



## **CURRICULUM / STATUTES/ REGULATIONS**

## FOR 2 YEARS DIPLOMA PROGRAMME IN

# **Medical Radiological Diagnosis**

(DMRD)

Faisalabad Medical University

Faisalabad

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## **Section A**

#### **VISION STATEMENT:**

Faisalabad Medical University has been established since 05-05-2017 for purpose of imparting better medical education and encouraging and arranging extensive research and publication in the field of medical science. The vision of university is:

"Striving to achieve national and international stature in undergraduate and postgraduate medical education with strong emphasis on professionalism, leadership, community health services, research and bioethics"

#### **MISSION STATEMENT**

The mission of the University is:

"Educate Healthcare professionals to prevent, diagnose and treat human illnesses to practice evidence-based medicine with focus on lifelong healthcare in order to meet the challenges of community needs and competitive medical profession at the same time"

### **STATUTES**

#### **Nomenclature**

Diploma In Medical Radiological Diagnosis – DMRD

#### **Course Title:**

Diploma In Medical Radiological Diagnosis

### **Training Centers**

Department of Diagnostic Radiology in Affiliated hospitals of Faisalabad Medical University, Faisalabad.

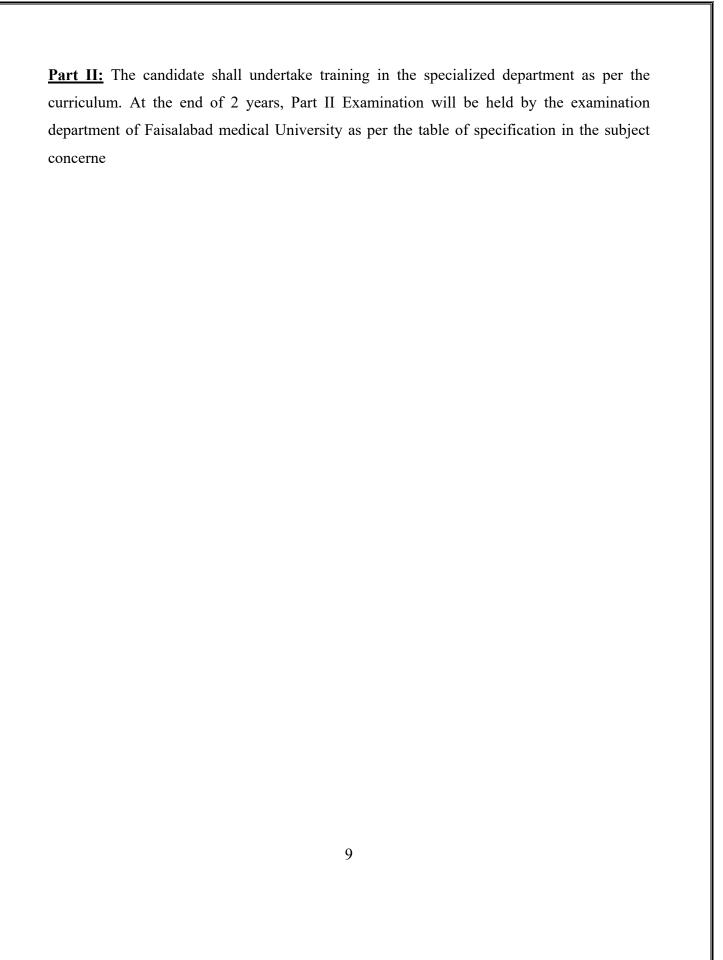
#### **Duration of Course**

The duration of course shall be 2 years with structured training in a recognized department as per Course structure:

#### **Course Outline**

The course is structured in two parts:

Part I: The candidate shall undertake the training in the basic sciences as per curriculum. 75% content will be uniform for all the specialties, approved by the Dean basic sciences and academic council, while 25% will be subject specific, provided and approved by the relevant department and academic council. At the end of 6-month, Part I Examination will be held by the examination department of Faisalabad medical University as per the table of specification in the basic medical Sciences subjects with same percentage of content from uniform and subject specific content as indicated above i.e. 75% and 25% respectively. All the candidates will attend classes in basic science departments as per the time table for 5 days(mon-fri) and on Saturday they will attend the class in their respective specialty as per the time table provided by the university during first 6 months.



## **Section B:**

## Admission and Eligibility Criteria:

Applications for admission to DIPLOMA will be invited through advertisement in print and electronic media and according to guidelines and rules approved by the Faisalabad Medical University

Candidates shall have MBBS or equivalent classification, valid PMDC registration, one year House job (Three year house job in relevant specialty will be preferred), secured pass percentage in entry test conducted by The Faisalabad medical university, qualify the interview successfully

#### **Required Documents:**

- 1. Completed application Form
- 2. Copy of MBBS degree with mark sheets of Professional Examinations and certificate of number of attempts in Professional Examination
- 3. Copy of PMDC Registration certificate.
- 4. Certificate of completion of required experience.
- 5. Reference letters from two consultants, with whom the applicant has worked
- 6. Three latest passport size photographs

#### **Accreditation Related Issues of the Institution**

#### A. Faculty

Properly qualified teaching staff in accordance with the requirements of Pakistan Medical and Dental Council (PMDC).

