



**FACULTY OF MEDICINE**  
**UNIVERSITY OF PERADENIYA**



**HANDBOOK**  
**2022/23 Batch**





# Handbook For 2022/23 Batch

Faculty of Medicine  
University of Peradeniya

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Faculty of Medicine  
University of Peradeniya  
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**Faculty of Medicine  
University of Peradeniya  
Sri Lanka**

**Student Handbook - 2022/2023**

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## **Our Vision**

To Produce scientifically trained, socially responsible, compassionate doctors and instill in them a spirit of inquiry and learning.

Who would contribute to the body of knowledge in medicine and allied fields in a meaningful manner.

Help serve the immediate and long term medical and social needs of our society.

## **Our Slogan**

We are committed to help you blossom

Empower you in your medical career

Encourage your talents

Hone your research skills

## **Our medical school and University offer you -**

- A world class training in medicine laying a sound foundation for postgraduate/ specialist training
- Opportunities to conduct your own research with guidance by internationally recognized scientists in the university of Peradeniya
- Facilities to enjoy your talents in arts, drama and song writing
- Access to a superb university library packed with books in all subjects
- A fantastic gymnasium
- A salubrious studying environment
- Caring student support
- And many more attractions



## Your Beautiful University









## MESSAGE FROM THE VICE CHANCELLOR

Dear New Students,

### **You have entered a world-renowned university.**

Congratulations on your admission to a public university, particularly to the University of Peradeniya, which is unarguably the top Higher Educational Institution in Sri Lanka.



According to the international ranking, it is also among the top 4% of universities globally. The University consists of nine faculties, 84 departments of studies, four postgraduate institutes, nine Libraries, over 1200 academic staff, 2300 nonacademic and administrative staff, over 12000 undergraduate and 4000 postgraduate students.

While welcoming you to a new journey which is indeed the most transformative period of your life, the University's academic and administrative affairs changes consequence to global dynamics will continue. I invite you to be innovative and flexible in adapting to such changes.

### **We offer the best to you to achieve the perfect version of yourself**

Education evolves characters while strengthening mental power and sharpening the intellectuality of individuals. Learning is both a science and an art, necessitating collaboration between students and teachers. Students who distance themselves from teachers will acquire petite than desired knowledge. Therefore, you are strongly encouraged to take advantage of the University's academic atmosphere throughout your stay with us.

You have the potential to become the refined version of yourself. Although your future is bright, it depends on your ability to capitalize on all available chances. The University offers a variety of options, including high-quality academic programs, innovative teaching/learning methods, library facilities, sports facilities, venues for cultural and extracurricular activities, and exposure to vibrant social life at a residential university.

### **Our commitment**

As a prestigious university, we are committed to the whole-person development of our undergraduates with its Motto, "Knowledge is the Eye unto All". For that, all nine faculties of the University are unique in their way, providing you with formal education and the 21st Century's skills to ensure a positive student experience that fosters excellence with purpose and responsibility while enhancing our curricula and co-curricular learning activities enriching you continuously.

We are well aware of your needs. We understand that you are just after school and in the early stages of the maturing process to become a well-informed adult, although you tend to think of knowing everything in the world! The University administration works hard to provide welfare facilities and ensure the university community's well-being. However, those with vested interests will try to highlight only a few instances of shortcomings, inadequacies and to attempt to distort the truth rather than the gamut of things available for good education. Such prejudiced thinking could make you frustrated, not achieve the best in your life, and become an unpleasant and undesirable person. Our nation needs more optimistic thinkers.

### **Your responsibility**

Your education is being paid for by the people of this country. You are indebted to them; hence you must become a productive citizen by following the educational environment of this University. You and the senior students are most welcome to collaborate with us to establish the best educational environment while emphasizing that the behaviour of all of us as adults needs to be civil, non-discriminatory, and conform to the university regulations and the law of the country.

### **What is your ultimate goal?**

What should be the final goal of university education? It should produce a graduate who is an independent thinker, an intellectual equipped with sound knowledge and technical skills and a law-abiding, productive citizen. Logic and reasoning are essential skills to be cultivated that differentiate you from non-degree holders. To achieve all these, students need to acquire other skills such as teamwork, leadership and managerial skills, practical skills in numeracy, language skills, especially English, and the two main languages spoken in Sri Lanka. Information Technology skills are indispensable. The value of learning human health promotion and disease prevention is most obvious.

### **Always be a role model**

I hope your time with us helps you develop your character and personality. Rather than forcing others to follow you, it would be best if you made every effort to improve yourself and become a role model for others. Only the feeblest souls compel others to follow them.

The University's future depends on the behaviours of all of you as individuals and a group. To achieve that prestigious goal, the university administration will make every effort to provide you with a supportive, safe, and intellectually stimulating environment.

Also, the unique blend of religious, cultural, and social diversity among the student population is a distinguishing feature that encourages harmony, which has become an essential requirement in building a civil society.

I wish you all success on your new journey with the University of Peradeniya.

**Professor M. D. Lamawansa**

Vice-Chancellor

University of Peradeniya

## MESSAGE FROM THE DEAN

Allow me to extend my heartiest congratulations to all of you on being selected to the University of Peradeniya, which is the most beautiful university in our country, and one of the finest in the entirety of South Asia. Please consider it a privilege to have been selected to our University, with its fine academic history not to mention being the alma mater of some of the finest clinicians our country can boast of, and they have been able to contribute in global measures towards the advancement of medicine and patient care.



The University of Peradeniya is a multicultural, multidisciplinary academic center with nine faculties and residential facilities for all students catering to the needs of all students. We have a olympic-standard swimming pool, a large gymnasium, playgrounds, walking tracks and a beautiful garden that you will fall in love with, in time to come, as you begin to explore these wonderful premises. You will experience the microcosm of society and also have the opportunity to associate with students from other faculties who would add colour, enjoyment and experience while introducing you to the fantastic journey of university life.

To focus on the medical faculty proper, we have a highly qualified staff of 127, and a student population numbering 1200, excluding the current intake. Thus, there is enough space to teach, study, and do extracurricular activities. We have made every effort possible to make our faculty student-centric, give pride of place to all associated activities, and have many programmes to support students. Furthermore, in our premises, we monitor the setting of our faculty constantly, to ensure no harassment and maximum positive student well-being. The senior students are friendly, and I'm sure they would not hesitate to provide you with all the assistance to adjust to your new life, and focus on studies comfortably. Nevertheless, you will be assigned to student counsellors who would be taking a personal interest in you, and liaising with you regularly to help cope with academic challenges and other personal issues that you may encounter.

The curriculum you will follow is regularly updated and focuses on imparting academic knowledge and theory with hands-on clinical training that is on par with any other renowned university in the world. We also have a strong alumni association with global links that play a very keen role in providing maximum support in all facets of student life that will make you excellent clinicians of whom our faculty can be proud of. It is with the greatest pleasure that I welcome you to the medical family of our university.

You will find this a home away from home, and in fact, a home where you spend most of your hours as you let go of the tutelage of your nuclear family, and take on a broader identity of being a proud family member of the medical faculty of the University of Peradeniya.

Best wishes for this new phase of your life, and may you move forward with solid determination!

**Professor Vasanthi Pinto**  
Dean  
Faculty of Medicine  
University of Peradeniya

## MESSAGES FROM DISTINGUISHED ALUMNI

**Prof. Nimal Senanayake** (MD, PhD, DSc, FRCP (Edin), FRCP (Lon), FCCP, FAAN, CBiol, FIBiol)

Professor Nimal Senanayake is a highly commended physician with expertise in Neurology. A proud alumnus of the Faculty of Medicine, University of Peradeniya, he received his postgraduate training in the foremost neurological Centre in the UK- the National Hospital Queen Square, and later, at the Wessex Neurological Centre in Southampton.



He joined as a Lecturer in Medicine at the University of Peradeniya and was subsequently promoted to Senior Lecturer, Professor, and Senior Professor of Medicine receiving three merit promotions. Serving as the Dean of Faculty of Medicine from 1993 to 1999, he had the distinction of being the first Peradeniya alumnus to be elected for the post of Dean. From 1983 to 2005, he served as the Head of the Department of Medicine.

Among his many accomplishments are his service as the Chairman of the Board of Study in Medicine at the Postgraduate Institute of Medicine, University of Colombo, the Presidencies of Sri Lanka Medical Association, Kandy Society of Medicine and Epilepsy Association of Sri Lanka. The International League Against Epilepsy and the International Bureau for Epilepsy conferred on him the title “Ambassador for Epilepsy”; he was the fifth Asian to receive this honour. He received the National Award for Scientific Achievement in 1998, and on several occasions thereafter, for his contributions in the field of Neurotoxicology and Epilepsy and, in year 2000, a DSc from the University of Peradeniya.

He is an outstanding clinical researcher with over 120 scientific publications in international journals. He has delivered 14 orations locally and internationally receiving, among others, the SLMA Oration Gold Medal on four occasions, the Kandy Society of Medicine Oration Gold Medal, the Senaka Bibile Oration Gold Medal and the Kumaradasa Rajasuruya Oration Gold Medal. He has presented over 250 papers at national and international conferences. Following his illustrious career, he retired from University service in 2013. The University awarded him the title ‘Emeritus Professor’. Having left his indelible mark in the field of Medicine and academia, Prof. Senanayake remains one of the golden products of the University of Peradeniya. Prof Nimal Senanayake is also a renowned film producer and author of several books.

*“While congratulating the future Peradeniya doctors who embark on the study of Clinical Medicine, I recount the following words of Sir William Osler. “The good physician treats the disease; the great physician treats the patient who has the disease.”*



**Prof. Shanthi Mendis** (MBBS, MD, FRCP, FACC)



Having graduated from the Faculty of Medicine, University of Peradeniya after an illustrious undergraduate career with first class honours and distinctions in all subjects, Professor Shanthi Mendis joined the Department of Medicine as a lecturer in 1980. She went on to qualify as a consultant in cardiology, completing her postgraduate and postdoctoral training in the UK and USA. Her many honours include seven orations, the Zonta International award for the first woman cardiologist in Sri Lanka and the prestigious Kandy Society of Medicine Prize for Research. In 1997, she also received National Honours Vidya Jothi for her pioneering research in cardiovascular medicine. She is in the 2020 Stanford University List of World's Top two per cent of researchers

She has authored five text books and has published over 250 heavily cited articles in international peer-reviewed journals. She was promoted to Professor of Medicine in 1996 on merit and was the head of the department from 1994 to 1999. She was awarded the Rockefeller Senior Global Health Fellowship in 1998, to draft the World Health Organization's global strategy for prevention and control of non-communicable diseases. The greatest honour she brought to her university as well as the motherland was to be offered the position of Head and Senior Advisor of the Global Cardiovascular Diseases Programme of the World Health Organization in Geneva, Switzerland. This was the first time in the history of the WHO that this position was given to a professional from a developing country. She is now recognized internationally as an expert in global health, particularly in non-communicable diseases, with wide experience in health policy development and multi-country *operational* research.

*"I wish I could step into your shoes and again become an undergraduate entering the Faculty of Medicine, University of Peradeniya, as I did in 1969. It is an amazing Medical School which will mold and prepare you for a productive medical career in Sri Lanka or anywhere else in the world. You will grow academically and also learn and mature from your mistakes and failures so that you can respond to different challenges in life. It is up to you to make the next five years the most beautiful, enjoyable and unforgettable time of your life. I wish you every success."*

**Dr Palitha Abeykoon** (MBBS; M.S.; MPH, Fellow of Colleges of Community Medicine, Fellow of College of Family Medicine, Fellow of Medical Education, Fellow of Medical Administration)



Dr. Palitha Abeykoon is currently the World Health Organization Director General's Special Envoy for Covid -19 for South East Asia and an Advisor to the WHO Country Office and to the Regional Director of the WHO South East Asia Region. He is also an Advisor to the Ministry of Health.

He is a Graduate of the Faculty of Medicine, Peradeniya, and had his post graduate education in the University of Southern California in Los Angeles and Harvard School of Public Health in Boston.

Dr. Abeykoon was Director of the Department of Medical Education at the Faculty of Medicine in Peradeniya. Then joined the WHO and was a Director in South East Asia Region. He was also the WHO Representative to India.

He was President, Sri Lanka Medical Association, chaired the National Authority on Tobacco and Alcohol, received the WHO Director General's Tobacco Award.

He won the Dr. Fred Katz Award of the Australian and New Zealand Association of Medical Education the Dr. Taro Takemi Award of the Harvard School of Public Health and the Prof. MCLAREN Lifetime Leadership Award of the Asia Pacific Academic Consortium for Public Health.

Dr. Abeykoon holds Fellowships from the Colleges of Community Physicians, Medical Educationists, General Practitioners and the Medical Administrators of Sri Lanka.

He is a devoted alumnus of the Faculty of Medicine, Peradeniya

*"It is a great pleasure to send a brief message and wish you the very best in your studies, and later in your professional career. Enjoy your time in this beautiful campus and world class medical school. As the first student to be admitted to the Faculty (M1 is my registration number) I spent perhaps the most enjoyable period of my life both as a student and a member of the staff here for 18 years before joining the W.H.O. I can say without any fear of contradiction that one may take a Pera alumnus out of Peradeniya, but one will never be able to take Peradeniya out of him or her. That proud badge of distinction will live with you forever."*

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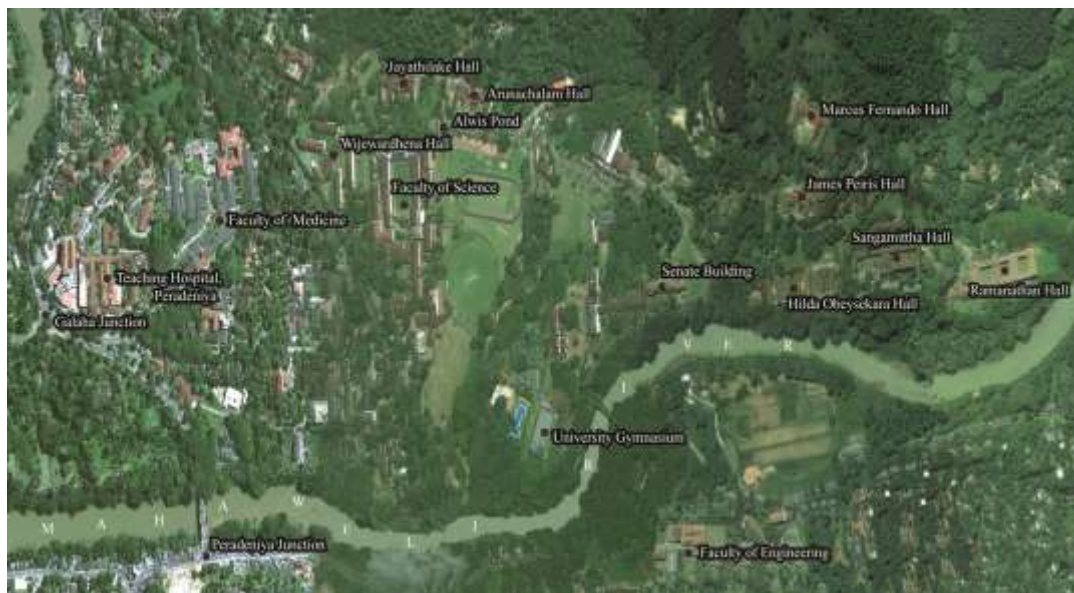
## 1. University of Peradeniya



*The University of Peradeniya: Nestling amongst the peaceful and salubrious hills of Hantana*

This university is like no other in the country. All faculties are in one campus, and it has halls of residence shared by all faculties. So, this is the opportunity for you to make life-long friends in all spheres and walks of life. This, an enriching experience unique to Peradeniya.

## 1.1 Physical Setting



The University of Peradeniya is located amidst great natural beauty just 8 km from the city of Kandy - the historic capital of the last independent kingdom of Sri Lanka. Access to the university premises is through the Galaha road, close to the Royal Botanical Gardens of Peradeniya, a popular tourist attraction, famous for its rare tropical plants and orchids. The University is situated east and south of the Peradeniya town where the Colombo - Kandy road crosses the Mahaweli River, the longest river in Sri Lanka. It straddles the valley of the Mahaweli and spreads up towards the Hantana on the east. The Mahaweli River flows across the campus heading north, enhancing the natural beauty of the university.

The area of land vested in the university is approximately 2500 acres, extending down the valley of the Mahaweli River from Hindagala to the Peradeniya bridge. About 300 acres have been developed to accommodate the faculties, halls of residence, staff bungalows administrative offices and centres for extracurricular activities.

## 1.2 History



The ceremonial opening of the University of Peradeniya by the Duke of Edinburgh accompanied by HRM Queen Elizabeth

The need of a university was felt in the country for a long time. This initially proposed site in Colombo, now in the area of Bauddaloka Mawatha, was rejected by experts. After much controversy and debate, Peradeniya was identified as the most suitable location to house the faculties, halls of residence, staff quarters and other facilities. However, construction was delayed on many accounts. Finally, the first University in Sri Lanka, University of Ceylon, was started in Colombo in July 1942. The University of Peradeniya continued its construction and was officially opened on the 20<sup>th</sup> of April 1954 by the Duke of Edinburgh. But this remained an off-site campus of the University of Ceylon until 1967, when the two (Colombo and Peradeniya) started functioning independently. The Universities Act (No 16 of 1978) created provision for the establishment of these campuses as independent universities. Under section 139(1) of this act, the Peradeniya campus was established as an independent university, under the name "University of Peradeniya, Sri Lanka". Sir Ivor Jennings, the first Vice-Chancellor, on his first visit to the campus site in 1944 with the site plan of the architect Sir Patrick Abercrombie, has written, "No university in the world would have such a setting".

The faculties created in the University of Peradeniya were Agriculture and Veterinary Sciences in 1949, Arts in 1952, Dental Sciences in 1954, Medicine in 1962, Science and Engineering in 1964, Allied Health Sciences in 2006 and Management in 2015.

### 1.3 Climate



The university is situated at an elevation of 500 meters above sea level and has a comfortable mild climate endemic to the Sri Lankan hill country. Peradeniya is located in the wet zone of the country and receives an average precipitation of 90-100 inches from both monsoons spread throughout the year. There is usually a short dry season in January and February.

The environmental temperature fluctuates between 18-30°C. Higher temperatures are usually experienced in the months from February to May with a progressively lower temperature in the second half of the year. The nights are cool and the mornings misty in the months of December and January.



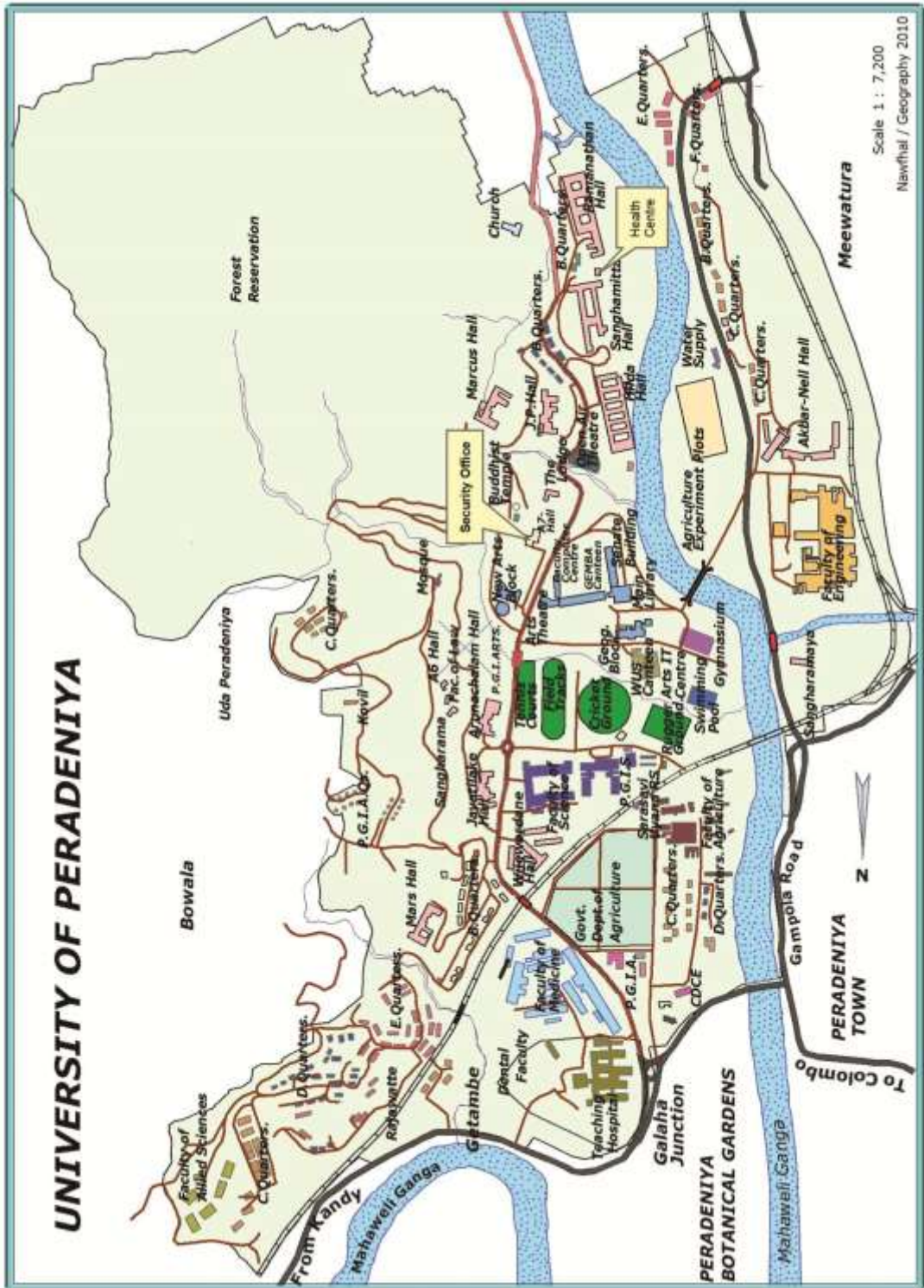
## 1.4 University Park



The University Park has numerous trees which have been planted at the commencement of construction of the university. Most of them flower in early March. The University Park flourishes with blossoming flowers from May to August. Flowers line the pathways of the university situated in the vicinity of the Faculty of Arts along the banks of the Mahaweli River. There are a variety of shade trees in the University Park including the forest reserve at the upper region of the Hantana range which covers about 350 acres.



### 1.5 Map of the University of Peradeniya



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## 1.6 Vision, Mission, Values and Goals of the University

### Vision

To provide a uniquely transformative experience for its students, staff and partners, whilst serving the public through producing and implementing innovative research and outreach programmes that are anchored in its founding values and principles.

### Mission

The mission of the University of Peradeniya is to contribute to national, regional and global society through the pursuit of education, learning and research, and the dissemination of knowledge at the highest international levels of excellence

### Values

- Highest standard of teaching, learning & research
- Academic freedom
- Integrity and transparency in all its functions
- Respect for cultural diversity

### Goals

- Quality and relevance of all undergraduate & postgraduate programs in the University, enhanced to achieve international recognition in higher education.
- Develop resources to enhance the quality of research contributing to the national and international requirements available.
- Administrative and financial efficiency within the framework of corporate governance enhanced.
- Opportunities for a wider range of educational programs to contribute to the development of a knowledge-based society increased.
- Physical & human resources to offer a conducive and aesthetic environment for academic pursuits enhanced.

## **1.7 Faculties and Institutes of the University**

There are nine faculties and three postgraduate institutes in the University of Peradeniya.

### **FACULTIES OF THE UNIVERSITY**

1. Faculty of Agriculture
2. Faculty of Allied Health Sciences
3. Faculty of Arts
4. Faculty of Dental Sciences
5. Faculty of Engineering
6. Faculty of Management
7. Faculty of Medicine
8. Faculty of Science
9. Faculty of Veterinary Medicine and Animal Science

### **POSTGRADUATE INSTITUTES OF THE UNIVERSITY**

1. Postgraduate institute of Medical Sciences (PGIMS)
2. Postgraduate Institute of Agriculture
3. Postgraduate Institute of Humanities and Social Sciences
4. Postgraduate Institute of Science

## 1.8 University Crest

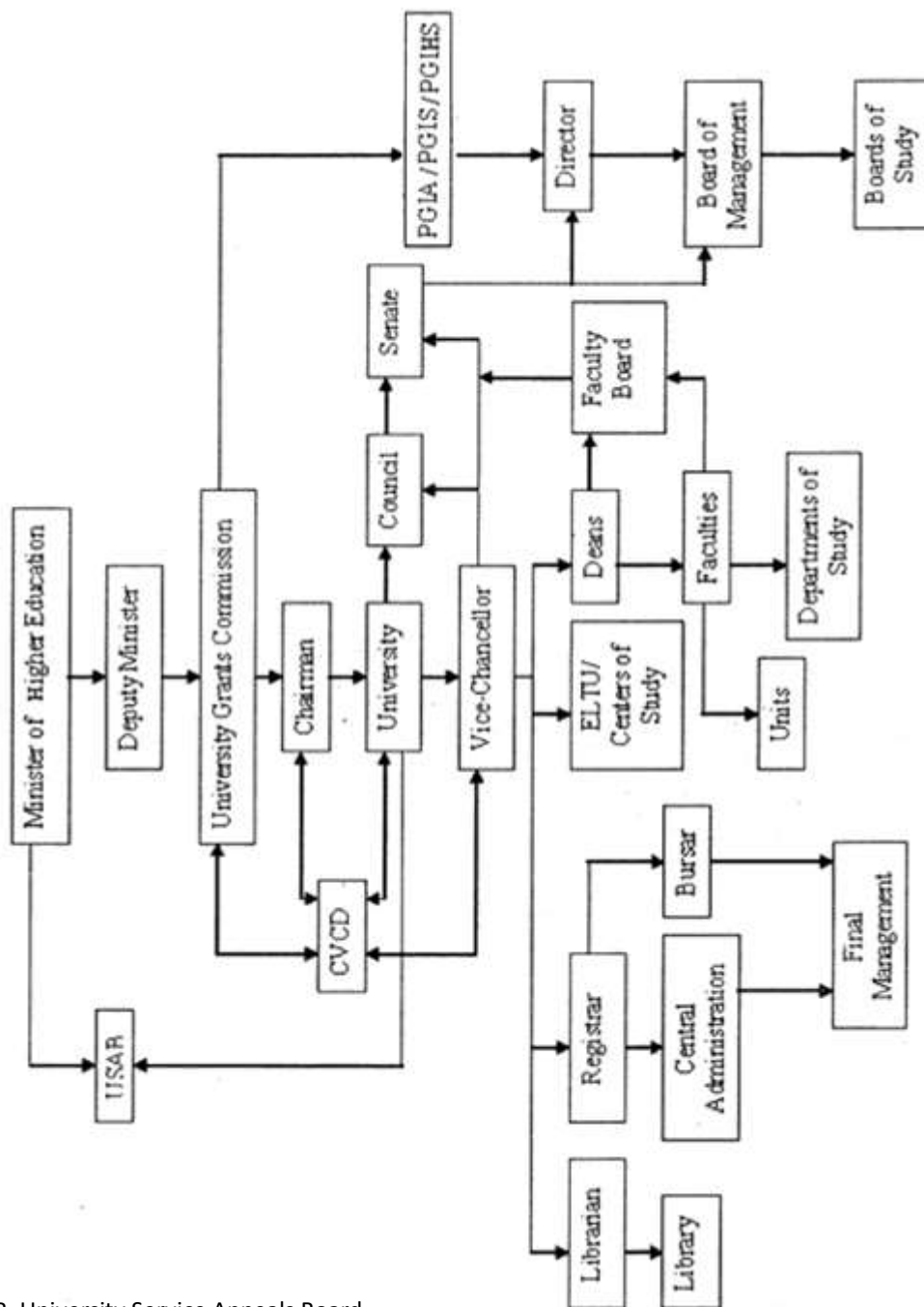


On establishing its identity at its inception in 1942, the then University of Ceylon decided that a coat-of-arms would not be in keeping with the traditions of an oriental country. Instead, it chose a seal with a lion motif that has remained the university's logo over the years although small changes were made during its transformation into the University of Peradeniya.

The original Logo of the university consisted of a lion--the lion being the symbol of Sri Lanka-- surrounded by a circle containing the Sanskrit motto "Sarvasva Locanam Sastram" (Knowledge is the eye unto all) and the words University of Ceylon in English. Outside the circle was a design of "Pala Pethi", a symbol of purity and wisdom in indigenous art, represented here by stylized lotus petals of the Kandyan Period. The colours of the Logo are gold on maroon.

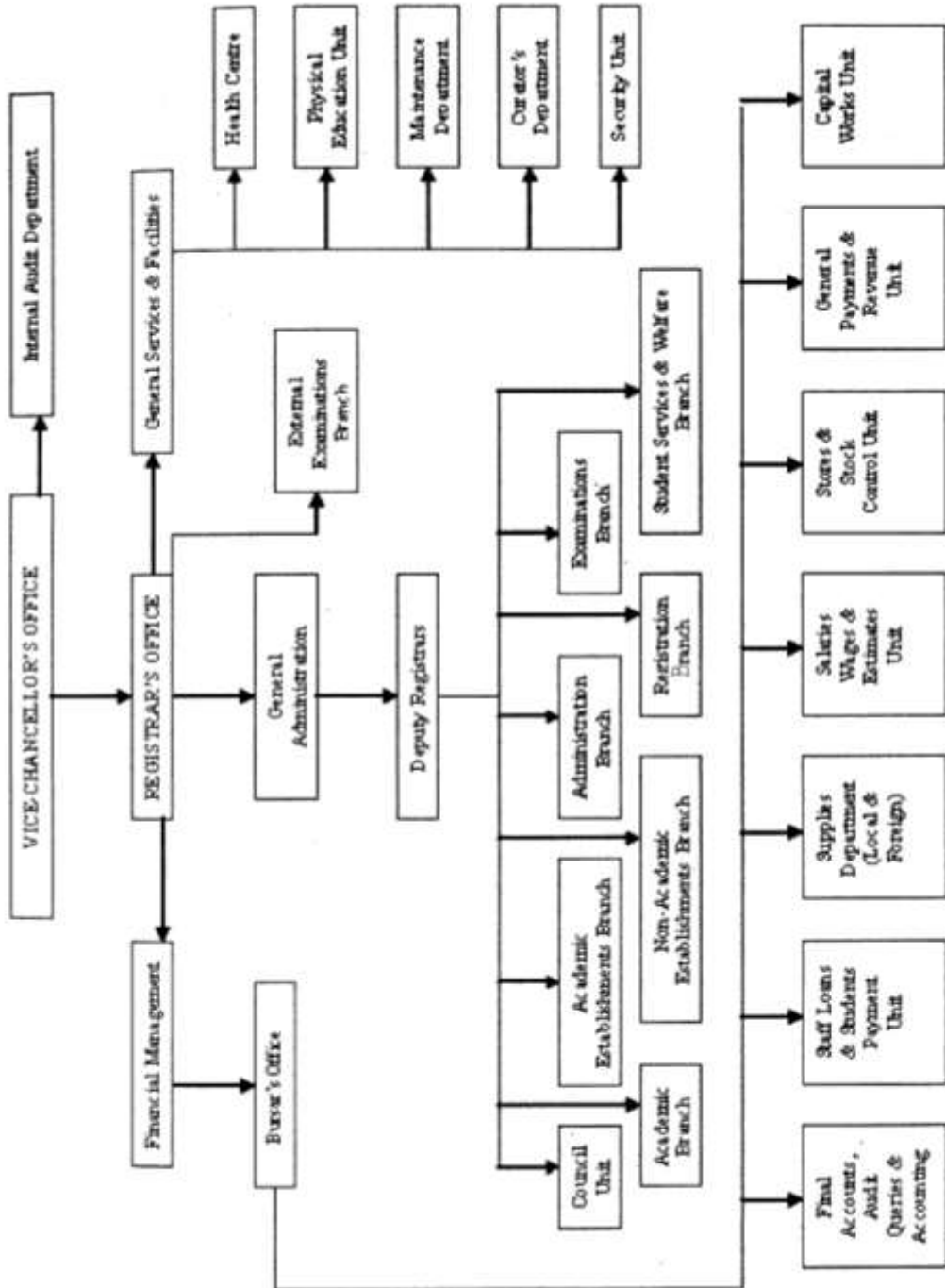
In 1978, when the University of Peradeniya became an independent entity, the Council adopted the Logo of the University of Ceylon without the Sanskrit motto, but with the words University of Peradeniya in Sinhala, Tamil and English. The annual reports from 1979 came to carry the Sanskrit aphorism from Hitopadesha, "Vidya Dadati Vinayam" (Knowledge gives discipline). In 1991, the Council decided to restore the original Sanskrit motto in the University logo. As it was observed that the shape of the "Pala Pethi" and the original colour combinations have changed over the years, the Council decided in 2011 to restore all the features of the logo in accordance with its original design.

**1.9 Organization of the University**



- USAB- University Service Appeals Board
- CVCD- Committee of Vice Chancellors and Directors
- ELTU - English Language Teaching Unit
- PGIA - Post Graduate Institute of Agriculture
- PGIS - Post Graduate Institute of Science
- PGIHS- Postgraduate Institute of Humanities and Social Sciences





## 2. Faculty of Medicine



### 2.1 Location

The Faculty of Medicine is located at the entrance to the University of Peradeniya close to Galaha Junction.



## 2.2 Mission Statement

"To

- produce scientifically trained, socially responsible, compassionate doctors and instill in them a spirit of inquiry and learning.
- contribute to the body of knowledge in medicine and allied fields in a meaningful manner.
- help serve the immediate and long term medical and social needs of our society."

The faculty offers a medical course leading to the Degree of Bachelor of Medicine and Bachelor of Surgery (MBBS). The duration of the course is 5 academic years.

## 2.3 History of the Faculty of Medicine



Medical education in Sri Lanka started with the opening of Colombo Medical School in 1870 under colonial rule. Following stepwise changes, establishment of the University of Ceylon in 1942 saw the elevation of the medical school to a degree-awarding institution as a Faculty of Medicine. This is now the Faculty of Medicine, University of Colombo.

With more candidates qualifying to pursue a degree in Medicine, there came the requirement to increase the capacity to provide higher education. As a result, a second Faculty of Medicine was established as a fledgling of the University of Ceylon, physically a part of the Peradeniya campus. The year was 1962, and a cluster of semi-permanent

buildings was erected at a site at the northern end of the Peradeniya campus, in close proximity to the main Kandy-Colombo road. This was administered through the University of Ceylon. There it still stands at the entrance to the University, having acquired more sophisticated infrastructure over the years while retaining some of the founding structures which tell the history.

In 1966, the administration changed with appointment of Prof. Senaka Bibile as the first Dean of the Faculty of Medicine, Peradeniya. His undying passion towards improving medical education led to the establishment of the faculty as we know today, with groundwork for the Teaching Hospital, Peradeniya also being laid under his vision.

## 2.4 General Information

### Places available for students' free time

#### SUMMIT AREA



The Summit area is located next to the faculty canteen. Blooming flowers with a pleasant fragrance, a peaceful environment, and a mild atmosphere will capture your heart. The Hanthana mountain range can be seen in the distance. It is a lovely spot to relax and engage in learning.





## NELUM POKUNA AND LATHAMANDAPAYA



The Nelum Pokuna is in a very prominent location in the faculty, and can be seen as soon as you enter the faculty from the main entrance. It is bordered by a lotus-flower-filled pond. There are chairs and tables in that location, which you can use for study purposes or to spend your leisure time.



### SUMMER HUT

The Summer hut is at the faculty's main entrance. This was provided by PeMSAA.



### MAGULMADUWA



The Magulmaduwa is a fantastic student hangout located behind the faculty canteen. There are benches and tables that you can use for faculty work, eating, and studying, etc.



### Study areas for students

#### STUDENT ROOM

The spacious students' study room is located adjacent to the Radiology department. It offers a very calm and quiet environment that is ideal for studying. A refrigerator for keeping personal food items and a sofa to relax are offered here.



### BEACH AREA

The beach area is located in the faculty's preclinical block and is a popular study zone. The atmosphere is calm and breezy here hence the name "Beach". Wi Fi facilities are available here.



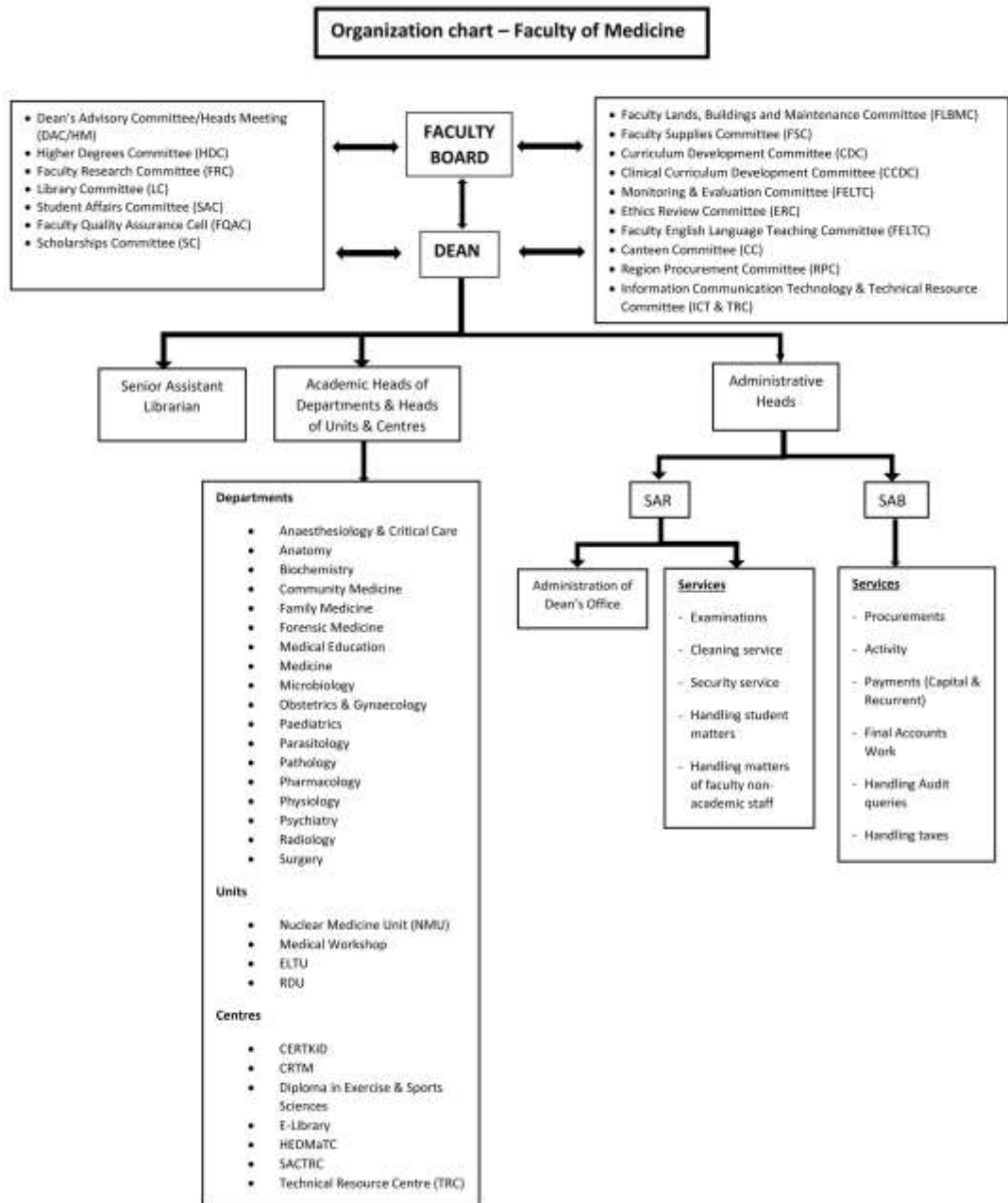
### PILLARED AREA



The pillared area is situated on the ground floor of the ELTU block. It is a large open space conducive to studying or having a meal. Wi Fi facilities are available.



## 2.5 Organization of the Faculty



## 2.6 Graduate profile

On completion of the M.B.B.S course, a graduate should be able to perform the following, at the level of general professional practice.

1. Identify important illnesses and other health related problems in individuals and in the community, and plan and implement appropriate preventive, curative and rehabilitative measures.
2. Identify, recommend and implement activities which promote health of the individual, family and community.
3. Work harmoniously with others as a leader/member of a healthcare delivery team.
4. Educate and train other individuals, healthcare personnel and the community, towards better health.
5. Develop and maintain personal characteristics and attitudes for a career as a health professional.
6. Carry out basic medico-legal procedures and statutory duties.
7. Plan and carry out appropriate health related research projects.
8. Develop into a self-directed learner with the capacity to recognize the need for self-evaluation.

To achieve the above, the graduate should have the following competencies

1. Appropriate knowledge of biomedical and social sciences, and the humanities.
2. Ability to recognize the particular needs of a patient, community, self and the profession.
3. Ability to understand the ethical, legal and economic aspects of professional responsibilities and tasks.
4. Ability to use appropriate clinical and therapeutic skills.
5. Ability to recognize the importance of accountability, honesty, and the humane approach to professional work.
6. Ability to utilize appropriate educational, communicative, management and interpersonal skills.
7. Ability to utilize the facilities and resources available in relevant sectors for the benefit of the patient and the community.



## 2.7 Departments and Units of the Faculty of Medicine

1. Department of Anaesthesiology & Critical Care
2. Department of Anatomy
3. Department of Biochemistry
4. Department of Community Medicine
5. Department of Family Medicine
6. Department of Forensic Medicine
7. Department of Medical Education
8. Department of Medicine
9. Department of Microbiology
10. Department of Obstetrics & Gynaecology
11. Department of Paediatrics
12. Department of Parasitology
13. Department of Pathology
14. Department of Pharmacology
15. Department of Physiology
16. Department of Psychiatry
17. Department of Radiology
18. Department of Surgery
19. Nuclear Medicine Unit (NMU)
20. English Language Teaching Unit (ELTU)

### **3. Transition from School to University**

#### **Tips for surviving the change**

It is important to acknowledge that the academic work at university level differs from what students have been exposed to in schools. In the university, the student is the master of his or her own learning. Students are expected to be independent and monitor their own progress. It is envisaged that they would search for information, identify learning mechanisms and reflect on extending and applying knowledge gained.

Students need to be proficient in the following skills:

- Listening skills
- Reading skills
- Note-taking skills
- Skills of expression in both speech and writing

The above proficiencies may be acquired by advice given by the staff, reading, practicing (speaking and writing) and utilizing library resources.

## 4. Teaching and Learning in the University

### Modes of learning

#### Verbal Learning

##### ***Committing to memory***

This is what is commonly associated with learning. Some things, such as lists, formulae, scientific laws and definitions, diagrams and certain precise descriptions in medicine, have to be learned this way. The content is memorized as it stands.

##### ***Becoming familiar with information, ideas and concepts***

This mode of learning is deeper than memorization where what is learnt is understood in a way that allows re-phrasing, summarizing or establishing connections. These operations may occur when students listen, read, take notes, discuss, write a report or an essay or when just thinking about the topic in question.

This kind of learning may not be the student's experience in the first encounter with the content. However, repeated encounters in different contexts will enable understanding.

##### ***Learning to think theoretically and critically***

Each subject has its own body of theory in which certain concepts are crucial. An important aspect of learning includes developing and in some cases testing hypotheses, through experiment, field-work, case-work or intensive reading, depending on the area of study. This mode of learning requires the power of thinking critically in a professional sense; i.e, not just learning history but functioning as a historian; not just learning physics but functioning as a physicist.

##### ***Reflective learning***

A student of higher education is a responsible and independent learner. Even though it is necessary to note and act upon formal feedback provided by teachers, it is equally important for students to think about (or reflect on) what is learnt. Increasingly programs of study explicitly require students to engage in reflection. However, even if they do not, students would benefit much from developing these skills.

The skill of reflection may be developed by continually contemplating (thinking) on the following:

- What did I learn?
- How did I learn?
- Can I explain real life situations using the new knowledge?
- What are my strengths and weaknesses?
- What are my priorities?
- How can I improve and build upon the learning process?
- How am I performing towards short, medium and long-term goals?
- What (if anything) is blocking my learning?
- What are the gaps in my knowledge and skills, and how can I best work towards addressing these gaps?

## Practical learning

There are two main kinds of practical learning.

### ***Practical procedures***

This plays an important role in medicine where learning is not purely verbal and students learn new perceptual and motor skills, and learn to make judgments based on observations.

### ***Learning to assume the role of a 'Professional'***

This is an important aspect in all branches of medicine, education, law and social work. It is necessary to cultivate the practice of making judgments based on observation and speaking and reacting in an appropriate way. In any situation of practical learning, it is necessary initially to acquire adequate knowledge and subsequently observe experienced persons. It will be observed that practical learning is enhanced by the different kinds of verbal learning; what is not clear in a text or a lecture becomes clear when done practically, while laboratory experiments and cases are clarified when heard, discussed or read.

## Study habits

- Be organized. This includes planning, keeping track of what's done, maintaining orderly books, notes and hand-outs and allocating available time between the various subjects.
- Make good use of study times. Address complex aspects when fresh. Beware of postponing difficult work and spending excessive time on activities that do not require much effort.
- Identify and avoid distractions.
- Refrain from studying when experiencing fatigue. However, do not give up too easily. It is important to distinguish between real fatigue and discouragement or lack of interest, and plan breaks accordingly. If a student experiences a feeling of defeat by a particular problem, a brief involvement with a different type of activity (and possibly a change of scene) will often be rejuvenating.

## 5. Sources of Learning

### 5.1 Lectures

#### ***Listening to learn***

Listening is not a passive process in which the listener is merely required to keep the ears and mind 'open' for whatever information to 'go in'. Listening in order to learn is essentially an active process, which involves attempting to think along with the speaker, which requires 'keeping in step' with the speaker mentally, in order to learn. This is done purely by sustained effort of attention and concentration which is known as active listening.

#### ***Anticipation***

This is an important aspect of active listening. Most often the listener anticipates what the speaker is about to say next. In the one-way communication of a lecture, anticipation needs to be cultivated deliberately, as part of the process of thinking along with the lecturer. Active listening is a key to understanding and retaining. If the habit of thinking along with the lecturer is cultivated, revision would be merely following a train of thought that is already familiar.

#### ***Questions and Cues***

It is important to listen to a lecture with certain general questions in mind and to have specific questions to suggest themselves as the lecture proceeds. It is necessary to be alert to certain kinds of cues in the speaker's language.

It is important to

- identify the general topic of the lecture, which may be stated at the beginning of the lecture. On the other hand, the general topic may emerge at a later stage.
- have a sense of the general purpose of a lecture. It may be used to introduce a new area of study, to introduce new concepts, to comment in detail on a text or to summarize.
- question how any lecture relates to the previous one. Lectures, especially on a wide and complex topic, are often presented in the form of a series. The lecturer may indicate the connections; but, it is important that the student attempts to make connections and links both between one lecture and another and between what is known already and what is now being taught.
- allow specific questions to arise in your mind as a lecture is proceeding. This will, in fact, happen when attempting to anticipate not just how a sentence will end but how an argument will develop, or how one piece of information can be reconciled with another, what the outcome of an experimental procedure or the implications of a principle will be.

- remain alert to what is being emphasized by the lecturer and what is regarded as peripheral. Linguistic cues such as “We must remember that ...” “It is important to note ...” “The main reason for this is ...” are indicative of such cues.
- be alert to cues which indicate the way an argument is proceeding. Words and phrases like ‘moreover’ or ‘in addition to’ indicate that a supporting point is being made. Phrases like ‘on the other hand’ indicate a contrast. ‘However’ and ‘in spite of this’ indicate a qualification of what has just been said. Speakers (and, as we shall see, writers also) use these devices to make what they are saying ‘hang together’ and form a coherent whole.

Efficient learning consists of organizing and relating, and not just memorizing. However, even memorizing itself is made easier when the subject-matter is well organized.

### ***Taking notes at lectures***

Many students spend much time in a lecture scribbling wildly in an effort to ‘take down’ as much as possible. This custom - and the habit of some lecturers - of simply reading their lecture notes aloud in a rather mechanical fashion caused the lectures to be defined as “the process whereby the notes of the lecturer become the notes of the student without passing through the minds of either”. But, even a lecture delivered with vigor and spontaneity, during which the students merely scribble down what they can, defeats the purpose of a ‘live lecture’. The main purpose of a ‘live lecture’ is to give listeners the benefit of all the enrichment of meaning that comes from the spoken word as compared with its written equivalent. This enrichment is produced by the speaker’s use of intonation, emphasis and pace and by the ability to observe facial expressions and gestures while listening to the voice. An attempt to transcribe what is being said, would result in missing of these extra cues to meaning. A lecture is something to be listened to and thought about. Therefore, lecture notes should be made based on the following general principles:

- To reflect the structure of the lecture
- To reflect the important points in the lecture
- To be condensed and paraphrased into the most economical form consisting of abbreviated statements of just headings. Limited use of certain standard abbreviations (such as e.g., or mmHg) is acceptable but, it should not be excessive, since notes will then be unreadable
- In some instances it may be acceptable to write verbatim what the lecturer is saying especially when a detailed problem is being worked through (e.g., in a mathematical proof)
- Notes should contain their own cues (underlining, insertion of NB, vertical line in the margin, use of colored pencil) in important sections
- They should be well spaced so that they can be amplified and additional information added later



### **Following up a lecture**

It is necessary to link lectures with one's own reading. It is important to make a note of references of reading provided at the lecture. Referencing should be done as soon as possible after the lecture. It is advisable to talk to a member of staff about reference material, if clarifications are required.

### **Revising notes**

If the examination requires memorization, it is necessary to recall the main points of lecture notes. However, revision is not primarily committing notes to memory. Revision is essentially a process of reconstructing what has been learnt and partially forgotten. It is also bringing the pieces of info together mentally in order to retrace the path traveled during prior learning. If revision is approached in this way, reconstruction of new ideas and new inter-relationships suggest themselves, amplifying the original view of the subject.

## **5.2 Reading**

### **Nature of the reading process**

Reading is a language-based set of complex skills. Many of the listening skills developed are transferable to reading. Like listening, reading is an active process and depends a great deal on the reader's ability to anticipate what is coming next and use questions and cues. Unlike listening, it is done in solitude and silence, which makes it in some ways more difficult. However, it can be done in the reader's own time and pace and repeated as often as necessary.

### **Directing your reading**

Students are exposed to reading a limited number of recommended textbooks while in schools. However, higher education demands an exposure to a large volume of reading matter. 'Reading lists' provided at the beginning of the session, may be alarmingly long. However, it is important to realize that many of these books are not intended to be read verbatim. It is important to note therefore that different texts are read in different ways. Even though the content of some books on the list are discussed at lectures, others will have to be read independently in the preparation of assignments or in studying for examinations.

### **Using the library**

The library will be useful in accessing material on reading lists and locating additional sources of information. Learning to use the library is a necessary and highly rewarding achievement. It is necessary for students to accustom themselves to the arrangements related to accessing reading material which include using the catalogue, reference room, and periodicals room.

### **5.3 Written Work**

In the course of study, students will be requested to submit work in written form. It may be in the form of a short paper to be read at a seminar or tutorial, a write-up of an experiment or practical or even an essay. Guidance will be provided on the approximate length and the list of relevant books. It is important to understand that as a student of a higher education institution, the student is expected to provide a critical account of the field of study in contrast to what is expected by an essay written at school. It is necessary at this level to cite references to authoritative writing to illustrate that views from other sources have been considered and also state the writer's own judgment or opinion.

### **5.4 Learning from Patients**

Clinical teaching program is developed based on the basis of the experiential learning through patient encounters in order to facilitate patient-centered attitudes. Evaluating patient's perspectives and developing collaborative relationships are promoted to inculcate professionalism and empathy. Students are promoted to interact with patients from the early stages of the curriculum to develop communication and clinical skills. A range of opportunities are provided to participate in patient care, to witness a range of major surgical and interventional procedures and to perform some of the non-invasive simple but essential procedures under supervision. The faculty encourages patients to provide feedback to medical students to facilitate learning by reflecting on their own performances.

Therefore, students should consider patients as an important learning resource. They should always talk to patients, take histories, examine patients, follow up the management as well as take part in patient management - since they can learn so much from these activities. Also, students are advised to learn by visiting different communities when opportunities are provided in the curriculum, - spend time and make observations on how things happen in real life.

## 6. Curriculum of the MBBS degree program of the Faculty of Medicine

### 6.1 Preamble

The medical program in Sri Lanka is a fulltime course conducted over a period of five years. Currently, the Faculty of Medicine is following a module-based semester system from year 1 to 4 with parallel hospital-based teaching starting from the 3<sup>rd</sup> year onward. The half of the fourth year and final year is dedicated to fulltime hospital-based teaching and learning.

The modular based curriculum was first introduced in the year 2005 for 2004/2005 entrants to the medical Faculty. It focused mainly on early clinical relevance, self-directed learning, integration, structure and function-based learning, professional development and community-oriented learning. After considering the stakeholder feedback and recent developments and changes in the trends in medical education locally and globally the faculty revised the medical curriculum in 2007, 2010, 2013 and in 2016 preserving the 2004 modular format.

The proposed curriculum revision is based on stakeholder feedback, Subject Benchmark Statement (SBS) in medicine revised in 2020, Sri Lanka Medical Council Review report 2022, consensus of the UGC standing committee on Medical and Dental education discussions across faculties of Medicine. The objective was to ensure that all medical faculties completed the MBBS program within 5 years, incorporating the stipulated training hours indicated by the Minimum standards document in medical education gazetted in 2018.

The Following policy documents were referred when formulating these revisions:

Locally:

Sri Lanka Qualification Framework Sep 2015, QA review standards,

UGC Standing Committee meeting decisions communicated through Dean Medicine.

Subject benchmark statement in Medicine, Quality Assurance Council, University Grant Commission October 2020.

Medical (Minimum standard of Medical Education) regulation No 01 of 2018 – Extra ordinary Gazette 2055/54 – dated 26 January 2018 and amendments on 26<sup>th</sup> December 2019 and 10<sup>th</sup> April 2020.

Internationally: United Kingdom - General Medical Council (GMC) "Outcomes for graduates 2018" and Basic Medical education World Federation for Medical Education

(WFME) Global Standards for Quality Improvement 2020, American Association of Medical Colleges (AAMC) Curriculum Inventory 2016.

### **Aims of the MBBS Course**

The graduate should

1. demonstrate an attitude towards medicine that is both scientific and humane and have the characteristics of high ethical standards required for professional life.
2. demonstrate knowledge, skills and attitudes that will enable the holistic management of medical problems affecting individuals and the community.
3. be able to deal appropriately with all emergencies utilizing the facilities available.
4. be aware of the limitations of knowledge and skills and be prepared to seek help when necessary.
5. be able to work in a team, and provide leadership in activities related to health.
6. be able to provide medico-legal services to the judicial system of the country.
7. be able to assess evidence both as to its reliability and relevance and appreciate that conclusions are reached by logical deductions. (Critical thinking)
8. be able to continue self-directed learning and contribute towards progress of medical sciences.
9. demonstrate knowledge of the interaction between the man and environment and their responsibility in promoting a healthy environment. (Social determinants of health)
10. be able to communicate effectively with fellow practitioners, patients and their families, other professionals and public.

### **Program learning outcomes (PLOs)**

PLOs of the medical curriculum are based on competencies that should be achieved by medical students as future doctors.

PLOs to be achieved at the end of the MBBS program are listed below.

1. Patient care
2. Knowledge for practice
3. Critical thinking and research skills
4. Health care systems – based practice, health promotion and prevention of disease in the community
5. Professional and ethical practice
6. Interpersonal Communication and collaboration
7. Continuing Personal and professional development
8. Assisting in the Administration of justice

## 1. Patient care

Patient-centred care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health

Students should be able to

- 1.1 obtain relevant and accurate information about patients and their conditions through history-taking, physical and mental state examination and the use of laboratory data, imaging and other investigations.
- 1.2 Prioritise and Justify diagnosis after interpreting laboratory data, imaging studies and other investigation findings.
- 1.3 summarize clinical findings and present to other members of the health care team.
- 1.4 make informed decisions about diagnostic and therapeutic interventions based on patient information and preferences, up-to-date scientific evidence and clinical judgment.
- 1.5 develop and implement patient management plans, customized after considering differential diagnoses, findings of appropriate investigations and considering all therapeutic options.
- 1.6 refer patients when appropriate, ensuring continuity of care and follow-up on patient progress and outcomes.
- 1.7 counsel and educate patients and their families to empower them to participate in their care and to enable shared decision making.
- 1.8 provide care that is safe, effective and efficient.
- 1.9 perform procedures specified as essential for a generalist.
- 1.10 provide health care services to patients, families and communities aimed at preventing health problems and maintaining health
- 1.11 perform supervisory responsibilities (e.g., ensuring safety of patients and co-workers).

## 2. Knowledge for practice

Knowledge of established and advancing biomedical, clinical, epidemiological and social-behavioural sciences and the application of this knowledge to patient care

Students should be able to

- 2.1 approach clinical situations in a logical and analytical manner.
- 2.2 apply to medical practice biomedical scientific principles.
- 2.3 prioritize health problems and management strategies based on current scientific principles in health care.



- 2.4 contribute to the creation, dissemination, application and translation of new health care knowledge and practices
- 2.5 apply psychological principles, method and knowledge to medical practice.
- 2.6 apply social science principles, method and knowledge to medical practice.

