

FIRST YEAR BDS ANATOMY STUDY GUIDE 2021-2022

Updated on 13 January 2022

Introduction to Anatomy

Department Vision:

To train undergraduate students by qualified faculty and state of the art infrastructure and technology so that students can meet the community challenges of 21st century infrastructure.

Department Mission:

To impart core knowledge of anatomy in interesting, compact and practical way to undergraduate students by Hybrid/Spiral integrated system of teaching so that they can differentiate between normal and abnormal structure at gross, microscopic and embryological level. The objectives are achieved through knowledge of Anatomy on principles of pedagogy. Skills are developed by dissection and prosection, simulation – models, cyber teaching, surface anatomy, modern histological techniques. Attitudes are developed by employing communication skills, lecture and presentations, self-directed learning, RBL museum Atlas, integrated journal, cyber teaching, e-learning, quest for research, journal club meetings, library, professionalism, empathy, inter-personal skills, and extra-curricular activities.

Resources

- A. Teaching resources
- B. Supporting staff
- C. Infrastructure resources

Teaching Resources Faculty Members

De	epartment of Anatomy	Involved in BI	OS Teaching
1	Dr. Ansa Rabia	Professor & Head	MBBS; M.Phil
		of Department	
2	Dr. Faiza Shafqat	Demonstrator	MBBS
3	Dr. Bismah Riaz	Demonstrator	MBBS

Supporting Staff

Sr No	Supporting staff	Number
1	Lab assistant	2
2	Lab technologist	1
3	Computer operator	1
4	Dissection hall attendant	4
5	Curator	1
6	Embalmer	1
7	Runner	1

Infrastructure Resources

Sr.	Infrastructure Resources	Quantity
#.		
1	Lecture hall	1
	 Seating Capacity 140 	
	Multimedia	
	Microphone	
	Computer system	
	White board	
2	Small group discussion rooms	5
2	Histology Lab	1
	Microscopes	1
	Histological slides	
3	Museum	1
	Study models	1
	Atlas	
4	Dissection Hall	1
5	Mini library	1

Teaching and Learning Strategies

Multiple educational methods will be used comprising of self-study, interactive lectures, group discussions, practical, and manual dexterity skill sessions.

(i) Methods for achieving cognitive objectives

- Interactive lectures using audio visual aids on power point presentation
- Group discussions in form of large group and small group
- Collaborative learning
- Self-study and reading from learning resources

(ii) Methods for achieving psychomotor objectives

- Focusing the histological slides on microscope
- Identification of normal histological structures on slides under different magnifications
- Drawing and labeling the histological slides on practical notebooks

(iii) Methods for achieving affective objectives

- Interaction with peers, group members, teachers, support staff etc.
- Group discussions (small and large)

Learning Methodologies

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

- Interactive lectures
- Small group discussions
- Large group discussions
- Demonstrations
- Dissections / Prosection (Skill sessions)
- Self-directed learning
- Practical
- Histology journal
- Study models

Curriculum Implementation

Curriculum implementation refers to putting into practice the official document including course content, objectives, learning and teaching strategies. Implementation process helps the learner to achieve knowledge, skills and attitudes required of the learning tasks. Learners are a pertinent component of the implementation process. Implementation occurs when the learner achieves the intended learning experiences, knowledge, ideas, skills and attitudes which are aimed to make the learner an effective part of the society. Curriculum implementation also refers to the stage at which curriculum is put into effect. There has to be an implementing agent as well. Teacher is an important part of this process and implementation of the curriculum is the way the teacher selects and utilizes various components of the curriculum. Implementation occurs when the teacher's formulated course content, teacher's personality and teaching and learning environment interact with the learners. Therefore, curriculum implementation is how the officially planned course of study is translated and reflected by the teacher into schemes of work, lesson plans, syllabus and resources are effectively transferred to the learners. Curriculum implementation can be affected by certain factors such as teachers, learners, learning environment, resource materials and facilities, culture and ideology, instructional supervision and assessments.

Personnel involved in teaching and facilitation

- (i) Lectures delivery by: Dr. Ansa Rabia (Professor & Head of department), Prof. Dr. Uzma Naseer, Dr Shaista Arshad (Associate Prof.), Dr. Tayyaba Mahmud (Assistant Prof.), Dr. Saadia Hafeez (Assistant Prof.)
- (ii) Demonstrators and facilitators for practical, dissection and small group discussion sessions:

Dr. Faiza Shafqat, Dr. Bismah Riaz, Dr. Yumna Mazafar, Dr. Zimal Saad

(iii) Support staff: Lab assistants, lab technologist, computer operator, dissection hall attendants, curator, embalmer, runner

Time Frame

Course duration: 36 weeks

Lectures: Monday (9:50 to 10:45 am), Tuesday (8:00 to 8:55am), Thursday (8:00 to 8:55 am)

Tutorial/Lecture (SGD): Tuesday (9:50 to 10:45 am) alternate week

Dissection: Monday (11:15 am to 01:05 pm), Tuesday (1:05 to 3:00 pm), Wednesday &

Thursday (8:55 to 10:45 am)

Practical: Wednesday (11:15am to 1:05 pm), Thursday (1:05 to 3:00 pm), Friday (11:00 am to

01:00 pm)

Course Outline

Term	Subject	Teaching & Learning	Evaluation
	Gross Anatomy	Neck region	One Substage EOB-I Exam
Block - I	Embryology Histology	Gametogenesis Week 1-3 of development Cell Epithelium	EOB – I Exam
	General Anatomy	Introduction Osteology Myology Nervous system-1 Circulatory system	EOB – I Exam
	Gross Anatomy	Head Region	2 Substages EOB – II Exam
Block - II	Embryology	Embryonic period (3-8 weeks) Development of Skull Development of Head & Neck Birth defects	EOB – II Exam
	Histology	Connective Tissue Bone Cartilage Muscle Digestive System (Lip, Tongue, Salivary glands)	EOB – II Exam
	Gross Anatomy	Brain & Neuro Anatomy	2 Substages EOB – III Exam
Block - III	Embryology	Development of CNS CNS	EOB – III Exam
Block - III	Histology	Lymphoid System	EOB – III Exam
	General Anatomy	Skin & fascia Arthrology Nervous System-2	EOB – III Exam

Table of Specification for Teaching and Learning Objectives

ANATOMY BLOCK-1 (10 WEEKS)						
Course outline						
General Anatomy VOCE	Histology	Embryology	Gross Anat	omy		
Introduction	Cell	Gametogenesis	Neck	7		
Osteology	Epithelium	1-3 Weeks				
Myology						
Nervous system-1						
Circulatory system						