### **B.** Adequate resources

The university will provide adequate resources Including class-rooms (with audiovisual aids), demonstration rooms, computer lab, clinical pathology lab, theaters, instruments and other equipment etc. for proper Training of the residents as per their course outcomes and objectives.

#### C. Library

Departmental library should have latest editions of recommended books, reference books and latest journals (National and International).

### **Section C:**

## AIMS AND OBJECTIVES OF THE COURSE

#### **AIM**

The aim of two years Diploma programme in Medical Radiological Diagnosis is to equip medical graduates with relevant professional Knowledge, skill and ethical values to enable them to apply their acquired expertise at health care institutions.

#### **LEARNING OBJECTIVES:**

#### **GENERAL OBJECTIVES**

At the end of training in DMRD, a trainee doctor should be able to:

- 1. Take a comprehensive and pertinent history of patients coming for radiological investigations
- 2. Take proper informed consent before commencing any investigative procedure and ensuring confidentiality and appropriate environment for procedures and investigative processes involving unusual exposure
- 3. Explain all procedures to patients or to their relatives in patient's preferred language in elective and emergency situations in keeping principles of good communication skills, empathy and empowerment to patients
- 4. Satisfactorily address fears, concerns and expectations of the patients

- 5. Exhibit emotional maturity and stability, integrity, ethical values and professional approach, sense of responsibility in day-to-day professional activities
- 6. Act as an independent specialist at Community/Tehsil and Headquarter Hospital
- 7. Show initiative and become lifelong self-directed learners tapping on resources including clinical material, faculty, internet and on-line learning programmes and library

#### SPECIFIC LEARNING OUTCOMES

Following competencies will be expected from a student completing 2 years' course in DMRD, student should be able to:

- 1. Interpret common radiological findings in a scientific manner while keeping in mind the logical reasoning and a clear understanding oftheir impact on human mind and body
- 2. Identify and Interpret Conventional radiography along with its Medicolegeal aspect
- 3. Perform recommended conventional radiological procedures with expertise
- 4. Discuss the basics of Radiological physics and equipment, especially related to its operation.
- 5. Perform abdominal and pelvic, Neck, obstetrical and Doppler ultrasound
- 6. Identify common pathologies occurring in the on ultrasound
- 7. Facilitate various ultrasound guided and CT guided procedures
- 8. Interpret Computed Tomography (CT) results

- 9. Decide when to use and not to use contrast in CT & Conventional Radiography
- 10. Interpret Magnetic Resonance Imaging results
- 11. Understand the radiological hazards.
- 12. Manage anaphylactic shock may result due to any contrast media

#### **Content list:**

#### Part I:

### A: Basic science:

#### **Anatomy:**

#### **Gross Anatomy of Head & Neck**

- SCALP & FACE
- BONY ORBIT
- MANDIBLE & CERVICAL VERTEBRA
- TEMPORAL FOSSA, INFRA TEMPORAL FOSSA & MANDIBLE
- EYE BALL & EXTRAOCCULAR MUSCLE
- FASCIA & TRIANGLES OF NECK
- TONGUE, ORAL CAVITY & SALIVARY GLAND
- LARYNX & THYROID GLAND

- PHARYNX
- EAR
- NOSE & PARANASAL AIR SINUSES
- VESSELS OF HEAD & NECK
- LYMPHATIC DRAINAGE OF HEAD & NECK
- RADIO GRAPHY OF HEAD & NECK
- Cranial Cavity

#### **Gross Ana. of Abdomen & Pelvis**

- ANTERIOR ABDOMINAL WALL
- ANTERIOR ABDOMINAL WALL & RECTUS SHEATH
- INGUINAL CANAL & HERNIA, SCROTUM & EXTERNAL GENITALIA
- PERITONEUM
- STOMACH & SMALL INTESTINE
- LIVER, PANCREAS, SPLEEN & EXTRAHEPATIC BILLIARY APPARATUS
- BLLOD SUPPLY & NERVE SUPPLY OF ABDOMEN
- LARGE INTESTINE + APPENDIX
- POSTERIOR ABDOMINAL WALL
- BONY PELVIS + JOINTS OF PELVIS
- FEMALE REPRODUCTIVE SYSTEM

- ANAL REGION
- NERVES & VESSELS OF PELVIS
- RADIO GRAPHS OF ABDOMEN & PELVIS

#### **Neuroanatomy**

- DURAL VENOUS SINUSES & MENINGIES
- BRAINSTEM 1
- BRAINSTEM 2
- BRAINSTEM 3
- ANS
- CEREBRUM 1
- CEREBRUM 2
- DIENCEPHALON 1
- DIENCEPHALON 2
- VENTRICULAR SYSTEM
- CRANIAL 1
- CRANIAL 2

