 18. What is the management of infective endocarditis?
- 19. What is defibrillator? When is it used?
- 20. List the anti-failure medications.
- 21. What is cardiogenic shock?
- 22. What are the symptoms and predisposing factors for pulmonary embolism?
- 23. Prevention of coronary artery disease.
- 24. Difference between acyanotic and cyanotic heart diseases.
- 25. Write about the management of mitral valve regurgitation.
- 26. What is cardiomyopathy? What are its types?
- 27. Write about the management of Pulmonary embolism.
- 28. Causes of cardiac failure.
- 29. How will you differentiate cardiac and respiratory failure?
- 30. Precautions to be taken in a patient with pacemaker.
- 31. Write the definition and clinical features of pulmonary hypertension.
- 32. What is mitral stenosis? List its symptoms.
- 33. ECG findings of ventricular tachycardia.
- 34. What are the signs and symptoms of arterial septal defect?
- 35. What are the causes of myocarditis?
- 36. Management of cardiogenic shock.
- 37. List the conditions when defibrillator is used.
- 38. What is the management of Ischemic heart diseases?
- 39. What is the treatment for endocarditis?
- 40. Management algorithm for ventricular fibrillation.

PAPER 8 - DIAGNOSTIC TECHNIQUES FOR CARDIO RESPIRATORY DIEASES

- 1. Pressure Volume Loop Theory behind its use for defining PEEP.
- 2. Obstructive Sleep Apnea Diagnosis and Management.
- 3. Role of Arterial Blood Gas in a dyspneic patient in Emergency
- 4. Common causes for respiratory Acidosis and how do you manage them?
- 5. Draw subdivisions of Lung Volume Recorded by Spirometer and define each one.
- 6. Compare and Contrast Pros and Cons of Arterial Blood Gas and Pulse oximetry

- 7. Electrocardiography Features of a Normal waveform and Steps in Interpretation.
- 8. Body Plethysmography Technique and Significance.
- 9. Anion gap Definition, Causes, High Anion Gap Acidosis, Mixed Anion Gap Acidosis and Non Anion Gap acidosis
- 10. Role of Spirometry in assessment of patients presenting with breathing difficulty.
- 11. Limited channel sleep study.
- 12. Thoracoscopy.
- 13. Allergic skin test.
- 14. Polysomnography.
- 15. AutoCPAP trial.
- 16. Limited Channel Sleep study.
- 17. Pulse Oximetry.
- 18. Diffusion Capacity.
- 19. Capnography and capnometry during mechanical ventilation.
- 20. Methacholine challenge test.
- 21. Enumerate and define different pulmonary function measurements obtained with spirometry.

- 1. Nocturnal pulse oxymetry.
- 2. CT thorax findings in patient with bronchiectasis.
- 3. Nitrogen washout technique.
- 4. Continuous positive airway pressure ventilation.
- 5. Six min walk test.
- 6. Residual volume.
- 7. Chest X ray findings in a case with lung cancer.
- 8. 1. Role of Treadmill test in a patient presenting with off and on chest pain on climbing stairs.
- 9. Capnography.
- 10. Role of Chest X-ray in diagnosis the of Tuberculosis.
- 11. Enumerate and draw various kinds of Flow Volume loops in Spirometry.
- 12. ECG monitoring in ICU / HDU.
- 13. Role of Echocardiography in patient presenting with breathing difficulty
- 14. Radial EBUS.
- 15. Ultrasound chest signs for diagnosis of Pneumothorax.
- 16. Apnea Hypopnea Index.
- 17. Transbronchial needle (TBNA) aspiration cytology for mediastinal lymph nodes.
- 18. Ultrasound guided Pleural biopsy.
- 19. Function Residual Volume.
- 20. Bronchial biopsy.
- 21. Total Lung capacity.
- 22. Maximum Mid expiratory flow rate (MMEF).
- 23. Residual volume.