### **3. Critical thinking and research skills**

Ability to investigate and evaluate care of patients to appraise and assimilate scientific evidence and to continuously improve patient care based on constant self-evaluation and lifelong learning

Student should be able to

- 3.1 locate, appraise and assimilate evidence from scientific studies related to patients' health problems.
- 3.2 contribute to the advancement of the discipline by way of conducting research.
- 3.3 use information technology to optimize learning.
- 3.4 continually identify, analyse and implement new knowledge, guidelines, standards, technologies, products or services that have been demonstrated to improve outcomes.
- 3.5 contribute to the creation, dissemination, application and translation of new health care knowledge and practices
- 3.6 contribute to the advancement of the discipline by way of conducting research

### **4. Health care systems-based practice, health promotion and prevention of disease in community**

Be aware of and be responsive to the larger context and system of health care and call effectively on other resources in the system to provide optimal health care

Students should be able to

- 4.1 define health and describe dimensions of health, illness, disease and wellbeing.
- 4.2 describe the determinants of health problems
- 4.3 quantify the diseases and health problems.
- 4.4 identify the services available for referral in order to optimize delivery of care.
- 4.5 work effectively in various health care delivery settings and systems including preventive sector.
- 4.6 coordinate patient care within the health care system.

- 4.7 incorporate considerations of cost and risk-benefit analysis in patient/population-based care.
- 4.8 advocate for quality patient care and optimal patient care systems.
- 4.9 improve quality of the services provided by careful observation, routine recording of change, reflection and offering suggestions for change - identify system errors and implement potential systems solutions.
- 4.10 perform administrative and practice management responsibilities.
- 4.11 identify shortcomings of the system and implement solutions (e.g. clinical audit).
- 4.12 describe and use health care system and health information system in Sri Lanka.

## 5. Professionalism and ethical practice

Be committed to carrying out professional responsibilities and adherence to ethical principles

Student should be able to demonstrate

- 5.1 compassion, integrity (honesty) and respect for others.
- 5.2 responsiveness to patient needs that supersedes self-interest during practice (patient-centered care as opposed to doctor centered).
- 5.3 respect for patient privacy and autonomy during consultations (being patient-centered as opposed to doctor-centered).
- 5.4 accountability to patients, society and the profession.
- 5.5 sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities and sexual orientation.
- 5.6 Commitment to ethical principles
- 5.7 Compliance with the legal and ethical frameworks with regard to confidentiality, informed consent and end of life care
- 5.8 compliance with laws, policies, and regulations relevant to the practice of medicine.
- 5.9 ability to participate in different team roles, in inter professional teams, to establish, develop and continuously enhance patient and population-centred care.
- 5.10 characteristics of a inspiring role model to the immediate and larger society
- 5.11 continually identify, analyse and implement new knowledge, guidelines, standards, technologies, products or services that have been demonstrated to improve outcomes

## **6. Interpersonal communication skills and collaboration**

Effective interpersonal and communication skills in exchange of information and collaboration with patients, their families and health professionals

Students should be able to

- 6.1 communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds.
- 6.2 communicate effectively with colleagues within one's profession or specialty, other health professionals and health related agencies.
- 6.3 participate in the education of patients, families, students, trainees, peers and other health professionals.
- 6.4 work effectively with others as a member or leader of a health care team or other professional group.
- 6.5 act in a consultative role to other health professionals where appropriate.
- 6.6 maintain comprehensive, timely and legible medical records (Bed Head Ticket, Diagnosis card, referral letters, prescriptions, Medico Legal Reports).
- 6.7 demonstrate sensitivity, honesty and compassion in difficult conversations, including those about death, end of life, adverse events, bad news, disclosure of errors and other sensitive topics.
- 6.8 demonstrate insight and understanding about emotions and human responses to emotions that allow one to develop and manage interpersonal interactions.
- 6.9 work with other health professionals to establish and maintain a climate of mutual respect, dignity, diversity, ethical integrity and trust.
- 6.10 communicate with other health professionals in a responsive and responsible manner that supports the maintenance of quality health care in hospitals and the community.

## **7. Personal and professional development**

Engage in activities related to lifelong personal and professional growth

Students should be able to

- 7.1 demonstrate self-awareness of limitations in knowledge, skills, and emotion and engage in appropriate help-seeking behaviors.
- 7.2 identify strengths, deficiencies and limits in one's knowledge and expertise through self, peer and teacher assessments.
- 7.3 set learning and improvement goals and achieve those through teacher assistance or by independent study.

- 7.4 identify gaps in knowledge, skills and attitudes and perform learning activities that address these issues.
- 7.5 incorporate feedback into daily practice.
- 7.6 demonstrate healthy coping mechanisms to respond to stress.
- 7.7 manage conflict between personal and professional responsibilities.
- 7.8 demonstrate flexibility in adjusting to change with the capacity to alter one's behavior.
- 7.9 demonstrate trust worthiness among team members responsible for patient care.
- 7.10 demonstrate leadership skills that enhance team functioning; the learning environment, and/or the health care delivery system.
- 7.11 demonstrate self-confidence that puts patients, families, and members of the health care team at ease.
- 7.12 continue self-education in order to develop one's practice by accessing information from different sources and evaluating their authenticity.

## **8. Administration of justice**

Acquire basic skills to perform medico- legal duties as per the ordinance

Students should be able to

- 8.1 manage a person for medico-legal purposes
- 8.2 conduct post-mortem examinations.
- 8.3 use laboratory and other diagnostic services effectively by collecting appropriate specimens from the relevant cases, preserving, documenting, labeling and sending samples for analysis maintaining chain of custody.
- 8.4 prepare relevant documents for submission to Court in a legible and accurate manner and operate information storage and retrieval systems effectively.
- 8.5 present findings gathered from the examination of patients and autopsies honestly in a clear, concise manner, both orally and in writing, to relevant authorities (colleagues, support staff, courts, police and other governmental and non-governmental organizations).
- 8.6 apply knowledge of science and logical method to medico legal problems and formulate and defend an opinion assessing the reliability of evidence.

**Alignment of the Faculty Medicine (MBBS degree) PLOs with University of Peradeniya (UoP) Graduate Profile**

Attributes in the UoP Graduate Profile  Faculty PLOs	Scholar	Researcher	Digitally literate individual	Effective communicator	Entrepreneur	Manager	Responsible citizen	Leader	Collaborator	Holistic thinker	Problem solver	Role model	Unpretentious and dependable person	Lifelong learner	Socially intelligent and a sensitive human being
	1. Patient care	X			X		X	X	X	X	X	X	X	X	X
2. Knowledge for practice	X	X		X	X	X	X			X	X			X	X
3. Critical thinking and research skills	X	X	X	X	X	X	X							X	
4. Healthcare systems-based practice, promoting health and preventing disease in the community	X		X	X	X	X	X	X	X	X	X	X	X	X	X
5. Professionalism and ethics	X						X	X	X	X		X	X	X	X
6. Interpersonal communication and collaboration				X		X	X	X	X				X		X

7. Personal and professional development	X		X		X	X	X	X				X	X	X	X
8. Administration of justice			X	X			X				X	X	X	X	

**Program Learning outcomes/ competencies of the MBBS program- Faculty of Medicine Peradeniya mapped with SLQF outcomes**

SLQF outcomes	Program Learning Outcomes (PLOs)							
	1	2	3	4	5	6	7	8
1. Subject / theoretical knowledge	X	X	X	X	X	X	X	X
2. Practical knowledge and application	X	X	X	X	X	X	X	X
3. Communication	X	X	X	X	X	X	X	X
4. Team work and leadership	X	X	X	X	X	-	-	X
5. Creativity and problem solving	X	X	X	X	-	-	-	X
6. Managerial and entrepreneurship	X	X	X	X	-	X	-	X
7. Networking and social skills	X	X	X	X	X	X	-	X
8. Information usage and management	X	X	X	X	X	X	-	X
9. Adaptability and flexibility	X	X	X	X	X	X	X	X
10. Attitudes, values and professionalism	X	X	X	X	X	X	X	X
11. Vision for life	X	X	X	X	X	X	X	X
12. Updating self/ life- long learning Mindset	X	X	X	-	X	X	X	X



## Mapping of the FoMP MBBS program organizational streams with revised SBS outcomes

SBM- Scientific Basis of Medicine, DIS - Doctor in Society, RIM- Research in medicine, HCT- Hospital and community-based training, PPD- Personal professional development, IAM

Broad outcomes in SBS revised in 2020	The streams (and relevant modules) which cover the aspects stated
1. Subject/theoretical knowledge	SBM, RIM, DIS, HCT, PPD
2. Practical knowledge and application	HCT, SBM, RIM, DIS, PPD, IAM
3. Population Health primary care	DIS, module on family medicine, HCT
4. Communication skills	PPD, HCT, RIM, DIS
5. Teamwork and leadership	HCT, DIS, RIM, PPD
6. Creativity and problem solving	HCT, DIS, PPD
7. Managerial and entrepreneurship skills	DIS, HCT Trainee house officer (THO), RIM
8. Information usage and management	SBM, HCT, DIS, PPD, RIM
9. Networking and social skills	PPD, RIM, HCT, DIS
10. Adaptability and flexibility	HCT, PPD
11. Attitudes, values and professionalism	HCT, PPD, RIM, DIS
12. Vision for life	PPD, HCT, DIS, RIM
13. Life-long learning	HCT, PPD, SBM, DIS, RIM, IAM

The medical program is a fulltime course conducted over a period of five years. completion of all the components all the academic components and the clinical appointments is compulsory. The five years of study consist of eight semesters in the pre-clinical and para-clinical segments and a clinical clerkship program of 3 1/2 years, running parallel with the basic sciences. A semester consists of 14-15 weeks. The clinical curriculum does not have a semester structure. Students will follow an Intensive English Course before starting the academic course.

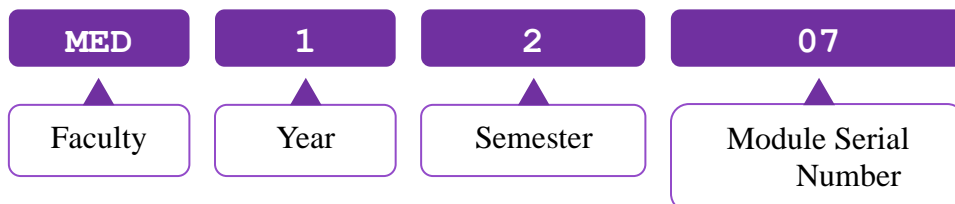
The academic program is arranged in to six streams; some conducted as standalone streams

- (1) **Scientific Basis of Medicine;(SBM)** which consists of classroom teaching, and several modules in pre-Clinical, some paraclinical subjects. Pre-clinical 9(Basic Science) Segment has three Semesters and Para-Clinical (Applied Science) Segment has five semesters
- (2) **Doctor in Society –(DIS)**, which includes a significant part of Forensic Medicine and community medicine, addresses the doctor's role in society concerning population issues and judicial medical issues

- (3) **Hospital and Community-based Training - (HCT)**, which consists of clinical training. This does not follow a semester structure.
- (4) **Personal and Professional Development - (PPD)**, which consists of ethical and professional behaviour and personal development
- (5) **Research**: which trains the students in the art and science of evidence-based practice.
- (6) **Integrated stream**; Integrated Applied Medicine (IAM)– ensures the application of basic and applied sciences to clinical presentations  
 Personnel and Professional Development (PPD), Integrated Applied Medicine and Research Stream were conducted as stand alone streams

	Year 1	Year 2	Year 3	Year 4	Year 5
<b>ORIENTATION</b>	<b>SCIENTIFIC BASIS OF MEDICINE (BASIC SCIENCE)</b>	<b>SCIENTIFIC BASIS OF MEDICINE (APPLIED SCIENCE)</b>		<b>HOSPITAL AND COMMUNITY BASED TRAINING</b>	
		<b>HOSPITAL AND COMMUNITY BASED TRAINING</b>			
			<b>DIS STREAM</b>		
			<b>RESEARCH IN MEDICINE STREAM (RIM)</b>		
	<b>INTEGRATED STREAM (IAM)</b>				
<b>PERSONEL AND PROFESSIONAL DEVELOPMENT STREAM (PPD)</b>					

**Notations used in the document - Notation for Modules**



Terms are indicated by the year followed by the term. eg. Year 1 Semester 1 is indicated as Y1S1

**Progression of the academic program - Themes**

- | Years  | Themes   |
|--|--|
| <ul style="list-style-type: none"> <li>• <b>Years 1 to 2 (Y1S1, Y1S2, Y2S1)</b></li> </ul> | Normal body and cellular structure (Anatomy), Mechanisms of normal functions of the body (Physiology) and biochemical processes in the cells to maintain normal functions (Biochemistry) with applications on dysfunction and disease. |

**At the end of year two semester one, the Second MBBS Barrier will be imposed.**

- |   |   |   |
|---|---|---|
| <ul style="list-style-type: none"> <li>• <b>Year 2 ,3,4 (early half) (Y2S2, Y3S1Y3S2 Y4S1, Y4S2)</b></li> </ul> | } | Basics of diseases, principles of Investigations, principles of drug management and hospital-based clinical training<br>Community-based training and preventive medicine and medical ethics and judicial medicine |
| <ul style="list-style-type: none"> <li>• <b>Year 4 (latter half)</b></li> </ul>                                 |   | Hospital-based clinical training  |
| <ul style="list-style-type: none"> <li>• <b>Year 5</b></li> </ul>   |   | Hospital based clinical training  |

**At the end of 5 years - Final MBBS**

**Calculation of credit hours for different teaching-learning activities per credit:**

	Direct Contact hours per credit	Notional hours per credit (by SLQF 2015)
Lectures	15 hours	50 hours
Tutorials	15 hours	50 hours
Demonstrations	15 hours	50 hours
Practical classes	30 hours	50 hours
In-Class Assignments	30 hours	50 hours
Seminars	15 hours	50 hours
Student generated Seminars /PBL/CCR	30 hours	50 hours

Clinical Work	45 hours	50 hours
Small-Group Discussions	15 hours	50 hours
Field Studies	45 hours	50 hours
Research Project		100 hours

**The teaching/learning methods used in the curriculum are listed below.**

- **Lectures** - Lectures are learning aids which provides guidance for self- study. Some lectures are conducted in an interactive manner.
- **Small Group Discussions (SGD)/Tutorials** - Active participation of students are encouraged. Application of learnt knowledge in relation to clinical practice is encouraged. Wide discussion of topics ensures understanding and facilitates quick retrieval of information.
- **Clinical Case of Relevance (CCR) / PBL Tutorials (PBLT)** - These sessions are arranged to help students to learn through inquiry/ discovery, understand the clinical application of basic science concepts. This activity is expected to generate interest among the students, improve self- directed learning skills, communication skills and team skills. It is important that students participate actively in self -directed learning on identified learning issues and discussions.
- **Practical classes** - These sessions are aimed at demonstrating certain practical skills, providing opportunity for students to practice skills accomplish targeted level of competence and enabling appreciation of theory learnt.
- **Skills lab sessions** – These sessions provide opportunities to practice essential skills on models and mannequins. Specially emergency management skills.
- **Clinical/ward work** - It is essential that students make maximum use of this opportunity. Learning from patients by talking to, observing and examining them, making notes, presenting case histories and taking part in discussions on management are important aspects of this exercise.
- **Student Presentations and Seminars** - As students are required to prepare for seminars through self- directed learning and collaboration, these activities ensure active learning.
- **Assignments** - Completion of assignments enables a learner to consolidate knowledge, acquire new knowledge and be creative.

- **Field visits /Family Study** – These encourage contextual learning through observations and interactions with relevant stakeholders.
- **Research project work** - This encourages systematic inquiry, teamwork, collaborative practice, interpersonal communications, data collection, record keeping, analysis, scientific writing and presentation of results.
- **Mini Clinical examination (Mini CEX)** - Assessment of clinical skills. This provides feedback through formative assessments in the workplace, which helps in professional development.
- **Portfolio** - Development of portfolio encourages reflection on personal experiences and makes the student engaged in focused learning and promotes life-long learning. Personal professional development is stimulated.
- **Blended learning-** Teaching learning program include face to face and a proportion of online sessions

**Detailed Curriculum****Basic science Segment of the Curriculum****Y1S1, Y1S2 and Y2S1 (Includes modules of SBM and PPD and IAM Streams)**

*This programme is subjected to amendments according to the educational requirements of national and international interests.*

semester		Code	Module	credits	Department/Subject
Y1S1		MED1101	Foundation to Human Anatomy and Anatomy of Limbs	5	Anatomy
		MED1102	Foundation to Human Physiology	3	Physiology
		MED1103	Biomolecules and Metabolism	3	Biochemistry
		MED1104	PPD	1	ELTU/ e-Library/ DM
		MED1105	IAM A	1	Basic Science and Clinical disciplines
				13	
<b>Y1S1 End Semester Examination-</b>					
Y1S2		MED1206	Anatomy of Thorax, Abdomen, Pelvis and Perineum	5	Anatomy
		MED1207	Cardiovascular, Respiratory and Alimentary Functions	5	Physiology
		MED1208	Nutrition and Applied Biochemistry -1	4	Biochemistry
		MED1209	PPD	1	ELTU/ e-Library/
		MED1210	IAM 1 B	1	Basic Science and Clinical disciplines
				16	
<b>Y1S2 End Semester Examination</b>					
Y2S1		MED2111	Neuroanatomy, Head and Neck	4	Anatomy
		MED2112	Neuroendocrine functions, Excretion and Reproduction	6	Physiology
		MED2113	Applied Biochemistry - 11	4	Biochemistry
		MED2114	PPD	1	ELTU/ e-Library/ Medical Library

		MED2115	IAM 1 C	1	Basic Science and Clinical disciplines
				16	
<b>Y2S1 End Semester Examination</b>					
<b>Second MBBS Barrier</b>					
<b>Repeat</b>					

**Applied Science Segment of the Curriculum**

**Y2S2, Y3S1, Y3S2, Y4S1 and Y4S2 (Includes streams DIS, PPD, IAM and Research)**

\*HCT stream runs parallel

		Code	Module	credits	Department/Subject
Y2S2		MED2216	Microbiology 1	2	Microbiology
		MED2217	Foundation in Pharmacology	2	Pharmacology
		MED2218	Pathology- Principles of Mechanisms of Diseases	3	Pathology
		MED2219	Research methods, Statistics	3	Com Med
		MED2220	PPD	1	Relevant department
		MED2221	IAM 1D	1	Applied and Clinical disciplines
				12	
<b>Y2S2 End Semester Examination</b>					
Y3S1		MED3122	Immunology	1	Microbiology
		MED3123	Systemic Pharmacology1	2	Pharmacology
		MED3124	Parasitology -1	2	Parasitology
		MED3125	Pathology -Mechanisms of diseases 1	4	Pathology
		MED3126	Principles of Forensic Medicine and medical ethics	3	Forensic
		MED3127	PPD	1	Family Medicine, Anaesthesia and Critical Care / Paediatrics
		MED3128	IAM 1E	1	Applied and Clinical disciplines



		MED3129	Research Project – Proposal	1	Com Med
				15	
		<b>Y3S1 End Semester Examination-</b>			
Y3S2		MED3230	Microbiology2 :-	2	Microbiology
		MED3231	Parasitology -2	1	Parasitology
		MED3232	Systemic Pharmacology 11	2	Pharmacology
		MED3233	Pathology Mechanisms of diseases 11	4	Pathology
		MED3234	Community Medicine I (DIS 2)	3	Com Med
		MED3235	PPD	1	Pharmacology / Medicine /Family Medicine
		MED3236	IAM- 1 F	1	Applied and Clinical disciplines
				14	
		<b>Y3S2 End Semester Examination</b>			
Y4S1		MED4137	Community med 11	4	Com Med
		MED4138	Clinical forensic Medicine1, forensic pathology and applied medical ethics-	1	Forensic
		MED4139	Haematology	1	Pathology
		MED4140	Family Medicine	1	Family Medicine
		MED4141	Radiology	1	Radiology
		MED4142	Integrated Applied Medicine 1 G	1	Anaesthesia and Critical Care
		MED4143	PPD	1	Psychiatry
		MED3129 ct	Research Project – Research Data Collection	2	
			13		
		<b>Y4S1 End semester Examination</b>			
Y4S2		MED4137 (ct)	Clinical forensic Medicine II, 11 forensic pathology and applied medical ethics	2	Forensic

		MED4144	Therapeutics	1	Pharmacology
		MED439 (ct)	Family Medicine	1	Family Medicine
		MED4140 (ct)	Radiology	1	Radiology
		MED4245	PPD	1	Pharmacology /Com med /Medicine
		MED3129 ct	Research Project – Research report	1	
				7	
<b>Y4S2 End Semester Examination</b>					
<b>Y4 Repeat – All year 4 subjects</b>					

### Clinical Segment of the Curriculum

#### A- 3<sup>rd</sup>Year and 4<sup>th</sup> Year

	Code	Clinical Appointment	Credits/Hrs	Coordinator
<b>Y3/4</b>	MED4CLIN01	Radiology	48	Radiology
	MED4CLIN02	Laboratory and Transfusion Medicine	48	Pathology
	MED4CLIN03	Community Medicine Public Health Practice	150	Com med
	MED4CLIN04	Family Medicine	50	Family Medicine
	MED4CLIN05	Forensic Medicine	50	Forensic

**B - 3 rd, 4 th Year and Professorial (Year 5)**

	Code	Clinical Stream	Credits	
Y3, Y4 & Y5	MED5CLIN06	Clinical Stream 1 (Medicine) Internal Medicine and related subspecialties (Cardiology, Dermatology, Neurology, Venereology and Sexually Transmitted Infections, Respiratory Medicine, Nephrology, Neurology, Rheumatology)	28	Medicine
	MED5CLIN07	Surgery and related subspecialties (Emergency Medicine, Ophthalmology, Orthopedic Surgery, Oto-rhino- laryngology, Neurosurgery, Urology)	30	Surgery
	MED5CLIN08	Obstetrics&Gynaecology	15	Obstetrics & Gynaecology
	MED5CLIN09	Paediatrics	15	Paediatrics
	MED5CLIN10	Psychiatry	10	Psychiatry
	MED5CLIN11	Anaesthesia and Critical Care	6	Anaesthesia and Critical Care
	MED 4246	Integrated Applied Medicine 11	1	Anaesthesia and Critical Care
	MED5CLIN12	PPD	1	Clinical

## 6.2 Module Description

### Orientation Program

Orientation Program is of 1month duration depending on the commencement of the course. It consists of Intensive English Course.

<b>Semester</b>	Orientation
<b>Course Code</b>	MEDORIENT1
<b>Course Name</b>	Intensive Course in English
<b>Credit Value</b>	Non-credit
<b>Prerequisites</b>	None
<b>Core/Optional</b>	Core
<b>Time Allocation (Hourly Breakdown)</b>	100 hours
<b>Aim(s):</b>	To enhance the English language competence of the new entrants in order to follow the MBBS course effectively.
<b>Intended learning Outcomes:</b>	<ul style="list-style-type: none"> <li>• On successful completion of this course, the students should be able to</li> <li>• form sentences and questions using tenses: simple present, present continuous, past, past continuous, present perfect, future.</li> <li>• understand the unit order of English sentences and construct &amp; identify simple, compound &amp; complex sentences.</li> <li>• use simple &amp; compound prepositions; articles; location structure &amp; function words; definitions; special structures with 'it' &amp; 'there'; link words &amp; phrases.</li> <li>• use active &amp; passive voices; modals; comparative &amp; superlative forms, &amp; conditionals.</li> <li>• skim and scan a text to find specific information. (i.e., extensive and Intensive reading); identify topic sentences &amp; supporting details in a paragraph; predict and read with meaning and use contextual clues to understand the general sense of a text.</li> <li>• develop skills and strategies for effective listening (i.e., differentiate between intensive and extensive listening), and take notes during lectures.</li> <li>• build vocabulary for medical purposes by using different techniques, and use some concepts about how vocabulary is used in English (prefix, suffix etc.).</li> <li>• introduce himself/herself and others; talk about day-to-day activities; describe people, things and situations; use common forms of greeting in social conversations.</li> <li>• face an interview; give instructions; ask for and provide information; carry on a dialogue by turn taking.</li> <li>• lead and facilitate a discussion; give opinions, and agree/disagree with an opponent.</li> </ul>

- gain confidence and practice in using the English language through informal learning activities, i.e., a variety entertainment, debates and movie screening.

**Course content/Course description:**

This module consists of all four skills (writing, speaking, listening and reading) with more emphasis on grammar, vocabulary development, writing and speech. The focus will be to improve students' general English proficiency and introduce English for Academic Purposes (EAP)

**Teaching /Learning Methods:**

Tutorials

**Assessment Strategy:**

	End-Term Assessment 100%
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### Summary of the Pre-Clinical Basic Science Segment

Semester	Code		Module	Credits	Teaching	Independent Learning (*SDL inside the TT)	Notional
Y1S1	MED1101	Anatomy	Foundation to Human Anatomy	5	40	60 (20 inside the TT)	100
			Anatomy of Limbs		78	72 (25 inside the TT)	150
	MED1102	Physiology	Foundation to Human Physiology	3	44	106 (30 inside the TT)	150
	MED1103	Biochemistry	Biomolecules and Metabolism	3	49	101 (30 inside the TT)	150
	MED1104		PPD 1	1	20	30	50
	MED1105		Integrated Applied Medicine 1 - A		15	30 (10 inside the TT)	50
					13	246	404
<b>Y1S1 Examination</b>							
Y1S2	MED1206	Anatomy	Anatomy of Thorax, Abdomen, Pelvis and Perineum	5	117	133 (25 inside the TT)	250
	MED1207	Physiology	Cardiovascular, Respiratory and Alimentary Functions	5	88	162 (25 inside the TT)	250
	MED1208	Biochemistry	Nutrition and Applied Biochemistry -1	4	65	135 (25 inside the TT)	200
	MED1209		PPD	1	20	30 (10 inside the TT)	50
	MED2110		Integrated Applied Medicine 1B	1	25	25 (10 inside the TT)	50
					16	315	485
<b>Y1S2 Examination</b>							
Y2S1	MED2111	Anatomy	Neuroanatomy, Head and Neck	4	94	106 (30 inside the TT)	200
	MED2112	Physiology	Neuroendocrine functions,	6	104	196 (30 inside the TT)	300

			Excretion and Reproduction			TT)	
	MED2113	Biochemistry	Applied Biochemistry -11	4	66	134 (30 inside the TT)	200
	MED2114		PPD 2	1	18	32 (10 inside the TT)	50
	MED2115		Integrated Applied Medicine 1C	1	23	27 (10 inside the TT)	50
				16	305	495	800
<b>Y2S1 Examination</b>							
				46			

### Summary of the Pre-Clinical Applied Science Segment

Year 2 Semester 2							
Semester		Subject	Content	Credit	Total TT hrs. For Teaching and Practicals	Independent (Out of TT+*SGL/SDL inside TT)	Notional
<b>Y2S2</b>	MED2216	Microbiology	Microbiology -1	2	50	50 (42+*8 SDL inside TT)	100
	MED2217	Pharmacology	Foundation	2	29	71(59 +12 SGL in TT)	100
	MED2218	Pathology	Principles of Mechanisms of Diseases	3	64	86(71+ SGL inside TT 15 HR s)	150
	MED2219	Research	Research methods, statistics	3	45	105 (100+10 inside the TT)	150
	MED2220	PPD 3		1	16	44(34+10 inside the TT)	50
	MED2221	IAM 1D		1	15	35(25+ 10 inside the TT)	50
					12		
		Total Time Table Hrs			<b>219</b>	381	600
<b>Y2S2 Examination</b>							
<b>Y3S1</b>	MED3122	Microbiology and Immunology	Immunology	1	15	35(33+2 SGL inside TT)	50



	MED3123	Pharmacology	Systematic Pharmacology - I	2	38	62 (50+ SGL/SDL 12 in the TT)	100
	MED3124	Parasitology	Parasitology -1	2	29	71 (66+ SGL/SDL 5hrs inside TT)	100
	MED3125	Pathology	Mechanisms of diseases 1	4	66	134 (119 +15 Self-study/ Group work inside the TT)	200
	MED3126	Forensic Medicine	Principles of Forensic medicine and Medical Ethics	3	45	105 (95 +10 SDL in TT)	150
	MED3127	PPD 4		1	6	44 (29+15 inside the TT)	50
	MED3128	IAM 1E		1	20	30 (25+ 10 inside the TT)	50
	MED3129	Research Project -		1	40	60	100
				15			
		Total Teaching Hrs.			<b>259</b>	541	800
		<b>Y3S1 Examination</b>					
<b>Y3S2</b>	MED3230	Micro	Microbiology 2	2	42	58 (53+5 in the SDL inside TT)	100
	MED3231	Parasitology	Parasitology -2	1	15	35 (30 +5 in the SDL inside TT)	50
	MED3232	Pharmacology	Systematic Pharmacology – II	2	25	75 (65 +10 SGL/SDL inside TT)	100
	MED3233	Pathology	Mechanisms of diseases II	4	70	130 (115 + 15inside the TT)	200
	MED3234	Community medicine 1	Community medicine 1	3	55	95(93+3SGL inside TT)	150
	MED3235	PPD 6		1	13	37 (32+10 inside the TT)	50
	MED3236	IAM 1F		1	25	25 (15+10 inside the TT)	50
				14			

		Total Teaching Hrs		<b>245</b>	455	700	
		<b>Y3S2 Examination</b>					
<b>Y4S1</b>	MED4137	Community med 11;		4	64	136 (126+10 72(66+6 SGL/SDL inside the TT)	200
	MED4138	Forensic Medicine	Clinical Forensic Medicine, Forensic Pathology and applied medical Ethics	1	15	35(30 + 5 SDL inside TT	50
	MED4139	Pathology	Hematology	1	15	35 (30+5 1inside the TT)	50
	MED4140	Family Medicine	Family Medicine	1	15	35	50
	MED4141	Radiology	Radiology	1	15	35 (30+ 5 inside the TT)	50
	MED4142	Integrated Applied Medicine F	IAM 11	1	20	30 (20+ 10 SGL)	50
	MED4143	PPD 7		1	16	44 (34+10 inside the TT)	50
	MED3129 ct	Research Project		2	80	120 (80+ 40 inside the TT)	200
				12			
		Total Teaching Hrs.		<b>240</b>	460	700	
		<b>Y4S1 Examination</b>					
<b>Y4S2</b>	MED4138 ct	Forensic Medicine	Clinical Forensic Medicine, Forensic Pathology and applied medical Ethics	2	30	70(60 + 10 SDL inside TT)	100
	MED4144	Pharmacology	Therapeutics	1	15	35	50
	MED4139 ct	Family Medicine	Family Medicine	1	15	35 (30+ 5 inside the TT)	50
	MED4140	Radiology	Radiology	1	17	33	50

	ct						
	MED4245	PPD 8		1	12	34	50
	MED3129	Research Project		1	40	60	100
				7		281 (21 inside the TT)	400
		Total Teaching Hrs.			129	271	
		<b>Y4S2 Examination</b>					

### End Semester Assessments

#### End Semester Assessment for the 2<sup>nd</sup> MBBS (SEM 1-3)

EXAM		
Y1S1	Foundation to Human Anatomy and Anatomy of Limbs	MCQ- 30% SAQ/Essay 40% OSPE -10% SPOTS-15% VIVA -5%
	Foundation to Human Physiology	MCQ- 40% SAQ/Essay- 40% OSPE- 20%
	Biomolecules & Metabolism	MCQ - 30% SAQ –45 % OSPE (walk-around) - 25%
Y1S2	Anatomy of Thorax, Abdomen, Pelvis and Perineum	MCQ - 30% SAQ/Essay- 40% OSPE- 10% SPOTS-15% VIVA -5%
	Cardiovascular, Respiratory and Alimentary Function	MCQ- 40% SAQ/Essay-40% OSPE-20%
	Nutrition and Applied Biochemistry -1	MCQ- 30% SAQ - 45% OSPE A (projected) - 10% OSPE B (walk-around) - 15%
Y2S1	Neuroanatomy, Head and Neck	MCQ - 30% SAQ/Essay- 40% OSPE 10% SPOTS-15%

		VIVA -5 %
	Neuro-endocrine Functions, Excretion and Reproduction	MCQ- 40% SAQ/Essay-40% OSPE-20%
	Applied Biochemistry -11	MCQ - 30% SAQ - 50% OSPE A (projected) - 10% OSPE B (walk-around) - 10%

### End Semester Assessments for applied Sciences

EXAM		
<b>Y2S2</b>	Microbiology 1	MCQ 45 mins - 40% SAQ 1 hr and 20 min – 60%
	Foundation in Pharmacology	MCQ 1 hr. 50% SAQ 1 hr. 50%
	Pathology- Principles of Mechanisms of Diseases	MCQ 90 minutes 50% SEQ/Essay 90 minutes 50%
	Research methods, Statistics	SAQ 2 HR 100%
<b>Y3S1</b>	Immunology	MCQ 30 minutes 50% SAQ 40 minutes 50%
	Systemic Pharmacology1	MCQ 1 hr. SAQ 1 hr
	Pathology Mechanisms of diseases 1	MCQ 90 minutes 40% SEQ/Essay 90 minutes 50% OSPE 30 minutes 10%
	Principles of Forensic Medicine and medical ethics –	MCQ 60 minutes 30% SAQ 60 minutes 40% Essay 60 minutes 30%
<b>Y3S2</b>	Microbiology 2	MCQ 45 mins – 40% SAQ/Essay – 60 mins – 45% OSPE 30 mins – 15%
	Parasitology -1 and 2 Clinical Parasitology	MCQ 60 mins – 35% SAQ – 60 mins – 50% OSPE 60 mins – 15%(CAT)
	Systemic Pharmacology 11	MCQ 60 minutes 50% SAQ 60 minutes 50%

	Mechanisms of diseases 11	MCQ 90 minutes 45% SEQ/Essay 90 minutes 50% Viva Voce 5 minutes 5%
Y4S1	Community Medicine I Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) –  <b>Primary Health care, Occupational Health, Demography and Oral Health, Disability – (DIS</b>	MCQ – 1 HR 50% SEQ/SAQ ESSAY – 2 HR 50%
	Community med 11; Community nutrition, medical sociology, mental health, emerging health problems and disaster management, Environmental Health and Injury Prevention <b>Health promotion, Disease prevention, Applied epidemiology, Health systems, health economics, and International health</b>	MCQ – 1 HR 50% SEQ/SAQ ESSAY – 2 HR 50%
	Haematology	MCQ 30 minutes 50% SEQ/Essay 30 minutes 50%
	–Public Health Practice HP (1 Hr)	OSPHE
	Clinical forensic Medicine, forensic pathology and applied medical ethics- (DIS4)	MCQ 60 minutes 30% SAQ 60 minutes 40% Essay 60 min 30%
	Therapeutics	MCQ -100%
	Radiology	MCQ 1 hr. 50% OSPE 1 hr. 50%
	Family Medicine	OSPE 1 hr. 50% SAQ 1 hr. 50%
	Research	Report and Viva 100%

<b>Semester</b>	Y1S1				
<b>Course Code</b>	MED1101				
<b>Course Name</b>	Foundation to Human Anatomy and Anatomy of Limbs				
<b>Credit Value</b>	5 (Notional Hours: 250)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b> Foundation to Human Anatomy	Lectures	Practical	Tutorials/ SGD	Independent Learning (*SDL inside the TT)	Notional
	24	14	2	60 (20 inside the TT)	
<b>Hourly Breakdown</b> Anatomy of Limbs	Lectures	Practical	Tutorials/ SGD	Independent Learning	250
	16	52	10	72 (25 inside the TT)	
<p><b>Aim(s):</b> Foundation to Human Anatomy To provide</p> <ol style="list-style-type: none"> <li>1. an introduction to the organization of normal human structure in order to understand the structure-function relationship and the basis of ill health by providing a knowledge on cellular basis of life, organization of tissues of the body, early embryogenesis and human genetics and evolution.</li> <li>2. an overview of biological variation and imaging modalities in medicine.</li> </ol> <p><b>Aim(s):</b> Anatomy of Limbs To enable the student to understand the organization and the structure of tissues of the musculoskeletal system and limbs with reference to their functions, the anatomical basis of related disorders, diagnostics and management strategies.</p>					
<p><b>Intended learning outcomes:</b> Foundation to Human Anatomy On successful completion of the module, students should be able to</p> <ul style="list-style-type: none"> <li>• describe the basic structure of the cell and the levels of organization of multicellular organism.</li> <li>• state the events of cell cycle and describe cell division.</li> <li>• identify and describe basic tissue types and their light microscopic appearance.</li> <li>• describe early embryogenesis.</li> <li>• explain the organization of genetic material and information flow, and patterns of inheritance</li> <li>• apply the above knowledge to explain the basis of common genetic disorders and their pattern of inheritance</li> <li>• describe human evolution</li> <li>• state the different imaging modalities and explain their basic principles.</li> </ul>					

**Intended Learning Outcomes:** Anatomy of Limbs

On successful completion of the module students should be able to

- describe the growth, development, organization and structure of the tissues of musculoskeletal system and limbs.
- describe the gross structure of the limbs and the microscopic structure of the musculoskeletal tissues.
- explain how the limb structure is adapted to perform its function
- explain the basic biomechanics of limb movement.
- apply the above knowledge to explain the anatomical basis of related disorders, diagnostics and management strategies.

**Course content/Course description:** Foundation to Human Anatomy

Introduction to anatomy, cell and its functional adaptations, microscopy and multi cellular organism. Introduction to basic tissues, their organization and functional adaptations, early embryogenesis, introduction to human genetics, genes, chromosomes, levels of information flow, inheritance and its patterns, human evolution and introduction to imaging.

**Course content/Course description:** Anatomy of Limbs

Development, osteology, surface anatomy, regional anatomy and cross-sectional anatomy of the limbs. Structure of musculoskeletal tissues and ossification of bones. Clinical correlation and Imaging.

**Teaching /Learning Methods:** Foundation to Human Anatomy

Lectures, Practical Classes

**Teaching /Learning Methods:** Anatomy of Limbs

Lectures, Tutorials/SGD, Practical Classes- dissections and prosected specimen demonstrations, student seminar

**Assessment Strategy:** End- Semester Assessment

	MCQ 30%	SAQ 40%	OSPE 1 (Projections)10 %	OSPE 2 (Spots) 15%	VIVA 5%
Details:	25 MCQs	4 SAQs (Limbs 2, Found 2)	Foundation – 10 Limbs -5	Limbs - 20	Limbs only

**Recommended Reading:**

1. Clinical Anatomy by regions – Richard S Snell
2. Last's Anatomy: Regional and Applied by C.S. Sinnatamby
3. Wheater's Functional Histology: A Text and Colour Atlas by B. Young et al
4. Grant's Dissector by P. W. Tank
5. Gray's Anatomy for students by Richard L. Drake
6. Langman's Medical Embryology by T.W. Sadler
7. Human embryology by MS Chandrasekara
8. Applied Anatomy for Students and Junior Doctors by Harold Ellis
9. Essential Clinical Anatomy by Keith L. Moore



<b>Semester</b>	Y1S1				
<b>Course Code</b>	MED1102				
<b>Course Name</b>	Foundation to Human Physiology				
<b>Credit Value</b>	3 (Notional Hours: 150)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Practical	Tutorials/ SGD	Independent Learning (*SDL inside the TT)	Notional
	28	12	4	106 (30 inside the TT)	150
<b>Aim(s):</b>					
<ol style="list-style-type: none"> <li>1. To provide an introduction to functions of the body, cellular physiology and homeostatic mechanisms</li> <li>2. To enable the student to understand the function and mechanisms of the musculoskeletal system, the function of blood and its components, and the physiological basis of haematological disorders, diagnostics and management strategies.</li> </ol>					
<b>Intended learning outcomes:</b>					
On successful completion of the course, students should be able to					
<ul style="list-style-type: none"> <li>• state the metric units of measurement of physiological parameters.</li> <li>• Explain the mechanisms that maintain homeostasis.</li> <li>• describe the body composition and body compartments.</li> <li>• explain the mechanisms of membrane transport and membrane potentials.</li> <li>• explain the basic arrangement of the nervous system and transmission of nerve impulses.</li> <li>• explain the mechanism of muscle contraction and changes of the muscle tissue in response to exercise.</li> <li>• explain the physiological basis of muscle disorders.</li> <li>• describe the composition of blood and the functional role of its components.</li> <li>• explain the haemostatic and anti-clotting mechanisms and the physiological basis of bleeding disorders and their diagnosis and management.</li> <li>• explain the mechanisms of regulation of body temperature.</li> <li>• measure and body temperature.</li> <li>• interpret the tests of blood coagulation and blood grouping.</li> </ul>					
<b>Course content/Course description:</b>					
Introduction to homeostasis; body composition; membrane transport and ion channels; resting membrane potential and action potential; electrical and chemical basis of function of nerve, muscle, neuromuscular junction and synapse; neurotransmitters and					

NMJ blockers; autonomic nervous system; regulation of body temperature; contraction and relaxation of muscle; effect of exercise on muscles; changes in muscles to meet the functional demand; physiological basis of muscle disorders; composition of blood; anaemia and polycythaemia; haemostasis; haemostatic disorders; blood groups and transfusions.

**Teaching /Learning Methods:**

Lectures, Tutorials/SGD, Practical Classes

**Assessment Strategy:**

Continuous Assessment		End- Semester Assessment	
		100%	
Details: MC	MCQ	SAQ/ Essay	OSPE
	40%	40%	20%

**Recommended Reading:**

1. Text book of Medical Physiology by A.C.Guyton and J.E.Hall
2. Review of Medical Physiology by William F.Ganong

<b>Semester</b>	Y1S1				
<b>Course Code</b>	MED1103				
<b>Course Name</b>	Biomolecules & Metabolism				
<b>Credit Value</b>	3 (Notional Hours: 150)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Practical	Tutorials/ SGD	Independent Learning(*S DL inside the TT)	Notional
	32	09	08	101 (30 inside the TT)	150
<b>Aim(s):</b>					
To provide a comprehensive understanding of biochemistry of the cell, bio molecules, cellular metabolism, metabolic regulation and an introduction to homeostasis, in relation to human body.					
<b>Intended learning outcomes:</b>					
On successful completion of the course, student should be able to					
<ul style="list-style-type: none"> <li>• describe cell biochemistry, including the functions of biomolecules and their role in cellular metabolism.</li> <li>• describe and compare cellular energy generation mechanisms and their regulation.</li> <li>• describe the roles of vitamins, minerals, hormones, and enzymes in metabolism.</li> <li>• explain the processes of gene expression and its regulation</li> <li>• demonstrate basic biochemical analysis techniques related to biomolecules and metabolism.</li> <li>• interpret, analyze, apply, and communicate knowledge on biomolecules and metabolism and relevant biochemical tests.</li> </ul>					
<b>Course content/Course description:</b>					
Cellbasics, Membrane and biomolecules, Enzymes, Regulation of enzyme activity, Energyforthe cell, Tissue-specific metabolism, Amino acid metabolism, Urea cycle, Gluconeogenesis, Glycogen metabolism, Lipid and Ketone body metabolism, Regulation of metabolism, Nucleic acids, DNA replication, Synthesis of proteins, Gene regulation, Cell cycle, Vitamins and minerals in metabolism, Laboratory safety, Instrumentation					
<b>Teaching /Learning Methods:</b>					
Lectures, Tutorials/SGD, Practical Classes					
<b>Assessment Strategy:</b> End- Semester Assessment					
Details:	MCQ	SAQ	OSPE A		
	30%	45%	25%		

**Recommended Reading:**

1. Lippincott's Illustrated Reviews: Biochemistry by R. A. Harvey & D. R. Ferrier
2. Harper's Illustrate Biochemistry by R. Murrayetal
3. Biochemistry by J.M. Berg, J. L. Tymoczko and L. Stryer.
4. Biochemistry Made Easy by The Department of Biochemistry, Faculty of Medicine, University of Peradeniya

<b>Semester</b>	Y1S1				
<b>Course Code</b>	MED1104				
<b>Course Name</b>	Personal and Professional Development 1				
<b>Credit Value</b>	1 non-GPA				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Seminars/workshop	Tutorials	Independent Learning	Notional
	06	02	12	30	50
<b>Aim(s):</b>					
This course comprises 3 components aiming-					
1. To provide students with a foundation to develop skills required for personal and professional development.					
2. To enhance the English language competence of the student in order to follow the MBBS course effectively.					
<b>Intended learning outcomes:</b>					
1. On successful completion the student should be able to demonstrate awareness related to active learning and learning styles, time management, effective listening, principles of communication					
2. On successful completion of the English course, the student should be able to-					
a. filter out unnecessary details and effectively summarize an academic text.					
b. make a short speech spontaneously expressing the viewpoint.					
c. transfer visual information successfully to linguistic form					
d. read and comprehend a given academic text and answer the questions based on the text					
<b>Course content/Course description:</b>					
1. Communication skills, Time management, principles of effective communication					
2. English course- summary Writing, speech activity, information transfer, reading and comprehension, listening comprehension					
<b>Teaching /Learning Methods:</b>					
1. Lectures and workshop/seminars, movie clips					
2. English- tutorials					
<b>Assessment Strategy:</b>					
1. Self-assessment and peer assessment of soft skills formative assessments					
2. English- Formative assessments for each of the courses					
<b>Recommended Reading:</b>					
1. Learning doctor patient communication skills- A guide for medical students-Prof R.M. Mudiyanse					
2. Soft skills solutions. Steppingstones to success. Ann Cross and Martha Lanaghen (2015)					

<b>Semester</b>	Y1S1		
<b>Course Code</b>	MED1105		
<b>Course Name</b>	Integrated Applied Medicine 1A		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>	None		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	SGD/CCR	Independent Learning	Notional
	15	25 (10 inside the TT)	50
<p><b>Aim(s):</b>  <b>Early clinical exposure</b>                      Program objectives</p> <ul style="list-style-type: none"> <li>• Enable familiarization with the hospital set up.</li> <li>• Inculcate humane values into patient interaction- facilitate the development of human values / empathy etc.</li> <li>• Develop effective communication skills for a healthcare setting</li> </ul> <p><b>Clinical Cases of Relevance (CCR)- Objectives</b>                      To facilitate transition from basic sciences to hospital-based training by reinforcing relevance of basic sciences to clinical practice, facilitating clinically relevant basic science concepts and encouraging students to engage in active learning and facilitate critical thinking.</p>			
<p><b>Intended learning outcomes:</b>                      Students should be able to</p> <p><b>Early clinical exposure</b></p> <ol style="list-style-type: none"> <li>1. Correlate the basic science inputs with common patient presentations</li> <li>2. Demonstrate human values and empathy</li> <li>3. Communication with patient reflect on the experience and learning from situations</li> </ol> <p><b>Clinical Cases of Relevance (CCR)</b>                      apply the relevant anatomical, physiological and biochemical basis involved common diseases.</p> <p><b>Application of Basic science knowledge to essential clinical skills:</b></p>			
<p><b>Course content/Course description:</b>                      Hospital Visits</p>			

**Teaching /Learning Methods:**

**Guided clinical exposure**

Visit to ETU/OPD/Surgical ward / medical ward /ICU/Pediatric ward - Talking to patients and bystanders

History taking - patient narratives of the presenting complain

**Assessment Strategy:**

Include to the Y1S1 subject wise assessment

**Recommended Reading:**

1. Snell. R. S. Clinical Anatomy by Regions, Latest Edition
2. Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition
3. Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition
4. Colledge. N. R. et al. Davidson's Principles & Practice of Medicine. Latest Edition
5. Kumar P and Clark C. Clinical Medicine Latest Edition
6. Kumar V et al., Robbins Basic Pathology Latest Edition



<b>Semester</b>	Y1S2				
<b>Course Code</b>	MED1206				
<b>Course Name</b>	Anatomy of Thorax and Abdomen, Pelvis and Perineum				
<b>Credit Value</b>	5 (Notional hrs 250)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorials/ SGD	Practical	Independent Learning (*SDL inside the TT)	Notional
	38	05	74	133 (25 inside the TT)	250
<b>Aim(s):</b>					
To provide a comprehensive understanding of the organization and the structures of the thorax and abdomen, pelvis and perineum development and histology of the cardiovascular, respiratory gastro intestinal systems and genitourinary system with reference to their functions, anatomical basis of related disorders, diagnostics and management strategies.					
<b>Intended learning outcomes:</b>					
On successful completion of the course, students should be able to					
<ul style="list-style-type: none"> <li>• describe the organization and structure of the thorax, abdomen and their organs.</li> <li>• identify the gross structures in the thorax and abdomen and their relationships</li> <li>• identify the microscopic structure of the organs in the cardiovascular, respiratory and gastro intestinal systems.</li> <li>• describe the development of cardiovascular, respiratory and gastro intestinal systems.</li> <li>• explain how the structure of the cardiovascular, respiratory and gastro intestinal systems are adapted to perform their functions.</li> <li>• apply the above knowledge to explain the anatomical basis of related disorders, diagnostics and management strategies.</li> <li>• describe the development, structure and organization of the genitourinary system.</li> <li>• explain the anatomical basis of common clinical problems, diagnostic and management strategies related to genitourinary system.</li> <li>• describe the development, structure and organization of the pelvis and perineum.</li> <li>• identify the gross structures in the pelvis and perineum and their relationships.</li> <li>• identify the microstructure of genitourinary organs.</li> <li>• apply the above knowledge to explain the anatomical basis of common clinical problems, diagnostic and management strategies related to pelvis and perineum.</li> </ul>					
<b>Course content/Course description:</b>					
Anatomy of Thorax and Abdomen, pelvis and Perineum Osteology, surface anatomy and regional anatomy of the thorax and abdomen pelvis and perineum. Development and histology of the cardiovascular, respiratory genitourinary system and gastro intestinal systems with their related clinical					

correlations. Imaging and cross-sectional anatomy of the thorax abdomen pelvis and perineum

**Teaching /Learning Methods:**

Lectures, Tutorials/SGD, Practical Classes – dissections and prosections, histology practicals

**Assessment Strategy:** End- Semester Assessment

	MCQ	SAQ	OSPE 1	OSPE 2 Spots	VIVA
Details:	30% (25)	40% (4)	10% (20)	15% (25)	5%

**Recommended Reading:**

1. Clinical Anatomy by regions – Richard S Snell
2. Last's Anatomy: Regional and Applied by C.S. Sinnatamby
3. Wheater's Functional Histology: A Text and Colour Atlas by B. Young et al
4. Grant's Dissector by P. W. Tank
5. Gray's Anatomy for students by Richard L. Drake
6. Langman's Medical Embryology by T.W. Sadler
7. Human embryology by MS Chandrasekara
8. Harold Ellis Clinical Anatomy: Applied Anatomy for Students and Junior Doctors by Harold Ellis
9. Essential Clinical Anatomy by Keith L.Moore

<b>Semester</b>	Y1S2				
<b>Course Code</b>	MED1207				
<b>Course Name</b>	Cardiovascular, Respiratory and Alimentary Functions				
<b>Credit Value</b>	5 (Notional hrs 250)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorials/SGD	Practical	Independent Learning (*SDL inside the TT)	Notional
	59	08	21	162 (25 inside the TT)	250
<b>Aim(s):</b>					
To enable the student to understand the functions of the cardiovascular, respiratory and alimentary systems with a view of learning the basis of relevant disorders, diagnostics and management strategies.					
<b>Intended learning outcomes:</b>					
On successful completion of the course, students should be able to					
<ul style="list-style-type: none"> <li>• describe the functions of the cardiovascular, respiratory and alimentary systems.</li> <li>• perform clinical examinations of the cardiovascular and respiratory systems.</li> <li>• explain the physiological basis of the common dysfunctions of the cardiovascular, respiratory and alimentary systems.</li> <li>• explain the basis for performing investigations in relation to the cardiovascular, respiratory and alimentary systems and interpret their findings.</li> </ul>					
<b>Course content/Course description:</b>					
Heart as a pump; Electrocardiography; Cardiac output and venous return; Flow dynamics; Role of the vascular endothelium in regulation of blood flow; Blood pressure and its regulation; Tissue fluids; Circulation through special regions; Hypovolaemia and shock; Dehydration; Examination of arterial and venous pulses; Measurement of blood pressure; Examination of the Cardiovascular System; Autonomic functions; Mechanics of breathing; Gas exchange and diffusion of gases; Transport of respiratory gases; Lung function testing; Regulation of respiration; Role of respiration in acid-base balance; Respiration in special circumstances (Exercise/Altitude / Deep sea diving /Air and space travel); Clinical examination of the respiratory system; Basic life support; Respiratory insufficiencies; Heart failure and cardiac shunts; cardiac murmurs; General organization of the alimentary canal to perform its function; Fate of food in the alimentary tract (Stomach/gastric secretion/ gastric emptying, Small intestine/secretory process of the duodenum, Liver, Gall bladder, Pancreas, Gastro intestinal hormones, Digestion, Absorption, Large intestine); Alimentary disorders and functional defects.					
<b>Teaching /Learning Methods:</b>					
Lectures, Tutorials/SGD, Practical Classes					

<b>Assessment Strategy:</b> End- Semester Assessment			
Details:	MCQ	SAQ/ Essay	OSPE 1
	40%	40%	20%
<b>Recommended Reading:</b>			
1. Textbook of Medical Physiology by A.C. Guyton and J.E. Hall			
2. Review of Medical Physiology by William F. Ganong			

<b>Semester</b>	Y1S2				
<b>Course Code</b>	MED1208				
<b>Course Name</b>	Nutrition and Applied Biochemistry – I				
<b>Credit Value</b>	4 (Notional hrs 200)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorials/SGD	Practical	Independent Learning (*SDL inside the TT)	Notional
	41	8	16	135 (25 inside the TT)	200
<b>Aim(s):</b> To provide a comprehensive understanding of the biochemistry of the respiratory, cardiovascular and alimentary systems.					
<b>Intended learning outcomes:</b> On successful completion of the course, students should be able to					
<ul style="list-style-type: none"> <li>describe the normal mechanisms and derangements in red cell function and blood gas transportation</li> <li>explain the acid-base balance and acid-base disorders</li> <li>describe the biochemical role of the vascular endothelium and plasma proteins.</li> <li>describe the muscle metabolism in rest and exercise, adaptations to exercise, and response to injury including the role of markers of muscle damage</li> <li>describe the principles of nutrition, and the biochemical functions of the gastrointestinal tract including the liver, in relation to health and disease</li> <li>interpret, analyze, apply, and communicate knowledge related to cardio respiratory functions, alimentation and nutrition, and relevant biochemical tests.</li> </ul>					
<b>Course content/Course description:</b> Acid base balance, Alveolar surfactant, Transport of respiratory gases, Haemoglobin, Abnormal Haemoglobin, Plasma proteins, Red cell structure, Haemolytic anaemia, Biochemical effects of exercise on muscle, Collagen, Identification of muscle damage, Role of vascular endothelium in regulation of blood flow/ blood pressure, Digestion and absorption of food, Role of liver and pancreas in digestion and absorption, Liver functions, Biochemical tests of liver dysfunction, Healthy diet, Components of diet and food processing, Energy and protein requirement, Digestive disorders, Protein energy deficiency, Free radicals and antioxidants.					
<b>Teaching /Learning Methods:</b> Lectures, Tutorials/SGD, Practical Classes					
<b>Assessment Strategy:</b> End- Semester Assessment					
Details:	MCQ	SAQ	OSPE A	OSPE B	
	30%	45%	10%	15%	

**Recommended Reading:**

1. Harper's Illustrate Biochemistry by R.Murrayetal
2. Lippincott's Illustrated Reviews:Biochemistry by R.A.Harvey &D.R.Ferrier
3. Biochemistry by J.M.Berg, J.L.Tymoczko and L.Stryer.
4. Biochemistry Made Easy by The Department of Biochemistry, Faculty of Medicine, University of Peradeniya
5. Basic Medical Biochemistry- A clinical approach by M.A. Liberman & A.D. Marks
6. Text book of Medical Physiology by A.C.Guyton and J.E.Hall

<b>Semester</b>	Y1S2				
<b>Course Code</b>	MED1209				
<b>Course Name</b>	Personal and Professional Development 2				
<b>Credit Value</b>	1 (Notional 50)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lecture /Seminars/ workshop	Tutorials	Practical	Independent Learning (*SDL inside the TT)	Notional
	8	10	2	30 (10 inside the TT)	50
<b>Aim(s):</b>					
This course comprises 3 components aiming-					
<ol style="list-style-type: none"> <li>To provide students with a foundation to develop skills required for personal and professional development.</li> <li>To enhance the English language competence of the student in order to follow the MBBS course effectively.</li> <li>To provide skills to navigate basic word processing, spread sheets and presentation software, create graphs and formatting documents in word processors</li> </ol>					
<b>Intended learning outcomes:</b>					
<ol style="list-style-type: none"> <li>On successful completion of the activities on good practices in communication and personal development the student should be able to demonstrate good communication practices, engage in reflective practice and personal and professional development</li> <li>On successful completion of the English course, the student should be able to- <ul style="list-style-type: none"> <li>describe a process in a sequential manner using appropriate language (present simple active/passive voice, modal auxiliary verbs) and use suitable sequence markers</li> <li>illustrate a procedure using appropriate cohesive devices.</li> <li>express group opinion by looking at a situation in a balanced point of view and present it to the class.</li> <li>identify the parts, structure, and organization of a formal letter, differentiate between formal and informal use of language in letter writing and use standard expressions and phrases and punctuation in letter writing and write a formal letter</li> <li>listen/read and comprehend a given academic text and answer the questions based on the text.</li> </ul> </li> </ol>					

3. On successful completion of the IT course, the student should be able to
  - Demonstrate how to navigate commands and menus of common word-processing, spread sheets and presentation software
  - Create different types of graphs using different types of data in a spreadsheet program, create various simple analysis
  - Formatting of documents in word processors.
  - Design presentations.

**Course content/Course description:**

1. Communication skills, motivation and attitude development, personal development, when to ask for help and whom to go to
2. English course-process writing, speech activity, letter writing, reading and comprehension, essay writing
3. IT course- common productivity software packages available for students using the university network, using software for word processing, designing documents/flyers/posters/ books etc., using spreadsheets for data handling and analysis, using presentation software for creating presentations.