#### **GROSS ANATOMY OF SPINAL CORD**

#### **General & Special Embryology**

### **General & Special Histology**

#### **Physiology:**

#### **CLINICAL DIPLOMA COURSE OF PHYSIOLOGY**

Conceptual and considered approach to

- 1. Cell physiology
- 2. Basic and Clinical Neurophysiology
- 3. Blood physiology
- 4. Heart and overview of Circulation
- 5. Renal Physiology
- 6. Advance Endocrinology
- 7. Respiratory Physiology
- 8. Molecular and physiological aspects of Nerve and Muscle

#### **CELL PHYSIOLOGY**

- 1. Functions of cells, cell membranes and its organelles
- 2. Homeostasis
- 3. Necrosis
- 4. Apoptosis

#### **BASIC AND CLINICAL NEUROPHYSIOLOGY**

1. Nerve physiology

- 2. Action potential in nerve fiber, mechanism of generation action potential in a nerve fiber
- 3. Parts of central, peripheral nervous system and their physiology
- 4. Autonomic nervous system
- 5. Special sense vision (eye)
- 6. Pathophysiology of the diseases involved

#### **BLOOD PHYSIOLOGY**

- 1. Components of blood, functions of blood plasma and plasma proteins
- 2. Blood grouping and principles of transfusion
- 3. The body defense systems (lmmunology)
- 4. Disorders of the blood

#### **HEART AND OVERVIEW OF CIRCULATION**

- 1. The basic structure and function of heart, ECG recording and interpretation
- 2. Conductive pathway of heart
- 3. Physiological principles to manage a person in shock due to various reasons
- 4. Disorders of the CVS

#### **RENAL PHYSIOLOGY**

- 1. Basic structure and function of the kidney
- 2. Glomerular filtration, tubular function and urine formation.
- 3. Role pf kidney in acid base, Na,K,Ca blance
- 4. Endocrine and regulatory functions of the kidney

### **ADVANCE ENDOCRINOLOGY**

- 1. Endocrine glands, classification their functions
- 2. Feedback control mechanisms
- 3. Disorders of endocrine glands

#### **Biochemistry**

#### .1. Buffers

- Ionization of water
- Henderson Hasselbach equation
- Body buffers and regulation of Acid base balance human body

- Acids produced in the body, mechanisms of regulation of pH, role of lungs and kidney in buffering mechanism
- Disorders of acid base metabolism

## **Enzymes:**

- Classification/nomenclature, Properties of enzymes and catalysts, regulation of enzyme activity
- Functions of enzymes and catalysts,
- Therapeutic use and application of enzymes in clinical diagnosis
- Enzyme kinetics, Factors affecting enzyme activity (Michaelis Menten and Lineweaver Burk equations)
- Classification of enzyme inhibitors and their biochemical importance

## **Carbohydrates:**

- Definition, biochemical function and classification of carbohydrates,
   Structure and functions of monosaccharides and their derivatives
- Disaccharides, Oligosaccharides, Polysaccharides and their Biochemical importance.

## **Proteins:**

- Definitions, biochemical importance and classification of proteins based on physiochemical properties, Structure of proteins and their significance in pH maintenance
- Amino acids and their structure, properties, functions, Classification and nutritional significance of amino acids,
- Immunoglobulins and their biomedical significance
- Plasma proteins and their clinical significance

## porphyrins and Hemoglobin:

- Chemistry and biosynthesis of porphyrins and related disorders
- Structures, functions and types of hemoglobin, Oxygen binding capacity of hemoglobin, factors affecting and regulating the oxygen binding capacity
- of hemoglobin, Haemoglobinopathies (Sickle cell disease, Thalassemia etc.) and their biochemical causes
- Degradation of haem, formation of bile pigments, its types, transport and excretion
- Hyperbilirubinemias, biochemical causes and differentiation

## **Lipids and Fatty Acids:**

- Classification of lipids and their biochemical functions, Structure and biochemical function of neutral lipids phospholipids, glycolipids and sphingolipids
- Classification of fatty acids and their biochemical functions,
- Eicosanoids and their function in health and disease
- Steroids and their biochemical role, Cholesterol, its structure, chemistry and functions
- Bile acids and bile salts
- Lipid peroxidation and its clinical significance

## Vitamins and minerals:

- Vitamins and their different types, Classification of vitamins, their chemical structure and biochemical function, Absorption of vitamins and minerals
- Daily requirements, sources of water- and fat-soluble vitamins
- Clinical effects of vitamin deficiency, Role of vitamins as co-enzymes, Hypo- and hyper- vitaminosis
- Minerals in human nutrition, sources, biochemical actions and recommended daily allowance (RDA), Sodium, potassium, chloride, calcium, phosphorus, magnesium, sulfur,

iodine, fluoride, Trace elements: Iron, Zinc, Selenium, Iodine, Copper, Chromium, Cadmium, Manganese (Fe, Zn, Se, I, Cu, Cr, Cd and Mn)

