



MIU
A Chartered University

CURRICULUM DOCUMENT FOR MBBS PROGRAM

Outcome-Based • Integrated • Student-Centered • Community-Oriented • Value-Driven

MOHI-UD-DIN ISLAMIC MEDICAL COLLEGE
MIRPUR (AJK), PAKISTAN

SERVING HUMANITY
THROUGH
EXCELLENCE IN
MEDICAL
EDUCATION

Rooted in Islamic Values



Approved by the
Academic Council



Aligned with
PMDC MBBS Curriculum 2024
& HEC Standards



Prepared by
Department of
Medical Education

VERSION

3.0

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MOHI-UD-DIN ISLAMIC UNIVERSITY
A Chartered University



MOHI-UD-DIN MEDICAL COLLEGE, MIRPUR (AJK)			
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PREFACE

The MBBS Curriculum Document of Mohi-ud-Din Islamic Medical College (MIMC), Mirpur, AJK represents a significant milestone in our ongoing commitment to excellence in undergraduate medical education. It reflects the collective efforts of faculty members, academic leaders, curriculum experts, students, and institutional stakeholders who have worked collaboratively to develop a curriculum that is academically rigorous, socially responsive, and aligned with national and international educational standards.

The curriculum has been developed in accordance with the Pakistan Medical and Dental Council Undergraduate Medical Education Standards 2024 while incorporating the principles of competency-based medical education, integrated learning, student-centered teaching, and continuous quality improvement. The programme aims to produce graduates who possess not only sound medical knowledge and clinical competence but also professionalism, ethical values, leadership abilities, communication skills, research aptitude, and a lifelong commitment to learning.

Recognizing the evolving healthcare needs of Pakistan and the rapid advancements in medical science and technology, this curriculum emphasizes early clinical exposure, horizontal and vertical integration, evidence-based practice, community-oriented education, simulation-based learning, and meaningful assessment strategies. Continuous curriculum evaluation and stakeholder feedback remain central to maintaining the relevance and effectiveness of the programme.

This document serves as the principal academic guide for faculty members, students, curriculum planners, external reviewers, and accreditation bodies. It outlines the philosophy, structure, governance, implementation, assessment, and quality assurance mechanisms that underpin the MBBS programme at MIMC.

We acknowledge the valuable contributions of the Curriculum Committee, Department of Medical Education, Academic Council, faculty members, students, and all stakeholders whose dedication has made this curriculum possible. We are confident that this document will continue to guide the institution in preparing competent, compassionate, ethical, and socially accountable physicians capable of serving both the nation and the global community.

MESSAGE FROM THE VICE CHANCELLOR

It gives me immense pleasure to present the MBBS Curriculum Document of MIMC, Mirpur, AJK. Medical education continues to evolve in response to emerging scientific knowledge, technological innovation, changing disease patterns, and the expectations of society. Universities therefore carry the responsibility of preparing graduates who are not only clinically competent but also ethical, compassionate, innovative, and committed to lifelong learning.

Mohi-ud-Din Islamic University has always remained committed to providing quality education that meets national priorities while embracing internationally accepted educational practices. The revision of the MBBS curriculum reflects our institutional commitment to academic excellence, continuous quality improvement, and compliance with the standards prescribed by the Pakistan Medical and Dental Council.

This curriculum integrates contemporary educational principles, competency-based outcomes, interdisciplinary learning, research, professionalism, and community engagement to ensure that our graduates are equipped to meet the healthcare challenges of the twenty-first century. Equally important is the emphasis placed on integrity, leadership, critical thinking, and social accountability, which remain the defining characteristics of a responsible physician.

I congratulate the Principal, the Department of Medical Education, the Curriculum Committee, and all faculty members whose dedication and collaborative efforts have resulted in the development of this comprehensive curriculum document.

I am confident that this curriculum will contribute significantly towards producing competent physicians who will serve humanity with knowledge, compassion, professionalism, and excellence.

Lt. Gen (R) Dr. Asif Mumtaz Sukhera HI(M)
Vice Chancellor
Mohi-ud-Din Islamic University
Mirpur, Azad Jammu & Kashmir

MESSAGE FROM THE PRINCIPAL

Medical education is the foundation upon which future healthcare systems are built. At MIMC, our primary objective is to provide an educational environment that nurtures academic excellence, clinical competence, professional integrity, and compassion for humanity.

The MBBS Curriculum Document has been developed through a systematic and collaborative process involving curriculum experts, faculty members, students, institutional leadership, and other stakeholders. The curriculum aligns with the PMDC Undergraduate Medical Education Standards 2024 and reflects the best current practices in medical education, including competency-based education, integrated learning, student-centered instructional strategies, early clinical exposure, and programmatic assessment.

This curriculum is more than a collection of academic content; it is a roadmap that guides teaching, learning, assessment, and programme evaluation. It establishes clear expectations for faculty and students while ensuring that educational activities remain aligned with the programme outcomes and the healthcare needs of our society.

I sincerely appreciate the valuable contributions of the Department of Medical Education, Curriculum Committee, Academic Council, and all faculty members who participated in the development and review of this curriculum. Their commitment to academic excellence has resulted in a curriculum that will continue to evolve through regular monitoring, evaluation, and continuous quality improvement.

I am confident that this curriculum will prepare graduates who uphold the highest standards of medical professionalism and contribute meaningfully to the healthcare system of Pakistan.

Brig. (R) Prof. Dr. Abdul Halim
Principal
Mohi-ud-Din Islamic Medical College
Mirpur, Azad Jammu & Kashmir

MESSAGE FROM THE DIRECTOR, MEDICAL EDUCATION

The Department of Medical Education plays a pivotal role in ensuring that the MBBS programme remains educationally sound, evidence-informed, learner-centered, and responsive to the changing needs of healthcare and society. This curriculum document represents the outcome of a comprehensive curriculum review and revision process undertaken to align the programme with the Pakistan Medical and Dental Council Undergraduate Medical Education Standards 2024 and contemporary principles of health professions education.

The revised curriculum has been designed using internationally recognized curriculum development frameworks and emphasizes constructive alignment between programme outcomes, course outcomes, learning experiences, teaching methodologies, assessment strategies, and programme evaluation. It incorporates horizontal and vertical integration, competency-based learning, early clinical exposure, community-oriented education, simulation-based teaching, research, professionalism, and continuous quality improvement.

The Department of Medical Education remains committed to supporting faculty development, curriculum implementation, educational research, assessment quality, and programme evaluation. Continuous monitoring through stakeholder feedback, curriculum mapping, assessment analysis, and quality assurance processes will ensure that the curriculum remains dynamic, relevant, and responsive to emerging healthcare challenges.

This document is intended to serve as a comprehensive reference for faculty members, students, curriculum planners, academic administrators, and external reviewers. We hope it facilitates effective curriculum implementation while promoting excellence in teaching, learning, and assessment.

I extend my sincere appreciation to the Vice Chancellor, Principal, Academic Council, Curriculum Committee, faculty members, students, and all stakeholders whose valuable contributions have made the development of this curriculum possible.

Together, we reaffirm our commitment to producing competent, compassionate, ethical, and socially accountable physicians who are prepared to meet the healthcare needs of Pakistan and the global community.

Dr. Muhammad Junaid Khan
Director Medical Education
Mohi-ud-Din Islamic Medical College
Mirpur, Azad Jammu & Kashmir

LIST OF ABBREVIATIONS

Abbreviation	Full Form
AJK	Azad Jammu & Kashmir
CA	Continuous Assessment
CBME	Competency-Based Medical Education
CLO	Course Learning Outcome
CO	Course Outcome
CQI	Continuous Quality Improvement
DME	Department of Medical Education
EBM	Evidence-Based Medicine
EPA	Entrustable Professional Activity
FA	Formative Assessment
FM	Forensic Medicine
HEC	Higher Education Commission
HOD	Head of Department
ILO	Intended Learning Outcome
IRB	Institutional Review Board
IS	Integrated Session
JC	Journal Club
LGT	Large Group Teaching
LGIS	Large Group Interactive Session
LO	Learning Outcome
MBBS	Bachelor of Medicine, Bachelor of Surgery
MCQ	Multiple Choice Question
MIU	Mohi-ud-Din Islamic University
MIMC	Mohi-ud-Din Islamic Medical College
MPC	Module Planning Committee
OBE	Outcome-Based Education
OSCE	Objective Structured Clinical Examination
OSPE	Objective Structured Practical Examination
PEC	Programme Evaluation Committee
PBL	Problem-Based Learning
PMDC	Pakistan Medical and Dental Council
PO	Programme Outcome
PSIL	Problem-Solving Integrated Learning
QA	Quality Assurance
QEC	Quality Enhancement Cell
SAQ	Short Answer Question
SBA	Student Body Association
SDL	Self-Directed Learning
SGD	Small Group Discussion
SOP	Standard Operating Procedure
SP	Simulated Patient
TOS	Table of Specifications
UME	Undergraduate Medical Education
VC	Vice Chancellor
WBA	Workplace-Based Assessment



MOHI-UD-DIN ISLAMIC MEDICAL COLLEGE, MIRPUR (AJK)

MBBS CURRICULUM MAP 2026

Outcome-Based • Integrated • Student-Centered • Community-Oriented • Value-Driven



VISION

To be a globally recognized center of excellence in medical education, research, innovation, and socially accountable healthcare, producing competent healthcare professionals committed to improving the health and well-being of the people of AJK, Pakistan and beyond.



MISSION

Mohi-ud-Din Islamic Medical College is committed to providing quality competency-based medical education through excellence in teaching, research, innovation, and ethical professional practice to develop competent, compassionate, and socially accountable graduates who address the healthcare needs of AJK, and Pakistan through lifelong learning, leadership, interdisciplinary collaboration, and community engagement.



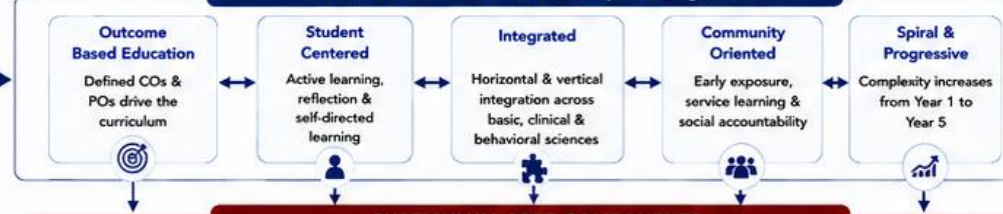
PHILOSOPHY

We believe in nurturing lifelong learners and compassionate professionals through a curriculum that integrates knowledge, skills, attitudes and values for holistic development.

1. PROGRAM OUTCOMES (POs)

- PO-1 Patient Care**
Deliver safe, compassionate, patient-centered, evidence-based care to individuals, families and communities.
- PO-2 Clinical Decision-Making**
Integrate biomedical sciences and clinical reasoning to make appropriate decisions.
- PO-3 Communication & Professionalism**
Communicate effectively and demonstrate professionalism, ethical conduct and Islamic values.
- PO-4 Leadership & Health Systems**
Demonstrate leadership, teamwork and quality improvement within health systems.
- PO-5 Research & Innovation**
Apply research, evidence-based medicine and emerging technologies to improve healthcare.
- PO-6 Lifelong Learning**
Demonstrate self-directed learning and commitment to continuous professional development.

CURRICULUM FRAMEWORK (Spiral & Progressive)



CURRICULUM CORE COMPONENTS



2. CURRICULUM DELIVERY

- Teaching & Learning Strategies**
 - Lectures, SDL, Demonstrations, Skills Labs, Simulation, Journal Club, CPC, Clinical Rotations, Community Posting
- Learning Environments**
 - Classrooms, Labs, Skills Lab, Hospital, Community Settings, Library, E-Learning, Simulation Center
- Integrated Longitudinal Themes**
 - Research, Ethics, Communication, IT & Digital Health, Community Health, Electives
- Student Support**
 - Mentorship, Counseling, Academic Advising, Remediation, Well-being Programs

3. PMDC GRADUATE COMPETENCIES (10 DOMAINS)



6. FACULTY DEVELOPMENT



5. ASSESSMENT BLUEPRINT

- Knowledge**
 - MCQs (SBA)
 - SEQs (Structured)
 - Long Case, Short Case
 - Short Answer Questions
 - Skills**
 - OSPE (Structured Practical)
 - OSCE (Structured Clinical)
 - Long Case, Short Case
 - Viva Voce
 - Attitude/Professionalism**
 - Workplace-Based Assessment (Mini-CEX/DOPS)
 - Logbook, Professionalism Assessment, Portfolio
- Assessment Principles**
- Aligned with POs & COs
 - Blueprinted & Standard Set
 - Validity, Reliability, Fairness & Transparency
 - Multiple Assessors & Moderation
 - Formative + Summative Assessment
 - Timely Feedback

4. YEAR-WISE CURRICULUM DISTRIBUTION (With Module Names)



Spiral Progression: Knowledge → Skills → Attitudes → Competence → Professional Identity

7. INTEGRATED LONGITUDINAL THEMES (Across All Years)



8. CONTINUOUS QUALITY IMPROVEMENT (CQI) CYCLE



LEGEND (LINKAGES)

- Drives / Influences
- Supports / Enables
- Assessed Through
- Feeds Back / Improves

CORE VALUES



TAQWA (God Consciousness)



INTEGRITY



COMPASSION



EXCELLENCE



RESPECT



TEAMWORK



SOCIAL RESPONSIBILITY

"Educating competent, ethical and compassionate physicians to serve humanity with excellence and Islamic values."

CHAPTER 1

INTRODUCTION AND INSTITUTIONAL CONTEXT

Introduction

Medical education is continuously evolving in response to changing healthcare needs, advances in biomedical sciences, emerging technologies, and evolving expectations of society. Contemporary medical curricula are expected to produce graduates who are competent clinicians, effective communicators, ethical professionals, lifelong learners, and socially accountable physicians capable of addressing local, national, and global health challenges. In response to these expectations, the Bachelor of Medicine and Bachelor of Surgery (MBBS) curriculum at Mohi Ud Din Islamic Medical College (MIMC), Mirpur has been developed using an integrated, outcome-based educational approach that aligns with the Pakistan Medical and Dental Council (PMDC) MBBS Curriculum 2024, the academic regulations of Mohi-ud-Din Islamic University (MIU), Higher Education Commission (HEC) guidelines, and internationally accepted principles of medical education including the World Federation for Medical Education (WFME).

The curriculum has been designed to provide students with a balanced learning experience that integrates biomedical sciences, clinical sciences, behavioral sciences, public health, professionalism, communication skills, research, leadership, and emerging healthcare technologies. Through a structured modular curriculum, students progressively develop knowledge, clinical skills, professional attitudes, and ethical values required for safe, effective, and compassionate medical practice.

Institutional Background

MIMC, Mirpur, AJK, is a constituent institution of MIU and holds the distinction of being the first medical college established in Azad Jammu & Kashmir. Founded in 2009 under the visionary leadership of Hazrat Allama Pir Ala-ud-Din Siddiqui, the College commenced its first MBBS academic session on 27 April 2009. Since its establishment, MIMC has remained committed to producing competent, compassionate, and ethically grounded medical graduates capable of addressing the healthcare needs of the nation while maintaining international standards of medical education.

The College is recognized by the PMDC and admits 100 MBBS students annually. The undergraduate medical programme is delivered in accordance with the academic regulations of MIU and the accreditation standards prescribed by PMDC.

MIMC is supported by an on-campus clinical training setup comprising Mohi-ud-Din Teaching Hospital, a 500-bed tertiary care teaching hospital, providing students with comprehensive exposure to primary, secondary, and tertiary healthcare services. The affiliated teaching hospitals serve a catchment population exceeding 1.5 million people across Mirpur Division, adjoining districts of Azad Jammu & Kashmir, and neighbouring regions of Punjab, ensuring diverse clinical learning experiences and adequate patient exposure throughout the MBBS programme.

Situated on a purpose-built educational campus spanning more than 3.5 million square feet, the College offers modern academic facilities including lecture theatres, multidisciplinary laboratories, a clinical skills laboratory, library, digital learning resources, research facilities, and simulation-based educational environments. These resources provide a supportive learning environment that promotes competency-based medical education and lifelong learning.

MIMC occupies a unique position within the healthcare system of Azad Jammu & Kashmir by strengthening regional healthcare capacity, reducing the migration of aspiring medical students to distant institutions, and contributing to the development of a skilled local healthcare workforce. Through affordable tertiary healthcare services, community engagement, and a curriculum integrating contemporary medical sciences with Islamic ethical values, the College remains committed to improving the health and well-being of the communities it serves.

Healthcare Context

Mirpur is one of the major urban centres of AJK and serves a large surrounding population through primary, secondary, and tertiary healthcare facilities. The healthcare needs of the region encompass communicable diseases, non-communicable diseases, maternal and child health, trauma, mental health, and preventive healthcare services. These regional priorities, together with national healthcare challenges and PMDC curricular requirements, have informed the design and organization of the MBBS curriculum. The curriculum therefore emphasizes community-oriented medical education, preventive medicine, evidence-based clinical practice, patient safety, professionalism, and social accountability to prepare graduates capable of addressing the healthcare needs of their communities.

RATIONALE FOR CURRICULUM REVISION

The revision of the undergraduate MBBS curriculum was undertaken in response to the evolving landscape of medical education, healthcare delivery, and regulatory requirements. Following the publication of the PMDC MBBS Curriculum 2024, MIMC initiated a comprehensive review of its existing curriculum to ensure full compliance with updated national standards while aligning with internationally recognized principles of competency-based and integrated medical education.

As part of this initiative, the College appointed a medical education expert through the Department of Medical Education to conduct a systematic evaluation of the existing MBBS programme. The evaluation examined curriculum organization, programme outcomes, curriculum mapping, teaching and learning strategies, assessment practices, stakeholder feedback, and compliance with PMDC accreditation standards. The findings highlighted opportunities to strengthen curriculum integration, improve constructive alignment between learning outcomes and assessment, enhance curriculum governance, and introduce contemporary educational approaches that better prepare graduates for future healthcare challenges.

The curriculum revision was undertaken to establish an educational programme that is responsive to contemporary healthcare needs while remaining aligned with national regulatory requirements and international standards of medical education. The revised curriculum seeks to strengthen curriculum integration, promote outcome-based and competency-based education, improve constructive alignment between learning outcomes, teaching strategies, assessment, and programme evaluation, and enhance the overall quality of undergraduate medical education.

The revision also responds to emerging priorities in healthcare, including patient safety, evidence-based practice, digital health, artificial intelligence, family medicine, research, professionalism, and community-oriented healthcare. These priorities have been incorporated to ensure that graduates are well prepared to meet the evolving healthcare needs of Pakistan and the global community.

The process adopted for curriculum review, stakeholder engagement, programme evaluation, curriculum design, and institutional approval is presented in detail in Chapter 2: Curriculum Development Process.

PURPOSE OF THE CURRICULUM DOCUMENT

This Curriculum Document serves as the official academic framework for the undergraduate MBBS programme at MIMC. It provides comprehensive guidance regarding the philosophy, structure, organization, implementation, governance, delivery, assessment, and continuous quality improvement of the curriculum.

The document is intended to:

- Define the educational philosophy and curricular framework of the MBBS programme;
- Describe the organization and implementation of the modular curriculum;
- Establish alignment between institutional mission, PO, cos, teaching strategies, and assessment;
- Provide guidance to faculty, students, curriculum planners, external reviewers, and accreditation bodies;
- Support curriculum implementation, monitoring, evaluation, and continuous improvement; and
- Demonstrate compliance with PMDC accreditation standards, university regulations, and internationally accepted principles of medical education.

CURRICULUM DEVELOPMENT FRAMEWORK

Curriculum revision was informed by Kern's Six-Step Approach to Curriculum Development, which provides a systematic framework for needs assessment, outcome development, educational strategies, implementation, and evaluation. The model served as the guiding framework throughout the curriculum revision process.

A detailed description of the curriculum development methodology, programme evaluation, stakeholder participation, and approval process is provided in Chapter 2

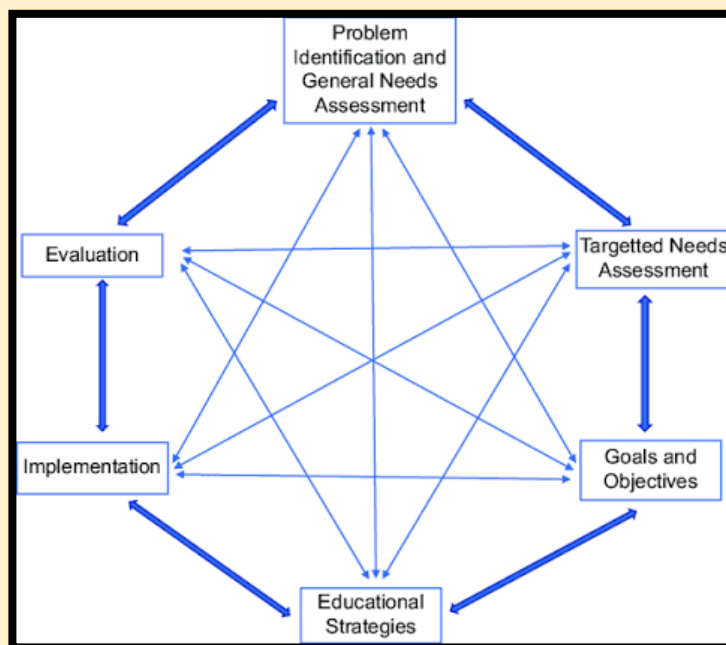


Figure 2. Kern's Six-Step Approach to Curriculum Development

CHAPTER 2

CURRICULUM DEVELOPMENT PROCESS

Overview

The revised MBBS curriculum was developed through a structured, evidence-informed, and participatory process coordinated by the Department of Medical Education under the supervision of the Curriculum Committee and Academic Council. Curriculum development followed Kern's Six-Step Approach and incorporated programme evaluation findings, stakeholder consultation, curriculum mapping, and regulatory requirements.

The development process included:

- Review of the existing MBBS curriculum;
- Programme evaluation using institutional quality indicators;
- Analysis of PMDC MBBS Curriculum 2024;
- Stakeholder consultation with faculty, students, and institutional leadership;
- Revision of Programme Outcomes and Curricular Outcomes;
- Curriculum mapping and constructive alignment;
- Redesign of modular organization and longitudinal themes;
- Institutional review and approval through established governance mechanisms.

General Needs Assessment

The revision of the MBBS curriculum was initiated in response to significant developments in medical education, healthcare delivery, educational technology, competency-based education, and regulatory expectations. The publication of the PMDC MBBS Curriculum 2024 provided an opportunity to comprehensively review the existing curriculum and align it with contemporary national standards while maintaining the institutional mission and educational philosophy of MIMC.

The curriculum revision also considered the changing health priorities of Pakistan and Azad Jammu & Kashmir, the growing emphasis on patient safety, professionalism, communication skills, evidence-based practice, research, digital health, and the integration of emerging technologies such as artificial intelligence into medical education.

Programme Evaluation and Curriculum Revision

A comprehensive programme evaluation was undertaken before curriculum revision to identify strengths, gaps, and opportunities for improvement. The evaluation examined curriculum organization, curriculum mapping, teaching and learning strategies, assessment practices, student progression, stakeholder feedback, and compliance with PMDC accreditation standards.

Findings from the programme evaluation informed revision of Programme Outcomes, Curricular Outcomes, module organization, curriculum mapping, teaching strategies, assessment methods, and quality assurance processes. Recommendations generated through the evaluation were reviewed by the Curriculum Committee and incorporated into the revised curriculum prior to institutional approval.