- 24. Transbronchial lung biopsy.
- 25. ECG findings in Ventricular arrhythmias.
- 26. Echocardiogram in Pulmonary Diseases.
- 27. ECG monitoring in ICU / HDU.
- 28. Bronchoalveolar Lavage.
- 29. Diffusion capacity.
- 30. Investigations to confirm the diagnosis of Pneumothorax
- 31. DLCO / VA

- 1. Sputum smear for AFB.
- 2. Causes of Failure to record SpO2 by Pulse Oximeter.
- 3. ABG findings in Type 2 Respiratory failure.
- 4. BODE index.
- 5. Diagnostic utility of Chest Ultrasound in ICU.
- 6. ABG findings in Obesity hypoventilation syndrome.
- 7. Nocturnal Pulse Oxymetry.
- 8. Steps in Disinfection of Bronchoscope.
- 9. Indications of Thoracoscopy.
- 10. Indications of Radial EBUS.
- 11. Contraindications of Cardiopulmonary Exercise test.
- 12. Venous Blood Gas.
- 13. Role of Lower limit of Normal volumes in Spirometry.
- 14. Draw a Flow volume graph showing insufficient effort during spirometry.
- 15. Compliance test for Patient using CPAP.
- 16. Write names of two types of culture for Mycobacterium tuberculosis.
- 17. Two indications for Induced Sputum test.
- 18. How to measure Mantoux test result?
- 19. Instructions to patient prior to bronchoscopy
- 20. Indications of Medical Thoracoscopy.
- 21. Contraindications of Medical Thoracoscopy.
- 22. Draw a Flow Volume graph showing cough during Spirometry maneuver.
- 23. Contraindications of Spirometry.
- 24. Write name of two tests to assess small airway disease.
- 25. Name of Allergic skin test for Allergic BronchopulmonaryApsergillosis.
- 26. Indications for Cadiopulmonary Exercise test.
- 26. Auto PEEP.
- 28. Chest X ray sings of Lobar Collapse.
- 29. Indications of MRI chest.
- 30. Two examples of Diagnostic utility of Chest Ultrasound in ICU.
- 31. ABG findings in Obesity hypoventilation syndrome.
- 32. ECG findings in a patient with Myocardial infarction.
- 33. Echocardiography findings in a patient presenting with Acute Pulmonary Embolism and low blood pressure.
- 34. Causes of Respiratory Alkalosis.

- 35. Use of PEFR in monitoring of Asthma.
- 36. Slow vital Capacity.
- 37. Anion gap.
- 38. Chest X ray signs of pneumothorax.
- 39. Draw flow volume loops of spirometry in a patient with tracheal tumour.
- 40. Causes of metabolic acidosis.
- 41. Write an ABG findings showing type two respiratory failure.
- 42. Helium dilution technique.
- 43. CPAP compliance.
- 44. ABG in diabetic ketoacidosis.
- 45. Anatomical and physiologic dead space.
- 46. FEF 25% 75%.