# **Endocrinology:**

- Introduction of hormones, mechanism of hormone action, classification of hormones
- Endocrine hormones of human body (Synthesis, Secretion, Mechanism of Action, effects on target tissues, regulation, related disorders)
- a. Anterior Pituitary Hormones
- b. Posterior Pituitary Hormones
- c. Hormones of Adrenal Cortex, Adrenal Medulla
- d. Sex Hormones of male & female reproductive system
- e. Hormones of thyroid gland
- f. Parathyroid Hormone
- g. Endocrine portion of Pancreas

### **Nucleotides and Nucleic acids:**

 Chemistry of purines and pyrimidines, their derivatives, structure and function, Derivatives of purines and pyrimidines, their role in health and disease

• Chemistry and structure of nucleoside and nucleotide and their biochemical role, Nucleic acids (DNA & RNA) their types, structure and functions

## **Bioenergetics and Biological oxidation:**

- Endergonic and exergonic reactions, coupling through ATP
- Oxidation and reduction, methods of electron transfer, redox potential, enzymes and coenzymes of biologic oxidation and reduction
- Respiratory chain and oxidative phosphorylation, components of respiratory chain, electron carriers
- ATP synthesis coupled with electron flow
- ADP coupled to electron transfer
- Uncouplers and inhibitors of oxidative Phosphorylation

## Metabolism of carbohydrates:

- Glycolysis, Phases and reactions of glycolysis
- Energetics of aerobic and anaerobic glycolysis and their importance, Regulation of glycolysis

- Cori's cycle, The fate of pyruvate
- Citric Acid Cycle, Reactions, energetics and regulation and importance of citric acid cycle
- Amphibolic nature of citric acid cycle (tricarboxylic acid cycle –TCA or the Krebs's cycle)
- Anpoleratic reactions and regulations of TCA cycle
- Gluconeogenesis
- Important three by-pass reactions of gluconeogenesis
- Entrance of amino acids and intermediates of TCA cycle and other nutrients as gluconeogenic substrates
- Significance of gluconeogenesis
- Glycogen metabolism
- Reactions of glycogenesis and glycogenolysis
- Importance of UDP-Glucose
- Regulation of glycogen synthase and glycogen phosphorylase
- Glycogen phosphorylase A and the blood glucose sensor

- Disorders of glycogen metabolism (glycogen storage diseases)
- Secondary pathways of carbohydrate metabolism
- Hexose Mono Phosphate (HMP) shunt, its reactions and importance
- Glucuronic acid pathway, its reactions and importance
- Metabolism of fructose, galactose and lactose
- Regulation of Blood Glucose level
- Hyperglycemia, hypoglycemia and their regulating factors
- Biochemistry of Diabetes Mellitus, its laboratory findings and diagnosis

## **Metabolism of Lipids:**

- Mobilization and transport of fatty acids, triacylglycerol and sterols
- Oxidation of fatty acids
- Activation and transport of fatty acid in the mitochondria
- $\beta$ -oxidation, fate of acetyl CoA, regulation of  $\beta$ -oxidation
- Other types of oxidations, i.e.,  $\alpha$ oxidation,  $\omega$ -oxidation, peroxisome oxidation, oxidation of odd number carbon-containing fatty acids and unsaturated fatty acids etc.
- Ketogenesis

- Mechanism and utilization of ketone bodies and significance
- Ketosis and its mechanism
- Biosynthesis of fatty acids
- Eicosanoids, synthesis from arachidonic acid, their mechanism and biochemical functions
- Triacylglycerol synthesis and regulation
- Synthesis and degradation of phospholipids and their

#### metabolic disorders

- Cholesterol synthesis, regulation, functions, fate of intermediates of
- Cholesterol synthesis, hypercholesterolemia, atherosclerosis
- Plasma lipoproteins, VLDL, LDL, HDL, and chylomicrons, their transport, functions and importance in health and disease
- Glycolipid metabolism and abnormalities

## Metabolism of proteins:

• Amino acid oxidation, metabolic fates of amino acid, transamination, deamination decarboxylation, deamidation and transamination

- Transport of amino group, role of pyridoxal phosphate, glutamate, glutamine, alanine
- Ammonia intoxication, nitrogen excretion and urea formation,
- Urea cycle and its regulation, genetic defects of urea cycle
- Functions, pathways of amino acid degradation and genetic disorders of individual amino acids

## **Metabolism of Nucleotides:**

- De novo purine synthesis
- Synthesis of pyrimidine
- Recycling of purine and pyrimidine bases (Salvage pathway)
- Degradation of purine, formation of uric acid
- Disorders of purine nucleotide metabolism

# **Bio signaling:**

- G-Protein Coupled Receptor
- Second Messengers

- Tyrosine Kinase Receptor
- Role of cGMP
- Multivalent Adaptor Proteins and Membrane Rafts
- Gated Ion Channels
- Bidirectional Cell-Adhesion Receptors
- Regulation of Transcription by Nuclear Hormone Receptor
- Regulation of Cell Cycle by Protein Kinases
- Oncogenes, Tumor Suppressor Genes, Programmed Cell Death

## **Genes and Chromosomes:**

- Chromosomal elements
- DNA supercoiling
- Structure of chromosomes
- Genetic Mutations

## **DNA Metabolism:**

- DNA structure
- DNA replication
- DNA damage and repair mechanism
  - DNA Recombination