**Teaching /Learning Methods:** Lectures/ Practical

**Assessment Strategy:**

Formative /certification of completion of MOODLE assignment

**Recommended Reading:**



<b>Semester</b>	Y1S2		
<b>Course Code</b>	MED1210		
<b>Course Name</b>	Integrated Applied Medicine 1B		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>	None		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	SGD/CCR	Independent Learning	Notional
	25	25 (10 inside the TT)	50
<p><b>Aim(s):</b>  <b>Early clinical exposure</b>                      Program objectives</p> <ul style="list-style-type: none"> <li>• Enable familiarization with the hospital set up.</li> <li>• Enable correlation of basic science input to patient presentations</li> <li>• Inculcate humane values into patient interaction- facilitate the development of human values / empathy etc.</li> <li>• Develop effective communication skills for a healthcare setting</li> </ul> <p><b>Clinical Cases of Relevance (CCR)- Objectives</b>                      To facilitate transition from basic sciences to hospital-based training by reinforcing relevance of basic sciences to clinical practice, facilitating clinically relevant basic science concepts and encouraging students to engage in active learning and facilitate critical thinking.</p> <p><b>Application of Basic science knowledge to essential clinical skills:</b>                      Intercostal tube insertion, peripheral and central Intravenous cannulations, Blood pressure measurement.</p>			
<p><b>Intended learning outcomes:</b>                      Students should be able to                      Early clinical exposure</p> <ol style="list-style-type: none"> <li>1. Correlate the basic science inputs with common patient presentations</li> <li>2. Demonstrate human values and empathy</li> <li>3. Communication with patient reflect on the experience and learning from situations</li> </ol> <p>Clinical Cases of Relevance (CCR)                      apply the relevant anatomical, physiological and biochemical basis involved common diseases.</p>			

**Application of Basic science knowledge to essential clinical skills:**

Intercostal tube insertion, peripheral and central Intravenous cannulations, Blood pressure measurement.

**Course content/Course description:**

Hospital Visits

Clinical Cases of Relevance (CCR)

Clinically relevant basic and applied science concepts of anemia, jaundice, oedema, hemorrhage, shock, dyspnea, acute abdominal pain, chest pain, obesity, acid base and electrolyte disturbances, abdominal trauma, chest trauma, polyuria, cyanosis, disturbances in temperature regulation

**Application of Basic science knowledge to essential clinical skills:**

Intercostal tube insertion, peripheral and central Intravenous cannulations, Blood pressure measurement.

**Teaching /Learning Methods:**

**Guided clinical exposure**

Visit to ETU/OPD/Surgical ward / medical ward /ICU/Pediatric ward - Talking to patients and bystanders

History taking - patient narratives of the presenting complain

**CCR-** Lectures, Student Assignments, Guided-Student Presentations

**Assessment Strategy:**

Portfolio

**Recommended Reading:**

1. Snell. R. S. Clinical Anatomy by Regions, Latest Edition
2. Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition
3. Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition
4. Colledge. N. R. et al. Davidson's Principles & Practice of Medicine. Latest Edition
5. Kumar P and Clark C. Clinical Medicine Latest Edition
6. Kumar V et al., Robbins Basic Pathology Latest Edition

<b>Semester</b>	Y2S1				
<b>Course Code</b>	MED2111				
<b>Course Name</b>	Neuroanatomy, Head and Neck				
<b>Credit Value</b>	4 (Notional Hours: 200)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorials/SGD	Practical	Independent Learning (*SDL inside the TT)	Notional
	38	16	40	106 (30 inside the TT)	200
<b>Aim(s):</b>					
To enable the student to					
1. understand the organization and structure of the human nervous system in order to relate the functions and the basis of dysfunctions.					
2. understand the organization and structure of head and neck region with reference to the anatomical basis of the related diseases, diagnostics and management strategies.					
<b>Intended learning outcomes:</b>					
On successful completion of the course, student should be able to					
<ul style="list-style-type: none"> <li>• describe the development, structure and organization of the central and peripheral nervous systems.</li> <li>• identify gross and microstructure of the components of the nervous system.</li> <li>• apply the above knowledge to explain the anatomical basis of common clinical problems, diagnostic and managements strategies related to the nervous system.</li> <li>• describe the development, structure and organization of different regions of the head and neck.</li> <li>• identify the gross structures in the head and neck region and their relationships.</li> <li>• apply the above knowledge to explain the anatomical basis of common clinical problems, diagnostic and managements strategies related to head and neck.</li> </ul>					
<b>Course content/Course description:</b>					
Osteology, surface anatomy and regional anatomy of the head and neck and structure of nervous system. Development, histology, clinical correlation, Imaging and cross-sectional anatomy of nervous system and the head and neck region.					
<b>Teaching /Learning Methods:</b>					
Lectures, Tutorials/SGD, Practical Classes – prosection, dissections and histology					
<b>Assessment Strategy:</b>					
Continuous Assessment			End- Semester Assessment 100%		

Details:	MCQ 30%	SAQ4 0%	OSPE 1 (Projections) 10%	OSPE 2 Spots 15%	VIVA 5%
	25	3	10	20	

**Recommended Reading:**

1. Clinical Neuroanatomy by Richard S. Snell
2. Clinical Anatomy by regions – Richard S Snell
3. Last's Anatomy: Regional and Applied by C.S. Sinnatamby
4. Wheater's Functional Histology: A Text and Colour Atlas by B. Young et al
5. Grant's Dissector by P. W. Tank
6. Gray's Anatomy for students by Richard L. Drake
7. Langman's Medical Embryology by T.W. Sadler
8. Human embryology by MS Chandrasekara
9. Applied Anatomy for Students and Junior Doctors by Harold Ellis
10. Essential Clinical Anatomy by Keith L. Moore

<b>Semester</b>	Y2S1
<b>Course Code</b>	MED2112
<b>Course Name</b>	Neuro-endocrine Functions, Excretion and Reproduction
<b>Credit Value</b>	6 (Notional Hours: 300)
<b>Prerequisites</b>	None
<b>Core/Optional</b>	Core

Hourly Breakdown	Lectures	Tutorials/SGD	Practical	Independent Learning (*SDL inside the TT)	Notional
	74	06	24	196 (30 inside the TT)	300

**Aim(s):**

To enable the student to understand the functions of the nervous, endocrine, excretory and reproductive systems and understand the basis of disorders and their management strategies

**Intended learning outcomes:**

On successful completion of the course, students should be able to

- describe the functions of the nervous, endocrine, excretory and reproductive systems.
- perform clinical examination of the nervous system.
- assess the functions of the special senses.
- explain the physiological basis for the dysfunctions of the nervous, endocrine, excretory and reproductive systems.
- explain the basis for performing investigations, interpreting the findings and management strategies in relation to the nervous, endocrine, excretory and reproductive systems.

**Course content/Course description:**

Overview of the nervous system; sensory and motor systems; special senses; physiology of pain; cerebellum and motor coordination; basal ganglia; posture, balance; memory and limbic system; speech and language; sleep and arousal; physical examination of the nervous system; applied physiology of neurological disorders and investigations of neural functions; functional organization of the endocrine system; functions and dysfunctions of pituitary, hypothalamus; thyroid, parathyroid, adrenal, endocrine pancreas and other endocrine glands; functions of the kidneys and formation of urine; GFR and factors affecting GFR; renal clearance; counter current mechanisms; tubular functions; renal handling of water; role of the kidney in acid-base balance; other functions of the kidneys; micturition; derangement of renal functions; Spermatogenesis and male sex hormones; ovarian cycle and female sex hormones; puberty; sexuality and sexual response; fertilization; tubal functions and implantation; pregnancy; parturition; puerperium and lactation; psychosocial and psychological aspects of human sexuality; adolescence; pregnancy; parturition; puerperium; physiology of the foetus; contraceptives methods; applied physiology of acute and

chronic renal failure; acid-base and electrolyte disturbances.

**Teaching /Learning Methods:**

Lectures, Tutorials/SGD, Practical

**Assessment Strategy:** End- Semester Assessment

Details:	MCQ	SAQ/ Essay	OSPE
	40%	40%	20%

**Recommended Reading:**

1. Textbook of Medical Physiology by A.C. Guyton and J.E. Hall
2. Review of Medical Physiology by William F. Ganong

<b>Semester</b>	Y2S1				
<b>Course Code</b>	MED2113				
<b>Course Name</b>	Applied Biochemistry – II				
<b>Credit Value</b>	4 (Notional Hours: 200)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorials/SGD	Practical	Independent Learning (*SDL inside the TT)	Notional
	44	08	14	134 (30 inside the TT)	200
<b>Aim(s):</b>					
To provide a comprehensive knowledge on biochemistry of neuroendocrine, excretory and reproductive functions in relation to human body.					
<b>Intended learning outcomes:</b>					
On successful completion of the course, students should be able to					
<ul style="list-style-type: none"> <li>• describe the derangements seen in ageing and cancer.</li> <li>• explain the mechanisms of waste disposal, and significance of maintenance of cell environment.</li> <li>• describe the processes of bone growth and remodelling.</li> <li>• explain the biochemical aspects related to hormones, neurotransmitters and immune mediators, in relation to their functions.</li> <li>• describe the principles of molecular diagnostic methods and their applications in medicine.</li> <li>• interpret, analyse, apply, and communicate knowledge related to neuroendocrine, excretory and reproductive functions, and relevant biochemical tests.</li> </ul>					
<b>Course content/Course description:</b>					
DNA and cancer cell, Molecular methods in medicine and recombinant DNA technology, Bone growth and remodelling, Biochemistry of ageing, Functional organization of the endocrine system, Principles of assessment of endocrine function & dysfunction, Biochemistry of thyroid, parathyroid, adrenal, pancreatic, GI and reproductive hormones, effects of hormones on bone, glucose homeostasis, Derangement of glucose metabolism, Tests for glucose homeostasis, Thyroid function tests, Lipoproteins, Disorders of lipid metabolism and obesity, Inborn errors of metabolism, Neurotransmitters and related disorders, Maintenance of extracellular environment of brain, Disposal of cell waste, Nitrogenous waste (urea, uric acid & creatinine), Xenobiotics, Abnormal constituents of urine, Metabolic changes in Alcoholism, Basics of Immunology.					
<b>Teaching /Learning Methods:</b>					
Lectures, Tutorials/SGD, Practical Classes					

<b>Assessment Strategy:</b> End- Semester Assessment				
Details:	MCQ	SAQ	OSPE A	OSPE B
	30%	50%	10%	10%
<b>Recommended Reading:</b>				
<ol style="list-style-type: none"> <li>1. Harper's Illustrate Biochemistry by R.Murrayetal.</li> <li>2. Lippincott's Illustrated Reviews:Biochemistry by R.A.Harvey &amp;D.R.Ferrier</li> <li>3. Biochemistry by J.M.Berg, J.L.Tymoczko and L.Stryer.</li> <li>4. Biochemistry Made Easy by The Department of Biochemistry, Faculty of Medicine, University of Peradeniya</li> <li>5. Basic Medical Biochemistry- A clinical approach by M.A. Liberman &amp; A.D. Marks</li> </ol>				



<b>Semester</b>	Y2S1				
<b>Course Code</b>	MED2114				
<b>Course Name</b>	Personal and Professional Development				
<b>Credit Value</b>	1 (Notional 50)				
<b>Prerequisites</b>	None				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Seminars/ workshop	Tutorials	Independent Learning	Notional
	02	04	12	32 (10 inside the TT)	50
<b>Aim(s):</b>					
This course comprises 3 components aiming-					
<ol style="list-style-type: none"> <li>1. To provide students with a foundation to develop skills required for personal and professional development.</li> <li>2. To enhance the English language competence of the student in order to follow the MBBS course effectively.</li> <li>3. To introduce students to find appropriate electronic information through the web and the web-based databases on medical and health sciences and to conduct a web-based literature search to support their course work and research and to introduce students to common productivity software applications to facilitate learning.</li> </ol>					
<b>Intended learning outcomes:</b>					
<ol style="list-style-type: none"> <li>1. On successful completion student should be able to demonstrate awareness related to managing emotions, knowing when to suspect depression/anxiety, conflict resolution, dealing with interpersonal issues,</li> <li>2. On successful completion of the English course, the student should be able to- <ul style="list-style-type: none"> <li>• understand the concept of brainstorming and generate information through brainstorming</li> <li>• construct proper paragraphs with unity and coherence, containing a topic sentence, supporting details and a summary sentence.</li> <li>• develop a well-focused introduction and a strong conclusion and construct a unified essay individually.</li> <li>• use information from a given text to do a presentation (role play)</li> <li>• read and comprehend a given academic text and answer the questions based on the text</li> <li>• Listen to a given academic text and answer questions within the given time frame.</li> <li>• conduct a group presentation on any academic lecture/lesson of their choice.</li> </ul> </li> <li>3. Information searching <ol style="list-style-type: none"> <li>a) Identify different search techniques for information gathering</li> <li>b) Conduct literature search in pubmed database successfully.</li> <li>c) Learn how to use information ethically</li> </ol> </li> </ol>					

**Course content/Course description:**

1. Managing emotions when to suspect depression/anxiety, Encourage group presentations on Conflict resolution, relationships, group dynamics, Ethics of good citizenship, culture and diversity
2. English course- Essay writing, speech activities, listening and comprehension, group activities
  - a. Understand the need for information and identify different kinds of information in the web on medical sciences and evaluation of information.

**Teaching /Learning Methods:**

1. Lectures and workshop/seminars
2. English- tutorials

**Assessment Strategy:**

1. Reflective writing – Minimum of 200 words
2. English- Formative assessments for each of the course contents spread out over 3 terms, summative assessment at the end

**Recommended Texts:**

1. Soft skills solutions. Steppingstones to success. Ann Cross and Martha Lanaghan (2015)

<b>Semester</b>	Y2S1		
<b>Course Code</b>	MED2115		
<b>Course Name</b>	Integrated Applied Medicine 1C		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>	None		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	SGD/CCR	Independent Learning	Notional
	25	27 (10 inside the TT)	50
<p><b>Aim(s):</b>  <b>Early clinical exposure</b>                      Program objectives</p> <ul style="list-style-type: none"> <li>• Enable familiarization with the hospital set up.</li> <li>• Enable correlation of basic science input to patient presentations</li> <li>• Inculcate humane values into patient interaction- facilitate the development of human values / empathy etc.</li> <li>• Develop effective communication skills for a healthcare setting</li> </ul> <p><b>Clinical Cases of Relevance (CCR)- Objectives</b>                      To facilitate transition from basic sciences to hospital-based training by reinforcing relevance of basic sciences to clinical practice, facilitating clinically relevant basic science concepts and encouraging students to engage in active learning and facilitate critical thinking.</p> <p><b>Application of Basic science knowledge to essential clinical skills:</b>                      Lumbar Puncture                      Spinal Anesthesia Simulation                      Nerve conduction studies</p> <p><b>Intended learning outcomes:</b>                      Students should be able to                      Early clinical exposure</p> <ol style="list-style-type: none"> <li>1. Correlate the basic science inputs with common patient presentations</li> <li>2. Demonstrate human values and empathy</li> <li>3. Communication with patient reflect on the experience and learning from situations</li> </ol> <p>Clinical Cases of Relevance (CCR)                      apply the relevant anatomical, physiological and biochemical basis involved common diseases. diagnostic and managements strategies related to the nervous system and Head and Neck.</p>			

**Application of Basic science knowledge to essential clinical skills:**

Radiological investigations to correlate to anatomy

**Course content/Course description:**

Hospital Visits

Clinical Cases of Relevance (CCR)

Clinically relevant basic and applied science concepts of anemia, jaundice, oedema, hemorrhage, shock, dyspnoea, acute abdominal pain, chest pain, obesity, acid base and electrolyte disturbances, abdominal trauma, chest trauma, polyuria, cyanosis, disturbances in temperature regulation

**Application of Basic science knowledge to essential clinical skills:**

Radiological investigations to correlate to anatomy

**Teaching /Learning Methods:**

**Guided clinical exposure**

Visit to ETU/OPD/Surgical ward / medical ward /ICU/Pediatric ward - Talking to patients and bystanders

History taking - patient narratives of the presenting complain

CCR- Lectures, Student Assignments, Guided-Student Presentations

**Assessment Strategy:**

Portfolio

**Recommended Reading:**

1. Snell. R. S. Clinical Anatomy by Regions, Latest Edition
2. Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition
3. Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition
4. Colledge. N. R. et al. Davidson's Principles & Practice of Medicine. Latest Edition
5. Kumar P and Clark C. Clinical Medicine Latest Edition
6. Kumar V et al., Robbins Basic Pathology Latest Edition

<b>Semester</b>	Y2S2						
<b>Course Code</b>	MED2216						
<b>Course Name</b>	Microbiology 1						
<b>Credit Value</b>	2 (Notional Hours: 100)						
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS						
<b>Core/Optional</b>	Core						
<b>Hourly Breakdown</b>	<b>Lectures</b>	<b>SGD</b>	<b>Practical/ Demonstrations</b>	<b>Formative assessments MCQ/SAQ</b>	<b>Student Seminars/ presentations</b>	<b>Independent Learning (*SGL inside the TT)</b>	<b>Notional</b>
	<b>20</b>	<b>8</b>	<b>3*</b>	<b>4</b>	<b>5</b>	<b>50 (42+*8 SDL inside TT)</b>	<b>100</b>
			<b>(*+ 10 in TT)</b>				
<b>Aim(s):</b>							
<ul style="list-style-type: none"> <li>To provide knowledge on basic concepts in medical microbiology that are needed to understand the principles in diagnosis, management, and prevention of infectious diseases.</li> <li>To provide knowledge on systematic medical bacteriology, mycology and virology including the transmission, pathogenesis, principles of diagnosis, prevention, and treatment of infections caused by medically important bacteria, viruses and fungi.</li> </ul>							
<b>Intended learning outcomes (ILOs)</b>							
Students should be able to							
<ul style="list-style-type: none"> <li>Explain the concepts - normal flora/microbiome, reservoir, transmission, pathogenesis, aetiological diagnosis, and management of infectious diseases</li> <li>State the classification and general properties of bacteria, fungi and viruses of medical importance.</li> <li>Explain the mechanisms by which selected bacteria, fungi and viruses of medical importance cause disease in humans</li> <li>State the major clinical features of diseases caused by bacteria, fungi and viruses</li> <li>Apply the principles of diagnosis, treatment, and prevention to selected infections caused by bacteria, fungi and viruses</li> </ul>							
<b>Course content/Course description:</b>							
<b>General Microbiology:</b> Introduction to learning microbiology, correlating A/L knowledge with forward application to duties of a medical officer; Classification, visualization of micro-organisms and causation of diseases including Koch’s postulates and its limitations; Microbiome/normal flora; Pathogenesis of infections; Transmission of infections and prevention and control of infections; Introduction to standard precautions to include sterilization and disinfection and hand hygiene; Introduction to							

the concepts in diagnosing and managing infections.

**Bacteriology and mycology:** Introduction to medically important bacteria and fungi; Gram positive cocci to include staphylococci; streptococci and enterococci; mycobacteria; anaerobes including clostridia and actinomycetes; Gram negative bacilli to include enterobacterales, pseudomonads and other non-fermenters of clinical importance; spirochaetes to include leptospira and treponema: Other bacteria of medical importance to include Gram negative cocci including *Neisseria* and *Moraxella*; Gram positive bacilli including corynebacteria, bacillus, nocardia and listeria; Gram negative coccobacilli including haemophilus, bordetella, legionella, and brucella; vibrio, campylobacter and helicobacter; chlamydia, rickettsiae and mycoplasma; superficial, sub cutaneous and deep mycoses.

**Virology:** Introduction to medically important viruses; DNA viruses to include herpes viruses including varicella-zoster virus and others - hepatitis B virus and adenovirus. RNA viruses including RNA-based respiratory viruses - influenza viruses, human coronaviruses, and respiratory syncytial virus, etc.; RNA-based hepatitis viruses A, C, D, and E, Arboviruses including dengue and Japanese encephalitis virus and others; Other viruses of public health importance including gastroenteritis-causing viruses - rotavirus and others; enteroviruses including polio and others; HIV; human papilloma virus; Viruses of zoonotic importance - rabies virus and Hantaviruses.

**Teaching /Learning Methods:**

Lectures, small group discussions, student seminars, practicals, online discussions

**Assessment Strategy:** End- Semester Assessment

Details:	MCQ	SEQ
	40%	60%

**Recommended Reading:**

1. Jawetz, Melnick and Adelberg's Medical Microbiology, Recent Ed, Mc Graw Hill Press.
2. Mims C, Dockrell, Goering, RV, Roitt I, Wakelin D and Zukerman, M. Medical Microbiology – Recent Ed, Elsevier Mosby Publishers.
3. Lippincott® Illustrated Reviews: Microbiology, Recent Ed, Wolters Kluwer.
4. Medical Microbiology: A Guide to Microbial Infections: Pathogenesis, Immunity, Laboratory Investigation and Control, Recent ed, Churchill Livingstone.
5. David O White, Frank J. Fenner: Medical Virology, Revised in 2016 or more Recent ed. Elsevier Publishers.
6. Any other relevant Microbiology textbooks.

**Websites**

7. Websites of the World-Health Organization (WHO), Centers for Disease Control and Prevention (CDC), Epidemiology unit of Sri Lanka, and other relevant, authentic websites
8. Medscape online portal. <https://www.medscape.com/>
9. University of Adelaide portal for Mycology. <https://www.adelaide.edu.au/mycology/>

<b>Semester</b>	Y2S2				
<b>Course Code</b>	MED2217				
<b>Course Name</b>	Foundation in Pharmacology				
<b>Credit Value</b>	2 (Notional Hours: 100)				
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorial hrs.	SGD/Learning Assessment	Independent Learning (*SGL inside the TT)	Notional
	16	08	02	74(59 +15 SGL in TT)	100
<b>Aim(s):</b>					
<ul style="list-style-type: none"> <li>To enable the student to understand the basic principles related to drug therapy.</li> </ul>					
<b>Intended learning outcomes:</b>					
On successful completion of the course, students should be able to					
<ul style="list-style-type: none"> <li>describe the basic concepts in pharmacodynamics and explain their clinical significance</li> <li>describe the basic concepts in pharmacokinetics and explain their clinical significance</li> <li>explain how the autonomic function could be modified by drugs</li> <li>explain the basis of drug therapy in pain control</li> <li>explain the basis of drug therapy in neoplastic disease</li> </ul>					
<b>Course content/Course description: (Only Main topics, Subtopics)</b>					
Introduction to Pharmacology					
Pharmacodynamics					
Pharmacokinetics					
Adverse & toxic effects/Drug interaction					
Pharmacogenetics					
Measurement and monitoring drug effects					
Drug information					
Drug discovery and development					
Pain control					
Drug acting on the Autonomic Nervous System					
<b>Teaching /Learning Methods:</b> Lectures, SGD and SGL					
<b>Assessment Strategy:</b> End- Semester Assessment 100%					
Details:	MCQ			SAQ	
	50%			50%	
<b>Recommended Reading:</b>					
1. Clinical pharmacology by Bennett P.N., Brown M.J and Sharma P.					
2. Rang & Dale's Pharmacology by Rang H. P., Dale M. M., Ritter J.M, Flower R.J and Henderson G.					
3. Medical Pharmacology at a Glance by Neal M.J.					

<b>Semester</b>	Y2S2
<b>Course Code</b>	MED2218
<b>Course Name</b>	Pathology: Principles of Mechanisms of Diseases
<b>Credit Value</b>	3 (Notional Hours: 150)
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS
<b>Core/Optional</b>	Core

Hourly Breakdown	Lectures	SGD	Practical/ Museum Class	Student Semina rs/PBL	Independent learning (*SGL inside the TT)	Notional
	35	05	18	06	86 (71+ Self- study/Group work inside TT 15 HR s)	150

**Aim(s):**

- To introduce the students to general pathology concepts that describe the principles of mechanisms of diseases.

**Intended learning outcomes:**

On successful completion of the course, student should be able to

- Describe the general pathology processes responsible for diseases.
- Apply the general pathology knowledge to describe the occurrence of common diseases at a basic level.
- Analyze simple clinical situations and describe them with general pathology concepts at a basic level.

**Course content/Course description:**

- Introduction to pathology
- Introduction to immunology for Pathology
- Acute inflammation
- Chronic inflammation
- Cell response to injury and cell death
- Wound healing
- Cellular adaptations of growth and differentiation
- Cellular accumulations, pathologic calcification
- Amyloidosis and related diseases
- Congestion and oedema
- Thrombosis and Embolism
- Ischaemia and infarction
- Introduction to Neoplasia
- Spread of tumours and clinical aspects and tumour immunity
- Tumour immunity and tumour diagnostics
- Oncogenesis



- Aetiopathogenesis of shock
- Simple clinical case analysis with general Pathology concepts
- Introduction to basic haematological and biochemical investigations and specimen collection for these investigations

**Teaching /Learning Methods:**

Lectures, Practical classes, Guided SGL, Small group discussions, student seminars, problem-based learning, formatives

**Assessment Strategy:** End- Semester Assessment 100%

Details:	MCQ	SAQ
	50%	50%

**Recommended Reading:**

1. Robbins Pathologic basis of disease
2. Muir’s textbook of Pathology
3. General Pathology by Walter and Israel
4. Clinical Chemistry by William Marshall

<b>Semester</b>	Y2S2			
<b>Course Code</b>	MED2219			
<b>Course Name</b>	Research (Research methodology and medical statistics)			
<b>Credit Value</b>	3 (Notional Hours: 150)			
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Lectures/SGD	SGL	Independent Learning	Notional
	45	10	105 (95 +10)	150
<b>Aim(s):</b>				
<ol style="list-style-type: none"> <li>1. To provide the basic knowledge and skills in research methods to inspire students' critical thinking, analytical reasoning, and problem-solving skills to enable the students to engage in scientific research.</li> <li>2. To provide the fundamental knowledge and skills in medical statistics required to engage in healthcare-related research.</li> </ol>				
<b>Intended learning outcomes:</b>				
<u>Research Methodology</u>				
Students should be able to				
<ul style="list-style-type: none"> <li>• describe the basic concepts of evidence-based medicine</li> <li>• State the stages of the research process</li> <li>• compare and contrast a literature search and a literature review</li> <li>• demonstrate the knowledge required to formulate research objectives</li> <li>• describe the standard referencing methods used in medical writing</li> <li>• classify and describe various types of health-related research designs</li> <li>• discuss general principles of study design and its implications for valid inference</li> <li>• demonstrate knowledge of appropriate research methodologies and know when to use them</li> <li>• describe the data collection methods and how the quality of the collected data can be assured.</li> <li>• describe the measurements used in epidemiology</li> <li>• describe the errors in research</li> <li>• describe the terms "validity" and "reliability"</li> </ul>				
<u>Medical Statistics</u>				
Students should be able to				
<ul style="list-style-type: none"> <li>• state the basic statistical concepts and their application to healthcare research</li> <li>• describe various types of variables and data</li> <li>• compute summary statistics for a set of data</li> <li>• choose the appropriate visual display methods used in the presentation of data</li> </ul>				

- describe the common probability distributions (discrete probability distributions, normal distribution, t-distribution, chi-square distribution)
- calculate standard normal scores and resulting probabilities.
- calculate sample size and select an appropriate sample using a suitable sampling method
- discuss the conceptual basis of statistical inferences.
- describe the steps needed to be followed in hypothesis testing
- discuss the practical importance of key concepts of probability, inference, systematic error, sampling error, measurement error, hypothesis testing, type I and type II errors, and confidence limits
- interpret and explain a p-value
- identify and apply appropriate statistical methods to be applied for a given data set methods

**Course content/Course description:**

Introduction to medical research, formulation of a research question and objectives, conducting and writing a literature review, steps in writing a research proposal, ethical aspects of research, referencing, measurements used in epidemiology, different types of study designs used in medical research: descriptive, and analytical study designs (case reports, case series, ecological, cross-sectional, case-control, cohort, and experimental study designs), errors in research and how to overcome such errors, concepts of “validity” and “reliability”, scales of measurements, classification of variables, measures of central tendency, measures of location, measures of variation, laws of probability, normal distribution, Standard Normal Distribution, population, sample, sampling variation, standard error of the mean, sampling distribution of the mean, hypothesis testing, significance level, p-value, t distribution, chi-square distribution, parametric and non-parametric tests, sampling methods, correlation, and regression.

**Teaching /Learning Methods:**

Lectures, SGD, and quizzes

**Assessment Strategy:** End- Semester Assessment 100%

Details:	SAQ
	100%

**Recommended Reading:**

1. Hennekens CH, Buring JE. Epidemiology in medicine. Lippincott Williams & Wilkins; 1987.
2. Hully SB, Cummings SR, Browner WS, Grady DG, Newman TB. Designing Clinical Research. Philadelphia: Lippincott Williams, and Wilkens; 2007.
3. Beaglehole R, Bonita R, Kjellström T. Basic epidemiology. Geneva: World Health Organization; 1993
4. Campbell MJ. Statistics at square one: John Wiley & Sons; 2021.
5. Bland M. An introduction to medical statistics: Oxford university press; 2015.
6. Kirkwood BR, Sterne JA. Essential medical statistics: John Wiley & Sons; 2010.

<b>Semester</b>	Y2S2			
<b>Course Code</b>	MED2220			
<b>Course Name</b>	Personal and Professional Development 2 (Communication and professionalism)			
<b>Credit Value</b>	1 (Notional 50)			
<b>Prerequisites</b>	None			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Workshops	SDL/SGL	Independent Learning	Notional
	06	10	34	50
<b>Aim(s):</b>				
To provide the desired knowledge and understanding of concepts in effective communication and attributes of a medical professional				
<b>Intended learning outcomes:</b>				
At the end of this module, the students should be able to:				
<ol style="list-style-type: none"> <li>1. identify roles of a doctor and professional attributes/qualities (Being empathetic towards patients, importance of possessing adequate knowledge and skills, appreciate effective communication skills, displaying honesty and integrity, being respectful and polite)</li> <li>2. recognize the importance of the 'doctor-patient relationship' in all aspects of patient care</li> </ol>				
<b>Course content/Course description:</b>				
This course will contain a series of workshops and student-led seminars where students will be motivated to actively involved in identifying and commenting on the role and professional attributes of a doctor. Role playing in simulated environments on sensitive issues pertaining to communication in health system and observed history taking on simulated patients				
<b>Teaching /Learning Methods:</b>				
Workshops and student-led seminars/ movie clips/ Paper articles				
<b>Assessment Strategy:</b>				
Student portfolio Formative assessment- Certificate of completion of online modules				
<b>Recommended Reading:</b>				

<b>Semester</b>	Y2S2			
<b>Course Code</b>	MED2221			
<b>Course Name</b>	Integrated Applied Medicine 1D			
<b>Credit Value</b>	1 (Notional 50)			
<b>Prerequisites</b>	None			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Lectures/Student Guided-Student Presentations	SGL	Independent Learning	Notional
	15	10	25	50
<b>Aim(s):</b>				
<ol style="list-style-type: none"> <li>1. To facilitate transition from basic sciences to hospital-based training by reinforcing relevance of basic and applied sciences to clinical practice,</li> <li>2. To facilitate understanding of clinical medicine by reinforcing the clinically relevant basic and applied science concepts and encouraging students to engage in active learning and facilitate critical thinking.</li> </ol>				
<b>Intended learning outcomes:</b>				
At the end of this module, the students should be able to				
<ul style="list-style-type: none"> <li>• apply the relevant anatomical, physiological and biochemical basis involved in diseases.</li> <li>• explain the pathophysiological basis of disease.</li> <li>• apply the scientific principles in the management, prevention and legal aspects of diseases.</li> </ul>				
<b>Clinical Cases of Relevance (CCR)- Objectives</b>				
Facilitating understanding of clinical medicine and application of clinically relevant basic science concepts and encouraging students to engage in active learning and facilitate critical thinking.				
<b>Application of Applied science knowledge to essential clinical skills:</b>				
<b>Course content/Course description:</b>				
Clinically relevant basic and applied science concepts of Medical and surgical conditions discussed as CCR abdominal trauma, chest Trauma, sepsis, shock, Peripheral Vascular Diseases, Stroke, Oedema, disturbances in temperature regulation. Haemorrhage, Acute abdominal pain				
<b>Teaching /Learning Methods:</b>				
Lectures, Student Assignments, Guided-Student Presentations				
<b>Assessment Strategy:</b>				
Portfolio				

**Recommended Reading:**

1. Snell. R. S. Clinical Anatomy by Regions, Latest Edition
2. Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition
3. Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition
4. Colledge. N. R. et al. Davidson's Principles & Practice of Medicine. Latest Edition
5. Kumar P and Clark C. Clinical Medicine Latest Edition
6. Kumar V et al., Robbins Basic Pathology Latest Edition

<b>Semester</b>	Y3S1					
<b>Course Code</b>	MED3122					
<b>Course Name</b>	Immunology					
<b>Credit Value</b>	1 (Notional Hours: 100)					
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS					
<b>Core/Optional</b>	Core					
<b>Hourly Breakdown</b>	Lectures	SGD	Practical/ Demonstrations	Formative assessments MCQ/SAQ	Independent Learning	Notional
	13	2	0	0	33 (31+2SGL inside TT)	50
<b>Aim(s):</b>						
<ul style="list-style-type: none"> <li>To provide an application-based understanding of the human immune response in health and disease including protective responses in infection and vaccination, pathological responses of hypersensitivity, autoimmunity, and immunodeficiency, and the role of immune mechanisms in organ transplantation, immunodiagnostics, and immunotherapeutics.</li> </ul>						
<b>Intended learning outcomes (ILOs)</b>						
Students should be able to						
<ul style="list-style-type: none"> <li>Describe the basic immune response including its main structural and functional components with correlation to prior knowledge in anatomy, physiology, and pathology.</li> <li>Apply knowledge of basic immunobiology to analyze the immune responses seen in different types of infections and vaccination, diseases including type I hypersensitivity and anaphylaxis, type II, III, and IV hypersensitivity mediated diseases, autoimmunity, immunodeficiency, organ transplantation, immunodiagnostics, and immunotherapeutics to explain the underlying immunopathology, with the correlation of clinical presentation, principles of investigation and management where relevant.</li> </ul>						
<b>Course content/Course description:</b>						
<b>Immunology: Basic immunobiology:</b> Introduction to immunology; Innate immunity; MHC molecules and antigen presentation; Cell-mediated immunity; Humoral Immunity; <b>Applied Immunology:</b> Immune response to infections; Type I hypersensitivity including anaphylaxis; Type II, III, IV hypersensitivity; Autoimmunity; Immunodeficiency; Vaccines and immunotherapeutics; Organ transplantation; Immunodiagnostics and testing the Immune system;						

**Teaching /Learning Methods:**

Lectures, Small group discussions, Online videos, Online discussions

**Assessment Strategy:** End- Semester Assessment

Details:	MCQ 30 min	SAQ 40 min)
	50%	50%

**Recommended Reading:**

1. Basic Immunology by Abul K. Abbas and Andrew H. Lichtman, Saunders. Recent Ed.
2. Kuby Immunology by Richard A. Goldsby, Thomas J. Kindt and Barbara A. Osborne. Recent Ed.
3. Janeway's Immunobiology by Kenneth M. Murphy, Paul Travers, Mark Walport. Recent Ed
4. Fundamentals of the Immune Response. Champa N. Ratnatunga. Samudra Publishers 2021.
5. Any other standard textbook in immunology, microbiology, medicine, paediatrics.

**Websites**

1. Websites of the World-Health-Organization (WHO), Centers for Disease Control and Prevention (CDC), Epidemiology unit of Sri Lanka, and other relevant, authentic websites
2. Medscape online portal. <https://www.medscape.com/>
3. Immunopaedia online portal for immunology education. <https://www.immunopaedia.org.za/>



<b>Semester</b>	Y3S1			
<b>Course Code</b>	MED3123			
<b>Course Name</b>	Systematic Pharmacology – I			
<b>Credit Value</b>	2 (Notional Hours: 100)			
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Lectures	Tutorial	Independent Learning	Notional
	28	13	9 (57+ SGL/SDL 12 in the TT)	100
<b>Aim(s):</b>				
<ul style="list-style-type: none"> <li>To enable the student to understand the basic pharmacology of drugs used in cardiovascular, respiratory, bone/joint, fluid/electrolyte, endocrine and immune disorders.</li> </ul>				
<b>Intended learning outcomes:</b>				
On successful completion of the course, student should be able to				
<ul style="list-style-type: none"> <li>explain the basis of drug therapy in infections.</li> <li>describe the mechanism of action, pharmacokinetics, clinical uses, adverse effects and interactions of drugs used in cardiovascular diseases.</li> <li>describe the mechanism of action, pharmacokinetics, clinical uses, adverse effects and interactions of drugs used in respiratory diseases.</li> <li>demonstrate the ability to counsel patients regarding the use of inhaler devices.</li> <li>describe the mechanism of action, pharmacokinetics, clinical uses, adverse effects and interactions of drugs used in metabolic bone diseases and joint diseases.</li> <li>describe the mechanism of action, pharmacokinetics, clinical uses, adverse effects and interactions of drugs used in fluid and electrolyte disorders, endocrine disease and modulation of immunity.</li> <li>demonstrate the ability to counsel patients regarding insulin injection technique.</li> </ul>				
<b>Course content/Course description: (Only Main topics, Subtopics)</b>				
Antibacterial agents, Antiviral agents, Antimalarial agents, Antihelminthic agents, Antifungal agents				
Drugs used in asthma, COPD and pulmonary tuberculosis				
Drugs influencing vascular tone, myocardial contractility, cardiac arrhythmias, coagulation and Lipid regulating drugs				
Drugs influencing fluid volume status				
Drugs used in thyroid disease, diabetes				
Glucocorticoids, mineralocorticoids				
Immunomodulators				
Drugs used in metabolic bone disease and joint disease				

<b>Teaching /Learning Methods:</b>		
Lectures, SGD and SGL		
<b>Assessment Strategy:</b> End- Semester Assessment 100%		
Details:	MCQ	SAQ
	50%	50%
<b>Recommended Reading:</b>		
1. Clinical pharmacology by Bennett P.N., Brown M.J and Sharma P.		
2. Rang & Dale's Pharmacology by Rang H. P., Dale M. M., Ritter J.M, Flower R.J. and Henderson G.		
3. Medical Pharmacology at a Glance by Neal M.J.		

<b>Semester</b>	Y3S1					
<b>Course Code</b>	MED3124					
<b>Course Name</b>	Parasitology-1 Systematic Parasitology					
<b>Credit Value</b>	2 (Notional Hours: 100)					
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS					
<b>Core/Optional</b>	Core					
<b>Hourly Breakdown</b>	Lectures	SGD, tutorials, OSPE	Practical work (per student)	(Self-Directed Learning)	Independent Learning	Notional
	16	05	03	05	71 (66+ SGL/SDL 5hrs inside TT)	100
<b>Aim(s):</b>						
To provide knowledge on						
<ul style="list-style-type: none"> <li>systematic parasitology including the transmission, pathogenesis, principles of diagnosis, prevention and control of diseases caused by medically important parasites.</li> <li>medically important vectors and vector borne diseases.</li> <li>poisonous stings, identification of venomous snakes and envenomation due to snake bite.</li> </ul>						
<b>Intended learning outcomes:</b>						
On successful completion of the course, student should be able to						
<ul style="list-style-type: none"> <li>describe the general properties, classification and life cycle of parasites of medical importance.</li> <li>identify medically important parasites, vectors and venomous snakes.</li> <li>explain the mechanisms by which parasites cause disease in humans.</li> <li>describe the major clinical features of diseases caused by parasites in humans. <ul style="list-style-type: none"> <li>evaluate the methods of diagnosis including collection and transport of appropriate specimens/samples for aetiological diagnosis of parasitic diseases.</li> <li>relate the life cycle, source and mode of transmission to the prevention and control of disease.</li> </ul> </li> <li>describe the clinical features of envenomation, first aid and prevention of snake bites.</li> <li>describe the clinical features of poisonous stings and first aid.</li> </ul>						
<b>Course content/Course description:</b>						
Overview of medically important parasites and vectors, poisonous stings and envenomation in relation to human health.						
Introduction to medically important parasites and inter-relationships among hosts, vectors and parasites; malaria parasites; intestinal protozoa – amoebae and ciliates;						

intestinal and urogenital protozoa - *Giardia*, cryptosporidia, and *Trichomonas*; haemoflagellates; tissue coccidia; helminths- small and large intestinal nematodes; tissue nematodes; cestodes and trematodes; arthropods of medical importance; parasitic zoonoses; visceral and cutaneous larva migrans; poisonous stings, venomous snakes and envenomation.

**Practical procedures:** Identification of medically important parasites, vectors, ectoparasites and venomous snakes.

**Teaching /Learning Methods:**

Lectures, small group discussions, practical work, videos, case reports and research articles uploaded to LMS

**Assessment Strategy:** End- Semester Assessment

Details:

MCQ

SAQ

OSPE

**Recommended Reading:**

1. Manson's Tropical Diseases -Recent Ed.
2. World Health Organization website: <https://www.who.int/>
3. Centers for Disease Control and prevention website: <https://www.cdc.gov/>

<b>Semester</b>	Y3S1
<b>Course Code</b>	MED3125
<b>Course Name</b>	Pathology: Mechanisms of Diseases I
<b>Credit Value</b>	4 (Notional Hours: 200)
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS and Principles of Mechanisms of Diseases
<b>Core/Optional</b>	Core

	Lectures	SGD	Practical/ Museum Class	Student Seminars/PBL	Independent Learning	Notional
<b>Hourly Breakdown</b>	40	05	15	06	134 (119 +15 Self- study/ Group work inside the TT)	200

**Aim(s):**

To introduce the students to pathogenesis of diseases and pathological basis of their clinical outcomes, complications and investigations.

**Intended learning outcomes:**

On successful completion of the course, student should be able to

- describe the pathogenesis of diseases of respiratory system, cardiovascular system, endocrine system, skeletal system, lympho-reticular system.
- apply the general pathology knowledge to describe the mechanisms of below mentioned diseases.
- describe the Pathological basis of clinical outcomes and complications of the below mentioned diseases.
- describe the pathological basis and outcomes of basic investigations performed in the diagnosis of below mentioned diseases.
- analyze simple clinical scenarios and describe the pathological basis of clinical outcomes and complications of the below mentioned diseases.

**Course content/Course description:** (Only Main topics, Subtopics)

Pathology

Respiration

- Pathology and Pathogenesis of infective lung diseases
- Pathology of obstructive airway diseases and restrictive lung diseases (interstitial and industrial)

- Neoplasia (lung, pleura and mediastinum)
- Clinico-pathological and radio- pathological correlations of lung diseases

#### Cardio-vascular

- Dyslipidaemias, Atherosclerosis and Peripheral Vascular Disease
- Hypertension and its complications
- Vasculitis
- aneurysms and dissection
- Ischaemic heart disease
- Investigation of cardio-vascular diseases
- Valvular heart diseases and infective endocarditis
- Cardiomyopathies, myocarditis and pericardial diseases
- Mechanisms and manifestations of heart failure
- Clinico-pathological correlations of heart diseases

#### Endocrine

- Obesity and Metabolic syndrome
- Aetiopathogenesis and classification of Diabetes
- Long-term and acute diabetic complications

#### **Course Content:***(Only Main topics, Subtopics)*

#### Pathology Respiration

- Pathology and Pathogenesis of infective lung diseases
- Pathology of obstructive airway diseases and restrictive lung diseases (interstitial and industrial)
- Neoplasia (lung, pleura and mediastinum)
- Clinico-pathological and radio- pathological correlations of lung diseases

#### Cardio-vascular

- Dyslipidaemias, Atherosclerosis and Peripheral Vascular Disease
- Hypertension and its complications
- Vasculitis
- aneurysms and dissection
- Ischaemic heart disease
- Investigation of cardio-vascular diseases
- Valvular heart diseases and infective endocarditis
- Cardiomyopathies, myocarditis and pericardial diseases
- Mechanisms and manifestations of heart failure
- Clinico-pathological correlations of heart diseases

**Endocrine**

- Obesity and Metabolic syndrome
- Aetiopathogenesis and classification of Diabetes
- Long-term and acute diabetic complications
- Diagnosis and monitoring diabetes control
- Thyroid diseases and investigations
- Other Common endocrine diseases and their basic investigations
- Clinico-pathological and Radiological - pathological correlations in endocrine disorders

**Locomotion**

- Infections of bone
- Fracture healing
- Metabolic and remodeling bone diseases
- Neoplasms (bone and soft tissue)
- Joint Diseases
- Connective tissue diseases
- Radiological - pathological correlations in Bone diseases
- Diseases of lympho-reticular system (lymph nodes and spleen)

**Teaching /Learning Methods:**

Lectures, Practical classes/Guided SGL, Small group discussions, Problem based Learning, Seminars, assignments, Formatives

**Assessment Strategy:** End- Semester Assessment 100%

Details:	MCQ 40%	SEQ/Essay 50%	OSPE 10%
	90 minutes	90 minutes	30 minutes

**Recommended Reading:**

1. Robbins Pathologic basis of disease
2. Muir’s textbook of Pathology
3. Clinical Chemistry by William Marshall

<b>Semester</b>	Y3S1				
<b>Course Code</b>	MED3126				
<b>Course Name</b>	Principles of forensic Medicine and medical ethics				
<b>Credit Value</b>	3 (Notional Hours: 150)				
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorials	Practical demonstrations	Independent Learning	Notional
	40	2	3	105 (95 +10 SDL in TT)	150
<b>Aim(s):</b>	To identify and document medico-legal issues related to death and trauma for legal purposes.				
<b>Intended learning outcomes:</b>	<p>On successful completion of the course, student should be able to</p> <ul style="list-style-type: none"> <li>• Construct a definition for death appreciating the different types of death and conditions simulating death.</li> <li>• Interpret changes that occur and are introduced after death while appreciating the medico legal importance of death and its changes.</li> <li>• Describe the procedure to be followed in the disposal of a dead body, legally, in cases of death under different circumstances.</li> <li>• Evaluate the role of the medical officer in solving crimes.</li> <li>• Interpret injuries and their consequences that occur as a result of trauma for medico legal purposes.</li> <li>• Apply principles of physiology and pathology to determine the response of the body to trauma.</li> <li>• Identify the roles and responsibilities of a doctor in maintaining relationships and formulate a code of conduct for doctors in medical practice considering the different professional relationships.</li> <li>• Describe the role of the medical officer in conducting scene visits/exhumations, and issuing certificates.</li> <li>• Apply the principles of ethics, rights, and law to solve problems that arise during medical practice and research considering national and international codes and guidelines.</li> <li>• Justify the importance of maintaining and presenting accurate, legible, and complete medico legal records and providing oral evidence to the court.</li> <li>• Interpret findings which help in the identification of individuals.</li> </ul>				
<b>Course content/Course description:</b>	:(Only Main topics, Subtopics)				
	Introduction to Forensic Medicine - branches, scope, and the need, Investigation of crimes, Death and death-related issues, Disposal of a dead body and inquest, Changes				



after death and estimation of time since death, Post mortem artefacts, Basic injuries, Time of injury, Patterns of injuries, Classification of injuries for legal purposes, History taking and examination of medico-legal cases, Introduction to autopsy and techniques, Negative autopsy, Introduction to cause of death, mode of death and circumstances of death, Law of murder and homicide, Roles and responsibilities of a doctor in maintaining relationships, Code of conduct for doctors, Health care rights, Burns / Injuries by physical and chemical agents, Pathology and pathophysiology of trauma, Research ethics, Medical ethics - Introduction to basic principles and ethical concepts, Legal system of Sri Lanka with special reference to practice of medicine, Regional injuries (thoracic, abdominal, head, neck, face, teeth and spinal cord), Identification for medico legal purposes, Exhumation and excavation, Scene of crime, Court procedure and expert testimony in courts, Testimonial capacity, Testamentary capacity, Fitness to plead, Dying declaration, The role of a medico legal officer at a scene of mass disaster, Trace evidence, Asphyxial deaths (smothering, suffocation, choking, gagging, strangulation, hanging, traumatic, postural and sexual asphyxia)

**Teaching /Learning Methods:**

Lectures, seminars, demonstrations, tutorials

**Assessment Strategy:** End- Semester Assessment 100%

Details:	MCQ (1 Hr)	SAQ (1Hr)	Essay (1Hr)
	30 %	40 %	30 %

**Recommended Reading:**

1. Shepherd R. Simpson’s Forensic Medicine. Oxford University Press, London
2. Fisher RS, Spitz WU. Medicolegal investigation of death. Charles C Thomas USA
3. Knight B, Saukko P. Knight’s Forensic Pathology. Oxford University Press. London
4. Gordon I, Shapiro HA, Berson SD. Forensic Medicine. A guide to principles. Churchill Livingstone. New York
5. Fisher RS, Petty CS. Forensic Pathology. A handbook for pathologists. Castle house publications. London
6. Mason JK, Purdue BN. The pathology of trauma. Oxford University Press. London
7. Mant AK. Taylor’s principles and practice of Medical jurisprudence. Churchill Livingstone. New Delhi
8. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.1-Medicolegal aspects of injuries. Colombo: Primal printers.
9. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.2-Forensic pathology and Forensic Science. Colombo: Primal printers.

<b>Semester</b>	Y3S1		
<b>Course Code</b>	MED3127		
<b>Course Name</b>	Personal and Professional Development		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>	None		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	<b>Workshops</b>	<b>Independent Learning</b>	<b>Notional</b>
	06	39 (33 +6 SGL inside TT)	50
<b>Aim(s):</b>			
1. To provide the desired knowledge and understanding of concepts in effective communication and attributes of a medical professional			
<b>Intended learning outcomes:</b>			
At the end of this module, the students should be able to:			
1. communicate effectively with patient, families, colleagues, teachers and hospital teams.			
2. communicate on health-related or medical matters with the public through media and social media			
<b>Course content/Course description:</b>			
This course will contain a series of workshops and student-led seminars where students will be role playing in simulated environments with different HCW teams on sensitive issues pertaining to communication in health system and observed history taking on simulated patients			
<b>Teaching /Learning Methods:</b>			
Workshops and student-led seminars/movie clips			
Online modules			
<b>Assessment Strategy:</b>			
Student portfolio			
Formative assessment- Certificate of completion of online modules			
<b>Recommended Reading:</b>			

<b>Semester</b>	Y3S1			
<b>Course Code</b>	MED3128			
<b>Course Name</b>	Integrated Applied Medicine 1 E			
<b>Credit Value</b>	1 (Notional 50)			
<b>Prerequisites</b>	None			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Lectures/Student Guided-Student Presentations	SGL	Independent Learning	Notional
	15	15	35(25+10 hrs of SGL inside TT)	50
<b>Aim(s):</b>				
<ol style="list-style-type: none"> <li>To facilitate transition from basic sciences to hospital-based training by reinforcing relevance of basic sciences to clinical practice, facilitating recall of clinically relevant basic science concepts and encouraging students to engage in active learning and facilitate critical thinking.</li> <li>To facilitate understanding of clinical medicine by reinforcing the clinically relevant basic and applied science concepts and encouraging students to engage in active learning and facilitate critical thinking.</li> </ol>				
<b>Intended learning outcomes:</b>				
At the end of this module, the students should be able to				
<ul style="list-style-type: none"> <li>apply the relevant anatomical, physiological and biochemical basis involved in diseases.</li> <li>explain the pathophysiological basis of disease.</li> <li>apply the scientific principles in the management, prevention and legal aspects of diseases.</li> </ul>				
<b>Clinical Cases of Relevance (CCR)- Objectives</b>				
To facilitate understanding of clinical medicine by reinforcing the clinically relevant basic and applied science concepts and encouraging students to engage in active learning and facilitate critical thinking.				
<b>Application of Basic science knowledge to essential clinical skills:</b>				
Arteria Blood Gasses				
<b>Course content/Course description:</b>				
Clinically relevant basic and applied science concepts of Medical and surgical conditions will be discussed as CCR				
COPD and Asthma, Pneumonia, Cyanosis, Hypertension, Chest pain, Ischemic Heart Disease, Heart Failure, Obesity, Dyspnoea, Oliguria, Polyuria				
<b>Teaching /Learning Methods:</b>				
Lectures, Student Assignments, Guided-Student Presentations				

**Assessment Strategy:**

Portfolio

**Recommended Reading:**

1. Snell. R. S. Clinical Anatomy by Regions, Latest Edition
2. Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition
3. Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition
4. Colledge. N. R. et al. Davidson's Principles & Practice of Medicine. Latest Edition
5. Kumar P and Clark C. Clinical Medicine Latest Edition
6. Kumar V et al., Robbins Basic Pathology Latest Edition

<b>Semester</b>	Y3S2, Y4S1, Y4S2			
<b>Course Code</b>	MED 3126			
<b>Course Name</b>	Research (Proposal writing)			
<b>Credit Value</b>	4			
<b>Prerequisites</b>				
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown (4 weeks of block release)</b>		SGL	Independent Learning	Notional
	Y3S1	40	80	400
	Y4S1	80	80	
	Y4S2	40	80	
		160	240	
<b>Aim(s):</b> To empower all students to find their passion and purpose through transformative research, creativity, critical thinking, and scholarly experiences				
<b>Intended learning outcomes:</b> Students should be able to				
<ul style="list-style-type: none"> <li>• articulate a clear research question or problem and formulate research objectives</li> <li>• conduct a scientific literature search and a literature review on a chosen research topic</li> <li>• demonstrate the knowledge and skills in choosing appropriate research methods for a given research topic</li> <li>• calculate sample size and select an appropriate sample using a suitable sampling method</li> <li>• formulate study instruments</li> <li>• decide what statistical technique will provide the best answer to a given research question</li> <li>• understand the ethical aspects of medical research and apply for ethical clearance</li> <li>• write in-text citations and create an end-text bibliography</li> <li>• write a research proposal</li> <li>• identify and apply appropriate statistical methods (descriptive statistics, inferential statistical methods like applying Chi-square, t-test, etc.)</li> <li>• interpret research results and make scientific conclusions</li> <li>• identify the limitations of the study</li> <li>• give recommendations based on the conclusions</li> <li>• write a research report</li> <li>• demonstrate academic writing skills</li> </ul>				
<b>Course content/Course description:</b> Translating health-related problems into researchable objectives, writing a research proposal, applying for ethical clearance, data collection and maintaining the quality of				

collected data, using appropriate statistical software for analysis of the collected data, interpreting the results and writing a discussion, and making conclusions and recommendations based on the results.

**Teaching /Learning Methods:**

research project work, presentation of the results at a scientific forum

**Assessment Strategy:**

Process evaluation through the supervisor’s assessment, research report evaluation, and viva voce examination on the research project at the 3rd MBBS Part-2

60%

**Recommended Reading:**

1. Hennekens CH, Buring JE. Epidemiology in medicine. Lippincott Williams & Wilkins; 1987.
2. Hully SB, Cummings SR, Browner WS, Grady DG, Newman TB. Designing Clinical Research. Philadelphia: Lippincott Williams, and Wilkens; 2007.
3. Beaglehole R, Bonita R, Kjellström T. Basic epidemiology. Geneva: World Health Organization; 1993
4. Campbell MJ. Statistics at square one: John Wiley & Sons; 2021.
5. Bland M. An introduction to medical statistics: Oxford university press; 2015.
6. Kirkwood BR, Sterne JA. Essential medical statistics: John Wiley & Sons; 2010.

<b>Semester</b>	Y3S2
<b>Course Code</b>	MED3230
<b>Course Name</b>	Microbiology 2
<b>Credit Value</b>	2 (Notional Hours: 100)
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS
<b>Core/Optional</b>	Core

Hourly Breakdown	Lectures	SGD	Practical/ Demonstrations	Formative assessments MCQ/SAQ	Student Seminars/ presentations	Independent Learning	Notional
	21	6	2*	03	04	58 (53+5 in the SDL inside TT)	100
		*+6 TT)					

**Aim(s):**

- To provide an application-based knowledge on infectious diseases affecting the various systems of the body based on basic microbiological principles (including transmission and pathogenesis) to enable aetiological diagnosis, management, and prevention of infectious diseases of local and global significance.

**Intended learning outcomes:**

On successful completion of the course, student should be able to

- classify infections affecting different organ systems/ body tissues while integrating Microbiology 1, Immunology and Pathology to explain the pathogenesis of diseases.
- discuss the risk factors / predisposing factors for infections affecting different organ systems and correlate the underlying pathology to the clinical presentation
- evaluate methods of microbiological diagnosis of infections/ diseases affecting different organ systems/body sites to include specimen collection and transportation
- interpret microbiological laboratory investigation reports for common/ important infections.
- strategize methods of antimicrobial treatment and prevention of infections/ diseases affecting different organ systems/body sites, integrating knowledge from Pharmacology and Community Medicine.
- evaluate the importance of infection prevention and control measures for individual patients/groups, units, and institutions.
- perform tasks related to infection prevention and control in health care setting such as hand hygiene, appropriate wearing of masks and be aware of the need for proper donning and doffing of other personal protective equipment understanding the underlying scientific basis.

**Course content/Course Description:**

The pathogenesis of infections affecting different organ systems/body sites, aetiological diagnosis, antimicrobial treatment, and prevention of those as applied to -urinary tract infections; skin and soft tissue infections including muscular skeletal infections; respiratory tract infections; cardiovascular infections and sepsis; gastrointestinal tract infections to include infective diarrhea (viral and bacterial), food poisoning; central nervous system infections; infections in pregnancy, foetus and neonate (bacterial, viral); sexually transmitted infections; hospital-acquired and health care-associated infections, infections in compromised hosts, infectious causes of acute undifferentiated fevers and pyrexia of unknown origin

Collection and transport of specimens for common microbiological investigations; interpretation of results of common/important infections; non-culture-based diagnostic tests, the role of the microbiology laboratory in diagnosis and management of infections.

Emerging and re-emerging infections; zoonotic diseases of importance in Sri Lanka and in the world.

Hospital acquired infections and prevention of hospital acquired infections to include standard precautions.