THIRD YEAR

PAPER 9 - RESPIRATORY THERAPY TECHNIQUES - I

- 1. Define acute respiratory failure. How will you differentiate type I and hypercapnic respiratory failure? Discuss different causes of respiratory failure.
- 2. Classify ventilators and describe how they work?
- 3. What are the different alarms in a mechanical ventilator? How will you trouble shoot each of them?
- 4. . Describe advantages and disadvantages of non-invasive ventilation.
- 5 Discuss the effects of mechanical ventilation of oxygenation and ventilation.
- 6. A patient on invasive mechanical ventilation developed sudden distress with drop in oxygen saturation. How will you approach this situation?
- 7. Define weaning. Explain protocol on weaning and its criteria in detail.
- 8. Define PEEP. Explain its effect on hemodynamics and pulmonary system in detail.
- 9. Define NIV its indication and complications. Discuss on initiation and monitoring of NIV.
- 10. Write a brief note on indication, complication, supportive care of mechanical ventilation.
- 11. Define ARDS. Write a note on ventilation strategies in an ARDS patient. Explain the physiological effects of prone ventilation.
- 12. Define recruitment maneuver, various types and complication of recruitment maneuver.
- 13. Hypoxaemic respiratory failure.
- 14. Monitoring of a mechanically ventilated patients.
- 15. Define acute exacerbation of COPD. Write on its ventilatory and medical Management
- 16. Chronic Respiratory Failure.
- 17. Types of Ventilators and their mode of function, advantage and disadvantages.
- 18. A patient on Mechanical ventilation develops respiratory distress and Oxygen desaturation. Enumerate steps of trouble shooting this problem.
- 19. Hypercapnic Respiratory Failure.
- 20. Complications of Mechanical Ventilation.

21. Effects of Mechanical ventilation on Ventilation and Oxygenation

- 1. What are the indications of non-invasive ventilation in chronic obstructive pulmonary disease?
- 2. Discuss the detrimental effects of inappropriate Positive End Expiratory Pressure during mechanical ventilation.
- 3. Discuss patient positioning during mechanical ventilation.
- 4. Describe Automatic tube compensation.
- 5. Explain the ventilatory strategy for a patient with raised intracranial pressure.
- 6. Describe negative pressure ventilation.
- 7. Describe the risk factors for nosocomial pneumonia.
- 8. Describe the techniques for minimizing effects of auto-PEEP (Positive End Expiratory Pressure).
- 9. Explain ventilation perfusion matching in normal and diseased state.
- 10. Describe the control variables of a ventilator.
- 11. Describe the beneficial effects of appropriate PEEP (Positive End Expiratory Pressure).
- 12. Describe Adaptive Servo ventilation.
- 13. What are the cardiovascular effects of positive pressure mechanical ventilation?
- 14. What is the complications related to positive pressure ventilation?
- 15. What are the advantages and disadvantages of Pressure Control Ventilation?
- 16. Describe the various modes of invasive ventilation.
- 17. Differentiate asthma and COPD. Explain in detail on ventilator management in a exacerbation of COPD.
- 18. Neuromuscular blocking agents.
- 19. Pressure regulated volume control (PRVC).
- 20. Define Auto PEEP. Illustrate Auto PEEP in a flow volume loop. How will you optimize Auto PEEP in a patient on mechanical ventilation.
- 21. Alarm settings.
- 22. Write a note on care of artificial airways in mechanical ventilation.
- 23. Nutrition in COPD.
- 24. Postural drainage.
- 25. Resistance and compliance.
- 26. Extra pulmonary effects of positive pressure ventilation.
- 27. ECMO.
- 28. Weaning indices.
- 29. Techniques to improve aerosol drug delivery in mechanical ventilation.
- 30. Write a short note on transportation of critically ill patients.
- 31. Alarm settings.
- 32. Write a note on interpretation of ABG
- 33. Define capnography and its significance.
- 34. Prone ventilation.
- 35. Indication and complication of mechanical ventilation.
- 36. Define dead space and its types.
- 37. Extubation criteria, protocol and complication.

- 38. Types of respiratory failure.
- 39. Ventilator graphics explain on loops.
- 40. Define VAP. Explain on VAP prevention bundle.
- 41. Respiratory muscle weakness.
- 42. Non invasive Ventilation in Chronic conditions.
- 43. Invasive ventilatory management of patient with COPD.
- 44. Negative pressure Ventilation.
- 45. Weaning from Mechanical Ventilator.
- 46. Difference between Continuous (CMV) and Intermittent (IMV) mandatory Ventilation.
- 47. Targeting schemes of Mechanical Ventilator.
- 48. Alarm settings in Ventilators
- 49. Non invasive Ventilation in Acute conditions.
- 50. Decreased inspired Oxygen.
- 51. Venous Admixture.
- 52. Control Variable in Pressure controlled ventilation.
- 53. Trigger and Cycle variables in Mechanical Ventilation.
- 54. Concept of time constant in Mechanical ventilation.
- 55. Auto PEEP, How to optimize Auto PEEP in a patient on ventilator?
- 56. Cardiovascular effects of Positive pressure Mechanical Ventilation.