Course content

		GE	NERAL ANATOMY		
S.No	Topic/ Theme	Learning outcomes	Learning objectives/ contents	Instructional strategies	Assessment tool
1.	Introduction to Anatomy	techniques in anatomy	Students should be able to: 1. Define different disciplines of Anatomy 2. Identify terms of position in relation to anatomical position:	LGIS (Large group interactive session)	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

			planes in which they occur		
			and demonstrate each on		
			subject.		
			o Flexion / Extension		
			○ Abduction / Adduction ○		
			Lateral rotation / Medial		
			rotation	ls.	
			Pronation / Supination		
			o Plantar flexion / Dorsal		
			flexion		
			o Circumduction		
			o Eversion / Inversion		
			6. Identify the various		
			techniques to study		
			anatomy in the living such		
			as:		
			Plain radiographs	1.010	1100 / 050 /
2.	Osteology	Summarize the	1. Identify the axial and	LGIS	MCQs/ SEQs/
		general features	appendicular parts of a		SAQs/
		of bones	human skeleton.		OSPE/ VIVA
			2. Classify bones according to		VOCE
			their development and		
			shape giving examples of each type especially from		
			head and neck (wherever		
			possible).		
			3. Describe the process of		
			both types of ossification		
			4. Describe blood supply of		
			the long & diploic bones.		
3.	Myology	Appraise the	☐ Classify muscles into three	LGIS	MCQs/ SEQs/
	,	general	basic types		SAQs/
		anatomical	☐ Correlate skeletal muscles		OSPE/ VIVA
		features of	according to their shape,		VOCE
		muscles	Muscle fiber types and		
			functions with examples of		
			each type		
4.	Nervous	Correlate the	Appraise general concept	LGIS	MCQs/ SEQs/
	system I	general	of nervous system.		SAQs/
		anatomical	☐ Nervous Tissue		OSPE/ VIVA
		structure of	☐ Receptors		VOCE
		different parts of	□ Nerve fiber		
		nervous system,	☐ Neuroglia	ľ	
		with its	2. Identify the parts of the		
			nervous system		
		 		S	

		functional	contributing in formation			
		significance	of central and peripheral			- 1
		Significance	nervous system			- 1
						- 1
			3. Describe the formation,			- 1
			course and distribution of			- 1
			a typical spinal nerve			
5.	Circulatory	Summarize the	1. Justify general plan of	LGIS	MCQs/	SEQs/
	system	general	systemic, portal and		SAQs/	- 1
		anatomical	lymphatic circulatory		OSPE/	VIVA
		features of	system.		VOCE	- 1
		circulatory	2. Compare blood vessels			- 1
		system	according to their sizes and			
			functions with examples of	:		1
			each type.			
			3. Describe various types of			- 1
			anastomosis with example			1
			and their clinical			- 1
			significance.			
		G	ENERAL HISTOLOGY	*		
			1		1	
1.	Cell/Cell	Appraise the	KNOWLEDGE		MCQs/	SEQs/
	junctions	light microscopic	1. Introduction to histology,	LGIS	SAQs/	- 1
		structure of the	microscope		OSPE/	VIVA
		cells	2. Differentiate between		VOCE	- 1
			acidophilia and basophilia.			- 1
			3. Enumerate different cell			- 1
			organelles and identify			- 1
			staining reaction of each.			- 1
			4. Illustrate shapes of			- 1
			different cells with			- 1
			example			- 1
			5. Enumerate different			- 1
		1	components of the			- 1
			cytoskeleton.			
			6. Correlate the structure of			
			different type of			- 1
			intercellular junctions with			- 1
			their functions.			
			SKILL			
			Focus the prepared slide at different magnifications			
			different magnifications.			
			2. Draw the labelled diagram			- 1
			of cells having various			
			shapes.			
			shapes.	St		

2. Epithelium Appraise the light microscopic structure of epithelial tissue 2. Compare surface epithelium with examples of each type. 3. Classify glandular epithelium with examples of each type. 4. Compare the ultrastructure of microvilli, stereocilia and cilia and correlate with their roles in various cellular functions 5. Classify glands according to their morphology, secretory products and mode of secretion with examples of each type SKILL 1. Identify different types of epithelia under light microscope and enlist at least two identification points for each type. 2. Draw labelled diagrams of each type of epithelium. 3. Compare and contrast between the histological structure of serous and mucous secreting cells. 4. Draw labelled diagram of	VA
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mucous and serous acini	
GENERAL EMBRYOLOGY	
1. Gametogenesis Elaborate the 1. Revisit cell division, LGIS MCQs/ SEQ	Įs/
& Transport of development of mitosis & meiosis SAQs/	
ovum & germ cells 2. Describe the events of OSPE/ VIV	/A
Fertilization spermatogenesis VOCE	
3. Describe the events of	
spermiogenesis	
4. Describe the relation of	
ovarian cycle with	
maturation of follicles.	
5. Describe the stages of	
follicular maturation	

2. 1st week of development Appraise the early weeks of development or embryo 3. 2nd week of Anatomize the	□ Preantral □ Secondary □ Preovulatory. 6. Describe the process of ovulation and correlate itiming with ovarian cycle. 7. Define fertilization 8. State normal site of fertilization 9. Describe the results of fertilization 10. Enlist the factors affecting fertilization 11. Enumerate the changes that occur in spermatozobefore fertilization 12. Explain the factors affecting penetration of sperm through the zon pellucida for formation of Pro-nuclei 1. Appraise the implantation and its normal site 2. Describe the changes in uterus at time of implantation. 3. Explain the process of cleavage 4. Explain the formation of morula and blastula 5. Describe the formation of inner and outer cell mass within the blastocyst cavity 6. Appraise abnormal sites for implantation (ectopic pregnancy) and its clinical significance. 1. Discuss the formation of	oa of a	SAQs/ OSPE/ V VOCE	EQs/
development early weeks of development or embryo	bilaminar embryonic disc from embryoblast. 2. Describe early differentiation of trophoblast	LOIS	SAQs/	/IVA

			2 = 1 : 11 :			
			 Explain the formation of amniotic cavity Explain the formation of chorion, secondary yolk sac and chorionic plate. Explain the establishment of uteroplacental circulation. Appraise 2nd week as week of twos. 			
4.	3 rd week of development	Anatomize the early weeks of development of embryo	 Define gastrulation (formation of three germ layers) Discuss the development, significance and fate of primitive streak Describe the development of notochordal process, notochord canal, prechordal plate and cloacal membrane Compare the topographic arrangement and derivatives of three components of intraembryonic Mesoderm (Paraxial, Intermediate and Lateral Plate Mesoderm) Describe early development of CVS. Describe differentiation of trophoblast during third week and formation of primary, secondary and tertiary chorionic villi Enumerate the parts of placenta Explain formation and fate callantois. 	f	SAQs/	EQs/ VIVA
		GRO	SS ANATOMY (NECK)		•	
1.	Cervical		☐ Give distinguishing	SGD and	MCQs/ S	EQs/
	vertebrae	Differentiate typical and	features of each cervical vertebra.	dissection	SAQs/	

		atypical cervical vertebrae	 Enumerate structures passing through foramina Outline ligamentous attachments on cervical vertebrae. 		OSPE/ VOCE	VIVA
2.	Deep Cervical Fascia	Anatomize the four layers of deep cervical fascia in detail. Correlate the topography of cervical fascial spaces to mediastinal and contralateral spread of infection.	 Enumerate the layers of deep cervical fascia. Trace the attachments of investing, pre-tracheal, carotid sheath and prevertebral layers of fascia. Identify various modifications and neck spaces formed by fascial attachments. Comprehend the clinical importance of neck spaces in spread of infection 	SGD and dissection	MCQs/ SAQs/ OSPE/ VOCE	SEQs/ VIVA
3.	Muscles of Neck	Describe the origin, insertion, movements and nerve supply of the muscles present in neck	 Describe the muscles of neck (sternocleidomastoid, trapezius and infrahyoid muscles) along with their nerve supply with the help of models. Enlist the features of Torticollis 	SGD and dissection	MCQs/ SAQs/ OSPE/ VOCE	SEQs/ VIVA
4.	Triangles of Neck	Link the anatomical location of triangles of neck and their contents with their clinical significance.	□ Tabulate the attachments, nerve supply, actions of superficial and deep muscles of neck (sternocleidomastoid, suprahyoid, infrahyoid, sub occipital, prevertebral muscles) □ Identify boundaries and contents of triangles of neck on model □ Describe the origin, course and distribution of nerves of neck (cervical plexus, Ansa cervicalis, Common carotid artery, Internal	SGD and dissection	MCQs/ SAQs/ OSPE/ VOCE	SEQs/ VIVA