## **RNA Metabolism:**

- DNA dependent synthesis of RNA
- RNA processing
- RNA dependent synthesis of RNA & DNA
- HIV Reverse Transcriptase
- Methods for generating RNA polymers

# Regulation and gene expression:

- Principles of gene regulation
- Process of Transcription, Post-Transcriptional Modification

- Regulation of gene expression in bacteria/eukaryotes
- Genetic code
- Process of Translation, Post-Translational Modification

# Metabolic disorders and their Clinical importance

- 1. Metabolic disorders related to Carbohydrate Metabolism
- Diabetes Mellitus& its complications
- All types of Glycosuria
- Classical Galactossemia
  - Hereditary fructose intolerance•
  - Essential Fructosuria
- Essential Pentosuria
- G-6 PD deficiency
- Hyperosmolar Nonketotic Diabetic Coma
- Glycogen Storage Diseases

- Hypoglycemia
- Lactose intolerance
- 2. Metabolic disorders related to Lipid Metabolism
- Lipid Storage Diseases
- Ketosis and Ketonuria including Diabetic Ketoacidosis
- Respiratory Distress Syndrome
- Hypercholesterolemia
- All types of Hyperlipidemias including hyperlipoproteinemia
- Hypo lipoproteinemia
- Atherosclerosis, CVA, CHD
- Steatorrhea
- Chyluria
- Cholelithiasis/Obstructive Jaundice
- Congenital Adrenal Hyperplasia
- Carnitine Deficiency

- Fatty liver
- Obesity/Metabolic Syndrome
- Disorders related to oxidation of Fatty Acids (Refsum's Disease, Zellweger syndrome, Methyl Malonic Acidemia, SIDS)
- 3. Metabolic disorders related to Protein Metabolism
- All types of Uremia
- Hepatic Encephalopathy
- Hyperammonemia
- Arginine-succinic aciduria
- Citrullinemia
- Isovaleric academia
- Glycinuria /Hyperoxaluria
- Cystinuria / Cystinosis
- Phenylketonuria/Albinism
- Tyrosinemia
- Alkaptonuria
- Homocystinuria

- Hartnups disease
- Maple Syrup Urine Disease
- Histidinemia
- Creatinuria
- Carcinoid syndrome
- 4. Metabolic disorders related to Nucleotides and Nucleic Acids Metabolism
- Hyperuricemia & Hypouricemia
- Gout
- Lesch-Nyhan Syndrome
- Severe Combined Immunodeficiency Disease (SCID)
- Oroticaciduria
- Purine Nucleoside Phosphorylase Deficiency
- 5. Metabolic disorders related to heme metabolism
- Porphyria's
- Hyperbilirubinemia

- Jaundice
- 6. Disorders related to Vitamins and Minerals
- Vitamin DeficiencyDiseases
- Minerals & Trace elements Deficiency Diseases
- 7. Clinical Enzymology
- Principles of Diagnostic Enzymology
- Isoenzymes and their role in clinical diagnosis
- Types of various enzymes in human body
- Functional & Non-Functional Enzymes
- Enzymes used as reagents and drugs
- 8. Clinical Nutrition
- Factors altering nutrition requirements in different conditions
- Nutritional assessment and support in health & convalescence
- Diseases that produce nutrition problems
- Protein Energy Malnutrition (PEM)
- 9. Single-Gene Disorders:

Major Modes of Inheritance (Autosomal Dominant, Autosomal Recessive, X-Linked Recessive)

10.	Cytogenetics:	
•	Numerical chromosome abnormalities:	
•	Euploidy, Aneuploidy	
•	Structural chromosome abnormalities:	
•	Translocations, deletions	
•	Other chromosomal abnormalities:	
•	Inversions, Ring Chromosome, Isochromosome, Uniparental Disomy	
•	Advances in molecular cytogenetics:	
•	Fluorescence in situ hybridization (FISH), Spectral Karyotyping	
11. Genetics of Common		
Diseases Multifactorial		
inheritance		
12. Gene Mapping		
Different types of DNA Polymorphism		

•	Restriction Fragment Length Polymorphisms (RFLPs)
•	Variable Number of Tandem Repeats (VNTRs)
•	Short Tandem Repeat Polymorphisms (STRPs)

- Single Nucleotide Polymorphisms (SNPs)
- 13. Gene Mapping: Linkage Analysis
- 4. Genetic Diagnosis Recombinant DNA Technology
- Isolation of DNA from Blood
- Isolation of DNA from tissues
- RNA isolation from blood and tissues
- Restriction

enzymes Practical

work:

- (A) Basic biochemical practical
- 1. pH metery
- Principle of pH metery

- Components and working of pH meter
- Applications of pH metery in Biochemistry laboratory
- 2. Centrifugation
- Principle of Centrifugation
- Types of centrifuge machines
- Ultracentrifugation
- Uses in Biochemistry lab
- 3. Spectrophotometer and Photometry
- Spectrophotometry
- LFT's
- RFT's
- Lipid Profile
- Sugar
- Uric Acid
- Serum Bilirubin Direct / Indirect
- Serum Albumin A/G ratio