- 1. High Peak airway pressure in patient on Mechanical Ventilator. Causes and algorithm of troubleshooting.
- 2. Indicators of Ventilatory support in Hypoxemic Respiratory failure.
- 3. Advantages / Disadvantages / indications of Volume Control ventilation.
- 4. Perfusion Diffusion impairment.
- 5. Decreased Ventilatory Drive.
- 6. Type 1 Respiratory Failure.
- 7. Prevention of Nosocomial Pneumonia in Mechanically Ventilated patient.
- 8. Contraindications of Non-Invasive Ventilation.
- 9. Predictors of Successful weaning after Mechanical Ventilation.
- 10. Prevention of Thromboembolism in patients on ICU care.
- 11. Diffusion Impairment.
- 12. How Mechanical Ventilation decreases shunt?
- 13. Effects of Mechanical Ventilation on Dead Space.
- 14. Alveolar Hypoventilation.
- 15. Impairment of Respiratory Control.
- 16. Airway resistance.
- 17. Tension Pneumothorax.
- 18. ECMO indications, contraindications, application and adverse events.
- 19. Plan for Mechanical ventilation in a patient with head injury.
- 11. Patient positioning to optimize ventilation and Oxygenation during Mechanical Ventilation.
- 12. Neostigmine.
- 13. Respiratory quotient.

- 14. Pulse oximetry.
- 15. Auto PEEP.
- 16. Peak inspiratory pressure.
- 17. Metabolic acidosis.
- 18. CPIS (Clinical Pulmonary Infection Score).
- 19. Minimal occlusion volume technique.
- 20. Ventilator induced lung injuries.
- 21. Permissive hypercapnia
- 22. Trigger.
- 23. Rapid shallow breathing index (RSBI).
- 24. Respiratory alkalosis.
- 25. Deadspace ventilation.
- 26. Inhaled nitric oxide.
- 27. Barotraumas.
- 28. Cardiac output.
- 29. Illustrate leak in a flow-volume loop and volume time scalar.
- 30. Suction and its complications.
- 31. Ventilator associated pneumonia.
- 32. Airway resistance.
- 33. Tension pneumothorax.
- 34. How do you troubleshoot high peak airway pressure in a patient on mechanical ventilation?
- 35. ECMO criteria.
- 36. Diffusion defect.
- 37. Ventilator strategy in traumatic brain injury.
- 38. EtCo2 draw a normal capnogram and label its phases...
- 39. Heliox therapy.
- 40. Inverse ratio ventilation.
- 41. How will you differentiate Type I and Type II respiratory failure?
- 42. Describe the mandatory breath in a ventilation mode.
- 43. What are the advantages of Pressure Control Ventilation?
- 44. Explain the causes of auto-PEEP.
- 45. How will you trouble shoot when a high pressure alarm goes off during mechanical ventilation?
- 46. What are the indices which predict success of weaning after mechanical ventilation?
- 47. Describe T-piece trail.
- 48. As a therapist what are the things which should be kept ready for endotracheal intubation.
- 49. Describe methods to reduce occurrence of pulmonary embolism in a critically ill patient.
- 50. Describe few methods you
- 51. How will you differentiate Type I and Type II respiratory failure?
- 52. Describe the mandatory breath in a ventilation mode.
- 53. What are the advantages of Pressure Control Ventilation?