			jugular vein, subclavian	
			vessels)	
5.	Vessels of Neck	Correlate the anatomy of each vessel with its area of supply and drainage	1. Enumerate the main vessels in neck. 2. Describe the course and branches of External carotid artery Subclavian artery External jugular vein Internal jugular vein.	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
6.	Nerves of Neck	Correlate the anatomy and distribution of cranial nerves with lesions associated with their injuries	I. Enumerate the main cranial nerves supplying in neck I. Trace the distribution of cranial nerves I. Enumerate branches of each of the above nerve and identify their area of supply.	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
7.	Lymphatic Drainage of Neck	relevant clinical	 Enlist the groups of lymph nodes of neck. Describe their location and areas of drainage Appraise the formation of jugular lymph trunk Correlate the clinical importance of lymphatic drainage of neck 	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
8.	Viscera of neck	Correlate the anatomy of viscera's present in neck with their relevant clinical significance.	I. Appraise the relations of trachea and esophagus in neck region with the help of dissection I. Appraise the relations of and skills lab SGD, dissection and skills lab and skills lab Describe the structures involved in cricothyroidotomy and Tracheostomy with the help of dissection.	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
9.	Thyroid and parathyroid gland	Correlate the gross anatomy of thyroid and parathyroid glands with relevant clinical conditions	 □ Identify gross features of thyroid and parathyroid glands on models. □ Describe capsule, relations and blood supply of thyroid and parathyroid gland 	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

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10.	Prevertebral region and root of neck	Describe skin, superficial fascia, and cutaneous nerves of the prevertebral region along with the action and nerve supply of muscles present here.	 3. 4. 	Justify anatomical basis of movement of thyroid gland during deglutition Discuss surgical precautions in thyroid surgery while ligating vessels and enucleation Enumerate the prevertebral muscles Describe origin, insertion, action and nerve supply of prevertebral muscles Identify the boundaries of pyramidal space. Describe the peculiar arrangement of prevertebral region and justify formation of axillary sheath around axillary artery and brachial plexus but not axillary vein. Anatomize the relations of key muscle of root of neck (scalenus anterior) Describe the parts and branches of subclavian artery.	SGD and dissection	MCQs/ SAQs/ OSPE/ VOCE	SEQs/ VIVA
11.	Larynx	Correlate the gross anatomy of larynx with relevant clinical conditions		Describe laryngeal wall in detail with emphasis on cartilages, ligaments, muscles, vascular supply and nerve supply. Analyze mechanism of abduction and adduction of vocal cords Distinguish clinical presentations of injury to external, internal and recurrent laryngeal nerves.	SGD and dissection	MCQs/ SAQs/ OSPE/ VOCE	SEQs/ VIVA
12.	Joints of neck	Correlate the gross anatomical features of joints	1.	Name the typical and atypical intervertebral joints of neck.	SGD and dissection	MCQs/ SAQs/	SEQs/

		of neck with their clinical significance		Identify the types of atlanto-occipital and atlanto-axial joints. Describe the movements of these joints with muscles producing them.		OSPE/ VOCE	VIVA
13.	Back of neck	Link the anatomical location and contents of triangles present at the back of neck with their clinical significance	2.	Enumerate the muscles of back of neck. Identify the boundaries and contents of suboccipital triangle. Describe the course and relations of 3 rd and 4 th parts of vertebral arteries.	SGD and dissection	MCQs/ SAQs/ OSPE/ VOCE	SEQs/ VIVA

List of Histology practicals

Sr No.	Topics					
At the en	At the end of these practicals, students will be able to identify/ illustrate following:					
1.	Cell					
2.	Epithelium					

ANATOMY BLOCK-2 (08 WEEKS)				
Histology	Embryology	Gross Anatomy		
Connective tissue Cartilage	3-8 Weeks	Head		
	Birth defects			
Bone Muscle	Musculoskeletal system			
Oral cavity	Development of head, face and thyroid			
	gland			

Course Content

SPECIAL HISTOLOGY

S.No	Topic/ Theme	Learning outcomes	Learning Objectives/Contents	Instructional strategies	Assessment tool
1.	Connective tissue	Appraise the light microscopic structure of connective tissue	 KNOWLEDGE Define connective tissue and list three basic components of connective tissue. List different types of cells and fibres in the connective tissue. Compare various types of connective tissue with example of each type. Summarize a brief account of histological features of different types of connective tissue. Identify the slides of loose connective tissue, dense regular, dense irregular and adipose connective tissue under light microscope and list at least two identification points of each type. Draw labelled diagrams showing light microscopic structure of loose connective tissue, dense 	Lab	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

	1		and the form of the		
			regular, irregular and adipose connective tissue		
			adipose confilective tissue		
2.	Bone	Appraise the light microscopic structure of bone	KNOWLEDGE 1. Compare microscopic structure of compact and cancellous bone. 2. Correlate the process of bone remodelling with tooth bracing and adjustment.	LGIS	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
			1. Identify the slides of cancellous and compact bone under light microscope and list at least two identification points of each type. 2. Draw labelled diagrams showing light microscopic structure of cancellous and compact bones.	Lab	
3.	Cartilage	Appraise the light microscopic structure of cartilage	KNOWLEDGE Differentiate microscopic features of various types of cartilages with examples SKILL 1. Identify the slides of hyaline, elastic and fibro cartilage under light microscope and list at least two identification points of each type. 2. Draw labelled diagrams showing light microscopic structure of hyaline, elastic and fibro cartilage.		MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
4.	Muscle	Appraise the light microscopic structure of muscle	KNOWLEDGE 1. Differentiate the microscopic features skeletal, smooth and cardiac muscle while correlating with their functions. 2. Explain the histological	LGIS	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

			differences of different		
			types of muscles.		
			SKILL	Lab	1 1
			Identify microscopic		
			sections of different types		
			of muscle under light		
			microscope and list at		
			least two identification		
			points of each type		
			2. Draw labelled diagrams		l 1
			showing light microscopic		
			structure of different		
			types of muscles.		
5.	Oral cavity (Lip,	Appraise the	KNOWLEDGE	LGIS	MCQs/
	Tongue,	light	Explain the histological		SEQs/
	Salivary glands)	microscopic	structure of lip.		SAQs/
		structure of lip	2. Describe the microscopic		OSPE/
		and tongue,	structure of tongue, with		VIVA
		with special	special reference to		VOCE
		emphasis on	epithelium on its two		'''
		papillae of	surfaces, types of lingual		
		tongue and	papillae and taste buds with		
		taste buds.	their location and structure		
		tuste buus.	3. Describe the Histological		
			features of parotid,		
			submandibular and		
			sublingual glands with		
			reference to their type,		
			parenchyma, stroma and		
			duct system.		
			SKILL	Lab	
		Appraise the	Identify microscopic	Lab	
		light	sections of lip, tongue,		
		microscopic	submandibular, sublingual	li l	
		structure of	and parotid glands under		
		major salivary	light microscope and enlist		
		glands.	at least two identification		
		giarius.	points of each.		
			2. Draw labelled diagrams		
			showing light microscopic		
			structure of lip, tongue,		
			submandibular, sublingual		
			and parotid glands.	ć.	