- 4. Elisa Based Test
- Principal of Elisa
- Thyroid Profile
- Hepatitis B & C (ICT & Elisa based)
- Cortisol
- HIV (ICT & Elisa based)
- 5. Urine Complete Examination
- pH, Specific gravity
- Albumin, Sugar, proteins
- Microscopy
- UPT
- 6. Specimen Collection & Processing; Sources of Biological variation:
- Sources & composition of blood specimen
- Types of blood specimen & equipment
- Venipuncture, skin puncture, arterial puncture, anticoagulants & preservatives of blood, hemolyzed sample

- Preanalytical considerations
- Capillary specimen collection
- Specimen handling & processing for testing
- Collection of urine, faces, spinal fluid, other fluids for analysis
- 7. Establishment and use of reference values
- Introduction to statistical terms & techniques
- Use of reference values
- 8. Quality assurance

Elements of quality assurance

#### **Pharmacology:**

## Cardiovascular system

- a. Antihypertensive drugs
- b. Drugs for heart failure
- c. Antianginal drugs
- d. Anticoagulants

## **Respiratory system**

- e. Anti-asthmatic drugs
- f. Antihistamines

## **Central nervous system**

- g. General anesthetics
- h. Local anesthetics
- i. Antipsychotics
- j. Antidepressants

## **Drugs acting on uterus**

- k. Tocolytic drugs
- 1. Drugs for labor and delivery

## **Endocrinology**

m. Antidiabetic drugs

n. Estrogens and androgens

## **Chemotherapeutic drugs**

o. Antibiotics of general use

## **GENERAL PATHOLOGY:**

## Cell as a unit of Disease

- The genome.
- Cellular metabolism & cellular activation.
- Signal transduction pathways, growth factors and receptors.
- Cell cycle and stem cell.

## Cell injury and adaptation

- Reversible and Irreversible Injury
- Fatty change, Pigmentation, Pathological classification
- Necrosis and Gangrene

## Cellular adaptation

- Atrophy, Hypertrophy,
- Hyperplasia, Metaplasia, Aplasia

## **Inflammation**

- Acute inflammation, Vascular changes, Chemotaxis, Opsonization and Phagocytosis
- Enlist the cellular components and chemical mediators of acute inflammation
- Differentiate between exudates and transudate
- Chronic inflammation
- Etiological factors, Granuloma

## Cell repair and wound healing

- Regeneration and Repair
- Healing---steps of wound healing by first and second intention
- Factors affecting healing

• Complications of wound healing

## Hemodynamic disorders

- Define and classify the terms Edema, Hemorrhage, Thrombosis, Embolism, Infarction & Hyperemia
- Define and classify Shock with causes of each.
- Describe the compensatory mechanisms involved in shock
- Describe the pathogenesis and possible consequences of thrombosis
- Describe the difference between arterial and venous emboli

## Neoplasia

- Dysplasia and Neoplasia
- Differences between benign and malignant neoplasm
- Enlist the common etiological factors of Neoplasia
- Define and discuss the different modes of metastasis
- TNM staging system and tumor grade

## **Immunity and Hypersensitivity**

• Humoral and cell mediated immunity and types of Hypersensitivity with examples.

## **General Microbiology**

- General Microbiology
- Introduction to microbiology
- Role of microbes in various human diseases
- Sources of infection
- Classification of microorganisms.
- Morphology and identification of bacteria.
- Bacterial metabolism and growth.
- Sterilization and disinfection, definition, use of physical and chemical disinfectants and their practicalutility in clinical practice.
- Infection and immunity pathogenicity, pathology of infection, Resistance and natural immunity, antigens and antibodies.

#### **B: Specialty Specific:**

#### **RADIATION PHYSICS**

#### Introduction

Structure of Atom

Current electricity

Common properties of radiation and matter.

Electromagnetic radiation

Spectrum

#### X-ray production

Principles

Factors that cotrol the type of x-ray output.

Tube rating

Anodes that are stationary and rotating.

Exposure time

#### **X-Ray Interaction**

X-ray and gamma ray interaction and its effects on irradiated objects.

Effects: heat, excitation, ionization, secondary electron range,

chemicals, photographic, fluorescent, phosphorescent, thermoluminescent.

X and gamma rays measurement

Quantity: ionization, TLD, and image dosimetry.

Measurement of radionuclide detection rate.

#### X-ray interaction with the patient & Scattered radiation

Energy loss in various body tissues, high voltage radiography mammography, enhancement with different contrast agents.

Radiological image

Image quality: definition, resolution, noise, description, and contrast.

Control of scatter.

Techniques using radiographic subtraction.

#### **Image receptor**

Intensifying screens: construction, principles, and uses.

Speed

Automatic processor of x-ray films.

Management and maintenance.

Image intensity: construction, performance, light gain, visual integration, tv systems.

#### Radioactivity

Exponential decay

Radioactive decay schemes

Basic knowledge of reactors.

#### **Radiation Protection**

Biological effects of radiation, risk of somatic and genetic effects.

