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### Module Team

Module Planner	Dr. Ayasha Mumtaz
Module Coordinator	Dr. Hamid Rashid
Member/ DME	Dr. Abdul Khalid Awan
Member	Maj. Omer jalal
Member	Dr. Mazhar Hamdani
Member	Dr. Uzma Hafeez

**NOTE: The Behavioral Sciences Module has been shifted to 3<sup>rd</sup> Year MBBS, but still the UHS is following the old placement in the 5<sup>th</sup> Year MBBS!**

#### RATIONALE

Current module is meant to give an introduction to the students about the principles of evidence -based information in studying the behavior of individuals, groups and societies. As all over the world, the concern of professionals these days is ever growing concerns about improving the quality of health care by increasing the efficiency of doctors and reducing the economic burden. Some believe that implementing evidence based medical practice or pouring in more resources is the solution. The need of the day is to bring a change in behaviors of the doctors to have a better understanding of behavioral issues at work as well as in society. Unlike other branches of medicine, BS is strongly influenced by psychosocial aspects of society and socio -cultural environment of country. The complex and unclear principles of behaviors as perceived by many of us, can be explained in simple language by understanding the principles of BS. It helps us to develop knowledge, skill and attitude about the holistic approach. A number of topics that are of broad interest and importance are selected, like ethical issues related to doctor patient relationship, stress management how to break a bad news etc. and they are viewed as fundamental issues for behavioral scientists interpersonal relationships, behavior at work, and health and illness.

The aims of the course are to study the basic knowledge and principles stemming from disciplines of psychology, social psychology, health psychology, and medical sociology and to improve behavior of the doctor as an individual, interpersonal relationships, behavior at work, health and illness behavior

Psychiatry is ever growing field. Its needs and effects are increasing these days. In this module the students will be familiarized with the most common and important psychiatric illnesses. It will help students to prepare for clinical encounters with psychiatrically ill patients by providing a foundation for understanding psychiatric disorders and principles of psychiatric assessment and management. They can appreciate the fact that psychiatric illness is very commonly encountered in medical practice, and early detection and treatment can significantly improve patient outcomes and take the load off from all specialties. Medical jurisprudence is taught for better understanding of dealing with medicolegal cases in life.

#### Organization of Module:

Module consists of 4 themes, each consisting of real life scenario. Every theme has its own explicit, learning objectives (Los). The module will employ different modes of instructions briefly described below. Major emphasis is on real life examination of the patients and discussions, on the bedside as well as during the LGIS .Case discussions will be done by the students under supervision of faculty.

All the four themes are augmented with clinical scenarios. It will help you to know how the patient presents in real life and to reach a conclusion or diagnose the case with the differentials. Your daily activities are divided into different slots. Please refer to timetable for more details regarding organization of learning objectives.

### Teaching Strategies:

The content of this module will be delivered by a combination of different teaching strategies. These include large group interactive sessions (LGIS), history taking with bedside patient examination in SKBZ as well as in AIMS, laboratory investigations, clinicopathological conferences (CPCs) and journal club. Entire curriculum will be delivered by clinical case scenarios each covering a theme. Read the cases and the objectives of the theme which you are supposed to encounter next day, understand and explain the case to yourself and study the relevant information. The students will present clinical cases based on clinical history, mental state examination along with necessary laboratory investigations.

### Large Group Interactive Sessions (LGIS):

LGIS will be employed to pass on general concepts regarding the theme. Large group instruction will be employed at times sparingly. Attend large group sessions with the following focus:

- Identify important points.
- Ask questions on concepts not well understood in the text books.
- Measure your learning comprehension

### Clinico-Pathological Conferences:

The students will be required to present cases related to the themes in groups. They will collect the information from history and mental state examination and present to the whole class with the help of appropriate slides. It will be followed by question, answer and discussion.