	2	SPECIAL	. EMBRYOLOGY	de l	#
S.No	Topic/ Theme	Learning outcomes	Learning Objectives/Contents	Instructional strategies	Assessment tool
1	The embryonic period; 3 rd to 8 th week Birth defects & prenatal diagnosis	Explain the early weeks of development of embryo	 Define neurulation. Describe process of formation of neural plate, neural tube and neural crest cells. List derivatives of: Surface ectoderm Neurectoderm Neural crest Intraembryonic mesoderm (paraxial, intermediate, lateral plate) Endoderm Describe early differentiation of somites Describe the development of intraembryonic coelom. Describe the folding of the embryo in the median plane and correlate it with its consequences Describe the folding of the embryo in the horizontal plane and correlate it with its consequences Describe relocation of connecting stalk to the anterior abdominal wall and its differentiation into umbilical cord. Skills Identify the structures related to general development on given models of general embryology 	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
2	Musculo-Skeletal System (skull, Face, thyroid gland,)	Comprehend the embryological basis behind the 3	Identify the sources of skull Classify Skull on embryological basis Describe the events in	LGIS	MCQs/ SEQs/ SAQs/

		development of		development of		OSPE/
		skull, face and		cartilaginous and		VIVA VOCE
		thyroid gland		membranous neurocranium		VIVA VOCE
		correlate them	١,			
			4.			
		with various	_	newborn skull		i .
		relevant clinical	5.	Identify the fontanalles with		
		presentations.		reference to their location,		
				closing time and clinical		
		l l		significance		
			6.	Explain the embryological		
		10		basis of acrania,		1
				microcephaly and various		
			Ů,	types of craniosynostosis.		
3	Head	Comprehend	1.	Define pharyngeal arch,	LGIS	MCQs/
		the	ı	pharyngeal groove,		SEQs/
		embryological	ı	pharyngeal cleft and		SAQs/
		basis of	l	pharyngeal membrane		OSPE/
		congenital	2.	Enlist the derivatives of		VIVA VOCE
		anomalies	l	pharyngeal arches		
		related to		pharyngeal grooves,		1
		Pharyngeal		pharyngeal clefts and		
		Arches and		pharyngeal membranes.		
		pouches,	3.	Discuss the development of		
		tongue, nose		face with special reference		
		and paranasal		to role of neural crest cells.		1
		sinuses, face,	4.	Describe the development		
		palate thyroid		of nasal cavities and		
		and parathyroid		paranasal sinuses		
		glands	5.	Justify the association of		1
		ľ		craniofacial anomalies with		1
				other anomalies caused by		1
		1		improper migration of		1
				neural crest cells.		
			6.	Discuss development of		
			•	thyroid gland and correlate	l.	
		1		it with ectopic thyroid		1
				tissue.		
			7	Discuss development of		
			۱′·	parathyroid glands.		
		2	۱,	Discuss the descent of		
			0.			
				thyroid and parathyroid		
				glands to their definitive		
			۵	positions. Justify the definitive		
			اء.	positioning of parathyroid		
		(0)		positioning of parathyrold	8	4

			gland arising from third arch lower than the one arising from fourth arch					
	GROSS ANATOMY HEAD							
S.No	Topic/ Theme	Learning outcomes	Learning Objectives/Contents	Instructional strategies	Assessment tool			
1	Skull	Elucidate the topographic anatomy of skull	 □ Appreciate the general plan of studying skull from different views. □ Identify important bony landmarks on the bones as viewed from lateral, superior, inferior, anterior and posterior views. □ List structures traversing the foramina in these bones □ Identify the bones forming the boundaries of orbit, nasal cavity. oral cavity, temporal, infratemporal fossa &pterygopalatine fossa on the given bone. (detail to be done with relevant topics) 	SGD (Small Group Discussion)	MCQ/ SAQ/OSPE Viva			
2	Scalp	Correlate the structure and neurovascular supply of scalp with anatomical basis of relevant clinical conditions.	model Enumerate layers of scalp in a sequential order Correlate gross features of each layer with anatomical basis of black eye, profuse bleeding, gaping wound, spread of scalp infection and shape of hematoma.	SGD and dissection	MCQ/ SAQ/OSPE Viva			
3	Oral cavity	Correlate the gross anatomy of oral cavity and tongue with anatomical basis of relevant clinical conditions	 Name different boundaries of oral cavity. Describe blood and nerve supply and lymphatic drainage of oral cavity. Identify the location of inferior alveolar nerve block Describe the salient features of floor of mouth. 	SGD and dissection	MCQ/ SAQ/OSPE Viva			

4	Face	Correlate the gross anatomy of face with anatomical basis of relevant clinical conditions.	5. Discuss the attachments, actions, nerve supply and relations of suprahyoid muscles 6. Identify parts of tongue 7. Identify the gross features of dorsal and ventral surfaces of tongue 8. Name the intrinsic and extrinsic muscles of tongue. 9. Describe attachments, actions and nerve supply of muscles of tongue Describe the motor, general and special sensory innervation of tongue □ Outline the characteristic features of facial skin. □ Elucidate the cutaneous innervation of face □ Group facial muscles according to the orifices they are guarding □ Describe the nerve supply of muscles of facial expressions. □ Describe the course of arteries, veins, lymphatics and nerves of the face with the help of model. □ Correlate gross features of face with anatomical basis of danger area, trigeminal neuralgia, Bell's palsy. Skill: □ Identify muscles of facial expressions □ Illustrate the cutaneous
			innervation of face
5	Mandibular and maxillary branches Of Trigeminal Nerve	Correlate the anatomy of mandibular and maxillary divisions of	1. Describe the pathway of mandibular nerve from nucleus to target organs SGD and dissection Viva

		Tuinnatural (1	_	Describe the cash a co		
		Trigeminal nerve with their	^{2.}	Describe the pathway of maxillary nerve from		
		lesions		nucleus to target organs		
			3.	Describe the lesions of		
				nerves with special		
				reference to infections of		
		944		molar teeth		
6	Facial Nerve	Correlate the		Revisit the course and	SGD and	MCQ/
		anatomy of	l	distribution of facial nerve	dissection	SAQ/OSPE
		facial nerve		Revisit the relationship of		Viva
1		with its lesions		facial nerve with		
				pterygopalatine and		
				submandibular ganglia		
				Revisit the effects of lesion		
				of facial nerve at different		
				levels Differentiate	1	
				anatomical basis of clinical		
				presentation of UMN and		
34		6		LMN lesion of facial nerve.		
7	Temporal and	Correlate the		Identify the location,	SGD and	MCQ/
	Infratemporal	location,		boundaries, contents and	dissection	SAQ/OSPE
	region	boundaries and	l	communications of		Viva
		contents of	l	temporal and infratemporal		
		temporal and		fossa on a given model and		
		Infratemporal		skull.		
		fossa with		Describe the course and		
		relevant clinical		distribution of mandibular		
		conditions.		nerve from origin to		
				distribution		
				Tabulate the attachments,		
				actions and nerve supply of		
				muscles of mastication.		
				<i>'</i>		
				routes and distribution of		
				otic ganglion		
				Justify role of lateral		
				pterygoid as a peripheral		
				heart on anatomical basis		
			_	of pterygoid venous plexus		
		"		Elucidate importance of		
				pterygoid venous plexus in		
				case of intracranial spread		
				of infection to cavernous		
				sinus.		