**Teaching /Learning Methods:**

Lectures, Small group discussions, PBL sessions, Practicals, Online discussion,

**Assessment Strategy:** End- Semester Assessment

Details:	Details: MCQ	Details: SEQ	Details: OSPE
	20-T/ Type	3x 20 min (1 Viro +1 combine +1 applied immune)	10 projected (5 min Each )

**Recommended Reading:**

1. Mims C, Dockrell, Goering, RV, Roitt I, Wakelin D and Zukerman, M. Medical Microbiology – Recent Ed, Elsevier Mosby Publishers.
2. Medical Microbiology: A Guide to Microbial Infections: Pathogenesis, Immunity, Laboratory Investigation and Control, Recent ed, Churchill Livingstone.
3. National and International Guidelines on Antimicrobial therapeutics
4. Parveen Kumar, Michael L Clark, Elsevier Health Sciences, Recent Ed.
5. Clinical Microbiology Made Ridiculously Simple. Mark Gladwin and Bill Trattler, Recent Ed.



<b>Semester</b>	Y3S2					
<b>Course Code</b>	MED3231					
<b>Course Name</b>	Parasitology-2					
<b>Credit Value</b>	1 (Notional Hours: 50)					
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS					
<b>Core/Optional</b>	Core					
<b>Hourly Breakdown</b>	Lectures	SGD, tutorials	Practical work (per student)	Seminar	Independent Learning	Notional
	05	07	01	2 hours + 3 hours prep time= 5 hours	35 (30 +5 in the SDL inside TT)	50
<p><b>Aim(s):</b>                  To provide knowledge on principles underlying</p> <ul style="list-style-type: none"> <li>• Clinical and laboratory diagnosis of parasitic diseases</li> <li>• Management of parasitic diseases including infections in the immunocompromised host</li> </ul>						
<p><b>Intended learning outcomes:</b>                  On successful completion of the course, student should be able to</p> <ul style="list-style-type: none"> <li>• Outline the principles of management of parasitic diseases involving major organ systems.</li> <li>• Discuss the clinical disease process and management of parasitic infections in the immunocompromised host.</li> <li>• Describe pet, farm and wild animal associated parasitic zoonoses.</li> <li>• Describe the prevention and control of parasitic diseases using a multi-disciplinary (one health) approach.</li> <li>• Outline the factors influencing the incidence of emerging and reemerging parasitic diseases</li> </ul>						
<p><b>Course content/Course description:</b>                  Infections in immunocompromised patients, pet, farm and wild animal associated zoonoses, vector borne parasitic diseases, parasitic infections of the central nervous system, gastrointestinal tract and other internal organs including skin and eye, emerging and re-emerging parasitic diseases, one health approach to prevention and control of parasitic diseases</p> <p><b>Practical procedures:</b> Laboratory diagnosis of parasitic diseases.</p>						

**Teaching /Learning Methods:**

Lectures, small group discussions, practical work, seminar and videos, case reports and research articles uploaded to LMS

**Assessment Strategy:**

Details:	MCQ (60mins)	SAQ (60mins)	OSPE
	35%	50%	15% (CAT)

**Recommended Reading:**

1. Manson’s Tropical Diseases -Recent Ed.
2. World Health Organization website: <https://www.who.int/>
3. Centers for Disease Control and prevention website: <https://www.cdc.gov/>

<b>Semester</b>	Y3S2			
<b>Course Code</b>	MED3232			
<b>Course Name</b>	Systemic Pharmacology – II			
<b>Credit Value</b>	2 (Notional Hours: 100)			
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Lectures	Tutorial hrs.	Independent Learning	Notional
	17	08	75 (65 +10 SGL/SDL inside TT)	100
<b>Aim(s):</b> To enable the student to understand the basic principles related to drug therapy.				
<b>Intended learning outcomes:</b> On successful completion of the course, student should be able to				
<ul style="list-style-type: none"> <li>• describe the mechanism of action, pharmacokinetics, clinical uses, adverse effects and interactions of drugs used in diseases of the nervous system</li> <li>• describe the mechanism of action, pharmacokinetics, clinical uses, adverse effects and interactions of drugs used in diseases of the gastrointestinal system</li> <li>• describe the mechanism of action, pharmacokinetics, clinical uses, adverse effects and interactions of drugs used in diseases of the genitourinary system.</li> </ul>				
<b>Course content/Course description:</b> ( <i>Only Main topics, Subtopics</i> )				
<ul style="list-style-type: none"> <li>• Drugs used in movement disorders, epilepsy, migraine, psychosis, mood disorders and dementia</li> <li>• Hypnotics/sedatives, general anaesthetics, local anaesthetics</li> <li>• Drugs acting on neuromuscular junction</li> <li>• Substance use disorders</li> <li>• Drugs used in vomiting, diarrhoea, constipation, peptic ulcer disease, gastro esophageal reflux and inflammatory bowel disease</li> <li>• Drugs modulating oestrogen, progestogen and androgen activity</li> <li>• Drugs acting on the myometrium and urinary tract</li> </ul>				
<b>Teaching /Learning Methods:</b> Lectures, SGDs				
<b>Assessment Strategy:</b> 3 <sup>rd</sup> MBBS part 1				
<b>Recommended Reading:</b>				
<ol style="list-style-type: none"> <li>1. Clinical pharmacology by Bennett P.N., Brown M.J and Sharma P.</li> <li>2. Rang &amp; Dale's Pharmacology by Rang H. P., Dale M. M., Ritter J.M, Flower R.J. and Henderson G.</li> <li>3. Medical Pharmacology at a Glance by Neal M.J.</li> </ol>				

<b>Semester</b>	Y3S2					
<b>Course Code</b>	MED3233					
<b>Course Name</b>	Pathology: Mechanisms of Diseases II					
<b>Credit Value</b>	4 (Notional Hours: 200)					
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS and Principles of Mechanisms of Diseases					
<b>Core/Optional</b>	Core					
<b>Hourly Breakdown</b>	Lectures	SGD	Practical/Museum Class	Student Seminars/PBL	Independent Learning	Notional
	47	05	12	06	130 (115+ 15 Self-study/ Group work inside the TT)	200
<b>Aim(s):</b>						
To introduce the students to pathogenesis of diseases and pathological basis of their clinical outcomes, complications and investigations.						
<b>Intended learning outcomes:</b>						
On successful completion of the course, student should be able to						
<ul style="list-style-type: none"> <li>describe the pathogenesis of diseases of gastro-intestinal system, pancreatico-biliary system, central nervous system, urinary system, female and male reproductive system and breast.</li> <li>apply the general pathology knowledge to describe the mechanisms of below mentioned diseases.</li> <li>describe the pathological basis of clinical outcomes and complications of the below mentioned diseases.</li> <li>describe the pathological basis and outcomes of basic investigations performed in the diagnosis of below mentioned diseases.</li> <li>analyze simple clinical scenarios and describe the pathological basis of clinical outcomes and complications of the below mentioned diseases.</li> </ul>						
<b>Course content/Course description: (Only Main topics, Subtopics)</b>						
Pathology GIT						
<ul style="list-style-type: none"> <li>Oesophageal diseases</li> <li>Gastritis and Peptic ulcer disease and gastric tumours</li> <li>Malabsorption</li> <li>Diseases of the small intestine and appendix</li> <li>Inflammatory Bowel disease</li> </ul>						

- Colonic tumours

#### Pancreato-biliary

- Hepatitis
- Metabolic liver diseases
- Cirrhosis and liver failure
- Liver tumours
- Clinico-pathological correlations of liver diseases
- Pancreatic diseases
- Diseases of the gall bladder and biliary tract
- Radiological - pathological correlations of GI and Pancreato-biliary diseases
- Investigations of liver and pancreato-biliary diseases

#### CNS

- Cerebrovascular diseases
- CNS infections
- Space-occupying lesions including CNS tumours
- Raised intracranial pressure
- Neuro-degenerative diseases
- Clinico-pathological correlations of CNS diseases
- Radiological - pathological correlations in CNS diseases
- Breast Diseases (Pathology-surgery and Radiology seminar)

#### Urinary system

- Glomerular diseases
- Renal interstitial diseases
- Infections of urinary tract
- Renal manifestations of systemic diseases
- Urolithiasis
- Tumours of urinary tract
- Acute kidney injury and CRF
- Investigation of renal diseases
- Clinico-pathological correlation of renal diseases

#### Female and male reproductive system and lymphoreticular system

- Diseases of the cervix and vagina
- Diseases of the uterine corpus
- Gestation related diseases
- Diseases of the ovaries and tubes
- Clinico-pathological correlations of gynaecological diseases
- Diseases of the prostate
- Other diseases of the male reproductive system
- Radiological - pathological correlations of diseases of female and male reproductive systems and urinary system

**Teaching /Learning Methods:**

Lectures, Practical classes/Guided SGL, Small group discussions, Problem based Learning, student Seminars, assignments, Formatives

**Assessment Strategy:** End- Semester Assessment 100%

Details:	MCQ 40%	SEQ/Essay 50%	OSPE 10%
	90 minutes	90 minutes	30 minutes

**Recommended Reading:**

1. Robbins Pathologic basis of disease
2. Muir's textbook of Pathology
3. Clinical Chemistry by William Marshall

<b>Semester</b>	Y3S2				
<b>Course Code</b>	MED3234				
<b>Course Name</b>	Community Medicine I Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) Primary Health care, Occupational Health, Demography and Oral Health, Disability				
<b>Credit Value</b>	3 (Notional Hours:150)				
<b>Prerequisites</b>					
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown (RMNCAH)</b>	Lectures	SGD	Tutorial	Independent Learning & Assessment	Notional
	20	3	02	25	50
<b>Hourly Breakdown</b> Primary Health care, Occupational Health, Demography and Oral Health, Disability	28	02	-	70 (67 + 3SGL inside TT)	100
<b>Aim(s):</b> RMNCAH To introduce the students to the Reproductive, Maternal, Newborn, Child, and Adolescent Health (RMNCAH) program in Sri Lanka					
<b>Aim(s):</b> Primary Health care, Occupational Health, Demography and Oral Health, Disability To introduce the students to Demography, Occupational health, and Oral Health					
<b>Intended learning outcomes:</b> RMNCAH On successful completion of the course, student should be able to					
<ul style="list-style-type: none"> <li>describe the organizational structure and service delivery mechanism of maternal and child health services in Sri Lanka</li> <li>describe the concept of safe motherhood and the life cycle approach to reproductive health</li> <li>discuss the importance of the provision of maternal care at different stages of pregnancy</li> <li>describe the maternal death investigation process and prevention of maternal deaths, emphasizing its impact on family and community</li> </ul>					

- describe the concepts of "Early Childhood Care and Development."
- describe the immunization programme in relation to maternal and child health programme in Sri Lanka
- explain the principles of family planning counselling based on the biological and social factors related to family planning
- describe the Sri Lankan school health programme, the concept of health-promoting school
- describe the adolescent health programme in Sri Lanka.
- describe the reproductive health services included in the RMNCAH programme in Sri Lanka
- discuss the current status and future challenges of the maternal and child health programme in Sri Lanka
- describe the reproductive health management information system (RHMIS) in Sri Lanka

**Intended learning outcomes:** Primary Health care, Occupational Health, Demography and Oral Health, Disability

On successful completion of the course, student should be able to  
Primary health care

- explain principles of primary health care and apply them to Sri Lankan context

Occupational health

- explain the relevance and the scope of occupational health services.

Demography

- calculate and interpret demographic indicators and describe how demographic patterns affect health

Oral health

- describe available strategies for the prevention and control of dental and oral diseases

Disability

- be able to describe control, prevention of disabilities and services available for the disabled

**Course content/Course description:** RMNCAH

Introduction to MOH area, Introduction to Family Health Program in Sri Lanka, Life cycle approach and Safe Motherhood concepts, Preconception care and well women care, Antenatal and natal care, Postnatal care, Breastfeeding, Maternal mortality and morbidity, Newborn, Infant and child mortality and morbidity, Family Planning, Reproductive health management information system, EPI Program in Sri Lanka, School



Health Program, Early Childhood Care and Development (ECCD), Sexual & Reproductive Health (SRH) in Crises, Adolescent Health

**Course content/Course description:** Primary Health care, Occupational Health, Demography and Oral Health, Disability

Primary Health Care Concept, Primary Health Care in Sri Lanka, Introduction to occupational health, Physical hazards, Chemical hazards, Biological hazards, Ergonomic hazards, Legal aspects, Introduction to demography, Population structure and Demographic transition, Fertility trends and indicators, Mortality trends and indicators, Migration & Health, Standardization of mortality rates, Life expectancy and quality of life, Demography revision, Disability as a public health problem, Introduction to Oral Health

**Teaching /Learning Methods:**

Lectures, Small group discussions, Tutorials, Online learning, Clerkship program

**Assessment Strategy:**

**Formative assessments**

Assignments

Online/ offline quizzes

**Summative assessments**

Final Assessment 100%

Details:	MCQ 50%	SAQ/ESSAY 50%
	1 HR	2 HR

**Recommended Reading:**

1. Oxford Textbook of Public Health, Edited by Roger Detels, James McEwen, Robert Beaglehole and Heizo Tanaka
2. Annual Report on Family Health, Sri Lanka by Family Health Bureau, Ministry of Health, Sri Lanka.
3. Maternal Care Package: A guide to Field Health Care Workers by Family Health Bureau, Ministry of Health, Sri Lanka.
4. Park's Textbook of Preventive and Social Medicine by K. Park
5. Family Health Bureau, Ministry of Health, Sri Lanka – Website

**Recommended Reading:** Primary Health care, Occupational Health, Demography and Oral Health, Disability

1. Oxford Textbook of Public Health, Edited by Roger Detels, James McEwen, Robert Beaglehole and Heizo Tanaka
2. Park's Textbook of Preventive and Social Medicine by K. Park
3. Global oral health status report Towards universal health coverage for oral health by 2030 Executive summary <file:///C:/Users/user/Downloads/9789240061569-eng.pdf>
4. Occupational safety and health, ILO resources, <https://www.ilo.org/inform/online-information-resources/databases/osh/lang--en/index.htm>

<b>Semester</b>	Y3S2		
<b>Course Code</b>	MED3235		
<b>Course Name</b>	Personal and Professional Development		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>	None		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	<b>Workshops</b>	<b>Independent Learning</b>	<b>Notional</b>
	08	32 (22+10 SGL/ SDL inside TT)	50
<b>Aim(s):</b>			
1. To provide the desired knowledge and understanding of concepts in effective communication and attributes of a medical professional			
<b>Intended learning outcomes:</b>			
At the end of this module, the students should be able to:			
1. Describe and apply the concept of patient safety			
2. recognize and respond appropriately to the ethnic, socio-cultural, and religious backgrounds of patients, families, and community.			
<b>Course content/Course description:</b>			
This course will contain a series of workshops and student-led seminars where students will be role playing in simulated environments on sensitive issues pertaining to communication in health system and observed history taking on simulated patients			
Understanding the values behind Culturally and socially different patients, drug safety,			
<b>Teaching /Learning Methods:</b>			
Workshops and student-led seminars			
Online modules			
<b>Assessment Strategy:</b>			
Student portfolio			
Formative assessment- Certificate of completion of online modules			
<b>Recommended Reading:</b>			

<b>Semester</b>	Y3S2		
<b>Course Code</b>	MED3236		
<b>Course Name</b>	Integrated Applied Medicine 1F		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>	None		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	Lectures/Student Guided-Student Presentations	Independent Learning	Notional
	15	25 (15+ 10 SGL inside TT)	50
<b>Aim(s):</b>			
<ol style="list-style-type: none"> <li>To facilitate transition from basic sciences to hospital-based training by reinforcing relevance of basic sciences to clinical practice, facilitating recall of clinically relevant basic science concepts and encouraging students to engage in active learning and facilitate critical thinking.</li> <li>To facilitate understanding of clinical medicine by reinforcing the clinically relevant basic and applied science concepts and encouraging students to engage in active learning and facilitate critical thinking.</li> </ol>			
<b>Intended learning outcomes:</b>			
At the end of this module, the students should be able to			
<ul style="list-style-type: none"> <li>apply the relevant anatomical, physiological and biochemical basis involved in diseases.</li> <li>explain the pathophysiological basis of disease.</li> <li>apply the scientific principles in the management, prevention and legal aspects of diseases.</li> </ul>			
<b>Clinical Cases of Relevance (CCR)- Objectives</b>			
To facilitate understanding of clinical medicine by reinforcing the clinically relevant basic and applied science concepts and encouraging students to engage in active learning and facilitate critical thinking.			
<b>Application of Basic science knowledge to essential clinical skills:</b>			
Radiological diagnosis of Head Injury			
<b>Course content/Course description:</b>			
Clinically relevant basic and applied science concepts of Medical, Gynaecological and Surgical Conditions will be discussed as CCR			
Jaundice, Cirrhosis, Gastric tumours, Head Injury Loss of Consciousness, headache, flaccid paralysis, paraplegia, oliguria / anuria, abnormal uterine bleeding, acid base and electrolyte disturbances, menopause, complications of pregnancy,			
<b>Assessment Strategy:</b>			
Portfolio			

**Recommended Reading:**

1. Snell. R. S. Clinical Anatomy by Regions, Latest Edition
2. Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition
3. Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition
4. Colledge. N. R. et al. Davidson's Principles & Practice of Medicine. Latest Edition
5. Kumar P and Clark C. Clinical Medicine Latest Edition
6. Kumar V et al., Robbins Basic Pathology Latest Edition

<b>Semester</b>	Y4S1				
<b>Course Code</b>	MED4137				
<b>Course Name</b>	Community Medicine II Community nutrition, medical sociology, mental health, emerging health problems and disaster management, Environmental Health and Injury Prevention Health promotion, Disease prevention, Applied epidemiology, Health systems, health economics, and international health				
<b>Credit Value</b>	4 (Notional Hours:200)				
<b>Prerequisites</b>					
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b> Community nutrition, medical sociology, mental health, emerging health problems and disaster management, Environmental Health and Injury Prevention	Lectures	Tutorial	Practical	Independent Learning & Assessment	Notional
	26	02		72(66+6 SGD/ SGL inside the TT)	100
<b>Hourly Breakdown</b> Health promotion, Disease prevention, Applied epidemiology, Health systems, health economics, and international health	28	02	04	66(60+6 SGL/SDL inside the TT)	100
<p><b>Aim(s)</b>- Community nutrition, medical sociology, mental health, emerging health problems and disaster management, Environmental Health and Injury Prevention:- To introduce the students to Community nutrition, medical sociology, mental health, emerging health problems and disaster management</p> <p><b>Aim(s)</b> -Health promotion, Disease prevention, Applied epidemiology, Health systems, health economics, and international health:  To introduce the students to Health promotion, Disease prevention, Disability, Applied epidemiology and Health systems</p>					
<p><b>Intended learning outcomes</b> -Community nutrition, medical sociology, mental health, emerging health problems and disaster management, Environmental Health and Injury Prevention:-</p>					

On successful completion of the course, the students should be:

Mental health:

- able to understand the importance & the gravity of mental diseases as a public health problem and be aware of the different types of services & facilities available for mental health in Sri Lanka

Emerging health problems:

- Be able to understand the changing pattern of diseases globally, the contributing factors and understand and appreciate the challenges faced by individual countries and the world as a whole in the face of changing patterns of disease

Community nutrition

- To describe the relationship between the national nutrition status, and the population structure with the development of the country
- To discuss the concepts of nutrition survey, nutrition surveillance, food security, and nutrition security
- To describe national nutrition programmes, and nutritional interventions available up to date

Disaster management:

- Be able to explain how a disaster is managed.

Medical sociology:

- able to apply concepts of medical sociology in solving health problems.

Environmental health

- Describe how to control and prevent health problems related to the environment.

Injury prevention

- describe principles of injury prevention

**Intended learning outcomes** - Health promotion, Disease prevention, Applied epidemiology, Health systems, health economics, and international health:

On successful completion of the course, student should be able to

Health promotion:

- Be able to apply the concepts in health promotion

Health systems

- Be able to describe health systems and their functions

Health economics

- To gain an understanding of, the definition of health economics, financial flows in the health sector and factors determining the demand for and supply of health services, Methods of allocating health care resources

Disease prevention:

- Be able to explain the control and prevention of major communicable diseases in Sri Lanka and describe the duties and functions carried out by the special units in the public health system

NCD

- discuss the epidemiology of non-communicable diseases and describe their prevention.

**Applied epidemiology:**

- apply the basic principles of epidemiology in clinical practice.

**International health**

Be able to understand the international nature of disease and health and the role played by international organizations in maintaining global health.

**Course content/Course description-** Community nutrition, medical sociology, mental health, emerging health problems and disaster management, Environmental Health and Injury Prevention-

Emerging Health Problems, Community nutrition, Introduction to medical sociology, application of principles of medical sociology, Mental health, overview of disaster management, managing the displaced, Introduction to Environmental Health and E waste management, Water pollution, Air Pollution and solid waste disposal, Sound pollution and excreta disposal, Housing and food safety, Urbanization, Principals of injury prevention, Measurement of injuries, Injury Surveillance, Prevention of road traffic injuries and deaths.

**Course content/Course description-** Health promotion, Disease prevention, Applied epidemiology, Health systems, health economics, and international health:

Introduction to Health Education (HE) and Health Education Bureau (HEB), behavior change communication and social behavior change communication, Development of a BCC, Epidemiology of NCD, International health, Medical statistics unit, Epidemiology unit, Definition of epidemiology, Natural history of diseases, Communicable disease transmission, Communicable disease surveillance & disease prevention, Epidemiological investigation, Screening for diseases, Epidemiological investigation, The definition of health economics, financial flows in the health sector and factors determining the demand for and supply of health services, Methods of allocating health care resources, Hospital administration, Health planning, Health information systems, Health systems

**Teaching /Learning Methods:**

Lectures, Small group discussions, Tutorials, Online learning Clerkship programme

**Assessment Strategy:**

**Formative assessments**

Assignments

Online/ offline quizzes

**Summative assessments**

Final Assessment 100%

Details:	MCQ 50%	SAQ/ Essay 50%
	1 HR	2 hr

**Recommended Reading:**

1. Oxford Textbook of Public Health, Edited by Roger Detels, James McEwen, Robert Beaglehole and Heizo Tanaka
2. Park's Textbook of Preventive and Social Medicine by K. Park
3. GORAN <https://extranet.who.int/goarn/>
4. Introduction to sociology, Chapter 19 Health and Medicine  
<https://opentextbc.ca/introductiontosociology/chapter/chapter19-health-and-medicine/>
5. SRI LANKA: DISASTER MANAGEMENT REFERENCE HANDBOOK 2021,  
<https://www.preventionweb.net/publication/sri-lanka-disaster-management-reference-handbook-2021>

**Recommended Reading:** Health promotion, Disease prevention, Applied epidemiology, Health systems, health economics, and international health:

6. Oxford Textbook of Public Health, Edited by Roger Detels, James McEwen, Robert Beaglehole and Heizo Tanaka
7. Park's Textbook of Preventive and Social Medicine by K. Park
8. Ministry of Health, Sri Lanka – special campaigns  
[http://www.health.gov.lk/moh\\_final/english/others.php?pid=35](http://www.health.gov.lk/moh_final/english/others.php?pid=35)
9. Ministry of Health Sri Lanka – Manual on Hospital Management  
[http://www.health.gov.lk/moh\\_final/english/others.php?pid=157](http://www.health.gov.lk/moh_final/english/others.php?pid=157)



<b>Semester</b>	Y4S1			
<b>Course Code</b>	MED 4138			
<b>Course Name</b>	Clinical forensic Medicine, forensic pathology and medical ethics			
<b>Credit Value</b>	1			
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	<b>Lectures</b>	<b>Tutorial</b>	<b>Independent Learning</b>	<b>Notional</b>
	13	02	35 (30 + 5 SDL inside TT)	50
<b>Course Aim:</b> To be able to identify, interpret and document effects/causes of natural disease, trauma and toxins for legal purposes while utilizing the appropriate resources, protecting vulnerable groups and ensuring ethical medical practice while acting appropriately in the scene of crime settings.				
<b>Intended Learning Outcomes:</b> The student should be able to				
<ul style="list-style-type: none"> <li>• Interpret injuries and their consequences that occur as a result of toxic substances for medico legal purposes.</li> <li>• Evaluate and determine the groups of people who may need special care and act accordingly and within the legal framework.</li> </ul>				
<b>Course Content:</b> <i>(Only Main topics, Subtopics)</i>				
Drowning, Forensic toxicology, Criminal miscarriage, Torture and deaths in custody, Sexual offenses.				
<b>Teaching /Learning Methods:</b> Lectures, seminars, demonstrations, tutorials				
<b>Recommended Texts</b>				
<ol style="list-style-type: none"> <li>1 Mant AK. Taylor’s principles and practice of medical jurisprudence. Churchill Livingstone. New Delhi</li> <li>2 de Alwis L.B.L. Lecture notes in Forensic Medicine vol.1-Medicolegal aspects of injuries. Colombo: Primal printers.</li> <li>3 de Alwis L.B.L. Lecture notes in Forensic Medicine vol.2-Forensic pathology and Forensic Science.Colombo: Primal printers.</li> <li>4 de Alwis L.B.L. Lecture notes in Forensic Medicine vol.3-Forensic toxicology and vol. 4 Medical Ethics, Law and Psychiatry. Colombo: Primal printers,</li> </ol>				

<b>Semester</b>	Y4S1					
<b>Course Code</b>	MED4139					
<b>Course Name</b>	Hematology					
<b>Credit Value</b>	1 (Notional Hours: 50)					
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS					
<b>Core/Optional</b>	Core					
<b>Hourly Breakdown</b>	Lectures	SGD/ PBL	Practical/ Museum Class	Formatives /Seminars	Independent Learning Hrs	Notional
	14	01	00	00	35 (30 +05 Self-study/ Group work Inside the TT)	50
<b>Aim(s):</b>						
To Introduce the students to pathogenesis of hematological diseases and Pathological basis of their clinical outcomes, complications, investigations and management.						
<b>Intended learning outcomes:</b>						
On successful completion of the course, student should be able to						
<ul style="list-style-type: none"> <li>describe the pathogenesis of diseases of red cells, white blood cells and coagulative system (thrombotic and bleeding disorders).</li> <li>describe the pathological basis of clinical outcomes and complications of the below mentioned diseases.</li> <li>Describe the pathological basis and outcomes of investigations performed in the diagnosis and management strategies of below mentioned diseases.</li> <li>analyze and interpret common hematological investigation reports and identify the errors and corrective measures.</li> <li>analyze clinical scenarios of hematological diseases, describe pathogenesis and plan investigations.</li> <li>Describe the basic concepts of transfusion medicine, blood products and their uses and transfusion related complications.</li> </ul>						
<b>Course content/Course description:</b>						
<ul style="list-style-type: none"> <li>Blood cells, bone marrow, haemopoiesis and classification of haematological disorders</li> <li>Hypochromic microcytic anemia, Macrocytic anemia, Normochromic and normocytanemia</li> <li>Haemolytic anemia, Thalassemia and haemoglobinopathies</li> <li>White cells –benign disorders</li> </ul>						

- Myeloproliferative disorders
- Leukemia, Myeloma
- Pancytopenia
- Bleeding disorders
- Thrombotic disorders & anticoagulation
- Blood grouping & compatibility testing & Blood products
- Adverse effects of blood transfusion
- Haemolytic disease of the new born
- Clinical case analysis, interpretation of haematological investigations.

**Teaching /Learning Methods:**

Lectures, Practical classes, small group discussions, Assignments

**Assessment Strategy:** End- Semester Assessment 100%

Details:	MCQ 50%	SEQ/Essay 50%
	30 minutes	30 minutes

**Recommended Reading:**

1. Hoffbrand's essential Haematology
2. Robbins Pathologic basis of disease
3. Lecture notes: haematology

<b>Semester</b>	Y4S1
<b>Course Code</b>	MED4140
<b>Course Name</b>	Family Medicine
<b>Credit Value</b>	2 (Notional Hours: 100) (2 credits for theory module and 1 credit for clinical appointment under Hospital Community Stream (HCT), where skills training occurs)
<b>Prerequisites</b>	Successful completion of Y1S1, Y1S2, Y2S1
<b>Core/Optional</b>	Core

Hourly Breakdown		Lectures	Independent Learning	Notional
	Y4S1	15	35	50
	Y4S2	15	30(25 +5 SDL in the TT)	50

**Aim(s):**

To provide students the opportunity to acquire knowledge and skills of Family Medicine required to deliver a personalized and family centred first contact care for the patients in the community.

**Intended learning outcomes:**

On successful completion of the course, the students should be:

1. describe the role and scope of family physician as a first contact doctor in the society
2. demonstrate knowledge and skills in recognizing and planning the management of common medical and surgical problems encountered in a family practice as a first contact doctor
3. identify the role of family physician in disease prevention and health promotion in primary care setting
4. demonstrate knowledge and skills in providing care for children from birth to adolescence and care for women of all ages in a primary care
5. identify the red flag signs of diseases early and demonstrate the skills in providing emergency care as a first contact doctor
6. provide care for mental health issues encountered in the primary care and describe the availability of special services such as elderly care, palliative care and counselling
7. demonstrate verbal and written communication skills required for providing patient-centred holistic care and comply with prescribed methods of documentation
8. demonstrate competencies in collaboration of care, continuity of care and advocacy in the primary care setting
9. demonstrate the ability to engage as a member, manager and a leader, in a multi-disciplinary team, in a manner that optimizes safe, effective patient/ population-centred care.
10. demonstrate the ability to carry out professional responsibilities with adherence to ethical principles and an understanding of the legal implications applicable in family practice

**Course content/Course description:**

Thirty (30) hours of formal lectures where 6 hours will be dedicated to teach Family Medicine principles. The remaining lectures will be allocated to teach family medicine related topics in other clinical disciplines namely, Medicine, Surgery, Gynaecology & Obstetrics, Paediatrics, Psychiatry/Anaesthesiology and Community Medicine.

Family medicine clinical appointment is a two weeks’ clinical rotation after completion of the first Medicine, Surgery, Gynaecology & Obstetrics, and Paediatrics appointments. During this rotation the students will be sent to an outpatient department of a teaching hospital, emergency treatment unit for the exposure of medical emergencies as a first contact doctor, a full time GP unit and a government primary care unit.

Through lectures, self-directed learning and from the clinical rotation the students will be trained to:

To appreciate diversity of the clinical problems encountered in the primary care and to understand the difference of the nature of clinical problems, their presentation and the management strategies from inward patients.

Perform a patient-centred interview that includes exploration of different causes of common clinical presentations to a family practice and perform a focused physical examination that differentiates different causes of common clinical presentations, identify symptoms and signs by probing for red flags of potentially serious causes that require urgent emergency care, stabilization, timely referral and to propose an initial management plan for a patients which includes an appropriate and timely investigation of urgent potentially serious conditions

Propose a surveillance and management plan for primary and secondary prevention of common clinical problems encountered in family practice, counsel patients and family on common clinical scenarios such as contraception and immunization and organize follow up care of patients referred back to primary care.

**Teaching /Learning Methods:**

Lectures, SGD, CBD, Demonstrations, Participation of outreach clinics, Log book

**Assessment Strategy:**

End Clinical Appointment Assessment 05%		End-Semester Assessment 95%	
Details:	SEQ	OSPE	VIVA
	50%	45%	05%

**Recommended Reading:**

1. Lecture notes in Family Medicine Prof Nandani De Silva. Third edition 2017
2. Kumar and Clark's Clinical Medicine Parveen Kumar, Michael Clark. Saunders Ltd. Ninth edition 2017
3. Oxford hand book of general practice Chantal Simon, Hazel Everitt, Françoise van Dorp, Matt Burkes Fourth edition 2014
4. A guide to management of medical emergencies P. L. Ariyananda, G. Hettiarachchi, T. P. Weeraratna. Second 2010
5. Snake, snake bite and envenoming in Sri Lanka Hand book on management of snake bite SAM Kularatne
6. Hutchison's Clinical Methods Michael Glynn & William M Drake. Saunders Ltd. Twenty third edition 2012

<b>Semester</b>	Y4S1, Y4S2
<b>Course Code</b>	MED4141
<b>Course Name</b>	Radiology
<b>Credit Value</b>	2 (Notional Hours: 100)
<b>Prerequisites</b>	
<b>Core/Optional</b>	Core

Hourly Breakdown		Lectures/ SGD	Practical Demonstrations/ Tutorials	Student Seminars/ presentations	Independent Learning	Notional
	Y4S1	15			30 (27+3 SGL/SDL inside the TT)	50
	Y4S2	15	02		33 (+31 +2 SGL/SDL inside the TT)	50

**Aim(s):**

To enable the students to understand the application of medical imaging in the management (diagnosis and treatment) of common disease conditions, knowing their limitations and radiation hazards

**Intended learning outcomes:**

On successful completion of the course, the students should be:

- List the imaging modalities used for various common pathological conditions of all body systems.
- Select the appropriate radiological investigations for common diseases.
- Describe the radiological signs of common pathologies seen on above imaging modalities which are being utilized for the diagnosis of common diseases.
- Describe the radiation protection measures taken during radiological investigations.

**Course content/Course description:**

Course Content:

- Basic principles of medical imaging 1 -Interpretation of the plain radiographs
- Basic principles of medical imaging 2 -interpretation of ultrasonography, computerized Tomography, and magnetic resonance imaging,
- Application of CT in chest pathology
- Imaging of pulmonary and extrapulmonary tuberculosis
- Imaging of congenital & acquired cardiac diseases
- Imaging of acute abdomen
- Imaging of inflammatory & neoplastic bowel diseases
- Imaging in jaundice and hepatobiliary and pancreatic neoplasms

- Imaging in Paediatrics 1 -Imaging in UTI and congenital anomalies of GUT and GIT
- Imaging in Paediatrics 2 – Imaging in CNS, RS, MSK,
- Imaging in GUT 1 – Haematuria, calculus disease and obstructive uropathy
- Imaging in GUT 2 – Scrotum and Prostate
- Imaging in CNS 1 - Neoplastic and inflammatory disease
- Imaging in CNS 2 - Stroke and intracranial haemorrhage
- Imaging of MSK 1 -Inflammatory, neoplastic diseases and arthropathies
- Imaging of MSK 2 -Trauma
- Imaging in endocrine and metabolic disorders, bone densitometry
- Imaging in obstetrics
- Imaging of common gynaecological & breast pathologies
- Imaging in peripheral vascular diseases (arterial & venous)
- Basic concepts of radiological interventions and radiation protection
- Basic principles of medical imaging 3 – Principles of Nuclear Imaging and radiation protection Issues in Nuclear Medicine
- Nuclear Imaging of Urinary Tract Pathology and Obstructive Uropathy
- Application of Nuclear imaging in thyroid diseases, other common endocrinopathies and therapeutic application in thyroid disease
- Application of Nuclear Imaging in bone and CNS diseases
- Nuclear imaging in gastrointestinal bleeding, hepatobiliary disorders, myocardial perfusion and pulmonary embolism.
- SGD 1 -Emergency radiology 1 – Paediatric emergencies
- SGD 2 -Emergency radiology 2 – Chest and abdominal emergencies
- Tutorial in Radiology
- Tutorial in Nuclear Medicine

**Teaching /Learning Methods:**

Lectures, SGD, tutorials

**Assessment Strategy:**

End-Semester Assessment 100%

Details:	OSPE	SAQ
	50%	50%

**Recommended Reading:**

1. Lecture notes on Radiology by Patel
2. Radiology for medical students by David Sutton
3. Interpretation of chest radiographs for medical students by P B Hewavithana



<b>Semester</b>	Y4S1		
<b>Course Code</b>	MED4142		
<b>Course Name</b>	Integrated Applied Medicine (IAM) F		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>			
<b>Core/Optional</b>	Core (Supplementary)		
<b>Hourly Breakdown</b>	Lectures/Student Guided- Presentations	Independent Learning	Notional
	20	30 (20+ 10 SGL)	50
<b>Aim(s):</b>			
<ol style="list-style-type: none"> <li>To facilitate transition from basic sciences to hospital-based training by reinforcing relevance of basic sciences to clinical practice, facilitating recall of clinically relevant basic science concepts and encouraging students to engage in active learning and facilitate critical thinking.</li> <li>To facilitate understanding of clinical medicine by reinforcing the clinically relevant basic and applied science concepts and encouraging students to engage in active learning and facilitate critical thinking.</li> </ol>			
<b>Intended learning outcomes:</b>			
At the end of this module, the students should be able to			
<ul style="list-style-type: none"> <li>apply the relevant Basic and applied science basis involved in diseases.</li> <li>apply the scientific principles in the management, prevention and legal aspects of diseases.</li> </ul>			
<b>Course content/Course description:</b>			
Clinically relevant basic and applied science concepts of anaemia, Growth retardation, backache, acute and chronic pain, short stature, acute confusional state			
<b>Teaching /Learning Methods:</b>			
Lectures, Student Assignments, Guided-Student Presentations			
<b>Assessment Strategy:</b>			
Formative Assessment 100%			
Details	MCQ	OSPE	
	40%	60%	
<b>Recommended Reading:</b>			
<ol style="list-style-type: none"> <li>Snell. R. S. Clinical Anatomy by Regions, Latest Edition</li> <li>Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition</li> <li>Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition</li> <li>Colledge. N. R. et al. Davidson's Principles &amp; Practice of Medicine. Latest Edition</li> <li>Kumar P and Clark C. Clinical Medicine Latest Edition</li> <li>Kumar V et al., Robbins Basic Pathology Latest Edition</li> </ol>			

<b>Semester</b>	Y4S1			
<b>Course Code</b>	MED4143			
<b>Course Name</b>	Personal and Professional Development 3 (Behavioural Science)			
<b>Credit Value</b>	1 (Notional 50)			
<b>Prerequisites</b>	None			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Lectures	SGD	Independent Learning	Notional
	06	10	24	50
<b>Aim(s):</b>				
To provide the desired knowledge and understanding of concepts in clinical psychology related to psychiatry, in order to lay the foundation for further training in relation to mental health.				
<b>Intended learning outcomes:</b>				
At the end of this module, the students should be able to:				
<ol style="list-style-type: none"> <li>1. demonstrate a knowledge of the psychological concepts underlying individual and group behaviour, emotions, learning, intelligence and memory.</li> <li>2. demonstrate the ability to describe basic psychological concepts related to personality and development, sick role and illness behaviour.</li> </ol>				
<b>Course content/Course description:</b>				
Emotions and the limbic system, Describe the difference between emotions and thoughts, the normal range of human emotions in reference to everyday life events and describe the biological basis of normal human emotions,				
Learning and memory, briefly describe the normal process of memory formation, techniques of improving long term memory and briefly discuss the effect of emotion on memory formation,				
Intelligence, describe definitions of intelligence, common methods of measuring intelligence and factors that may influence an individual's level of intelligence,				
Freud and the unconscious, Describe the structure of the mind as described by Freud, common defence mechanisms and briefly describe personality theory as described by Freud,				
Developmental psychology, briefly describe the different psychological theories of development: Piaget's theory of cognitive development, Erikson's theory of psychosocial development, Kohlberg's theory of moral development. Describe the important aspects of normal psychological development during childhood and adolescence,				
Personality, describe what is meant by personality, briefly describe theories of personality: e.g. dimensional theories, categorical or 'type' theories. Describe factors that may influence personality development. Factors influencing behaviour, demonstrate awareness that behaviour can be studied objectively, describe the factors that influence individual behaviour, and describe how and why behaviour in a group				

may differ from individual behaviour. Can behaviour be changed? Briefly discuss when medical professionals may need to attempt to change behaviour, and briefly describe techniques of changing behaviour,

Sick role and illness behaviour, describe different ways in which individuals may react to illness, and demonstrate awareness of concepts of sick role and illness behaviour.

Reactions to stress, describe what is meant by the term stress, and the different ways in which individuals react to stress.

Grief and bereavement, Describe the terms grief and bereavement, normal reactions to loss (normal grief), the support (nonmedical) usually given to a bereaved person in the community, and how this may affect that person.

**Teaching /Learning Methods:**

Lectures

**Assessment Strategy:**

\*Assessed during continuous assessment in psychiatry (held at the end of the professorial clinical appointment in psychiatry) and during the psychiatry examination in final year (Final MBBS).

**Recommended Reading:**

1. Shorter Oxford Text book of Psychiatry, Michael Gelder, Paul Harrison and Philip Cowen, Oxford University Press

<b>Semester</b>	Y4S2				
<b>Course Code</b>	MED4137 (ct)				
<b>Course Name</b>	Clinical forensic Medicine, forensic pathology and medical ethics				
<b>Credit Value</b>	2 (Notional Hours: 100)				
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS				
<b>Core/Optional</b>	Core				
<b>Hourly Breakdown</b>	Lectures	Tutorial	Practical demonstrations	Independent Learning	Notional
	20	05	05	70 (60 + 10 SDL inside TT)	100
<b>Aim(s):</b>					
To be able to identify, interpret and document effects/causes of natural disease, trauma and toxins for legal purposes while utilizing the appropriate resources, protecting vulnerable groups and ensuring ethical medical practice while acting appropriately in the scene of crime settings.					
<b>Intended learning outcomes:</b>					
On successful completion of the course, students should be able to					
<ul style="list-style-type: none"> <li>• Apply the principles of ethics, rights, and law to solve problems that arise during medical practice and research appreciating the standards set by the Sri Lanka Medical Council.</li> <li>• Evaluate and determine the groups of people who may need special care and act accordingly and within the legal framework.</li> <li>• Interpret injuries and their consequences that occur as a result of trauma for medico legal purposes.</li> <li>• Evaluate the use of photography, radiology and other investigations used in medico legal practice.</li> <li>• Identify evidence which may suggest a sudden natural death.</li> </ul>					
<b>Course content/Course description:</b> <i>(Only Main topics, Subtopics)</i>					
<b>Teaching /Learning Methods:</b>					
Lectures, demonstrations, tutorials					
Debates on controversial issues, medical malpractice and illegal medical practice, Sri Lanka Medical Council, Medical Negligence, Forensic radiology, Forensic photography, Forensic psychiatry, Drunkenness, Transportation injuries, Fire arm injuries and injuries due to explosions, Child abuse and domestic violence, Infanticide and Sudden infant death syndrome, Starvation and neglect, Sudden natural deaths, Applied medical ethics.					

<b>Assessment Strategy: End Semester Assessment 100%</b>			
Details	MCQ (1 hr)	SAQ (1 hr)	ESSAY (1 hr)
		30%	40%

**Recommended Reading:**

1. Gordon I, Shapiro HA, Berson SD. Forensic Medicine. A guide to principles. Churchill Livingstone. New York
2. Mant AK. Taylor’s principles and practice of medical jurisprudence. Churchill Livingstone. New Delhi
3. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.1-Medicolegal aspects of injuries. Colombo: Primal printers.
4. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.2-Forensic pathology and Forensic Science.Colombo: Primal printers.
5. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.3-Forensic toxicology and vol. 4 Medical Ethics, Law and Psychiatry. Colombo: Primal printers,

<b>Semester</b>	Y4S1		
<b>Course Code</b>	MED4144		
<b>Course Name</b>	Therapeutics		
<b>Credit Value</b>	1 (Notional Hours: 50)		
<b>Prerequisites</b>	Pass Y1, Y2, Y3 examinations		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	Tutorials	Independent Learning	Notional
	15	35	50
<b>Aim(s):</b>	To enable the students to understand the basis of drug therapy of common clinical problems.		
<b>Intended learning outcomes:</b>	On successful completion of the course, student should be able to <ul style="list-style-type: none"> <li>The student should be able to apply the knowledge in basic Pharmacology in the drug therapy of commonly encountered clinical problems.</li> </ul>		
<b>Course content/Course description:</b>	Coronary artery disease, Heart failure, Hypertension, Asthma/COPD, Diabetes Mellitus (including acute metabolic complications), Thyroid disorders, Cerebrovascular disease, Epilepsy, Movement disorders, Migraine, Acute and chronic liver disease, Hypersensitivity reactions, Connective tissue diseases/arthritis, Acute and chronic kidney disease, Common infections, Psychiatric disorders		
<b>Teaching /Learning Methods:</b>	Tutorials		
<b>Assessment Strategy:</b>	End- Semester Assessment 100%		
Details:			MCQ
			100%
<b>Recommended Reading:</b>	<ol style="list-style-type: none"> <li>Clinical pharmacology by Bennett P.N., Brown M.J and Sharma P.</li> <li>Rang &amp; Dale's Pharmacology by Rang H. P., Dale M. M., Ritter J.M, Flower R.J. and Henderson G.</li> <li>Kumar and Clark's Clinical Medicine by Parveen Kumar &amp; Michael Clark.</li> <li>Illustrated Textbook of Paediatrics by Tom Lissauer &amp; Graham Clayden.</li> </ol>		

<b>Semester</b>	Y4S2			
<b>Course Code</b>	MED4245			
<b>Course Name</b>	Personal and Professional Development 4 (Hospital Communication)			
<b>Credit Value</b>	1 (Notional 50)			
<b>Prerequisites</b>	None			
<b>Core/Optional</b>	Core			
<b>Hourly Breakdown</b>	Lectures	Practical/SGDs	Independent Learning	Notional
	06	06	40	50
<b>Aim(s):</b>				
<ol style="list-style-type: none"> <li>To enable the student to acquire adequate knowledge and skills to communicate and interpret health information within the health system of Sri Lanka</li> <li>Dealing with difficult situations in the clinical setup</li> </ol>				
<b>Intended learning outcomes:</b>				
At the end of this module, the students should be able to:				
<ol style="list-style-type: none"> <li>Describe communication methods used in the health system of Sri Lanka and their applications</li> <li>Write correct prescription and referrals</li> <li>Write the diagnosis according to the version of 10 of International Classification of Diseases (ICD10) Communicate with patients and appropriate documentation in the BHT (consent for a procedure etc)</li> <li>describe the basic concepts in the hospital management Pharmacology, clinical, medical admin, com med, FM</li> </ol>				
<b>Course content/Course description:</b>				
The purpose and technique of writing notification forms, death certificates, diagnosis on the BHT, diagnosis cards, prescription writing, documentation in the BHT, referral letters and request forms.				
<b>Teaching /Learning Methods:</b>				
Lectures, Workshops Online modules				
<b>Assessment Strategy:</b>				
Student portfolio-Reflective writing Certificate of completion on online modules				
<b>Recommended Reading:</b>				

**Clinical segment of the curriculum 3<sup>rd</sup> Year**

<b>Semester</b>	Clinical Curriculum year 3	
<b>Course Code</b>	MED4CLIN 01	
<b>Course Name</b>	Radiology	
<b>Credit Value</b>	2 (Notional Hours: 100)	
<b>Prerequisites</b>	Pass Second MBBS	
<b>Core/Optional</b>	Core	
<b>Hourly Breakdown</b>	Clinical Work / Skills Training	Independent Learning
	45	55
<b>Aim/s: Clinical Rotation</b>		
To provide the desired knowledge, skills and attitudes to practice as a first contact doctor and to lay the foundation for further training in relation to medical imaging.		
<b>Intended learning outcomes [ILO]: Clinical Rotation</b>		
On successful completion of the medical imaging program, students should be able to:		
<ol style="list-style-type: none"> <li>1. demonstrate patient-centred care that is compassionate, appropriate, and effective for the prevention and management of health problems and the promotion of health to patients seeking radiological services.</li> <li>2. demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioural sciences, as well as the application of this knowledge to patient</li> <li>3. demonstrate the ability to continuously improve patient care based on scientific evidence, constant self-evaluation and life-long learning.</li> <li>4. demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.</li> <li>5. demonstrate a commitment to carrying out professional responsibilities with adherence to ethical principles and an understanding of the legal implications of practice.</li> <li>6. demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.</li> <li>7. demonstrate the ability to engage as a member, manager and a leader, in an inter professional team, in a manner that optimizes safe, effective patient/ population-centred care.</li> <li>8. demonstrate the qualities required to sustain lifelong personal and professional growth</li> <li>9. assist the legal system in the administration of justice</li> <li>10. demonstrate knowledge on radiation protection measures involved with safety of patients, self and co workers.</li> </ol>		



More specifically -

should be able to achieve all above competencies in relation to

- Medical imaging and radiation protection in routine and emergency health care and health promotion

Diagnosis of congenital or acquired diseases. Latter includes, inflammatory, immunological, metabolic, nutritional, iatrogenic, traumatic and neoplastic diseases involving respiratory, cardiovascular, nervous, gastrointestinal, musculoskeletal, genitourinary, endocrine and integumentary systems in all the age groups

### **Course content/Course description: Clinical Rotation**

#### ***Principles of Medical Imaging***

Imaging modalities available for imaging of human diseases -indications for each; the most appropriate modality for a particular disease. Concept of the preliminary investigation and the gold standard for a particular disease. The preparation of patients for common radiological investigations. Accurate filling up of request forms for radiological investigations; Indications and limitations for plain radiography, ultrasonography, contrast studies, nuclear imaging, mammography, computed tomography (CT) and magnetic resonance imaging (MRI) examinations and features of common abnormalities as seen on each of them. Basic principles of common endovascular and non-vascular radiological interventions and their indications. Identify measures taken for radiation protection in a radiology department.

#### ***Respiratory and cardiovascular system***

Identification of all the anatomical structures of chest radiograph (Posteroanterior & Lateral views) and assess the cardiac size by measuring cardiothoracic ratio, Identification of a normal radiograph from an abnormal, interpretation of common chest radiographic abnormalities such as cardiomegaly, pneumonic consolidation, pleural effusion, lung collapse, pneumothorax, bronchial neoplasm, pulmonary metastasis, pulmonary tuberculosis, heart failure, atrial and ventricular septal defect, pericardial effusion, rib fractures, mediastinal masses. Identification of pulmonary neoplasm and mediastinal masses on cross sectional imaging such as CT scan. Application of nuclear imaging in pulmonary embolism and cardiac pathology.

#### ***Gastrointestinal and Hepatobiliary system***

Interpretation of abdominal x-ray in order to diagnose conditions such as intestinal obstruction, perforation of bowel, pancreatic calcifications, differentiating a benign from a malignant lesion and inflammatory bowel disease on contrast examinations. Identification of gall stones, space occupying lesion in the liver and obstructive jaundice on Ultrasound scans. Application of contrast studies, nuclear imaging, CT and MRI examinations in common hepatobiliary diseases and pancreatic inflammatory and neoplastic diseases.

### **Genito Urinary System**

Interpretation of X ray Kidney Ureter Bladder in order to identify calculi along the urinary tract and differentiate them from phleboliths. Procedure of an intravenous urogram (IVU), micturating cystouretrogram. Identification of common abnormalities such as calculi, hydronephrosis, developmental anomalies and tumors on Ultrasound scan, IVU or computerized tomographic Urogram. Place of imaging with special reference to nuclear imaging in urinary tract infections. Role of cross-sectional imaging in urinary tract tumours. Imaging of bladder outflow obstruction. Ultrasonography in obstetrics, including foetal growth and wellbeing. Application of imaging in common gynaecological and scrotal pathology, with special emphasis on ultrasonography.

### **Vascular System**

Radiological anatomy of vascular system and common pathologies such as stenosis, occlusion, aneurysm and arteriovenous malformation on angiography. Principles of arterial puncture with special reference to common femoral artery puncture. Role of imaging in deep venous thrombosis, varicose veins, chronic venous insufficiency and pulmonary embolism. Basics of angioplasty, stenting and embolization as endovascular interventions.

### **Musculo skeletal System**

Identify Identification of benign bone tumour from a malignant one on plain radiography. Identification of common fractures and concepts of trauma imaging on plain radiography. Place of CT, MRI and nuclear imaging in musculoskeletal system pathologies with special attention to trauma and neoplasms. Application of plain radiography in inflammatory bone pathology. Place of US scan and MRI in soft tissue and joint pathology.

### **Central Nervous System**

Identification of intra-cranial haemorrhage in a CT scan of brain.

Role of CT and MRI in stroke, brain and spinal cord neoplasms and inflammatory pathologies such as meningitis and encephalitis. The concept of blood brain barrier disruption and use of contrast media in brain imaging.

### **Endocrine system**

Utilization of imaging in thyroid, parathyroid, pituitary and adrenal glands. Identification of common endocrine pathology on ultrasound, nuclear imaging, CT and MRI.

Forensic radiology [This is undertaken in 4<sup>th</sup> year under Doctor in Society stream]

Application of imaging in forensic medicine; Special emphasis on identification of living and dead, trauma, child abuse.

Students should have observed the following procedures

1. Patients undergoing plain radiography and how the x rays are processed
2. Ultrasound examinations and ultrasound guided aspirations and drainage procedures

3. CT examinations of head, body and extremities
4. MRI of brain, spine and knee joints
5. Image guided biopsies of liver, thyroid, breast etc
6. Angiography and basic endovascular and non-vascular radiological interventional procedures.
7. Instructions to radiographers, nurses and other health care workers on preparation of patients for radiological procedures

Student should be able to perform the following skills independently (at the does level)

1. Obtaining the consent from patients who undergo radiological investigations.
2. Measurement of cardiothoracic ratio on chest x-ray
3. Identification of a pleural effusion, pneumothorax, consolidation, collapse, heart failure, pulmonary or mediastinal mass on chest x-ray
4. Identification of calculi on x ray kidney-ureter-bladder and differentiate those from phleboliths
5. Identification of free intra peritoneal air, intestinal obstruction on x ray abdomen
6. Identification of intracranial haemorrhage, infarct or a space occupying lesion on CT brain
7. Preparation of patients for radiological investigations and how to explain those to patients
8. Divulging information to the patients or their families regarding the outcome of radiological investigations
9. Completion of requisition forms available for radiological examinations.

**Teaching /Learning Methods:** Lectures  
Clinical Work / Skills Training

Details:

Pre-Test	100%
Post-Test	
Maintenance of log book and Assignments done during the appointment	50% 50%

**Recommended Reading and/ or References and/ or Prescribed Texts**

1. Lecture notes on Radiology by Pradip R. Patel, Wiley-Blackwell Publication
2. Radiology and Imaging for Medical Students by David Sutton, Churchill Livingstone Publication
3. Interpretation of Chest Radiographs for Medical Students by Dr P B Hewavithana

<b>Term</b>	Clinical Curriculum year 3	
<b>Course Code</b>	MED4CLIN02	
<b>Course Name</b>	Clinical stream 11 (Laboratory and Transfusion Medicine)	
<b>Credit Value</b>	Non-Credit	
<b>Prerequisites</b>	Pass second MBBS examination	
<b>Core/Optional</b>	Core	
<b>Hourly Breakdown</b>	Lectures/Demonstrations	Student Assignments
	15	45
<b>Aim(s):</b>		
To provide knowledge and skills on laboratory-based medicine and transfusion medicine as an essential component of diagnosis and management of patients and lay the foundation for further training in clinical pathology and transfusion Medicine.		
<b>Intended Learning Outcomes:</b>		
At the end of this appointment, the students should be able to		
<ul style="list-style-type: none"> <li>• Describe and follow universal precautions and basic laboratory safety procedures.</li> <li>• Identify routine haematological, biochemical, microbiological, histological and cytological samples received in the laboratory and the tests performed.</li> <li>• Demonstrate the ability to properly collect and transport clinical specimens for laboratory testing.</li> <li>• Describe the indications for requesting laboratory tests and demonstrate the ability to interpret results in relation to the clinical presentation.</li> <li>• Identify common errors in sample collection, their consequences and preventive measures.</li> <li>• Describe the different functions of the blood bank in patient management including blood donation procedure, clinical use of blood components and investigation/management of transfusion reactions and haemolytic disease of the newborn.</li> <li>• Demonstrate the ability to perform blood grouping and cross-matching</li> </ul>		
<b>Course content/Course description:</b>		
<b>General</b> - universal precautions and laboratory safety, venepuncture, sample collection, errors in collection		
<b>Haematology</b> - Basic haematology blood tests (Full blood count, Blood picture, ESR, coagulation), indications for requesting, interpretation of results and identifying possible collection and analytical errors. Special tests in haematology - G6 PD screening, Reticulocyte count, Osmotic fragility test, Bone marrow aspiration and trephine biopsy, Protein and Haemoglobin Electrophoresis, their indication for requesting, sample collection and interpretation of results.		

**Biochemistry/chemical pathology** - Routine biochemical tests - Plasma glucose (RBS, FBS, PPBS, OGTT), Liver function tests, Renal function tests, Bone profile (calcium, phosphate magnesium, alkaline phosphatase), Serum electrolytes, Lipid profile, Urine full report, CSF full report, their indication and sample collection. Interpretation of abnormal test results in renal diseases, urinary tract infections and liver diseases. Bedside tests used in patient care and interpretation. Biochemical investigations performed in reference laboratories and their indications identifying possible collection and analytical errors.

**Histopathology/Cytopathology** - Histopathological and cytopathological assessment of samples, indication for requesting, sample collection and transportation. Processing of histopathological and cytopathological specimens. Rapid diagnostic tests. Fine needle aspiration (FNAC)

**Microbiology** - Basic functions of a microbiology laboratory. Sample collection, storage and transportation of samples sent for bacteriology, virology, mycology, serology and molecular biological investigations. Urine, blood, sputum, pus/wound swabs and stool cultures and antibiotic sensitivity testing. Interpretation of common culture reports in relation to infection, colonization and contamination. Infection control.

**Transfusion Medicine** - Blood donation and screening procedure. Blood grouping and cross matching. Blood component preparation, storage and clinical use. Blood transfusion - indications, procedure, risks and complications. Haemolytic disease of the newborn - pathological basis, prenatal compatibility testing Investigation of transfusion reaction and haemolytic disease of the new born.