Radiation protection objectives.

Radiation protection regulations.

Population radiation dose leading to somatic and genetic effects.

#### **Basics of Ultrasound Physics**

**Basics of Mammographic Physics** 

**Basics of Computed Tomography & MRI Physics** 

#### **Quality assurance:**

Methods of assessing image quality

Specialized training in Radiology

#### Part II:

#### • Diagnostic Imaging Techniques

- Plain Films
- Negative Contrast Media
- Positive Contrast media
- Water-Insoluble Contrast Media

- Oily Contrast Media
- Water- Soluble Contrast Media

#### Conventional Radiography

- Skull
- Paranasal Sinuses
- Optic Canal, Temporal Bone
- Upper and Lower Jaws
- Cervical Vertebral Column
- Thoracic Vertebral Column
- Lumbar Vertebral Column
- Sacrum
- Pelvis
- Hip Joint
- Knee Joint
- Ankle Joint
- Foot
- Shoulder
- Elbow
- Hand
- Thorax
- Lungs
- Bronchography
- Heart
- Mammography
- Trachea
- Pharynx
- Esophagus
- Stomach

- Small Intestine
- Large Intestine
- Billiary Ducts
- Kidneys and Urinary Tract
- Vesicourethrography

#### Angiography

- Carotid Angiography
- Vertebral Angiography
- Angiocardiography
- Aortography
- Aortic Arch
- Coronary Angiography
- Celiac Angiography
- Splenoportography
- Superior Mesenteric Artery
- Inferior Mesenteric Artery
- Kidneys and Urinary Tract
- Kidneys
- Pelvic Arteries
- Knee Joint
- Foot
- Venography
- Elbow
- Hand

#### Lymphography

- Pelvis
- Abdomen
- Inguinal Lymph Nodes
- Axillary Lymph Nodes

#### • Gynaecologic Radiography

- Hysterosalpingography
- Fetography

#### Ultrasonography

- Hepato-Billary System
- Genito-Urinary System
- Gynecologic Ultrasonography
- Obstetrics Ultrasonography
- Small Parts Ultrasonography Especially Thyroid Gland, Testes, and Lymphatic System

#### Computed Tomography (CT)

- Skull
- Brain
- Temporal Bone
- Paranasal Sinuses
- Atlantoaxial Joint
- Lumbar Vertebral Column
- Thorax
- Heart
- Abdomen
- Pelvis

- Ct Angiography
- Magnetic Resonance Imaging (MRI)
  - Brain
  - Vertebral Column
  - Sacrum, Cocyx
  - Hip Joint
  - Knee
  - Foot
  - Shoulder
  - Heart
  - Abdomen
  - Pelvis & Perineum
  - Musculoskeletal System

#### Scintigraphy

- Bone Scan
- Whole Body Bone Scintigraphy
- Thyroid Gland
- Liver
- Kidneys

#### **Instructional Strategies:**

As a policy, active participation of students at all levels will be encouraged.

Following teaching modalities will be employed:

- 1. Lectures
- 2. Seminar Presentation and Journal Club Presentations

- 3. Group Discussions
- 4. Grand Rounds
- 5. Conferences and seminars
- 6. Assignments
- 7. Self-study, and use of internet

## **Section D:**

## **Assessment Plan:**

Program duration	Course contents	Assessment method
At the end of 6 months of program	Basic medical sciences:  • Anatomy Including Histology • Physiology • Biochemistry • Pharmacology • Pathology • Radiation Physics = 25%	Part I to be taken by university. It will include:  Written (MCQ)=100(1 each)  Total Marks =100
At the end of 2 <sup>nd</sup> year	Specialized training in the relevant Department	Part II Examination to be conducted by university.  It will include:

A) Paper A
MCQ=50(1 each)=50
SEQ=10 (5 each)=50
Total Marks=100
Paper B
MCQ=50(1 each)=50
SEQ=10 (5 each)=50
Total Marks=100
C) Log Book=20 Marks
D) Clinical Paper=180
OSCE/OSPE (9Statons,
10 Marks Each) =90
marks
Clinical=90 marks
(long case / Table Viva =
30 marks)
Short cases / Film

	Reporting = 4 carrying
	15 marks each total 60)
	Total Marks=400

#### **Part I Examinations:**

Part I would be conducted for the candidate at the end of 6 months of the program.

#### **Components of Part I Examination**

MCQ=100 (each 1 mark)

Total = 100

#### **Eligibility Criteria:**

To appear in the Part II Examination the candidate shall be required: .

- 1. At least 75% Attendance in all the basic medical sciences subjects as per the curriculum provided.
- 2. Evidence of payment of examination fee as prescribed by the university from time to time.

3. The examination fee once deposited cannot be refunded / carried over to the next examination under any circumstances.

4. Candidate remained on institution roll during the period required for appearing in examination.

#### **Declaration of Results**

• The candidates scoring 60% marks in the written examination will be considered pass and will then be eligible to appear in the Part II examination.