8	Mandible	Elucidate the topographic anatomy of mandible	 □ Trace origin and distribution of superficial temporal, First and second parts of maxillary artery □ Identify parts of mandible SGD and Describe ramus and body of mandible with respect to its bony features and attachments.
9	Temporomandibular joint (TMJ)	Correlate the gross anatomical features of temporomandib ular joint with clinical significance	 Identify the type of TMJ. Identify the articular surfaces of TMJ on a given model or dry bones. Explain the attachments of capsule. Name the ligaments of TMJ. Describe the attachments and relations of ligaments of TMJ. Describe the type and shape of articular disc. Justify the presence of two joint cavities and types of movements occurring in each. Describe the movements of jaw at TMJ with special reference to axis and muscles producing them. Describe the clinical signs of anterior dislocation of TMJ and explain the steps of its reduction.
10	Submandibular region	Correlate the anatomy of Submandibular region with its clinical significance	 □ Revisit boundaries of submandibular triangle □ Describe the parts, relations, neurovascular of submandibular gland. □ Trace the routes of submandibular ganglion □ Describe the distribution of submandibular ganglion

				Correlate the anatomy of submandibular fascial space		
				with Ludwig's angina		
11	Parotid region	Correlate the anatomy of parotid region with its clinical significance		List contents of parotid region Elucidate the surfaces, borders, shape, location, parts, relations and drainage of parotid gland Trace the pathway of autonomic supply of parotid gland. Enumerate structures embedded in parotid gland in a sequential order. Analyze anatomical basis of clinical presentation of mumps. Correlate the extracranial course of facial nerve with Bell's palsy.	SGD and dissection	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
12	Hard and soft palate	Correlate the gross anatomy of hard and soft palate with their relevant clinical conditions	1. 2. 3. 4.	Discuss the bony framework of hard palate. Identify the gross features of hard palate and soft palate. Identify muscles of soft palate on the model	SGD and dissection	MCQ/ SAQ/OSPE Viva
13	Pharynx	Correlate the gross anatomy of pharynx with relevant clinical conditions		Differentiate extent, anatomical features, vascular supply, nerve supply of three parts of pharynx on anatomical basis	SGD and dissection	MCQ/ SAQ/OSPE Viva

			_			
14	Nose and paranasal sinuses	Correlate the gross anatomy of Nose and paranasal sinuses with relevant clinical conditions		List muscles of pharynx with nerve supply and action Name structures passing through the spaces between muscles of pharynx Trace origin of pharyngobasilar fascia on base of skull. Correlate anatomical knowledge of pharayngobasilar fascia with patency of nasopharynx Justify role of Eustachian tube in equalizing middle ear pressure, age related obliquity Describe anatomical route of spread of infections from nasopharynx to middle ear. Relate boundaries of tonsillar fossa and tonsillar bed with significant structures that must be protected during tonsillectomy. Define Kilian's dehiscence Describe the skeletal framework of different walls of nose Describe the features, vascular supply, nerve supply and openings in lateral wall of nose Describe the features, vascular supply, nerve supply of medial wall of nose Highlight the significance of	SGD and dissection	MCQ/ SAQ/OSPE Viva

		9		Trace the location and	1	
				drainage of paranasal		
		11		sinuses in skull and on		
			-	radiograph		1100/
15	Pterygopalatine	Describe the		Identify the location of	SGD and	MCQ/
	fossa	anatomy of		pterygopalatine fossa on	dissection	SAQ/OSPE
		Pterygopalatine		skull		Viva
		fossa in relation		List bones forming walls of		
		with		pterygopalatine fossa		
		surrounding		Enumerate the contents		l 1
		structures		and communications		
				Describe the distribution of		
				third part of maxillary	1	
				artery, nerve and		
				pterygopalatine ganglion		
		1		Justify the role of		
				pterygopalatine ganglion in		
				hay fever/allergies		
16	Orbit	Correlate the		Describe the skeletal	SGD and	MCQ/
10	Olbit	anatomy of		framework of bony orbit	dissection	SAQ/OSPE
		orbital contents		and its communications	dissection	Viva
		with relevant				Viva
		clinical		List the contents of orbit		
		1		Identify the parts of eyeball		
		significance.		on a model		
ľ				Tabulate the attachments,		
				nerve supply and actions of		
				extraocular muscles		1
				Justify the movements of		
				extraocular muscles based		
				on their attachments		
				Trace the course and		
				distribution of 3, 4 and 6		
				CN.		
				Justify the peculiar Position		
				of eyeball in case of lesion		
				of 3, 4 and 6 CN	1	
				Trace the route and		
				distribution of ciliary		
				ganglion.		
		4		Describe the course and		
				distribution of ophthalmic		
				nerve		
				Describe the nerve supply		
				of Lacrimal gland		
			_	C. Lacinna Biana	iii	

17	Lacrimal apparatus	Correlate the	☐ Enumerate the structures	SGD and	MCQ/
		anatomy of	forming lacrimal apparatus	dissection	SAQ/OSPE
		lacrimal	☐ Describe the nerve supply		Viva
		apparatus with	of lacrimal apparatus		
		relevant clinical	☐ Correlate the anatomical		
		significance	structures of lacrimal		
		17	apparatus with the features		
			of blocked Lacrimal duct		
18	Ear (external,	Correlate the	☐ Describe the gross	SGD and	MCQ/
	middle and internal)	gross anatomy	anatomical features,	dissection	SAQ/OSPE
		of ear with	boundaries, structures and		Viva
		relevant clinical	contents of middle ear		
		conditions	cavity.		
			Describe the structures forming the walls of middle		
			forming the walls of middle ear cavity on the given		
			model.		
			☐ Highlight the importance of		
		1	infection in middle ear		
			cavity in relation to its		
			communications.		
			☐ Trace the pathway and		
		113	distribution of facial nerve		
			within petrous part of		
			temporal bone.		
			Skills		
S.No	Topic/ Theme	Learning	Learning	Instructional	Assessment
3.140	Topic, meme	outcomes	Objectives/Contents	strategies	tool
1	Gross Anatomy of	Identify the	Identify muscles, bones,	SGD and	MCQ/
	head and neck	important	ligaments, nerves, vessels,	dissection	SAQ/OSPE
		structures in	organs and their parts on given		Viva
		region of head	models and dissected		
		and neck on	specimens.		
		cadavers,			
		specimens and			
		models			
2	Surface marking	Mark the vital	1. Identify the important	SGD and	MCQ/
		structures of	landmarks of head and neck	Skills lab	SAQ/OSPE
		head and neck	and mark them on a subject.		Viva
		on skin of a	2. Mark the parotid duct,		
		subject	thyroid gland, main vessels and nerves of the head and		
1		l .	neck on the given subject		

3.	Imaging of head and	Identify the	Identify the important bony	SGD and	MCQ/ SAQ/
	Neck	important bony	landmarks of cervical	skills lab	OSPE/Viva
		landmarks in	vertebrae, paranasal sinuses		
		region of head	skull on x ray.		
		and neck on xrays.			