**Teaching /Learning Methods:**

Lectures, Demonstrations, Student Assignments

**Assessment Strategy:**

End of Appointment Assessment -	Formative Assessment OSPE
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**Recommended Reading:**

1. Clinical Chemistry by William Marshall
2. Hoffbrand's essential Haematology

<b>Course Code</b>	ClinicalCurriculum YEAR 3	
<b>Course Name</b>	MED4CLIN03	
<b>CourseName</b>	Clinical Stream (Public Health Practice)	
<b>Prerequisites</b>	2 MBBS	
<b>Core/Optional</b>	Core	
<b>Hourly Breakdown</b>	Field Clinical Practice	Family study
	100	50
<b>Aim(s):</b>		
<p>To provide the desired knowledge, skills and attitudes to practice as a first contact doctor and lay the foundation for further training in the field of community medicine/public health.</p>		
<b>Intended learningoutcomes:</b>		
<p>On successful completion of the public health practice program, students should be able to</p> <ol style="list-style-type: none"> <li>1. describe the organizational structure of public health system in Sri Lanka</li> <li>2. describe the duties and responsibilities of the health care personnel at district and divisional levels - Medical Officer of Maternal and Child Health (MO/MCH), Regional Epidemiologist (RE), Medical Officer of Non-Communicable Diseases (MO/NCD), Medical Officer of Health (MOH), Public Health Nursing Sister (PHNS), Supervising Public Health Midwife (SPHM), Public Health Midwife (PHM), Supervising Public Health Inspector (SPHI), Public Health Inspector (PHI)</li> <li>3. describe the reproductive, maternal, newborn, child, adolescent and youth health</li> <li>4. services provided at the feild level</li> <li>5. describe the activities carried out to ensure occupational safety and health</li> <li>6. describe the activities carried out to ensure food, water and environmental sanitation</li> <li>7. describe the activities carried out to prevent the spread of infections</li> <li>8. describe the system of record keeping at the field level</li> <li>9. describe the community health services for elderly care</li> <li>10. describe the public health services available at divisional and tertiary care hospitals</li> <li>11. critically appraise public health programmes and the work of public health workers of the community</li> </ol>		
<b>Course content/Coursedescription:</b>		
<p>The “Field clinical Practice” module includes following field visits/ appointments</p> <ul style="list-style-type: none"> <li>• Medical Officer of Health Office &amp; Role of MOH</li> <li>• Supervisory Public Health Inspector, Supervisory Public Health Nursing Sister, Supervisory Public Health Midwife</li> </ul>		

<ul style="list-style-type: none"> <li>• Public Health Midwife</li> <li>• Public Health Inspector</li> <li>• Field polyclinic</li> <li>• Sewerage disposal</li> <li>• School Medical Examination</li> <li>• Food sanitation (Food establishment)/ Food sampling</li> <li>• Factory visit</li> <li>• Home for the Elders</li> <li>• Divisional Hospital (Verifiable hospital)</li> <li>• Health promotion setting (Mother supportive group/ HP School / NCD Prevention, etc.)</li> <li>• Regional director of health service office / Regional Epidemiologist/Medical Officer -Maternal and Child Health</li> <li>• Community dental clinic</li> <li>• Digana Rehabilitation Hospital</li> <li>• LMC / Yowun piyasa / Mithuru Piyasa/MRO</li> <li>• Community diagnosis through a survey (1 week)</li> </ul>	
<p><b>Teaching /Learning Methods:</b> Field ClinicalPractice</p>	
<p><b>Assessment Strategy: End appointment</b></p>	
OSPHE 1 hr.	
<p><b>Recommended Reading and/ or References and/ or PrescribedTexts</b></p> <ol style="list-style-type: none"> <li>1. Ministry of Health Annual Health Bulletin of SriLanka</li> <li>2. Epidemiological Unit, Ministry ofHealth – Guidelines, publications and circulars</li> <li>3. Family Health Bureau, Ministry of Health – Guidelines, Publications and circulars</li> <li>4. HMHSD Herath: Occupational &amp; Environmental health, Ministry of Health, Sri Lanka.</li> <li>5. Family health Bureau, Ministry of Health – Maternal care package: A guide to field healthcare workers</li> <li>6. MinistryofHealth -Public Health Inspector Manual</li> </ol>	

<b>Term</b>	Clinical Curriculum
<b>Course Code</b>	MED5CLIN4
<b>Course Name</b>	Clinical Stream (Family Medicine)
<b>Credit Value</b>	1 credit for theory module and 1 credit for clinical appointment under Hospital Community Stream (HCT), where skills training occurs
<b>Prerequisites</b>	Pass second MBBS examination
<b>Core/Optional</b>	Core
<b>Hourly Breakdown</b>	Clinical Work
	50
<b>Aim/s:</b>	
To provide students the opportunity to learn the principles of Family Medicine in a community-based clinical context.	
<b>Intended learning outcomes:</b>	
On successful completion of the Family Medicine program, students should be able to:	
<ol style="list-style-type: none"> <li>1. Demonstrate patient-centred care that is compassionate, appropriate, and effective for the prevention and management of common health problems and the promotion of health.</li> <li>2. Demonstrate knowledge of common medical problems encountered in a family practice</li> <li>3. Demonstrate the ability to identify red flags of common clinical presentations and make appropriate referrals</li> <li>4. Demonstrate the ability manage common medical problems</li> <li>5. Demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.</li> <li>6. Demonstrate a commitment to carrying out professional responsibilities with adherence to ethical principles and an understanding of the legal implications of practice.</li> <li>7. Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.</li> <li>8. Demonstrate the ability to engage as a member, manager and a leader, in an inter-professional team, in a manner that optimizes safe, effective patient/ population-centred care.</li> </ol>	



**Course content/Course description:**

Through lectures and self-directed learning, the students will be trained to:

perform a patient-centred interview that includes exploration of different causes of common clinical presentations to a family medicine practice and perform a focused physical exam that differentiates different causes of common clinical presentations, identify symptoms and signs by probing for red flags of potentially serious causes that require urgent emergency care, stabilization and timely referral, propose an initial management plan for a patients which includes an appropriate and timely investigation of urgent potentially serious conditions, propose a surveillance and management plan for primary and secondary prevention of common clinical problems encountered in family practice, counsel patients and family on common clinical scenarios such as contraception and immunization and organize follow up care of patients referred back from following specialist care.

**Teaching /Learning Methods:**

Lectures, Clinical Work, Self-Directed Learning

**Assessment Strategy: End Semester**

**Recommended Reading and/ or References and/ or Prescribed Texts**

1. Davidson's Principles and Practice of Medicine  
Nicki R. Colledge, Brian R. Walker and Stuart H. Ralston.  
Churchill Livingstone
2. Kumar and Clark's Clinical Medicine  
Parveen Kumar, Michael Clark.  
Saunders Ltd.
3. Hutchison's Clinical Methods  
Michael Glynn & William M Drake.  
Saunders Ltd.
4. Snakes, snake bites and envenoming in Sri Lanka  
Hand book on management of snake bite  
SAM Kularatne
5. Organophosphorus self- poisoning, epidemiology and management  
IndikaGawarammana
6. Management of self-poisoning with household and industrial chemicals.  
IndikaGawarammana
7. Management of self-poisoning with pharmaceutical agents.  
IndikaGawarammana
8. A guide to management of medical emergencies  
P. L. Ariyananda, G. Hettiarachchi, T. P. Weeraratna

<b>Term</b>	Y3/T7 & 8
<b>Course Code</b>	MED4 CLIN05
<b>Course Name</b>	Clinical Stream (Forensic Medicine)
<b>Credit Value</b>	Non- Credit
<b>Prerequisites</b>	2 <sup>nd</sup> MBBS
<b>Core/Optional</b>	Core
<b>Hourly Breakdown</b>	Clinical work/autopsy examinations
	50 hrs.
<b>Course Aim:</b> To identify and respond to medico-legal issues at the level of a medical practitioner and to facilitate further training in Forensic Medicine.	
<p><b>Intended Learning Outcomes:</b> The student should be able to</p> <p>On successful completion of the program, the students should be able to:</p> <ol style="list-style-type: none"> <li>1. Manage a person for medico-legal purposes by way of obtaining a history, examining, performing relevant investigations, referring and reviewing the patient, completing a Medico-legal examination form and writing a Medico-legal report.</li> <li>2. Conduct post-mortem examinations under supervision and prepare a post-mortem report.</li> <li>3. Identify clinical /post-mortem cases that need to be referred to a specialist in forensic medicine.</li> <li>4. Evaluate skeletal productions to determine general and specific identities.</li> <li>5. Use laboratory and other diagnostic services effectively for forensic investigations, maintaining the chain of custody.</li> <li>6. Maintain medico-legal records for future reference.</li> <li>7. Communicate effectively and honestly with next of kin, and other medical and non-medical personnel.</li> <li>8. Develop reasoning skills to solve medico legal and ethical issues.</li> <li>9. Ensure safe practice in relation to conducting autopsies, handling blood products, body fluids and tissues.</li> <li>10. Accustom themselves to the processes of auditing and peer review.</li> <li>11. Work in a team in different capacities and ensure high standards of professionalism.</li> </ol>	
<b>Course content/Course description:</b>	
<p><b><i>Clinical Forensic Medicine</i></b></p> <p>The procedure in investigating a crime, taking a history and examining patients for medico-legal purposes, documenting, interpreting, forming an opinion and presenting observations in a way that is required by the court, independently. Provide constructive criticism during student presentations, professionalism, 'safe practice'</p>	

### **Traumatology and Forensic Pathology**

The procedure and legal background of inquests, autopsies, exhumations and disposal of the dead under different circumstances. The Pathological and physiological response of the body to trauma

The law related to medical practice, the role of a medical officer and the procedure to be followed at a scene of crime and scene of a mass disaster. Know the reasons for a Negative autopsy

Perform medico-legal autopsies under supervision, identify the different changes that occur after death, identify artefacts, injuries, and pathological changes and interpret such for medico-legal purposes.

Apply principles of pathology, anatomy etc., in clinical and autopsy practice.

Formulate an evidence-based opinion independently by application of logic, critical thinking, and problem-solving skills

### **Forensic Anthropology**

The basic principles of Forensic Anthropology with emphasis on the identification of human bones and determination of sex, age, and other relevant medico-legal issues.

### **Forensic Science and Laboratory Practices**

Collect and transport specimens from the living and the dead under supervision while being aware of the importance of protecting one's self and others from disease and injury and transmission of infections and diseases.

The basic principles of Forensic Radiology and Forensic Photography

### **Communication Skills in Forensic Practice**

The process of documentation, storage of information effectively and confidentially, and maintaining chain of custody, court procedures, and how expert testimony is given in courts

Write referrals in a clear and concise manner, Present information appropriate to the needs of the audience, verbally and in writing, in a clear and concise manner

### **Ethics, Law, and Education in Forensic Practice**

Ethical issues which occur in the wards.

Read the scientific literature in order to cultivate the habit of keeping abreast with recent developments in the field, critically evaluate evidence in the literature, determine their value for medical practice and be open to adopt new methods/practices.

The healthcare rights of patients, ethical aspects of clinical practice and research, The legal system of Sri Lanka with special reference to the practice of medicine

**Teaching /Learning Methods:** Clinical Work

<b>Assessment Strategy:</b>	
End appointment Evaluation (Pass/Fail) 100%	OSPE Log Book
<b>Recommended Texts</b>	
<ol style="list-style-type: none"> <li>1. Shepherd R. Simpson's Forensic Medicine. London: Oxford University Press</li> <li>2. Knight B, Saukko P. Knight's Forensic Pathology 3rd ed. Oxford University Press. London.</li> <li>3. DiMaio D, DiMaio VJ. Forensic Pathology. CRC press. London</li> <li>4. Gordon I, Shapiro HA, Berson SD. Forensic Medicine. A guide to principles. Churchill Livingstone. New York</li> <li>5. Fisher RS, Petty CS. Forensic Pathology. A handbook for pathologists. Castle house Publications. London</li> <li>6. Mason JK, Purdue BN. The pathology of trauma. Oxford University Press. London.</li> <li>7. Fisher RS, Spitz WU. Medicolegal investigation of death- Guidelines for the application of pathology to crime investigation. Charles C Thomas USA.</li> <li>8. Mant AK. Taylor's principles and practice of Medical jurisprudence 13th ed. Churchill Livingstone. New Delhi</li> <li>9. Babapulle CJ. Clinical and Forensic Toxicology</li> <li>10. Niriellage C. Textbook of clinical forensic medicine and forensic pathology.</li> <li>11. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.1-Medicolegal aspects of injuries. Colombo: Primal printers.</li> <li>12. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.2-Forensic pathology and Forensic Science.Colombo: Primal printers.</li> <li>13. de Alwis L.B.L. Lecture notes in Forensic Medicine vol.3-Forensic toxicology and vol. 4 Medical Ethics, Law and Psychiatry. Colombo: Primal printers,</li> <li>14. Jenny C. Child Abuse and neglect-Diagnosis, treatment and evidence. Rhode Island: Saunders</li> <li>15. Byers SN. Introduction to Forensic Anthropology. Pearson.</li> <li>16. Dolinak D, Matshes E, Lew E. Forensic Pathology- Principles and Practice. USA.</li> </ol>	

<b>Semester</b>	Y4S1		
<b>Course Code</b>	MED4247		
<b>Course Name</b>	Integrated Applied Medicine 11		
<b>Credit Value</b>	1 (Notional 50)		
<b>Prerequisites</b>			
<b>Core/Optional</b>	Core (Supplementary)		
<b>Hourly Breakdown</b>	Student Guided- Presentations	Independent Learning	Notional
	20	30 (20+ 10 SGL)	50
<b>Aim(s):</b>	To facilitate transition from basic and applied sciences to hospital-based training by reinforcing relevance to clinical practice, management and encouraging students to engage in active learning and facilitate critical thinking.		
<b>Intended learning outcomes:</b>	At the end of this module, the students should be able to <ul style="list-style-type: none"> <li>• apply the relevant Basic and applied science basis involved in diseases. And improve the clinical reasoning skills</li> <li>• apply the scientific principles in the management, prevention and legal aspects of diseases.</li> <li>• Simulate clinical practices</li> <li>• Foster team work and communication</li> </ul>		
<b>Course content/Course description:</b>	Clinically relevant basic and applied science and clinical knowledge on concepts of common clinical conditions Cardiovascular Diseases, infectious diseases, critical illness, diabetes mellitus, emergency care, injury and rehabilitation, health in aging and dignified dying.		
<b>Teaching /Learning Methods:</b>	Lectures, Student Assignments, Guided-Student Presentations		
<b>Assessment Strategy:</b>	Formative Assessment 100%		
Details	MCQ	OSPE	
	40%	60%	
<b>Recommended Reading:</b>	<ol style="list-style-type: none"> <li>1. Snell. R. S. Clinical Anatomy by Regions, Latest Edition</li> <li>2. Barrett. K. E. et al. Ganong's Review of Medical Physiology, Latest Edition</li> <li>3. Murray. R. K. et al. Harper's Illustrated Biochemistry. Latest Edition</li> <li>4. Colledge. N. R. et al. Davidson's Principles &amp; Practice of Medicine. Latest Edition</li> <li>5. Kumar P and Clark C. Clinical Medicine Latest Edition</li> <li>6. Kumar V et al., Robbins Basic Pathology Latest Edition</li> </ol>		

**Year 4 – Clinical and Year 5 – Professorial**

	<b>Code</b>	<b>Module</b>	<b>Credits</b>	<b>Clinical Hrs</b>	<b>Lectures</b>
Y3, Y4 & Y5	MED5CLIN06	Clinical Stream 1 (Medicine) Internal Medicine and related sub specialties (including Cardiology, Dermatology, Neurology and Venereology and Sexually Transmitted Infections, Respiratory Medicine, Nephrology, Neurology, Rheumatology	28	947	60+10
	MED5CLIN07	Surgery and related sub specialties (including Emergency Medicine, Ophthalmology, Orthopaedic Surgery, Oto-rhino-laryngology, Neurosurgery	30	1181	86
	MED5CLIN08	Obstetrics & Gynaecology	15	556	55
	MED5CLIN09	Paediatrics	15	556	26+23
	MED5CLIN10	Psychiatry	10	362	35
	MED5CLIN11	Anaesthesia and Critical Care	6	90	34
	MED 4246	Integrated Applied Medicine	1	15	
	MED5CLIN12	PPD	1	10	

<b>Year 5</b>	Clinical Curriculum
<b>Course Code</b>	MED5CLIN06
<b>Course Name</b>	Clinical Stream (Medicine)
<b>Credit Value</b>	
<b>Prerequisites</b>	Pass 2 <sup>nd</sup> MBBS,
<b>Core/Optional</b>	Core

Hourly Breakdown	Lectures	Clinical Work	Independent Learning
	70	947	

**Aim(s):** To provide the desired knowledge, skills and attitudes to practice as a first contact doctor and to lay the foundation for further training in relation to the specialty of Clinical Medicine.

**Intended learning outcomes:**

On successful completion of the Clinical Medicine program, students should be able to:

1. demonstrate patient-centred care that is compassionate, appropriate, and effective for the prevention and management of health problems and the promotion of health.
2. demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioural, sciences, as well as the application of this knowledge to patient care.
3. demonstrate the ability to continuously improve patient care based on scientific evidence, constant self-evaluation and life-long learning.
4. demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.
5. demonstrate a commitment to carrying out professional responsibilities with adherence to ethical principles and an understanding of the legal implications of practice.
6. demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.
7. demonstrate the ability to engage as a member, manager and a leader, in an inter professional team, in a manner that optimizes safe, effective patient/ population-centred care.
8. demonstrate the qualities required to sustain lifelong personal and professional growth.
9. provide appropriate medico-legal services where required.

All above competencies would be achieved in relation to patient's health including;

1. Routine health care and health promotion.
2. Emergency care including resuscitation.
3. Management and prevention of communicable (congenital or acquired

infections) and non-communicable (genetic, psychological, immunological, metabolic, nutritional, degenerative, neoplastic, developmental, iatrogenic and traumatic) diseases.

### **Course content/Course description:**

#### ***Foundation in Medicine***

History taking, general examination, and examination of all the systems. Principles of management in medical emergencies, intermediate and long-term medical problems, multidisciplinary medical problems, Clinicopathological correlation of the diseases. Pharmacological effects on systems. Pharmacological, nonpharmacological and multidisciplinary management of diseases. Recent advances in medicine. Cultivating the concepts of research.

#### ***Emergencies in Medicine***

Diagnosing and management of emergencies such as anaphylaxis, Left ventricular failure, acute coronary syndrome, Cerebral vascular accident, organ failure, shock, poisoning, snake bite and other envenomation, endocrinological, rheumatological, haematological, metabolic, infective origin and multisystemic and other emergencies.

#### ***Cardiology***

Symptoms and signs in cardiovascular disorders, Examination of cardiovascular system, when to request appropriate investigations such as Electrocardiography, Chest X-ray in cardiovascular system. Exercise Electrocardiography & Echocardiography. Interpretation of investigations such as Electrocardiography, Chest X-ray and other common cardiovascular investigations. Common Valvular disorders, Common arrhythmias, Hypertension, Hypotension, Hyperlipidaemia, Rheumatic fever, ischemic heart diseases / Stable angina, Acute coronary syndrome, Heart failure, Infective endocarditis, Pericardial disease, Cardiomyopathies, Heart Failure (Clinicopathological correlation) and other disease conditions which can cause cardiovascular diseases. Newly emerging cardiovascular diseases and new trends used in day today practice.

#### ***Respiratory Medicine***

Symptoms and signs in Respiratory disorders, Examination of Respiratory system, when to request appropriate investigations such as Chest X-ray, Arterial blood gases, Lung function tests and other important investigations in respiratory disorders and interpretation of them. Common disease conditions in respiratory system including Bronchial asthma, Lung cancer, Pneumonia, Bronchiectasis, Chronic Obstructive Pulmonary Diseases, Tuberculosis, diseases of other systems which can affect the respiratory system and emerging respiratory system disorders.

#### ***Neurology***

Symptoms and signs in Neurological disorders, Examination of Neurological system, when to request appropriate investigations such as Electroencephalography, Electromyography, Computerized Tomography (CT) Scan, Magnetic Resonance Imaging



(MRI) Scan, other relevant blood investigations and any other relevant investigation and interpretation of them. Neurological diseases including Epilepsy, Headache, Cerebrovascular disease, Tumours, Coma, Disorders of Spinal cord, Neuropathies, Neuromuscular junction disorders and Myopathies, Higher functions, Central Nervous System infections, Management of muscle disorders, Myasthenia gravis and the diseases of other systems which can have impacts on the nervous system and newly emerging neurological disorders.

### ***Endocrine and Metabolic Disorders***

Symptoms and signs in Endocrinological disorders, relevant examination of Endocrinological disorders, when to request appropriate investigations and interpretation of them. Diseases of the Endocrinological system including Hypopituitarism & hyperpituitarism, Thyroid Diseases, Hypoparathyroidism/hyperparathyroidism, Hypoadrenalism & hypoadrenalism, Diabetes mellitus, Obesity and Metabolic syndrome, miscellaneous endocrine disorders, endocrinological effects of the diseases of other systems and emerging endocrinological disorders. Tumours of the endocrine system, endocrine causes of hypertension, congenital endocrine diseases, diseases of the adrenal glands, endocrinological diseases related to reproductive health.

### ***Rheumatology and Musculoskeletal Disorders***

Symptoms and signs in rheumatological disorders, relevant examination of muscular skeletal system, when to request appropriate investigations and interpretation of them. Rheumatological and musculoskeletal diseases including rheumatoid arthritis, systemic lupus erythematosus, antiphospholipid syndrome, scleroderma, other collagen vascular diseases, vasculitides, seronegative arthritides, osteomalacia, osteoporosis, arthritic conditions due to infections, other nonspecific arthritic conditions, other diseases which can have effects on the muscular skeletal system and emerging rheumatological disorders.

### ***Gastroenterology and Liver Disease***

Symptoms and signs in Gastroenterological and liver disorders, relevant examination of gastrointestinal system and liver, when to request appropriate investigations and interpretation of them. Gastroenterological and liver diseases including clinical and biochemical approach to liver diseases, cirrhosis, complications of cirrhosis, hepatitis A, B, C and D, malabsorption, chronic diarrhoea, analysis of jaundice, diseases of other systems which can have impacts on the gastrointestinal system and liver and emerging gastrointestinal and liver diseases.

### ***Nephrology***

Symptoms and signs in renal disorders, relevant examination, when to request appropriate investigations and interpretation of them. Renal diseases including overview of glomerular diseases, nephritic and nephrotic syndromes, acute renal failure, chronic kidney disease, renal replacement therapy, diabetic nephropathy, urinary tract infections, renal calculi, haematuria and proteinuria, clinical aspects of

urinary tract, screening for renal disease, impacts of the diseases of other systems on kidneys and emerging renal diseases

### ***Snake Bite and Poisoning***

How to recognize a snake bite, or a suspected poisoned patient. Snake bites, and envenomation, stings & other animal bites, overview of poisoning in Sri Lanka, management of organophosphate poisoning, management of yellow oleander poisoning, management of analgesic poisoning, self-poisoning, effects of common poisons on the central nervous system and other emerging poisons.

### ***Dermatology***

Common dermatological problems and their management, dermatological manifestations of systemic diseases, recognition and management of dermatological emergencies, new and emerging dermatological diseases.

### ***Sexually Transmitted Diseases***

Common Sexually Transmitted infections, human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS), genital manifestations of systemic diseases other emerging sexually transmitted diseases.

### ***Geriatric Medicine***

Total assessment of a geriatric patient with special attention to cognitive functions, Activities of Daily Living and Social aspects. Common diseases in elderly. Treatment strategies, communication and Pharmacotherapy in elderly. Awareness of welfare programmes commonly available for elderly. Current and future problems of managing elderly.

### ***Infectious diseases***

Diagnosis, examination, investigation of a patient suspected to have an infection. Interpretation of results of the investigations. Common infections due to bacteria, viruses, fungi including dengue fever, leptospirosis, malaria, rickettsial infections, brucellosis, tuberculosis, typhoid fever and other emerging infections. Management of septicaemia and complications

### ***Haematology***

Clinical manifestations of haematological disorders and relevant investigations. Common haematological diseases including anaemia, thrombocytopaenia, haematological malignancies, myeloproliferative diseases, lymphomas, impacts of other systemic diseases on the haematological system, basic management concepts and new trends in the management of haematological diseases.

### **Important emerging diseases and developments.**

#### ***Practical procedures***

Procedures and skills which the student should be able to perform independently.

- Ability to elicit a complete history and carry out a complete general examination along with examination of systems.
- Use of stethoscope, tongue depressor, ophthalmoscope, auriscope and thermometer.
- Measuring the peak flow rate, connecting an ECG monitor and doing a 12 lead ECG and performing of urine ward test.
- Monitoring of blood pressure, measurement of PCV using microhematocrit method, measurement of whole blood clotting time, preparation of a blood film, grouping of blood and testing, setting up blood transfusion and venesection. Giving intravenous, intramuscular, subcutaneous injections and giving antibiotics.
- Inserting an intravenous cannula and setting up an intravenous infusion.
- Measurement of anthropometry.
- Inserting a nasogastric tube, urinary catheterization, and nebulization, identification of types of insulin and usage of injection devices, measurement of capillary blood glucose.
- Requesting appropriate radiological investigations and interpretation, writing of patient management plan, maintaining of Glasgow Coma Scale chart and maintaining a fluid balance chart and a temperature chart.
- Arterial puncture for blood gas analysis.
- Cardiopulmonary resuscitation, bag and mask ventilation, external chest compression and endotracheal intubation.
- Identifying the contents of an emergency chart, using adrenaline in anaphylaxis, performing of Heimlich manoeuvre.
- Filling of diagnosis cards, writing up medical certificates, death certificates and medico-legal documents.
- Confirmation of death and declaration of death forms according to international classification of diseases.
- Rehabilitation in general.
- Communication skills such as breaking bad news, updating relatives, writing referral letters, writing case summary and oral presentation of cases.
- Communication with special groups such as mentally ill, children, terminally ill, HIV patients, drug addicts, alcoholics, and aggressive patients.

**Procedures which the student should be able to perform under supervision (shows how)**

- Use of nasal speculum and laryngeal mirror.
- Estimation of ESR and haemoglobin and collection of samples for microbiological investigations.
- Performing lumbar puncture, pleural aspiration and peritoneal tap.

**Procedures which the student should have observed (knows)**

Cardioversion and defibrillation, basic physiotherapy, high bowel washout, peritoneal dialysis, gastric lavage, aspiration of joint and intra-articular injections, insertion of central venous line, haemodialysis, biopsy of skin, liver, kidney, pleura and bone marrow, artificial ventilation, endoscopy, ultrasound, CT and MRI scanning, contrast studies of the GI and GU tract, EMG, EEG and NCS, echocardiogram, exercise ECG, coronary angiogram, Holter monitoring, spirometry.

**Teaching /Learning Methods:**

Lectures, Clinical Work

**Assessment Strategy:**

In Course Assessment 20%		End Course Assessment 80%			
Details: OSCE	20%	Theory 40%		Clinical 40%	
		Common Paper (MCQ+SBA)	SEQ/Long Essay	Long Case	Short Cases
		20%	20%	20%	20%

**Recommended Reading and/ or References and/ or Prescribed Texts**

- Davidson's Principles and Practice of Medicine. Nicki R. Colledge, Brian R. Walker and Stuart H. Ralston. Churchill Livingstone
- Kumar and Clark's Clinical Medicine. Parveen Kumar, Michael Clark. Saunders Ltd.
- Hutchison's Clinical Methods. Michael Glynn & William M Drake. Saunders Ltd.
- Examination in Clinical Medicine. Chandrika Jayasinghe, Tha-Ro publishers.
- Ageing Gracefully. Chandrika Jayasinghe. Tha-Ro publishers
- Systemic Lupus Erythematosus. Chandrika Jayasinghe. Tha-Ro publishers
- Rheumatoid arthritis. Chandrika Jayasinghe. Tha-Ro publishers
- Scleroderma. Chandrika Jayasinghe. Tha-Ro publishers
- Snakes, snake bite and envenoming in Sri Lanka. Hand book on management of snake bite. SAM Kularatne
- Organophosphorus self-poisoning, epidemiology and management. IndikaGawarammana
- Management of self-poisoning with household and industrial chemicals. IndikaGawarammana
- Management of self-poisoning with pharmaceutical agents. IndikaGawarammana
- A guide to management of medical emergencies. P. L. Ariyananda, G. Hettiarachchi, T. P. Weeraratna

<b>Year 5</b>	Clinical Curriculum		
<b>Course Code</b>	MED5CLIN07		
<b>Course Name</b>	Clinical Stream (Surgery)		
<b>Credit Value</b>			
<b>Prerequisites</b>	Pass 2 <sup>nd</sup> MBBS examinations		
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	Lectures	Clinical Work	
		1085	
<b>Aim(s):</b>			
To provide the desired knowledge, skills and attitudes to practice as a first contact doctor and to lay the foundation for further training in relation to the specialty of surgery.			
<b>Intended learning outcomes:</b>			
On successful completion of the Surgery program, students should be able to:			
<ol style="list-style-type: none"> <li>1. demonstrate patient-centred care that is compassionate, appropriate, and effective for the prevention and management of health problems and the promotion of health among all age groups in relation to surgical conditions, both emergency and non-emergency situations.</li> <li>2. demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioural sciences, as well as the application of this knowledge to patient care among surgical patients in all age groups.</li> <li>3. demonstrate the ability to continuously improve patient care based on scientific evidence, constant self-evaluation and life-long learning</li> <li>4. demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.</li> <li>5. demonstrate a commitment to carrying out professional responsibilities with adherence to ethical principles and an understanding of the legal implications of practice</li> <li>6. demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.</li> <li>7. demonstrate the ability to engage as a member, manager and a leader, in an inter professional team, in a manner that optimizes safe, effective patient/ population-centred care.</li> <li>8. demonstrate the qualities required to sustain lifelong personal and professional growth.</li> <li>9. provide appropriate medico-legal services where required.</li> </ol>			
above competencies should be achieved in relation to patients, in all age groups.			

1. Routine health care and health promotion that includes management of surgical conditions in all age groups.
2. Emergencies including resuscitation and provision of emergency care.
3. Management and prevention of communicable (congenital or acquired infections) and non-communicable (genetic, psychological, immunological, metabolic, nutritional, Neoplastic, degenerative, developmental, iatrogenic and trauma) diseases involving respiratory, cardiovascular, nervous, gastrointestinal, musculoskeletal, genitourinary and integumentary systems.

**Course content/Course description:**

***Foundation in surgery***

Discipline of Surgery, Asepsis and Surgery, Metabolic Response to Trauma, Soft Tissue infections, Blood Loss, Dehydration, Sepsis, Principles of Antibiotic use in Surgery, Live & Non-Living Implants, Blood & Blood products use, Outline of Surgical Oncology, Surgical audit, Transplantation, surgical instruments, Basic surgical skills, Surgical haemostasis, Minimally invasive surgery, Recent Advances in Surgery.

***Peri operative Care***

Anaesthesia and Surgery, Care of the Critically Ill.

***Trauma***

Principles of Trauma care, The care of multiply Injured Patient, First Aid, Disaster management, Initial Management of Skeletal Injuries, Principle of definitive Management of Skeletal Injuries, High velocity missile/Blast injury.

***Orthopaedics***

Introduction to Orthopaedics, Common Orthopaedic diseases affecting in Children, Spinal Cord Injuries, Acute and chronic osteomyelitis, Infective arthritis, Other conditions in joints including joint replacement, Sport injuries, Diagnosis and treatment of congenital deformities, Tumours arising from bones and related structures. Methods of treatment of fractures.

***Skin and Soft Tissue Conditions***

Skin and Soft Tissue Infections, Trauma, Tumours (true and haematomatous lesions), Cysts and Degenerative Conditions

***Breast and Endocrine Organs***

Infections of the breast both acute and chronic, Developmental anomalies, Benign diseases of the breast, Carcinoma of the breast, Disease of the male breast, Breast augmentation/reduction and reconstruction.

Surgical conditions affecting the thyroid gland, Parathyroid gland, Adrenal gland, Pancreas. Hormone secreting tumours, Multiple endocrine neoplasia, the use of radioisotopes in the management of endocrine disorders.

### **Otorhinolaryngology (Ear Nose and Throat)**

Clinical Anatomy and Physiology of Ear, Nose, Sinuses, Pharynx, Larynx and oesophagus. Infective, neoplastic and traumatic conditions of ear, nose, sinuses, pharynx, larynx and oesophagus including Nasal allergy, sinusitis and complication, Secretary otitis media, acute otitis media, Chronic suppurative otitis media, Balance / vertigo: Benign paroxysmal positional vertigo, Meniere's Disease, Disease of External ear/Middle, Epistaxis.

### **Cardiothoracic Surgery**

Penetrating and blunt trauma to the chest and its content-with an emphasis on Fracture ribs/ flail chest, Pneumothorax, Cardiac injury/Tamponade. Pleural/Pericardial effusions, Surgical intervention in inflammatory lung disease, Bronchial carcinoma, Surgical considerations in congenital and acquired heart diseases including ischaemic heart disease, Cysts and tumours of the mediastinum.

### **Vascular Surgery**

Acute arterial embolism, Chronic occlusive arterial disease, Haemangiomas, Arteriovenous fistulae, Venous Disorders including varicose veins, Venous anomalies, Deep vein thrombosis/postphlebiticlimb/pulmonary embolism, Venous ulcers. Lymphedema, Gangrene, Amputations, Diagnostic procedures in arterial and venous diseases.

### **Gastrointestinal Surgery**

Symptomatology and Investigation of the gastrointestinal tract, Congenital abnormalities of the gastrointestinal tract, Carcinoma of the gastrointestinal tract, Haematemesis and melaena, Trauma to the abdomen, Appendicitis and complications, Infective colitis, Spastic colon/ Diverticular disease, Perianal Conditions, Tuberculosis of the gastrointestinal tract, Intestinal Obstruction, Ruptured /Inflamed Viscus, Stoma and stoma care, Diagnostic procedures, Inflammatory conditions, Malignancies of the biliary tract and the liver, Acute abdomen, Peptic ulcer disease, Hernia (internal and external), Inflammatory bowel disease, Irritable bowel syndrome.

### **Genitourinary Surgery**

Diagnosis and treatment of lower urinary tract symptoms, Haematuria, Loin to groin pain, Loin mass, Suprapubic pain, Scrotal lumps and penile lesions, Congenital Anomalies of the genitourinary system, Urological Trauma, Nontraumatic urological emergencies, Andrology including investigation and treatment of subfertile male, Chronic pelvic pain syndrome.

### **Neurosurgery**

Head injury, Fractures of the skull and other neurological injuries, Intracranial haemorrhage, Meningitis and other infections, Benign and Malignant conditions of the central nervous system.

### **Paediatric Surgery**

Special considerations in children undergo surgery, Intestinal Obstruction in Children, Paediatric Urological Problems, Surgical Problems in neonates, Congenital Abnormalities in children, Paediatric surgical emergencies including trauma, Paediatric surgical oncology, Reconstructive paediatric surgery.

### **Practical Procedures**

Procedures which the students should be able to perform independently

Thermometry,

Administering injections Intra Dermal/ Sub Cutaneous/ Intra Muscular/ Intra Venous, Intra Venous cannulation, Setting up a drip,

Wound excision and toilet, Wound suturing, removing sutures, dressing an ulcer, Incise an abscess, Cardiopulmonary resuscitation,

Proctoscopy, Catheterization of the bladder, Catheter care

Blood grouping Cross-matching, Transfusing blood,

Filling in request forms for diagnostic procedures, writing diagnosis cards, Interpretation of investigations results and detecting lab errors,

Sterilization of instruments / skin/ clothes/ rubber items/ glass and metal items,

Fine needle aspiration cytology,

Nasotracheal suction and Pulse oximetry,

Varicose vein sclerotherapy,

Plaster of Paris cast application and management, Cutting Plaster of Paris Casts off,

Injection of haemorrhoids, Flatus tube,

First aid,

Tying a knot, Scrub up and assist, Bandaging (Limb, Head, Scrotal), Splinting,

Airway suction, Nasogastric tube insertion and management,

Administration of Enema,

Management of T Splints, Central Venous pressure lines and monitoring, Inter Costal tube management, Postural drainage,

Steam inhalation, Nebulization, Use of a tongue depressor, Bag and mask ventilation, care of pressure points,

Universal precautions

Obtaining the consent form of patients after introducing themselves before taking relevant clinical information that undergoes laboratory investigations.

Preparation of patients for laboratory investigations and how to explain those to patients and how to obtain written consent.

Correct procedure of specimen collection and transport of specimens for haematology, histopathology, microbiology and clinical chemistry, and to describe the procedure.

Blood grouping and cross match.

Interpretation of common laboratory errors and how to assess the test results

Procedures which the students should be able to perform under supervision

Endo tracheal intubation, Indirect laryngoscopy,



Pathology specimen collection for histology transportation and processing,  
Arterial blood gas analysis  
Pericardial aspiration Aspirating a pleural effusion, Performing a cut down

**Procedures which the students have to observe**

Direct laryngoscopy, Bronchoscopy and biopsy, Ventilation, Lung Biopsy, Intra Venous Urography (IVU), Computed tomography urography (CTU), Micturating cystourethrography (MCUG), Ultrasound examination of Genitourinary Tract, Renal Biopsy, Angiography, Venography, Intracardiac needling, Limb pressure profiles by ultrasound, Cholecystography Ultrasound scanning of hepatobiliary system, Percutaneous Transhepatic Cholangiogram (PTC), Barium swallow, Barium meal, and screening

Liver Biopsy, T-tube management, Endoscopic Retrograde Cholangiopancreatogram, (ERCP), Lithotripsy

Internal fixation- hip, forearm bones, femur, tibia, Drilling for osteomyelitis/ sequestrectomy, Traction- skull calipers, Skin traction, Skeletal traction,

Muscle Biopsy, Nerve Biopsy, Skin Biopsy,

Oesophagoscopy and Biopsy- Rigid/ Flexible, Oesophagoscopy and Gastroduodenoscopy, Stomach wash Sigmoidoscopy, Colonoscopy, Flexible cystoscopy Amputations,

Physiotherapy

Insertion of Inter Costal tube

fine needle aspiration and lumbar puncture.

Divulging information to the patients or their families regarding the outcome of laboratory investigations.

Instructions to health care workers in preparation of patients for laboratory procedure.

Basic haematological, biochemical, microbiological and histopathological tests performed to diagnose diseases.

Identify the functions of the blood bank, describe the steps involved in preparing blood products for transfusion and state the tests performed in the blood bank.

**Teaching /Learning Methods:**

Lectures, Clinical Work

**Assessment Strategy:**

In Course Assessment 20%		Final Examination 80%			
Details: OSCE / Viva 20%		Theory 40%		Clinical 40%	
		Common Paper (MCQ+SBA)	SEQ/Long Essay	Long Case	Short Cases
		20%	20%	20%	20%

**Recommended Reading and/ or References and/ or Prescribed Texts**

1. Williams N, Bulstrode C, O'Connell PR. *Bailey & Love's Short Practice of Surgery*. Boca Raton, FL: CRC Press Publishing
2. Scott PR, Williamson RCN, Waxman BP. *Scott: An Aid to Clinical Surgery*. Edinburgh: New York: Churchill Livingstone Publishing.
3. Michael Swash, Michael Glynn. *Hutchison's clinical method*. Edinburgh: Saunders Elsevier publishing.
4. Browse NL, Black J, Burnand KG, Thomas WEG. *Browse's Introduction to the Symptoms & Signs of Surgical Disease*. Boca Raton, FL: CRC Press Publishing.
5. Lumley JSP, D'Cruz AK, Hoballah JJ, Scott-Connor CEH. *Hamilton Bailey's Physical Signs: Demonstrations of Physical Signs in Clinical Surgery*. Boca Raton, FL: CRC Press Publishing.
6. Morris PJ, Wood WC. *Oxford Text book of Surgery*. New York: Oxford university press.
7. Hamblen DL, Simpson H. *Adams's Outline of Fractures: Including Joint Injuries*. Edinburgh: New York: Churchill Livingstone Publishing.
8. Simpson AHRW, Hamblen DL. *Adams Adams's Outline of Orthopaedics*. Edinburgh: New York: Churchill Livingstone publishing.
9. McAninch J, Lue TF. *Smith and Tanagho's General Urology*. America: McGraw-Hill Professional.

**Journals**

1. *Surgery International*. Elsevier publishing
2. *The Sri Lanka Journal of Surgery*. College of Surgeons of Sri Lanka publishing
3. *British Journal of Surgery*. John Wiley & Sons, Ltd publishing
4. *Urology International*. John Wiley & Sons, Ltd publishing
5. *Surgical Clinics of America*. Elsevier publishing

<b>Year 5</b>	Clinical Curriculum	
<b>Course Code</b>	MED5CLIN08	
<b>Course Name</b>	Clinical Stream (Gynaecology and Obstetrics)	
<b>Credit Value</b>		
<b>Prerequisites</b>	Pass 2 <sup>nd</sup> MBBS examinations	
<b>Core/Optional</b>	Core	
<b>Hourly Breakdown</b>	Lectures	Clinical Work
	55	556
<p><b>Aim(s):</b> To provide the desired knowledge, skills and attitudes to practice as a first contact doctor and to lay the foundation for further training in relation to women's health.</p>		
<p><b>Intended learning outcomes:</b>                  On successful completion of the Gynaecology and Obstetrics program, students should be able to</p> <ol style="list-style-type: none"> <li>1. demonstrate patient-centred care that is compassionate, appropriate, and effective for the prevention and management of health problems and the promotion of health among women.</li> <li>2. demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioural sciences, as well as the application of this knowledge to patient care among females.</li> <li>3. demonstrate the ability to continuously improve patient care based on scientific evidence, constant self-evaluation and life-long learning.</li> <li>4. demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.</li> <li>5. demonstrate a commitment to carrying out professional responsibilities with adherence to ethical principles and an understanding of the legal implications of practice</li> <li>6. demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.</li> <li>7. demonstrate the ability to engage as a member, manager and a leader, in an inter professional team, in a manner that optimizes safe, effective patient/ population-centred care.</li> <li>8. demonstrate the qualities required to sustain lifelong personal and professional growth.</li> <li>9. provide appropriate medico-legal services where required.</li> </ol> <p>All above competencies would be achieved in relation to patient's health including;</p>		

1. Routine health care and health promotion that includes antenatal, postpartum care, family planning, reproductive health
2. Emergency care including resuscitation
3. Management and prevention of communicable (congenital or acquired infections) and non-communicable (genetic, psychological, immunological, metabolic, nutritional, degenerative, neoplastic, developmental, iatrogenic and traumatic) diseases.

**Course content/Course description:**

***Introduction to Obstetrics and Gynaecology***

How woman is designed for childbirth- Basic sciences as applied in obstetrics and gynaecology, History and Examination, Pre and postoperative care, Diagnostic imaging.

***Gynaecology***

Adolescent and paediatric Gynaecology and Puberty,  
Genital infections -Pelvic inflammatory disease and Sexually Transmitted Diseases, vaginal discharge,  
Chronic pelvic pain, Endometriosis/Adenomyosis, Pruritus vulvae.  
Incontinent female, Utero-vaginal displacements.  
Managing a couple requiring contraception.  
Menstrual cycle and its abnormalities -Dysmenorrhoea/Pre-Menstrual Syndrome, Primary and secondary amenorrhoea.  
Managing an Infertile couple.  
Well woman concept- care through the life cycle including Post reproductive Life and menopause.  
Premalignant conditions of the female genital tract,  
Gynaecological cancers (uterine tumor, ovarian tumor, cervical cancer),  
Benign tumours, cysts and malformations of the genital tract,  
Early Pregnancy Complications (Miscarriage, Ectopic Pregnancy, Gestational Trophoblastic Disease)  
Violence against female- Sexual abuse of female children and adults.

***Obstetrics***

Pre pregnancy care, Antenatal care, Post natal care.  
A Management of normal and abnormal labour, Partogram and monitoring in labour, Assisted vaginal delivery, Caesarean section, Preterm labour/Premature Prelabour Rupture of Membranes, Induction of labour, Foetal Surveillance-antenatal/intrapartum, Malpresentations and malpositions/Breech delivery Multiple Pregnancy, Intra uterine Death, Non obstetric abdominal pain in pregnancy,  
Medical conditions during pregnancy-Hypertension, Anaemia, Diabetes, Heart disease, Infections, Venous Thromboembolism/Epilepsy, Liver disease and other medical disorders  
Foetal growth Restriction, Rhesus isoimmunisation, Diseases of placenta and membranes, Obstetric Emergencies,  
Antepartum / Postpartum Haemorrhage, Shoulder dystocia, cord prolapse, /etc,

Measures of obstetric care- Maternal and perinatal mortality and morbidity-Perinatal statistics/Audit, and risk management  
Prenatal Diagnosis  
Breaking bad news-Managing stillbirths/abnormal fetuses/Intra Uterine Death, maternal death etc,  
Prescribing in Pregnancy,  
Pain relief in labour,  
Emerging diseases and developments.

Student should be able to perform following procedures independently:

**Obstetrics:**

Obstetric examination, Antenatal assessment including PV & pelvic assessment, Labour management (intrapartum assessment and care), Maintenance of a partogram, Preparation for delivery, Preparation for LSCS, Assistance at a Caesarian section, A.R.M. (Artificial Rupture of Membranes), Syntocinon (start and management), Intrapartum PV, Normal delivery, Suturing of episiotomies, New born assessment (APGAR maturity), Neonatal resuscitation on model

**Gynaecology:**

Abdominal examination of pelvic lumps including a bimanual examination, PV digital examination, Cusco's speculum examination, High vaginal swab, Pap smear, Insertion of pessaries, Intensive care monitoring, Advice on Depo-Provera, Advice on oral contraception, Advice on condoms/Implants), Advice on emergency contraception

Student should be able to perform following procedures under supervision:

**Obstetrics:**

Phototherapy, Exchange transfusion

**Gynaecology:**

PV Examination Under Anaesthesia, IUCD insertion

Student should know about following procedures:

**Obstetrics:**

Pudendal block, perineal tears, Forceps delivery, Vacuum delivery, Breech delivery, Twin delivery, Manual Removal of Placenta, ECV (External Cephalic Version), Ultrasound scan - Biophysical profile, dating, growth and localization of placenta), Amniocentesis, Umbilical drip, Management of Postpartum Haemorrhage, Management of engorged breast Management of eclampsia, Interpretation of cardiotocography

**Gynaecology:**

D&C, D&E(ERPC), Polypectomy, Hysterosalpingogram, LRT, Abdominal hysterectomy, Myomectomy, Laparoscopic ectopic, Laparoscopic torsion of ovarian cyst, Laparoscopic ovarian malignancy, PCE (post-coital examination), VH & R/Mesh Repair, Manchester repair, Surgical repair for stress incontinence, Kelly's repair, Emergency laparotomy Colposcopy, Cervical biopsy, Seminal fluid analysis, Intrauterine insemination, Cervical cerclage, Ultrasound examination for gynaecological conditions

**Teaching /Learning Methods:**

Lectures, Clinical Work

**Assessment Strategy:**

In Course Assessment 20%	End Course Assessment 80%			
Details: OSCE	Theory 40%		Clinical 40%	
	Common Paper (MCQ+SBA)	SEQ/Long Essay	Gynaecology	Obstetrics
	20%	20%	20%	20%

**Recommended Reading and/ or References and/ or Prescribed Texts**

1. Obstetrics by Ten Teachers By Philip N.Baker, CRC Press Publication
2. Gynaecology by Ten Teachers, By Philip N.Baker, CRC Press Publication
3. Royal College of Obstetricians and Gynaecologists guidelines
4. Sri Lanka College of Obstetricians & Gynaecologists guidelines

<b>Year 5</b>	Clinical Curriculum	
<b>Course Code</b>	MED5CLIN09	
<b>Course Name</b>	Clinical Stream (Paediatrics)	
<b>Credit Value</b>		
<b>Prerequisites</b>	Pass 2 <sup>nd</sup> MBBS examinations	
<b>Core/Optional</b>	Core	
<b>Hourly Breakdown</b>	Lectures	Clinical Work
	55 (25 online)	556
<b>Aim(s):</b> To provide the desired knowledge skills and attitudes to practice as a first contact doctor and lay the foundation for further learning in relation to child and adolescent health		
<b>Intended learning outcomes:</b>		
On successful completion of the Paediatric program, students should be able to		
<ol style="list-style-type: none"> <li>1. Contribute to the promotion of health, preventive health, and to provide patient-centred care that is compassionate, appropriate and effective for the prevention and management of health problems in the paediatric age group in the community.</li> <li>2. Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioural sciences, as well as the application of this knowledge to patient care in the paediatric age group</li> <li>3. Demonstrate the ability to contribute to improve patient care based on scientific evidence, self-evaluation and reflective life-long learning</li> <li>4. Demonstrate interpersonal, communication and collaborative skills that result in the effective exchange of information and collaborations with the community, patients, their families, and health professionals.</li> <li>5. Demonstrate a commitment to carrying out responsibilities in professional and ethical manner</li> <li>6. Demonstrate as a first contact doctor, an awareness of the current health care system and develop the ability to effectively utilize resources in the system to provide optimal health care.</li> <li>7. Demonstrate the ability to engage with other health professionals in a manner that optimizes safe, effective patient- and population-centred care</li> <li>8. Demonstrate the qualities required to sustain lifelong personal and professional growth</li> <li>9. Identify and refer children for medico-legal expertise when required.</li> <li>10. Demonstrate the ability to carry out basic administrative and managerial functions within the health care system.</li> </ol>		

**Course content/Course description:****General**

Common and important disease conditions affecting children with regards to causation, symptomatology, treatment and prevention at personal levels as well as society at large. Principles of patient care with regards to conduct in clinical practice and patients' rights. Focused and patient centred history taking, clinical evaluation and developing a problem list. Communication skills for counselling, patient education and breaking bad news and communicating with colleagues and other professionals in health care or outside. Competencies in scholarship (lifelong reflective learning, research, collaborative learning), Professionalism and ethics.

**Introduction to Paediatrics**

Epidemiology, challenges, sociological and aspects of paediatrics with a local, national and global perspective.

**Neonatology**

Foetal and neonatal growth and development. Care of the preterm newborn. Complications due to prematurity and low birth weight. Care of the newborn at the delivery room. Common neonatal conditions needing intensive care including respiratory distress of newborn, meconium aspiration syndrome, Persistent pulmonary hypertension of the newborn (PPHN), congenital pneumonia, neonatal sepsis, neonatal meningitis, congenital heart disease and kernicterus. Common surgical emergencies of the newborn including diaphragmatic hernia, oesophageal atresia, malrotation of the gut. Management of neonatal jaundice, hypoglycemia, hypothermia, neonatal convulsions, minor surgical abnormalities. Be able to support breast feeding and identify breastfeeding related complications. Parenteral feeding of extreme premature new-borns. Endocrine system related manifestations in the newborn. Counselling and preparing mothers for premature deliveries, mothers with dysmorphic babies.

**Well Baby Care**

Growth and development during infancy and preschool period. Normal variants of growth and development including constitutional and familial growth variants. Detecting development delay and regression. Assessment of development milestones at different age groups. Childhood vaccines and vaccine related events. Breastfeeding during infancy and introduction of complementary feeding. Nutrition needs of children, nutritional deficiencies and management of deficiencies. Be aware of culture related differences in breastfeeding/ complimentary feeding practices in the society. Identify and manage common myths and erroneous child rearing practices in the community.

**Fluid Balance**

Fluid management in children. Management of dehydration with oral / intravenous rehydration. Identify oral and parenteral agents available for fluid resuscitation. Fluids used in special conditions including diabetic ketoacidosis, cerebral oedema, dengue shock syndrome and hypernatraemic/ hyponatraemic dehydration. Identify and



manage common electrolyte abnormalities. Acid base status and interpretation of blood gases.

### ***Paediatric Emergencies***

Introduction to management of cardiac and/or respiratory arrest or pre arrest conditions. Manage emergencies including status epilepticus, diabetic ketoacidosis, status asthmaticus, upper airway obstruction, arrhythmias, cyanotic spells, unconscious child, snake bite, anaphylaxis, poisoning and circulatory failure. Common surgical emergencies in children including pneumothorax, intestinal obstruction, appendicitis. Hands on skills in basic life support and advanced life support. Be familiar with equipment and medication used in emergency medicine.

### ***Nephrology***

Glomerular and tubular disorders in children including nephrotic syndrome, nephritic syndrome, renal tubular acidosis. Evaluate a child presenting with haematuria, nephrocalcinosis, urolithiasis, hypertension. Management of urinary tract infection (UTI) and complications of UTI. Major congenital malformations of urinary tract. Understanding the aetiology and management of chronic renal failure and acute renal failure. Basic principles of peritoneal dialysis and haemodialysis.

### ***Haematology***

Congenital and acquired conditions with anaemia including Thalassemia and other hemoglobinopathies, red cell membrane defects, red cell enzyme deficiencies, immune haemolytic anaemia, iron deficiency, Vitamin B12/ folic acid deficiency. Disorders of the coagulation system, assessing lymphadenopathy and haematological malignancies. Autoimmune and vasculitic conditions affecting the haematological system. Understand different indications for transfusion of blood and blood products in paediatrics and understand basic steps followed in setting up a transfusion. Identify transfusion related events.

### ***Neurology***

Infections of the nervous system. Cerebral palsy and neurodegenerative conditions affecting the central nervous system. Neurocutaneous syndromes presenting in childhood. Introduction to epilepsy, febrile seizures and seizure mimicking conditions and understand the basic principles of management. Acquired and congenital myopathies and neuropathies. Inborn errors of metabolism affecting the nervous system. Children with special needs and facilities to manage such children i.e. occupational and physiotherapy, speech and language therapy. Basic introduction to neuro-imaging and investigations used for assessing functions of nerves/muscles.

### ***Endocrinology***

Basic introduction to common endocrinopathies in childhood- hypothyroidism, hyperthyroidism, diabetes mellitus, adrenal disorders, parathyroid disorders and pituitary disorders. Endocrine causes of short stature and obesity manifesting in childhood. Introduction to puberty and puberty related disorders. Disorders of sexual differentiation.

### **Cardiology**

Introduction to foetal circulation, neonatal circulation and normal cardiac parameters during different stages of childhood. Congenital cardiac disease, acquired cardiac diseases with special emphasis on rheumatic heart disease and Kawasaki disease. Cardiac arrhythmias in children. Evaluation of a cardiac murmur in a neonate/ infant/older child. Cardiomyopathy in children. Pericarditis, myocarditis and endocarditis in children. Common ECG abnormalities. Pulse oximetry. Chest x-ray changes in cardiac disease conditions. Basic principles of managing cardiac failure. Preparing a child for cardiac surgery. Basic understanding of common cardiothoracic surgical interventions including pulmonary banding, Blalock-Taussig (BT) shunt creation, device repair. Common cardiovascular causes of hypertension in children.

### **Musculoskeletal Disorders**

Normal gait, gait variants in childhood, gait abnormalities. Juvenile idiopathic arthritis. Monoarthritis in childhood. Acute and chronic osteomyelitis. Metabolic bone conditions including Rickets. Congenital bone disorders/deformities. Bone and soft tissue malignancies. Musculoskeletal trauma at birth.

### **GIT and liver disorders**

Aetiology and management of acute and chronic diarrhoea. Gastro-oesophageal reflux disease. Functional and structural causes of constipation in children. Encopresis, soiling and faecal incontinence. Detection and treatment of worm infestations. Diseases of the liver due to infection, storage disease, inborn errors of metabolism. Congenital abnormalities of liver and hepatobiliary system.

Investigate and evaluate causes of failure to thrive and planning of nutritional interventions.

### **Respiratory diseases**

Diagnosis and management of common upper airway infections including rhinitis, acute and chronic otitis media, tonsillitis, laryngitis and laryngotracheobronchitis, congenital abnormalities of the upper airways and infections of the lower respiratory tract. Principles of diagnosing and managing bronchial asthma in children. Surgical emergencies of the respiratory system. Allergic diseases of children with special emphasis on allergic rhinitis. Basic knowledge in detecting abnormalities in a chest x ray.

### **Metabolic and genetic disorders**

An introduction to metabolic and genetic disorders. Basic knowledge on symptomatology and associations of common chromosomal disorders (Down syndrome, Turner syndrome, Klinefelter syndrome etc). Knowledge on investigations available to detect common genetic and metabolic disorders.

### **Practical procedures**

#### ***Procedures which the student can perform independently***

Measuring growth parameters and plotting on appropriate charts, Thermometry and blood pressure monitoring. Nebulization. Use of an inhaler device, peak flow meter.

Urine ward test for proteins and sugar. Application of urinary collection bag. Obtaining an electro cardio gram (ECG) recording and interpreting it. interpreting blood gas. Measure packed cell volume using microhematocrit method.

**Procedures which the student can perform under supervision**

Setting up IV infusions, administering injections - intradermal, subcutaneous, intramuscular, intravenous (Only in adolescents or older children with parental permission). Collection of blood for haematological, biochemical and microbiological investigations.

Nasogastric tube insertion, Phototherapy. Basic life support and advance life support. Perform cold agglutinin test and bedside clotting test. Administer oxygen via head box and nasal catheters/prongs.

Nebulisations

**Procedures which the student should attempt to observe**

Indirect laryngoscopy and endotracheal tube insertion. Intercostal needle aspiration, intercostal tube insertion and pleural aspiration. Defibrillation of an infant/child, Continuous positive airway pressure ventilation. Using a spirometer. Using adrenaline in anaphylaxis.

Obtaining blood for neonatal screening. Auto acoustic emission testing of new-borns. Gastric lavage, gavage feeding. Insertion of umbilical venous/arterial catheter. Neonatal cranial ultrasound examination. Exchange transfusion.

Lumbar puncture. Urinary catheterization. Bone marrow biopsy. Blood and blood product transfusions. Hydrostatic reduction of intussusception. Performing an MCUG, DMSA and DTPA scans. Electromyogram and nerve conduction testing in children. Visual evoked potential and Auditory evoked potential examination. Chest and limb physiotherapy. Peritoneal dialysis and haemodialysis. Paediatric liver biopsy and renal biopsy.