- 54. Explain the causes of auto-PEEP.
- 55. How will you trouble shoot when a high pressure alarm goes off during mechanical ventilation?
- 56. What are the indices which predict success of weaning after mechanical ventilation?
- 57. Describe T-piece trail.
- 58. As a therapist what are the things which should be kept ready for endotracheal intubation.
- 59. Describe methods to reduce occurrence of pulmonary embolism in a critically ill patient.
- 60. Describe few methods you can adopt as a therapist to reduce the incidence of nosocomial infections.

PAPER 10 - RESPIRATORY THERAPY TECHNIQUES - II

- 1. Aerosol therapy.
- 2. Extra Corporeal Membrane Oxygen (ECMO) Therapy.
- 3. What is intercostal chest drainage? What are its indications and contraindications? List the steps of its insertion. What are the Complications of inserting it?
- 4. What are the indications for endotracheal intubation? Explain difficult airway algorithm and management of difficult airway.
- 5. What is venturi principle? Explain with a schematic diagram, how does aventuri work? Advantages and disadvantage of venturi mask.
- 6. What are the ways to deliver aerosol therapy? Explain metered dose inhaler, indication, advantages and disadvantage.
- 7. Describe the various problems in transport of critically ill patients. Oxygen therapy High flow and Low flow oxygen delivering devices. Types of aerosol generators and its working principles.
- 8. How will you asses and safely transport a critically ill patient as a Respiratory
- 9. Therapist?
- 10. What are the indications for intubation? Enumerate difficult intubation algorithm and its management.
- 11. Define oxygen dissociation curve. What are the ways to deliver oxygen to tissues? Explain on low flow oxygen delivery devices.
- 12. Explain oxygen cascade and its application.
- 13. Indication of Endotracheal intubation and difficult airway assessment for
- 14. intubation and algorithm.
- 15. ECMO-types, indications and contraindications.
- 16. Aerosol therapy Types, indication and outcome assessment.
- 17. Explain oxygen cascade and its application.
- 18. Draw algorithm for difficult airway and explain the causes for difficult intubation.
- 19. Define intubation, its routes and explain in detail the steps of orotracheal
- 20. intubation.
- 21. Oxygen cascade and oxygen toxicity.

- 22. Pressurised metered dose inhaler (pMDI) and add a note on the use of
- 23. MDI in intubated patients.

6 Marks

- 1. Indications of Long Term Oxygen Therapy.
- 2. Describe the various suctioning methods.
- 3. Different types of humidification.
- 4. Indications and contraindications of suctioning methods.
- 5. Transport of critically ill patients.
- 6. HME vs heated humidifier.
- 7. Indications of oxygen therapy in an acute care hospital.
- 8. Difficult intubation.
- 9. Endotracheal suctioning steps, indication and complication.
- 10. Types of humidifiers. Advantages and disadvantages.
- 11. ECMO indication, advantage and complications.
- 12. Monitoring in transport of critically ill patients.
- 13. Intercostal drainage.
- 14. Nasal canula.
- 15. Can't intubate, Can't ventilate what will you do?
- 16. Oxygen toxicity.
- 17. Compliance, resistance and time constants.
- 18. Factors affecting dry powder inhaler (DPI) performance and drug delivery.
- 19. Care of tracheostomy tube.
- 20. Glasscow coma scale (GCS).
- 21. Disinfection of laryngoscope and bronchoscope.
- 22. Cricothyrodotomy.
- 23. Alert, Verbal, Pain, Unresponsive (AVPU) scale.
- 24. Bottle systems in intercostal drainage (ICD).
- 25. Compare MDI and DPI.
- 26. ICD.
- 27. Principles of humidification.
- 28. Home oxygen concentrators.
- 29. ECMO indication, complication, advantage and disadvantage.
- 30. Venturi mask.
- 31. Oxygen toxicity.
- 32. HME.
- 33. Insertion procedure of pneumothorax patient and draw and label the
- 34. bottle system.
- 35. Transport of critical ill patient.
- 36. Oxygen dissociation curve.
- 37. Difference between VC and PC mode.
- 38. Hyperbaric oxygen therapy.
- 39. Monitoring of mechanical ventilator patient.
- 40. Explain about CPAP Draw the volume/time scalar of CPAP with PS mode.
- 41. HME Vs Heated humidifier.