List of Histology practicals

Sr No.	Topics
At the en	d of these practicals, students will be able to identify/ illustrate following:
1.	Connective tissue
2.	Cartilage
3.	Bone
4.	Muscle tissue
5.	Oral cavity (Lip, Tongue)
6.	Salivary glands

ANATOMY BLOCK-3 (08 WEEKS)						
Couse Outline						
Gen Anatomy	Histology	Embryology	Gross Anatomy			
Skin & fascia	Lymphoid system	CNS	Brain			
Arthrology						
Nervous system-II						

Cou	Course Content							
	General Anatomy							
S.No	Topic/ Theme	Learning outcomes	Learning objectives/ Content	Instructional Strategies	Assessment Tool			
1.	Skin and Fascia	Apply the general anatomical concept of skin and fascia in understanding of their regional distribution and differentiation	 Differentiate between thick and thin skin List functions of skin Identify different types of skin creases and lines Define fascia Differentiate between different modifications of fascia. Describe the importance of cleavage lines and wound healing List the structures involved in first, second and third degrees of burns 	LGIS	MCQs/ SEQs/SAQs/ OSPE/VIVA VOCE			

2.	Arthrology	Anatomize the general features of joints	 Classify joints according to their structure with examples of each type especially from head and neck (wherever possible) Describe the general structure of a synovial joint Discuss anatomy of joints with reference to dislocation, sprain and inflammation Describe Hilton's law 	LGIS	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
3.	Nervous system-II	Appraise the basic organization of the main structures that form nervous system	 Define the grey matter, white matter, ganglion, nucleus and nerve. Appraise a three-dimensional appreciation of the parts of the brain and their relative positions to one another 3. Outline the anatomical organization of autonomic nervous system 		MCQs/ SEQs/SAQs/ OSPE/ VIVA VOCE
		SPECIAL	HISTOLOGY	9	2.
S.No	Topic/ Theme	Learning outcomes	Learning objectives/ Content	Instructional Strategies	Assessment Tool
1.	Lymphoid system	Differentiate between H&E stained slides of different components of lymphoid system	KNOWLEDGE 1. Enumerate different types of lymphoid cells and identify their distribution in the body 2. Describe the histological features and cells of the lymphoid system 3. Describe the histological features of tonsils, thymus, lymph node SKILL 1. Identify histological sections of tonsils,	LGIS	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

	,	1	t e		
			thymus and lymph node under light microscope and list at least two identification points of each. 2. Draw labelled diagrams showing light microscopic structure of tonsils, thymus and lymph node		
		Special E	mbryology		
S.No	Topic/ Theme	Learning outcomes	Learning objectives/ Content	Instructional Strategies	Assessment Tool
1.	CNS	embryological basis behind formation of different components of nervous system and correlate them with	 Explain the development of spinal cord. Describe the positional changes of the cord. Explain the causes of neural tube defects Enlist various variants of spina bifida. Explain the process of development of various variants of spina bifida Summarize primary and secondary brain vesicles with their derivatives. 	LGIS	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
		Brain and N	leuroanatomy		
S.No	Topic/ Theme	Learning outcomes	Learning objectives/ Content	Instructional Strategies	Assessment Tool
1.	Anatomy of cranial cavity	Appraise the gross features of cranial cavity and the structures contained within it to understand the anatomical basis of clinical conditions related to them.	 Describe and demonstrate the boundaries and gross features of cranial fossae. Enlist and demonstrate foramina along with structures passing through them in anterior, middle and posterior cranial fossae. 	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

			Recognize and demonstrate the important sutures, fontanelle and impressions on the interior of cranial vault.	
2.	Gross Anatomy of Spinal cord	Correlate the position and functions of the main nervous pathways and nerve cell groups in the spinal cord, with associated segmental injuries and diseases.	 Explain the gross appearance and the nerve cell groups in the anterior, posterior and lateral gray columns of spinal cord Enumerate and illustrate the arrangements of ascending and descending tracts (white matter) in spinal cord at various levels. Explain the given clinical conditions related to ascending and descending tracts of spinal cord. Trace following pathways of superficial and deep sensations indicating the location of first, second and third order neurons. Pain and temperature pathways Light touch and pressure pathways Discriminative touch, vibratory sense and conscious muscle joint sense. Muscle joint sense pathways to the cerebellum Posterior spinocerebellar tract Anterior spinocerebellar tract 	MCQs/ SEQs/SAQs/ OSPE VIVA VOCE

			 □ Trace following pathways of voluntary movements indicating the location of first, second and third order neurons. □ Cortico spinal tracts
3.	Gross anatomy of the brainstem	Appraise the anatomy of brainstem to assess the signs and symptoms presented by the patient in identifying the exact location of a structural lesion.	Describe the gross appearance and internal structure of the medulla oblongata. Illustrate the cross sections of medulla oblongata at different levels. Apply the knowledge of neuroanatomy to explain the following clinical conditions: Arnold-chiari malformation Medial medullary syndrome Lateral medullary syndrome Wallenberg. Describe the gross features and internal structure of pons. Illustrate cross section of pons at different levels showing major structures at each level. Analyze the anatomical structures involved in pontine hemorrhage and infarction of pons. Describe the gross appearance, internal structure of mid brain. Illustrate cross section of midbrain at the levels of superior colliculus and inferior colliculus

			showing major structures a each level. Justify the lesions of midbrain structures by the blockage of cerebral aqueduct. Identify the gross features of medulla, mid brain and pons on a given model.		
4.	Gross anatomy of cerebellum & its connections	Outline the structure, function and connections of the cerebellum with the remainder of the central nervous system to understand the anatomical basis of cerebellar dysfunctions.	Briefly demonstrate the gross features and phylogenetic divisions of cerebellum. Enumerate afferent and efferent fibers of superior, middle and inferior cerebellar peduncles. List intracerebellar nuclei and types of fibers constituting white matter of cerebellum and. List disturbances of voluntary movements, reflexes, ocular movements, speech, posture and gait resulting due to lesions of cerebellum. Demonstrate different parts of cerebellum on given model.		MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
5.	Gross anatomy of cerebrum	Appraise the structure, function and connections of the cerebrum with the remainder of the central nervous system to understand the anatomical basis of associated clinical conditions.	Describe the topographic anatomy of diencephalon and demonstrate its gross features on a given model. Enlist main sulci and gyri of cerebral hemispheres and describe the extent of each of them.	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

1 1	1 1
1 1	☐ Explain the divisions of
	cerebral lobes on
	superolateral, medial and
	inferior surfaces of
	cerebral hemispheres.
	☐ Enumerate fibers making
	up the white matter of
	cerebral hemispheres and
	describe each of them
	(Summarize parts,
	relations & fibers forming
	Internal capsule).
	☐ Mark main sulci and gyri
	on lobes of cerebral
	hemispheres.
	☐ Identify commissural,
	projection and
	association fibers on
	brain prosected specimen
	☐ Describe and
	demonstrate the cortical
	functional areas in
	different lobes of
	cerebral hemispheres.
	☐ Enumerate types of
	aphasia and describe the
	lesions of speech areas
	responsible for producing
	aphasia.
	☐ Explain the effects of
	lesion in the primary and
	secondary visual cortex.
	☐ Illustrate the lateral and
	medial views of cerebral
	hemispheres showing
	motor and sensory areas.