### Self-Directed Learning (SDL):

A task will be given in SDL regarding the theme to be discussed before PBL. This will help to prepare you a bit before the theme is under discussion. A few SDLs have been added in between to create an environment for you to search literature as well as to deduce and synthesize information from different sources to meet the learning objectives.

### Assessment:

In this module, you will have formative and summative assessment. This will give you an idea about the format of the examination that you will go through at the end of the year. This will be followed by feedback on your performance in the exam. Marks obtained in the module examination will contribute 30% (internal assessment) towards end of year Professional University Examination. **There is no re-sit exam for module written assessment and block IPE** under any circumstances. If you miss them, your internal assessment will be recorded as zero. No excuse of any kind is permissible for absence in module or IPE assessment.

### Table of Specifications (ToS)

Happy go lucky fellow	25%
Nutty professor	30%
Black out	5%
Gentleman	40%

## Learning Objectives (LOs)

### 1. Happy go lucky fellow

At the end of the module students should be able to In sha Allah

- Describe sign, symptoms and management of schizophrenia
- Describe sign, symptoms and management of mania
- Enlist causes and management of depression
- Illustrate the causes, pathology and treatment of dementia
- Enlist PVD (Pervasive Developmental Disorders) & their management

### 2. Nutty professor

At the end of the module students should be able to in sha ALLAH

- Describe psychological and biological causes of generalized anxiety disorder and their management
- Enlist type of phobias and their management
- Describe the causes and treatment of PTSD (Post-traumatic Stress Disorder)
- Illustrate causes and management of OCD (Obsessive Compulsive Disorder)
- Describe causes and management of Dissociative Disorder
- Enlist personality disorders and their management
- Enlist childhood neurotic disorders and their management

### 3. Block out

At the end of the module students should be able to in sha ALLAH

- Mental Health Act
- Medico legal issues regarding psychiatric disorders

4. **Gentleman**

At the end of the module students should be able to insha ALLAH;

- Discuss the medical ethical dilemmas in life of doctor
- Describe the professionalism and rights and responsibilities of doctors and patients
- Discuss the trans-cultural aspects of behavioral science and psychiatry
- Define stress and its effects on society
- Explain human developmental stages and their effect on behaviors
- Describe the basic perceptual abilities
- Illustrate the type of emotions
- Enlist the personalities and their development with relevance to clinical conditions
- Describe thinking pattern and its effect on daily life
- Discuss intelligence and IQ
- Describe motivation

**PBL-1A:**

Mr. XYZ, 45 years old sitting in his office on 26<sup>th</sup> of October 2015 suddenly felt earthquake shocks and he felt nauseating, developed sweating, palpitations, shocking sensations and extreme fear. He again felt same sorts of symptoms off & on in next few weeks. When he consulted the psychiatrist, he gave history of palpitations with unforeseen fear along with apprehension to develop heart attack for which he has been to cardiology department repeatedly. On general physical examination, his pulse was 110/min with blood pressure of 150/85 mmHg. There was mildly enlarged thyroid. Serum cholesterol level was 180m/dL with HDL less than 35 and LDL more than 40.

**PBL-2A:**

A 13-year-old boy was brought to the clinic of a psychiatrist by his mother with history of running away from school and going to snooker club along with anonymous kids. When asked about this by his parents at home, he raised his voice in front of his father and kicked the TV and broke it. Reports received from the school showed deterioration in his performance and he was caught smoking along with watching objectionable videos on cell phone. School reports also showed his stubborn and quarrelsome behavior. Physical examination revealed nothing abnormal. His CT brain showed a hyper dense shadow in mid of the frontal lobe.