- 42. ICD-procedure and its complications.
- 43. Indications for ECMO and its complications.
- 44. Oxygen dissociation curve.
- 45. Different types of humidification.
- 46. Describe low flow oxygen therapy.
- 47. Types of suctioning and its complication.
- 48. Combitube and its uses.
- 49. Bronchoscope and its clinical importance.
- 50. Small volume nebulizers and factors affecting its performance.
- 51. Bedside methods for assessing endotracheal tube positioning.
- 52. Types of active humidifiers.
- 53. Malampati classification and cormacklehane classification.
- 54. Veno-venous extracorporeal membrane oxygenation.
- 55. Transport of critically ill patients.
- 56. Describe the steps of extubation.
- 57. Percutaneous tracheostomy.

- 1. Complications of suctioning methods.
- 2. High flow oxygen therapy.
- 3. Complications of oxygen therapy.
- 4. Complications after intubation.
- 5. Indications of humidification.
- 6. Draw the bottle system for connection after ICD in pneumothorax, without suction.
- 7. Preparation for endotracheal intubation.
- 8. Draw the bottle system for connection after ICD in pleural effusion with trapped lung, with suction.
- 9. Indications of endotracheal intubation.
- 10. Routes of endotracheal intubation.
- 11. Oral, pharyngeal, laryngeal axis importance.
- 12. Signs and symptoms of inadequate humidification.
- 13. Different size and colour code of suction catheter.
- 14. Advantages of HME.
- 15. Indications of Oxygen Hood.
- 16. Percentage of oxygen delivered in Blue, Red, Green venturi.
- 17. Causes for difficult intubation.
- 18. Principle of rebreathing mask.
- 19. Importance of spacers in using inhalers.
- 20. Monitoring of humidifiers.
- 21. Metabolic acidosis- types, formula for calculating Anion gap.
- 22. Indications and contraindications of transport of critically ill patients.
- 23. Parts of bronchoscope and its uses.
- 24. Vibrating mesh nebulizer.
- 25. Passive humidifier.
- 26. Bronchial toileting.

- 27. Hazards of oxygen therapy.
- 28. Spontaneous Breathing (SBT) Trial.
- 29. Parts of an Endotracheal (ET) tube.
- 30. Maximal inspiratory and expiratory pressures.
- 31. Draw and label bubble humidifier.
- 32. Hazards of aerosol therapy.
- 33. AMBU.
- 34. Difference between simple condenser humidifier and hygroscopic heat exchanger.
- 35. Complications of suctioning.
- 36. Different sizes and colour codes of suction catheter.
- 37. Mallampatti classification.
- 38. Indication for humidification.
- 39. What will you do in conditions where you 'can't ventilate and can't intubate'?
- 40. Troubleshooting of humidifiers.
- 41. Oxygen toxicity.
- 42. MDI.
- 43. Spontaneous breathing trial.
- 44. Suctioning.
- 45. Respiratory acidosis.
- 46. Nutritional balance of COPD patients.
- 47. Venturi principle.
- 48. Auto CPAP.
- 49. Draw and label the normal ECG.
- 50. Henderson Hassel batch equation.
- 51. Types of hypoxia.
- 52. Venturi principle.
- 53. Indication of T-Piece trial.
- 54. Mallampati grades.
- 55. Confirmation of endotracheal intubation.
- 56. Explain parts of ET tube with diagram and its significance.
- 57. Rapid sequence intubation.
- 58. Advantages and disadvantages of MDI.
- 59. HME vs heated humidifiers.
- 60. Hazards of oxygen therapy.
- 61. Cuff leak test.
- 62. Closed suctioning.
- 63. Indications and complications of oxygen therapy.
- 64. Heat and moisture exchanger (HME).
- 65. Fenestrated tracheostomy tube.
- 66. Self inflating bag.
- 67. List the high flow oxygen therapy devices with the total flows.
- 68. Factors affecting aerosol deposition.
- 69. Clinical signs and symptoms of inadequate humidification.
- 70. Methods of administration of hyperbaric oxygen therapy.