• A maximum of total SIX (6) consecutive attempts, availed or un availed, will be allowed in Diploma Part I examination. If the candidate fails to pass this examination within the above mentioned limit of SIX (6) attempts, he/she shall be removed from the program and the seat will fall vacant.

#### **Part II Examination**

(at the end of 2<sup>nd</sup> Calendar year of the program)

#### **Components of Part II Examination**

#### A) Paper A

MCQ=50(1 each)=50

SEQ=10 (5 each)=50

**Total Marks=100** 

#### Paper B

MCQ=50(1 each)=50

SEQ=10 (5 each)=50

**Total Marks=100** 

#### C) Log Book=20 Marks

#### D) Clinical Paper=180

OSCE/OSPE =90 marks

Clinical=90 marks

(long case / Table Viva = 30 marks

Short cases / Film reporting = 4 carrying 15 marks each total 90)

#### **Total Marks=400**

#### **Eligibility Criteria:**

To appear in the Part II Examination the candidate shall be required:

- 1. Result card showing that the candidate has passed Part I Examination.
- 2. Certificate of completion of 2 Years training as per the curriculum approved by the university.
- 3. Evidence of payment of examination fee as prescribed by the university from time to time.

4. The examination fee once deposited cannot be refunded / carried over to the next examination under any circumstances.

#### **Declaration of Results**

a. The candidates scoring 60% marks in aggregate of Paper A and Paper B of the written examination will be declared pass and will become eligible to appear in the Clinical Examination.

#### Clinical, TOACS/OSCE:

- a) The Clinical Examination will consist of 04 short cases / Film Reporting, 01 long case / Table viva and TOACs/OSCE with 01 station for a pair of Internal and External Examiner.
- b) The Total Marks of Clinical and TOACs/OSCE & Oral will be 270 and to be divided as follows:

• 4 Short Cases / Film reporting (15 each) Total Marks = 60

• 1 Long Case / Table Viva Total Marks = 30

• TOACS/OSCE Total Marks = 90

**Total= 180** 

Log Book=20 marks

#### **Declaration of Results**

• A student scoring 60% in long case, 60% in short cases ad 60% in TOACS/OSCE will be considered pass in the examination.

## **Section E**

## Award of Diploma In

A candidate having declared successful in all the components of examination i.e. *Theory and Clinical* shall be declared pass and shall be conferred Diploma In

Section F:		
Log Book		
As per format approved by the univers	sity	
	60	

## **Section G**

## **Paper Scheme**

#### Part I

#### written

General Pathology
General anatomy & Histology
Basic Biochemistry
General pharmacology
General physiology
Subject specific
MCQ s)
(20 MCQs)
(7 MCQs)
(20 MCQs)
(20 MCQs)
(25 MCQs)
MCQ Paper
100OneBestType

Total Marks 100Marks

#### **Part II Examination**

#### written

Sr No.	Paper	Number Of MCQ	Number Of SEQ	Total Marks
1	Paper A	50 MCQ (1	10 (5 each)	100
	Topics included	each)		
	<ul> <li>Diagnostic         <ul> <li>Imaging</li> <li>Techniques</li> </ul> </li> <li>Conventional         <ul> <li>Radiography</li> </ul> </li> <li>Sonography</li> </ul>			

	<ul> <li>Mammography</li> </ul>			
2	<ul> <li>Paper B</li> <li>Lymphography</li> <li>Angiography</li> <li>Scintigraphy</li> <li>Gynaecologic Radiography</li> <li>Computed Tomography</li> <li>Magnetic Resonance Imaging</li> </ul>	50 MCQ (1 each)	10 (5 each)	100

#### **Section H**

## Resources and references (books and other resource material)

- 1. Ryan S. *Anatomy for Diagnostic Imaging*. 2<sup>nd</sup> ed.Saunders;2004.
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- 3. Chapman S. and Nakienly R. *A Guide to Radiological Procedures*. 4<sup>th</sup> ed. Baillier Tindall, Jaypee Brothers; 2001.
- 4. Bhargava S. K. *Radiological Procedures.* 1<sup>st</sup> ed. Delhi: PeepeePublishers; 2004.
- 5. Chapman S. and Nakielny R. *Aids to Radiological DifferentialDiagnosis.* 4<sup>th</sup> ed. Elsevier Science Limited; 2003.
- 6. Holm T. *WHO Basic Radiologic System: Manual of Radiographic Techniques.* Delhi: AITBS Publishers; 2002.
- 7. Sutton D. *Textbook of Radiology and imaging (Vol. l and ll)*.8<sup>th</sup> ed. UK: Churchill Livingstone; 2003.
- 8. Clark. *Clark's Textbook of Positioning in Radiology*. 12<sup>th</sup> ed.Hoddler Arnold Publications; 2005.

- 9. Rana M. H., Ali S. Mustafa M. A Handnook of Behavioural Sciences for Medical and Dental Students. Lahore: University of Health Science; 2007.
- 10. Fathalla M. F. and Fathalla M. M. F. *A Practical Guide for Health Researcher*. Cairo: World Health Organization; 2004.

## **Section I**

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Signed by head of Department

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