## **RESOURCE FOR LEARNING**

### **Reference Books**

1. Hand book of behavioral sciences
2. Oxford textbook of psychiatry
3. Harrison textbook of medicine
4. Morgons book of psychology
5. Hilguard book of psychology
6. Themes and variations

### **Web Links**

**Following online medical dictionaries can be referred**

**[www.nlm.nih.gov](http://www.nlm.nih.gov)**

**[www.medterms.com](http://www.medterms.com)**

**[www.bloodmed.com](http://www.bloodmed.com)**

**[www.online-medical-dictionary.org](http://www.online-medical-dictionary.org)**

**[www.medscape.com](http://www.medscape.com)**

**[www.jpathology.com](http://www.jpathology.com)**

**[www.cdc.com](http://www.cdc.com)**

# AJK Medical College, Muzaffarabad

Schedule for Psy & BS Module (0322) – (5<sup>th</sup> Year)

Week □1

Time	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
8:00am-8:35am	<b>LGIS</b> ECG Interpretation <b>Dr. Babar Bilal</b>	<b>LGIS</b> Ischemic Changes <b>Dr. Rizwan Abid</b>	<b>LGIS</b> Arrhythmias <b>Dr. Rizwan Abid</b>	<b>LGIS</b> Heart Block <b>Dr. Babar Bilal</b>	<b>LIGS</b> Cardiomyopathy & myocarditis <b>Dr. Babar Bilal</b>	
8:35 – 9:05am	<b>Introduction of Module</b> <b>Dr. Ayasha &amp; Team</b>	<b>LGIS</b> Depressive Illness <b>Dr. Ayasha</b>	<b>LGIS</b> Pervasive Developmental Disorders <b>Maj. Omer</b>	<b>LGIS</b> Mania <b>Dr. Ayasha</b>	<b>LGIS</b> Schizophrenia <b>Dr. Hamid</b>	<b>CLINICAL ROTATIONS</b> (8:00 AM to 2:00 PM)
9:05am-9:35am	<b>LGIS</b> Generalized anxiety disorders, Phobias <b>Dr. Hamid</b>	<b>LGIS</b> NPI <b>Maj. Omer</b>	<b>PBL</b> ( <b>Dr. Mazhar Hamdani</b> )	<b>LGIS</b> Intelligence & Mental Retardation <b>Maj. Omer</b>	<b>LGIS</b> Professionalism & Ethics <b>Dr. Uzma Hafeez</b>	
10:00am-2:00pm	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	
<b>Break (2:00 – 5:00 PM)</b>						
5:00-8:00 pm	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	

# AJK Medical College, Muzaffarabad

Schedule for Psy & BS Module (0322) – (5<sup>th</sup> Year)

Week □2

Time	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
8:00am-8:35am	<b>CVS &amp; RES Modules Assessment</b>	<b><u>LGIS</u></b> Learning and memory <b>Dr. Hamid</b>	<b><u>LGIS</u></b> Defense Mechanism <b>Dr. Ayasha</b>	<b><u>LGIS</u></b> Mental Health Ordinance <b>Dr. Hamid</b>	<b><u>LGIS</u></b> Forensic Psychiatry <b>Maj. Omer</b>	<b>CLINICAL ROTATIONS (8:00 AM to 2:00 PM)</b>	
8:35 – 9:05am		<b><u>LGIS</u></b> Drug Abuse <b>Dr. Ayasha</b>	<b><u>LGIS</u></b> Social support and its effects on disease and health <b>Dr. Uzma</b>	<b><u>LGIS</u></b> OCD <b>Dr. Hamid</b>	<b><u>LGIS</u></b> Professionalism & Ethics <b>Dr. Uzma</b>		
9:05am-9:35am		<b><u>LGIS</u></b> Schizophrenia <b>Dr. Ayasha</b>	<b><u>LGIS</u></b> Dementia <b>Dr. Mazhar Hamdani</b>	<b><u>LGIS</u></b> Thinking, Perception and Emotions <b>Dr Ayasha</b>	<b><u>SDL</u></b>		
10:00am -2:00pm	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>		
<b>Break (2:00 – 5:00 PM)</b>							
5:00-8:00 pm	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>	<b>CLINICAL ROTATIONS</b>		



**For inquiries & trouble shooting please contact**

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