Stakeholder Participation

Curriculum development was undertaken through a collaborative process involving multiple stakeholders. Faculty members from basic medical sciences, clinical sciences, behavioural sciences, community medicine, and medical education participated in curriculum review meetings and

contributed to the development of PO, COs, module organization, curriculum mapping, teaching strategies, and assessment plans.

Students also participated through structured feedback mechanisms and representation in curriculum discussions, while recommendations from external regulatory bodies, university policies, and healthcare needs of the community were considered throughout the revision process. This collaborative approach ensured that the curriculum reflects educational best practices while remaining responsive to the expectations of learners, faculty, healthcare institutions, and society.

CURRICULUM APPROVAL AND FUTURE REVIEW

Following completion of the revision process through Programme Evaluation committee (PEC), the curriculum was reviewed by the Curriculum Committee and submitted through the appropriate institutional governance mechanism for academic approval. The curriculum shall remain a dynamic document and will undergo periodic review based on programme evaluation findings, stakeholder feedback, educational research, advances in medical science, and future revisions issued by the PMDC and MIU.

Continuous monitoring and evaluation of curriculum implementation will ensure that the MBBS programme remains relevant, evidence-based, learner-centred, and aligned with national and international standards of medical education.

CHAPTER 3

EDUCATIONAL PHILOSOPHY, MISSION, VISION AND GRADUATE OUTCOMES

Introduction

The MBBS curriculum at MIMC, Mirpur, has been developed to prepare competent, ethical, research-oriented, and socially accountable physicians capable of meeting the evolving healthcare needs of Pakistan and the global community. The curriculum is founded on the principles of Outcome-Based Medical Education (OBME) and Competency-Based Medical Education (CBME), ensuring that graduates acquire the knowledge, clinical skills, professional attitudes, and lifelong learning competencies expected of contemporary medical practitioners.

The educational framework of the programme is guided by the institutional mission of MIMC, the vision of MIU, the Graduate Competency Framework of the PMDC, and internationally accepted principles of medical education. These guiding principles shape every aspect of the curriculum, including programme outcomes, curricular outcomes, curriculum organization, teaching and learning strategies, assessment practices, and programme evaluation.

The revised MBBS curriculum adopts a learner-centred, integrated, and spiral approach to medical education that progressively develops students from foundational biomedical sciences to advanced clinical practice. Through constructive alignment of educational outcomes, learning experiences, and assessment methods, the programme ensures that graduates possess the competencies required for safe, evidence-based, compassionate, and patient-centred medical practice.

This chapter presents the educational philosophy underpinning the curriculum, the institutional mission and university vision, graduate attributes, POs, Curricular Outcomes, and the constructive alignment framework that integrates these components into a coherent educational programme.

Educational Philosophy

The educational philosophy of the MBBS programme at MIMC is founded on the belief that medical education extends beyond the acquisition of scientific knowledge and clinical competence. The programme aims to develop physicians who demonstrate professional integrity, ethical responsibility, effective communication, leadership, research capability, and a commitment to lifelong learning while serving humanity with compassion and respect.

The curriculum embraces the principles of OBME, whereby all educational activities are directed towards clearly defined graduate outcomes, and CBME, which emphasizes the progressive development and demonstration of professional competencies required for independent medical practice.

Educational experiences are designed to integrate biomedical sciences, clinical sciences, behavioural sciences, community medicine, and professional development through an organ system-based modular curriculum. Students are encouraged to become active participants in their own learning through self-directed study, collaborative learning, reflective practice, and early clinical exposure that connects theoretical knowledge with authentic healthcare experiences.

The curriculum further promotes evidence-based practice, research and innovation, digital health, professionalism, Islamic ethical values, patient safety, community engagement, and continuous quality

improvement. These principles collectively foster graduates who are capable of responding effectively to changing healthcare needs while maintaining the highest standards of medical professionalism.

The educational philosophy of the programme is guided by the following core principles:

- Outcome-based and competency-oriented education.
- Student-centred learning with progressive responsibility.
- Integration of biomedical, clinical, behavioural, and community health sciences.
- Spiral learning with progressive clinical application.
- Early clinical exposure and contextual learning.
- Evidence-based medical practice.
- Research, innovation, and scientific inquiry.
- Professionalism, ethics, and Islamic values.
- Leadership, teamwork, and social accountability.
- Lifelong learning and continuous professional development.
- Continuous curriculum review and quality enhancement.

These principles provide the educational foundation upon which the MBBS curriculum has been designed, implemented, assessed, and continuously improved.

MISSION, VISION AND GRADUATE ATTRIBUTES

The educational philosophy of the MBBS programme is operationalized through the institutional mission of MIMC and the vision of MIU University. These institutional statements define the aspirations of the College and provide strategic direction for curriculum

development, educational planning, and graduate competency development. Together, they establish the foundation upon which the POs and COs have been formulated.

Mission of MIMC

“Mohi-ud-Din Islamic Medical College is committed to providing quality competency-based medical education through excellence in teaching, research, innovation, and ethical professional practice to develop competent, compassionate, and socially accountable graduates who address the healthcare needs of AJK, and Pakistan through lifelong learning, leadership, interdisciplinary collaboration, and community engagement.”

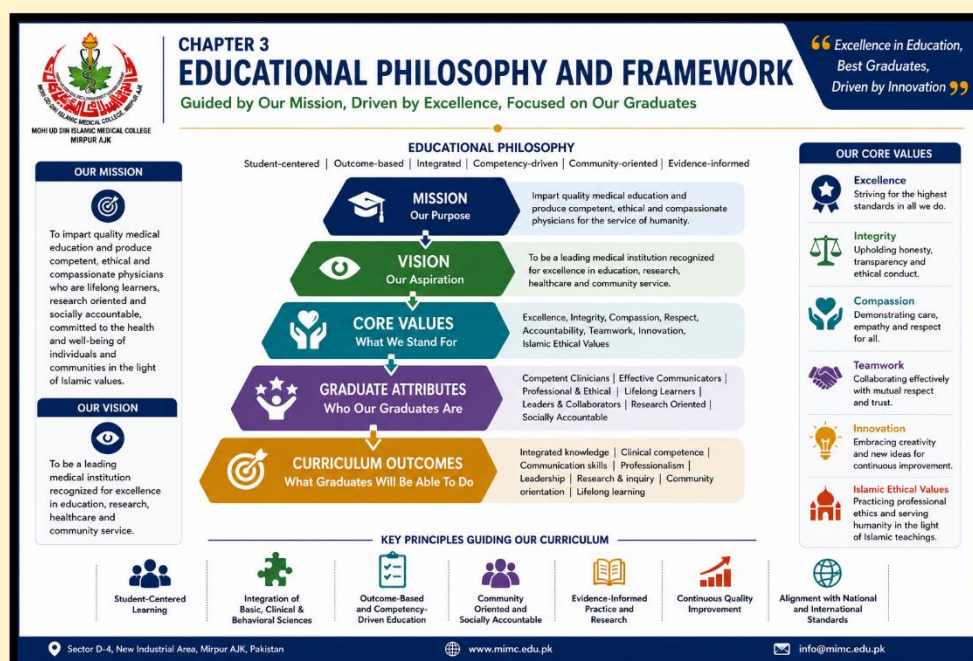


Figure 3. Educational Philosophy and Framework of MBBS Program

The mission reflects MIMC's commitment to quality competency-based medical education, excellence in teaching, research and innovation, and ethical professional practice. It emphasizes the development of competent, compassionate, and socially accountable graduates who are prepared to address the healthcare needs of AJK and Pakistan through lifelong learning, leadership, interdisciplinary collaboration, and community engagement.

Vision of MIMC

To be a globally recognized center of excellence in medical education, research, innovation, and socially accountable healthcare, producing competent healthcare professionals committed to improving the health and well-being of the people of AJK, Pakistan and beyond.

The vision reflects MIMC's aspiration to become a globally recognized centre of excellence in medical education, research, innovation, and socially accountable healthcare. It emphasizes the development of competent healthcare professionals who are committed to improving the health and well-being of the people of AJK, Pakistan, and beyond, while promoting excellence in education, advancing research and innovation, and responding responsibly to the evolving health needs of society.

Vision of MIU

"To be a centre of excellence among the national universities known for its quality of teaching, learning, research and ethical values of the society."

The MBBS curriculum contributes to the realization of this vision by promoting excellence in medical education, fostering research and scholarly activity, encouraging innovation and critical thinking, and preparing graduates who demonstrate integrity, professionalism, and social responsibility in serving their communities.

Graduate Attributes

Graduates of the MBBS programme are expected to demonstrate the knowledge, skills, attitudes, and professional behaviours required for safe, ethical, and effective medical practice. Upon completion of the programme, MIMC graduates will be able to:

1. Apply comprehensive biomedical, clinical, behavioural, and community health knowledge in the prevention, diagnosis, and management of disease.
2. Deliver patient-centred, evidence-based, and compassionate healthcare while respecting cultural diversity and Islamic ethical values.
3. Communicate effectively with patients, families, colleagues, and members of the multidisciplinary healthcare team.
4. Demonstrate professionalism, accountability, integrity, empathy, and respect in all professional interactions.
5. Promote health, prevent disease, and contribute to improving community health through socially accountable medical practice.
6. Critically appraise scientific evidence, participate in research and innovation, and responsibly utilize emerging technologies, including artificial intelligence, in healthcare.
7. Lead multidisciplinary healthcare teams, collaborate effectively with colleagues, and contribute to quality improvement within healthcare systems.
8. Engage in lifelong learning, reflective practice, and continuous professional development to maintain competence throughout their careers.

9. These graduate attributes represent the desired characteristics of every MIMC graduate and provide the conceptual bridge between the institutional mission, educational philosophy, Programme Outcomes, and Curricular Outcomes.



Figure 4. Graduate Development Pathway

Programme Outcomes

POs define the broad competencies that every graduate of the MBBS programme is expected to demonstrate upon successful completion of the five-year curriculum. They represent the institutional expectations for safe, ethical, evidence-based, and patient-centred medical practice and provide the foundation for curriculum planning, curriculum mapping, teaching and learning strategies, assessment design, and programme evaluation.

The POs were developed through a structured consultative process involving the Department of Medical Education, Curriculum Committee, faculty members, students, institutional leadership, and relevant stakeholders. They are aligned with the mission of MIMC, the vision of MIU, and the Graduate Competency Framework of the PMDC.

Achievement of these outcomes is progressively facilitated through integrated organ-system modules, longitudinal themes, clinical training, community-based learning, research activities, and structured assessments distributed throughout the five-year MBBS programme.

The Programme Outcomes describe the broad competencies expected of every graduate upon completion of the MBBS programme. They represent the institutional expectations for safe, ethical, evidence-based, and patient-centred medical practice.

Table 1. Programme outcomes of MBBS at MIMC with description.

Outcome	Description
PO-1: Patient Care	Provide patient-centered, evidence-based, and cost-effective care while addressing individual and community health needs.

PO-2: Clinical Decision-Making	Make informed decisions in clinical settings, balancing efficacy and cost-effectiveness, while considering patients' socio-economic circumstances.
PO-3: Communication	Communicate effectively with patients, families, and the healthcare team, using empathy and clarity to foster positive health outcomes.
PO-4: Leadership and Management	Exhibit leadership and management skills essential for high-quality healthcare delivery, teamwork, and conflict resolution in a multidisciplinary environment.
PO-5: Research and Inquiry	Conduct and critically appraise research by integrating scientific inquiry with emerging technologies, including artificial intelligence, to develop innovative solutions for contemporary healthcare challenges.
PO-6: Lifelong Learning	Demonstrate lifelong learning, adopting self-directed learning strategies to stay current in medical knowledge and skills.

Following approval by the relevant academic authorities, these POs serve as the overarching educational goals of the MBBS programme and guide curriculum implementation, module development, assessment planning, and programme evaluation.

Curriculum Objectives

The MIMC MBBS curriculum is designed to provide an integrated, progressive and student-centred educational programme that develops the knowledge, clinical skills, professional attitudes and competencies required for safe, effective, ethical and patient-centred medical practice. It aims to integrate biomedical, clinical, behavioural and population health sciences; promote critical thinking, evidence-based practice, self-directed and lifelong learning; develop effective communication, teamwork, leadership and professional responsibility; prepare graduates to address the health needs of individuals, families and communities; and foster scholarship, research, innovation and continuous improvement in medical education and practice.

Curriculum Outcomes

COs translate the broad POs into measurable educational competencies that guide curriculum implementation throughout the MBBS programme. They provide the operational framework for curriculum organization and ensure that every module, learning activity, and assessment contributes to the achievement of the intended graduate competencies.

The COs were formulated through a systematic curriculum review process led by the Department of Medical Education in collaboration with the Curriculum Committee, faculty members, students, and institutional leadership. The outcomes are aligned with the POs, institutional mission, university vision, and PMDC Graduate Competency Framework, thereby ensuring constructive alignment across all components of the curriculum.

Each curricular outcome is progressively developed through integrated learning experiences, clinical clerkships, longitudinal themes, community engagement, research activities, and competency-based assessment across all five academic years.

To achieve the POs, the MIMC curriculum is specifically designed to enable students to develop the following competencies:

Table 2. Curricular outcome of MBBS at MIMC, their descriptions and alignment with Programme outcomes.

Curricular Outcome	Description	Aligned Programme Outcome(s)
CO-1: Comprehensive Medical Knowledge	Analyze and apply knowledge from biomedical, clinical, and behavioral sciences to innovate in clinical care and health system design, thereby supporting transformative medical education.	PO-1, PO-2
CO-2: Clinical Competence	Implement patient-centered care and utilize evidence-based practices, contributing to healthcare innovation and empowering future healthcare leaders.	PO-1, PO-2
CO-3: Ethical Practice	Uphold ethical integrity, patient advocacy, and Islamic-aligned professional standards through lifelong learning, community trust, and a passionate, diverse faculty	PO-3, PO-6
CO-4: Public Health Awareness	Apply principles of preventive medicine and public health to improve population health and reduce healthcare disparities.	PO-1, PO-5
CO-5: Excellence in Healthcare	Excel in delivering equitable, affordable, and exemplary healthcare, embodying our vision to be a leading institution in medical education.	PO-1, PO-2, PO-4
CO-6: Leadership Skills	Assume leadership roles in healthcare, demonstrating strong communication skills, effective teamwork, and committing to professional and ethical standards.	PO-3, PO-4
CO-7: Research and Innovation=AI	Engage in research and promote innovation, driving continuous improvement in healthcare delivery and aligning with our vision of exemplary and equitable healthcare.	PO-5, PO-6
CO-8: Interdisciplinary Collaboration	Work effectively within interdisciplinary teams and contribute to addressing diverse health needs, reflecting our vision to comprehensively meet the needs of the nation and global community.	PO-3, PO-4

Collectively, the COs provide the framework for curriculum mapping, module planning, teaching and learning strategies, assessment methods, and continuous programme evaluation, ensuring that graduates achieve the competencies expected of modern medical practitioners.

Constructive Alignment Framework

The MBBS curriculum at MIMC has been designed using the principles of constructive alignment, ensuring that every component of the curriculum contributes systematically to the achievement of the intended graduate competencies. Constructive alignment refers to the deliberate integration of institutional aspirations, educational outcomes, curriculum content, teaching and learning strategies, assessment methods, and programme evaluation into a coherent educational framework.

At MIMC, curriculum planning begins with the institutional mission and the vision of MIU, which define the educational direction of the programme. These institutional aspirations are translated into clearly defined POs and COs that describe the competencies expected of graduates. The outcomes are

subsequently mapped to module learning outcomes, educational strategies, assessment methods, and the Graduate Competency Framework prescribed by the PMDC.

This systematic alignment ensures that every learning experience, educational activity, and assessment contributes meaningfully to the development of competent, ethical, research-oriented, and socially accountable medical graduates. Furthermore, the alignment framework facilitates curriculum mapping, identifies unnecessary duplication or content gaps, strengthens horizontal and vertical integration, supports continuous curriculum review, and provides evidence of compliance with PMDC accreditation standards.

The Department of Medical Education maintains the institutional curriculum map and periodically reviews the alignment between educational outcomes, curriculum implementation, assessment practices, and programme evaluation findings. Recommendations arising from curriculum mapping and programme evaluation are considered by the Curriculum Committee and Academic Council to ensure continuous curriculum enhancement.

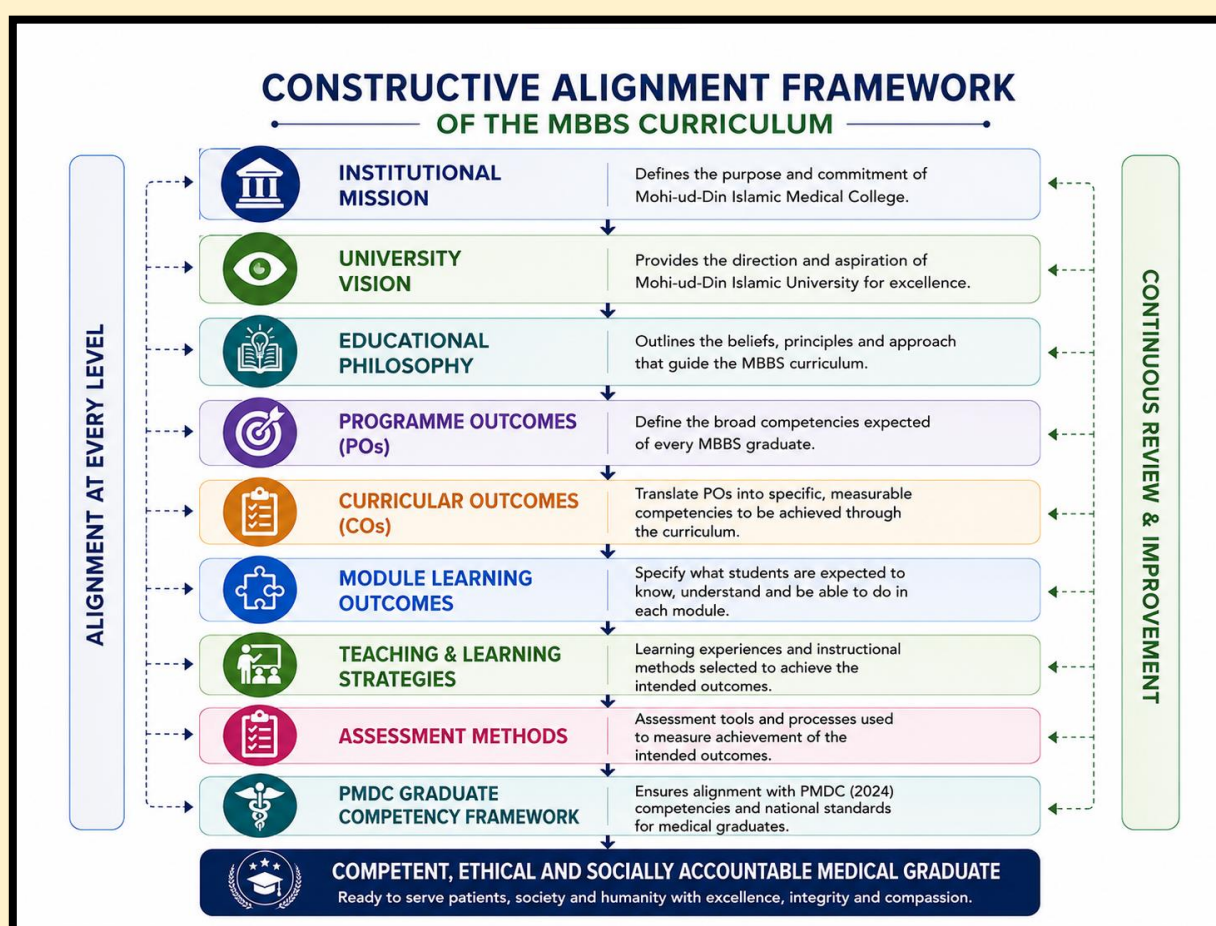


Figure 5. Constructive Alignment Framework

The constructive alignment of the MBBS curriculum is further demonstrated through a series of curriculum mapping matrices that illustrate the relationship between institutional goals, educational outcomes, curriculum implementation, teaching strategies, assessment methods, and graduate competencies.

Alignment of COs with the Institutional Mission

The Curricular Outcomes (COs) have been deliberately designed to translate the MIMC mission into measurable educational outcomes. They collectively support the mission's commitment to quality

competency-based medical education, excellence in teaching, research, innovation, ethical professional practice, competent and compassionate graduates, social accountability, lifelong learning, leadership, interdisciplinary collaboration, and addressing the healthcare needs of AJK and Pakistan.

Table 3. Alignment of curriculum outcome with MIMC Mission Statement

Curricular Outcome	Alignment with MIMC Mission Element
CO-1: Comprehensive Medical Knowledge	Quality Competency-Based Medical Education: Develops integrated medical knowledge as the foundation for competent professional practice.
CO-2: Clinical Competence	Excellence in Teaching & Competent Graduates: Develops the clinical knowledge, skills and reasoning required for safe and effective patient care.
CO-3: Ethical Practice	Ethical Professional Practice & Compassion: Promotes integrity, professionalism, empathy and compassionate patient-centred care.
CO-4: Public Health Awareness	Social Accountability: Prepares graduates to address population health needs and healthcare priorities of AJK and Pakistan.
CO-5: Excellence in Healthcare	Socially Accountable Healthcare: Develops the ability to provide equitable, quality and patient-centred healthcare responsive to community needs.
CO-6: Leadership Skills	Leadership & Interdisciplinary Collaboration: Develops leadership, teamwork and collaborative skills for effective healthcare practice.
CO-7: Research and Innovation	Research & Innovation: Develops research capability and innovative thinking to improve healthcare and address emerging challenges.
CO-8: Interdisciplinary Collaboration	Interdisciplinary Collaboration, Community Engagement & Lifelong Learning: Prepares graduates to collaborate across disciplines, engage with communities and pursue continuous professional development.

Alignment of COs with the University Vision

The COs also support the vision of MIU by emphasizing excellence in teaching and learning, research, ethical practice, and societal contribution through competent medical graduates.

Table 4. Alignment curriculum outcome with MIU Vision Statement

Curricular Outcome	Alignment with MIU Vision Element
CO-1: Comprehensive Medical Knowledge	Quality of Teaching & Learning – Ensures academic excellence.
CO-2: Clinical Competence	Quality of Teaching & Learning – Reflects high standards in clinical education.
CO-3: Ethical Practice	Ethical Values of Society – Upholds the ethical standards central to MIU's identity.
CO-7: Research and Innovation	Quality of Research – Contributes to MIU's reputation as a center of excellence in research.
CO-6: Leadership Skills	Supports institutional excellence and reputation.
CO-4, CO-5, CO-8	Support the broader goal of societal impact and healthcare excellence.

Curricular Content: Knowledge, Skills, and Attitude (KSA)

The curricular content is designed to develop the three core domains of medical competence: Knowledge, Skills, and Attitude (KSA), directly contributing to the achievement of the Programme Outcomes.

a. Knowledge

The knowledge domain encompasses the essential sciences underpinning medical practice.

- **Basic Sciences:** Anatomy, Physiology, Biochemistry, Pathology, Pharmacology, and Microbiology are taught in an integrated, clinically relevant manner within organ-system modules (CO-1; PO-1, PO-2).
- **Clinical Sciences:** Etiology, clinical presentation, diagnosis, and management of common diseases are covered comprehensively during clinical clerkships (CO-2, CO-5; PO-1, PO-2, PO-4).
- **Social and Behavioral Sciences:** Community Medicine, Public Health, Behavioral Psychology, and Medical Ethics are integrated longitudinally. Topics like disease prevention, health promotion, doctor-patient relationship, and cultural sensitivity are taught and reinforced across all phases (CO-3, CO-4; PO-1, PO-3, PO-5, PO-6).

b. Skills

Clinical and procedural skills are taught and assessed systematically to ensure Clinical Competence (CO-2).