6.	Gross anatomy of reticular formation & limbic system	Correlate the structure and function of the reticular formation and parts of the limbic system with associated clinical conditions.	 Outline the general arrangement and functions of reticular formation. Enumerate components of limbic system and explain hippocampal formation with reference to its afferent and efferent connections. Identify different components of limbic system on given model. 	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
7.	Gross anatomy of basal nuclei	Recognize the location, connections and functions of basal nuclei to explain its common relevant diseases	 □ List terminology commonly used to describe the basal nuclei. □ Outline Parkinson disease regarding etiology, characteristics signs and symptoms, types and treatment □ identify different components of basal ganglia on given model/specimen 	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
8.	Gross anatomy of cranial nerves	Appraise the location and connections of motor and sensory nuclei of the cranial nerves to identify the correct site of relevant cranial nerve lesions.	 Enumerate the cranial nerves and classify them into sensory, motor and mixed nerves. Describe the nuclei and intracranial course of all cranial nerves. Apply the knowledge of neuroanatomy to explain the clinical conditions regarding the lesions of various cranial nerves. Identify different cranial nerves on given model/specimen 	SGD	MCQs/ SEQs/SAQs/ OSPE/VIVA VOCE

9.	Gross anatomy of thalamus, Hypothalamus & their connections	Appraise the structure, function and connections of the thalamus and hypothalamus with the remainder of the central nervous system to understand the anatomical basis of associated clinical conditions.	Describe the divisions, nuclei and connections of thalamus. Summarize the connections of hypothalamus with the pituitary gland. Enlist the functions of main hypothalamic nuclei.	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
10.	Gross anatomy of meninges and Dural venous sinuses of brain & spinal cord	Appraise the arrangement of the meninges of brain and spinal cord to identify different types of cerebral hemorrhages.	Define meninges of brain and describe the Dural reflections in brain. Explain the meninges of spinal cord Enumerate the nerves and blood vessels supplying the meninges. Differentiate among different varieties of intracranial hemorrhages. Demonstrate the supratentorial and infratentorial compartments of tentorium cerebelli in a prosected specimen. Define and enumerate paired and unpaired Dural venous sinuses along with their attachments. Describe the location, important relations, communications of cavernous sinus and enumerate structures passing through it.	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE

11.	Gross anatomy of ventricular system, CSF, Blood brain & blood-CSF barriers	Appraise the anatomical organization of ventricular system, CSF, Blood brain & blood-CSF barriers to explain the relevant clinical scenarios	 Describe the anatomical organization of ventricular system and boundaries of third ventricle and choroidal plexus of each ventricle. Define arachnoid villous and outline the role of arachnoid villi in absorption of CSF. Outline the formation of different barriers of brain. Summarize the floor of fourth ventricle. 	SGD	MCQs/ SEQs/ SAQs/ OSPE/ VIVA VOCE
12.	Blood supply of the brain and spinal cord	Outline the blood supply of the brain and spinal cord	 □ Recognize the blood supply of different parts of brain and spinal cord. □ Outline the formation and importance of veins of brain. □ Enumerate the vessels taking part in formation of circle of Willis with its importance. □ Relate the interruption of cerebral circulation of cerebral artery syndromes due to anterior, middle and posterior cerebral artery occlusion. □ Illustrate circle of Willis. 	SGD	MCQs/ SEQs/SAQs/ OSPE/VIVA VOCE

List of Histology practicals

	<u> </u>	
Sr No.	Topics	
At the end of these practicals, students will be able to identify/ illustrate following:		
1.	Lymphoid system (Lymph node)	
2.	Thymus	
3.	Tonsil (Palatine, pharyngeal)	

Learning Resources

GROSS ANATOMY					
UNUS AINA I UM I					
Text Books	Reference Books				
Clinically oriented Anatomy By Keith L Moore (8th Edition)	LAST's Anatomy Regional & Applied (12th Edition)				
Clinical Anatomy for medical students	Gray's Anatomy				
By Richard S. Snell (10 th Edition)	By Henry Gray's (41st Edition)				
Cunningham's manual of practical anatomy 15th Edition					
Vol-1 (Upper limb & Lower limb)					
Vol-2	Atlas of Anatomy				
(Abdomen & Thorax)	By Netter (7th Edition)/ Atlas of Anatomy				
Vol-3 (Head & Neck, Brain) (Only For BDS)	By Grant's				
Photocopy of "General Introduction" from Cunningham's manual Vol-I (Page 1-19) (Only For BDS)					
Sketch book Gross					
Clinical Neuroanatomy By Richard S. Snell (8th Edition) only for BDS	Atlas of Anatomy By Netter (6 th Edition)/ Atlas of Anatomy By Grant`s				
	Museum Atlas				
	HISTOLOGY				
Text Books	Reference Books				
Basic Histology By Luiz carlos Junqeira (14 th Edition)					
Di-fiore's Atlas of Histology (13th Edition)					
Manual of Histology Vol – I	Medical Histology by Prof. Laiq Hussain (6 th edition)				
Manual of Histology Vol – I Manual of Histology Vol – II (for BDS only) By Prof Dr Tassaduq Hussain Shaikh/ Contextual Journal of Histology					
GE	NERAL ANATOMY				
Text Books	Reference Books				
General Anatomy by Prof Laiq Hussain	General Anatomy By Dr Tassaduq Hussain Shaikh(16 th Edition)				
(5 th edition)	General Anatomy By Prof Dr Ghulam Ahmed (7 th Edition)				
EMBRYOLOGY					
Text Books	Reference Books				
Langman's Medical Embryology(14 th Edition)					
The Developing Human By Keith L-Moore (11th Edition)	Netter's Embryology Atlas				

[•] All books are available at College Bookshop (CMH LMC & IOD).

Other Learning Resources

Hands-on activities	Students will be involved in practical session and hands-on activities to enhance learning.
Lab, Museum and Dissection Hall	Utilize the lab to relate knowledge to specimens and models available.
Videos	Animated videos of developmental histology, simulated patients etc. to clear the concepts of the students shown during interactive lecture sessions.
Computer lab/CDs/DVDs/Internet resources	To increase the knowledge, students should utilize the available internet resources and CDs/DVDs in main IT lab/personal laptops.
Self-study	Self-study is incorporated to help the student in managing individual tasks/assignments. Student will search for information through available resources.

Cadavers and Specimens in Anatomy Department

Sr. No	Subject (items in Dissection Hall)	Description
1	Mortuary	Full Cadavers
		Torso
2	Specimens in jars	Brain
		Head & Neck
		Upper Limb
		Lower Limb
		Thorax
		Abdomen/Pelvis
		Embryology
3	Specimens in tanks	Upper Limb
		Lower Limb
4	Specimens in buckets	Lungs
		Heart

Sr. No	Subject (items in Dissection Hall)	Description
		Liver
		Cut vertebral column
		Foot
		Spleen
		Spine
		Abdominal wall
		Thoracic wall
		Abdomen
		Intestine
		Kidney
		Head and Neck
		Abdomen
		Pelvis
		Female pelvis
		Thorax

List of Study Models in Anatomy Museum

Sr. No.	Item Names
1	Head & neck
2	Brain / spinal cord
3	Lower limb
4	Upper limb
5	Thorax
6	Abdomen
7	Pelvis & perineum
8	General Embryology
9	Special Embryology
10	Histology

Sr. No.	Item Names
11	Whole Skeletal
12	Skull
13	Lower limb joints
14	Upper limb joints
15	Vertebral column
16	Whole pelvis
17	Torso

Histological Slides, Equipment and Facilities in Histology Lab

Sr. No.	Items
1	Local & imported slides of General and Special
	histology
2	Slides of Embryology
3	Slides of Neuroanatomy
4	Binocular microscopes
5	Multi-head teaching microscope
6	Tissue processor
7	Microtome (rotary)
8	Embedding station
9	Operation room
10	Refrigerator (large)
11	Computer with internet facility
12	Stools

Summative Assessment Methods and Policies

Internal Assessment

- Weightage of internal assessment shall be 20%, each for theory and practical, in BDS Professional Examination.
- The Internal Assessment shall comprise of monthly test / assignments / class presentation / send-ups /class tests / OSPE etc.
- The Internal Assessment record shall be kept in the respective department of the College /
 Institute and after approval of Principal, a summary as per university registration number shall be
 furnished to the Controller of Examinations, at least two weeks before the commencement of
 final examination.
- The result of all the class tests / tools which contribute towards IA will be displayed to the students during an academic year.
- The same internal assessment shall be counted both for annual and supplementary examinations. The students who are relegated, however, can improve the internal assessment during subsequent year
- Internal assessment tools of any subject may be changed after the approval of respective FBS.