**Teaching /Learning Methods:**

Lectures, Clinical Work

**Assessment Strategy:**

Continuous Assessment 20%		Final Examination 80%			
Details: OSCE	20%	Theory 40%		Clinical 40%	
		Common Paper (MCQ+SBA)	SEQ/Long Essay	Long Case	Short Cases
		20%	20%	20%	20%

<b>Year 5</b>	Clinical Curriculum	
<b>Course Code</b>	MED5CLIN010	
<b>Course Name</b>	Clinical Stream Psychiatry	
<b>Credit Value</b>		
<b>Prerequisites</b>	Pass 2 <sup>nd</sup> MBBS examinations	
<b>Core/Optional</b>	Core	
<b>Hourly Breakdown</b>	Lectures	Clinical Work
	35	362
<b>Aim/s:</b>		
To provide the desired knowledge, skills and attitudes to practice as a first contact doctor and to lay the foundation for further training in relation to mental health.		
<b>Intended learning outcomes:</b>		
At the end of the successful completion of the course of psychiatry, students should be able to:		
<ol style="list-style-type: none"> <li>1. Practice patient-centred care that is compassionate, appropriate, and effective for the prevention and management of mental health problems and the promotion of mental health within the community.</li> <li>2. Demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioural sciences, as well as the application of this knowledge to patient care among the mentally ill.</li> <li>3. Provide health care for those with mental illness, recognize when to refer for specialist care, and provide evidence-based services for mental health promotion and prevention of mental illness; this should include assessment of the mentally ill, treatment of common diseases in psychiatry, follow up of patients and education of public related to issues of mental illnesses with special emphasis on substance abuse disorders.</li> <li>4. Manage psychiatric emergencies including rapid tranquilization and provision of emergency care.</li> <li>5. Continuously improve patient care based on scientific evidence, constant self-evaluation and life-long learning regarding mental health related issues.</li> <li>6. Use interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals in the context of mental health.</li> <li>7. Show a commitment to carrying out professional responsibilities and an adherence to ethical principles.</li> <li>8. Practice evidence-based medicine, with commitment towards continuing medical education.</li> <li>9. Demonstrate an awareness of and be responsive to the larger context and system of health care, including local cultural aspects, as well as the ability to call effectively on other resources in the system to provide optimal health care for the mentally ill.</li> </ol>		

10. Engage in an inter-professional team in a manner that optimizes safe, effective patient- and population-centred care for the mentally ill.
11. Provide appropriate medico-legal services where required.
12. Sustain lifelong personal and professional growth in terms of provision of health care for the mentally ill.

**Course content/Course description:**

***Introduction to normal psychology***

Includes emotions and the limbic system, learning and memory, intelligence, Freud and the unconscious, factors influencing behaviour, personality development, mental health and approaches to mental illness, grief, sick role, illness behaviour and stigma

History taking in psychiatry, including bio psychosocial model of disease.

Mental state examination and ability to detect and describe common symptoms and signs (psychopathology) in psychiatry. Mental Health Act, Ethical issues in practice.

**Psychopharmacology**

Hypnotics/ Sedatives, Drugs in dementia, Antidepressants, Antipsychotics, Drugs in mood disorders,

**Substance Misuse**

Effects of substance abuse on the central nervous system and behaviour, and disorders related to substances misuse (alcohol and other substances)

**Mood Disorders**

Depression and Bipolar affective disorder, suicide and attempted suicide, and suicide risk assessment, recognition of when to refer to a specialist.

**Anxiety and obsessive-compulsive disorders**

Generalized Anxiety Disorder, Panic Disorder, Obsessive Compulsive Disorder, Social Phobia – assessment, diagnosis and management

**Child Psychiatry**

Developmental Psychology, Child Psychiatry, Mental Retardation, Attention Deficit Hyperactive Disorder, Conduct Disorders and Oppositional Defiant Disorder (ODD), Child Abuse.

**Sexual Dysfunction and Sexuality**

Normal human sexuality and introduction to common sexual disorders.

**Reactions to stressful experience**

Reactions to stress, Grief and bereavement, Breaking bad news, Post-Traumatic Stress Disorder.

Schizophrenia and other psychotic disorders  
 Schizophrenia and delusional disorder including follow-up management, management and monitoring of risks and side effects of long-term treatment.

Dementia, delirium

Delirium and Dementia, recognition of associated psychological and behavioural problems.

Miscellaneous

Somatoform Disorders, Management of an aggressive patient, Postpartum Disorders, geriatric psychiatry, Personality Disorders, Cognitive Behavioural Therapy, Counselling, Community Psychiatry, carer burden in psychiatry.

Important emerging diseases and developments in psychiatry.

**Teaching /Learning Methods:**

Lectures, Clinical Work

**Assessment Strategy:**

Continuous Assessment 10%		Final Examination 90%			
Details:		Theory 50%		Clinical 40%	
OSCE	10%	Common Paper (MCQ+SBA)	SEQ	Long Case	Short Cases
		25%	25%	25%	15%

**Recommended Reading and/ or References and/ or Prescribed Texts**

1. ICD 10 – Classification of Mental and Behavioural Disorders, WHO publication.
2. Lishman’s Organic Psychiatry – A text book of Neuropsychiatry. Anathony S David, Simon Fleminger, Michael D Kopelman, Simon Lovestone, John DC Mellers. Wiley-Blackwell Publication
3. The Maudsley Prescribing Guidelines, David Taylor, Carol Paton and Robert Kerwin Wiley-Blackwell Publication
4. Fish’s Clinical Psychopathology: Signs and Symptoms in Psychiatry by Patricia R. Casey and Brendan Kelly. Gaskell Publication
5. Psychiatry in Medical Practice by Prof. David Goldberg, Linda Gask and Richard Morriss. Routledge Publication
6. Stahl’s Essential Psychopharmacology: Neuroscientific Basis and Practical Applications (Essential Psychopharmacology series). Stephen M. Stahl. Cambridge University Press
7. Oxford Text book of Old Age Psychiatry – Robin Jacoby, Catherine Oppenheimer, Tom Denning and Alan Thomas. Oxford University Press
8. Shorter Oxford Text book of Psychiatry – Michael Gelder, Paul Harrison and Philip Cowen. Oxford University Press
9. Text book of Evolutionary Psychiatry: the origins of psychopathology by Martin Brune. Oxford University Press
10. Essential Psychiatry (paperback) by Robin M.Murray, Kenneth S. Kendler, Peter McGuffin, Simon Wessely, David J. Castle. Cambridge University Press

11. Rutter's Child and Adolescent Psychiatry. Michael Rutter. Wiley-Blackwell Publication
12. Psychiatry Secrets. James L. Jacobson, Alan M. Jacobson. Hanley & Belfus Publication
13. Psychopathology. Karl Jasper. Johns Hopkins University Press
14. Synopsis of Psychiatry. Kaplan & Zaddok. Lippincott Williams & Wilkins
15. Symptoms in the Mind: An Introduction to Descriptive Psychopathology  
Andrew Sims, W B Saunders Co.

<b>Year 5</b>	Clinical Curriculum		
<b>Course Code</b>	MED4CLIN11		
<b>Course Name</b>	Clinical Stream (Anaesthesiology and Critical Care)		
<b>Credit Value</b>	Pass 2 <sup>nd</sup> MBBS examinations		
<b>Prerequisites</b>			
<b>Core/Optional</b>	Core		
<b>Hourly Breakdown</b>	Lectures	Clinical Work	Self-Directed Learning
	34	196	Variable
<b>Aim(s):</b>			
To provide the desired knowledge, skills and attitudes to practice as a first contact doctor and to lay the foundation for further training in relation to Anaesthesiology and Critical care.			
<b>Intended learning outcomes:</b>			
At the end of the successful completion of the course of Anaesthesiology and Critical care students should be able to:			
<ol style="list-style-type: none"> <li>1. demonstrate patient-centred care that is compassionate, appropriate, and effective for the prevention and management of health problems and the promotion of health among all age groups in relation to Emergency conditions, critical illness, intensive care, anaesthetic management.</li> <li>2. demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioural sciences, as well as the application of this knowledge to patient care among those who seeks anaesthetic and intensive care services in all age groups.</li> <li>3. demonstrate the ability to continuously improve patient care based on scientific evidence, constant self-evaluation and life-long learning</li> <li>4. demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.</li> <li>5. demonstrate a commitment to carrying out professional responsibilities with adherence to ethical principles and an understanding of the legal implications of practice</li> <li>6. demonstrate an awareness and responsiveness to the larger context of system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.</li> <li>7. demonstrate the ability to engage as a member, manager and a leader, in an inter professional team, in a manner that optimizes safe, effective patient/ population-centred care.</li> <li>8. demonstrate the qualities required to sustain lifelong personal and professional growth.</li> </ol>			
provide appropriate medico-legal services where required.			



<p><b>Course content/Course description:</b>                  All above competencies should be achieved in relation to patients, in all age groups.</p> <ol style="list-style-type: none"> <li>1. Management of different modes of anaesthetic considerations in general Surgical, Paediatric, Obstetric, gynaecological, and emergencies in all age groups.</li> <li>2. Resuscitation and provision of emergency care.</li> <li>3. Management of Critical care situations of Medical, Surgical, Paediatric, Obstetric, gynaecological, Orthopaedic, Trauma, Immunological, Haematological conditions in all age groups.</li> </ol>	
<p><b>Teaching /Learning Methods:</b>                  Lectures, Clinical Work, Self-Directed Learning</p>	
<p><b>Assessment Strategy:</b></p>	
<p>End of Clinical Appointment Evaluation                  (Pass/Fail Exam)                  100%</p>	<p>Final MBBS Surgery, Medicine, Paediatrics</p>
<p>Details:                  Pass/Fail Exam                      100%</p>	<p>100%</p>
<p><b>Recommended Reading and/ or References and/ or Prescribed Texts</b></p> <ol style="list-style-type: none"> <li>1. Anaesthesia and Intensive Care A to Z                      Authors – Steven M. Yentis, Nicholas P. Hirsch, Gary B. Smith                      Churchill Livingstone</li> <li>2. Textbook of Anaesthesia                      Authors – Alan R. Aitkenhead, Graham Smith, Iain Moppett, David J. Rowbotham                      Churchill Livingstone</li> <li>3. Intensive Care: A Concise Textbook                      Authors – Charles J. Hinds, J. David Watson Saunders Ltd.</li> </ol>	

<b>Year 5</b>	Year 5		
<b>Course Code:</b>	MED4CLIN12		
<b>Course Name:</b>	Personal and Professional Development 5 (Professorial group based)		
<b>Credit Value:</b>	Pass 2 <sup>nd</sup> MBBS examinations		
<b>Prerequisites:</b>	None		
<b>Core/Optional:</b>	Core		
<b>Hourly Breakdown</b>	Lectures	Workshops	Ward rounds
	4	6	N/A
<b>Aims:</b>			
1. To provide the desired personal and professional attributes to practice as a first contact doctor			
<b>Intended learning outcomes:</b>			
At the end of this module, the students should be able to:			
1. demonstrate patient centred care and appropriately respond to patient concerns			
2. demonstrate interpersonal and communication skills that result in effective exchange of information and collaboration with patients, their families and health professionals			
3. appropriately responds to difficult situations (angry patient, crying patient, sensitive issues (BBN), complains) and appropriately response to situations with loss or disability			
Pharmacology, clinical department s			
<b>Course content/Course description:</b>			
Simulated scenarios of difficult situations in the clinical setting in which students are expected to respond by role playing and discussed by peers and facilitators			
Observed real patient encounters with the patients under each discipline (medicine, surgery, paediatrics and obstetrics and gynaecology, Critical Care) on history taking, examination and communication while maintaining patient and Family welfare			
<b>Teaching /Learning Methods:</b>			
Lectures, Workshops, Observations in ward rounds			
<b>Assessment Strategy:</b>			
Satisfactorily completed Mini-CEX from each discipline (signed by consultant/SR/Reg) – to be handed over alone with the log book			
<b>Recommended Reading:</b>			

Semester				
Y1S1	Teaching (wks)	12 (Block Release )	14	17
	SDL+SL (wks)	2		
	Exam (wks)	2	2	
	Leave (wks)	1	1	
Y1S2	Teaching (wks)	12 (Block Release )	14	17
	SDL+SL (wks)	2		
	Exam (wks)	2	2	
	Leave (wks)	1	1	
Y2S1	Teaching (wks)	12 (Block Release )	14	16
	SDL+SL (wks)	2		
	Exam (wks)	2	2	
	Leave (wks)	-		
	Introductory Clinicals	2		2
	Repeat -SL (wks)	5	9	9
	Exam (wks)	3		
Y2S2	TEACHING (wks)	10 (Block Release )	12	14
	SDL+SL (wks)	2		
	Exam (wks)	2	2	
	Leave (wks)		-	
MS 1	Clinical Work (wks)	12		12
Y3S1	Teaching (wks)	10 (Block Release )	12	14
	SDL+SL (wks)	2		
	Exam (wks)	1	1	
	Leave (wks)	1	1	
Y3S2	Teaching (wks)	14 (4 wks Block Release+ 9 wks half day ) 9 wks half day - Short clinical Rotation	15	17
	SDL+SL (wks)	2		
	Exam (wks)	1	1	
	Leave (wks)	1	1	

Y4S1	Teaching (wks)	13 (2 wks Block Release+ 11 wks half day ) 11 wks half day Short clinical Rotation	14	15
	SDL+SL (wks)	1		
	Exam (wks)	1	1	
	Leave (wks)	-		
Y4S2	Teaching (wks)	13 (1 wks Block Release+ 12 wks half day )	15	19
	SDL+SL (wks)	2		
	Exam (wks)	2	2	
	Leave (wks)	-		
	Repeat Exam (wks)	1	1	
	Leave (wks)	1	1	
Year 4 (Clinical Block release )	48 weeks (Long clinical Rotation)	-	48	48
Professorial (Clinical Block release )	35weeks			38
	Leave	3		
Study Leave	6 weeks +2 wks	8	12	12
Exam	4 weeks	4		
	New Year and Christmas Holidays	10		10
Total				260

## **6.3 Rules and Regulations Governing Examinations in the Faculty of Medicine**

### **Nature of the Curriculum**

Medical curriculum has different learning components. Pre- and para-clinical components which are conducted over the first four years and have a semester-based examination system which also incorporates the Second MBBS and Third MBBS examination systems. Clinical training programme is conducted over three and a half years including full time clinical program in the latter part of the fourth and fifth year. The examination system is comparable with other Medical Faculties ending with Final MBBS Examination.

### **Types of examinations**

The examinations leading to MBBS Degrees shall be as follows:

- I. Second Examination for MBBS Degrees
- II. Third Examination for MBBS Degrees
- III. Final Examination for MBBS Degrees

### **Basic Science (Pre clinical ) Applied Science (Para -Clinical ) components**

Teaching/learning activities of the pre- and para-clinical components of the curriculum take place during semesters as modules. Each academic year consists of two semesters and one semester is equivalent to 14 to 16 weeks of course work.

Subject matter in the pre- and para-clinical parts of the curriculum is arranged as modules within a semester.

### **Attendance**

There should be 80% attendance for the total of lectures, small group discussions, practical classes and other teaching-learning activities of any particular module necessary for a student to be eligible to sit for the semester examination.

A student who becomes ineligible to sit for an exam due to inadequate attendance should complete all the missed SGDs/tutorials and practical classes/museum classes to become eligible to sit for the repeat exam or the next available exam. The student may have to join the junior batch for this purpose.

### **End semester examination**

Most of the modules are tested by an end semester examination, at the end of the semester that the module is taught in. These examinations use a variety of assessment methods, e.g., Multiple Choice Questions (MCQ) (including true/false type, single best response and extended matching items), Structured Essay Questions (SEQ), Short Answer

Questions (SAQ), Essay Questions, Objective Structured Practical Examinations (OSPE), Objective Structured Clinical Examinations (OSCE), Viva voce, Portfolios, Reports, Presentations and Assignments.

### **Grades**

The grades obtainable for a module are on a scale of A+ to E and C is the pass grade. Any student obtaining a grade of C- or less in any module is considered as failed in that module and should sit the examination for the same module at the repeat examination for the second MBBS modules or next available examination for the third MBBS examination modules. The maximum possible grade obtainable in any subsequent attempt is C.

At any module examination if a student obtained a C- grade and in the subsequent repeat examination she/he obtained a D+ for the same module, the highest grade (C-) will be carried out for future examination results.

At the end of the 2nd MBBS and 3rd MBBS, if a student has obtained a “C minus (C-)” grade for one module and C or higher grades for all the other modules, that C minus grade will be upgraded to a C.

### **Grade Point Average**

The Grade Point Average (GPA) is calculated at 2nd MBBS and 3rd MBBS results, as shown below. The Grade Point, for each grade, is as follows:

<b>Grade</b>	<b>Point</b>
<b>A+</b>	<b>4.00</b>
<b>A</b>	<b>4.00</b>
<b>A-</b>	<b>3.70</b>
<b>B+</b>	<b>3.30</b>
<b>B</b>	<b>3.00</b>
<b>B-</b>	<b>2.70</b>
<b>C+</b>	<b>2.30</b>
<b>C</b>	<b>2.00</b>
<b>C-</b>	<b>1.70</b>
<b>D+</b>	<b>1.30</b>
<b>D</b>	<b>1.00</b>
<b>E</b>	<b>0.00</b>

The Grade Point Average (GPA) is calculated as follows:

Total number of points a student has obtained in all the modules = GPA  
 Total number of credits for all those modules

The mathematical formula is expressed viz. 
$$\text{GPA} = \frac{\sum c_i g_i}{\sum c_i}$$

$c_i$  &  $g_i$  are the numbers of credit units and grade points of the  $i^{\text{th}}$  course unit respectively.

### **Second MBBS Barrier**

Only students who have obtained a minimum grade of C in all modules in Y1S1, Y1S2 and Y2S1 are allowed to proceed to third MBBS programme and clinical training. This functions as a 'barrier', prior to the commencement of the third MBBS program.

The GPA and summary of results released at this point shall be referred to as the results of the Second MBBS examination.

### **Third MBBS**

GPA is calculated in the same way for 3rd MBBS programme too (i.e., Y2S2, Y3S1, Y3S2, Y4S1, Y4S2). The GPA and summary of results released at this point shall be referred to as the results of the third MBBS examination.

A minimum grade of 'C' should be obtained for all modules of Y2S2, Y3S1, Y3S2, Y4S1 and Y4S2 and should have successfully completed all the clinical appointments to be qualified to sit for the final MBBS examination.

### **Classes**

The award of classes at examinations will be based on the GPA and will be according to the format below

GPA	Class Awarded
3.70-4.00	First Class
3.30-3.69	2 <sup>nd</sup> Class Upper
3.00-3.29	2 <sup>nd</sup> Class Lower

### **Repeating Examinations**

A student getting a grade of "C minus" or less in any module should sit for the same module again to obtain a C grade. The subsequent attempts available are as follows: for the 2nd MBBS modules, the Y2 repeat exam; for Y2S2, Y3S1 and Y3S2 modules, the next available exam and for Y4S1 and Y4S2 modules, at the Y4 repeat exam.

Since 2nd MBBS is a barrier exam, those who are unsuccessful in Y2 repeat exam will have to join the junior batch to complete the modules before progressing to Y2S2.

All the modules of 3rd MBBS and all the clinical appointments should be completed before sitting for the final MBBS examination.

A maximum of four attempts are allowed for each exam. Please see below for conditions for termination of studentship.

### **Award of Distinctions, Prizes & Medals**

The preclinical and paraclinical departments (Anatomy, Biochemistry, Physiology, Pathology, Pharmacology, Microbiology, Parasitology, Community Medicine and Forensic Medicine) will award distinctions, prizes and medals for the relevant subjects on the basis of marks obtained for the relevant subjects (please refer Chapter 22 for more details). The minimum requirement for a distinction is 70% on a scale of 0 to 100.

Award of distinctions, medals and prizes will be announced with the 2nd MBBS and 3rd MBBS GPA results.

### **Clinical Training and the Final MBBS Examination**

#### **Subjects**

The training in clinical subjects begins after the successful completion of the 2nd MBBS examination. The subjects are Medicine, Surgery, Gynecology & Obstetrics, Pediatrics and Psychiatry.

#### **Training & Attendance**

Training is largely hospital based and supplemented with lectures. Clinical training is divided into clinical appointments. Attendance at all the clinical appointments is considered compulsory. A certification of attendance and satisfactory work in respect to every appointment must be obtained in the form of a signature in the student record book, from the supervising consultant. If the student fails to do so for any single appointment, he/she would not be eligible to sit the final MBBS examination. In addition, there should be 80% attendance at lectures in each clinical subject as a requirement to sit the final MBBS examination.

#### **Nature of the Examination**

The marks for the final MBBS in each subject comprise marks from the following components:

- Continuous assessment
- Theory - Common MCQ and structured essay questions (SEQ)
- Clinical - Long case, short cases
- ~~Viva voce in some subjects~~
- Objective Structured Clinical Examination (OSCE)/
- Objective Structured Practical Examination (OSPE)



The “Common MCQ Examination” is common to all faculties of medicine and is held on the same day at the same time. This said examination is composed of five MCQ papers based on Medicine, Gynecology & Obstetrics, Pediatrics, Surgery and Psychiatry.

The Common MCQ Examination is held twice a year. When a student has completed the five-year MBBS course the said student should sit the next available common MCQ examination and take all five subjects at the first encounter.

### **Format of the final MBBS Examination**

Final MBBS Examination format decided by the UGC Standing Committee on Medical and Dental Sciences should be used.

### **Pass**

The pass mark with respect to each subject is described in the Final MBBS Examination format decided by the UGC Standing Committee on Medical and Dental Sciences.

### **Distinction**

A mark of 70% or above in a subject is necessary for the award of a distinction. The Distinctions are awarded only to those completing an examination in the first attempt sitting for all five subjects in one exam.

### **Prizes & Medals**

Prizes and medals are awarded on the basis of endowments made and are governed by the condition of the endowment. These are awarded only to those completing an examination in the first attempt sitting for all five subjects in one exam.

### **Classes**

With respect to the final MBBS, classes are awarded on the basis of the average overall mark as shown below.

<b>Average Mark per subject</b>	<b>Class</b>
<b>70 and above</b>	<b>First Class</b>
<b>65-69</b>	<b>Second Class Upper</b>
<b>60-64</b>	<b>Second Class Lower</b>

The candidates must pass all subjects in one sitting at the first available examination is eligible to obtain a class.

## Referred and Fail

Students will have to successfully complete the Final MBBS Examination within ten academic years from the date of entry to the University. In any given attempt, the student is required to take all the subjects in which he/she needs a pass to complete the examination.

Student who has passed in at least one subject and has obtained a minimum of 25% marks in another subject/s shall be considered to be referred in the latter subject/s.

If a student gets less than 25% in one subject of an examination/part he or she fails the whole examination.

A student who has passed four subjects at the final examination will have to pass the other subject within the maximum period allowed to complete the course.

A student who has passed any three subjects will have to complete the final examination by passing the other two subjects within the next three scheduled attempts following a pass in the second subject. Failing this, he/she will have to re-sit the whole examination.

A student who has passed any two subjects will have to complete the final examination by passing the other three subjects within the next three scheduled attempts following a pass in the second subject. Failing this, he/she will have to re-sit the whole examination.

A student who has passed only one subject at the final examination will have to pass at least one other subject within the next three scheduled attempts. Failing this, he/she will have to re-sit the whole examination.

### **General regulations applicable to the Second, Third and Final Examinations leading to Bachelor of Medicine and Bachelor of Surgery (MBBS) Degrees**

- 1) These regulations may be cited as general regulations applicable to Second (Three semester examinations together), Third (five semester examinations together) and Final Examinations leading to MBBS Degree, offered by the Faculty of Medicine, University of Peradeniya and add to the rules and regulations governing the MBBS degree approved in 2016.
- 2) A student shall be awarded the MBBS Degree, if he /she;
  - a. has been admitted and registered as an internal student of the Faculty of Medicine of the University of Peradeniya, and
  - b. has completed to the satisfaction of the Senate, the courses of study as prescribed by the University By-Laws, Rules and Regulations made there under, and

- c. has passed the Second Examination for MBBS Degrees (within four attempts), and
  - d. has passed the Third Examination for MBBS Degrees, before sitting for the final Examination for MBBS degrees and
  - e. has passed the Final Examination for MBBS Degrees (within four attempts) within ten consecutive academic years following registration and
  - f. has paid such fees or other dues as may be prescribed by the University, and
  - g. has fulfilled any other conditions or requirements as may be prescribed by the University.
- 3) The examinations leading to MBBS Degrees shall be as follows:
- Three semester examinations leading to Second Examination for MBBS Degrees
  - Five semester exams leading to Third Examination for MBBS Degrees
  - Final Examination for MBBS Degrees
- 4) These general regulations are applicable to Second, Third and Final Examinations leading to MBBS Degrees.
- 5) The modules / subjects within the courses of study and syllabi for the examinations leading to MBBS Degrees and forms of assessments in Second, Third and Final examination shall be prescribed by the Regulations made by the Senate.
- 6) Second, Third and Final examinations leading to MBBS Degrees prescribed by these regulations shall be conducted by a Board of Examiners constituted for the conduct of that examination by the Senate and appointed by the Council.
- 7) A candidate shall present himself / herself for each examinations leading to second, third or final MBBS Degrees at the earliest scheduled examination after completion of the relevant course work, on the first occasion at which he / she is required to do so,
- 8) A candidate must have evidence of satisfactory completion of the relevant mandatory coursework / clinical rotations in order to be eligible to appear for that examination.
- 9) A candidate who does not have evidence of satisfactory completion of the relevant mandatory course work and clinical rotations, must complete such course work and clinical rotations by attending such classes he/she missed in the next available opportunity. Once course work and clinical rotations have been satisfactorily completed as the case may be, the candidate is eligible to sit for the next scheduled examination.
- 10) i. A candidate may submit a valid excuse for being absent at any examination and such a valid excuse shall be;

- a) an illness or
  - b) a personal problem as defined hereafter
- ii. In case of an illness while in halls of residence, the student should contact the Chief Medical Officer (CMO) at the University Health Centre immediately. If a student falls sick at home or elsewhere during examination time he/she or his/her guardian should inform the Dean/Deputy Registrar/Senior Assistant Registrar/Assistant Registrar of the Faculty of Medicine within five days by telegram/telephone or electronic media followed by a letter indicating the nature of illness and the name of the attending doctor. The student should report to the CMO with a valid medical certificate at the earliest opportunity within two weeks of the last day of examination. Validity of the certificate would be determined by the Senate rules governing acceptance of medical certificates.
- iii. In case of a personal problem involving an immediate family member, the student should contact the Dean/Medicine or Assistant Registrar/Senior Assistant Registrar / Deputy Registrar immediately via telegram/telephone or electronic media followed by a letter indicating the circumstances leading to his/her absence from the relevant examination. His/her excuse will be considered by the Senate. Grounds for consideration would be:
- a) Death of an immediate family member (parents / brother / sister / if married, spouse or children/ in case no parents, the legal guardian)
  - b) Serious illness, of parents / brother / sister / if married, spouse or children/ in case no parents, the legal guardian, requiring personal attention by the student, certified by a medical practitioner specified in the Senate rules and regulations governing medical certificates
  - c) Student participation in a university, national or international level activity for which prior permission has been obtained from the University
  - d) Any other cause such as a natural disaster certified by a competent authority clearly precluding a candidate from attending relevant examination
- 11) i. If the candidate's absence from mandatory course work and/or clinical rotations is covered by a valid excuse accepted by the Senate, the candidate is required to sit the next scheduled examination and that would be considered as the first scheduled attempt of the said candidate at the said examination, and therefore he / she will be eligible for classes and distinctions. The said candidate is not eligible for prizes and medals.

The student will be nevertheless required to make up the shortfall in attendance of that course work and/or clinical rotations subsequently in order to be eligible to sit the said next scheduled examination.

- ii. If the candidate's absence from course work and clinical rotations is not covered by a valid excuse, this would be considered as a subsequent scheduled attempt and therefore he / she will not be eligible for classes, distinctions, prizes and medals. The student will be nevertheless required to make up the shortfall in attendance of that course work and/or clinical rotations subsequently in order to be eligible to sit the said next scheduled examination.
- 12) In the absence of an excuse acceptable to the Senate, failure to sit any due or scheduled examination shall be considered as an unsuccessful attempt at that examination.
  - 13) A candidate must pass all components of a given examination at the first attempt and at the same examination, in order to be eligible for classes and distinctions.
  - 14) A candidate shall not be eligible for prizes and medals unless he / she has taken the examination on the earliest occasion (the candidate must pass all components of a given examination at the first attempt and at the same examination) on which he / she is qualified to do so irrespective of any other reason, provided that it shall be within the power of the Senate to declare, for some specified reason, that he / she is eligible for prizes and medals at a subsequent examination.
  - 15) If a candidate is absent for the entire examination at the first scheduled attempt, and;
    - i. he / she has a valid excuse accepted by the Senate, the candidate may sit for the next examination as his / her first attempt. Therefore, he / she will be eligible for classes and distinctions.
    - ii. he / she does not have a valid excuse acceptable to the Senate, the candidate must sit for the next examination as his / her second attempt, and therefore he / she will not be eligible for classes and distinctions.
  - 16) If a candidate is absent for an assessment unit / subject that comprises a given examination leading to MBBS Degrees, and he / she has a valid excuse accepted by the Senate the candidate may select one of the following options:
    - The candidate may request in writing that the whole examination is considered null and void, and take all the assessment units / subjects at the

next scheduled examination, which would be considered as his / her first attempt. Therefore, the candidate will be eligible for classes and distinctions.

- The candidate may request in writing to sit at a next scheduled examination only for the subjects for which he / she was absent. Such an attempt will be considered as the first attempt and so on. The results of the component/subject that the candidate sat for would be withheld until the results of all the components/subject can be released. The maximum grade the candidate will be given for that particular component/subject at the said next scheduled examination will be 'C' in respect of Second and Third Examinations leading to MBBS Degrees and '50 %' in respect of Final Examination leading to MBBS Degrees. Therefore, the candidate will not be eligible for classes, and distinctions.
  - When the candidate does not have a valid excuse acceptable to the Senate, the candidate must sit for the relevant assessment unit/ subject at the next scheduled examination as his / her second attempt, and therefore he / she will not be eligible for classes and distinctions. The maximum grade the candidate will be given for that particular component/subject at the said next scheduled examination will be 'C' in respect of Second and Third Examinations leading to MBBS Degrees and '50 %' in respect of Final Examination leading to MBBS Degrees. Therefore, the candidate will not be eligible for classes, and distinctions.
- 17) In the event that a student submits medical certificates more than once as reasons for postponement of a scheduled attempt at a given examination, the student shall be required to appear before a medical board appointed by the Faculty Board of Medicine. Such a student shall be permitted to sit for the examination only upon ratification of the recommendation of the medical board by the Faculty Board of Medicine.
- 18) A candidate who has been successful at the, Second, Third and Final Examinations leading to MBBS Degrees may be awarded First Class or Second Class (Upper division) or Second Class (Lower division) or a pass, as the case may be.

### **Cancellation of the Studentship**

#### **Cancellation of studentship due to failure to complete the MBBS course**

The studentship will be terminated if a student is unable to pass a module/s with a maximum of 4 attempts at the 2nd MBBS barrier.

If a student is unable to complete the final MBBS examination within ten (10) years of registration to the MBBS programme his/her studentship will be terminated.

A student cannot be a candidate for the final MBBS examination if a period of ten academic years has lapsed since his/her registration.

The exceptions to this rule are:

- a. When the university is closed for administrative reasons.
  - b. Medical leave is obtained with prior approval up to a period of two years. Such periods of time will be excluded from the ten-year limitation.
1. Reference: By-Laws : The University Act No 16 of 1978 (By-laws made by the Council of the University of Peradeniya under Section 29 (n) read with section 135 (1) (d) of the Universities Act No 16 of 1978
  2. Revised Curriculum of the MBBS degree Program of the Faculty of Medicine. Senate Book 413(Book 11 )/16.08.2016

### **Submission of Medicals During an Examination**

- If a student has sat a component of a module (e.g. – SAQ/MCQ paper) but submitted a medical (valid excuse as per examination regulations approved by the Senate ST 478.10.13) for another component of the same module and failed, the next available attempt will be considered as his/her 2<sup>nd</sup> attempt.
- In final MBBS examination, if a student is unable to sit for all five subjects during a particular final MBBS examination (in one and same sitting) and submit a medical for the subjects he/she was unable to sit, there are two options (Same for semester exams).
  1. He/she can submit a letter to the Dean by mentioning that the said candidate is willing to do the entire exam in next available attempt as a whole as first attempt if the medical certificate is accepted by the University authorities. In such instance, the subjects he/she already done will be not valid for the next examination.
  2. He/ she can take only the subjects that the said candidate was unable to do due to the illness in next available attempt, hence the next available attempt will be considered as his/her 2<sup>nd</sup> attempt.

(Ref. General regulations applicable to the Second, Third, and Final Examination leading to Bachelor of Medicine and Bachelor of Surgery (MBBS) Degree rule no: 16 (Senate ST 478.10.13)

## **University policies, rules, regulations and by-laws**

All other university examination policies, rules, regulations and by laws with respect to the Examination procedure and submission of medical certificate will mutatis mutandis apply to the Faculty of Medicine.

### **Award of the Degree of Bachelor of Medicine & Bachelor of Surgery.**

The degree of MBBS is awarded to a student who has successfully completed the final MBBS examination, the third MBBS examination and the second MBBS examination within ten years of registration while adhering to all the rules and regulations laid down by the University of Peradeniya and the Faculty of Medicine with respect to examinations.

Subject to these regulations, a student shall be awarded the MBBS Degree, only if he/she

- i. has been admitted and registered as an internal student of the Faculty of Medicine and the University, and
- ii. has completed to the satisfaction of the Senate, courses of study as prescribed by the University By-Laws, Rules and Regulations made there under, and
- iii. has passed the Second Examination for MBBS Degrees, and
- iv. has passed the Third Examination for MBBS Degrees, and
- v. has passed the Final Examination for MBBS Degrees within ten consecutive academic years following registration and
- vi. has paid such fees or other dues as may be prescribed by the University, and
- vii. has fulfilled any other conditions or requirements as may be prescribed by the University.

### **Cancellation of the Studentship**

#### **Cancellation of studentship due to failure to complete the MBBS course**

The studentship will be terminated if a student is unable to pass a module/s with a maximum of 4 attempts at the 2nd MBBS barrier.

If a student is unable to complete the final MBBS examination within ten (10) years of registration to the MBBS programme his/her studentship will be terminated.

A student cannot be a candidate for the final MBBS examination if a period of ten academic years has lapsed since his/her registration.

The exceptions to this rule are:

- a. When the university is closed for administrative reasons.
- b. Medical leave is obtained with prior approval up to a period of two years. Such periods of time will be excluded from the ten-year limitation.



## Common regulations

Second, Third and Final examinations leading to MBBS Degrees prescribed by these regulations shall be conducted by a Board of Examiners constituted for the conduct of that examination.

A candidate shall present himself / herself for each examination leading to MBBS Degrees at the earliest scheduled examination after completion of the relevant course work, on the first occasion at which he / she is required to do so, provided that it shall be within the power of the Senate to declare that he / she is eligible to appear for that examination.

A candidate must have evidence of satisfactory completion of the relevant mandatory course work / clinical rotations in order to be eligible to appear for that examination.

A candidate who does not have evidence of satisfactory completion of the relevant mandatory course work and clinical rotations, must complete such course work and clinical rotations by attending extra classes. Once course work and clinical rotations have been satisfactorily completed, the candidate is eligible to sit for the next scheduled examination.

A student must sit the first available examination unless a valid excuse has been submitted to the faculty and accepted by the senate.

The first available attempt is the examination in respect to a module, for which a student has been assigned to and is held at the scheduled end of the module, course or subject.

If an excuse submitted to the faculty for failure to sit an available examination is accepted by the Senate, that examination shall not be considered as an attempt.

A candidate may submit a valid excuse for being absent at any examination and such a valid excuse shall be

- a) an illness or
- b) a personal problem

Procedure for submission of valid medical certificate to support the absence from course work or examination due to illness have been mentioned under the regulations approved for the acceptance of medical certificate submitted by students for course work and examination.

In case of a personal problem involving an immediate family member, the student should contact the Dean/Medicine or Assistant Registrar/Senior Assistant Registrar / Deputy Registrar immediately via telegram/telephone or electronic media followed by a letter indicating the circumstances leading to his/her absence from the relevant examination. His/her excuse will be considered by the Senate. Grounds for consideration would be:

- a) Death of an immediate family member (parents / brother / sister / if married, spouse or children)
- b) Serious illness, requiring personal attention by the student, certified by a medical practitioner specified in the Senate rules and regulations governing medical certificates
- c) Student participation in a university, national or international level activity for which prior permission has been obtained from the University
- d) Any other cause such as a natural disaster certified by a competent authority clearly precluding a candidate from attending relevant examination

If the candidate's absence from mandatory course work and clinical rotations is covered by a valid excuse accepted by the Senate, the candidate is required to sit the next scheduled examination and that would be considered as the first scheduled attempt of the said candidate at the said examination, and therefore he / she will be eligible for classes and distinctions.

If the candidate's absence from course work and clinical rotations is not covered by a valid excuse, this would be considered as a subsequent scheduled attempt and therefore he / she will not be eligible for classes, distinctions, prizes and medals.

A candidate must be eligible to appear for all assessment units / subjects that comprise an examination before he / she is admitted to that examination. A candidate will be allowed to appear for a separate component / subject in a particular examination only if he / she has been referred in that component / subject at a previous examination.

In the absence of an excuse acceptable to the Senate, failure to sit any due or scheduled examination shall be considered as an unsuccessful attempt at that examination.

A candidate must pass all components of a given examination at the first attempt and at the same examination, in order to be eligible for classes, distinctions.

A candidate shall not be eligible for prizes and medals unless he / she has taken the examination on the earliest occasion on which he / she is qualified to do so irrespective of any other reason, provided that it shall be within the power of the Senate to declare, for some specified reason, that he / she is eligible for prizes and medals at a subsequent examination.

If a candidate is absent for the entire examination at the first scheduled attempt, and he / she has a valid excuse accepted by the Senate, the candidate may sit for the next examination as his / her first attempt. Therefore, he / she will be eligible for classes and distinctions.

He / she does not have a valid excuse acceptable to the Senate, the candidate must sit for the next examination as his / her second attempt, and therefore he / she will not be eligible for classes and distinctions.

If a candidate is absent for an assessment unit / subject that comprises a given examination leading to MBBS Degrees, and he / she has a valid excuse accepted by the Senate the candidate may select one of the following options:

- i. The candidate may request in writing that the whole examination is considered null and void, and take all the assessment units / subjects at the next scheduled examination, which would be considered as his / her first attempt. Therefore, the candidate will be eligible for classes and distinctions.
- ii. The candidate may request in writing to sit at a next scheduled examination only for the subjects for which he / she was absent. Such an attempt will be considered as the second attempt and so on. The results of the component/subject that the candidate sat for would be withheld until the results of all the components/subject can be released. The maximum grade the candidate will be given for that particular component/subject at the said next scheduled examination will be 'C' in respect of Second and Third Examinations leading to MBBS Degrees and '50 %' in respect of Final Examination leading to MBBS Degrees. Therefore, the candidate will not be eligible for classes, and distinctions.
- iii. When the candidate does not have a valid excuse acceptable to the Senate, the candidate must sit for the relevant assessment unit / subject at the next scheduled examination as his / her second attempt, and therefore he / she will not be eligible for classes and distinctions.

If a candidate is absent only for some sub components of the components/subjects of Second and Third examination leading to MBBS Degrees (e.g.; SAQ, essay, viva, practical, clinical examination) with a valid excuse acceptable to the Senate the candidate should select one of the following options;

- i. The candidate will be eligible to sit the particular sub component/subject of the examination at a subsequent attempt. The results of the component/subject that the candidate sat for would be withheld until the results of all the components/subjects can be released. The maximum grade the candidate will be given for that particular component/subject at the said next scheduled examination will be 'C'. Therefore, the candidate will not be eligible for classes and distinctions.
- ii. The candidate could request the whole examination to be considered null and void and sit for all the components/subjects at the next examination, which would be considered as his/her first attempt. The candidate would therefore be eligible for classes, distinctions.
- iii. When the candidate does not have a valid excuse acceptable to the Senate, the candidate must sit for the relevant assessment unit / subject at the next scheduled examination as his / her second attempt, and therefore he / she will not be eligible for classes and distinctions.

If a candidate is absent only for some sub component/s of a subject of Final examination leading to MBBS Degrees [e.g.; structured essay questions (SEQ), clinical examinations such as long case and short case, viva voce, objective structured clinical examination (OSCE), objective structured practical examination (OSPE)] with or without a valid excuse, the candidate should sit for the all sub components of the relevant subject at the next scheduled examination as his / her second attempt, and therefore he / she will not be eligible for classes and distinctions.

In the event that a student submits medical certificates more than once as reason for postponement of a scheduled attempt at a given examination, the student shall be required to appear before a medical board appointed by the Faculty Board of Medicine. Such a student shall be permitted to sit for the examination only upon ratification of the recommendation of the medical board by the Faculty Board of Medicine.

If a student is unable to sit for a specific module during a particular examination and submits a medical, the next available attempt will be considered as his/her first attempt for that particular module.

If a student has sat a component of a module (e.g., - SAQ/MCQ paper) but submitted a medical for another component of the same module and failed, the next available attempt will be considered as his/her 2nd attempt

In final MBBS examination, if a student is unable to sit for all five subjects during a particular final MBBS examination and submit a medical for the subjects he/she was unable to sit, there are two options.

- a. He/she can submit a letter to the Dean by mentioning that the said candidate is willing to do the entire exam in next available attempt as a whole as first attempt if the medical certificate is accepted by the University authorities. In such instance, the subjects he/she already done will be not valid for the next examination.
- b. He/ she can take only the subjects that the said candidate was unable to do due to the illness in next available attempt, hence the next available attempt will be considered as his/her 2nd attempt.

A candidate who has been successful at the, Second, Third and Final Examinations leading to MBBS Degrees may be awarded First Class Honours or Second-Class Honours (Upper division) or Second-Class Honours (Lower division) or a pass, as the case may be.

### **Interpretation**

Any question regarding the interpretation of these regulations shall be referred to the Senate of the University. The interpretation of the senate on the question/s shall be final.

## **Miscellaneous**

Amendments to these regulations may be amended on the recommendation of the Faculty Board by the Senate.

These regulations shall be reviewed periodically by the Faculty Board and amendments if required need to be proposed to the Senate

The decisions under these regulations should be approved by the senate. Once communicated to the student the decision of the Senate by the Registrar of the University shall be final.

The findings under these regulations with regard to the award of the Degree and other distinctions shall be taken by the examination board and shall referred to the senate for final recommendation.

## 7. Format of the examinations

2<sup>nd</sup> MBBS - Examination Format

Module Code	Module	Credits	Duration (Min)				Total Duration (Min)	Allocation of marks from 100%			
			MCQ	SAQ/ Essay	OSPE	Viva		MCQ	SAQ/ Essay	OSPE	Viva
<b>Y1S1</b>											
MED1101	Foundation to Human Anatomy	2	30	90	20	N/A	140	30%	40%	30%	-
MED1102	Foundation to Human Physiology	3	75	45	90	N/A	210	40%	40%	20%	-
MED1103	Biomolecules and Metabolism	4	60	60	60	N/A	180	30%	40%	30%	-
MED1104	Anatomy of Limbs	4	60	90	50	10	210	30%	40%	25%	5%
MED1105	Communication, Learning and Research - 1 (CLR - 1)	2 (Non-GPA)	Essay - 60 Mins IT Practical - 25 Mins Assignment (Take-home) - 3 weeks Short answer questions based on video clips - 15 Mins				Essay - 50% IT Practical - 15% Assignment - 15% Short answer questions based on video clips - 20%				
<b>Y1S2</b>											
MED1206	Anatomy of Thorax and Abdomen	4	60	90	60	10	220	30%	40%	25%	5%
MED1207	Cardiovascular, Respiratory and Alimentary Functions	7	75	60	45	N/A	180	40%	40%	20%	-
MED1208	Biochemical basis of Cardiorespiratory functions, Alimentation and Nutrition	5	60	60	60	N/A	180	30%	40%	30%	-
<b>Y2S1</b>											
MED2109	Neuroanatomy, Head and Neck	5	60	120	40	10	230	30%	40%	25%	5%
MED2110	Genitourinary system, Pelvis and Perineum	2	30	90	30	N/A	150	30%	40%	30%	-
MED2111	Neuroendocrine function, Excretion and Reproduction	8	75	60	45	N/A	180	40%	40%	20%	-
MED2112	Biochemical basis of Neuro-endocrine, Excretory and Reproductive functions	6	60	60	60	N/A	180	30%	40%	30%	-
<b>Y2S1 - 2<sup>nd</sup> MBBS Barrier</b>											

## Final MBBS examination format

Final MBBS examination is held at the end of the fifth year. It consists of five subjects; Medicine, Surgery, Gynaecology & Obstetrics, Paediatrics and Psychiatry.

The final MBBS examination evaluates knowledge, skills and attitudes gained through all five years, the emphasis being on clinical competencies and applied basic sciences.

### Subject of Medicine

Allocation of marks, minimum marks required to pass, number of questions, time allocation and timing of Final exam

	Theory			Clinical		Continuous Assessment/ OSCE	Total
	Common MCQ	SAQ	Total	Long	Short		
Allocated Marks	20%	20%	40%	20%	20%	20%	100%
Minimum marks required to pass	45% (not to round up at component level)			50% (not to round up at component level)			50%
Time and NO. of Questions	*2 hours	At discretion of each faculty (3hours)		40min with patient 20 min with Examiner (60 min)	4 cases – 30 min		
Time of Examination	May/Nov each year (MCQ & SEQ)			At the end of training program and 6 weeks before commencement or after completion of Final MCQ		At the end of appointment/and/ or at the end of 3 <sup>rd</sup> and 4 <sup>th</sup> year clinical appointments	

Second and subsequent attempts – Not to consider continuous assessment marks. Calculate total marks using the remaining component and to convert to 100%

## Subject of Surgery

	End of the Appointment assessment		End of the Course Assessment				Total
	OSCE	OSVE/ Viva	Theory		Clinical		
	10 stations, 30 minutes (max 3min each)	15 min Scrutiny of log/ procedure book, common surgical/ medical emergencies and common ward/ surgical procedures to be assessed (7.5 min per examiner)	<b>Common MCQ</b> 30MTF + 40SBA 2 hours	<b>SAQ</b> 8 questions 3 hours	<b>Long Bay 1-</b> Observed history taking & focused examination- 15min  <b>Bay 2-</b> Preparation-5 min Case discussion- 10min	<b>Short Bay 1-</b> 10 min (head and neck, skin and subcutaneous lump, muscular skeletal, nerve, orthopedics)  <b>Bay 2-</b> 10 min (Abdomen, groin, breast, vascular)	100%
Allocated Marks	12.5%	7.5%	20%	20%	20%	20%	
	20%						
Minimum marks required to pass			45% (not to round up at component level)		50% (not to round up at component level)		
	At the end of each group appointment in the professorial Surgical Unit.		At the end of the Final MBBS course (Final examination)				

## Subject of Paediatrics

	Theory			Clinical		Continuous assessment/ OSCE	Total
	Common MCQ	SAQ	Total	Long	Short		
Allocated marks	20%	20%	40%	20%	20%	20%	100%
Minimum mark required to pass	45% (not to round up at component level)			50% (not to round up at component level)			
Time and No. of questions	* 2hours	6 questions (3 hours)		40 min with Patient 20min with Examiner (60min)	2 cases (10min each) – 20 min		
Time of Examination	May/Nov each year (MCQ & SEQ)			At the end of training programme and 6 weeks before commencement or after completion of Final MCQ		At the end of appointment	



### Subject of Gynaecology and Obstetrics

	Theory			Clinical			Continuous assessment/ OSCE	Total
	Common MCQ	SAQ/Essay	Total	Obstetrics	Gynaecology			
Allocated marks	20%	20%	40%	20%	20%		20%	100%
Minimum mark required to pass	45% (not to round up at component level)			50% (not to round up at component level)				
Time and No. of questions	* 2hours	5 questions (2hours)		Obstetrics Gynaecology	40min 40min	Total 80 minutes		
Time of Examination	May/Nov each year (MCQ & SEQ)			At the end of training programme and 6 weeks before commencement or after completion of Final MCQ			At the end of Obstetrics and Gynaecology Professorial appointment	
To prepare the common merit list all Medical Faculties should send the Common MCQ marks and total marks for the clinical examination which includes Obstetrics (20%) and Gynaecology (20%)								

### Subject of Psychiatry

	Theory			Clinical		Continuous assessment/ OSCE	Total
	Common MCQ	SAQ	Total	Long	MOCE		
Allocated marks	25%	25%	50%	25%	15%	10%	100%
Minimum mark required to pass	45% (not to round up at component level)			50% (not to round up at component level)			
Time and No. of questions	* 2 hours	4-6 questions at discretion of the Faculty 3 hours		30min with patient 5 min preparation time 15min with Examiner (50min)	Two live stations with simulated or real patients. Duration of each station - 8 minutes (Task focused and objectively structured assessment)		
Time of Examination	May/Nov each year (MCQ & SEQ)			At the end of training programme and 6 weeks before commencement or after completion of Final MCQ		At the end of appointment	

Note: \*Common MCQ consist of 30True/False (T/F) and 20Single Best Answer (SBA) type questions. 30T/F type questions will be marked out of 150. 20SBA type questions will be marked out of 100(each SBA type questions to be given 5marks each) and converted to 100%. Final Marks to be obtained by an average of T/F and SBA (%)

The above format of the Final MBBS examination will be followed by all medical faculties in the country as agreed at the UGC Standing Committee on Medical and Dental Sciences.

## 8. Names of Scholarships, Medals & Prizes & the Criteria Awarded by the Faculty of Medicine, University of Peradeniya

### BIOCHEMISTRY

#### **Distinctions**

Awarded to a student who obtains a minimum average of 70% for the three Biochemistry modules (MED1103, MED1208, MED2112) conducted for the 2nd MBBS examination in the first attempt.

#### **Emily Wickramanayake Scholarship**

Awarded to a student who obtains honours and a minimum of 70% in Biochemistry.

### PHYSIOLOGY

#### **Distinctions**

Awarded to a student who obtains a minimum average of 70% for the Physiology components in the modules for the 2nd MBBS examination, in the first attempt.

#### **Prize for the best project in Physiology, endowed by Kingsley Wickramasuriya in memory of Mildred Mendis**

Awarded to the student who secures the highest marks in Physiology.

#### **Nimal Udupihille Memorial Gold Medal for Physiology**

Awarded to the student who has recorded the highest raw marks for Physiology at the 2<sup>nd</sup> MBBS examination, has obtained a distinction in Physiology, a second class upper or above at the 2<sup>nd</sup> MBBS examination and passed all the semester exams at the first attempt.

#### **Dr. Sunil Wimalaratne Gold Medal for Excellence in Physiology**

Awarded to the student who has obtained highest marks in Physiology for all the module examinations conducted by the Department of Physiology, Faculty of Medicine, passed all the module examinations conducted by the Department of Physiology, Faculty of Medicine at the first available attempt and has obtained a minimum of a second class (upper division) pass or its equivalent GPA at the 2<sup>nd</sup> MBBS Examination.

### ANATOMY

#### **Distinctions**

Awarded to a student who obtains a minimum average of 70% for the Anatomy components in the modules for the 2nd MBBS examination, in the first attempt.

**Chalmers Gold Medal for Anatomy**

Awarded for the best performance in Anatomy at the second MBBS examination.

**C. B. Dharmasena Gold Medal for Anatomy**

Awarded for a student who obtains a first class and comes first in Anatomy with a mark of distinction at the second examination

**SECOND EXAMINATION FOR MEDICAL DEGREES**

**University scholarship for the second MBBS examination**

Awarded for the highest aggregate and a second class

**C. E. S. Weeratunga gold medal for second MBBS examination**

Awarded for the greatest competence at the second MBBS examination

**1967 Batch Gold Medal for Excellence at the 2<sup>nd</sup> MBBS examination**

Awarded for the best performance with the highest GPA, and a first-class honours at the second MBBS examination.

**The Arthur Fernando Memorial Prize**

Awarded to the meritorious student from amongst those who secure the highest average mark not less than 60% at the second MBBS examination.

**Karandeniya Hewage Donald Fernando Memorial Prize for the Faculty of Medicine**

The prize shall be awarded to the most meritorious student who secures the highest average mark not less than 60% at the second MBBS examination and who had gained admission to the University of Peradeniya from the Galle district.

**PARASITOLOGY**

**Distinctions**

Awarded to students obtaining an average cumulative score of 70% or above in the Parasitology components of Infection 1 and Infection 2 modules, in the first attempt.

**V. Sivalingam Memorial Prize in Parasitology**

Awarded to the student who obtains the highest mark above 70% in Parasitology at the third MBBS examination, and secures a first- or second-Class pass in the first attempt at the third MBBS examination.

## **FORENSIC MEDICINE**

### **Distinctions**

Awarded at the end of the year to all students who obtain an average cumulative score of 70% or above in the DIS 2 and DIS 4 examinations in the first attempt.

### **Punchi Banda Panabokke Memorial Prize**

Awarded to the student who obtains a first or second class and the highest mark over 65 in Forensic Medicine at the third MBBS examination.

## **COMMUNITY MEDICINE**

### **Distinctions**

Awarded at the end of the fourth year to students who obtain a GPA of 03 or more at the 3<sup>rd</sup> MBBS examination, an average of over 70% for community Medicine, an average of over 70% for statistics, research methods and research viva of the Communication Learning and Research stream, and have not repeated any other modules during the 4-year period.

### **Marcus Fernando Prize for Community Medicine**

Awarded to the student who obtains the highest average cumulative score, over 70%, for community Medicine, and obtains a GPA of 03 or more at the 3<sup>rd</sup> MBBS examination. The student should not have repeated any modules during the 4-year period.

### **Geetha De Silva Prize**

Awarded to the student who obtains the highest marks, over 70%, for the research report and viva examination at the Year 04 Semester II examination, achieves the highest average mark for statistics and research methods components, a score not less than 70% for community Medicine, a GPA of 03 or above at the 3<sup>rd</sup> MBBS examination and has not repeated any modules during the 04-year period.

### **Somarathne Balasuriya Prize**

Awarded the student who has recorded the best performance in Community Medicine at the end of 4<sup>th</sup> year period.

## **PATHOLOGY**

### **Distinctions**

Awarded at the end of year 4 to all students who obtain an average cumulative score of 70% or above for the modules Foundation in Pathology, Systematic Pathology I,

Systematic Pathology II and Haematology, in the first attempt.

**Irene Maralanda Panabokke Memorial Prize for Pathology**

Awarded to the student who obtains First or Second Class Honours and the highest mark of over 65% in Pathology at the third MBBS examination.

**Loos Gold Medal for Pathology**

Awarded for the greatest competence in Pathology at the third MBBS examination.

**G. E. Tennekoon Prize for Pathology**

Awarded to the student who performs the best at the first attempt in the third examination in Pathology and obtains a minimum mark of 70%.

**PHARMACOLOGY**

**Distinctions**

Students who obtain an average mark of 70% or more for the modules Foundation in Pharmacology, Systemic Pharmacology - I, Systematic Pharmacology - II and Therapeutics in Pharmacology are awarded distinctions provided they have obtained a GPA of 2 or more at the third MBBS examination.

**Craib prizes (two prizes)**

The prize shall be awarded to the student who obtains 70% or more in Pharmacology with a First- or Second-Class Pass at the third MBBS examination.

**MICROBIOLOGY**

**Distinctions**

All students obtaining an average score of 70% or above in the Microbiology components of Infection 1, Defenses of the Body and Infection 2 modules, in the first attempt.

**THIRD EXAMINATION FOR MEDICAL DEGREES**

**H. J. Hazari Gold Medal**

Awarded for the greatest competence at the third MBBS examination.

**Punchi Banda Panabokke and Irene Maralande Panabokke Memorial Scholarship**

Awarded to a Sinhalese student who has the best performance at the third MBBS examination with a First or Second Class Honours as well as an overall average of over 65%.

## **FINAL EXAMINATION FOR MEDICAL DEGREEES**

### **University Prize for Academic Excellence**

Awarded to all First-Class holders at the final examination.

### **Perry Exhibition**

Awarded to the student who obtains the highest aggregate and a First Class.

### **The Sri Lankabhimanya Hon. Lakshman Kadirgamar Gold Medal for Excellence**

Awarded to the student who has secured a First Class Honours, at the final MBBS examination for Medical degrees and has shown commendable performance in extracurricular activities during his/her undergraduate medical career.

### **Peradeniya University gold medal for most outstanding student graduating from the Faculty of Medicine**

This is awarded to the most outstanding student graduating from the Faculty of Medicine for scholastic and extramural excellence.

## **SURGERY**

### **Rockwood Gold Medal for Surgery**

Awarded to the student who obtains the highest mark in Surgery, and a Distinction.

### **Garvin Gold Medal for Operative Surgery**

Awarded to the student who obtains the highest mark in Operative Surgery, and a Distinction.

### **Dr. H. S. Keerthisinghe Endowment (3 Prizes)**

- (i) **A. C. Fernando Prize in Surgery**
- (ii) **Barr Kumara Kulasinghe Prize in Surgery**
- (iii) **B. H. Aluwihare Prize in Surgery**

Awarded to 3 students who obtain the highest marks in Surgery (minimum requirement of 65% marks does not apply to this prize).

## **MEDICINE**

### **Dhandishaw Dadhabhoy Gold Medal for Medicine**

Awarded to the student who obtains the highest mark in Medicine, and a Distinction.

### **Nimal Senanayake Prize**

Awarded to the student who obtains the highest mark in Clinical Medicine, and a Distinction.

## **OBSTETRICS AND GYNAECOLOGY**

### **Naomi Thiagarajah Memorial Prize for Midwifery**

Awarded to the student who obtains the highest mark in Obstetrics (Clinicals and Orals), which should be 65% or above.

### **H. M. Peiris Prize for Obstetrics &Gynaecology**

Awarded to the student who obtains the highest mark in Obstetrics &Gynaecology, which should be 65% or above.