- **Clinical Skills Laboratory (CSL):** A dedicated CSL allows students to practice essential skills in a safe, simulated environment before patient contact. This includes history-taking, physical examination techniques, and basic procedures.
- **Clinical Logbook:** Each student maintains a logbook to track their acquisition of core procedural skills (e.g., suturing, IV cannulation, basic life support, nasogastric tube insertion). Skills are signed off by supervisors upon demonstration of competence.
- **Workplace-Based Assessments (WBAs):** During clinical rotations, students are assessed using tools like Mini-Clinical Evaluation Exercise (Mini-CEX) and Direct Observation of Procedural Skills (DOPS) to provide structured feedback on their clinical performance (PO-1, PO-2).

c. Attitude, Ethics, and Professionalism

- Professionalism is treated as a fundamental competency, taught and assessed explicitly to foster Ethical Practice (CO-3; PO-3, PO-6) and Leadership Skills (CO-6; PO-3, PO-4).
- **Teaching:** A longitudinal theme of "Professionalism, Ethics, and Law" runs through the curriculum. It is delivered through case-based discussions, role-play sessions on breaking bad news or taking consent, and reflective writing exercises. (Supports CO-3, CO-6; PO-3, PO-4, PO-6)
- **Assessment:** Professionalism is assessed formatively through feedback from faculty and peers. Summatively, it is evaluated using a standardized professionalism rubric incorporated into all clinical clerkship evaluations, assessing attributes like reliability, integrity, respect, and compassion (CO-3, CO-6; PO-3, PO-4, PO-6).

Outcome Development and Dissemination

The PO and COs were developed through a structured consultative process involving the Department of Medical Education, the Curriculum Committee, faculty members, students, and institutional academic leadership. The outcomes are aligned with the institutional mission and vision, PMDC graduate competencies, and the educational priorities of MIMC. They serve as the foundation for curriculum design, curriculum mapping, teaching and learning activities, assessment strategies, and programme evaluation. The approved outcomes were communicated to faculty and students through the curriculum document, module study guides, student handbook, institutional website, and learning management system to ensure their effective implementation throughout the MBBS programme.

Table 3.6

ALIGNMENT OF PROGRAMME OUTCOMES (POs)
WITH PMDC GRADUATE COMPETENCY FRAMEWORK (2024)

PROGRAMME OUTCOMES (POs)	PMDC GRADUATE COMPETENCY FRAMEWORK (2024) – 10 DOMAINS									
										
	1	2	3	4	5	6	7	8	9	10
 PO-1: Patient Care	✓	✓	✓	✓	✓				✓	
 PO-2: Clinical Decision-Making	✓	✓		✓						✓
 PO-3: Communication			✓	✓		✓			✓	
 PO-4: Leadership and Management						✓			✓	
 PO-5: Research and Inquiry							✓	✓		✓
 PO-6: Lifelong Learning							✓	✓		✓

Fig. 3.4 Alignment of POs with PMDC Graduate Competency Framework (2024)

This alignment matrix demonstrates the contribution of each Programme Outcome (PO) to the achievement of the PMDC Graduate Competency Framework (2024) across its 10 competency domains.

✓ Significant Alignment □ No Direct Alignment

Collectively, these alignment matrices demonstrate that the MBBS curriculum is not a collection of independent courses or modules but an integrated educational programme in which institutional aspirations, graduate competencies, curriculum organization, educational methods, assessment strategies, and programme evaluation are intentionally aligned. This constructive alignment ensures that every component of the curriculum contributes to the achievement of the POs and prepares graduates to meet the professional standards prescribed by the Pakistan Medical and Dental Council while fulfilling the mission of MIMC and the vision of MIU.

Outcome Development, Approval and Dissemination

The POs and COs of the MBBS programme were developed through a structured, evidence-informed, and consultative process coordinated by the DME in collaboration with the Curriculum Committee. The development process was guided by the institutional mission of MIMC, the vision of MIU, the PMDC MBBS Curriculum 2024, and internationally accepted principles of outcome-based and competency-based medical education.

The development of the outcomes was informed by multiple sources of evidence, including programme evaluation findings, curriculum mapping, faculty consultation, student feedback,

institutional priorities, emerging healthcare needs, national regulatory requirements, and contemporary developments in medical education. The outcome development process ensured that the POs reflect the competencies expected of modern medical graduates, while the COs provide measurable educational competencies that guide curriculum implementation throughout the five-year MBBS programme.

Following their development, the proposed POs and COs were reviewed by the Curriculum Committee and subsequently submitted through the institutional academic governance structure for formal approval. The approved outcomes now serve as the academic foundation for curriculum planning, module development, teaching and learning strategies, assessment design, curriculum mapping, and programme evaluation.

To ensure effective implementation, the approved POs and COs are systematically communicated to all stakeholders. They are published within the official MBBS Curriculum Document and incorporated into module study guides, course specifications, student handbooks, orientation programmes, faculty development activities, and other academic resources. Faculty members are expected to align module learning outcomes, teaching activities, and assessment methods with the approved COs during module planning and implementation.

The Department of Medical Education maintains the official curriculum map and periodically reviews the alignment between institutional goals, POs, COs, module learning outcomes, teaching strategies, assessment methods, and the PMDC Graduate Competency Framework. Evidence obtained through programme evaluation, curriculum mapping, stakeholder feedback, assessment analysis, and accreditation reviews is used to identify opportunities for curriculum enhancement.

The POs and COs are therefore regarded as dynamic educational components that remain subject to periodic review through the established curriculum governance framework. Any proposed revisions are considered by the Curriculum Committee, endorsed by the Academic Council, and implemented through the Department of Medical Education to ensure that the MBBS programme remains responsive to evolving healthcare needs, advances in medical education, and future revisions of the PMDC curriculum.

CHAPTER 4

CURRICULUM ORGANIZATION AND STRUCTURE

Introduction

The MBBS curriculum at MIMC, Mirpur has been reorganized following a comprehensive programme evaluation and aligned with the PMDC MBBS Curriculum 2024. The revised curriculum represents a strategic transition from a predominantly discipline-based curriculum to a fully integrated, organ system-based, theme-based modular curriculum, designed to strengthen curriculum integration, competency development, and educational quality while ensuring compliance with national accreditation standards.

The implementation of the revised curriculum follows a phased transition strategy. Beginning with the 2026 academic session, the integrated modular curriculum has been fully implemented in the first and second years of the MBBS programme. The third and fourth years currently follow a hybrid modular model, integrating discipline-based teaching with system-based modules, while the final year continues to be delivered through traditional clinical clerkships. As each academic cohort progresses, the revised curriculum will be sequentially implemented in the subsequent years, ultimately establishing a fully integrated five-year MBBS programme.

The curriculum is organized around organ-system modules, supported by spiral learning, horizontal and vertical integration, and longitudinal themes that progressively develop medical knowledge, clinical competence, professionalism, research capability, leadership, communication skills, and lifelong learning. In addition, HEC-recommended general education components are embedded throughout the programme to promote the holistic development of future physicians.

This chapter describes the educational design, organizational framework, curriculum integration, and phased implementation strategy of the revised MBBS curriculum, providing the institutional blueprint for its progressive implementation and continuous development in alignment with the mission of the College, the vision of MIU, and the PMDC Graduate Competency Framework.

Educational Design of the MIMC MBBS Curriculum

The educational design integrates internationally accepted principles of medical education with the regulatory requirements of the PMDC and reflects the institutional commitment to continuous curriculum improvement following programme evaluation. Rather than relying on a single educational model, the curriculum combines multiple complementary educational approaches that collectively guide curriculum organization, teaching, assessment, and competency development throughout the five-year MBBS programme.

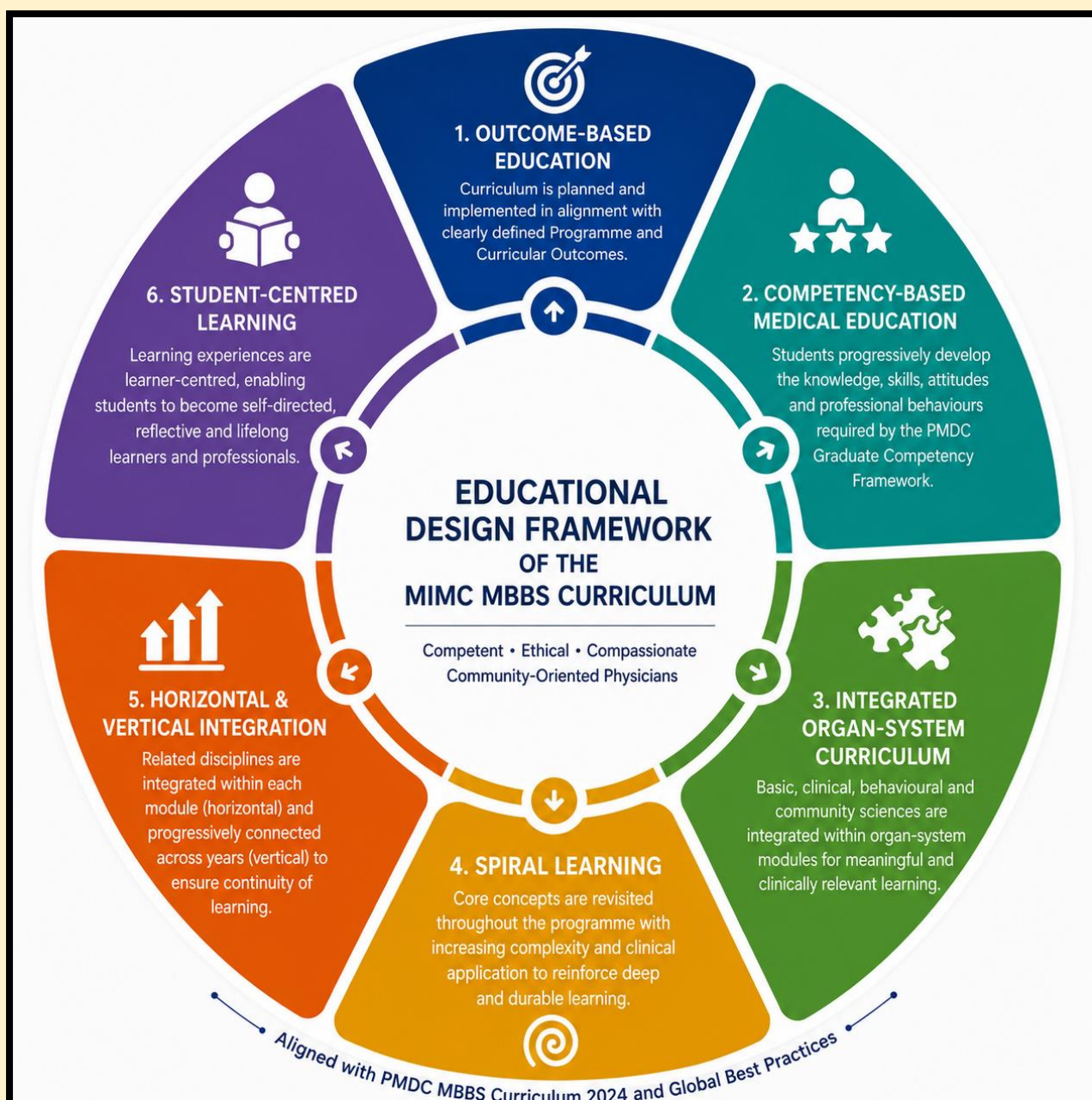


Figure 7. Educational Design Framework of the MIMC MBBS Curriculum

Table 5. Educational Design Principles of the MIMC MBBS Curriculum

Educational Principle	Application within the MIMC MBBS Curriculum
Outcome-Based Education (OBE)	Curriculum planning, teaching, assessment, and programme evaluation are aligned with clearly defined Programme and CO.
Competency-Based Medical Education (CBME)	Students progressively develop the knowledge, skills, professional behaviours, and attitudes required by the PMDC Graduate Competency Framework.

Integrated Organ-System Curriculum	Basic sciences, clinical sciences, behavioural sciences, and community medicine are delivered through integrated organ-system modules.
Spiral Learning	Core concepts are revisited with increasing complexity and clinical relevance throughout the programme.
Horizontal & Vertical Integration	Learning is integrated within academic years and progressively linked across the basic and clinical sciences.
Student-Centred Learning	Learning progressively shifts from guided foundational learning towards independent clinical reasoning, self-directed learning, and professional practice.

Outcome-Based and Competency-Based Education

The curriculum is organized around clearly defined POs and COs, ensuring that all educational activities contribute to the achievement of the competencies expected of MBBS graduates. Every module, learning activity, and assessment is aligned with these outcomes, enabling students to demonstrate progressive achievement of the PMDC Graduate Competency Framework.

Integrated Organ System–Based Curriculum

The curriculum is organized around organ-system and theme-based modules rather than isolated disciplines. Each module integrates biomedical sciences, clinical sciences, behavioural sciences, community medicine, and professional development to provide a comprehensive understanding of health, disease, prevention, diagnosis, and patient management.

This approach promotes:

- Integration of basic and clinical sciences.
- Contextual and clinically relevant learning.
- Reduction of unnecessary content duplication.
- Meaningful application of knowledge across disciplines.

Spiral Learning

The curriculum follows a spiral design, whereby major concepts are introduced during the early years and revisited throughout the programme with increasing depth and clinical application. Students continuously build upon previous learning, enabling the progressive development of clinical reasoning, professional competence, and independent decision-making.

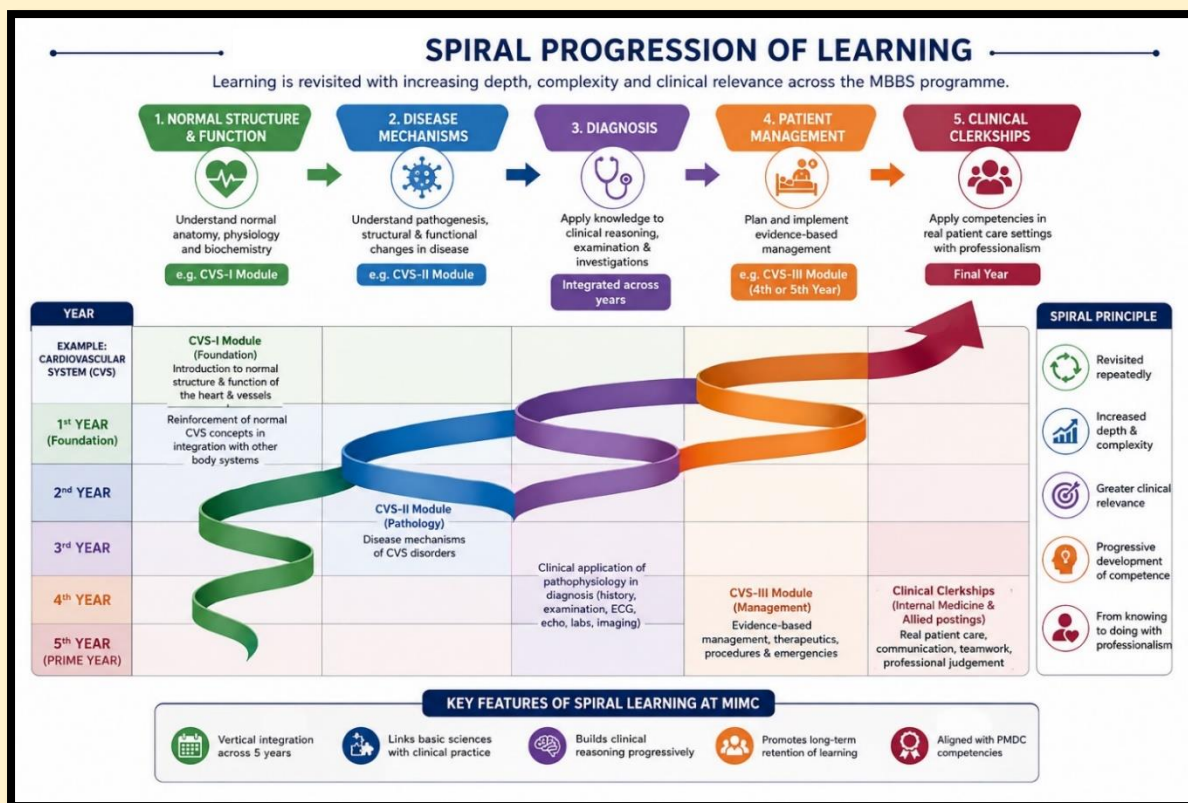


Figure 8. Spiral Progression of Learning

Horizontal and Vertical Integration

The curriculum incorporates both horizontal and vertical integration to promote continuity of learning.

Horizontal integration links related disciplines within each organ-system module, allowing students to study human structure, function, disease mechanisms, and behavioural aspects in a coordinated manner.

Vertical integration progressively connects foundational sciences with clinical medicine through clinical correlations, patient encounters, community-based learning, and workplace training across successive academic years.

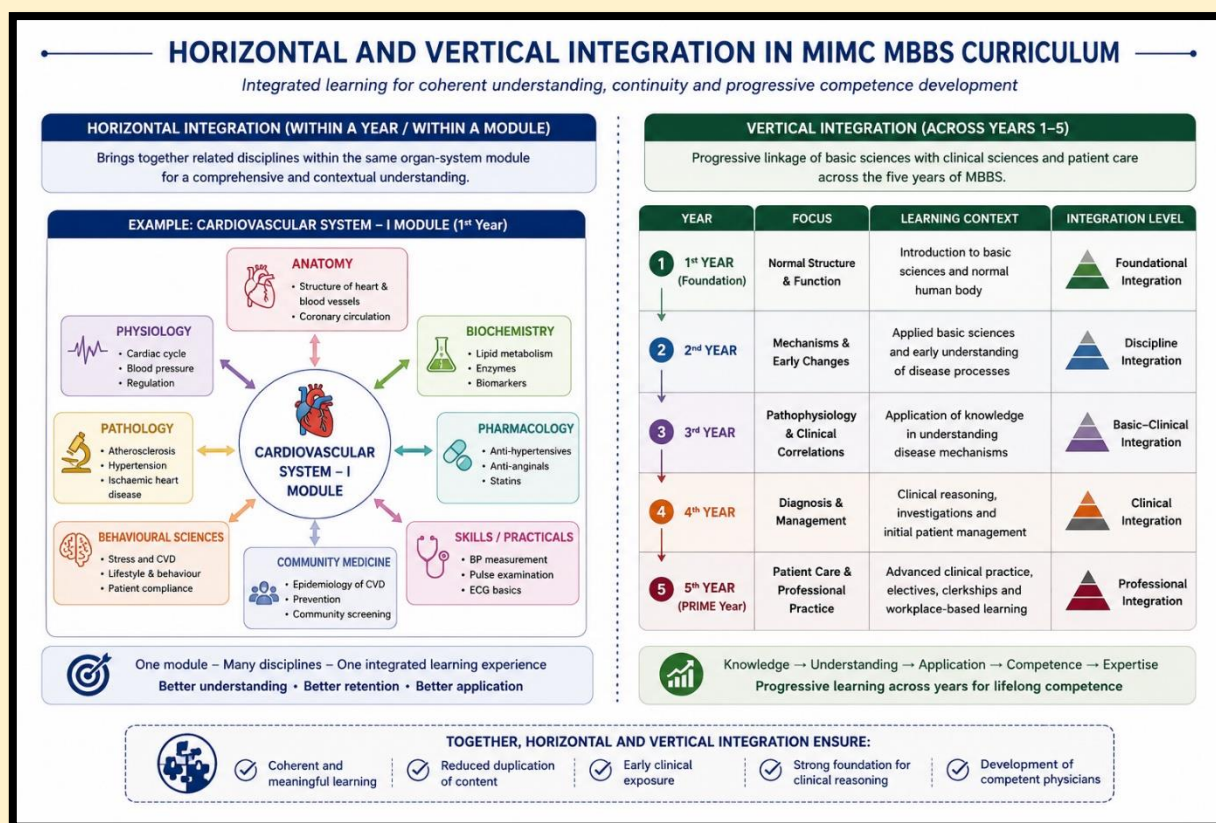


Figure 9. Integration Framework of MBBS Programme at MIMC.

Student-Centred and Future-Oriented Learning

The curriculum promotes active student engagement through integrated learning experiences that progressively develop independent learning and professional responsibility. In addition to the PMDC curriculum requirements, HEC-recommended general education components are embedded throughout the programme to support holistic graduate development.

These include:

- Quran Kareem
- Pakistan Studies
- Islamiat
- English and Expository Writing
- Arts and Humanities
- Artificial Intelligence
- Research Methodology

Together with the longitudinal themes of professionalism, ethics, leadership, communication, research, patient safety, community health, and digital health, these components prepare graduates to meet the evolving demands of modern healthcare.

Curriculum Organization

The revised MBBS curriculum is organized as a five-year integrated programme comprising 17 organ system-based and theme-based modules with total of 31 modules, designed to provide a logical progression from foundational medical sciences to clinical practice. The curriculum follows a phased organizational model, ensuring smooth implementation while maintaining academic continuity for students enrolled under the previous curriculum.

The first and second years are delivered through a fully integrated modular curriculum, where basic medical sciences, behavioural sciences, community medicine, and early clinical concepts are integrated within organ-system modules. The third and fourth years currently follow a hybrid modular model, combining discipline-based teaching with increasing organ-system integration and clinical application. The final year is organized around clinical clerkships, providing supervised workplace-based learning and comprehensive patient care experiences. As each academic cohort progresses, the revised curriculum will be implemented sequentially until the entire MBBS programme is delivered through the integrated modular framework.

MODULE MAPPING (MBBS PROGRAM)								
Tentative								
YEAR	BLOCKS	MODULES			HORIZONTAL MODULE			
1 ST YEAR (FOUNDATION)	A	Foundation-I (5-weeks)		Blood & Immunology-I (5-weeks)		Quran Kareem	PRIME (Professionalism, Research, Identity formation, Management & Leadership, Ethics)	
	B	Locomotor/MSK-I (8-weeks)						
	C	CVS – I (4-weeks)		RES – I (4-weeks)				
2 ND YEAR (PRE-CLINICAL)	D	Gastrointestinal, Hepatobiliary and Metabolism Module -I (9-weeks)		Renal-I (3-weeks)				
	E	Neurosciences 1A (6-weeks)		Neurosciences 1B (5-weeks)				
	F	Endocrine – I (4-weeks)		Repro – I (3-weeks)				
3 RD YEAR (PARA-CLINICAL & EARLY CLINICAL)	G	Foundation – II		Infection & Inflammation-II		English Expository Writing		
	H	Multisystem-I		Blood & Immunology-II	Locomotor/MSK-II			
	I	CVS – II		RES – II				
4 TH YEAR (CLINICAL)	J	Neurosciences-II					M1 = ENT M2 = EYE	Arts & Humanities
	K	GIT & Hepatobiliary – II						
	L	Renal-II		Endo & Repro – II				
PRIME YEAR (PROFESSIONAL TRAINING)	N	Foundation-III		Blood & Immunology-III	Locomotor/MSK-III	Clerkship, Electives, /Capstone/ Observer ship		
	O	Cardiorespiratory-III						
	P	Renal-III		Endo & Repro-III				
	Q	Neurosciences-III		GIT & Hepatobiliary-III	Multisystem-III			



- 1st Year MBBS: 3 blocks, 5 Modules – 27 weeks (945 Hours/AY)
- 2nd Year MBBS: 3 blocks, 6 Modules – 30 weeks (1050 Hours/AY)

Per week teaching hours = 35
Total weeks/hours are tentative



PRIME Year: Year of Professionals Ready for Innovative Medical Excellence
PRIME: Professionalism, Research, Identity formation, Management & leadership, Ethics.