Annual Examination

- The weightage of Annual Examination shall be 80%, each for theory and practical, in BDS.
- The examination comprises of a theory paper and practical/clinical examinations as per PMC regulations and the Table of Specifications (TOS) of the University.
- The gap between two consecutive theory papers shall not be more than two days.
- The Theory Paper shall be of 3-hours duration, held under the arrangements of the university. It shall have two parts: MCQs and SEQs for the year 2022. It may be changed after the approval of Academic Council.

Internal Examiner

He/she shall be Professor and Head of department who has been involved in teaching of the class being examined for at least six months. Second preference shall be Associate/Assistant Professor who is involved in teaching of the class and posted there for one year. Third preference shall be a recognized Professor of the subject.

External Examiner

He/she shall be a Professor/Associate Professor of a recognized Medical/Dental College or at least an Assistant Professor with three years teaching experience in the relevant subject.

Conflict of Interest

No person shall serve as an examiner whose close relative (wife, husband, son, daughter, adopted son, adopted daughter, grand-son, grand-daughter, brother, sister, niece /nephew, son and daughter-in-law brother and sister- in-law, parental and maternal uncle and aunt etc) is appearing in the examination. All examiners likely to serve as an examiner shall render a certificate in compliance to this para.

Paper Setting

- Each College / Institute shall forward a set of two question papers as per TOS along with the key for each subject to the Controller of Examinations, at least three months in advance of the annual examination. The question paper as a whole / a question without a comprehensive key shall not be considered towards final paper setting.
- The set of question papers shall be prepared by the respective Head of department and furnished to Controller of Examinations through Head of Institution (HoI).
- The Controller of Examinations shall approve the faculty for the final paper setting having fair representation of each college / institute.

Paper Assessment

- The Controller of Examinations shall approve the faculty for the theory paper marking, to be undertaken in the manner as deemed appropriate.
- The Examination Directorate shall coordinate directly with the faculty, earmarked for the paper marking.
- A student who scores 85% and above marks in any subject shall qualify for distinction in that particular subject.
- A fraction in aggregate marks of a subject shall be rounded off to whole number. If it is less than
 0.5 then it will be rounded off to the previous whole number while 0.5 or more will be rounded
 off to the next whole number.

Practical Examinations

- The Controller of Examiners shall approve the faculty to serve as the internal & external examiners.
- The number of external and internal examiners shall be equal.
- One external & internal examiner each shall be marked for a group of 100 students.
- Candidates may be divided into groups practical examinations and be standardized by incorporating OSPE stations.
- Practical examination shall be held after the theory examination of the subject but in special
 cases, it may be held before the theory examination with the approval of the Controller of
 Examinations. For the purpose of practical/clinical examination, the candidates may be divided
 into subgroups by the examiners.

 The assessment of the practical examination duly signed by internal & external examiner shall be furnished to the Controller of Examinations within one week of the conclusion of examination.

Pass Marks

- Pass marks for all subjects shall be 50 % in theory and practical, separately.
- No grace marks shall be allowed to any student in any examination.

Declaration of Result

Every effort shall be made to declare the result of each examination within one month of the last practical examination or earlier.

Promotion

No student shall be promoted to the higher classes unless he/she passes all the subjects of the previous class

Re-totaling

Any student may apply to the Controller of Examinations on a prescribed form along with the specified fee.

Supplementary Examination

The interval between a supplementary examination and the previous professional examination shall not be more than two months. There shall be no special supplementary examination.

Academic Audit

The Vice Chancellor may get any academic matter deliberated in the manner as deemed appropriate.

Issue of Academic Transcript/Detailed Marks Sheet

A student desirous of obtaining Academic Transcript / Detailed Mark Sheet may apply to Controller of Examinations along with the prescribed fee for each original copy.

Withdrawal/Failure

Any student who fails to clear the first Professional in BDS or first in four chances, availed or un-availed, shall be expelled as per PMC policy and shall not be eligible for fresh admission as a fresh candidate in either BDS.

Proposed First Professional BDS Examination - 2022 ANATOMY

Table of Specifications for Annual First Professional Examination: Theory

Time Allowed =03 hrs (Including MCQs)

Marks of theory paper =80
Internal assessment =20
Total marks =100
Pass Marks =50

40 x MCQs (on separate sheet) (40 Marks) Time = 50 Minutes

Q. No. 1,2,3,4,5,6,7,8

5 x SAQs/SEQs (Recall) = 05 marks each 3 x SAQs/SEQs (Application) = 05 marks each

Total Marks = 40 Marks Time = 2 hour & 10 Minutes

S. No	Topic	No of MCQs (40) (Recall=25, Application=15) (1 mark each)	No of SAQ/SEQs (08) 05x SAQ/SEQs (Recall) 03x SAQ/SEQs (Application) (05 marks each)
1.	General Anatomy	05	01
2.	General Histology	05	01
	Special Histology	03	
3.	General Embryology	04	01
	Special Embryology	04	
4.	Gross Anatomy (Head &	10	03
	Neck)	09	02
	Neuroanatomy		
	Total	40 (40 Marks)	08 (40 Marks)

Theory: Internal Assessment (IA) Calculation (20 Marks)

Exams	Weightings	Exams	Percentage
End of Block & Pre- annual	80%	End of Block Exam - I	20
Exams		End of Block Exam - II	20
		End of Block Exam- III	20
		Pre-Annual Exam	20
Modular/ Class Performance	20%	Modular/ Class Tests	20
Total	100%		100%

TOS for viva/practical

VIVA 40 marks		OSPE 40 marks	Total Marks (viva + practical)	Internal assessment	Grand Total
Internal	External				
20 marks	20 marks	40 marks	80 marks	20 marks	100 marks

OSPE (40 marks)					
Stations	Topic	No of stations	Marks per station	Total marks	
Histology Unobserved	Histology spotting (OSPE)	10	01	10	
Histology	Histology long slide	05		00	
Observed	Histology manual	03		08	
Gross	Gross anatomy &		02	18	
Unobserved	Embryology spotting	09		03	
Gross Observed	Surface marking	01	03	03	
Radiology		02	0.5	01	
Total		23 stations		40 marks	

Practical: Internal Assessment Calculation (20 Marks)

Exams	Weightings	Exams	Percentage
End of Block & Pre- annual	80%	End of Block Practical/OSPE I	20
Exams		End of Block Practical/OSPE II	20
		End of Block Practical/OSPE III	20
		Pre-Annual Exam	20
Class Performance	20%	*SGD/ CBL/ PBL/ Practical	20
Total	100%		100%

☐ CBL/Assignments /Gross Sketch copies are part of Formative Assessment *

SGD= Small Group Discussion

CBL= Case Based Learning

PBL= Problem Based Learning

Curriculum Map Anatomy

By the end 1st Year of dental Academic Year, students should be able to co-relate normal anatomical structures of human body with emphasis on Head & Neck and Brain Regions along with their clinical significance at macroscopic microscopic and developmental level.