### **Maneckbai Dadhabhoy Gold Medal for Midwifery**

Awarded to the student who obtains the highest mark in Obstetrics &Gynaecology, and a Distinction.

### **Kingsley De Silva Prize for Obstetrics &Gynaecology**

Awarded to the student who obtains the highest mark in Gynaecology and Obstetrics. The highest mark should be 65 or more and must pass the final MBBS examination in the first attempt.

## **PAEDIATRICS**

### **Herbert A. Aponso Prize in Paediatrics**

Awarded to the student who obtains a Distinction and the highest mark in Paediatrics.

### **Chandra Abeysekera Gold Medal in Paediatrics**

This will be awarded to a student who has secured a Distinction in Paediatrics and also obtained the highest mark for the clinical component in Paediatrics at the final MBBS examination.

The student should also have obtained a Second-Class Honours Upper Division or a First Class at the final MBBS examination.

### **Dean's List**

Students with outstanding academic performance during the MBBS course are included in the Dean's list

### **Faculty Awards**

Five students with outstanding overall performance during the MBBS course are included in the Dean's list

**For details of Faculty Awards and Dean's List, visit:**

<http://med.pdn.ac.lk/students/awards.pdf>

## 9. Procedure approved by the University of Peradeniya for the acceptance of medical certificates submitted by students for work and examinations

1. Students are requested to support the absence from course work or examination due to illness by a valid medical certificate conforming to the format of a medical certificate issued by a government hospital. Such medical certificate should be obtained from the following persons;
  - University Medical Officer (UMO)
  - District Medical Officer
  - Consultant Specialist in the particular field
  - Head of a Government Base Hospital
  - Medical Superintendent of a Provincial Ayurvedic Government Hospital
  - Ayurvedic Physician registered in the Council

Under exceptional circumstances, medical certificates issued by private hospitals or registered private practitioners could be considered by the University Medical Board.

2. Students who fall ill during sessions or examination time should contact the University Medical Officer at the University Health Centre immediately.

If a student falls sick at home or elsewhere during sessions or examination time he/she or his/her guardian should inform the Dean of the respective Faculty within seven (7) days by telegram/fax/e-mail followed by a letter indicating the nature of the illness and the name of the attending doctor etc. Medical certificate supporting the illness of the student also should be sent to the Dean.

Under exceptional circumstances if a student was not able to meet the deadline mentioned above, he/she could send his/her appeal to the relevant Faculty Board.

The Dean on receipt of such medical certificate/s should follow the following procedure:

- i. In case of Western Medical Certificates submitted by students to cover absence from course work or examination:
  - a. The medical certificate should be referred to the Chief Medical Officer (CMO) of the university his/her observations and recommendations.
  - b. The CMO in turn examines the certificate and if he/she wishes could summon the student for examination and thereafter send his/her observations, recommendations to the Dean.
  - c. In cases where the CMO wishes to convene the Western Medical Board, he/she may make arrangements to convene the Western Medical Board and refer the recommendations of the Board to the Dean.
  - d. The Dean on receipt of such recommendations from the CMO or Western Medical Board should send it to the Faculty Board for ratification.



- ii. In the case of Ayurvedic Medical Certificates submitted by students to cover absence from course work or examinations the following procedure should be followed:
  - a. Ayurvedic medical certificates submitted by students in respect of absence from examinations or course work should be circulated among the members of the Ayurvedic Medical Board for their observations by the Senior Assistant Registrar/ Assistant Registrar in charge of student registration of each Faculty in consultation with the Deans of the respective Faculties.
  - b. Each member of the Ayurvedic Medical Board may send his/her observations and recommendations on the face of the medical certificate to the Dean of the respective Faculty through the Senior Assistant Registrar/ Assistant Registrar of the Faculty.
  - c. In case where the opinions of the members of the Ayurvedic Medical Board vary, the Senior Assistant Registrar/ Assistant Registrar of the Faculty in consultation with the Dean of the Faculty may take steps to convene a meeting of the Ayurvedic Medical Board.
  - d. If the members of the Ayurvedic Medical Board think that the medical certificates should be examined at a meeting of the Board, the Dean of the Faculty should be informed accordingly.
  - e. If the members wish to examine students concerned, they could be summoned before the Medical Board through the Senior Assistant Registrar/ Assistant Registrar of the Faculty.
  - f. The recommendation of the Ayurvedic Medical Board should be sent to the Faculty Board through the Dean of the Faculty for ratification.
  - g. The original copies of the Ayurvedic Medical Certificate submitted by students should be kept in the files of the students concerned and copies of such certificates should be sent to the Chief Medical Officer for purposes of record.
3. There shall be two Medical Boards in the University, viz. Western Medical Board and Ayurvedic Medical Board.

**i. Western Medical Board**

*Terms of Reference*

- a. The Western Medical Board shall consider cases where the Chief Medical Officer of the University has doubt about the validity of the grounds (including medical certificate) upon which the request of students to be excused for absence from course work of examinations.
- b. The Chief Medical Officer of the University shall convene the Western Medical Board if and when necessary.
- c. The Board has the right to call students before the Board when necessary for purposes of interview, examination and investigations.
- d. Recommendations of the Medical Board should be sent to the Faculty Board through the Dean of the respective Faculty.

- e. The Western Medical Board should consist of the Heads of the Departments of Medicine, Surgery and Psychiatry of the Faculty of Medicine or their nominees and the CMO of the University.

**ii. Ayurvedic Medical Board**

*Composition*

The Ayurvedic Medical Board shall consist of three (3) persons appointed by the Senate of the University.

*Terms of Reference*

- a. The Ayurvedic Medical Board shall consider Ayurvedic Medical Certificates submitted by students requesting exemption from examinations or course work and make recommendations to the Senate through the Deans of the respective Faculties.
- b. The Board shall meet at least once within a semester. The Senior Assistant Registrar/ Assistant Registrar in charge of student registration in consultation with the Dean of the respective Faculty shall convene meetings of the Ayurvedic Medical Board whenever necessary and co-ordinate the work between the Faculty and the Ayurvedic Medical Board.
- c. The board has the right to call students before the Board when necessary for purposes of interviews, examination and investigations. Such requests should be sent to the students through the Senior Assistant Registrar/ Assistant Registrar in charge of student registration of each Faculty.

**Guidelines for the Functioning of the Ayurvedic Medical Board**

- a. When accepting ayurvedic medical certificates, caution is to be exercised by accepting from only those who are registered in the Ayurvedic Medical Council.
  - b. General or special registered ayurvedic medical practitioners could recommend on anyone occasion leave up to 14 days at a stretch. Those with more than the above amount should get an endorsement from the medical officer in charge of the closest government ayurvedic hospital or government ayurvedic dispensary.
  - c. The decision on leave stipulated in medical certificates from ayurvedic hospitals, government dispensaries or local government ayurvedic dispensaries rests with the Board.
  - d. This Board possesses the right to question the validity of any ayurvedic medical certificate.
  - e. The Board possesses the right to summon before them any student submitting an ayurvedic medical certificate, if necessary.
4. When students request exemption from examinations of course work upon the basis of illness, the ultimate decision on question of exemption, repetition of course and of eligibility for honors, shall be the functions of the relevant Faculty Board upon the recommendation of the Medical Board or the Chief Medical Officer.

## **10. Regulations relating to examination procedure, offences & punishments for examinations conducted under the semester-based course system**

Regulations made by the Senate of the University of Peradeniya and approved by the Council under section 136 read with sections 29, 45 of the Universities (Amendment) Act No. 7 of 1985.

Examination of a course/course unit may consist of several assessment components (quizzes, within semester and end-semester examinations, term papers, assignments, etc.)

### **Regulations**

These regulations may be cited as the Examination Procedure, Offences & Punishment Regulation No. 1 of 2008, effective from 23.01.2008.

#### **10.1 Part I – Examination Procedure**

1. A candidate is expected to be outside the examination hall at least 15 minutes before the commencement of each paper, but shall not enter the hall until he/she is requested to do so by the supervisor.
2. On admission to the hall, a candidate shall occupy the seat allotted to him/her and shall not change it except on the specific instruction of the Supervisor.
3. For examinations which have a duration of one or more hours, a candidate shall not be admitted to the examination hall after the expiry of half an hour from the commencement of the examination. A candidate shall not be allowed to leave the hall until half an hour has elapsed from the commencement of the examination or during the last 15 minutes of the paper.
4. However, under exceptional circumstances or in cases where examinations have a duration of less than one hour, the supervisor in consultation with the Dean of the Faculty concerned may use his discretion in the enforcement of rule 3.
5. A candidate shall have his/her student record book/student identity card/admission card with him/her in the examination hall on every occasion he/she presents himself/herself for a paper. His/Her candidature is liable to be cancelled if he/she does not produce the student record book/student identity card/admission card, he/she shall sign a declaration in respect of the paper for which he/she had not produced the student record book/student identity card/admission card in the form provided for it, and produce the

student record book/student identity card/admission card to the Registrar or the relevant Senior Assistant Registrar/Assistant Registrar within the next three working days. If a candidate loses his/her student record book/student identity card/admission card during the examination period, he/she shall obtain a duplicate of student record book/student identity card/admission card as the case may be, from the Registrar or relevant Senior Assistant Registrar/Assistant Registrar for production at the examination hall.

6. A candidate shall not have on his/her person or in his/her clothes or on the admission card, time-table, student record book/student identity card, any notes, signs or formulae etc., except those items that are permitted. All unauthorized items which a candidate has brought with him/her should be kept at a place indicated by the Supervisor/Invigilator.
7. A candidate may be required by the supervisor to declare any item in his/her possession or person.
8. No candidate shall copy or attempt to copy from any book or paper or notes or similar material or from the scripts of another candidate. A candidate shall neither help another candidate nor obtain help from another candidate or any other person. A candidate shall not conduct himself/herself so negligently that an opportunity is given to any other candidate to read anything written by him/her or to watch any practical examination performed by him/her. No candidate shall use any other unfair means or obtain or render improper assistance at the examination.
9. If any candidate was found to have copied from another candidate by an examiner at the time of marking, he/she would be treated as having committed a punishable offence.
10. No candidate shall submit a practical book or field book or dissertation/thesis or project study or answer script or assignment which has been prepared wholly or partly by anyone other than the candidate himself/herself.
11. A candidate shall bring his/her own pens, ink, mathematical instruments, erasers, pencils or any other approved equipment or stationery which he/she has been instructed to bring. The use of a calculator will be permitted only for papers that contain a rubric to that effect.
12. Examination stationery (i.e., writing paper, graph paper, drawing paper, ledger paper, précis paper etc.) will be supplied at the examination hall as and when necessary. No sheet of paper or answer book supplied to a candidate may be torn, crumbled, folded or otherwise mutilated. No papers other than those supplied to him/her by the Supervisor/Invigilator shall be

used by candidates. All material supplied, whether used or unused, shall be left behind on the desk and not removed from the examination hall.

13. Every candidate shall enter his/her Index Number/Registration Number on each answer book and on every continuation paper. He/ She shall also enter all necessary particulars as required. A candidate who inserts on scripts an index number/registration number other than his/her own is liable to be considered as having attempted to cheat.

A script that bears no Index Number/Registration Number, or has an index number/registration number which cannot be identified, is liable to be rejected. No candidate shall write his/her name or any other identifying mark on the answer script unless otherwise authorized.

14. All calculators and rough work shall be done only on paper supplied for the examination, and shall be cancelled and attached to the answer script. Such work should not be done on any other material. Any candidate who disregards these instructions runs the risk of being considered as having written notes or outline of answers with the intention of copying.
15. Any answer or part of an answer, which is not to be considered for the purpose of assessment, shall be neatly crossed out. If the same question has been attempted in more than one place the answer or answers that are not to be considered shall be neatly crossed out.
16. Candidates are under the authority of the supervisor and shall assist him/her by carrying out his/her instructions and those of the Invigilator during the examination and immediately before and after it.
17. Every candidate shall conduct himself/herself as quietly as possible. A candidate is liable to be excluded from the examination hall for disorderly conduct.
18. Candidates shall stop work promptly when ordered by the supervisor/invigilator to do so.
19. Absolute silence shall be maintained in the examination hall and its precincts. A candidate is not permitted for any reason whatsoever to communicate or to have any dealing with any person other than the supervisor /invigilator. The attention of the supervisor/invigilator shall be drawn by the candidate by raising his/her hand from where he/she is seated.
20. During the course of answering a question paper, no candidate shall be permitted to leave the examination hall temporarily. In case of an emergency, the supervisor/invigilator may grant him/her permission to do so but the candidate will be under his/her surveillance.

21. No person shall impersonate a candidate at the examination, nor shall any candidate allow himself/herself to be impersonated by another person.
22. Any candidate receiving unauthorized assistance from any person shall be deemed to have committed an examination offence.
23. If circumstances arise which, in the opinion of the supervisor, render the cancellation or postponement of the examination necessary, he/she shall stop the examination, collect the scripts already written and then report the matter as soon as possible to the Dean of the relevant faculty.
24. The Supervisor/Invigilator is empowered to require any candidate to make a statement in writing on any matter which may have arisen during the course of the examination and such statement shall be signed by the candidate. No candidate shall refuse to make such a statement or to sign it. If such a candidate refuses to make such a statement or refuses to sign it, the supervisor/invigilator shall make his own statement and report the matter to the Dean of the faculty.
25. No candidate shall contact any person other than the Vice-Chancellor, Dean, Head of the Department, the Registrar or the relevant Senior Assistant Registrar regarding any matter concerning the examination.
26. Every candidate shall hand over the answer script personally to the supervisor/invigilator or remain in his/her seat until it is collected. On no account shall a candidate hand over his/her answer script to an attendant, a minor employee or another candidate.
27. Every candidate who registers for a course/course unit shall be deemed to have sat the examination of that course/course unit unless he/she withdraws from the course/course unit within the prescribed period for dropping courses/course units. He/she should submit a medical certificate in support of his/her absence, prior to the commencement of the examination. If such a document cannot be submitted before the commencement of the examination, a candidate shall inform of his/her inability to attend the examination to the Dean of the faculty within a week after the commencement of the examination. The medical certificate shall conform to the senate regulations. (See Appendix I).
28. When a candidate is unable to present himself/herself for any part/section of an examination of a course/course unit, he/she shall notify or be caused to notify this fact to the Dean of the faculty and the relevant Senior Assistant Registrar or Assistant Registrar immediately. This should be confirmed in writing with supporting documents and mailed by registered post within two weeks.

29. A student will be eligible for honours if all requirements for the award of honours are met with, within the prescribed period for the degree. However, candidates found guilty of an examination offence shall not be eligible for honours.
30. No student shall sit an examination of a course/course unit, if he/she has exhausted the number of attempts that he/she is allowed to sit that particular examination for, unless he/she has been granted special permission to do so by the Dean of the relevant faculty.
  - 30.1 Students are prohibited from carrying cellular phones during the course of written, oral, clinical or practical examinations.

## 10.2 Part II – Examination Offences and Punishments

### 1. Offences

- 1.1 Any candidate who violates examination rule 6 shall be deemed guilty of the offence of possession of unauthorized documents/items, and his/her candidature for the examinations of that semester shall be cancelled, and he/she shall be prohibited from sitting any examination of this university for a period varying from 1 – 5 semesters.
- 1.2 Any candidate who violates examination rule 8 or 9 shall be deemed guilty of the offence of copying, and therefore his/her candidature shall be cancelled from the examinations of that semester, and he/she shall be prohibited from sitting any examination of this university for a period of five semesters.
- 1.3 Any candidate who violates examination rule 10 shall be deemed guilty of the offence of having cheated at the examination, and his/her candidature for the examinations of that semester shall be cancelled, and he/she shall be prohibited from sitting any examination of this university for a period varying from 1 – 9 semesters.
- 1.4 Any candidate who is detected removing examination stationery and/or any other material provided for the examination (Rule 12) shall be deemed guilty of an examination offence, and his/her candidature for the examinations of that semester shall be cancelled, and he/she shall be prohibited from sitting any examination of the university for a period of three semesters.
- 1.5 Any candidate who violates any one or more of the rules in 7, 16, 17, 18, 19 and 20 shall be deemed guilty of the offence of disorderly conduct, and his/her candidature shall be cancelled from the examinations of that semester, and he/she shall be prohibited from sitting any examination of this university for a period of three semesters.

- 1.6 Any candidate who violates Examination Rule 21 shall be guilty of the offence of impersonation, and his/her candidature for the examinations of that semester shall be cancelled, and he/she shall be prohibited from sitting any examination of this university. Impersonator/s may also be liable to any punishment under the Penal Code/Criminal Law. In the event that the impersonator is found to be a graduate of this university, his/her degree shall be withdrawn.
- 1.7 Any candidate who violates Examination Rule 22 shall be guilty of an examination offence, and his/her candidature for the examinations of that semester shall be cancelled, and he/she shall be prohibited from sitting any examination of this university for a period of 1 – 5 semesters.
- 1.8 Any candidate found aiding and abetting in the commission of any of the above examination offences shall be deemed to have committed that offence and shall be punished in respect of the offence in accordance with the provisions of the relevant section.
- 1.9 Any other offence which is not covered in the above sections alleged to have been committed by a candidate and reported to the relevant authority by a supervisor or examiner shall be inquired into and appropriate action be taken.

### **10.3 Part III – Procedure Regarding Examination Offences Committed by Candidates**

1. There shall be an Examination Disciplinary Committee of not less than 3 members of whom at least one member is from outside the faculty, appointed for each case by the Dean of the relevant faculty to inquire into and make recommendations (including punishments) on examination offences referred to it. Member(s) outside the faculty shall be selected from a panel of members appointed for this purpose by the Vice Chancellor.

#### **2. *Classification of Offences***

Examination offences may be broadly classified as follows:

- 2.1 Possession of unauthorized documents/items
- 2.2 Copying
- 2.3 Cheating
- 2.4 Removal of stationery
- 2.5 Disorderly conduct
- 2.6 Impersonation
- 2.7 Unauthorized assistance
- 2.8 Aiding and abetting in the commission of above offences
- 2.9 Other offences



3. *Punishments*

(As specified in Part II-1.1-1.9)

4. *Procedure*

- 4.1 In all cases of violation of examination rules detected, the supervisor shall take action as outlined below and forward his/her report to the relevant Dean/Senior Assistant Registrar or Assistant Registrar.
- 4.2 In case of disorderly conduct, the supervisor shall in the first instance warn the candidate to be of good behavior. Disorderly conduct shall be considered grave, only if such conduct in the opinion of the supervisor is considered as causing a disturbance in the conduct of the examination. Where the candidate persists in unruly or disorderly conduct, the supervisor may exclude the candidate from the examination hall and issue him a letter with a copy to the relevant Dean/Senior Assistant Registrar/Assistant Registrar, cancelling his/her candidature from the examination.
- 4.3 In all cases of examination offences detected, the supervisor shall send a report to the relevant Dean along with any material taken into custody. Material taken into custody should be authenticated by placing the signatures of the candidate and the supervisor/invigilator and the date, time and place of detection. A supervisor should give particulars of any incriminating material of which he/she cannot take possession. The supervisor's report should be countersigned by one of the invigilators.
- 4.4 The Dean after preliminary inquiry shall place all reports of examination offences submitted by supervisors, under the supervision of the relevant Examination Disciplinary Committee for further action.
- 4.5 A supervisor, examiner, Head of Department or any other official of the university, who detects an examination offence shall report the matter in writing to the relevant Dean, who shall after preliminary inquiry submit his findings to the relevant Examination Disciplinary Committee for further action.
- 4.6 Any allegations regarding the commission of examination offences from whosoever received shall be submitted by the Dean, after preliminary inquiry, to the relevant Examination Disciplinary Committee, for further action.

## 5. *The Decision*

- 5.1 The punishment recommended by the Examination Disciplinary Committee shall be submitted to the relevant faculty board for a decision, and the decision will be reported to the Senate.

Senior Assistant Registrar/Assistant Registrar of the relevant faculty shall be the Convener/Secretary of the inquiring committee on examination offences.

## 6. *Appeals Board*

- 6.1 There shall be an appeals board, consisting of three members, appointed by the Vice Chancellor to consider appeals regarding the decision referred to in 5.1 above. Any student on whom a punishment has been imposed, may within a period of two weeks from the date of communication to him/her of such punishment, appeal against such punishment to the Vice Chancellor.

## 11. Basic rules of conduct and behavior for students of the Faculty of Medicine

The code of conduct for students of the Faculty of Medicine, Peradeniya is based on the following principles, codes and laws that govern and direct the conduct of the University undergraduate, as well as international norms and rules that apply to all personnel (including trainees) in health care settings.

***To train young men and women who are capable of fulfilling any function in the world that may fall to their lot, citizens of high intelligence, complete moral integrity, and possessing energy, initiative, judgment, tact and qualities of leadership"***

***Sir Ivor Jennings  
University of Ceylon Calendar 1947***

**Equity and Diversity:** The state universities are fully cognizant of the fact that the Sri Lankan society is diverse in terms of ethnicity, religious faith, origin and socio-economic background. All national universities will ensure that no student or staff member receives less favorable treatment directly or indirectly, on the grounds of age, race or ethnic origin, religion or belief or creed, gender, disability, marital and parental status, or sexual orientation.

*Excerpt from the Universities Student Charter. Published by the University Grants Commission. 2012*

### **By-Laws made by the Council of the University of Peradeniya under Section 29**

**(n) read with Section 135(1) (d) of the University Act No. 16 of 1978 as amended by Acts No. 7 of 1985 and No. 26 of 1988.**

#### **Part II**

3. Students are admitted and registered as undergraduates or graduate students of the University, subject to their good behaviour and the observance of strict discipline.
15. Every registered student shall be bound to protect and safeguard the property of the University. "Property" for this purpose includes buildings, libraries, lecture halls, furniture, equipment, and all other movable and immovable assets of the University.
16. If in the event of any student being found guilty of damaging or destroying or attempting to damage or destroy the property of the University, he shall be deemed to have committed an offense and shall be dealt with in accordance with the provisions of these By-Laws.

## Basic rules of conduct and behavior for students of the Faculty of Medicine

### Introduction

The Faculty of Medicine is home to over 1500 students, over 100 academic staff and over 400 nonacademic staff. You are now a part of this community. You are here to be trained as a medical professional. You are expected to behave and function as responsible adults. There are standards of behavior and conduct that you are expected to learn and adhere to, which is part of your training as a medical professional. Remember that you are now in a university and this is different to the classes you attended while in school. Inappropriate conduct and irresponsible behavior will not be tolerated and will be dealt as per university regulations.

### Dress code

This dress code is implemented for medical undergraduates to ensure that your attire does not contribute to the spread of infections in healthcare settings and to ensure that you maintain the professional image that is expected of a healthcare professional. The dress code is also important to give due respect to the PATIENT in front of you. The patients that you will eventually treat have the right to be examined by a properly groomed doctor who follows expected norms of society.

### ► Preclinical years

#### o Male students

- Buttoned shirt and trousers, -covered shoes with socks.
- Hair neatly cut and combed as suitable for a medical professional in training
- Face - clean-shaved

#### o Female students

- Blouse/ top with skirt or trousers (formal/ office type) or dress, shalwar, shoes or sandals
- Hair neatly kept.

- o Name tags should be worn during practicals or any other session when expected to with the white laboratory coat. You need to replace lost name tags immediately.

*Note: Do not wear jeans/denim, T-shirts, tights, slippers, clogs, and other casual wear during formal teaching sessions.*

### ► Clinical years (MS/ SCR/ LCR/ Professorial)

In clinical and laboratory settings, patient safety, norms of infection control, and professionalism are of utmost importance. The following dress code and code of behavior are based on the ethical principles of *Non-maleficence - I will do no harm*, and *Beneficence - I will do what is best* which are core principles in medical ethics.

You are expected to wear scrubs during your clinical training in the wards.

#### Attire

- Scrubs - Should be clean, well-fitting, and well maintained.
  - o Colored T-shirts underneath the scrubs are not allowed
  
  - o Any long-sleeved tops worn under scrubs must have sleeves rolled up during clinical work to maintain the 'bare below elbows' standard
  
- Closed shoes and socks
  - o No slippers, sandals, clogs/ crocks,

#### Norms related to Infection Prevention and Control (IPC)

- **'Bare below the elbows'-You should be free to perform hand hygiene correctly and efficiently at any instance deemed necessary.**
  - o **Nails should be short, clean, and cut regularly.** Long fingernails, nail art and any jewelry that will cause discomfort to patients during examination, or reduce efficiency of hand hygiene practice are strictly prohibited.
  - o Watches/ bands on wrists or fingers are strongly discouraged as these prevent correct practice of hand hygiene. We encourage wearing bands/ rings around the neck on a simple chain or bands around the upper arm if necessary.
  
- Males - hair neatly cut and face clean shaved - to ensure that masks and respirators fit properly (they do not fit when facial hair is present) and to minimize the shedding of organisms onto patients
  
- Females - hair tied up and kept away from the face - to ensure your hair does not interfere with your work (don't touch your face/ hair all the time), and it does not touch the patient or surrounding environment during patient encounters or other hospital work.

#### Identification

- **Your name tag must be worn in a visible place at all times during clinical work.**  
Your patient must always be able to identify you by name and as a medical student of the Faculty of Medicine Peradeniya. If you lose your name tag, have it replaced immediately.

- Your face should be fully exposed (unless there is a specific medical indication for wearing a surgical mask or respirator) and your patient should be able to identify you.

► **Conduct and travel while wearing scrubs.**

Clean, well-maintained scrubs are meant to be worn ONLY in healthcare environments (hospitals). This is to prevent contaminating other environments (including public areas like shops etc.) with bacteria and other organisms you may have acquired from the hospital environment. Therefore, students

- o are prohibited from wearing scrubs when using public transport, except while commuting between designated clinical training hospitals, halls of residence/boarding houses and the Faculty of Medicine.
- o are prohibited from attending personal trips, including personal shopping or meetings while wearing scrubs
- o should obtain prior permission if engaged in public appearances, meetings, videos etc, while being attired in the scrubs

**General hygienic practices**

You must develop and maintain good personal hygienic practices. As a healthcare professional, your behavior, practices, and habits are observed by both patients and staff and must serve as an example. Poor practices reflect badly on you as well as the medical school.

- General self-hygiene
  - o Maintain your general and oral hygiene with good standards. Keep your fingers and toenails regularly cleaned and trimmed.
- Follow all basic hygienic practices you have learned including washing your hands with soap and water after using the toilet, and before eating.
- Always ensure you cover your nose and mouth (with elbow/ tissue/ handkerchief) when you sneeze or cough - respiratory etiquette.
- Avoid biting your nails.
  - o This is an extremely unhygienic habit and is not suitable for a health care professional in training.
- Avoid using your fingers to clear your nose.
  - o This is an extremely unhygienic habit and is not suitable for a health care professional in training.

### **General conduct**

- Be punctual - eating, chatting, and queues are not excuses for being late for any teaching/learning session.
- Learn and practice professional communication
  - Be polite to whomever you speak. Unruly behavior toward ANYONE will not be tolerated in this faculty.
  - When contacting a member of staff, introduce yourself with name and batch, ask if this is a good time to speak or ask for an appointment.
  - Academic staff should be addressed as 'Madam'/ 'Sir' or 'Dr ' or' Prof.. ..'. Do not call academic staff or Clinical teachers 'Miss'.
  - When communicating through emails or messages, write a proper email/ message.
    - Message - Introduce yourself with name and batch and state in clear, polite language, what you need. Do not use short forms or emojis
    - Emails -- write a title, address the recipient, introduce yourself and state your need. Always use polite language.
    - When you have received a reply, always acknowledge the reply properly.
- Be quiet in lecture halls, study areas and when leaving classes. Don't disturb others who are working-i.e. other students and staff
- When entering and leaving classes and lectures, allow those inside to leave first. Then enter in an orderly manner leaving space for others including staff to enter and leave if needed.

When leaving, do so in an orderly manner. When waiting outside for a lecture to finish, do not block corridors. Wait in an orderly manner.
- Always move quickly and efficiently.
- Be aware of your surroundings.
  - Don't block corridors, staircases, etc. (groups holding hands and walking together etc)
  - Walk so others also have space to walk
  - Don't walk or chat in groups in the middle of the road blocking vehicles inside the faculty.
  - While walking on roads walk aside to cause minimum disturbance to traffic
  - Park in designated areas. Avoid parking in areas assigned to staff members, or in a way that obstructs free movement of vehicles and people.

### **Conduct at Teaching/ Learning activities**

#### **► Conduct at lectures**

- Be punctual. Put mobile phones and devices off or on silent mode. Do not disturb the class.

- Do not have personal conversations when a lecture is in progress. You are free to answer or ask questions in an acceptable manner. Students who consistently talk during lectures and disturb others can be asked to leave the lecture hall.
- Do not eat inside lecture halls. You are allowed to drink water if needed.

► **Conduct at tutorials and small group discussions**

- Be punctual. Punctuality at SGDs/ discussions etc are strictly observed.
- Put mobile phones and devices off or on silent mode. Do not disturb the class.
- Be mindful of your surroundings in the class. Ensure light and ventilation as much as possible.
- Any excuses must be informed to the module coordinator earlier through email/letter
- All medical certificates must be handed over to the CCC with a copy emailed to the relevant module coordinator or as instructed by the department

► **Conduct at practical's**

- Be punctual. Punctuality at practical's is strictly observed.
- If mobile devices are allowed, put mobile phones and devices off or on silent mode. Do not disturb the class.
- Lab coats must be worn at all times unless otherwise instructed.
- Name tags must be worn at all times.
- Long hair must be tied up.
- Excuses or exchanges in groups must be communicated via email and have prior approval of the module coordinator
- Photographing and videoing inside laboratories and classrooms is strictly prohibited unless prior permission from the Head of Department has been obtained.

**Conduct during Clinical appointments**

- Punctuality should be strictly maintained. Delays are not accepted.
- Students should be at the wards during the period assigned for clinical training.
- Any student who is unable to come on a day or is delayed due to unavoidable circumstances must inform the group leader/ Supervising Clinician as soon as possible.
- All communication must be in a professional manner



When interacting with patients always follow the principles of

- Non-discrimination
- Compassion
- Respect
- Patient safety
- Trust

The ethics of practice Beneficence, Non-maleficence, Autonomy, Confidentiality and Justice must always be followed.

- **Take consent. Be polite, considerate and truthful. Respect a patient's privacy and dignity.**
- Maintain confidentiality of patients and all clinical and personal details divulged to you during clinicals. Respect the wishes of the patient.
- Do not allow their views about patients' lifestyle, culture, beliefs, race, colour, gender, sexuality, disability, age, or social or economic status, to affect your behaviour towards them.
- BHTs are legal documents and taking photographs of BHTs is strictly prohibited. Any video recording done within the hospital should be done only with prior authorization and under the guidance of the hospital administration.

#### ► Infection Prevention and Control practices

- **Ensure that attire and other behaviors are in alignment with infection control norms and practices. These are essential to ensure you do not harm the patient.**  
As stated previously, these include
  - o 'Bare below the elbows' with short clean nails and no jewelry on hands to ensure easy and effective hand hygiene practice. Roll sleeves up if needed.
  - o Long hair tied up, to ensure your hair does not interfere with your work (don't touch your face/ hair all the time), it does not touch the surrounding environment and does not touch the patient during examination or procedures.
  - o Clean shaven face - to ensure that masks and respirators fit properly (they do not fit when facial hair is present) and to minimize the shedding of organisms on to patients
  - o Perform hand hygiene when indicated and follow standard precautions with all patients
  - o Wear your name tag in a clearly visible place at all times during clinical work.
  - o Your face should be fully exposed (unless there is a specific medical indication for wearing a surgical mask or respirator) and your patient should be able to identify you.

- Be respectful, polite, considerate and helpful to ward staff and other health care staff in hospitals.
- Be aware of your surroundings at all times.
  - When moving around hospital, do not block doors, corridors, stairs etc. Always make sure patients, health care staff, and others have enough room to move and proceed with their needs and duties.
  - If you see anyone who needs help, you are encouraged to be of assistance.
  - If you see something you think could be/ is an emergency, alert the appropriate staff immediately.

#### ► Use of Social media

- Do not take or post photos of patients on social media at any time. PLEASE DO NOT include photos of any patient, especially children (even if faces are partially or fully hidden) attending clinics or getting inward treatment in your social media platforms or profile pictures. This is a highly unethical practice (even if it is a commonly seen)
- Students are strongly discouraged to use their status as a medical student to gain views in social media for monetary earning purposes
- Advertising for personal ventures on social media or otherwise with the affiliation to Faculty of Medicine, University of Peradeniya is not allowed

#### Punishable offenses

**The following are considered offenses. Any student identified committing such offenses is liable to be punished.**

- Riding motorbikes (as rider or pillion passenger) without a helmet
  - Under the Motor Traffic Act Gazette (2287/28) section 158(2), 'It is compulsory to wear protective helmets for both the rider and pillion passenger'.
- Impersonation
  - This is an offense according to the Examination by-laws section 3.3 Examination Offences and Punishments (6).
  - As stated here-in, 'Impersonator/s may also be liable to any punishment under the Penal Code/Criminal Law. In the event the impersonator is found to be a graduate of this university, his/her degrees awarded by this university shall be withdrawn.'
  - Any student found to be impersonating another (signing for someone other than yourself /forging signatures of other students during any activity of the

Faculty of Medicine, or the University of Peradeniya) shall be punishable under penal law.

- Littering
  - o Do not litter the faculty premises (this includes all areas of the faculty including, lecture halls, study areas and recreational areas.) Throw your trash to the appropriate bin at all times
  - o Do not leave food waste on tables in the canteen or other places. Always discard into the appropriate bin
  - o It is a good practice to pick up any trash you see within the faculty premises or in your places of training and dispose of it appropriately. Do not ignore it. These places are contributing to your training. It is part of your responsibility to keep your places of training clean and tidy when you can do so. Do not walk past litter as if you didn't see it.
- Spitting in public places
  - o Spitting is an extremely unhygienic habit. If anyone is seen spitting in public places, they are liable for punishment.

This code of conduct is there to ensure the safety and protection of your patients, while training you according to international standards of conduct and discipline in medicine. You may not see these being practiced by all healthcare staff at all times. However, this is the standard to which you will be held as a student and trainee of Peradeniya. Any student found breaching this code can be punished. Aim to learn the highest standards of conduct and discipline as befits a graduate of the Faculty of Medicine Peradeniya.

## 12. Policies

Policy on students with special needs/differently abled students.

*Faculty Board Minute 454.6.4*

Policy on the management of the MBBS programme.

*Faculty Board Minute 458.6.1*

Fallback mechanism for students who successfully complete the 2<sup>nd</sup> MBBS examination; however, fail to complete the degree within the stipulated time period.

*Faculty Board Minute 456.6.1.4*

Code of conduct for academic staff in UOP, policy on sexual harassment and sexual violence, UOP, regulations promulgated under the policy on sexual harassment and sexual violence, UOP

*Senate Paper ST/427/1*

### 12.1 Policy on leave of absence for registered students, University of Peradeniya

#### Revised policy decisions on leave of absence for registered students, deferment of registration and readmission

1. It is mandatory for all fulltime students of the university to register for their academic programmes and attend regularly to the prescribed work of their academic programme without discontinuity, to the satisfaction of the Dean of the faculty, barring compelling circumstances.
2. Whenever a student fails or is unable to attend an academic programme for over one month, the student or his/her parent/guardian should inform the Dean of the faculty concerned as soon as such inability is recognized. However, within two (02) weeks of such notice, the student should ensure to send a written communiqué to this effect to the Dean or the Senior Assistant Registrar/Assistant Registrar of the faculty.
3. Deferments are considered only if the student is registered for the respective degree programme and has not completed any examination.
4. If any student wishes to get his/her registration deferred at the time of registration, he/she should:
  - (i) Register with the University of Peradeniya
  - (ii) Register for the academic programme in the respective faculty
  - (iii) Make a written request to the Dean of the faculty, requesting for a deferment (*one should provide an acceptable reason/s*).

5. When the above requests (2) and (4) are granted,
  - i) the period of deferment/leave shall not exceed one academic year except on approved medical grounds.
  - ii) the period of deferment/leave granted on medical grounds shall not exceed two academic years.
  - iii) the period of deferment/leave granted by the Admissions Committee on medical/valid reason(s) approved by the Faculty Board will be exempted from the maximum duration allowed for an academic programme. Such leave should have prior approval.
6. If a student fails to have his/her registration renewed within the period specified by the faculty at the beginning of each academic year, in order to renew the registration, he/she should make a written request to the Dean of the faculty giving acceptable reasons for not renewing the registration on time.
7. In case of a deferment/leave of absence, the eligibility for a class should be decided by the respective faculty board.  
*(2<sup>nd</sup>, 3<sup>rd</sup>, 4<sup>th</sup> or final year leave of absence may be granted subject to the conditions that the student completes the degree within the permissible time period.)*
  8. When a studentship is cancelled, the Registrar of the university shall inform the respective student in writing that he/she will have no claim whatsoever for re-admission/re-registration for university education in the future.

## 12.2 Policies to prevent ragging

1. Strategies/Actions to be implemented to combat ragging and sexual and Gender-based violence (SGBV) in state Universities and Higher Education institute  
[https://www.ugc.ac.lk/index.php?option=com\\_content&view=article&id=2172%3Aacomm-circular122019strategiesactionstobeimplementedtocombatraggingandsexualandgender-basedviolencesgbvinstateuniversitiesandhighereducationinstitutes&catid=170%3Acirculars-published-in-2019-012019-and-above&Itemid=20&lang=en](https://www.ugc.ac.lk/index.php?option=com_content&view=article&id=2172%3Aacomm-circular122019strategiesactionstobeimplementedtocombatraggingandsexualandgender-basedviolencesgbvinstateuniversitiesandhighereducationinstitutes&catid=170%3Acirculars-published-in-2019-012019-and-above&Itemid=20&lang=en)
2. Prohibition of ragging and other forms of violence in Educational Institute  
[https://eugc.ac.lk/rag/downloads/Act\\_No\\_20\\_EN.pdf](https://eugc.ac.lk/rag/downloads/Act_No_20_EN.pdf)

## 13. Bursaries / Studentships - Faculty of Medicine

### Hiran Sri Kirthisinghe Memorial Studentship

Applications are called for the Hiran Sri Kirthisinghe Memorial Studentship by the Faculty Scholarship Committee, after issuing results of the Year 2 MBBS examination.

The studentship shall be given annually for one or more students of the 3<sup>rd</sup> year, who has proven the need for money, and has/have a GPA of 3.3 or above at the Year 2 MBBS examination with a First Class or a Second Class Upper Division. The applicant should submit an application with supporting documents.

### Medical Faculty Studentship Fund

Five (05) students are selected each year according to the priority list for the Medical Faculty Studentship Fund. Only the needy students are awarded. Maximum period of the studentship is 5 years.

The grant of the studentship shall cease forthwith, if the particulars furnished by the beneficiary are found to be false or incorrect. The applicant should not be a recipient of any other grant. If for any reason the studentship of any student is cancelled by the Board of Administration he/she shall be asked to pay back the amount he/she had received from the fund up to that time.

### Pahantharuwa – Medical Student's Welfare Fund

Fifteen to twenty students are selected according to the priority list annually for the scholarship until they receive Mahapola or Bursary award.

1. The Medical Faculty Students' Welfare Fund is established to serve the following purpose:
  - (a) The welfare fund shall provide financial assistance to needy students, who are yet to receive the initial payment of Mahapola, Bursary or any other scholarship.
  - (b) The Medical Faculty Students' Welfare Fund shall provide financial assistance to students who need specialized medical treatment.
  - (c) The welfare fund shall provide financial assistance to a funeral of an immediate relative of a student of the medical faculty (Father/Mother/Brother/Sister/Husband/Wife/Child)
  - (d) Any other welfare measures needed to be provided to medical students as determined by the management committee.
2. A management committee comprising of members from the academic staff and administrative staff, together with representatives from the students of the medical faculty will manage the fund. The aim of this committee will be to maintain the fund efficiently and without misconduct.

- a) The Medical Faculty Student Welfare Fund – Management Committee Members shall be as follows:
    - The Dean/Faculty of Medicine shall be the ex-officio chairman
    - Bursar or his/her nominee/Assistant Bursar/Faculty of Medicine
    - Registrar or his/her nominee/Assistant Registrar/Faculty of Medicine
    - Senior Treasurer- Medical Faculty Students’ Union (MFSU)
    - Two senior student counsellors
    - President/MFSU
    - Vice President/MFSU
    - Secretary- MFSU shall be the ex-officio secretary
    - Junior treasurer – MFSU shall be the ex-officio treasurer
    - Editor- MFSU
  
  - b) The responsibilities of the management committee:
    - i) The management committee shall make the basic decisions and grant permission for the release of the fund according to the constitution and aims of the Medical Faculty Students Welfare Fund.
    - ii) It will manage and develop the medical faculty students welfare fund
    - iii) The management committee will maintain documents relating to the transactions of the Medical Faculty Students’ Welfare Fund.
    - iv) The financial structuring that is income and expenditure and the balance sheet shall be prepared every 6 months, which will be produced to the M.F.S.U. and displayed to the students.

The annual financial statement of accounts shall be prepared for the financial year, and shall be audited by the senior internal auditor of University of Peradeniya.
3. Award of scholarship
- a) The scholarship shall be awarded to 15 registered students from the new batch enrolled to the Intensive English Course of Faculty of Medicine.
  - b) The scholarship shall only be paid until Mahapola or any other scholarship is awarded to the students.
  - c) The payments of the scholarships must be initiated within one month after the enrollment of the students to the Intensive English Course of the medical faculty.
  - d) An application form shall be made available, and interested students are encouraged to forward their applications.
  - e) Selected applications forms from the forms received are rechecked.
  - f) If it is discovered that a student has given incorrect and misleading information in the application to the management committee, the student shall lose privileges of the Medical Faculty Students’ Union.

- g) Notification of scholarship scheme.
  - i) The students of the new batch shall be notified of the scholarship scheme by the Dean.
  - ii) The importance of giving accurate and valid information should be stressed in these notifications.
- h) Issue of application forms
  - i) Application forms shall be issued to the new batch on the day of the English placement test.
  - ii) The date, name, registration no. and the signature of the receiver is expected when issuing an application form.

### **Kandy Doctors' Wives Association Studentship for Medical Students (KDWA)**

The Studentship is given to new entrants to the Peradeniya medical faculty.

Self-prepared applications should be submitted to the faculty including following details:

1. Full name of the applicant, home address and other contact details.
2. Registration number
3. Last school attended (prior to admission to the faculty) with details of district & province
4. Z score obtained at the GCE (A/L) Examination.
5. Income of the family (with supporting documents. Eg. From Grama Niladhari)
6. Number of members in the family & their status (students/employed/any other)
7. Whether university or any other scholarship is received by the applicant.

The scholarship committee awards the above scholarship as per a priority list.

### **Senaka Bibile Memorial Studentship**

#### **REGULATIONS GOVERNING THE AWARD OF STUDENTSHIPS**

1. This regulation shall be cited as Registration No 208 of the University of Peradeniya.
2. It is hereby determined as required by para V section 29 (m) of the University Act No.16 of 1978 that the mode and conditions of competition for the award of the Senaka Bibile Memorial Studentship endowed by the family of late Prof. Senaka Bibile: shall be governed by the following provisions:
  - 2.1 The Studentship shall be called the Senaka Bibile Memorial Studentship
  - 2.2 Starting in the 1st year and during the entire course of five years, the Studentship/s shall be given to one or more students at a time based on the availability of funds.



- 2.2.1 The Studentship shall be awarded on the recommendation of the committee appointed for the purpose by the Faculty Board of Medicine.
- 2.2.2 In assessing the applicants, that committee shall consider the following criteria.
  - Merit (on A/L Z score and O/L results)
  - Income of the parents (salary/pension/other incomes)
  - Parents; whether living/not, and the health of the parents
  - Number of siblings and his /her position among them
3. The committee shall recommend to the Faculty Board of Medicine, the most deserving student/s to receive the studentship.
4. The final selection will be confirmed by the Faculty Board of Medicine.
5. If the studentship is not awarded in a particular year, the entire annual income shall be credited to the capital.

### **PeMSAA Studentship**

1. The studentship/s shall be given monthly to one or more 1<sup>st</sup> year students.
2. The studentship shall be awarded on the recommendation of the committee appointed for the purpose by the Faculty of Medicine.
3. In assessing the applicants, that committee shall consider the following
  - Merit (on A/L score and O/L results)
  - Income of the Parents (Salary/Pension/Other Incomes)
  - Parents living/not and the health of the parents
  - Number of siblings and his/her position among them
4. The committee shall recommend to the Faculty Board of Medicine, the most deserving student/s to receive the studentship.
5. The final selection will be confirmed by the Faculty of Medicine.
6. If the studentship is not awarded in a particular year, the entire annual income shall be credited to the capital.

### **PeMSAA Bursaries**

This is a loan scheme which has to be paid back once the MBBS course is completed and the student becomes employed. RS 3000 per month for five years. Students have to repay it within three years once they received their internship.

### **PeMSAA Foster Parenting Scheme**

A scholarship scheme funded by philanthropists where 4-5 scholarships will be awarded each year.

### **Faculty Earned Fund Scholarships**

Ten scholarships per batch are awarded each year using the funds earned from foreign students.

### **Studentships/Bursaries of the Faculty of Medicine, University of Peradeniya**

These studentships and bursaries are meant to help students who face financial difficulties. A reasonable amount of money will be provided for the student during the undergraduate period. These studentships will be advertised each year by the faculty when a new batch of students arrives. The application forms will be available at the Dean's office. Students who wish to apply may fill this form, and together with a letter justifying their need for financial help, and a certificate from the Grama Niladhari of their division, hand it over to the Dean's office before the stipulated date.

All applicants will be interviewed by a panel including the Dean, Chairperson Student Affairs Committee, Chairperson Scholarships Committee and a senior student counselor. The selected students will be notified by the Dean and copies of this letter will be sent to the donor, parents of the student, the Assistant Bursar of the faculty and the mentor of the student. A copy of the letter will also be kept in the personal file of the student. The students will be asked to collect their stipend each month, at a fixed date and time, from the Assistant Bursar's office of the Faculty of Medicine.

The students who receive these studentships shall sign a document agreeing to contribute to the studentship at the end of their studies. They may pay monthly to the studentship account, and this money will in turn be used to help other students who need financial help.

## 14. Services and facilities at the faculty

### 14.1 List of Academic Staff

To offer a world-class training in Medicine laying a sound foundation for postgraduate training, we have a highly qualified teaching staff.

#### ***Pre-Clinical Staff***

##### **Department of Anatomy**

Dr. D.R.K.C. Dissanayake	- Senior Lecturer (Head)
Prof. S.B. Adikari	- Chair & Senior Professor
Dr. H.A. Amaratunga	- Senior Lecturer
Dr. J.K. Dissanayake	- Senior Lecturer
Dr. L.Y.V. Pathirana	- Senior Lecturer
Dr. Warunie Kosgallana	- Lecturer
Dr. M.J.S. Jayarathna	- Lecturer

##### **Department of Biochemistry**

Prof. C.N.R.A. Alles	- Professor (Head)
Prof. J.G.S. Ranasinghe	- Chair & Senior Professor
Prof. H.K.I. Perera	- Professor
Dr. W.I.T. Fernando	- Senior Lecturer
Dr. S.P.R.P. Premathilake	- Lecturer
Dr. A.W.D.T. Ambagaspitiya	- Lecturer
Dr. H.R.L. Maddumabandara	- Lecturer

##### **Department of Physiology**

Prof. D.W.P. Dahanayake	- Professor (Head)
Prof. V.S. Weerasinghe	- Chair & Senior Professor
Prof. N.S. Kalupahana	- Professor
Prof. W.D.M.T.L. Dassanayake	- Professor
Prof. A. Kariyawasam	- Professor
Prof. S.D.I. Nanayakkara	- Professor
Prof. A.S. Ariyasinghe	- Professor
Dr. T.D.P. Nandadeva	- Lecturer

##### **Department of Medical Education**

Prof. K. N. Marambe	- Professor (Head)
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## **Para-Clinical Staff**

### **Department of Pathology**

Prof. S. Wijetunge	- Professor (Head)
Prof. D.M. Dissanayake	- Chair & Senior Professor
Prof. R.N. Waduge	- Professor
Dr. T.M.A.H. Tennakoon	- Senior Lecturer
Dr. G.S.S. Hegoda	- Lecturer
Dr. H.R.S.D. Sumanasekara	- Lecturer
Dr. W.M.A.S. De Silva	- Lecturer

### **Department of Pharmacology**

Dr. H.M.T.W. Seneviratne	- Senior Lecturer (Head)
Prof. H.F.S. Fonseka	- Professor
Dr. U. Dangahadeniya	- Senior Lecturer
Dr. Y. Illangasekera	- Senior Lecturer
Dr. C.G.K. Amiyangoda	- Lecturer
Dr. S.S. Manathunga	- Lecturer

### **Department of Forensic Medicine**

Prof. D.M.G. Fernando	- Professor (Head)
Prof. K.A.S. Kodikara	- Chair Professor
Prof. D.H. Edussuriya	- Professor
Prof. Amal Vadysinghe	- Professor
Dr. E. M. K. B. Ekanayake	- Lecturer
Dr. C.U. Wickramasinghe	- Lecturer

### **Department of Microbiology**

Prof. V. Liyanapathirana	- Professor (Head)
Prof. F. Noordeen	- Chair Professor
Prof. B.N. Dissanayake	- Professor
Prof. C.N. Ratnatunga	- Professor
Dr. H.D.W.S. Kudagammana	- Senior Lecturer

### **Department of Parasitology**

Dr. D.N. Atapattu	- Senior Lecturer (Head)
Prof. W.M.D.R. Iddawala	- Chair Professor
Prof. W.D.S.J. Wickramasinghe	- Professor
Dr. R.P. Morel	- Senior Lecturer
Dr. S.D. Lenadora	- Lecturer

### **Department of Community Medicine**

Dr. W.M.S.N.K. Navaratne	- Senior Lecturer (Head)
Prof. S.D. Dharmaratne	- Chair Professor
Prof. T.M.S.U.B. Thennakoon	- Professor
Dr. K. Pethiyagoda	- Senior Lecturer
Dr. S.M.J. Padmini	- Senior Lecturer
Dr. D.A. Gunawardane	- Senior Lecturer
Dr. V.K.I.U. Alwis	- Lecturer

### **Department of Radiology**

Prof. P.B. Hewavithana	- Professor (Head)
Prof. S. Rosairo	- Professor
Dr. J.J.K.H. Udupihille	- Senior Lecturer

### **Nuclear Medicine Unit (NMU)**

Dr. D.K.K. Nanayakkara	- Senior Lecturer
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### ***Clinical staff***

### **Department of Anaesthesiology & Critical Care**

Prof. P. S. K. Nanayakkara	- Professor (Head)
Prof. Vasanthi Pinto	- Chair Professor and the current Dean
Dr. A.B. Abeyesundara	- Senior Lecturer
Dr. S.U.D. Samarasinghe	- Lecturer
Dr. B.H.W.M.G.T. Wijethilake	- Lecturer
Dr. R.M.A.S.K. Ratnayake	- Lecturer

### **Department of Medicine**

Prof. D.M.P.U.K. Ralapanawa	- Professor (Head)
Prof. S.A.M. Kularatne	- Chair & Senior Professor
Prof. I.B. Gawarammana	- Senior Professor
Prof. W.M.C.J. Jayasinghe	- Professor
Prof. W.A.T.A. Jayalath	- Professor
Prof. A. Medagama	- Professor
Prof. L.P.M.M.K. Pathirage	- Professor (Head/Family Medicine)
Prof. S. Abeyagunawardena	- Professor
Prof. D.A.C.L. Dalugama	- Professor
Prof. R.A. Abeysekera	- Professor
Prof. B.M.D.G. Yasarathne	- Professor
Dr. J.M.R.P. Bandara	- Senior Lecturer
Dr. C.L. Dandeniya	- Senior Lecturer
Dr. S.K.G.P.H.K. Sooriyagoda	- Lecturer

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### Department of Obstetrics & Gynaecology

Dr. M.C. Gihan	- Senior Lecturer (Head)
Prof. Chathura Rathnayake	- Professor
Prof. Chaminda Kandauda	- Professor
Dr. A. Karunananda	- Senior Lecturer
Dr. D.M.S.T. Gnanarathna	- Senior Lecturer

### Department of Paediatrics

Prof. P.V. Dissanayake	- Professor (Head)
Prof. A. S. Abeyagunawardena	- Chair & Senior Professor
Prof. A.H.H.M. Jayaweera	- Professor
Prof. T. Kudagammana	- Professor
Prof. R.S. Thalgahagoda	- Professor
Dr. M.G.D.V.K. Kiridana	- Senior Lecturer
Dr. S. Krishnapradeep	- Senior Lecturer
Dr. Priyanga Dematawa	- Lecturer
Dr. Anjeli Wimalasiri	- Lecturer

### Department of Psychiatry

Dr. H.G.V.W. Wijesiri	- Lecturer (Head)
Prof. T. Rajapaksha	- Chair Professor of Psychiatry
Prof. Dewasmika Ariyasinghe	- Professor
Dr. Sayuri Perera	- Senior Lecturer
Dr. H.K.D. Vidusha	- Lecturer
Dr. N.S. Balasooriya	- Lecturer

### Department of Surgery

Prof. A.K.B.B.T.B. Samarasinghe	- Professor (Head)
Prof. M.D. Lamawansa	- Chair Professor and the current Vice Chancellor of the University of Peradeniya
Prof. K.B. Galketiya	- Professor
Prof. A.U.B. Pethiyagoda	- Professor
Prof. A.D. Dharmapala	- Professor
Dr. S.P.M. Peiris	- Senior Lecturer
Dr. H.C.M. Hettiarachchi	- Senior Lecturer
Dr. R.M.J.B.S. Rathnayake	- Senior Lecturer
Dr. K.C. Ratnatunga	- Senior Lecturer
Dr. B.K. Dassanayake	- Senior Lecturer
Dr. T.M. Samarasinghe	- Lecturer
Dr. S.K.V. Gunasekare	- Lecturer
Dr. H.M.K.B. Herath	- Lecturer

### Department of Family Medicine

Dr. W.D.S.E. Abeykoon	- Lecturer
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## 14.2 List of Departments

### DEPARTMENT OF ANATOMY



The Department of Anatomy is committed to teaching gross anatomy, developmental anatomy, microscopic anatomy and genetics to medical undergraduates. Anatomy a subject which teaches the structure of the human body, forms the basis for learning medicine. The department is equipped with a state-of-the-art histology laboratory and a gross anatomy dissection laboratory. Our body donation program which is popular all over the Island ensures that each medical student gets a chance to learn anatomy by full body dissections.

We combine modern teaching concepts, multimedia with computer-based and online teaching with traditional methods to enhance knowledge acquisition by students. Our digital dissection guide and well-structured histology practical sessions guide the students in learning gross anatomy and microscopic anatomy. The Anatomy museum features dissected specimens, bones and specimens of embryos and provide the students with the opportunity to study gross anatomy and embryology at their own pace.

The department also boasts of well-equipped research laboratories and provide genetic and molecular investigations to the general public. Further the department organizes a 'human structure workshop' for school children as an outreach activity to the society. The Department of Anatomy aims to be a centre of excellence by developing, promoting and disseminating the knowledge of Anatomical Sciences through education and research

#### Academic staff members:

- Prof. Sanjaya Adikari (MBBS, PhD)
- Dr. Jayampathi Dissanayake (MBBS, Mphil)
- Dr. Himani Amaratunga (MBBS, Mphil)
- Dr. Lakshika Pathirana (MBBS, Mphil)
- Dr. Keerthie Dissanayake (MBBS, Mphil)
- Dr. Warunie Kosgallana (MBBS)
- Dr. Jayamini Jayarathna (MBBS)

## DEPARTMENT OF PHYSIOLOGY



Physiology is the study on how living system function, on how vitality is maintained and on how we adapt to a wide array of different conditions and environments ranging from conception to childbirth, and from deep sea diving to space travel. The study of the function of human body in health is essential to comprehend the changes that occur in human body in the disease. The Department of Physiology takes great pride in contributing to the undergraduate medical curriculum by providing medical undergraduates with this foundation to the study of medicine.

From inception in 1962 as a basic-sciences department, the Department of Physiology has given priority to research in various fields, often conducted in collaboration with local and international partners.

### Our Vision

To be a centre of excellence by developing, promoting and disseminating the knowledge of Physiological Sciences through education, research and clinical services.

### Our Mission

- Providing medical undergraduate who have a sound understanding in normal bodily functions, and are capable of applying the learnt knowledge in treating pathological conditions.
- Developing and maintaining high-standard physiology educational programmes that nature a spirit of inquiry and self-learning at the same time.
- Generation of new knowledge trough ongoing basic and applied physiology research, in collaboration with other disciplines and institutions.
- Provision of up-to-date and good quality services to the community.

### Academic staff members:

- Prof. VS Weerasinghe (MBBS, Mphil, PhD)
- Prof. NS Kalupahana (MBBS, Mphil, PhD)
- Prof. KPAP Kariyawasam (BDS, PhD)
- Prof. SDI Nanayakkara (MBBS, Mphil, PhD)
- Prof. AS Ariyasinghe (MBBS, PhD)
- Prof. WDMTL Dassanayake (MBBS, Mphil, PhD)
- Prof. DWP Dahanayake (MBBS, Mphil, PhD)
- Dr. TDP Nandadeva (MBBS, Mphil)



## DEPARTMENT OF BIOCHEMISTRY



The Department of Biochemistry of Faculty of Medicine was established in 1961. Currently its major involvement is in undergraduate teaching for the MBBS programme. With regard to postgraduate teaching, it participates in several MSc programmes. The staff is engaged in the supervision of MPhil and PhD degrees offered by the University. Numerous research activities are carried out every year by the staff, in addition to the collaboration with other Departments and Faculties.