 1st Year
(Foundation)

 2nd Year
(Pre-Clinical)

 3rd Year
(Para-Clinical & Early Clinical)

 4th Year
(Clinical)

 PRIME Year
(Professional Training)

 Horizontal Modules

Figure 10. Curriculum Mapping and module distribution among all five years of MBBS.

The curriculum organization supports the progressive achievement of the POs, COs, and PMDC Graduate Competencies by ensuring continuity of learning, increasing clinical relevance, and systematic competency development across all five academic years.

Table 6. Current Organization of the MBBS Curriculum.

Academic Year	Curriculum Organization	Current Status
Year 1	Fully Integrated Organ System–Based Modular Curriculum	Implemented
Year 2	Fully Integrated Organ System–Based Modular Curriculum	Implemented
Year 3	Hybrid Modular Curriculum	Transition Phase
Year 4	Hybrid Modular Curriculum	Transition Phase
Final Year	Clinical Clerkship Programme	Traditional

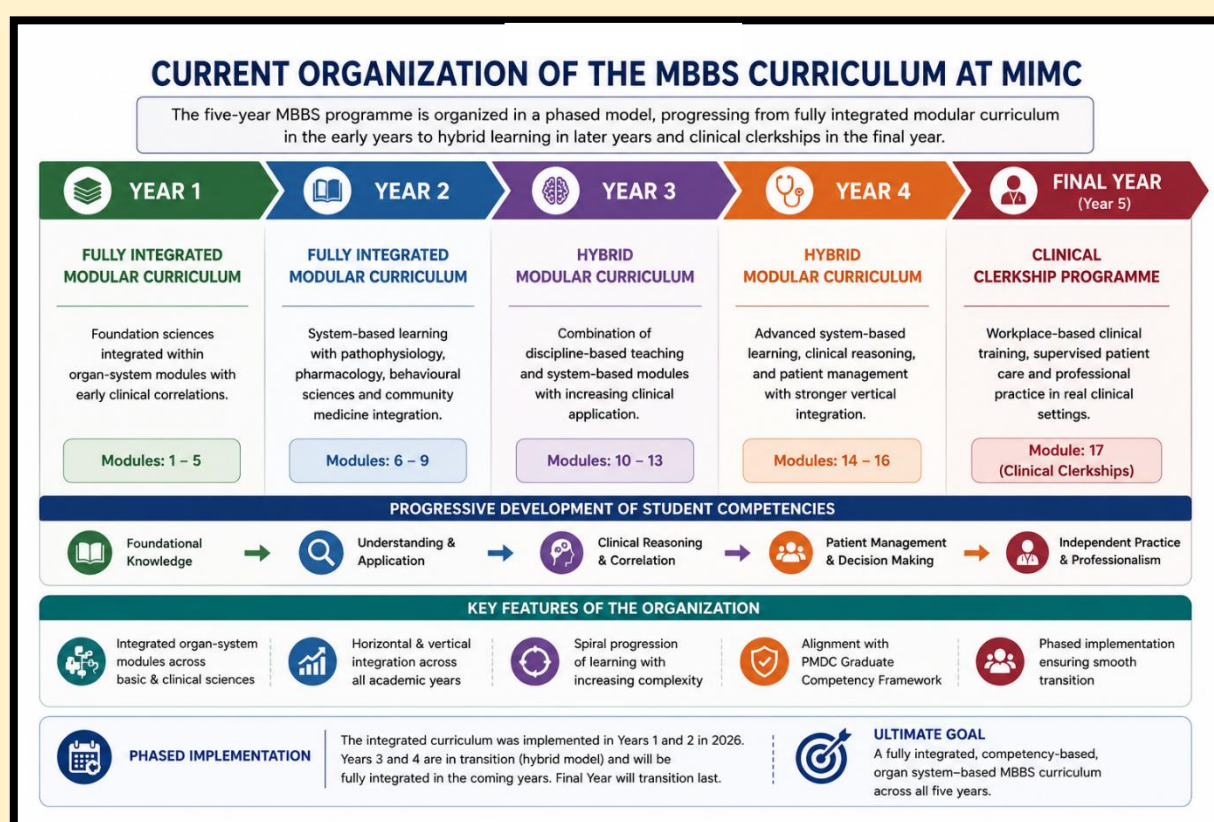


Figure 11. Current Organization of the MBBS Curriculum at MIMC

MODULE CODDING

The following course coding scheme has been developed for the five-year MBBS Programme under the modular, theme-based integrated system. It provides a unique, logical, and sequential identifier for every module in the curriculum to facilitate academic administration, streamline student record-keeping, ensure consistency in transcripts and degree audits, and align with HEC Pakistan guidelines. The scheme is adopted from existing nomenclature with slight modifications.

How to Read the Course Codes

Each course code follows the format:

MB{Year}-{Block}-{Module Abbreviation}-{Sequential Number}

For example: MB1-A-FND-I-01

Component	Meaning	Example
MB{Year}	MBBS year (1 to 5)	MB1 = First Year
{Block}	Block letter (A, B, C, ..., PRIME)	A
{Module Abbreviation}	Standard abbreviation for the module (using Roman numerals)	FND-I = Foundation I
{Sequential Number}	Two-digit sequential number (01 to 39) across the entire curriculum	01

Table of coding of five-year's modules.

Year	Block	Module Name	Abbreviation	Course Code
1st	A	Foundation I	FND-I	MB1-A-FND-I-01
1st	A	Blood I	BLD-I	MB1-A-BLD-I-02
1st	B	Musculoskeletal I	MSK-I	MB1-B-MSK-I-03
1st	C	Cardiovascular I	CVS-I	MB1-C-CVS-I-04
1st	C	Respiratory I	RES-I	MB1-C-RES-I-05
2nd	D	Gastrointestinal Tract I	GIT-I	MB2-D-GIT-I-06
2nd	D	Renal I	REN-I	MB2-D-REN-I-07
2nd	E	Neurosciences IA	NS-IA	MB2-E-NS-IA-08
2nd	E	Neurosciences IB	NS-IB	MB2-E-NS-IB-09
2nd	F	Endocrine I	END-I	MB2-F-END-I-10
2nd	F	Reproductive I	REP-I	MB2-F-REP-I-11
3rd	G	Foundation II	FND-II	MB3-G-FND-II-12
3rd	G	Infection & Inflammation II	INF-II	MB3-G-INF-II-13
3rd	H	Multisystem I	MTS-I	MB3-H-MTS-I-14
3rd	H	Blood & Immunology II	BLD-II	MB3-H-BLD-II-15
3rd	H	Musculoskeletal II	MSK-II	MB3-H-MSK-II-16
3rd	I	Cardiovascular II	CVS-II	MB3-I-CVS-II-17
3rd	I	Respiratory II	RES-II	MB3-I-RES-II-18
4th	J	Neurosciences II	NS-II	MB4-J-NS-II-19
4th	K	Gastrointestinal Tract & Hepatobiliary II	GIT-II	MB4-K-GIT-II-20

4th	L	Renal II	REN-II	MB4-L-REN-II-21
4th	L	Endocrine & Reproductive II	END-REP-II	MB4-L-END-REP-II-22
4th	M1	Ear, Nose & Throat	ENT	MB4-M1-ENT-23
4th	M2	Ophthalmology	EYE	MB4-M2-EYE-24
Final	N	Foundation III	FND-III	MB5-N-FND-III-25
Final	N	Blood & Immunology III	BLD-III	MB5-N-BLD-III-26
Final	N	Musculoskeletal III	MSK-III	MB5-N-MSK-III-27
Final	O	Cardiorespiratory III	CRS-III	MB5-O-CRS-III-28
Final	P	Renal III	REN-III	MB5-P-REN-III-29
Final	P	Endocrine & Reproductive III	END-REP-III	MB5-P-END-REP-III-30
Final	Q	Neurosciences III	NS-III	MB5-Q-NS-III-31
Final	Q	Gastrointestinal Tract & Hepatobiliary III	GIT-III	MB5-Q-GIT-III-32
Final	Q	Multisystem III	MTS-III	MB5-Q-MTS-III-33
	PRIME	Horizontal Module	HZM	MB-PRIME-HZM-34
		Clerkship, Electives, Observer ship	CEO	MB-N-CEO-35
		Quran Kareem	QRN	MB-A-QRN-36
		Pakistan Studies / Islamiyat	PST/ISL	MB-D-PST-ISL-37
		English Expository Writing	ENW	MB-G-ENW-38
		Arts & Humanities	ARH	MB-J-ARH-39
		AI	AI	MB-K-AI-40

TRANSITION TO THE NEXT SECTION

The organizational framework described above is further strengthened through the integration of longitudinal themes, which are embedded throughout the curriculum to ensure the continuous development of professional competencies, research skills, leadership, communication, ethics, patient safety, and digital literacy alongside discipline-specific learning.

LONGITUDINAL CURRICULUM FRAMEWORK

In addition to the organ system-based modular structure, the MBBS curriculum incorporates a series of longitudinal themes that extend across all five academic years. These themes are intentionally embedded within modules, clinical training, community-based activities, assessments, and co-curricular experiences to ensure the continuous development of professional competencies alongside scientific and clinical knowledge.

Unlike standalone courses, longitudinal themes are integrated throughout the curriculum and progressively reinforced as students advance from the foundational sciences to clinical practice. This approach promotes continuity of learning and supports the achievement of the POs, COs, and PMDC Graduate Competencies.

Table 7. Longitudinal Themes Embedded Across the MBBS Curriculum

Longitudinal Theme	Curriculum Focus
Professionalism	Professional behaviour, accountability, reflective practice and lifelong learning
Medical Ethics	Ethical decision-making, Islamic values and patient rights
Communication Skills	Patient-centred communication, teamwork and interprofessional collaboration
Leadership & Management	Leadership, healthcare management and quality improvement
Research & Scholarly Activity	Research methodology, evidence-based medicine and scientific inquiry
Community Health	Preventive medicine, primary healthcare and social accountability
Patient Safety & Quality of Care	Safe clinical practice, quality improvement and risk management
Artificial Intelligence & Digital Health	AI literacy, digital health technologies and responsible use of emerging technologies
HEC General Education Components	Quran Kareem, Pakistan Studies, Islamiyat, English & Expository Writing, Arts & Humanities

These themes are delivered through integrated modules, clinical clerkships, community placements, research activities, and co-curricular programmes, ensuring their progressive development throughout the MBBS programme rather than limiting them to individual courses or academic years.

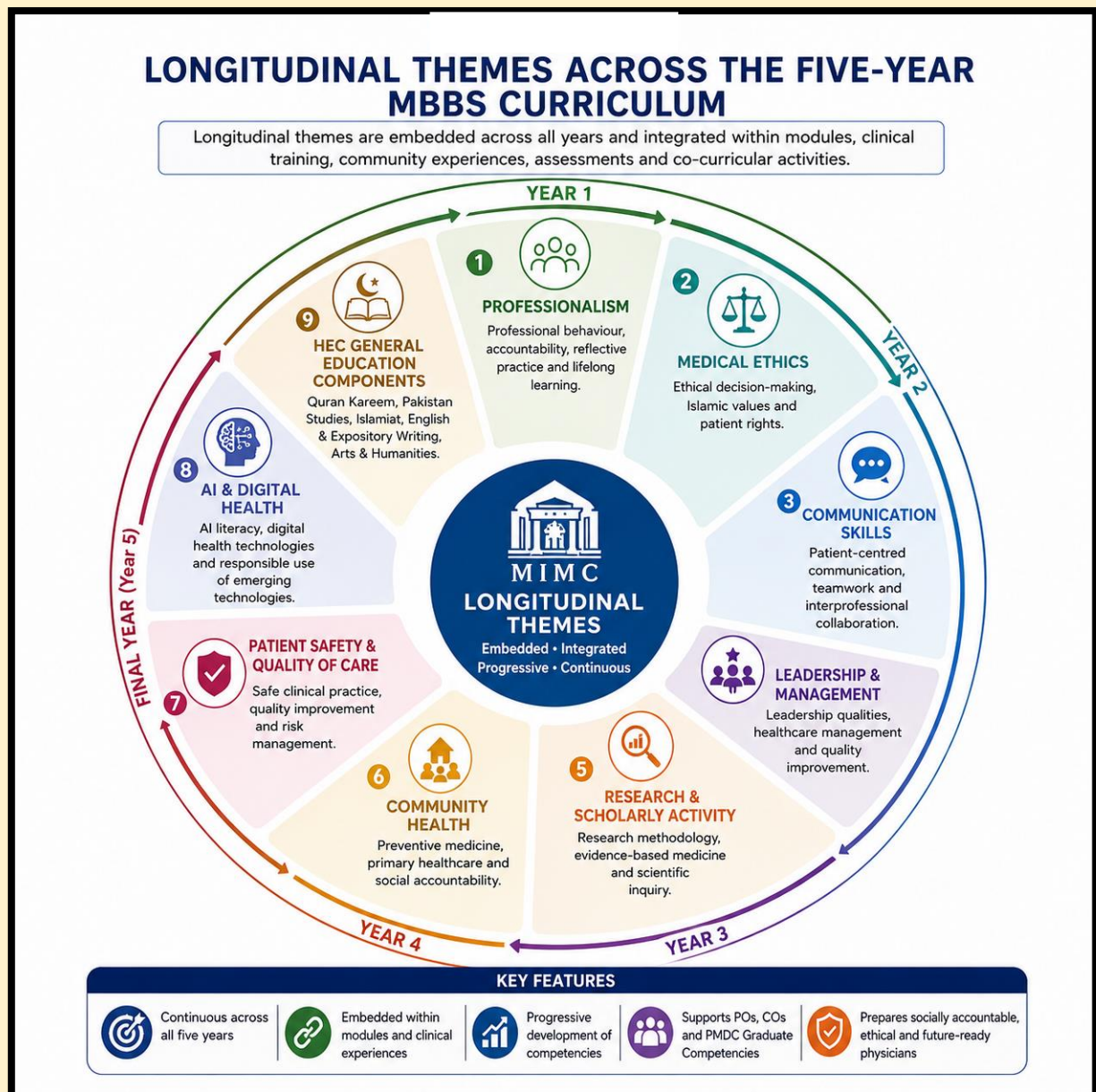


Figure 12. Longitudinal Themes Across the Five-Year MBBS Curriculum.

The longitudinal curriculum framework strengthens the integration of professional values, ethical practice, leadership, communication, research, digital competencies, and community engagement, thereby preparing graduates to meet the evolving healthcare needs of society while fulfilling the expectations of PMDC and MIMC.

CURRICULUM IMPLEMENTATION STRATEGY

The revised MBBS curriculum will be implemented through a planned, phased, and cohort-based strategy to ensure academic continuity, effective curriculum governance, and continuous quality improvement. Rather than replacing the existing curriculum simultaneously across all five academic years, implementation will occur progressively as each student cohort advances through the programme. This approach allows systematic curriculum refinement, faculty development, resource optimization, and continuous monitoring while maintaining uninterrupted academic progression.

Implementation commenced with the 2026 academic session, during which the fully integrated organ system-based modular curriculum was introduced in the first and second years. The curriculum will

subsequently progress into the third year (2027), fourth year (2028), and final year (2029), replacing the existing hybrid and traditional models. Upon completion of this phased transition, the MBBS programme will operate as a fully integrated, competency-based, organ system-based curriculum across all five academic years.

The DME, under the oversight of the Curriculum Committee and Academic Council, will coordinate curriculum implementation, monitor progress, evaluate outcomes, and recommend improvements based on stakeholder feedback and programme evaluation findings.

Table 8. Phased Curriculum Implementation Plan

Academic Session	Implementation Status
2026	Fully integrated modular curriculum implemented in Years 1 and 2
2027	Implementation extended to Year 3
2028	Implementation extended to Year 4
2029	Implementation extended to Final Year clinical clerkships
2030 onwards	Fully integrated five-year MBBS curriculum established

Key Principles Guiding Implementation

- Phased implementation based on student cohort progression.
- Continuous curriculum monitoring and periodic review.
- Faculty development before implementation in each academic year.
- Regular curriculum evaluation and stakeholder feedback.
- Continuous alignment with PMDC standards and institutional quality assurance mechanisms.

PHASED IMPLEMENTATION TIMELINE OF THE MIMC MBBS CURRICULUM (2026–2030)

The revised MBBS curriculum will be implemented sequentially as each cohort progresses, ensuring smooth transition towards a fully integrated five-year programme.

ACADEMIC SESSION	IMPLEMENTATION YEAR	CURRICULUM IMPLEMENTATION STATUS					KEY MILESTONES
 2026 Year 1 of Implementation	Launch Phase	Year 1 Integrated Modular Curriculum	Year 2 Integrated Modular Curriculum	Year 3 Hybrid Curriculum	Year 4 Hybrid Curriculum	Final Year (Year 5) Traditional Clinical Clerkships	- Integrated curriculum introduced in Years 1 & 2 - Faculty development and resource strengthening
 2027 Year 2 of Implementation	Expansion Phase I	Year 1 Integrated Modular Curriculum	Year 2 Integrated Modular Curriculum	Year 3 Integrated Modular Curriculum	Year 4 Hybrid Curriculum	Final Year (Year 5) Traditional Clinical Clerkships	- Integrated curriculum extended to Year 3 - Strengthening clinical integration and assessments
 2028 Year 3 of Implementation	Expansion Phase II	Year 1 Integrated Modular Curriculum	Year 2 Integrated Modular Curriculum	Year 3 Integrated Modular Curriculum	Year 4 Integrated Modular Curriculum	Final Year (Year 5) Traditional Clinical Clerkships	- Integrated curriculum extended to Year 4 - Advanced clinical skills and workplace learning
 2029 Year 4 of Implementation	Expansion Phase III	Year 1 Integrated Modular Curriculum	Year 2 Integrated Modular Curriculum	Year 3 Integrated Modular Curriculum	Year 4 Integrated Modular Curriculum	Final Year (Year 5) Integrated Clinical Clerkships	- Integrated curriculum extended to Final Year - Transition from traditional to integrated clerkships
 2030 and onwards (Sustained Phase)	Full Implementation Phase	Year 1 Fully Integrated Modular Curriculum	Year 2 Fully Integrated Modular Curriculum	Year 3 Fully Integrated Modular Curriculum	Year 4 Fully Integrated Modular Curriculum	Final Year Fully Integrated Modular Curriculum	- Fully integrated five-year MBBS programme established - Continuous quality improvement

GUIDING PRINCIPLES FOR SUCCESSFUL IMPLEMENTATION



Cohort-based phased implementation



Continuous monitoring and evaluation



Faculty development at every stage



Stakeholder feedback and curriculum review



Alignment with PMDC standards and QA system

Fully Integrated Modular Curriculum

Implementation in Progress

Upcoming Implementation

Hybrid Curriculum

Integrated Clinical Clerkships

Traditional Clinical Clerkships (to be phased out)



By 2030, MIMC will deliver a fully integrated, competency-based, organ system-based MBBS curriculum across all five years.

Figure 13. Phased Implementation Timeline of the MIMC MBBS Curriculum (2026–2030).

FIVE-YEAR MODULAR CURRICULUM FRAMEWORK

The five-year modular framework operationalizes the educational principles described earlier in this chapter and illustrates the organization, sequencing, and progressive integration of learning experiences across all five academic years. It translates the educational philosophy, curriculum design principles, and implementation strategy into a visual framework that guides curriculum delivery and future expansion.

The framework demonstrates the transition from a fully integrated organ system-based modular curriculum in the first and second years to a hybrid modular curriculum in the third and fourth years, culminating in clinical clerkships during the final year. Through phased implementation, this framework will progressively evolve into a fully integrated five-year MBBS curriculum.



The curriculum map also illustrates the distribution of organ-system modules, longitudinal themes, horizontal and vertical integration, and HEC-recommended general education components throughout the programme. Together, these elements ensure the progressive achievement of the POs, COs, and PMDC Graduate Competencies while maintaining continuity of learning across all academic years.

The modular curriculum framework serves as the institutional reference document for curriculum planning, module development, academic scheduling, teaching, assessment, and curriculum review. It also provides a common framework for faculty, students, curriculum committees, and regulatory bodies to understand the organization and future direction of the MBBS programme.

MOHI-UD-DIN ISLAMIC MEDICAL COLLEGE, MIRPUR AJK

MBBS PROGRAMME – FIVE-YEAR MODULAR CURRICULUM FRAMEWORK

Integrated • Competency-Based • Student-Centred • Community-Oriented

CURRICULUM AT A GLANCE

- 33 Integrated Academic Modules
- 7 HEC General Education Components
- 1 Horizontal (PRIME) Module
- Longitudinal Themes Across All Years
- Progressive Achievement of POs, COs & PMDC Competencies

ACADEMIC YEAR	YEAR 1 (Implemented in 2026)			YEAR 2 (Implemented in 2026)			YEAR 3 (Transition in 2027)			YEAR 4 (Transition in 2028)					FINAL YEAR (YEAR 5) (Transition in 2029)															
BLOCK	A	B	C	D	E	F	G	H	I	J	K	L	M1	M2	N	O	P	Q												
MODULE NAME	Foundation I ----- Blood I	Musculoskeletal I ----- Respiratory I	Cardiovascular I ----- Respiratory I	Gastrointestinal Tract I ----- Renal I	Neurosciences IA ----- Neurosciences IB	Endocrine I ----- Reproductive I	Foundation II ----- Infection & Inflammation II	Multisystem I ----- Blood & Immunology II Musculoskeletal II	Cardiovascular II ----- Respiratory II	Neurosciences II ----- Gastrointestinal Tract & Hepatobiliary II	Renal II ----- Endocrine & Reproductive II	Ear, Nose & Throat ----- Ophthalmology	Foundation III ----- Blood & Immunology III Musculoskeletal III	Cardiorespiratory III ----- Endocrine & Reproductive III	Renal III ----- Endocrine & Reproductive III	Neurosciences III ----- Gastrointestinal Tract & Hepatobiliary III Multisystem III														
ABBREVIATION	FND-I BLD-I	MSK-I	CVS-I RES-I	GIT-I REN-I	NS-IA NS-IB	END-I REP-I	FND-II INF-II	MTS-I BLD-II MSK-II	CVS-II RES-II	NS-II	GIT-II	REN-II END-REP-II	ENT	EYE	FND-III BLD-III MSK-III	CRS-III	REN-III END-REP-III	NS-III GIT-III MTS-III												
COURSE CODE	MB1-A-FND-I-01 MB1-A-BLD-I-02	MB1-B-MSK-I-03	MB1-C-CVS-I-04 MB1-C-RES-I-05	MB2-D-GIT-I-06 MB2-D-REN-I-07	MB2-E-NS-IA-08 MB2-E-NS-IB-09	MB2-F-END-I-10 MB2-F-REP-I-11	MB3-G-FND-II-12 MB3-G-INF-II-13	MB3-H-MTS-I-14 MB3-H-BLD-II-15 MB3-H-MSK-II-16	MB3-I-CVS-II-17 MB3-I-RES-II-18	MB4-J-NS-II-19	MB4-K-GIT-II-20	MB4-L-REN-II-21 MB4-L-END-REP-II-22	MB4-M1-ENT-23	MB4-M2-EYE-24	MBS-N-FND-III-25 MBS-N-BLD-III-26 MBS-N-MSK-III-27	MBS-O-CRS-III-28	MBS-P-REN-III-29 MBS-P-END-REP-III-30	MBS-Q-NS-III-31 MBS-Q-GIT-III-32 MBS-Q-MTS-III-33												
HORIZONTAL (PRIME) MODULE	PRIME Horizontal Module – longitudinal integration of themes across all years (Professionalism, Ethics, Communication, Leadership, Research, Community Health, Patient Safety, Digital Health, AI & Lifelong Learning)														HZM		MB-PRIME-HZM-34													
ADDITIONAL COMPONENTS (HEC GENERAL EDUCATION)	Quran Kareem ----- QRN MB-A-QRN-36			Pakistan Studies / Islamiat ----- PST/ISL MB-D-PST-ISL-37			English Expository Writing ----- ENW MB-G-ENW-38			Arts & Humanities ----- ARH MB-J-ARH-39			AI ----- AI MB-K-AI-40			Clerkship, Electives, Observer ship ----- CEO MB-N-CEO-35														
LONGITUDINAL THEMES (ACROSS ALL YEARS)	Professionalism		Medical Ethics & Islamic Values		Communication Skills		Leadership & Maangement		Research & Scholarly Activity		Community Health & Social Accountability		Patient Safety & Quality Improvement		Artificial Intelligence & Digital Health															
INTEGRATION	Horizontal Integration within modules (Anatomy, Physiology, Biochemistry, Pathology, Pharmacology, etc.)			Vertical Integration across years (Linking basic sciences with clinical sciences)			Early Clinical Exposure & Community-Based Learning integrated into relevant modules			Clinical Skills, PSL, SDL & Case-Based Learning across the curriculum			Workplace-Based Learning in hospitals & community settings with supervised patient care																	
ASSESSMENT APPROACH	2026 FULLY IMPLEMENTED Years 1 & 2						2027 TRANSITION PHASE Implementation Extended to Year 3						2028 TRANSITION PHASE Implementation Extended to Year 4						2029 TRANSITION PHASE Implementation Extended to Final Year						2030 ONWARDS FULLY INTEGRATED FIVE-YEAR MBBS CURRICULUM					
OUR GRADUATES WILL BE ...	Competent Clinicians Ethical Professionals Effective Professionals Effective Communicators Community Oriented Lifelong Learners Leaders & Change Makers Research-Informed Digitally Literate Socially Accountable										ALIGNMENT PMDC MBBS Curriculum 2024 PMDC Graduate Competency Framework HEC Undergraduate Education Policy MIMC Vision, Mission & Values						ABBREVIATIONS (FOR MODULES) FND – Foundation BLD – Blood MSK – Musculoskeletal CVS – Cardiovascular RES – Respiratory INF – Infection AI – Artificial Intelligence CEO – Clerkship, Electives, Observership GIT – Gastrointestinal Tract REN – Renal NS – Neurosciences END – Endocrine REP – Reproductive CRS – Cardiorespiratory HZM – Horizontal Module													

* PRIME (HZM) and HEC components run across all five years and are embedded within modules, clinical training, assessments and co-curricular activities.