PAPER 12 - CARDIO PULMONARY REHABILITATION

10 MARKS

- 1. Explain the field tests performed in pulmonary rehabilitation.
- 2. Describe the various pathophysiologic abnormalities in chronic respiratory disease and possible mechanisms for improvement after exercise training.
- 3. Describe postural drainage. Write down the indications and contraindications of postural drainage. Describe the drainage position of right lower lobe.
- 4. What are the lung function changes postoperatively? What are the techniques to improve secretion clearance post operatively?
- 5. List the field tests done to measure exercise capacity and explain anyone of them.
- 6. Define quality of life. Explain the two most widely used respiratory specific questionnaire to assess the health related quality of life in pulmonary rehabilitation.
- 7. Describe in brief on pulmonary rehabilitation assessment and management for a 50 year old male patient.
- 8. Define ischemic heart disease and its causes. Write in detail on the post operative management for a patient who has undergone coronary artery bypass grafting (CABG).
- 9. Explain in detail on pre and post operative management of pnuemonectomy
- 10. Discuss the principles of cardiac rehabilitation for myocardial infraction.
- 11. Define postural drainage. Write down the indication and contraindication of postural drainage. Describe the drainage position for right lower lobe of the bronchial tree.
- 12. Define cystic fibrosis and its diagnostic criteria. Explain briefly on pulmonary rehabilitation for cystic fibrosis
- 13. How will you assess a COPD patient referred for pulmonary rehabilitation?
- 14. Mention the field tests done to measure exercise capacity and explain any one of them.
- 15. Define quality of life. Explain the two most widely used respiratory specific Questionnaires to assess health related quality of life in pulmonary rehabilitation.
- 16. Explain BODE index.
- 17. Mention the team members of pulmonary rehabilitation and explain their role.
- 18. Define postural drainage and mention the indications and contraindications for postural drainage.
- 19. Define pulmonary rehabilitation. Write in detail about the patient assessment for pulmonary rehabilitation.
- 20. Define postural drainage. Mention the indications and contraindications of postural drainage. Describe the drainage position of right lobe of the lung.
- 21. Describe the pathophysiology and management of cystic fibrosis

- 1. Cardiopulmonary stress testing.
- 2. Shuttle walk test.
- 3. Incentive spirometer.

- 4. Goals of cardiac rehabilitation.
- 5. Bronchopulmonary Segments.
- 6. Patient education and counselling.
- 7. Peak Expiratory Flow Rate.
- 8. Suctioning.
- 9. Explain active cycle of breathing.
- 10. List any five examples of educational topics in pulmonary rehabilitation.
- 11. Write Borg scale and its clinical uses.
- 12. Bronchopulmonary segments.
- 13. Write about incremental shuttle walk test.
- 14. Write briefly about generic questionnaire used to assess health related quality of life in patients with chronic respiratory disease.
- 15. Write in detail about the program duration, frequency, and specificity of exercise training.
- 16. Define pulmonary rehabilitation by ATS and ERS guidelines.
- 18. Write about the measurement of exercise capacity in pulmonary rehabilitation.
- 19. List the positive airway pressure adjuncts and explain any one of them.
- 20. Mention the team members of cardiac rehabilitation and their roles.
- 21. Explain active cycle of breathing.
- 22. Mention the exclusion criteria for pulmonary rehabilitation.
- 23. St. George Respiratory questionnaire.
- 24. Mention the pathophysiologic abnormalities in chronic respiratory diseases and changes with exercise training.
- 25. Chest physiotherapy.
- 26. Bronchodilators.
- 27. Tetralogy of fallot.
- 28. Ventricular septal defect.
- 29. Chest mobilization exercises.
- 30. Explain on the program management in pulmonary rehabilitation.
- 31. Cough reflex.
- 32. Atelectasis and its management.
- 33. Pulmonary hypertension.
- 34. Coughing techniques.
- 35. Mitral stenosis.
- 36. Cardio pulmonary stress testing.
- 39 .Six minute walk test.
- 37. Explain in detail on position for postural drainage of right upper lobe.
- 38.Oxygen therapy.
- 39. Home mechanical ventilation.
- 40. Common goals of pulmonary rehabilitation programs.
- 41. Positive expiratory pressure therapy.
- 42Indications of long term oxygen therapy (LTOT).
- 43 Intermittent positive pressure breathing.
- 44. Phases of cardiac rehabilitation.
- 45. Benefits from exercise reconditioning program.