In the MBBS programme, Biochemistry is taught during the preclinical phase. The key areas dealt with are cellular biochemistry, molecular biology, metabolism, nutrition, molecular genetics, biochemical derangements in diseases and laboratory diagnosis of diseases. As a subject, it lays the foundation to understanding the molecular insights of pathogenesis, disease diagnosis, and drug targets and pharmacotherapy forming a strong foundation for clinical learning.

### **Vision:**

The Department of Biochemistry aims to be a centre of excellence by developing, promoting and disseminating the knowledge of Biochemistry and molecular biology through education, research and continuous professional development.

**Mission:**

- To produce medical graduates with thorough understanding of the normal cellular functions and nutrition, and ability to correlate that knowledge in understanding basis of the derangements, disease diagnosis and management.
- To actively participate in the process of advancement of the biomedical knowledge in the fields of biomolecules, cellular biochemistry, metabolism, nutrition and molecular biology through integrating traditional teaching methods with innovative, high quality modern education principles.
- To develop and maintain high quality educational program to inculcate inquisitive minds with the ability of self-learning.

**Academic staff members:**

- Prof. C.N.R.A. Alles (BVSc, PhD, FSLCVS)
- Prof. J.G.S. Ranasinghe (BVSc, MPhil, PhD)
- Prof. H.K.I. Perera (BVSc, MPhil, PhD, FSLCVS)
- Dr. W.I.T. Fernando (BVSc, MPhil, PhD)
- Dr. S.P.R.P. Premathilake (MBBS)
- Dr. A.W.D.T. Ambagaspitiya (MBBS)
- Dr. H.R.L. Maddumabandara

## DEPARTMENT OF MICROBIOLOGY



The Department of Microbiology teaches medical microbiology and immunology for 2nd and 3rd year medical undergraduates as part of the MBBS degree programme. Along with a well-qualified and experienced teaching staff, the department has a large, well-equipped teaching laboratory that enhances the student learning experience with the practical aspects of medical microbiology. The department uses a variety of teaching methods to deliver academic content as appropriate to medical undergraduates. These include student-centered methods such as small group discussions, student seminars and assignments as well as lectures. We also actively engage in informal discussions with our learners fostering a close, interactive and collaborative learning environment. The department is actively engaged in both basic and translational research. Special areas of interest include clinical microbiology and public health microbiology. Research projects on respiratory viruses, hospital acquired infections, antimicrobial resistance, rodent-borne diseases and immunological response to vaccines are currently underway. Service commitments of the department include microbiological diagnostic services and clinical services in microbiology at the affiliated Teaching Hospital, Peradeniya.

### Academic staff members:

- Prof. F Noordeen, Professor of Microbiology (BVSc. (Peradeniya), MPhil (Peradeniya), PhD (Australia))
- Prof. CD Gamage, Professor in Microbiology / Head (BVSc. (Peradeniya), PhD (Japan))
- Prof. BN Dissanayake (MBBS (Sri Lanka), PGDip & MD Med Micro (Colombo))
- Prof. LVC Liyanapathirana (MBBS (Peradeniya), MPhil (Peradeniya), PhD (Hong Kong))
- Prof. CN Ratnatunga (MBBS(Peradeniya), MSc Bio-statistics (Peradeniya), MPhil (Peradeniya), PhD (Australia))
- Dr. HDWS Kudagamma (MBBS(Peradeniya), PGDip & MD in Med Micro (Colombo), DipRCPath (UK))

## DEPARTMENT OF PARASITOLOGY



The Department of Parasitology was established in 1963 and Prof. V Sivalingam, the first Professor of Parasitology of the University of Ceylon was the first head of the department. The Prof V Sivalingam Gold Medal in Parasitology is awarded in his memory to the student obtaining the highest marks in Parasitology.

Students are introduced to the concepts, definitions and principles of causation, diagnosis, treatment, prevention and control of parasitic and vector-borne diseases. Identification of venomous snakes and prevention and first aid in case of snakebite is part of the curriculum.

Practical laboratory-based teaching give students an opportunity of hands-on bench work while discussion of clinical case scenarios aid in the management of parasitic diseases as a doctor. We constantly revise our curriculum to emphasize current trends in Clinical Parasitology.

### Research & Diagnostic Clinical Services

Our department is one of the major research centres on Parasitic and Vector Borne Diseases in the country. This includes molecular diagnostics, cell culture and serology for the diagnosis of malaria, toxoplasmosis, leishmaniasis, toxocariasis, dirofilariasis as well as identification of emerging infections with cestodes such as *Bertiella studeri* (monkey tapeworm). We have a museum which will enable you to study these exotic parasites for yourself. We also provide diagnostic and consultancy services in these areas.

### Vision

To be a center of excellence for teaching and research on Parasitic and Vector Borne Diseases

### Academic staff members:

- Prof Devika Iddawela (MBBS, PhD)
- Dr Rumala Morel (MBBS, Dip Med Micro, MD Parasit)
- Prof Susiji Wickramasinghe (BVSc, MSc, PhD)
- Dr Dhilma Atapattu (MBBS, MPhil)
- Dr. S.D. Lenadora

## DEPARTMENT OF PATHOLOGY



The Department of Pathology conducts 4 modules from the second year to fourth year, three pathology modules and one Haematology module. In Pathology modules, students are taught mechanisms of diseases, i.e. processes by which normal functions in the body get altered and diseases are caused and scientific basis of signs, symptoms and complications of specific diseases. Furthermore, the Chemical Pathology branch will discuss the basis of investigating these diseases and interpretation of results. In the Haematology module, pathogenesis, investigation and management of haematological diseases and transfusion medicine are taught. The main modes of teaching are lectures, small group discussions, tutorials, pathology museum-based guided self-generated learning activities and practical classes.

The Department of Pathology also has a clinical service component, providing Histopathology, Chemical Pathology and Haematology services to patients in the Teaching Hospital Peradeniya. In the clinical Pathology short appointment, students are orientated on these clinical services and transfusion medicine.

### **Academic staff members:**

Prof. AMSDM Dissanayake (MBBS, D.Path, MD, MBA, PhD)

Prof. RN Waduge (MBBS, D.Path, MD)

Prof. S. Wijetunge (MBBS, D.Path, MD)

Dr. GSS Hegoda (MBBS, pursuing MD)

Dr. TMAH Tennakoon (MBBS, PhD)

Dr. HRSD Sumanasekara (MBBS, pursuing MD)

Dr. W.M.A.S. De Silva (MBBS, D.Path)



**DEPARTMENT OF FORENSIC MEDICINE**



**Vision:** Justice through medicine

**Mission:** To produce a competent truthful medical witness to court and to enhance ethical behaviour of the profession

Forensic Medicine or medical jurisprudence is one of the most fascinating of all the many branches of medicine. It is known as the science which teaches the application of every branch of medical knowledge to the purpose of the law. Sooner or later every practitioner of medicine will be faced with medico-legal problems which will demand, in addition to his technical skills, knowledge of the law, a broad insight into the behaviour of people and a detailed understanding of the ways of life in the particular population that he serves. One of the objectives of this department is to teach Forensic Medicine to undergraduates in a meaningful and enjoyable manner. This department has been introducing new methods of teaching/ learning with an emphasis on learning in an integrated manner with maximum student participation. The department also conducts activities for undergraduates to improve their reasoning skills, team work and presentations skills. The main areas of Forensic Medicine taught to undergraduates are medico-legal aspects of traumatology, toxicology, death-related issues, medical ethics and professionalism. This department at all times tries to maintain and build new

relationships with different institutions with a view to improving services provided. The staff of the Department of Forensic Medicine have diverse research interests which include many subspecialties of forensic medicine, related subjects and medical education. The department has created a friendly environment for students, staff, patients and visitors to enhance quality of education and provision of services.

**Academic staff members:**

- Prof. K.A.S. Kodikara (MBBS, DLM, MD, Attorney-at-Law)
- Prof. D.M.G. Fernando (MBBS, DLM, MD, DMJ (Lond.), FCFPSL)
- Prof. D.H. Edussuriya (MBBS, Mphil, PhD)
- Prof. A.N. Vadysinghe (MBBS, DLM, MD, D-ABMDI (USA), FCFPSL)
- Dr. Kasun Ekanayake (MBBS)
- Dr. C.U. Wickramasinghe (MBBS)

## DEPARTMENT OF COMMUNITY MEDICINE



The Department of Community Medicine was established in 1964 as one of the first departments of the Faculty of Medicine, Peradeniya. It pioneered the concept of a 'field laboratory' for public health education in Sri Lanka with the initiation of a unique project known as 'Hindagala Community Health Project'. This project which continued for over 50 years was exemplary in combining public health education with community development.

The department currently provides comprehensive teaching of public health basics to the medical undergraduates while coordinating the undergraduate research project component and the clerkship programme. The department provides post-graduate teaching/training to numerous M.Sc and MD in community medicine trainees each year and also carry out supervision of M.Phil/PhD degrees of medical and other graduates. Over the course of last five decades, the Department of Community Medicine has produced many leading personalities in public health in the country.

The department plays an important role in promoting research in the university through technical support for researchers in design and analysis of research and through collaborations with both national & international research communities.

### **Mission:**

To produce professionals armed with knowledge, skills, and passion to provide holistic health care to the masses through teaching, creating, and disseminating knowledge in public health.

### **Vision:**

To develop into a School of Global Health and be a centre of excellence in public health research and teaching while fostering partnerships in research, education, translation of knowledge and community engagement.

### **Academic staff members:**

- Prof. SUB Tennakoon (MBBS, MPH, MPhil, PhD)
- Prof. SD Dharmarathne (MBBS, MSc, MD)
- Dr. SMJ Padmini (MBBS, MPhil)
- Dr. K Pethiyagoda (MBBS, MSc, PhD)
- Dr. WMSNK Navarathna (MBBS, BCH, MD)
- Dr. DA Gunawardana (MBBS, MSc, MD)
- Dr. VKIU Alwis (MBBS)



## DEPARTMENT OF RADIOLOGY



Department of Radiology, Faculty of Medicine, University of Peradeniya, is a unique academic setting, as it is the only radiology department dedicated for radiology in the Sri Lankan university system. Radiology is a specialty which connects every discipline of Medicine in the process of diagnosing illnesses which is mandatory for optimum patient management in current practice of medicine.

Our aim is to provide adequate knowledge in radiology required to render services expected of a competent medical professional.

The department contributes to the undergraduate academic program across all five 5 years. Main academic contribution is the imaging module conducted during the fourth year. The module on medical imaging is structured in such a way that the undergraduate acquires the knowledge in radiology related to all the disciplines of Medicine.

Furthermore, the department contributes to the clinical programme where students are guided to acquire knowledge and basic skills in radiology in a clinical setting where the student is exposed to a radiology department where services are rendered across all the imaging modalities. The students are facilitated by the academic staff to apply the theoretical knowledge they acquire through the medical imaging module during this clinical exposure by conducting small group discussions.

In-course assignments and film library sessions following didactic lectures are a few other modes of delivery of radiology knowledge to undergraduates.

Supervision of undergraduate and post graduate students in their research activities is another academic contribution of the department in the process of preparing them to become future competent medical professionals.

### Academic staff members:

- Prof. Badra Hevawithana (MBBS, MD)
- Prof. Shanthini Rosairo (MBBS, MD)
- Dr. Jeevani Udupihille (MBBS, MD)

## DEPARTMENT OF ANAESTHESIOLOGY AND CRITICAL CARE



The department of Anaesthesia was first established in 1987. The department's name was changed in October 2016 as 'Department of Anaesthesiology & Critical Care' considering the extended range of services it provides.

The services it provides currently include anaesthesiology & peri-operative medicine, critical care, pain medicine resuscitation and emergency medical service. The department is actively engaged in teaching medical students from first year to final year, dental students and students in Allied Health Sciences, in particular nursing and physiotherapy courses. The department's skills lab with modern facilities including a high-fidelity simulation mannequin enhances teaching and learning of skills related to anaesthesia, critical care and emergency medicine. In addition, the department develops and carries-out extensive teaching programmes for training postgraduates in Anaesthesiology, intensive care, pain medicine and emergency medicine to cater for national requirements. Further it provides clinical services to the expanding range of surgical and medical specialties at the Teaching Hospital Peradeniya including the Dental Teaching Hospital. The department also conducts research activities in the above fields and in medical education.

### Academic staff members:

- Prof. Vasanthi Pinto, Professor of Anaesthesiology & Critical Care (MBBS MD, FRCA, FCARCSI)
- Dr. Saman Nanayakkara (MBBS, MD, MAcF, post graduate Dip. in Sociology)
- Dr. Anura Abeysundara (MBBS, MD, FRCA)
- Dr. S.U.D. Samarasinghe (MBBS, MD, PG Dip Stat)
- Dr. B.H.W.M.G.T. Wijethilake (MBBS, MD Emergency Med)
- Dr. R.M.A.S.K. Ratnayake (MBBS, MD, FRCA(UK))

## DEPARTMENT OF MEDICINE



Department of Medicine stands with pride in its own right and identity with a prestigious history running back to 1965. Its main commitment is in undergraduate teaching of medical and dental students of the University of Peradeniya. It is also involved in post graduate teaching for PGIM trainees in many disciplines including medicine, geriatrics and emergency medicine.

Department of Medicine is blessed with a team of researchers and specialists from a wide range of medical specialties including internal medicine, toxicology, Infectious diseases, nephrology, endocrinology, respiratory medicine and rheumatology. Department has a strong research culture with special areas of interest including tropical medicine, toxicology, non-communicable diseases and geriatric medicine.

The research and service-oriented laboratories cater services to a wider population and at the same time involving in research with a prolific research output.

Academic staff provides clinical services in an honorary capacity to the University Medical Unit in Teaching Hospital Peradeniya.

### Academic staff members:

- Prof Udaya Ralapanawa- Head & Professor in Medicine (MBBS MD MRCP(UK) FRCP(Lond) FRCP(Edin) FCCP(SL))
- Prof. SAM Kularatne- Chair and Professor of Medicine (MBBS MD MRCP(UK) FRCP(Lond) FCCP(SL))
- Prof. Chandrika Jayasinghe- Professor in Medicine (MBBS MD FRCP(Lond))
- Prof Thilak Jayalath- Professor in Medicine (MBBS MD MRCP(UK) FRCP(Lond) FRCP(Edin) FACP(USA) FCCP(SL) FISN)
- Prof. Indika Gawarammana- Senior Professor in Medicine (MBBS MD MRCP(UK) PhD(Aus) FRCP(Edin))
- Prof Arjuna Medagama- Professor in Diabetic Medicine (MBBS MD MRCP(UK) FRCP(Lond) FCCP(SL))
- Prof. Manoji Pathirage- Professor in Medicine (MBBS MD MRCP(UK))
- Prof Shayamalie Abeyagunawardena- Professor in Medicine (MBBS MD MRCP(UK) FRCP(Lond))
- Prof. Chamara Dalugama- Lecturer in Medicine (MBBS MD MRCP(UK) MRCP(Lond) MRCP(MRCPE) MRCP(Glasg) MRCP(Acute Medicine) MRCP(Geriatrics) MRCP(Diabetes & Endocrinology))
- Dr Ruwanthi Bandara- Senior Lecturer in Medicine (MBBS MD)
- Prof. Duminda Yasaratne- Professor in Medicine and Consultant Respiratory Physician (MBBS MD MRCP(UK) MRCP(Glasg))
- Prof. Rajitha Abeysekara- Professor in Medicine and Consultant Nephrologist (MBBS MD MRCP(UK) MRCP(Lond) MRCP(Nephrology) MSc (Biostatistics))
- Dr. Chathurika Dandeniya- Lecturer in Medicine and Consultant Rheumatologist (MBBS MD MRCP(UK) MRCP(Lond))

## DEPARTMENT OF PAEDIATRICS



Paediatrics is the branch of medicine that deals with children and their diseases. The academic cadre of the department while facilitating undergraduate teaching also provides honorary clinical services to the Teaching Hospital Peradeniya and the Sirimavo Bandaranaike Childrens' Hospital. Our main focus is on final year clinical teaching, to ensure that students possess a comprehensive knowledge in the subject and the right attitudes and attributes to become a compassionate doctor. We also contribute to the other clinical appointments in Paediatrics which take place in the 3rd and 4th years of training. The academic staff members have special interests in different aspects of Paediatric illness and as such our unit functions as a tertiary referral center. The Department pioneered the first Paediatric kidney transplant programme in Sri Lanka and have so far done more than 100 transplants. We also conduct outpatient clinics, which are very well attended thus, creating ample opportunities for undergraduate learning. Our unit is a recognized center of post graduate training and the academics are actively engaged in clinical research, and contribute regularly to national policy planning and implementation.

### Academic staff members:

- Prof. Asiri Abeyagunawardena (Chair Professor of Paediatrics) (MBBS, MD, DCH, FRCPCH)
- Prof. Heshan Jayaweera (Current Head of Department) (MBBS, MD, DCH, FRCPCH)
- Prof. Thushara Kudagammana (MBBS, MD, DAA)
- Prof. Pathum Dissanayake (MBBS, MD, DCH)
- Prof. Shenal Thalgahagoda (MBBS, MD, DCH, FRCPCH)
- Dr. Vasana Kiridana (MBBS, MD, DCH, MRCPCH)
- Dr. Priyanga Dematawa (MBBS, MD)
- Dr. A. Wimalasiri (MBBS, MD)
- Dr. S. Krishnapradeep (MBBS, MD(Moscow), MD(Col), DCH(Col), MRCPCH(UK))

## DEPARTMENT OF OBSTETRICS AND GYNECOLOGY



Obstetrics and Gynecology represents the most challenging and exciting frontier in medicine. The department is responsible for teaching Obstetrics, Gynecology and Neonatal Pediatrics to undergraduate and postgraduate students including foreign elective students. They are also trained to carry out research projects. The teaching program for undergraduates is conducted at the Teaching Hospital - Peradeniya. The department offers an intellectually stimulating environment for the students.

The academic staff provide treatment and care for women with normal and high-risk pregnancies and address a wide range of gynecological and women's health concerns. The department is a regional referral center for treatment of high-risk pregnancies, medical disorders in pregnancy and complicated gynaecological conditions including infertility and malignancies. It is a centre of excellence for gynaecological endoscopy with 5 accredited senior staff members. Our senior staff has published many research papers in international journals and many supplementary textbooks which are widely used by undergraduate and postgraduate students.

### Mission

"Our mission is to provide a sound training in obstetrics & gynaecology to the undergraduate and postgraduate students to enable them to deliver a competent and compassionate care to patients in the country, while contributing to innovate and adapt novel developments in the specialty."

### Academic staff members:

- Prof. Chathura Rathnayake (MBBS, MS (O & G), MRCOG (UK))
- Prof. Chaminda Kandauda (MBBS, MD, MRCOG (UK))
- Dr. A. Karunananda (MBBS (Hons), MS (O & G), CAES (UK), MRCOG (UK))
- Dr. M. C. Gihan (MBBS, MD, MRCOG (UK))
- Dr. D. M. S. T. Gnanarathna (MBBS, MD, MSLCOG, MRCOG(UK), Diploma in Advanced Laparoscopy (Germany))



## DEPARTMENT OF SURGERY



The Department of Surgery involves in undergraduate teaching and training in surgery. The department aims to produce medical graduates who are proficient in surgical knowledge and skills. The department engages in teaching and clinical training of medical students at various stages of their careers. In addition, the department is a well-recognized training center for postgraduate surgical trainees specializing in the fields of general surgery, colorectal, hepato-pancreato-biliary surgery, vascular and transplant surgery.

The department comprises general, colorectal, hepato-pancreato-biliary, urological, paediatric, vascular, and transplant surgeons (the chair professor, 1 professor in surgery, 1 professor in urology, 6 senior lecturers and 4 lecturers) and provides specialist surgical services in the above fields at Teaching Hospital Peradeniya. Being the tertiary referral center for the above specialties, the unit performs a variety of procedures ranging from simple operations to the most complex and technically challenging surgeries.

The infrastructure of the department comprises the administrative block, urology, and vascular research labs located at the faculty premises. At Teaching Hospital Peradeniya, the unit has four wards, surgical clinics, main operating theatre, endoscopy suite, and minor surgery theatre. The surgical wards have a bed strength of approximately 180 beds for in-house treatment of patients and also have learning rooms to facilitate clinical teaching activities.

The department has a strong research emphasis and to date, a large number of research publications have been published in indexed journals arising from the research work carried out by the department staff.

**Academic staff members:**

- Prof MD Lamawansa (MBBS, MS, FRCS Edin, PhD Aus): Professor of Surgery
- Prof KB Galketiya (MBBS, MS, FRCS, FMAS)
- Prof. AUB Pethiyagoda (MBBS, MS, FRCS (Edin), FRCS (Glas))
- Dr. AD Dharmapala (MBBS, MS, FRCS)
- Dr. AKBBTB Samarasinghe (MBBS, MS, FMAS)
- Dr. SPM Peiris (MBBS, MD, MRCS)
- Dr. HCM Hettiarachchi (MBBS, MD, MRCS)
- Dr. RMJBS Rathnayake (MBBS, MD, MRCS)
- Dr. KC Ratnatunga (MBBS, MD, MRCS (Eng))
- Dr. BK Dassanayake (MBBS, MD, MRCS, FMAS)
- Dr. TM Samarasinghe (MBBS, MD)
- Dr. SKV Gunasekare (MBBS, MD, FMAS, MRCS (Glas))
- Dr. HMKB Herath (MBBS, MD, MRCS (Glas))

## DEPARTMENT OF MEDICAL EDUCATION

"To provide sustainable human resource development in the health professions education sector both nationally and in the South Asian Region"

Medical Education Unit (MEU) was established in the Faculty of Medicine, University of Peradeniya in 1973. From its inception MEU conducts training workshops on "Health Professions Education. MEU was recognized by the World Health Organization as one of the Regional Teacher Training Centers in the South East Asia Region. The two weeks Educational Technology workshop conducted by the MEU was very popular among the teachers of health professional schools in Sri Lanka and in the region. Since 2006 the program was expanded to suit the UGC requirement of an induction program for academic staff for Medical, Dental and Veterinary probationary teachers to obtain the confirmation in the university service.

Since 2020, MEU was upgraded to a Department and now we are identified in the University system as Department of Medical Education. We collaborate closely with the Post graduate Institute of Medicine, University of Colombo and the Ministry of Health Sri Lanka and the World Health Organization, sharing expertise related to training activities.

Our primary goal is to promote innovations in Health professional education and policy formulation, identifying newer areas for improvement towards enhancing quality of healthcare delivery. Further we actively promote research in medical and health professions education. Other functions are developing linkages among different sectors, collaborating with national and international centers of excellence. Advisory role in curriculum development, participating in undergraduate teaching and assessments as required (including the Faculty of Allied Health Sciences, UoP). Also participate in evaluation missions and maintaining quality and standards.

The Department of Medical Education carries out its activities with the assistance of a working group. These committed resource persons of training sessions/workshops are drawn from the faculties of health sciences.

### Academic staff members:

- Professor K N Marambe MBBS (Colombo) PhD (Maastricht)



## DEPARTMENT OF PSYCHIATRY

On 1<sup>st</sup> September 1971, the Department of Psychiatry was established in the Faculty of Medicine with one staff member, namely Prof M. A. A. Rodrigo. The department continued to develop and in time expanded to include several other academic members. In 1980, the academic staff comprised Prof. Rodrigo (Head of Department), Senior lecturer Dr D. C. Senaratne, two Lecturers namely Dr D. R. R. Abeysinghe and Dr E. K. Rodrigo and a clinical psychologist Mr P. W. Kodithuwakku as well as two non-academic staff, Miss A. R. Wickramarachchi (Typist/Clerk) and Mr G. Sirisena (Labourer).

Initially, clinical services of the Department of Psychiatry were provided in the General Hospital Kandy in the year 1971. Despite being understaffed the department managed to provide both inpatient services and ran outpatient clinics by 1979. Thereafter, the clinical teaching and research activities of the Department of Psychiatry were shifted to the Teaching Hospital Peradeniya in January 1981. Subsequently, in 1982, the department extended its services to the inpatient unit at the Teaching Hospital Peradeniya and helped to run several outpatient clinics including clinics for general psychiatry, child psychiatry and sexual dysfunction.

The department is dedicated to teaching medical undergraduates as well as training qualified psychiatrists to serve the country. The history of postgraduate training goes back to the time of 1982. The journal club held on every Thursday afternoon serves as an academic and meeting point for postgraduate trainees and specialists alike and is one of the longest-running clinical journal clubs in the country.

### Academic staff Members:

- Prof (Mrs) Thilini Rajapakse (MBBS, MD, PhD)
- Prof (Mrs) Dewasmika Ariyasinghe (MBBS, MD)
- Dr Vipula Wijesiri (MBBS, MD)
- Dr (Mrs) Sayuri Perera (MBBS, MD, MRCP(UK))
- Dr (Mrs) Nilantha Balasooriya (MBBS, MD)
- Dr (Mrs) Dilini Vidusha (MBBS, MD)

## ENGLISH LANGUAGE TEACHING UNIT (ELTU)



The ELTU, Faculty of Medicine, mainly focuses on conducting the comprehensive Intensive Course and the on-going CLR English course. Furthermore, special English classes are conducted for the first-year medical undergraduates who find English challenging inclusive of providing any help the faculty needs pertaining to second language use. During the Intensive Course, special emphasis is given for informal development of the language through variety entertainment, debating competitions, designing a magazine, presentations, scrabble-play, movie screening, etc. in this endeavor. Special classes have been conducted for non - academic staff members and IELTS preparation classes for medical professionals opting for postgraduate studies overseas.

The main goal of this unit is supporting the faculty to improve the competency levels of English in students for them to function in an environment wherein the medium of delivery of knowledge is second language and to groom them to become confidently empowered to launch into future job designations in the sphere of medicine that deems greater erudition in this language.

The ELTU functions in close liaison with the English Language Teaching Committee appointed by the Dean and the Head/ELTD to streamline all teaching activities and has received encouraging feedback on its academic endeavors via student appraisals.

### Staff members:

- Mr. Mahes Salgado - Senior Instructor in English - Coordinator/ELTU
- Mrs. Shyamali Mapa Senanayake - Instructor in English
- Mrs. Uththara Nandakumara - Instructor in English

**SKILLS LABORATORY**



### 14.3 Hospitals available for clinical attachments and teaching

The students receive their clinical training at the following hospitals:

#### 1. Teaching Hospital Peradeniya

This is situated within walking distance of the Faculty of Medicine and serves mainly as the professorial unit for training of the final year medical students.

Peradeniya Teaching Hospital is a leading teaching hospital in Sri Lanka with nearly a thousand beds, which is affiliated to the University of Peradeniya. It is the second largest hospital in the Central province. In addition to providing medical care to patients, it provides excellent training opportunities to medical students of the Faculty of Medicine, Peradeniya in Medicine, Surgery, Gynecology & Obstetrics, Pediatrics, Orthopedics, Psychiatry, Radiology, Nuclear medicine, intensive care, preliminary care, OPD services, laboratory services, Rheumatology and neurophysiology. The hospital which is situated in close proximity to the medical faculty provides ample learning opportunities for students.



## **2. National Hospital, Kandy (Teaching)**

This is situated in Kandy, about 6 km away from the Faculty of Medicine and is Sri Lanka's second largest tertiary care medical institution. This is one of the oldest hospitals in Sri Lanka, offering a wide range of medical and surgical specialty services. It also has strong connections to the University of Peradeniya, and conducts undergraduate training for students of the faculty of medicine. The hospital has 73 wards and 13 special units, as well as 10 intensive care units, 29 operating theaters, outpatient services, specialized clinics, and emergency treatment units. In 2017, the hospital had 224,917 inpatient admissions, 82,793 clinic visits from patients from 51 specialty clinics and over 379,401 out-patient visits. The large number of patients visiting the National Hospital Kandy provides ample learning material for students.





### **3. Sirimavo Bandaranaike Specialized Children's Hospital**

This is situated within walking distance of the Faculty of Medicine.

Sirimavo Bandaranaike Specialized Children's Hospital (SBSCH) is Sri Lanka's second largest paediatric hospital with 341 beds. SBSCH was created to provide expert pediatric medical care with advanced medical technology to the children of the central province. The hospital caters to children under the age of 14 and has 21 subspecialties. Accident and emergency care, pediatric surgery, neonatal care, ENT, intensive care, cardiology and neurology are among the specialties offered. You will be exposed to many patients with diverse medical conditions and state of the art facilities which will enrich your training experience.



### **4. Base Hospital (Teaching), Gampola**

This is situated about 16 km away from the Faculty of Medicine.



## **5. District General Hospital, Nawalapitiya**

This is situated about 30 km away from the Faculty of Medicine.



## 14.4 Student Counseling Service

### At Faculty level

This may be the first time you are away from home. It's natural to be worried when you are in an unfamiliar environment facing new experiences. You are not alone! Talking about your fears and anxieties will give relief and help.

Senior Student Counselors, Heads of Departments and other academic staff members are available to assist students.

### Senior Student Counsellors

Counsellors are available in the faculty to assist you in overcoming any problems regarding adjustment to university life (emotional issues, being away from home, etc). Your counsellor will work in a confidential setting to assist you in overcoming your problems and making suggestions for appropriate changes in your situation. They will listen to you, empathize with you, encourage you, and assist you in attempting to resolve your problem. Please call / text/ email and make appointment to meet any one of the student counsellors if you are faced with any problem.

1. **Prof. Nilanthi Dissanayake**  
Department of Microbiology  
0718148755  
nilanthidnk@gmail.com
2. **Dr. Samidi Nawaratna**  
Department of Community Medicine  
0718412112  
samidinawaratna@gmail.com
3. **Dr. Himani Amarathunga**  
Department of Anatomy  
0773920177  
himanipeiris@yahoo.com





4. **Dr. Chathurika Dandeniya**  
Department of Medicine  
0718207196  
chathurika.dandeniya@yahoo.com



5. **Dr. S. Krishnapradeep**  
Department of Paediatrics  
0776507576  
skpradeep2000@gmail.com



#### 14.5 Academic Mentoring

An academic mentor will guide students throughout the undergraduate period to achieve their highest potential. They not only help the students to overcome any difficulties they face, but also guide students to reach their academic goals.

During the orientation period, a small group of students will be allocated to one academic staff member who will be the Academic Mentor throughout their undergraduate period. Academic mentoring offers students the opportunity to discuss specific academic concerns with an academic staff member, at a personal and individual level. They may offer suggestions on strategies to improve academic performances or address other issues interfering with academic performance. This opportunity may be used not only to discuss academic performances but also to discuss any other problems encountered. Academic mentors will also direct students to relevant people who may provide further assistance. It is important that the student meet the mentor at least once a semester.

#### 14.6 The Faculty of Medicine Soft Skills Program

Soft skills (co-generic skills) are personal attributes that enable a person to interact effectively and harmoniously with other people. Teaching of soft skills to medical undergraduates was implemented in the year 2013 through the Student Affairs Committee of the faculty. The main objective of the program is to help students develop essential personal skills which would be useful not only through their undergraduate course but also during future employment, postgraduate studies and life in general. These skills cover a wide range of areas including communication skills, time management, conflict resolution, leadership and many more. At present, the program is offered to medical students starting at the orientation program. These sessions are conducted by academic staff members of the faculty with particular interest in a related area or by invited “non-faculty” experts. The sessions are structured as presentations or as interactive workshops. The soft skills program has received positive feedback from a great majority of students. The faculty intends to develop the soft skills program in the future with continued feedback from students, staff and external experts.

## 14.7 Library facilities

### 14.7.1 Library of Faculty of Medicine



The Medical Library is one of the branch libraries out of eight libraries (7 branch libraries and the Main Library) in the Library System of University of Peradeniya. Medical library serves mainly to undergraduate students and Academic staff of the Medical Faculty and Dental Faculty of University of Peradeniya.

#### Role

Facilitates the students and academic staff access and use of information effectively for academic success, high quality research, resolving curiosity and continuous lifelong academic and personal learning.

#### Goals

1. Provide authentic, reliable and updated information resources in various formats at the correct time.
2. Provide facilities, conducive atmosphere, support of trained staff, databases, services and educational programs and workshops on how to use the latest technologies, to collect information and apply information effectively for learning, teaching and research.
3. Contribution to the undergraduate training
4. Promoting the progress of knowledge and thereby enhancing academic achievements of the students by applying such knowledge.

Mr. B. E. S. Bandara - Assistant Librarian



### **Library Hours**

Monday - Friday	7.30 a.m. to 8.00 p.m.
Weekends	7.30 a.m. to 6.30 p.m.
Public holidays	Closed

### **Services**

- Reference and lending services
- Library orientation programmes
- Inter- library loan services
- Wi-Fi facilities and online public access catalogue
- Online database searching facilities
- Photocopying facilities
- Discussion room facilities

### **14.7.2 Medical E-Library**

The E-library is in two sections: the main section is located in the Medical Library building and the E-Library extension is at the ground floor of ELTU building, The E- Library consists of computers with internet access which could be used by the staff and students for web-based activities. The facility can accommodate up to 70 students at a given time and has areas dedicated for laptop/ tablet users requiring Wi-Fi access. The E-Library coordinates the online learning system MOODLE. MOODLE is an important tool that enables learning and teaching within the Faculty. Students are expected to utilize this facility maximally for self-directed learning which is an important component of the teaching/learning activities in the present curriculum. The E-Library is also the place for students to obtain their

Internet access, usernames and passwords. The E-Library provides Wi-Fi facilities to the rest of the faculty and access points can be found in the canteen, ELTU complex, ground floor of the pre-clinical block and the library complex. The academic programme, student time tables and notices are displayed on the Faculty web page and students are periodically directed to look up the site.



#### **14.8 Curriculum Coordinating Committee (CCC)**

Chairperson : Dr. Vasana Kiridana  
Telephone : 081-2396411, 081-2396235

##### **Other staff**

Ms. Wajira Kangaraarachchi  
Staff Management Assistant

Ms. Ishaka Samarakoon  
Management Assistant

Ms. Mihiri Samarakoon  
Technical Officer

#### **14.9 Student Affairs Committee**

Chairperson : Prof. D. M. P. U. K. Ralapanawa  
Telephone : 071-8495682

#### 14.10 Deputy Proctor

Dr. M. C. Gihan  
Senior Lecturer  
Department of Obstetrics and Gynaecology  
Telephone  
Email: [champikagihan@yahoo.com](mailto:champikagihan@yahoo.com)

#### 14.11 Administrative Staff of the faculty (Dean's Office)

<b>Dean</b>	:	Name	Prof. Vasanthi Pinto
		Telephone	081-2388840/ 081-2396200
		Extension	6200
		Email	dean.medicine@med.pdn.ac.lk
<b>Deputy Registrar</b>	:	Name	Mrs. MSD Marasinghe
		Telephone	081-2055163 / 081-2396201
		Extension	6201
		Email	dr.medicine@med.pdn.ac.lk
<b>Deputy Bursar</b>	:	Name	Mrs. Menaka Jayarathna
		Telephone	081-2386778, 081-2396202
		Extension	6202
		Email	menakajy@yahoo.com

#### Other Staff - Dean's Office

Ms. Asha Wijenayake <i>Senior Staff Management Assistant</i>	- Student, Academic & Elective Matters and Petty Cash
Mr. Sampath Nawaratne <i>Senior Computer Operator</i>	- All computer work, Preparing Students Name tags, Permanent Staff IDs, Temporary Staff IDs, Faculty & University Vehicle Passes, Certificates and Faculty Handbook.
Ms. Vasana Fernando <i>Staff Management Assistant</i>	- Examination work
Ms. Ramya Dahanayake <i>Staff Management Assistant</i>	- Vehicles, Warrants, Leave and Non Academic Matters
Ms. Shyama Gunarathna <i>Management Assistant</i>	- Ethical Committee and Scholarships

Ms. Nirosani Kumari <i>Management Assistant</i>	- All certificates & Verifications for pass out graduates and Mentoring
Ms. Madhushani Ekanayake <i>Management Assistant</i>	- Dean's Secretarial work and Heads meeting
Ms. Wasana Rathnayake <i>Technical Officer</i>	- Condemn article work, Stores and LBMC
Ms. Kalani Konara <i>Management Assistant</i>	- Examination work
Mr. Tharanga Bandara <i>Technical Officer</i>	- Maintenance of office equipment, Board room meetings and Cleaning service.
Mrs. Iresha Rajakaruna <i>Management Assistant</i>	- Faculty Board meeting and follow ups
Mrs. Iresha Weerasinghe <i>Management Assistant</i>	- Research, Higher Degrees and Student Affairs
Miss Niranjala Herath <i>Management Assistant</i>	- Procurement & CRTM
Mrs. Nilanthi Gunaratne <i>Works Aide</i>	- Helping for all office work
Mr. Indika Fernando <i>Works Aide</i>	- Helping for all office work and work as a bus cleaner
Mr. Dhanushka Karunathilake <i>Works Aide</i>	- Helping for all office work and work as a bus cleaner
Mr. Ranil Kalupahana <i>Works Aide</i>	- Helping for all office work and work as a bus cleaner
Mr. Pradeep Perera <i>Works Aide</i>	- Helping for all office work and work as a Three Wheeler Driver
Mr. RPGC Rajapakshe <i>Driver</i>	
Mr. WMACB Wijesundara <i>Driver</i>	
Mr. DM Kekulandara <i>Driver</i>	
Mr. KP Warnakulasooriya <i>Works Aide</i>	- Garden Work

### **Accounts Unit**

Mrs. Shihara Dharmadasa  
*Senior Staff Management Assistant*

Mr. Amila Rathnayake  
*Management Assistant*

Mr. CM Razak  
*Shroff*

Mr. JLMGD Susil Jayantha  
*Senior Staff Management Assistant (Book Keeping)*

Mrs. Mallika Herath  
*Works Aide*

### **English Language Teaching Unit (ELTU)**

Mr. Mahes Salgado  
*Senior Instructor in English*

Ms. Shyamali Mapa Senanayake  
*Instructor in English*

Ms. Uththara Nandakumara  
*Instructor in English*

Ms. Peresha Dassanayake  
*Temporary Lecturer*

Ms. Sandya Nawaratne  
*Management Assistant*

Mr. GMMCP Mallawa  
*Works Aide*

The medical program is a fulltime course conducted over a period of five years. This is a semester and module basis program. The five years of study consist of eight semesters in the pre-clinical and para-clinical segments and a clinical clerkship of 3 ½ years. (Please refer page 116 for further details.

The following services are available in the University.

#### **14.12 Helpline**

Helpline	Deputy Registrar <b>081-2055163 / 081-2396201</b> <b>0777 298827</b> <b>dr.medicine@med.pdn.ac.lk</b>
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## 15. Services and facilities at the University

### 15.1 University Main library



You have access to a superb University Library with books on every subject imaginable. Peradeniya University's library was founded in 1921. The main library and seven other branch libraries make up the library network. Branches are located in the faculties where they belong. Proceed along the new Galaha road, past the Arts Theatre's entrance, and turn right into the Senate building to reach the Main Library. This network of libraries is Sri Lanka's oldest and largest university library system. For further information, please go through the Web site of the Main Library of University of Peradeniya.

Web access - <http://www.lib.pdn.ac.lk/>





## **15.2 Student Counseling**

### **At University level**

The University maintains a student counseling service to assist students who require guidance pertaining to academic, social or personal matters. The Unit is located in the Student Services Centre and is headed by a Director of Student Counseling. Services are offered by senior members of the academic staff. This service is used by many students and is completely confidential in nature.

## **15.3 Information Technology Centre**

It is located adjacent to the gymnasium and provides internet and computer training facilities to university students.

## **15.4 Health Centre**

The Health Centre, headed by the Chief Medical Officer, provides preventive and curative health care to the University community including non-resident students and employees. The preventive health section, under the supervision of the Public Health Inspector, manages disinfection, cleaning, epidemiological work, vector control, food hygiene, waste disposal, environmental sanitation, water supplies sanitation and health education. This section also ensures enforcement of Campus public health regulations and industrial and structural pest control.

Curative health care is provided in the form of a daily out patient service, medical laboratory service and other ancillary medical services including medical examinations of staff, students and counseling service. The Health Centre provides these services with the assistance of the Chief Medical Officer, several medical officers and support staff. Emergencies are referred to Peradeniya and Kandy Teaching Hospitals. Dental treatment facilities are provided by the Faculty of Dental Sciences.

## **15.5 Police and Security Services**

The closest police station is Peradeniya Police Station situated by the Kandy - Colombo road near the Peradeniya Teaching Hospital.

The main Security Office of the University of Peradeniya is located near the New Arts Theatre within the University. Any matters pertaining to security or breach of law may be reported to the security personnel or police.

## 15.6 Other Services

### 15.6.1 Food and other Commodities

University students can buy food at special rates within the University premises. Special rates apply to rice and curry and other food items prepared in university canteens. Each faculty and hall of residence has one or more canteens which cater to the needs of the students.

Commodities are available at the two university co-operative shops which are conveniently located in the Campus. These cater to the general needs of the entire University community. Dairy products, meat and vegetables are available at special prices at the sales outlet of the Department of Animal Husbandry which is located opposite the Faculty of Veterinary Science. Students can also purchase a variety of food items and day to day requirement from places such as "Hela Bojun" food stall located in front of the Faculty of Agriculture, super markets, shopping complexes and sales outlets situated in close proximity to the University premises. The town of Peradeniya (1 km away) and the city of Kandy (5 km away) are the main shopping centers.

### 15.6.2 Service Units

For the convenience of a significant resident population on the Campus, the University continuously upgrades infrastructure and facilities of service units.

- Water and electricity supply
- Telephone network
- Maintaining drainage/sewage systems and general maintenance of lands, buildings and furniture
- Banks
- Bank of Ceylon - a branch is located adjacent to the Senate building
- People's Bank- a branch is located near the main administrative block while the main office is on the Galaha Road
- A central canteen, book shop, tailoring shop and a barber saloon are maintained at the World University Service Centre (WUS Centre)
- Post office/ Sub-Post Office and telephone booths
- Cooperatives and other shops (WUS Centre provides some of these facilities)

## 16. Accommodation



The University of Peradeniya was originally planned as an entirely residential facility. Due to the increased intake of students in recent years, residential facilities cannot be provided to all the students. However, the majority of students and a limited number of staff are provided residential facilities.

### 16.1 Accommodation Facilities for Students



The university has 19 halls of residence for students.

Part-time wardens from the senior academic staff are appointed in charge of the organization and maintenance of discipline in the halls of residence. They are assisted by permanent sub-wardens and part time academic sub-wardens.

Most halls of residence consist of rooms which are shared by 2 or 3 students. An attempt is made to accommodate students of different faculties in the same halls of residence.

A nominal fee is charged for the room and an additional fee per month is levied on students who use personal electrical appliances such as irons, radios etc. Meals are available in hall canteens where food is provided at prices fixed by the university.

## 16.2 Halls of Residence

Akbar Nell Hall	New Sangaramaya
Arunachalam Hall	Ramanathan Hall
Hilda Obeysekara Hall	Sangamitta Hall
Hindagala Hall	Sarasaviyana Hall
James Peiris Hall	Sir Ivor Jennings Hall
Jayathilake Hall	Wijewardena Hall
Kehelpannala Bhikku Hostel	Malalasekara Hall
Marcus Fernando Hall	Ediriweera Sarathchandra Hall
Marrs Hall	Senaka Bibile Hall
New Akbar Hall	

## 16.3 Activities in Halls of Residence

Halls of residence are not mere hostels but a community where numerous social activities happen. Most halls have their own playing area. Students are free to join in any society or societies of their choice. The Inter-hall sports meet is an event that should not be missed while the “Hall Night” is a very popular annual function among students.

## 17. Sports facilities at the University of Peradeniya



*University Grounds*

### 17.1 Sports facilities





Facilities for sports such as athletics, badminton, cricket, chess, elle, football, hockey, netball, rugby, swimming, table tennis, tennis, volleyball, weight lifting and wrestling are available for students and members of staff of the university. The playing field is equipped with a cinder running track (which has a straight 400 meter track), tennis courts, volleyball courts, cricket, rugby and hockey grounds. The university swimming pool is a well-designed pool which meets international standards.

Indoor sports facilities are also available at the well-equipped gymnasium which is one of the largest in Sri Lanka.

In addition, limited facilities are available at the halls of residence for sports. University sports facilities are also made available to schools and clubs of the Kandy area and for national events.

Department of Physical Education coordinates all the sports facilities available at the university. Office of the Department of Physical Education is located at the University Gymnasium and the staff consists of Director, Permanent Instructors and several part-time coaches. Acting Director is Mr. E. M. G. M. B. Ekanayake, Deputy Registrar (Tel. 081-2392164).

## 17.2 Students' Sports Council

This consists of captains and vice-captains of the twenty-three sports recognized for the awarding of university colours.



### 17.3 University Gymnasium



The University possesses a fully equipped gymnasium.

The students may use the gymnasium on:

Weekdays:     from 9 a.m. to 11 a.m.  
                  from 4 p.m. to 7 p.m.

Saturdays:     from 3 p.m. to 6 p.m.

There are restrictions on this currently posed due to the COVID19 pandemic situation but will be revised in the near future.



#### 17.4 Other Sports Activities

The Department of Physical Education and Students' Sports Council organize sports activities. Competitions are organized for new entrants, inter-faculty, inter-hall and at inter-university levels.



## **18. Campus Societies**

### **18.1 Cultural, Drama and Music Societies**

- Arts Council
- English Drama Society
- Film Society
- Gandarwa Sabhawa
- Sinhala Natya Mandalaya
- Sinhala Sangamaya
- Tamil Sangeetha Natya Sangam
- Tamil Society

### **18.2 Religious Societies**

The university comprises a multi-religious population of Buddhist, Catholic, Christian, Hindu and Islamic people. A Buddhist Temple, a Roman Catholic Church, a Christian Church, a Hindu Kovil and a Mosque are located within the university to ensure freedom and facilities to practice any religious faith within the university.

There are five registered religious societies in the university which organize religious activities. These societies are as follows:

- Buddhist Brotherhood
- Newman Society (For Roman Catholics)
- Student Christian Movement
- Hindu Society
- University Muslim Majlis

In addition, there are religious bodies organized by the employees of the university such as the University Buddhist Society.

### **18.3 Other Societies**

- Arunachalam Hall Alumni Association
- Botanical Society
- Computer Society
- Engineering Faculty Arts Circle
- Explorers' Club
- Hanthana Conservation Society
- Production Engineering Students Society MIDI Group
- Sports Council
- Students Meditation Society (Sinhala Bhavana Samajaya)

## 19. Entertainment



Open Air Theater



Arts Theater

Stage dramas are held at the Sarathchandra Open Air Theater while film festivals are held in the Arts Theater, regularly.

## 20. Places of Worship on Campus and in Kandy

### 20.1 University Buddhist Viharaya



Housed in the renovated telephone exchange, this complex provides a place for students to practice meditation, observe *sil* on *Poya* days and participate in *Dhamma* discussions. Tel: 081 2388975/ Uni. ext. 2111/2113

## 20.2 Getambe Viharaya

It is a place of Buddhist worship frequently visited by students during leisure time, especially on *Poya* days.



## 20.3 Dalada Maligawa (Temple of the Tooth Relic)



The *Sri Dalada Maligawa*, the temple of the sacred Tooth Relic of Lord Buddha is situated in the center of Kandy town, 5 km away from Peradeniya. The serene and calm environment of the *Dalada Maligawa* creates unmatched tranquility in the mind of any visitor.

#### 20.4 University Hindu Temple

This Hindu temple which is located at lower Hantana provides a place of worship for Hindu students. Tel: 081 2388139



#### 20.5 University Mosque



With easy access from the campus, it provides a place of worship for Muslim students. It also has a limited facility for accommodating students and guests.



## **20.6 University Christian Churches**

A Christian Chapel (Chaplain - 081 2388294) and a Catholic Church (Chaplain - 081 2388292) are located in the campus providing opportunities for prayer and fellowship.



## 21. Places of importance in the vicinity

### 21.1 Royal Botanical Gardens



The Royal Botanical Gardens, a wonderful natural resource, is situated a few yards away from the university premises.

### 21.2 Embekka, Gadaladeniya and Lankathilaka shrines



Embekka



*Gadaladeniya*



*Lankathilaka*

These places of religious worship situated in Pilimathalawa, a few kilometers from the university premises have immense historic value and reflect the rich cultural heritage of Sri Lanka.



### 21.3 Udawattakele Forest Reserve



Udawatta Kele Sanctuary or the Royal Forest Park of Kandy is situated on the hillside behind the Dalada Maligawa or the Temple of the Tooth Relic. This forest extends about 257 acres and is considered to be a vital Bio reserve for the much populated Kandy City. Centuries back, area surrounding Kandy had been a Rain Forest and the human settlements took place during the era of King Panditha Parakramabahu (1302-1326 AD) and in 1371 AD, King Wickramabahu made Kandy his Kingdom. During this era Kandy was called as “Senkadagala”. This name came into being due to a Brahmin named Senkanda, who lived in a cave at Udawattakele during that era. During the Kandyan Kingdom, this forest area behind the palace was called “ Uda wasala watta” or the ‘Upper Palace Garden’ frequented by the royalty and was out of bound to the people. Since the downfall of the Kandyan Kingdom in 1815, this forest area started to lose its pristine condition due to woodcutting, etc.

The condition of the forest deteriorated due to human activities and in 1856, the Government declared it as a Forest Reserve and later in 1938, it was made a sanctuary. The Kandy Lake gets it’s water resources mainly from this forest’s catchment areas. This precious forest area supplies the much needed air purification activity to the Kandy city which is enclaved by several hills.



## 21.4 International Buddhist Museum - Kandy



Sri Dalada Maligawa Kandy has established the International Buddhist Museum (IBM) to showcase the expand of the Buddhism throughout the Asia and rest of the world. This is the only museum which demonstrates the expanding of Buddhism all around the world.

By the 2600th year of the sambuddatva jayanthi, the Buddha dhamma has developed its status from the simple philosophy of the lifestyle of mankind enunciated in early Buddhist thought to highly developed ritualistic religious system. From its birth place, India, Buddhism as a religion, has spread to different parts of Asia, South – East and far East. While the message of the Buddha is currently being perused in the wide context in the modern world. It is interesting to note the different systems followed in the practice of Buddhism, both Theravada and Mahayana, by the respective countries.

## 22. Risks and hazards

### Thieves, River and Infectious Diseases

Students of the campus are vulnerable to many risks and hazards. Being aware of these risks would be useful to be safe throughout the university life. Ragging is the main misfortune that students may face. However, over the past few years there has been a dramatic reduction in instances of ragging. **Ragging is prohibited in the university.** Students are expected to report incidents of ragging to the appropriate personnel (deputy proctor, student counselors or any staff member). This will enable the university to take necessary action against the culprits.

Occasionally, instances of robbery are reported within the campus, especially in residential halls. There is a 24-hour security service for every residential hall that helps minimize these occurrences. It is advisable for the students to lock the room when away and while sleeping.

The spread of infectious diseases occurs sporadically as the university hosts a large number of students from all parts of Sri Lanka. The risk is minimal when compared to other universities of the country due to adequate space. In the event of sickness, residential treatment may be obtained through the Health Centre that offers a 24-hour service for emergencies or Peradeniya and Kandy Teaching Hospitals.

In the context of the COVID19 pandemic, the university has taken all possible measures to ensure the safety and wellbeing of the students. Guidelines appropriate to the current situation at a given time are issued by the university and students are expected to strictly abide by these guidelines.

Some incidents of drowning have been reported in the Mahaweli River. Therefore, it is essential to take adequate precautions. It is advisable to refrain from bathing in the Mahaweli River.

## 23. Faculty Workshop

The faculty workshop is an integral part of the Faculty of Medicine contributing to its maintenance and daily function. The role of the Workshop is to fulfill the daily requirements of the departments and units in the form of equipment, furniture and general repairs and renovations as well as making new equipment/ furniture for specific requirements, as and when necessary. The Workshop therefore contributes to the smooth running of the undergraduate teaching programme, ensuring that the student teaching, study areas and equipment are in good condition. In addition, the Workshop plays a major role in preparations for the student led Medical Exhibitions, assisting the students to build models and displays for this major event. The team aim to ensure all work-orders are fulfilled as soon as possible to the best of our ability.



Dr. Champa N. Ratnatunga - Academic Staff, Senior Lecturer, Head of Workshop

## 24. Peradeniya Medical School Alumni Association (PeMSAA)

Peradeniya Medical School Alumni Association (PeMSAA) was established in the year 1992 and is the oldest and most active alumni association among state medical schools of the country. Our purpose is to help alumni, medical students, and our alma mater, the Peradeniya medical school, thrive. PeMSAA has many overseas chapters including UK, Australasia, USA and Bhutan. They too, offer many student welfare activities.

PeMSAA helps the medical students to achieve the desired level of knowledge, skills and attitudes necessary for the present-day doctor. We conduct a series of lectures - the "PeMSAA Evening Talks" and Case Based Discussions resourced by Alumni in different fields of medicine to supplement and enhance student learning. The topics are decided by the students according to their needs. We also help develop soft skills among the students and members.

We are proud that we have significantly contributed the faculty development and maintain several infrastructure facilities in collaboration with many contributors. We have provided and maintain many student leisure areas in the faculty like the 'Latha Mandapaya' and the Summer house. We believe this will help students learn in a relaxed and comfortable environment.

PeMSAA offers many scholarships to students. We also offer a bursary scheme where students pay back the amount once they pass out and start earning on their own so that future students can be helped. We have also established a 'Student Crisis Fund' to help students during times of unexpected crisis. We invite students to make use of these schemes if needed.

PeMSAA also is engaged in many outreach activities. Students are welcome and encouraged to join these activities.

In order to learn more details of these activities and other important functions of PeMSAA please log on to <http://www.pemsaa.org.lk>

Come and join us at PeMSAA by obtaining an 'Associate' membership and convert it to full PeMSAA membership once you pass out.



## 25. The way of Life

The medical school Peradeniya generates well rounded doctors with humane attitudes, leadership qualities and talented good citizens for the country. The faculty encourages nature lovers, religious harmony, and the arts. There are students with amazing talents, and the environment in the faculty is supportive of nurturing and further developing these.

Many events are held in the faculty to encourage students to enhance their skills in a variety aspects.

For freshmen, a welcome ceremony is organized by the senior students in the faculty with the cooperation of the academics. There are numerous events at this function, and everyone has a good time. It provides a fresh and cheerful welcome to the newcomers.



The “Going Down” ceremony is the grand send off to the newly passed out final year students as memorable ending to their faculty life. It is a variety show where the students showcase their talents and creativity.

There are several sports and cultural events such as the faculty meet, ‘Kujada’, ‘Pedura’ and ‘Rasa Arana’. These are organized by students, providing a perfect stage for them to improve the cultural scenario while also having a great time.





The faculty hosts a variety of religious events. Some of these Buddhist events include the annual Pirith ritual and the monthly ANIGHA.



There is a Sinhala and Hindu new-year celebration annually. There is also a Christmas party and a Thaipongal festival.



There are numerous sporting activities at the faculty and university levels, including inter-faculty and inter-medical faculty sports competitions. This is an excellent opportunity for students to show and enhance their sporting abilities.

There is a FACULTY MEET that is held in the faculty, and there is batch-wise participation. There is a FRESHER'S MEET, which is a strong social event hosted at the university. It is organized by university students, and all faculties in the university are invited to participate in the numerous sports activities. There is a football competition and a cricket tournament in which all medical faculty students in the country compete.







**26. Faculty Map**



## 27. Important Telephone Numbers

All extensions listed below can be accessed from outside the university, without operator assistance. However, if you are calling

- ☎ within Kandy area: add 239 before the extension number
- ☎ from outside Kandy area: add 081-239 before the extension number
- ☎ internationally: add +94 81 239 before the extension number

### University Extensions

General	2000-2299
Security	2133
Health center	2022
Library	2470-2499

The complete university directory is found at <http://www.pdn.ac.lk/uop/directory>

Police Stations		Hospitals	
Kandy	081-2233333	Kandy	081-2233337
Peradeniya	081-2388222	Peradeniya	081-2388001
<b>Fire Brigade</b>	081-2244444		

**MEDICAL STUDENT'S PLEDGE**

1. I hereby take responsibility, to the best of my ability, to acquire knowledge, skills and attitudes necessary to become a doctor.
2. I will engage in learning individually, as well as in a group, in collaboration with my colleagues and other health care professionals.
3. I will commit myself to learn the practice of science as well as the art of medicine.
4. I will be responsible to adhere to a life-style that the society demands from the medical profession.
5. I will extend unconditional respect and maximum possible care towards all patients irrespective of their social status, attitudes or behaviour.
6. I will always respect the principle of sharing information while maintaining professional secrecy, and my personal limitations in divulging information.
7. I will never introduce myself as, nor pretend to be, a doctor during my undergraduate period.
8. I appreciate and acknowledge with gratitude the contributions and commitment made by patients, teachers, health care professionals, my parents and the society at large, for my training
9. I will never exploit relationships with my patients for direct or indirect advantages.
10. I will stringently adhere to expected ethical behaviour laid down by the Sri Lanka Medical Council.
11. I will learn patient expectations from patients and maintain my conduct and behaviour to suit the expectations of the society.
12. I will abide by the rules and regulations of the society, Faculty of Medicine, the university and the hospital where I will be gaining my clinical experience.
13. I will dress appropriately at all times and especially when I interact with patients.
14. I will continue to communicate with my guardian and family members and ask for help from them as well as the faculty members.
15. I will cultivate empathy, communication skills and patient centred attitudes within me.
16. I will continue to engage in my family activities and other social activities during my undergraduate period.

## Acknowledgements

*We would like to thank all academic and non-academic staff members of the faculty, for their immense contribution to make this handbook a success.*

*Designed by* Sampath Nawaratne  
Dean's Office

*Photographed by* Gamini Gunasekara  
Nimal Rathnayaka  
Technical Resource Centre

Faculty of Medicine  
Peradeniya





*Faculty of Medicine  
University of Peradeniya  
Sri Lanka*