INTEGRATED LEARNING. COMPASSIONATE CARE. COMMUNITY IMPACT.

Approved by Academic Council, MIMC
Curriculum Cycle: Annual Review | Comprehensive Review: Every 5 Years

Figure 14. Five-Year MBBS Modular Curriculum Framework (Master Curriculum Map)

CHAPTER 5

CURRICULUM CONTENT AND MODULAR ORGANIZATION

Overview

The MBBS curriculum at MIMC, is organized as a five-year integrated, organ system–based modular programme developed following comprehensive programme evaluation and curriculum revision. The revised curriculum aligns with the PMDC MBBS Curriculum 2024 and is designed to produce competent, ethical, research-oriented, and socially accountable medical graduates capable of addressing contemporary healthcare needs.

The curriculum adopts an organ system–based modular structure that promotes integration of biomedical sciences, clinical sciences, behavioural sciences, community medicine, and professional development throughout the programme. Learning experiences are organized around body systems and common clinical problems rather than isolated academic disciplines, thereby facilitating meaningful learning, clinical reasoning, and progressive competency development.

Each module is designed around clearly defined learning outcomes that are aligned with the PO and COs of the MBBS programme. Teaching, learning, and assessment activities within each module are similarly aligned to ensure constructive alignment and achievement of expected graduate competencies.

Year 1 (APPENDIX 1-5)

Laying the Foundation of Normal Structure and Function

The first year is dedicated to establishing a robust understanding of the normal human body. It begins with Foundation-I, which provides the essential language of medicine (anatomy, histology, embryology) and core biochemical principles. This is immediately applied to the Blood-I module, a self-contained system ideal for introducing core physiological and biochemical concepts. The curriculum then progresses to the Musculoskeletal (MSK-I) system, which is tangible and fundamental to physical examination. The year concludes with the Cardiovascular (CVS-I) and Respiratory (RES-I) systems, two vital, interconnected systems that are high-prevalence in clinical practice. This sequence allows students to master the "normal" before encountering the "abnormal" in subsequent years.

Block A: Foundation-I and Blood-I

- **Foundation-I:** Provides the essential knowledge of human anatomy, histology, and embryology necessary for understanding subsequent medical subjects.
- **Blood-I:** Covers fundamental concepts in hematology, including blood cell formation and common blood disorders.

Block B: MSK-I

- **MSK-I:** Focuses on the musculoskeletal system, including detailed study of bones, muscles, and joints, along with common musculoskeletal disorders.

Block C: CVS-I and RES-I

- **CVS-I:** Introduces cardiovascular anatomy and physiology, addressing basic cardiovascular diseases.
- **RES-I:** Covers respiratory system anatomy, physiology, and common respiratory conditions.

Horizontal Subject: Quran Kareem

Introducing Quran Kareem in the first year provides an ethical and spiritual foundation at the very outset of the medical journey. It helps shape the professional identity of the students, instilling values of compassion, integrity, and service before they are exposed to the ethical challenges of clinical practice.

Year 2 (APPENDIX 6-11)

Mastering Core Systems and Introducing Neuroscience

The second year delves into more complex regulatory and integrative systems. Neurosciences is placed here due to its complexity, requiring a solid foundational knowledge from Year 1. It is split into two parts (1A & 1B) to allow for deep, manageable learning. The Gastrointestinal (GIT-I) and Renal-I modules are paired as they are central to metabolism, nutrition, and homeostasis. The year concludes with the Endocrine (Endo-I) and Reproductive (Repro-I) systems, which control and coordinate bodily functions. This block teaches students how the body maintains internal balance and reproduces itself, completing the picture of core organ system physiology.

Block D: GIT-I and Renal-I

- **GIT-I:** Study of the gastrointestinal system's anatomy, physiology, and common diseases.
- **Renal-I:** Introduces renal anatomy, physiology, and common disorders.

Block E: Neurosciences 1A and 1B

- **Neurosciences 1A:** Basics of neuroanatomy and neurophysiology.
- **Neurosciences 1B:** Builds on foundational knowledge with advanced topics in neurological disorders.

Block F: Endo-I and Repro-I

- **Endo-I:** Covers endocrine glands, hormone functions, and related disorders.
- **Repro-I:** Focuses on the reproductive system's anatomy and physiology, including common health issues.

Horizontal Subjects: Pak-Study / Islamiate

Pak-Study and Islamiate in the second year foster a sense of civic responsibility and cultural context. As students' scientific knowledge deepens, these courses help them understand the societal and ethical framework in which they will practice medicine in Pakistan.

Year 3 (APPENDIX 12-18)

Transition to Pathology and Multisystem Integration

Year 3 marks the critical transition from "normal" to "abnormal." It begins by revisiting foundational sciences in Foundation-II, but now through the lens of pathology, microbiology, and pharmacology—the core tools for understanding disease. Infection & Inflammation-II provides a fundamental mechanism of disease that cuts across all organ systems. The curriculum then systematically revisits systems from Years 1 and 2 (e.g., Blood-II, MSK-II, CVS-II, RES-II), but now with a focus on their pathological states. The introduction of Multisystem-I is key here, training students to think beyond single-organ diseases and understand complex, interconnected conditions.

Block G: Foundation-II and Infection & Inflammation-II

- **Foundation-II:** Expands on foundational knowledge with integrated learning across various systems.
- **Infection & Inflammation-II:** Delves into infectious diseases and inflammatory processes.

Block H: Multisystem-I, Blood & Immunology-II, and MSK-II

- **Multisystem-I:** Examines diseases affecting multiple organ systems.
- **Blood & Immunology-II:** Advanced study in hematology and immunology, including complex disorders.
- **MSK-II:** Continuation of musculoskeletal system study with focus on advanced conditions.

Block I: CVS-II and RES-II

- **CVS-II:** Advanced study of cardiovascular diseases and management.
- **RES-II:** Further exploration of respiratory conditions and diagnostic strategies.

Horizontal Subject: English Expository Writing

English Expository Writing is strategically placed in the third year as students begin preparing for clinical rotations. Effective written communication is essential for writing accurate patient histories, referrals, and eventually, research proposals. This skill is honed just before they need to apply it in clinical settings.

Year 4 (APPENDIX 19-24)

Advanced System Pathology and Specialized Disciplines

The fourth year focuses on advanced pathology and the introduction of specialized clinical disciplines. Systems are revisited at a deeper, more complex level (e.g., Neurosciences-II, GIT & Hepatobiliary-II), focusing on intricate diseases and their management. This is the point where disciplines like ENT and Ophthalmology (EYE) are introduced. These are sensory, organ-specific specialties that require the integrated basic science knowledge from earlier years but are best taught after the student has a firm grasp of systemic pathology.

Block J: Neurosciences-II

- **Neurosciences-II:** Advanced study in neurological disorders and brain functions.

Block K: GIT & Hepatobiliary - II

- **GIT & Hepatobiliary - II:** Focuses on complex diseases of the gastrointestinal and hepatobiliary systems.

Block L: Renal-II and Endo & Repro-II

- **Renal-II:** Advanced renal pathology and treatments.
- **Endo & Repro-II:** Detailed study of endocrine and reproductive disorders with clinical applications.

Block MI: ENT and Horizontal Module

- **ENT:** Study of ear, nose, and throat disorders.
- **Horizontal Module:** Integrates knowledge from various disciplines to address complex cases.

Block M2: EYE

- **EYE:** Covers ocular anatomy, diseases, and treatments.

Horizontal Subject: Arts & Humanities

Placing Arts & Humanities in the fourth year is a masterstroke of curriculum design. As students are immersed in complex disease and high-stakes clinical specialties, this course provides a crucial counterbalance. It nurtures empathy, resilience, and the ability to see the patient as a person with a story, not just a collection of symptoms, directly preparing them for the humanistic challenges of the Final Year clerkships.

Final Year (APPENDIX 25-33)

Clinical Synthesis and Preparation for Practice

The Final Year is the apex of the spiral curriculum, dedicated to synthesis and mastery. All major systems are revisited in their most advanced form (designated as -III), requiring students to integrate all prior knowledge to manage complex, real-world cases. Foundation-III represents a final consolidation of core medical sciences for clinical decision-making. The PRIME horizontal module is the ultimate integrative experience, forcing students to solve problems that cut across all disciplines, mirroring the reality of medical practice.

Block N: Foundation-III, Blood & Immunology-III, and MSK-III

- **Foundation-III:** Comprehensive review and integration of foundational knowledge.
- **Blood & Immunology-III:** Advanced study of hematologic and immunologic disorders.
- **MSK-III:** Focus on complex musculoskeletal conditions.

Block O: Cardiorespiratory-III

- **Cardiorespiratory-III:** Advanced study of cardiovascular and respiratory diseases.

Block P: Renal-III and Endo & Repro-III

- **Renal-III:** Detailed study of advanced renal disorders.
- **Endo & Repro-III:** Comprehensive coverage of endocrine and reproductive health.

Block Q: Neurosciences-III, GIT & Hepatobiliary-III, and Multisystem-III

- **Neurosciences-III:** Advanced study of neurological conditions.
- **GIT & Hepatobiliary-III:** Detailed exploration of gastrointestinal and hepatobiliary disorders.
- **Multisystem-III:** Integration of multisystem diseases with a focus on complex patient management.

THE DETAILS OF CONTENTS OF EACH MODULE, ALONG WITH LOs, TEACHING METHODOLOGIES, ASSESSMENT STRATEGIES AND TEACHING HOURS ARE GIVEN IN THEIR RESPECTIVE STUDY GUIDES ATTACHED AS APPENDICES 1-34

SUBJECT-WISE COURSE CONTENT

The MBBS curriculum at MIMC follows the curriculum framework, syllabus, and academic regulations prescribed by the PMDC and Bahria University. The curriculum encompasses pre-clinical, para-clinical, and clinical disciplines distributed across the five academic years of the MBBS program. Subject content, learning outcomes, instructional strategies, assessment methods, and recommended learning resources are aligned with the study guides and assessment blueprints developed and approved by Bahria University to ensure standardization and compliance with national academic standards.

Detailed course specifications for each subject include course rationale descriptions, learning objectives, learning outcomes, module contents, teaching and learning methods, assessment strategies, recommended references, and credit/hour allocations. These course documents collectively cover all disciplines taught during the five years of the MBBS program, including basic medical sciences, pathobiological sciences, clinical sciences, community health sciences, and longitudinal themes. As these course specifications constitute an extensive set of academic documents, the complete subject-wise study guides and course outlines are provided separately as appendices/supporting documents accompanying this curriculum manual.

Course Title: Anatomy

Course hours: 709

Rational

Anatomy provides the structural foundation for understanding the human body and serves as the basis for clinical examination, diagnosis, imaging interpretation, and surgical practice. Knowledge of normal human structure and development enables students to understand anatomical variations, congenital anomalies, and the structural basis of disease.

Course Description:

This course aims to provide a comprehensive understanding of human anatomy by exploring the morphology and functional aspects of the human body. It covers the normal structure and function of the body and examines the implications of deviations from these norms. Students will engage with online multimedia resources, lectures, and practical sessions, including dissection, specimen examination, and model studies. The course equips students with the essential anatomical knowledge and skills needed for a career in healthcare.

Objectives

By the end of the course, students will be able to:

1. Develop an understanding of organ structure, position, orientation, and their interrelationships.
2. Recognize variations in organ structure based on individual differences, sex, and age.
3. Establish connections between gross and microscopic structures and their clinical implications.
4. Acquire detailed knowledge of cell, tissue, and organ structures.
5. Identify components of various systems, including their innervations, blood supply, and lymphatics, and understand their clinical relevance.
6. Describe basic embryological processes involved in the development of body systems.
7. Classify and explain structural variations and anomalies in relation to embryonic development.
8. Identify the osteology of the human skeleton using gross specimens and medical imaging, and list the clinical applications of imaging techniques such as X-ray, CT, MRI, and ultrasound.

Outcomes

Upon completion of this course, students will be able to:

1. Utilize essential anatomical terminology to describe body structures and their relationships.
2. Outline the origins, courses, and distributions of blood vessels, nerves, and lymphatics, along with their clinical implications.
3. Apply knowledge of gross anatomy to understand related pathologies.
4. Explain the topographic anatomy of bones, muscles, and joints, and address common musculoskeletal conditions such as fractures and dislocations.
5. Use dissection and specimen study skills to learn surgical procedures.
6. Map organ topography onto the body surface and interpret relevant clinical presentations.
7. Describe the nervous system's basic structure and functions, and identify gross lesions based on clinical deficits.
8. Analyze light microscopic structures of bodily systems and predict functional outcomes of structural alterations.
9. Correlate embryological principles with congenital anomalies and their clinical manifestations.
10. Apply anatomical knowledge to physical diagnosis, radiologic findings, and invasive procedures.
11. Demonstrate effective communication skills and professional behavior, adhering to ethical standards.

Textbooks & References:

1. *Gross Anatomy* by K.L. Moore
2. *Clinically Oriented Anatomy* by Richard Snell
3. *Last's Anatomy: Regional and Applied*
4. *Gray's Anatomy*
5. *Neuroanatomy* by Richard Snell
6. *Health Wheather's Functional Histology* by Young J.W.
7. *The Developing Human* by Keith L. Moore
8. *Langman's Medical Embryology*
9. *Netter Atlas*

10. *Basic Histology* by Laiq Hassan
11. *Atlas of Histology* by Difore

Course Title: Physiology

Course hours: 512

Rational

Physiology develops an understanding of normal body functions and the mechanisms that maintain homeostasis. It provides the scientific basis for understanding disease processes, clinical manifestations, and therapeutic interventions encountered in medical practice.

Course Description:

Physiology is a fundamental scientific discipline crucial for understanding normal body functions and their deviations in disease states. Taught in the 1st and 2nd years of MBBS and BDS programs, the course combines lectures and practical work to provide insights into how the body functions. Practical sessions are conducted in batches under the supervision of faculty members assigned by the chairperson of physiology.

Objectives

By the end of the course, students will be able to:

1. Evaluate, analyze, and apply physiological knowledge.
2. Interpret concepts of homeostasis and control mechanisms.
3. Describe cell functions at the ionic and molecular levels.
4. Explain organ system functions and their clinical relevance.
5. Discuss integrated body responses to various challenges.

Outcomes

Upon completion, students should:

1. Have a deep understanding of human physiology.
2. Comprehend the functions of major physiological systems, including cardiovascular, respiratory, renal, reproductive, and metabolic systems.
3. Understand how these systems interact to produce integrated physiological responses and their potential failures.
4. Perform, analyze, and report on physiological experiments and observations.
5. Recognize and identify the principles of tissue structures.

Textbooks & References:

1. *Medical Physiology* by Guyton and Hall
2. *Review of Medical Physiology* by W. Ganong
3. *Essentials of Physiology* by Laurle Sherwood
4. *Physiological Anatomy* by Elaine N. Marieb

Course Title: Biochemistry

Course hours: 262

Rational

Biochemistry explains the molecular and cellular processes that sustain life and underlie health and disease. The subject provides essential knowledge for understanding metabolism, genetics, molecular medicine, and the biochemical basis of clinical disorders.

Course Description:

Biochemistry examines the chemical processes and substances that occur within living organisms. It encompasses metabolism, which involves the breakdown of substances to release energy and the synthesis of complex molecules necessary for life. This course explores enzymatic actions, genetic influences on biochemical processes, and the relevance of biochemistry in medicine, nutrition, and genetics.

Objectives

By the end of the course, students will:

1. Understand the molecular mechanisms within living cells.
2. Comprehend the principles governing macromolecule structures.
3. Grasp the principles and mechanisms of metabolic control and molecular signaling.
4. Study the metabolism of carbohydrates, proteins, and lipids.
5. Explore the role of DNA in genetic information.
6. Understand cell proliferation control.
7. Learn the principles of bioenergetics and enzyme catalysis.
8. Apply basic laboratory skills to obtain reproducible biochemical data.

Outcomes

Students who complete this course will:

1. Demonstrate a broad understanding of introductory biochemistry concepts.
2. Analyze the structural-functional relationships of genes and proteins.
3. Explain the synthesis of proteins, lipids, nucleic acids, and carbohydrates, and their roles in metabolic pathways.
4. Identify potential laboratory hazards and use appropriate safety techniques.
5. Apply modern instrumentation theory and practice to biochemical problems.
6. Observe safe laboratory practices and adhere to proper procedures for chemical use and disposal.
7. Communicate biochemical concepts and experimental findings effectively, both in writing and orally.

Textbooks & References:

1. *Harper's Illustrated Biochemistry*
2. *Lippincott's Biochemistry* by Denise Ferrier
3. *Textbook of Biochemistry* by M.N. Chatterjee
4. *Essentials of Biochemistry* by Pankaj Naik

Course title: Pathology

Course hours: 505

Rationale

Pathology serves as the bridge between basic and clinical sciences by explaining the causes, mechanisms, and consequences of disease. It enables students to understand pathological changes and correlate them with clinical manifestations and diagnostic investigations.

Course Description:

Pathology is integral to understanding medicine and surgery, covering the fundamentals of disease processes. This course delves into the basis of diseases, including their causes, signs, symptoms, investigations, and prognosis. The curriculum includes four sections: microbiology, hematology, histopathology, and chemical pathology. Students will enhance their diagnostic skills and communication through class presentations and receive guidance on research interests.

Objectives:

By the end of the course, students will:

- Understand disease mechanisms, clinical features, and pathophysiology.
- Interpret investigations based on clinical history.
- Grasp genetic and molecular disease bases and neoplastic disorders.
- Learn about microorganisms and related diseases.

Outcomes:

Students who complete this course will:

- Comprehend inflammatory disorders, microbiology, hemodynamics, immunology, and neoplasia.
- Understand disease pathophysiology, including genetics and clinical features.
- Classify leukemias, lymphomas, and tumors.
- Perform, analyze, and report tests.
- Identify microscopic disease features.

Textbooks & References:

1. Kumar V, Abbas AK, Aster JC. *Robbins Basic Pathology*. 9th ed. Elsevier; 2013.
2. Levinson W. *Review of Medical Microbiology & Immunology*. 14th ed. McGraw-Hill; 2016.
3. Hoffbrand AV, Moss PAH. *Essential Hematology*.

Course title: Pharmacology

Course hours: 302

Rationale

Pharmacology prepares students for the safe, effective, and rational use of medicines in clinical practice. Knowledge of pharmacological principles is essential for evidence-based prescribing and optimizing patient outcomes.

Course Description:

Pharmacology explores medication mechanisms, classifications, therapeutic uses, and side effects. Students learn drug administration principles, dosage calculations, and precautions. The course enhances clinical practice through tests, assignments, and group work, and introduces research on drug effects.

Objectives:

By the end of the course, students will:

- Describe drug mechanisms at various levels.
- Understand drug receptor interactions.
- Explain cellular signaling and drug metabolism.
- Implement practical pharmacology exercises.
- Introduce research basics in pharmacology.

Outcomes:

Students who complete this course will:

- Explain drug mechanisms, clinical implications, and side effects.
- Clarify pharmacokinetics and pharmacodynamics.
- Apply pharmacological principles clinically.
- Evaluate herbal medications' benefits and risks.
- Discuss toxicology principles and patient poisoning management.

Textbooks & References:

1. Katzung BG. *Basic and Clinical Pharmacology*. 14th ed.
2. Lippincott Illustrated Reviews of Pharmacology. 7th ed.
3. Goodman & Gilman's *The Pharmacological Basis of Therapeutics*. 13th ed.
4. Shahnawaz M. *Essentials of Pharmacology*. 9th ed.
5. Rang HP, Dale MM. *Rang & Dale's Pharmacology*. 1st ed.

Course title: Forensic Medicine & Toxicology

Course hours: 211

Rationale

Forensic Medicine and Toxicology equip future physicians with an understanding of medico-legal responsibilities, injury documentation, poisoning, and causes of death. The subject ensures that graduates can fulfill their legal and ethical obligations in medical practice.

Course Description:

This course addresses medico-legal issues, including documentation and court testimony related to injuries and death. It connects law and medicine, preparing students for roles in legal investigations and forensic analysis.

Objectives:

By the end of the course, students will:

- Define and classify Pakistan's legal system, including medico-legal roles.
- Discuss personal identity, death, injuries, and forensic sexology.
- Differentiate death causes and manage toxicology cases.
- Prepare medico-legal certificates and court attendance.

Outcomes:

Students who complete this course will:

- Maintain medical professionalism and provide court testimony.
- Identify and report causes of death and injuries.
- Perform scientific autopsies and manage sexual crimes.
- Differentiate true and feigned insanity and manage forensic analyses.

Textbooks & References:

1. Knight B. *Simpson's Forensic Medicine*. 11th ed. Edward Arnold.
2. Parikh CK. *Textbook of Medical Jurisprudence, Forensic Medicine & Toxicology*. 6th ed. CBS Publisher.
3. Awan NR. *Principles and Practice of Forensic Medicine*.
4. Vij K. *Textbook of Forensic Medicine & Toxicology*. 4th ed.
5. Dikshit PC. *Textbook of Forensic Medicine & Toxicology*.
6. Rao GK. *Textbook of Forensic Medicine*.