- 46. Resistance training
- 47. Inspiratory muscle training.
- 48 . Modified MRC scale.
- 49.6- minute walk test.
- 50. Role of diet and nutrition in pulmonary rehabilitation.
- 51. Write about the team members of cardiac rehabilitation.
- 52. Endurance training.
- 53. Indications for Cardiopulmonary exercise testing (CPET).

- 1. Define pulmonary rehabilitation by ERS guidelines.
- 2. Blood Lactate.
- 3. Acapella device.
- 4. Exercise ECG.
- 5. Cough and huff.
- 6. BODE index.
- 7. Neuromuscular electrical stimulation.
- 8. Aims of pulmonary rehabilitation.
- 9. List the scales and questionnaires used to assess dyspnoea.
- 10. Purse lip breathing.
- 11.VO2 max.
- 12. Types of muscle fibers.
- 13. Screening questionnaire for anxiety.
- 14. Incentive spirometry.
- 15. Mechanism of cough.
- 16. Exclusion criteria for pulmonary rehabilitation.
- 17. Various methods to estimate free fat mass (FFM).
- 18. Borg scale.
- 19. What are the three different perspectives from which outcome assessment can be evaluated in pulmonary rehabilitation?
- 20. Cyanosis.
- 21. Pursed lip breathing.
- 22.Clubbing.
- 23. Gloss pharyngeal breathing exercise.
- 24. Breathing patterns.
- 25. Cystic fibrosis.
- 26. Draw and label coronary circulation.
- 27. Tread mill test.
- 28.QRS complex in ECG.
- 29. Incentive spirometry.
- 30. Auscultatory areas of respiratory system.
- 31. Coronary angiogram (CAG).
- 32. Flail chest.
- 33. Shuttle walk test.
- 34. Blue bloaters.

- 35. Vital signs.
- 36. Diaphragm.
- 37. Corpulmonale.
- 38. Acapella.
- 39. Complications of pulmonary surgery.
- 40. Glossopharyngeal breathing exercise.
- 41. Positive Expiratory Pressure (PEP) device.
- 42. Mention the field tests done to measure exercise capacity.
- 43. Physiology of pursed lip breathing technique.
- 44. Indications for 6 minute walk test.
- 45. Define quality of life.
- 46. Mention the team members of cardiac rehabilitation.
- 47. What are the important patient-centered outcomes in pulmonary rehabilitation?
- 48. Mention the exclusion criteria for pulmonary rehabilitation.
- 49. How would you estimate the loss of fat free mass in patients with chronic respiratory disease?
- 50. Blue blotters.
- 51. Glossopharyngeal breathing exercise.
- 52. Percussion.
- 53. Mucolytics.
- 54. Apnea.
- 55. Components of ECG.
- 56. Difference between huffing and coughing.
- 57. Unstable angina.
- 58. Kyphoscoliosis.
- 59. CPAP masks.