Course title: Community Medicine

Course hours: 206

Rationale

Community Medicine emphasizes disease prevention, health promotion, epidemiology, and healthcare delivery at the population level. The subject prepares students to address community health needs and contribute to improving public health outcomes.

Course Description:

Community Medicine introduces public health principles, including health protection, improvement, and systems. Students gain experience through lectures, discussions, field visits, and a group research project, contributing to publishable papers and engaging in health system evaluations.

Objectives:

By the end of the course, students will:

- Understand community health problems and solutions.
- Apply social and preventive medicine concepts.
- Learn biostatistics principles and apply them.
- Conduct independent research and practice evidence-based medicine.
- Address ethical issues in medical practice.

Outcomes:

Students who complete this course will:

- Explain health terms and disease history.
- Describe disease epidemiology and healthcare systems.
- Apply biostatistics and solve related problems.
- Design and execute research and apply ethical principles.

Textbooks & References:

1. Park K. *Park's Textbook of Preventive and Social Medicine*. 24th ed.
2. Ansari IS. *Public Health and Community Medicine*. 8th ed.
3. Maxcy-Rosenau-Last. *Public Health and Preventive Medicine*.
4. Gordis L. *Epidemiology*.
5. Kuzma JW. *Basic Statistics for Health Sciences*.

Course title: Medicine

Course hours: 602

Rationale

Medicine is a core clinical discipline that develops students' ability to diagnose, manage, and prevent adult medical conditions. It integrates scientific knowledge with clinical reasoning and evidence-based patient care.

Course Description:

Medicine focuses on adult patient care, from health to complex illness. The course spans from basic to advanced levels, involving bedside teaching, patient interactions, history-taking, and physical examinations. Emphasis is placed on compassionate, evidence-based care.

Objectives:

By the end of the course, students will:

- Understand and apply medical knowledge to clinically ill.
- Analyze and identify learning gaps.
- Provide compassionate, evidence-based care.
- Uphold professional standards and ethical principles.
- Communicate effectively.

Outcomes:

Students who complete this course will:

- Demonstrate medical knowledge and apply it clinically.
- Integrate medicine knowledge into patient care.

- Identify learning gaps and pursue professional development.
- Engage in scholarly activities and provide patient-centered care.
- Perform diagnostic procedures and establish management plans.

Textbooks & References:

1. Davidson's *Principles and Practice of Medicine*.
2. Kumar & Clark. *Medicine*.
3. *Oxford Textbook of Medicine*.
4. Talley NJ. *Clinical Examination*.
5. Macleod J. *Macleod's Clinical Examination*.

Course Title: Pediatrics

Course hours: 301

Rationale

Pediatrics addresses the healthcare needs of infants, children, and adolescents, recognizing their unique developmental and physiological characteristics. The subject promotes child health, disease prevention, and effective management of pediatric illnesses.

Course Description: Pediatrics involves medical care for individuals under 18 years, including neonates, infants, children, and adolescents. Teaching pediatrics is crucial due to the vulnerability of this population. The subject covers a range from acute disorders to chronic diseases, preventive pediatrics, and nutrition. Effective teaching aims to improve health outcomes in children by reducing morbidity, mortality, and preventing communicable diseases.

Objectives:

By the end of the course, students will:

1. Explain core concepts of growth and development and pediatric disorders using evidence-based guidelines.
2. Utilize knowledge in various clinical settings, including emergencies.
3. Develop history-taking and communication skills for dealing with this age group.
4. Demonstrate clinical examination skills.
5. Perform clinical procedures safely.
6. Describe health maintenance and preventive care for children, including nutrition and vaccination.
7. Cultivate rational thinking and engage students in research activities.
8. Instill values of medical ethics and morality.

Outcomes:

By the end of the program, students should be able to:

1. Demonstrate an in-depth understanding of important pediatric diseases.
2. Differentiate between normal and diseased states in this age group.
3. Develop management plans for common pediatric ailments.
4. Practice evidence-based medicine for pediatric conditions.
5. Analyze data and formulate differential diagnoses.
6. Identify pediatric emergencies and provide basic care.
7. Demonstrate skills in history-taking and clinical examination.
8. Counsel families and provide psychosocial support.
9. Perform clinical procedures.
10. Conduct research activities.
11. Apply principles of medical ethics.

Textbooks & References:

1. Nelson Textbook of Pediatrics
2. Basis of Pediatrics by Pervaiz Akbar
3. Clinical Methods by Wayne Harris
4. Neonatology by Tricia Lacy Gomella

Course Title: Psychiatry

Course hours: 156

Rationale

Psychiatry highlights the importance of mental health in overall wellbeing and healthcare delivery. The subject enables students to recognize common psychiatric disorders and appreciate the psychosocial dimensions of patient care.

Course Description: Psychiatry is a vital specialty dealing with mental health, crucial for overall well-being. With about 14% of the global disease burden attributed to neuropsychiatric disorders, this course provides insights into effectively managing psychiatric patients.

Objectives

By the end of the course, students will be able to:

1. Explain the principles of normal and abnormal human behaviour and common psychiatric disorders.
2. Conduct a focused psychiatric history and mental status examination.
3. Recognize and differentiate common psychiatric illnesses encountered in primary and secondary healthcare settings.
4. Develop an initial management plan for patients presenting with common mental health conditions, including appropriate referral when indicated.
5. Demonstrate effective communication, empathy, confidentiality, and professionalism while interacting with patients and their families.
6. Apply ethical, legal, and psychosocial principles in the assessment and management of psychiatric patients.
7. Appreciate the importance of multidisciplinary care, rehabilitation, and community-based mental health services.
8. Promote mental health awareness, early identification, and prevention of mental illness within the community.

Outcomes

Students who complete this course will be able to:

1. Perform a structured psychiatric history and mental status examination.
2. Identify common psychiatric disorders using appropriate diagnostic principles.
3. Formulate differential diagnoses and initial management plans for common mental health conditions.
4. Recognize psychiatric emergencies and initiate appropriate first-line management and referral.
5. Demonstrate effective communication, empathy, and professionalism while caring for patients with mental illness.
6. Apply ethical and legal principles relevant to psychiatric practice.
7. Educate patients and families regarding mental health promotion, treatment adherence, and stigma reduction.
8. Collaborate effectively with multidisciplinary healthcare professionals in the management of psychiatric patients.

Textbooks & References:

1. Oxford Textbook of Medicine
2. Kumar and Clark's Medicine
3. Davidson's Principles and Practice of Medicine
4. Behavioral Science by Prof. Mowadat H Rana
5. Oxford Textbook of Psychiatry
6. Macleod's Clinical Examination
7. Nicholas Talley's Clinical Examination

Course Title: Surgery

Course hours: 603

Rationale

Surgery provides the scientific knowledge, clinical reasoning, and procedural skills required for the assessment and management of patients with surgical diseases, trauma, and emergencies. The course prepares students to evaluate surgical patients, formulate differential diagnoses, interpret relevant investigations, participate in perioperative care, recognize life-threatening conditions, and apply principles of patient safety, professionalism, and evidence-based surgical practice. Through integrated classroom teaching, clinical clerkships, operating theatre exposure, and supervised bedside learning, students develop the competencies required for safe and effective surgical practice.

Course Description: This longitudinal course spans the clinical years of the MBBS programme and provides comprehensive exposure to the principles and practice of general surgery and selected surgical specialties. Students learn the evaluation and management of common surgical conditions, trauma, acute surgical emergencies, perioperative care, wound management, surgical infections, fluid and electrolyte balance, oncology, and basic operative principles. Clinical learning occurs through ward rounds, outpatient clinics, operating theatre observation, bedside teaching, skills laboratory sessions, case discussions, and supervised clinical practice.

Objectives:

By the end of the course, students will be able to:

1. Apply the principles of surgical anatomy, pathology, and physiology in the assessment and management of common surgical conditions.
2. Obtain a comprehensive surgical history and perform a focused physical examination for patients presenting with surgical diseases and trauma.
3. Formulate differential diagnoses and appropriate investigation plans using evidence-based clinical reasoning.
4. Recognize and initiate the management of common surgical emergencies, including trauma, acute abdomen, gastrointestinal bleeding, and shock.
5. Explain the principles of perioperative patient care, including preoperative assessment, postoperative management, pain control, and prevention of complications.
6. Demonstrate knowledge of wound healing, surgical infections, aseptic techniques, infection prevention, and rational antimicrobial use.
7. Observe and understand the indications, principles, and complications of commonly performed surgical procedures, including appendicectomy, cholecystectomy, hernia repair, haemorrhoidectomy, hydrocelectomy, and emergency surgical interventions.
8. Interpret commonly used laboratory investigations and imaging studies relevant to surgical diagnosis and patient management.
9. Demonstrate effective communication, professionalism, teamwork, and ethical decision-making while caring for surgical patients.

10. Apply principles of patient safety, quality improvement, and evidence-based practice in surgical care.

Outcomes

Students who complete this course will be able to:

1. Perform a systematic surgical history and focused physical examination.
2. Develop differential diagnoses and initial management plans for common surgical conditions.
3. Recognize surgical emergencies and initiate timely stabilization and referral.
4. Interpret common laboratory and imaging investigations relevant to surgical practice.
5. Demonstrate competence in basic surgical skills, including aseptic technique, wound care, dressing, suturing, and knot tying under supervision.
6. Participate safely and effectively in perioperative patient care.
7. Apply evidence-based principles in the prevention and management of surgical infections and postoperative complications.
8. Communicate effectively with patients, families, and multidisciplinary healthcare teams regarding surgical care.
9. Demonstrate professionalism, ethical practice, patient safety, and respect for patient dignity in all surgical settings.
10. Integrate clinical knowledge, procedural skills, and professional attitudes required for safe undergraduate surgical practice.

Textbooks & References

1. Bailey & Love's Short Practice of Surgery (Latest Edition)
2. Schwartz's Principles of Surgery (Latest Edition)
3. Sabiston Textbook of Surgery (Latest Edition)
4. Kirk's General Surgical Operations (Latest Edition)
5. Farquharson's Textbook of Operative Surgery (Latest Edition)
6. Oxford Handbook of Clinical Surgery (Latest Edition)
7. Clinical Skills for Undergraduates by Abdul Majeed Chaudhry & Aamer Zaman Khan

Course Title: Gynecology & Obstetrics

Course hours: 315

Rationale

Obstetrics and Gynecology focus on women's health, reproductive health, pregnancy, and childbirth. The subject contributes to improving maternal and neonatal health through the development of clinical competence in preventive, emergency, and routine care.

Course Description: This comprehensive course spans three years and covers lectures and clinical teaching in ward rounds, bedside teaching, problem-based learning, and case presentations. Students gain firsthand experience in pre-op, intra-op, and post-op care, with a focus on saving maternal and neonatal lives through evidence-based care.

Objectives:

By the end of the course, students will:

1. Gain comprehensive knowledge of the reproductive system and common diseases.
2. Provide safe antenatal, intrapartum, and postnatal care, including pre-conceptional counseling.
3. Triage and refer high-risk pregnancies.
4. Diagnose and manage obstetrical emergencies.
5. Develop effective communication and managerial skills.
6. Incorporate medical ethics into practice.

7. Participate in and conduct research.
8. Work as an efficient team leader and member.

Outcomes:

Students who complete this course will:

1. Provide safe antenatal and postnatal care.
2. Offer gynecological and reproductive health care.
3. Deliver competent emergency care.
4. Demonstrate effective management and administration.
5. Perform minor obstetrical/gynecological procedures.
6. Exhibit strong counseling and communication skills.
7. Provide patient-centered care in obstetrics and gynecology.
8. Be a good leader and team member.
9. Understand common instruments used in basic obstetric and gynecological procedures.
10. Demonstrate professionalism, ethical practice, and effective teamwork while providing comprehensive obstetric and gynecological care.

Textbooks & References:

1. Ten Teachers Gynae/Obstetrics
2. Textbook of Gynaecology by Rashid Latif
3. Dewhurst's Textbook of Gynaecology/Obstetrics
4. Oxford Handbook of Gynae/Obs
5. Macleod's Clinical Examination

Course Title: Orthopedics & Trauma

Course hours: 101

Rationale

Orthopedics and Trauma focus on musculoskeletal disorders, injuries, and rehabilitation. The subject prepares students to assess fractures, trauma-related conditions, and common orthopedic problems encountered in clinical practice.

Course Description: Orthopedic surgery addresses the management of musculoskeletal system injuries and illnesses. The curriculum emphasizes integrating clinical, laboratory, and radiological methods to diagnose common conditions.

Objectives:

By the end of the course, students will:

1. Develop comprehensive knowledge of the musculoskeletal system.
2. Achieve competence in addressing musculoskeletal issues.
3. Promote pattern recognition and problem-solving in fracture treatment.
4. Adopt evidence-based approaches.
5. Use simulation for skill assessment.

Outcomes:

Students who complete this course will:

1. Bridge the knowledge gap between general physicians and orthopedic surgeons.
2. Standardize attitudes and coping mechanisms in trauma scenarios.
3. Develop safer training strategies for trauma scenarios.
4. Enhance communication and collaboration skills.
5. Obtain and report basic orthopedic patient history.

6. Perform and report basic orthopedic physical examinations.
7. Understand basic science and pathology of orthopedic conditions.
8. Develop differential diagnoses and use diagnostic testing.
9. Know treatment alternatives and their potential complications.
10. Recognize preventative measures for orthopedic conditions.

Textbooks & References:

1. Bailey & Love's Short Practice of Surgery
2. Apley's System of Orthopedics & Fractures - 8th Edition
3. Atlas in Orthopedics
4. Current Surgical Diagnosis & Treatment
5. Clinical Skills for Undergraduates by Abdul Majeed Ch. & Aamer Zaman Khan

Course Title: Neurosurgery

Course hours: 76

Rationale

Neurosurgery introduces students to disorders affecting the brain, spinal cord, and peripheral nervous system. The subject develops awareness of common neurosurgical emergencies and the principles of their diagnosis and management.

Course Description: This course aims to teach core principles and practices in neurosurgery that are essential for all practicing physicians, regardless of their specialty.

Objectives:

By the end of the course, students will:

1. Diagnose common neurosurgical conditions based on history and examination.
2. Develop an investigation plan for neurosurgical conditions.
3. Manage common neurosurgical conditions.
4. Describe criteria for managing head and spine injuries.
5. Prepare patients for elective neurosurgical procedures.
6. Identify common neurosurgical instruments.

Outcomes:

Students who complete this course will:

1. Take a thorough neurosurgical history and perform relevant physical examinations.
2. Interpret common radiological and laboratory investigations.
3. Outline management plans for common neurosurgical conditions.
4. Identify patients requiring immediate intervention in brain and spinal trauma.
5. Enlist preoperative orders for common neurosurgical procedures.
6. Recognize common neurosurgical instruments.

Textbooks & References:

1. Principles of Neurosurgery by Setti Rengachary
2. Handbook of Neurosurgery by Mark S. Greenburg

Course Title: Ophthalmology

Course hours: 158

Rationale

Ophthalmology provides knowledge and skills required to recognize, evaluate, and manage common eye disorders and emergencies. Early recognition and appropriate referral of ophthalmic conditions are essential for preventing avoidable visual impairment.

Course Description: Ophthalmology involves studying disorders and diseases of the human eye, covering both medical and surgical aspects. Students will learn to manage minor eye ailments and recognize when to refer patients to specialists.

Objectives:

By the end of the course, students will:

1. Teach sufficient ophthalmology to recognize common eye complaints and emergencies.
2. Enable appropriate action to safeguard patient's vision and overall function.

Outcomes:

Given a presenting eye sign or symptom, students should be able to:

1. Take an accurate history.
2. Perform physical examinations using slit lamp and ophthalmoscope.
3. Differentiate normal from abnormal eye findings.
4. Outline a logical Programme of investigation and possible management.

Textbooks & References:

1. Parsons Diseases of the Eye
2. Clinical Ophthalmology by Kanski
3. Ophthalmology by Shafi Jatoi

Course Title: Otorhinolaryngology (ENT)

Course hours: 152

Rationale

Otorhinolaryngology focuses on diseases of the ear, nose, throat, and related head and neck structures. The subject equips students with the skills needed to diagnose and manage common ENT conditions encountered in primary and secondary healthcare settings.

Course Description: This minor subject covers ENT diseases and is taught through lectures and clinical rotations in the 3rd and 4th years. Students engage in ward bedside, OT, and OPD activities to apply theoretical knowledge.

Objectives:

By the end of the course, students will:

1. Provide safe and effective care.
2. Gather information through history taking, physical examination, and workup.
3. Practice essential medical procedures with up-to-date knowledge.
4. Develop and implement patient management plans.
5. Counsel and educate patients and families.
6. Demonstrate ethical behavior and professional skills.

Outcomes:

By the end of the program, students should be able to:

1. Identify symptoms and signs of ENT diseases.
2. List investigations, differential diagnoses, and treatment plans.

3. Provide counseling, prognosis, and follow-up.

Textbooks & References:

1. Logan Turner's Diseases of the Nose, Throat and Ear - 10th Edition
2. Diseases of Ear, Nose and Throat & Head and Neck Surgery by Dhingra - 7th Ed
3. Oxford Handbook of ENT and Head and Neck Surgery - 3rd Edition
4. Hutchison's Clinical Methods - 24th Edition

Course Title: Radiology**Course hours: 26****Rationale**

Radiology develops an understanding of diagnostic imaging and its role in clinical decision-making. The subject enables students to appropriately utilize and interpret common imaging investigations as part of patient management.

Course Description: This course focuses on interpreting radiographs, particularly chest X-rays, and understanding common abnormalities and their implications.

Objectives:

1. Identify normal chest radiographs and anatomical structures.
2. Recognize common abnormalities such as cardiomegaly, pericardial effusion, and lung masses.
3. Diagnose conditions through chest X-rays and correlate findings with clinical data.

Textbooks & References:

1. T. S. R. and E. R. Radiology by G. Anderson
2. Radiology for the MRCP - By Syed - 4th Edition

Course Title: Anesthesia**Course hours: 52****Rationale**

Anesthesia introduces the principles of perioperative care, airway management, pain control, resuscitation, and patient safety. The subject prepares students to recognize and respond to critical clinical situations and medical emergencies.

Course Description:

This course provides a comprehensive introduction to the principles and practice of anesthesia, critical care, and pain medicine. It covers the fundamentals of preoperative assessment, pharmacology of anesthetic agents, techniques for general and regional anesthesia, intraoperative patient monitoring, and management of postoperative pain and complications. Students will gain exposure to the anesthesiologist's role as a perioperative physician, emphasizing patient safety, physiological stability, and the management of the unconscious patient.

Objectives:

By the end of the course, students will:

1. Understand the pharmacology of intravenous and inhalational anesthetic agents, muscle relaxants, and analgesics.
2. Perform a preoperative anesthetic risk assessment and formulate a basic anesthetic plan.
3. Describe the principles and techniques of airway management, including endotracheal intubation.
4. Explain the monitoring modalities used during anesthesia and their significance.

5. Recognize and outline the initial management of common perioperative emergencies.

Outcomes:

Students who complete this course will:

1. Demonstrate the ability to conduct a structured preoperative evaluation.
2. Identify the equipment used in anesthesia and understand its function.
3. Outline the sequence of induction, maintenance, and emergence from general anesthesia.
4. Discuss the role of regional anesthesia and pain management strategies.
5. Apply knowledge of resuscitation protocols in a simulated clinical setting.

Textbooks & References:

1. Morgan, G. E., Mikhail, M. S., & Murray, M. J. Clinical Anesthesiology. 6th ed. McGraw-Hill.
2. Butterworth, J. F., Mackey, D. C., & Wasnick, J. D. Morgan & Mikhail's Clinical Anesthesiology Cases. 1st ed. McGraw-Hill.
3. Oxford Handbook of Anaesthesia. 5th ed. Oxford University Press.

Course Title: Family Medicine

Course hours: 76

Rationale

Family Medicine promotes comprehensive, continuous, and patient-centered care within the context of the family and community. It emphasizes preventive care, health promotion, continuity of care, and management of common health problems.

Course Description:

Family Medicine is the cornerstone of primary healthcare, focusing on comprehensive, continuous, and patient-centered care for individuals and families across all ages, genders, and diseases. This course emphasizes the principles of holistic care, health promotion, disease prevention, and the management of common acute and chronic illnesses in an ambulatory setting. Through clinical rotations, students will develop skills in communication, clinical reasoning, and the coordination of care within the community context.

Objectives:

By the end of the course, students will:

1. Develop competence in managing common outpatient medical conditions.
2. Understand the principles of continuity of care, patient advocacy, and the bio-psycho-social model of health.
3. Demonstrate effective communication skills for patient education, counseling, and shared decision-making.
4. Learn to utilize evidence-based guidelines for preventive care and chronic disease management.
5. Recognize the role of the family physician within the broader healthcare system.

Outcomes:

Students who complete this course will:

1. Perform a comprehensive patient-centered consultation in a primary care setting.
2. Formulate differential diagnoses and evidence-based management plans for common presenting complaints.
3. Provide counseling on lifestyle modifications, immunization, and health screening.
4. Demonstrate an understanding of practice management and ethical issues in primary care.

5. Refer patients appropriately to specialist care while maintaining continuity.

Textbooks & References:

1. Rakel, R. E., & Rakel, D. P. Textbook of Family Medicine. 9th ed. Elsevier.
2. Oxford Handbook of General Practice. 5th ed. Oxford University Press.
3. Bickley, L. S. Bates' Guide to Physical Examination and History Taking. 13th ed. Wolters Kluwer.

Course Title: Behavioral Sciences**Course hours: 52****Rationale**

Behavioral Sciences provide an understanding of the psychological, social, and cultural determinants of health and illness. The subject strengthens communication skills, empathy, professionalism, and patient-centered care.

Course Description:

This course explores the intersection of psychology, sociology, and cultural studies with medical practice. It provides a foundational understanding of human behavior, mental health, and the psychological factors influencing health and illness. Key topics include doctor-patient relationships, patient adherence, stress and coping, substance abuse, psychosomatic disorders, and the principles of psychotherapy and counseling. The course aims to equip future physicians with the skills to understand and respond to the emotional and behavioral needs of their patients.

Objectives:

By the end of the course, students will:

1. Understand major psychological theories of development, personality, and behavior.
2. Identify common psychiatric disorders, their presentation, and basic management principles.
3. Develop effective communication skills for breaking bad news, managing difficult interviews, and motivating behavioral change.
4. Analyze the impact of cultural, social, and economic factors on health and healthcare access.
5. Apply ethical principles in situations involving patient autonomy, confidentiality, and consent.

Outcomes:

Students who complete this course will:

1. Elicit a comprehensive psychosocial history from a patient.
2. Demonstrate empathy and use basic counseling techniques in a clinical interaction.
3. Recognize the signs and symptoms of common mental health conditions like depression, anxiety, and substance use disorders.
4. Incorporate an understanding of socio-cultural determinants of health into patient care plans.
5. Uphold the highest standards of professional and ethical conduct in patient interactions.

Textbooks & References:

1. Rana, M. H. Behavioral Sciences - A Guide for Medical Students & Professionals.
2. Kaplan & Sadock's Synopsis of Psychiatry. 12th ed. Wolters Kluwer.
3. The Doctor's Communication Handbook. 9th ed. CRC Press.

Course Title: The PRIME Module**Course hours: 216****Rationale**

Contemporary medical practice requires physicians to possess competencies that extend beyond scientific knowledge and clinical skills. The PRIME Framework is incorporated as a longitudinal component of the MBBS curriculum to facilitate the development of professional identity, ethical practice, leadership capacity, effective communication, and research literacy. Through continuous exposure and reinforcement across all years of the program, the framework prepares students to function as competent, compassionate, accountable, and reflective healthcare professionals capable of responding to the evolving needs of patients, communities, and healthcare systems. *For details, please see PRIME Study guide.*

Course Description:

The PRIME Module is a holistic, capstone Programme designed to cultivate the core attributes of a physician-scholar and leader. It integrates five critical pillars that are essential for excellence in modern medicine but extend beyond traditional clinical knowledge. This module ensures graduates are not only skilled clinicians but also ethical, self-aware, and innovative professionals ready to lead and improve healthcare systems.

Learning Objectives:

By the end of the PRIME module, students will be able to:

1. Model unwavering accountability, integrity, and commitment to lifelong learning in all professional endeavors.
2. Design, conduct, and disseminate a scholarly project that contributes to medical knowledge.
3. Articulate a mature professional identity, integrating personal values with the duties and virtues of a physician.
4. Apply principles of leadership, quality improvement, and resource management within healthcare teams.
5. Navigate complex clinical ethical dilemmas using a structured framework grounded in universal principles and cultural context.

Outcomes:

Upon completion of the PRIME module, students will be able to:

1. Maintain a reflective portfolio demonstrating professional growth and a sustainable approach to personal well-being.
2. Submit a manuscript from their independent research to a peer-reviewed journal or present findings at a scholarly forum.
3. Confidently articulate their professional narrative and values, demonstrating resilience and a patient-centered approach in complex clinical situations.
4. Develop and lead a Quality Improvement (QI) initiative and function effectively as both a leader and a member of a multidisciplinary team.
5. Analyze a complex clinical case and present a justified ethical decision, respecting both philosophical principles and patient beliefs.

Textbooks & References:

1. The Good Doctor: A Physician's Guide to Transforming Health Care by J. K. Patel.
2. Cruess, R. L., Cruess, S. R., & Steinert, Y. Teaching Medical Professionalism.
3. How to Read a Paper: The Basics of Evidence-Based Medicine and Healthcare by Trisha Greenhalgh.
4. AMA Manual of Style: A Guide for Authors and Editors.
5. The Physician's Odyssey: Reflections on Medical Training and Practice by S. M. K. Chisti.
6. On Becoming a Doctor: The Journey from Student to Specialist by T. Manning.

7. The Improvement Guide: A Practical Approach to Enhancing Organizational Performance by Langley et al.
8. Crucial Conversations: Tools for Talking When Stakes Are High by Patterson et al.
9. Clinical Ethics: A Practical Approach to Ethical Decisions in Clinical Medicine by Jonsen, Siegler, & Winslade.
10. Islamic Medical Ethics: Theory and Practice

Course Title: Quran Kareem

Course hours: 50

Rationale

The Quran Kareem course promotes spiritual, moral, and ethical development while reinforcing values such as compassion, honesty, accountability, and service to humanity. It supports the holistic development of future healthcare professionals.

Course Description:

This longitudinal course offers a structured study of the Holy Quran, focusing on correct recitation (Tajweed), understanding the meanings (Tafsir) of selected Surahs, and reflecting upon its ethical and spiritual teachings. The course is designed to provide a moral and spiritual compass for students, helping them connect the timeless guidance of the Quran with the ethical challenges and compassionate service inherent to the medical profession.

Objectives:

By the end of the course, students will:

1. Recite selected verses of the Holy Quran with proper pronunciation and Tajweed rules.
2. Comprehend the core messages and themes of the chapters studied.
3. Relate the ethical and moral teachings of the Quran to principles of medical ethics and patient care.
4. Reflect on the concepts of healing, compassion, and justice as presented in the Quran.

Outcomes:

Students who complete this course will:

1. Demonstrate improved fluency and accuracy in the recitation of the Quran.
2. Articulate how Islamic principles inform ethical decision-making in clinical practice.
3. Exhibit enhanced empathy, integrity, and professionalism in their conduct, grounded in spiritual values.
4. Develop a personal framework for maintaining spiritual well-being amidst the demands of a medical career.

Textbooks & References:

1. The Holy Quran (Arabic Text with Urdu/English Translation and Commentary).
2. Maududi, S. A. A. Towards Understanding the Quran.
3. Ali, A. Y. The Meaning of the Holy Qur'an.

Course Title: Pakistan Studies / Islamiat

Course hours: 50

Rationale

Pakistan Studies and Islamiat develop awareness of national identity, cultural values, civic responsibility, and ethical principles. The course provides students with an understanding of the social and cultural context in which healthcare is delivered.

Course Description:

This combined course provides students with essential knowledge of Pakistan's ideological, historical, and political context (Pakistan Studies) alongside the fundamental beliefs, practices, and history of Islam (Islamiyat). It aims to foster a sense of informed national identity and civic responsibility while providing a deeper understanding of the Islamic ethical framework that shapes the society in which they will practice medicine.

Objectives:

By the end of the course, students will:

1. (Pakistan Studies) Trace the history of the Pakistan Movement, understand the constitutional framework, and analyze contemporary challenges.
2. (Islamiyat) Explain the fundamental beliefs (Aqeedah), pillars (Arkan), and practices of Islam, and the life of the Prophet Muhammad (PBUH).
3. Discuss the contributions of Muslim scholars to civilization and science.
4. Analyze the role of ethical values derived from Islamic and Pakistani ideology in community leadership and public health.

Outcomes:

Students who complete this course will:

1. Articulate an informed perspective on Pakistani nationhood and its relevance to their role as community physicians.
2. Demonstrate an understanding of core Islamic teachings and their application to personal and professional life.
3. Critically appraise the socio-cultural and ideological factors that influence health and healthcare delivery in Pakistan.
4. Uphold the values of tolerance, social justice, and service to the community.

Textbooks & References:

1. (Pak Studies) Pakistan Studies by M. Ikram Rabbani.
2. (Pak Studies) The Struggle for Pakistan by I.H. Qureshi.
3. (Islamiyat) Introduction to Islam by Dr. Hamidullah.
4. (Islamiyat) The Sealed Nectar (Ar-Raheeq Al-Makhtum) by Safi-ur-Rahman al-Mubarkpuri.

Course Title: English Expository Writing

Course hours: 50

Rationale

English Expository Writing strengthens academic, professional, and scientific writing skills required in medical education and practice. It supports effective documentation, scholarly communication, and dissemination of medical knowledge.

Course Description:

This is a practical, skills-based course designed to equip medical students with the advanced written communication skills required for academic and professional success. It focuses on clarity, precision, and structure in professional writing, covering essential genres such as patient case notes, referral letters, literature summaries, and research abstracts. The course emphasizes the importance of accurate and effective written communication in ensuring patient safety and professional collaboration.

Objectives:

By the end of the course, students will:

1. Employ clear, concise, and professional language in medical writing.

2. Structure and compose coherent and accurate clinical documentation.
3. Summarize and critique medical literature effectively.
4. Apply advanced principles of grammar, punctuation, and style to enhance readability and avoid ambiguity.

Outcomes:

Students who complete this course will:

1. Produce well-structured, precise, and professional patient case histories and referral letters.
2. Write a structured abstract and summary of a medical journal article.
3. Demonstrate competence in avoiding common errors in medical documentation.
4. Communicate complex medical information in writing with clarity and accuracy.

Textbooks & References:

1. Strunk, W., & White, E. B. *The Elements of Style*. 4th ed. Pearson.
2. *AMA Manual of Style: A Guide for Authors and Editors*. 11th ed. Oxford University Press.
3. Greenhalgh, T. *How to Read a Paper: The Basics of Evidence-Based Medicine and Healthcare*. 6th ed. Wiley-Blackwell.

Course Title: Arts & Humanities

Course hours: 50

Rationale

Arts and Humanities enrich medical education by exploring the human experience of health, illness, suffering, and healing. The subject promotes empathy, reflection, compassion, and a deeper understanding of patient-centered care.

Course Description:

This innovative course integrates perspectives from literature, philosophy, ethics, and the visual and performing arts into the medical curriculum. It uses narratives of illness, works of art, and philosophical texts to explore the human dimensions of sickness, healing, suffering, and compassion. The course aims to cultivate empathy, moral reasoning, and self-reflection in future physicians, counterbalancing the technical focus of clinical training and fostering a more holistic, patient-centered approach to care.

Objectives:

By the end of the course, students will:

1. Analyze how narratives and art represent the experiences of patients and physicians.
2. Discuss complex ethical dilemmas in medicine using frameworks from the humanities.
3. Reflect on their own professional identity, biases, and responses to suffering.
4. Explore the role of creativity, resilience, and self-care in preventing burnout.

Outcomes:

Students who complete this course will:

1. Demonstrate enhanced empathy and narrative competence in understanding patient experiences.
2. Articulate a more nuanced and humanistic perspective on health, illness, and the doctor-patient relationship.
3. Engage in reflective practice to process clinical experiences and promote personal well-being.
4. Apply insights from the arts and humanities to communicate more effectively and compassionately with patients and colleagues.

Textbooks & References:

1. Kleinman, A. The Illness Narratives: Suffering, Healing, and the Human Condition. Basic Books.
2. Sacks, O. The Man Who Mistook His Wife for a Hat and Other Clinical Tales. Touchstone.
3. Charon, R. Narrative Medicine: Honoring the Stories of Illness. Oxford University Press.
4. Selected works of literature, film, and art (e.g., Wit by Margaret Edson).

Course Title: Artificial Intelligence

Course hours: 25

Rationale

Artificial Intelligence (AI) is transforming healthcare through its applications in clinical decision-making, diagnostics, medical imaging, research, education, and health systems management. Future physicians must possess a foundational understanding of AI concepts, opportunities, limitations, and ethical considerations to effectively utilize AI-enabled technologies in patient care. This course equips MBBS students with essential knowledge and skills to critically evaluate, responsibly use, and adapt to emerging AI innovations in healthcare while maintaining professionalism, patient safety, and ethical standards.

Course Description

This course introduces MBBS students to the fundamental concepts and applications of Artificial Intelligence in healthcare. It explores the principles of machine learning, data analytics, clinical decision support systems, digital health technologies, and AI-assisted diagnostics. The course also addresses ethical, legal, professional, and patient safety considerations related to AI use in medicine. Through interactive learning activities, case discussions, and practical demonstrations, students will develop the ability to critically appraise AI tools and understand their role in modern and future healthcare systems.

Course Objectives

Upon completion of this course, students will be able to:

1. Describe the fundamental concepts, terminology, and principles of Artificial Intelligence in healthcare.
2. Explain the applications of AI in clinical practice, medical education, research, and public health.
3. Discuss the role of machine learning, predictive analytics, and clinical decision support systems in healthcare delivery.
4. Evaluate the benefits, limitations, and challenges associated with AI implementation in healthcare settings.
5. Analyze ethical, legal, professional, and patient safety issues related to the use of AI in medicine.
6. Demonstrate responsible and effective use of AI-assisted tools for learning, research, and clinical problem-solving.
7. Critically appraise emerging AI technologies and their potential impact on healthcare systems and patient outcomes.

Course Outcomes

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

1. Explain core concepts and applications of Artificial Intelligence relevant to medical practice.
2. Utilize AI-enabled technologies appropriately to support learning, research, and clinical decision-making.

3. Critically evaluate AI-generated information for accuracy, reliability, safety, and ethical compliance.
4. Demonstrate awareness of ethical, legal, and professional responsibilities associated with AI use in healthcare.
5. Apply principles of responsible AI use to enhance patient-centered and evidence-based healthcare.

Recommended References

1. Topol EJ. Deep Medicine: How Artificial Intelligence Can Make Healthcare Human Again. Basic Books; 2019.
2. Coiera E. The Guide to Health Informatics. 4th Edition. CRC Press; 2024.
3. Bohr A, Memarzadeh K (Eds.). Artificial Intelligence in Healthcare. Academic Press; 2020.
4. Masters K (Ed.). Artificial Intelligence in Medical Education. Springer Nature; 2025.

CURRICULUM HOUR DISTRIBUTION

The MBBS curriculum at MIMC is implemented in accordance with the curriculum framework, study guides, academic regulations, and assessment policies prescribed by Bahria University and approved by the PMDC. The distribution of teaching hours across pre-clinical, para-clinical, clinical, and longitudinal components has been meticulously planned and standardized by Bahria University to ensure appropriate coverage of all required disciplines, learning outcomes, and clinical competencies throughout the five-year program.

MIMC follows the approved Bahria University curriculum in its entirety, including the prescribed instructional hours, clinical training requirements, assessment framework, and subject distribution. The curriculum incorporates basic medical sciences, clinical sciences, community-oriented learning, clinical clerkships, and longitudinal themes, while also fulfilling the requirements of general education and professional development components.

A comprehensive review of the Bahria University MBBS curriculum conducted during the previous academic cycle confirmed that the cumulative instructional hours, clinical exposure, and subject allocations meet the minimum requirements prescribed by PMDC for undergraduate medical education. Accordingly, MIMC adopts and implements the approved curriculum structure and continuously monitors its delivery through the Department of Medical Education, Curriculum Committee, and institutional quality assurance mechanisms to ensure ongoing compliance with university and regulatory standards.

Detailed subject-wise teaching hours, study guides, course specifications, assessment blueprints, and curriculum documents approved by Bahria University are maintained by the College and are available as supporting documents for academic and accreditation purposes.

Table 9. Subject-Wise Distribution of Teaching Hours Across the MBBS Program

Subject	Year 1	Year 2	Year 3	Year 4	Year 5	Total
ANATOMY	335	303	22	27	22	709
• Gross Anatomy	241	174	22	27	22	486
• Embryology	63	65	-	-	-	128
• Histology	31	64	-	-	-	95

PHYSIOLOGY	143	323	36	10	-	512
BIOCHEMISTRY	112	145	3	2	-	262
PATHOLOGY	24	16	204	245	-	489
MICROBIOLOGY	-	-	16	-	-	16
PHARMACOLOGY	14	14	76	198	-	302
COMMUNITY MEDICINE	27	17	46	116	-	206
• Core Community Medicine	27	17	29	116	-	189
• Community Medicine (Research)	-	-	17	-	-	17
FORENSIC MEDICINE	23	9	52	127	-	211
BEHAVIORAL SCIENCES	-	-	-	52	-	52
PRIME	20	33	74	60	29	216
• PRIME (Research)	5	8	28	35	16	92
• PRIME (IT Skills)	5	5	13	5	-	28
• PRIME (Leadership)	2	7	7	7	4	27
• PRIME (Professionalism)	2	7	8	-	8	25
• PRIME (Communication Skills)	3	3	12	6	2	26
• PRIME (Ethics)	3	3	6	7	9	28
MEDICINE	13	24	33	230	302	602
• General Medicine	13	24	33	-	-	70
• Internal Medicine	-	-	-	230	302	532
SURGERY	11	7	79	219	287	603
• General Surgery	11	7	-	-	-	18
• Systemic Surgery	-	-	79	219	287	585
PEDIATRICS	-	13	37	100	151	301
GYNAECOLOGY & OBSTETRICS	-	1	-	151	163	315
PSYCHIATRY	-	-	-	91	65	156
OPHTHALMOLOGY (Eye)	25	22	31	-	80	158
ENT	25	24	23	80	-	152
ANESTHESIA	-	-	-	22	30	52
RADIOLOGY	2	10	6	6	2	26
FAMILY MEDICINE	-	-	26	29	21	76
NEUROLOGY	-	30	-	20	25	75
NEUROSURGERY	-	32	-	23	21	76
CARDIOLOGY	5	-	16	-	30	51
CARDIAC SURGERY	5	-	15	-	-	20
PULMONOLOGY	5	-	15	-	33	53

ORTHOPEDICS	-	-	18	31	52	101
DERMATOLOGY	2	-	13	-	40	55
PLASTIC SURGERY	5	9	24	10	20	68
UROLOGY	-	17	-	32	31	80
NEPHROLOGY	-	17	-	15	35	67
ENDOCRINOLOGY	-	20	-	40	15	75
GASTROENTEROLOGY	-	6	-	19	27	52
INFECTIOUS DISEASE	-	-	-	77	-	77
INFECTIOUS CONTROL	-	-	-	26	-	26
EMERGENCY MEDICINE					25	25
PEDIATRIC SURGERY	-	2	-	-	5	7
ONCOLOGY	-	-	8	9	10	27
Yearly Total	796	1094	873	2067	1521	6351

Teaching hours of the following are not included in the given table, but year-wise distribution is shown somewhere else.

Distribution of Non-Medical Subjects & Extracurricular Activities

Course Hours:

- Quran Kareem: 50 hours, delivered weekly throughout the first two years.
- Pakistan Studies / Islamiat: 50 hours combined (25 hours each), delivered every week throughout the first and second years, respectively.
- English Expository Writing: 25 hours, distributed across the third year.
- Arts & Humanities: 25 hours, distributed across the fourth year.

EXTRACURRICULAR ACTIVITIES:

A total of 200 hours are dedicated to mandatory extracurricular activities, which include a structured Programme of:

- Annual Sports Gala (one week)
- Cultural Shows (three days)
- Camping (two days)
- Blood Donation Camp
- Students' societies Activities

To ensure continuous alignment and evidence-based curriculum management, the Department of Medical Education, through the Curriculum Committee, will conduct a formal review upon the successful implementation of integrated system. This review will involve a precise calculation of actually delivered instructional hours, derived from the official timetables of each module and subject across all five years.

CLINICAL ROTATIONS AND CLERKSHIPS

Introduction

Clinical education is a fundamental component of the MBBS programme at MIMC AJK. It provides students with progressive opportunities to integrate biomedical knowledge with clinical practice through supervised patient care in hospital and community settings. Clinical training is designed to develop competent, compassionate, ethical, and evidence-based medical graduates capable of meeting the healthcare needs of individuals and communities.

Clinical rotations commence during the clinical phase of the curriculum and gradually progress from guided observation and supervised clinical skills to independent clinical reasoning and patient management under faculty supervision.

Rationale

The clinical rotation and clerkship programme has been developed in accordance with the PMDC MBBS Curriculum 2024 and the academic regulations of MIU

The programme provides structured clinical experiences that enable students to:

- integrate basic and clinical sciences;
- apply theoretical knowledge in authentic clinical settings;
- develop clinical examination and procedural skills;
- strengthen clinical reasoning and decision-making;
- communicate effectively with patients, families, and healthcare teams;
- demonstrate professionalism, ethical practice, and empathy; and
- prepare for supervised internship and independent medical practice.

Clinical learning is competency-oriented and progressively increases in complexity throughout the senior years of the MBBS programme.

Clinical Training Framework

Clinical education is delivered through a variety of supervised learning experiences that promote active participation in patient care.

The clinical training programme includes:

- Bedside teaching
- Ward-based clinical teaching
- Outpatient Department teaching
- Clinical demonstrations
- Clinical case presentations
- Clinical seminars
- Clinicopathological Conferences
- Clinical Skills Laboratory sessions
- Community-based clinical learning
- Clinical clerkships in affiliated teaching hospitals

Students actively participate in patient assessment, history taking, physical examination, clinical discussions, and supervised management while maintaining the highest standards of professionalism, ethics, and patient safety.

Year-wise Clinical Training

Third Year – Introduction to Clinical Medicine

The third year serves as the transition from preclinical sciences to clinical medicine. Students begin structured exposure to patients while strengthening their understanding of disease mechanisms and clinical applications.

Learning activities focus on:

- History taking
- Communication skills
- Physical examination
- Clinical demonstrations
- Basic procedural skills
- Infection prevention and control
- Professional behaviour
- Clinical reasoning through supervised patient encounters

Students participate in scheduled clinical postings and hospital visits under close faculty supervision.

		MOHI-UD-DIN ISLAMIC MEDICAL COLLEGE, MIRPUR (AJ&K)								
Hospital Training Time Table 3 rd Year MBBS (Academic Year 2026)										
Ref No: Med.Edu-26/		Amended					Date: 14-05-2026			
Dates		Hospital Training Time: 09:00AM to 11:00AM Monday to Thursday								
From	To	Medicine Unit- i	Medicine Unit- ii	Surgery Unit - i	Surgery Unit - ii	Gynea	Obs	Peds	EYE	ENT
19/1/2026	12/2/2026	A	B	C	D	E	F	G	H	I
16/2/2026	5/3/2026	B	C	D	E	F	G	H	I	A
9/3/2026	2/4/2026	C	D	E	F	G	H	I	A	B
6/4/2026	30/4/2026	D	E	F	G	H	I	A	B	C
4/5/2026	21/5/2026	E	F	G	H	I	A	B	C	D
Summer Vacations and Eid-ul-Adha holidays (23-05-2026 to 14-06-2026)										
15/6/2026	9/7/2026	F	G	H	I	A	B	C	D	E
13/7/2026	6/8/2026	G	H	I	A	B	C	D	E	F
10/8/2026	3/9/2026	H	I	A	B	C	D	E	F	G
7/9/2026	1/10/2026	I	A	B	C	D	E	F	G	H
Batches Distribution										
	A	B	C	D	E	F	G	H	I	
	1-10	11-20	21-31	32-43	45-55	56-66	67-77	78-88	89-100	
Note: Clinical Training will be supervised by the <u>HOD</u> and all teachers will be responsible for Discipline of medical students during their training										
* In Ward, daily attendance record will be maintained by OPD and OT personnel and submitted to students affairs department (MOTH)										
* Log-Books will be maintained by the students and <u>regularly</u> checked by concerned HODs.										
* Ward tests will be conducted at the end of each <u>rotation</u> .										
* No student is allowed to change or exchange his/her batch.										

Figure 15. Hospital rotation schedule for 3rd year MBBS.

Fourth Year – Integrated Clinical Learning

During the fourth year, students undertake more extensive clinical rotations in major specialties while integrating clinical sciences with patient care.

Clinical training includes rotations in:

- General Medicine
- General Surgery
- Obstetrics and Gynaecology
- Paediatrics
- Ophthalmology
- Otorhinolaryngology
- Community Medicine
- Allied clinical disciplines

Greater emphasis is placed on diagnostic reasoning, interpretation of investigations, formulation of differential diagnoses, and patient management planning.

Students are encouraged to actively participate in ward rounds, outpatient clinics, clinical discussions, and multidisciplinary learning activities.



MOHI-UD-DIN ISLAMIC MEDICAL COLLEGE, MIRPUR (AJ&K)

Hospital Training Time Table 4th Year MBBS (Academic Year 2026)



Ref No: Med.Edu-26/

Amended

Date: 14-05-2026

Dates		Hospital Training Time: 11:15 am to 1:00 pm and 11:15 am to 12:30 pm (On Friday)							
From	To	Medicine Unit- i	Medicine Unit- ii	Surgery Unit- i	Surgery Unit- ii	Gynae	Paeds	EYE	ENT
5/1/2026	30/1/2026	A	B	C	D	E	F	G	H
2/2/2026	27/2/2026	H	A	B	C	D	E	F	G
2/3/2026	10/4/2026	G	H	A	B	C	D	E	F
13/4/2026	22/5/2026	F	G	H	A	B	C	D	E
Summer Vacations and Eid-ul-Adha holidays (23-05-2026 to 14-06-2026)									
15/6/2026	10/7/2026	E	F	G	H	A	B	C	D
13/7/2026	7/8/2026	D	E	F	G	H	A	B	C
10/8/2026	4/9/2026	C	D	E	F	G	H	A	B
7/9/2026	2/10/2026	B	C	D	E	F	G	H	A
Batches Distribution									
	A	B	C	D	E	F	G	H	
	1-10	11-21	22-31+100	32-45	46-60	61-74	75-87	88-101	

Note: Clinical Training will be supervised by the HOD and all teachers will be responsible for Discipline of medical students during their training

* In Ward, daily attendance record will be maintained by OPD and OT personnel and submitted to students affairs department (MOTH)

* Log-Books will be maintained by the students and regularly checked by concerned HODs.

* Ward tests will be conducted at the end of each rotation.

* No student is allowed to change or exchange his/her batch.

Figure 16. Hospital rotation schedule for 4th year MBBS.

Final Year – Clinical Clerkships

The final year consists of comprehensive clinical clerkships designed to consolidate the knowledge, skills, and professional attitudes required for independent clinical practice.

Students rotate through the major clinical disciplines including:

- Medicine and Allied Specialties
- Surgery and Allied Specialties
- Obstetrics and Gynaecology
- Paediatrics
- Emergency Medicine
- Radiology
- Anaesthesiology

- Orthopaedics
- Psychiatry
- Dermatology
- Family Medicine
- Elective Clinical Rotations

During clerkships, students actively participate in:

- Ward rounds
- Outpatient clinics
- Emergency services
- Case presentations
- Clinical procedures under supervision
- Clinical conferences
- Multidisciplinary team discussions

These experiences prepare students for the responsibilities of house job and future professional practice.

MOHI-UD-DIN ISLAMIC MEDICAL COLLEGE, MIRPUR (AJ&K)										
Hospital Training Time Table 5 th Year MBBS (Academic Year 2026)										
Ref No: Med.Edu-26/			Amended					Date: 14-05-2026		
Dates		Hospital Training Time: 10:30 am to 3:00 pm and 10:30 am to 12:30 pm (on Friday)								
From	To	Medicine Unit- i	Medicine Unit- ii	Surgery Unit - i	Surgery Unit - ii/Ortho	Gynae	Obs	Paeds Medicine	Anesthesia, Radiology, Paeds Surgery, Neuro Surgery & Urology	Cardiology & Rheumatology
12/1/2026	6/2/2026	A	B	C	D	E	F	G	H	I
9/2/2026	6/3/2026	B	C	D	E	F	G	H	I	A
9/3/2026	10/4/2026	C	D	E	F	G	H	I	A	B
13/4/2026	8/5/2026	D	E	F	G	H	I	A	B	C
11/5/2026	22/5/2026	E	F	G	H	I	A	B	C	D
Summer Vacations and Eid-ul-Adha holidays (23-05-2026 to 14-06-2026)										
15/6/2026	19/6/2026	E	F	G	H	I	A	B	C	D
22/6/2026	10/7/2026	F	G	H	I	A	B	C	D	E
13/7/2026	7/8/2026	G	H	I	A	B	C	D	E	F
10/8/2026	4/9/2026	H	I	A	B	C	D	E	F	G
7/9/2026	2/10/2026	I	A	B	C	D	E	F	G	H
Batches Distribution										
	A	B	C	D	E	F	G	H	I	
	1-13	14-26	27-40	41-51	52-62	63-72	73-82	83-92	93-102	
Note: Clinical Training will be supervised by the HOD and all teachers will be responsible for Discipline of medical students during their training										
* In Ward, daily attendance record will be maintained by OPD and OT personnel and submitted to students affairs department (MOTH)										
* Log-Books will be maintained by the students and regularly checked by concerned HODs.										
* Ward tests will be conducted at the end of each rotation.										
* No student is allowed to change or exchange his/her batch.										

Figure 17. Hospital rotation schedule for final year MBBS.

CLINICAL LOGBOOKS

Students maintain clinical logbooks throughout their clinical years to document learning experiences, patient encounters, procedural skills, attendance, and clinical activities.

The logbooks enable systematic monitoring of students' clinical exposure and facilitate continuous supervision by clinical faculty and academic departments.

CLINICAL SUPERVISION

Clinical teaching is conducted under the supervision of experienced faculty members, consultants, and clinical tutors within affiliated teaching hospitals. Faculty members guide students during bedside teaching, ward rounds, outpatient clinics, case discussions, and procedural demonstrations while ensuring patient safety, ethical practice, and professional conduct.

Constructive academic feedback is provided regularly to support students' professional growth and clinical competence.

CLINICAL LEARNING RESOURCES

Clinical education is supported through the resources available at the affiliated teaching hospitals and institutional facilities, including:

- Teaching wards
- Outpatient departments
- Operating theatres
- Emergency departments
- Clinical Skills Laboratory
- Diagnostic laboratories
- Radiology services
- Medical library
- Digital learning resources

These facilities provide authentic learning environments that enable students to achieve the PO and COs of the MBBS programme.

MONITORING AND CONTINUOUS IMPROVEMENT

The Department of Medical Education, in collaboration with the Curriculum Committee, Module Planning Committees, clinical departments, and academic leadership, continuously monitors the implementation and quality of clinical education.

Monitoring activities include:

- Review of clinical posting schedules
- Student feedback
- Faculty feedback
- Clinical logbook review
- Departmental reports
- Programme evaluation findings

The recommendations generated through these activities are incorporated into curriculum planning and periodic curriculum review to ensure that clinical education remains aligned with PMDC standards, institutional goals, and evolving healthcare needs.

CHAPTER 6

TEACHING, LEARNING AND EDUCATIONAL STRATEGIES

Overview

The MBBS programme at MIMC, adopts a learner-centred educational approach that supports the achievement of the PO and COs through a variety of evidence-informed teaching and learning strategies. Educational methods have been selected to promote active learning, critical thinking, clinical reasoning, professional development, and lifelong learning while ensuring alignment between learning outcomes, teaching activities, and assessment.

The teaching-learning process progressively develops students from foundational scientific knowledge to independent clinical reasoning and patient management. Educational strategies are aligned with the integrated modular curriculum and are implemented according to the level of learner development throughout the five-year MBBS programme.

Principles of Teaching and Learning

Teaching and learning strategies are implemented in accordance with the educational philosophy and curriculum design principles described in Chapters 3 and 4.

Large Group Interactive Sessions

Large Group Interactive Sessions constitute the principal method for introducing core concepts and foundational knowledge within the curriculum. Rather than functioning as conventional didactic lectures, these sessions encourage active student participation through questioning, discussion, clinical examples, multimedia resources, and audience interaction.

LGIS are used to establish conceptual understanding, integrate knowledge across disciplines, and provide the scientific framework necessary for subsequent practical, laboratory, and clinical learning activities.

Small Group Learning

Small group learning provides opportunities for active participation, collaborative learning, and application of knowledge in a supportive educational environment.

Small group activities include:

- Tutorials
- Small Group Discussions (SGDs)
- Structured practical sessions
- Histology sessions
- Anatomy dissection
- Laboratory demonstrations

These activities promote communication, teamwork, analytical thinking, and deeper understanding of scientific concepts through interaction between students and facilitators.

Practical and Laboratory Teaching

Practical teaching forms an integral component of the MBBS curriculum and enables students to translate theoretical knowledge into practical understanding.

Laboratory-based teaching includes:

- Human Anatomy dissection

- Histology practicals
- Physiology practicals
- Biochemistry practicals
- Pathology practicals
- Pharmacology demonstrations
- Microbiology practicals

Practical sessions emphasize observation, interpretation, scientific reasoning, laboratory skills, and integration with clinical medicine.



Clinical Skills Training

Clinical skills training begins early in the curriculum and continues progressively throughout the programme. Students develop competence in history taking, physical examination, procedural skills, communication, infection prevention, patient safety, and professional behaviour before applying these competencies in real clinical settings.

Training is conducted in the Clinical Skills Laboratory using simulated learning environments that allow students to practise essential clinical procedures safely under faculty supervision before encountering patients.

Clinical Learning

Clinical education constitutes the cornerstone of the senior years of the MBBS programme. Students participate in supervised learning activities within teaching hospitals through:

- Ward-based teaching
- Outpatient department teaching
- Bedside teaching

- Clinical demonstrations
- Operating theatre observations
- Emergency department exposure
- Specialty rotations

Clinical teaching emphasizes patient-centred care, clinical reasoning, diagnostic decision-making, professionalism, communication, teamwork, and ethical practice.

Learning responsibilities increase progressively as students advance through the curriculum.

Community-Based Learning

Community-oriented medical education is integrated throughout the MBBS programme to develop an understanding of health and disease beyond hospital settings. Students participate in community visits, public health activities, field surveys, health promotion programmes, and preventive healthcare initiatives conducted in collaboration with community medicine departments and affiliated healthcare facilities. These experiences strengthen students' understanding of epidemiology, disease prevention, health promotion, environmental health, primary healthcare, and social determinants of health.

Self-Directed Learning

SDL is incorporated throughout the curriculum to encourage independent learning, critical appraisal of information, and lifelong professional development. Students are expected to identify their learning needs, access appropriate learning resources, critically evaluate scientific literature, and apply evidence to clinical practice under faculty guidance.

SDL activities complement formal teaching sessions and encourage students to assume responsibility for their own learning.

Journal Club

Journal Club activities are incorporated within the curriculum to promote research literacy, evidence-based medicine, and critical appraisal skills. Students learn to evaluate scientific literature, interpret research findings, analyse study methodology, and discuss the clinical relevance of published evidence. Journal Club also encourages scientific communication, presentation skills, and scholarly inquiry.

Clinicopathological Conference

CPC provide opportunities for integration of biomedical sciences with clinical medicine through structured discussion of authentic patient cases. Students analyse clinical presentations and correlate pathological, anatomical, physiological, microbiological, pharmacological, and biochemical findings to develop diagnostic reasoning and clinical decision-making skills.

These conferences strengthen interdisciplinary integration and reinforce application of scientific knowledge to patient care.

Educational Resources

Teaching and learning are supported through a range of institutional educational resources including:

- Modern lecture theatres
- Practical laboratories
- Anatomy dissection hall
- Clinical Skills Laboratory
- Teaching hospitals
- Medical library

- Digital library resources
- Learning Management System (LMS)
- Computer laboratories
- Internet and multimedia facilities

These resources provide students with an environment conducive to independent learning, collaborative learning, research, and professional development.

Learning Support

The Department of Medical Education, academic departments, and faculty members provide continuous academic guidance and learner support throughout the programme.

Students receive:

- Academic mentoring
- Career guidance
- Academic counselling
- Learning support
- Feedback following formative assessments
- Faculty consultation during office hours

These support mechanisms facilitate academic success, professional growth, and student well-being.

Educational Progression

The teaching and learning strategies adopted throughout the MBBS programme follow a progressive educational sequence.

Students initially acquire foundational scientific knowledge through integrated classroom and laboratory teaching. This knowledge is subsequently reinforced through practical sessions, clinical skills training, community experiences, and supervised clinical practice. As students advance through the programme, increasing emphasis is placed on independent learning, clinical reasoning, patient management, professionalism, research, and lifelong learning, ensuring the achievement of the PO and COs.

CHAPTER 7

ASSESSMENT SYSTEM

Overview

Assessment is an integral component of the MBBS curriculum and serves to promote learning, evaluate achievement of learning outcomes, and ensure that graduates attain the competencies expected of a medical practitioner. The assessment system at MIMC is designed in accordance with the PMDC MBBS Curriculum 2024, the academic regulations of MIU, and internationally accepted principles of assessment in medical education. It employs a balanced combination of formative and summative assessment methods to evaluate knowledge, clinical skills, professional behaviour, communication, and clinical reasoning.

Assessment strategies operationalize the Programme Outcomes, Curricular Outcomes, and module learning outcomes established in Chapters 3 and 4.

Assessment Philosophy

The assessment philosophy of the MBBS programme is based on the principle of assessment for learning as well as assessment of learning. Assessment is regarded as a continuous educational process that guides student learning, identifies areas requiring improvement, and certifies achievement of the required competencies.

Principles of Assessment

The assessment system aims to:

- **Validity:** Assessments must accurately measure the extent to which students have achieved the intended learning outcomes and competencies.
- **Reliability:** The assessment process should ensure consistency and fairness, where student performance is evaluated objectively across different contexts.
- **Transparency:** Assessment criteria, processes, and results must be clear and accessible to both students and faculty to avoid ambiguity.
- **Formative and Summative Balance:** The assessment approach should include both formative assessments to support student learning and improvement, and summative assessments to judge final competency and qualification.
- **Alignment with Learning Objectives:** All assessments must align with the overall curriculum structure, ensuring that they measure the appropriate knowledge, skills, and attitudes expected from students at each stage of the program.
- **Continuous Feedback:** Assessments should provide timely feedback to students to guide their learning and help them improve over time.
- **Ethical Conduct:** The assessment process should uphold academic integrity, and students should be evaluated fairly without any form of discrimination or bias.

Assessment Types

Assessment is conducted throughout the five-year MBBS programme using a combination of formative and summative methods. These assessments are integral to monitoring student progress and academic performance.

The assessment framework comprises:

- Formative assessment
- Summative assessment

Formative Assessment

Formative assessment is conducted throughout each module to monitor student progress and provide timely feedback for improvement. It is intended to identify learning gaps, reinforce key concepts, and facilitate continuous academic development rather than merely assigning grades.

Depending on the nature of the module, formative assessment may include:

- Quizzes
- Written assignments
- Short tests
- Practical performance
- Laboratory exercises
- Clinical performance
- Small group activities
- Seminar presentations
- Class participation

Summative Assessment

Summative assessment evaluates students' achievement of the intended learning outcomes at the completion of a block, and academic year. These assessments determine progression within the programme and certification of competence.

Summative assessment includes internal assessment and external assessment, conducted according to university regulations and PMDC requirements.

Internal Assessment (20%)

Internal assessment constitutes an essential component of student evaluation and contributes 20% to the overall academic performance of each student.

Internal assessment is based on continuous evaluation conducted throughout each block. Its main components are similar to external assessment however; the percentage distribution is divided as shown in the given proposed matrix.

MATRIX FOR MBBS INTERNAL ASSESSMENT – THEORY

S. No	Scoring Parameter	Distribution	Weightage	Score out of 100 marks (IA–Theory)	Responsibility
1	Attendance in Lecture	75% to 90% = 1% Above 90% = 2%	2%	2 (75% to 90% = 1%, Above 90% = 2%)	Student Affairs
2	Summative Assessment	Respective Term/End of Block Exam (Theory) Pre-Annual Exam (Theory)	6% 8%	6 8 As per %age of respective exam	Exam Cell
3	Continuum Assessment	Modular Exams/ ward Test/ end of rotation/ CAT/ Assignments etc.	4%	4 As per accumulative %age of respective exams	Concerned Block Coordinators/ HoDs
Total			20%	20	

MATRIX FOR MBBS INTERNAL ASSESSMENT - PRACTICAL

S. No	Scoring Parameter	Distribution	Weightage	Score out of 100 marks (IA–Practical)	Responsibility
1	Attendance in Practical & clinical work	75% to 90% = 2% Above 90% = 1%	2%	2 (75% to 90% = 1% Above 90% = 2%)	Student Affairs
2	Summative Assessment Respective Term/End of Block Exam Pre-Prof Exam	Respective Term/End of Block Exam (Practical) Pre-Annual Exam (Practical)	4% 5%	6 8 As per %age of respective exam	Exam Cell
3	Continuous Assessment	OSPEs/OSCEs attempted after every learning session/ward Test/CAT	3%	3 As per accumulative %age of respective exams	Concerned Block Coordinators/ HoDs
4	Practical Books/ Logbooks	Basic Sciences-Practical Note Books / Clinical Sciences-Logbooks	3%	3	HoDs Concerned
5	Discipline	Discipline, Attitude, Responsibility and Teamwork	3%	3	HoDs Concerned
Total			20%	20	

The internal assessment policy, including weightage and eligibility requirements, is implemented in accordance with the regulations of MIU and PMDC.

External assessment (80%)

The external assessment, also called annual/professional examination is taken by the examination department of MIU. It is based on the theoretical and integrated practical examination as per the MIU policy.

Assessment Tools

Various assessment tools are employed throughout the MBBS Programme to comprehensively gauge students' knowledge, skills, and professional competencies. In the Final Year, the assessment strategy intensifies to focus on synthesis and readiness for practice. These tools include:

- **Written Examinations:** Encompassing Multiple Choice Questions, and Short Answer Questions to evaluate theoretical knowledge and clinical reasoning.
- **Performance Assessments:** Including Objective Structured Practical Examinations, and Objective Structured Clinical Examinations to objectively assess practical and clinical skills in a standardized setting.
- **Workplace-Based Assessments (WBAs):** Tools used in clinical environments to monitor ongoing development. These include:
 - **Clinical Logbooks:** Electronically or manually maintained records of clinical exposures, procedures performed, and skills demonstrated, subject to periodic audit and verification.
 - **Mini-CEX (Mini-Clinical Evaluation Exercise):** Direct observation and feedback on focused patient encounters.
 - **DOPS (Direct Observation of Procedural Skills):** Assessment of practical procedural skills.
- **Complex Clinical Evaluations:**
 - **Long Cases:** Comprehensive assessments of a single patient encounter, focusing on in-depth history-taking, physical examination, clinical reasoning, and management planning.
- **Assignments and Projects:** Including presentations, research projects, and the **Capstone PRIME Project** (*planned for final year MBBS*), which are designed to enhance critical thinking, research skills, and the ability to synthesize knowledge across disciplines.

Blueprinting and Standard Setting

All major examinations are developed using assessment blueprints that ensure appropriate representation of learning outcomes, curricular content, cognitive levels, and competencies. Blueprinting promotes balanced assessment and minimizes content bias.

Assessment standards are established through departmental review and institutional moderation processes to ensure consistency, fairness, and academic integrity across all examinations.

Quality Assurance of Assessment

Quality assurance mechanisms are implemented throughout the assessment process to maintain the validity, reliability, and fairness of examinations.

These include:

- Assessment blueprinting
- Peer review of examination papers

- Question bank development
- Internal moderation
- Secure examination procedures
- Standardized marking schemes
- Item analysis
- Review of examination outcomes
- Documentation of assessment processes

The Department of Medical Education and the Assessment Committee regularly monitor assessment quality and recommend improvements based on examination analysis and stakeholder feedback. PMDC recommends maintaining question banks, peer review of assessment items, and ongoing evaluation of assessment quality.

APPEAL POLICY FOR STUDENT ASSESSMENT GRIEVANCES

MIMC is committed to ensuring fairness, transparency, consistency, and due process in all assessment activities. Students have the right to seek review of assessment-related concerns through established institutional and university procedures. The appeal mechanism distinguishes between internal assessments conducted by the College and professional annual examinations conducted by MIU.

Appeals Related to Internal Assessment

Internal assessments, including module examinations, quizzes, assignments, practical examinations, laboratory assessments, seminar presentations, journal club activities, attendance, professionalism, and other formative assessments, are administered by MIMC.

Grievance Authority

The Examination Cell, MIMC, serves as the primary authority responsible for addressing grievances related to internal assessments.

Procedure

- Students shall submit a written application to the Examination Cell through the Head of Department or Module Coordinator, as appropriate.
- The application should clearly state the nature of the grievance and include supporting evidence, where applicable.
- Appeals must be submitted within seven (07) working days of the declaration of results or the occurrence of the grievance.

Review Process

- The Examination Cell reviews the application together with the relevant assessment records.
- Where necessary, the matter may be referred to the concerned department, Module Planning Committee, or Student Grievance Committee for further review.
- The final decision shall be communicated to the student in writing.
- The decision of the College shall be considered final for all matters related to internal assessment.

Appeals Related to Professional Annual Examinations

Professional annual examinations are conducted under the academic regulations and examination policies of MIU. Any grievance concerning annual professional examination results shall be processed in accordance with the University's prescribed procedures.

Grievance Authority

The Controller of Examinations, MIU, is the competent authority for all matters related to professional annual examinations.

Procedure

- Students seeking review or rechecking of professional examination results shall submit a written application through the Principal/Dean of MIMC.
- The College shall verify the application and forward it to the Controller of Examinations, MIU, through the prescribed institutional channel.
- Applications shall be submitted within the timelines specified by the University's examination regulations.

Review Process

- Rechecking, review, or any other examination-related process shall be conducted solely by MIU in accordance with its approved examination policies.
- MIMC shall facilitate communication between the student and the University but shall not influence the outcome of the review process.
- The decision of MIU shall be final and binding.

Assessment Compilation and Reporting

The Examination Cell of MIMC maintains comprehensive records of students' internal assessments throughout the academic year. Internal assessment marks are compiled, verified, and submitted to MIU in accordance with the University's academic regulations and examination schedule.

The University is responsible for conducting professional annual examinations, compiling final results, determining students' academic standing, and officially declaring examination outcomes.

Policy Reference

Detailed procedures regarding assessment, grading, promotion, examination regulations, and student appeals are described in the Assessment Policy and Examination Regulations of MIMC and MIU. Students are encouraged to consult these documents for comprehensive guidance regarding assessment-related matters.

Suggested Improvement

Because your curriculum is now fully module-based, I recommend replacing the phrase "Internal Assessment" with "Module Assessment" throughout the curriculum document. This aligns better with the terminology used in an integrated modular curriculum and reinforces the educational philosophy of the revised MBBS programme.

Feedback and Remediation

Assessment is complemented by timely feedback that enables students to recognize their strengths and areas requiring improvement. Faculty members provide constructive feedback following formative assessments and clinical activities to facilitate reflective learning and continuous improvement.

Students experiencing academic difficulties are offered remediation through additional academic support, faculty mentoring, revision sessions, guided learning activities, and reassessment opportunities in accordance with institutional regulations.

Academic Integrity

MIMC is committed to maintaining the highest standards of academic honesty and professional ethics. Students are expected to demonstrate integrity, fairness, and professionalism in all assessment activities.

Any form of academic misconduct, including cheating, plagiarism, falsification of records, impersonation, or other dishonest practices, shall be managed in accordance with the academic regulations and disciplinary policies of MIU.

Assessment Review and Continuous Improvement

The assessment system undergoes periodic review through analysis of examination results, student and faculty feedback, psychometric evaluation of assessment items, and recommendations from the Assessment Committee, Curriculum Committee, and Department of Medical Education.

The findings of these reviews are incorporated into the continuous improvement of assessment policies, methods, blueprinting, and examination procedures to ensure that assessment remains aligned with the PO, COs, and PMDC standards.

CHAPTER 8

CURRICULUM GOVERNANCE AND MANAGEMENT

Overview

Effective curriculum governance is fundamental to ensuring the successful planning, implementation, monitoring, evaluation, and continuous improvement of the MBBS programme. MIMC has established a structured governance framework that promotes academic leadership, shared responsibility, transparency, and quality assurance throughout the curriculum lifecycle.

The governance structure is aligned with the academic regulations of MIU and the standards of the PMDC. It ensures that curriculum planning, implementation, assessment, programme evaluation, and curriculum revision are coordinated through designated academic committees with clearly defined roles and responsibilities. PMDC accreditation standards specifically require institutions to have a functional Curriculum Committee with documented Terms of Reference, representation from the Department of Medical Education, documented implementation through meeting minutes, curriculum management, study guides, and curriculum evaluation mechanisms.

Principles of Curriculum Governance

Curriculum governance at MIMC is guided by the following principles:

- Academic excellence
- Outcome-based education
- Shared decision-making
- Transparency and accountability
- Faculty and student participation
- Evidence-informed decision-making
- Continuous quality improvement
- Regulatory compliance
- Stakeholder engagement

These principles ensure that the curriculum remains responsive to advances in medical education, healthcare needs, and accreditation requirements.

Curriculum Governance Structure

The MBBS curriculum is governed through an integrated academic structure that provides strategic direction, operational oversight, and quality assurance.

The principal governance bodies include:

- Academic Council
- Curriculum Committee
- Module Planning Committees
- Assessment Committee
- Programme Evaluation Committee
- Department of Medical Education
- Quality Enhancement Cell

Each committee contributes to different stages of curriculum planning, implementation, monitoring, and evaluation while maintaining close collaboration with academic departments and institutional leadership..

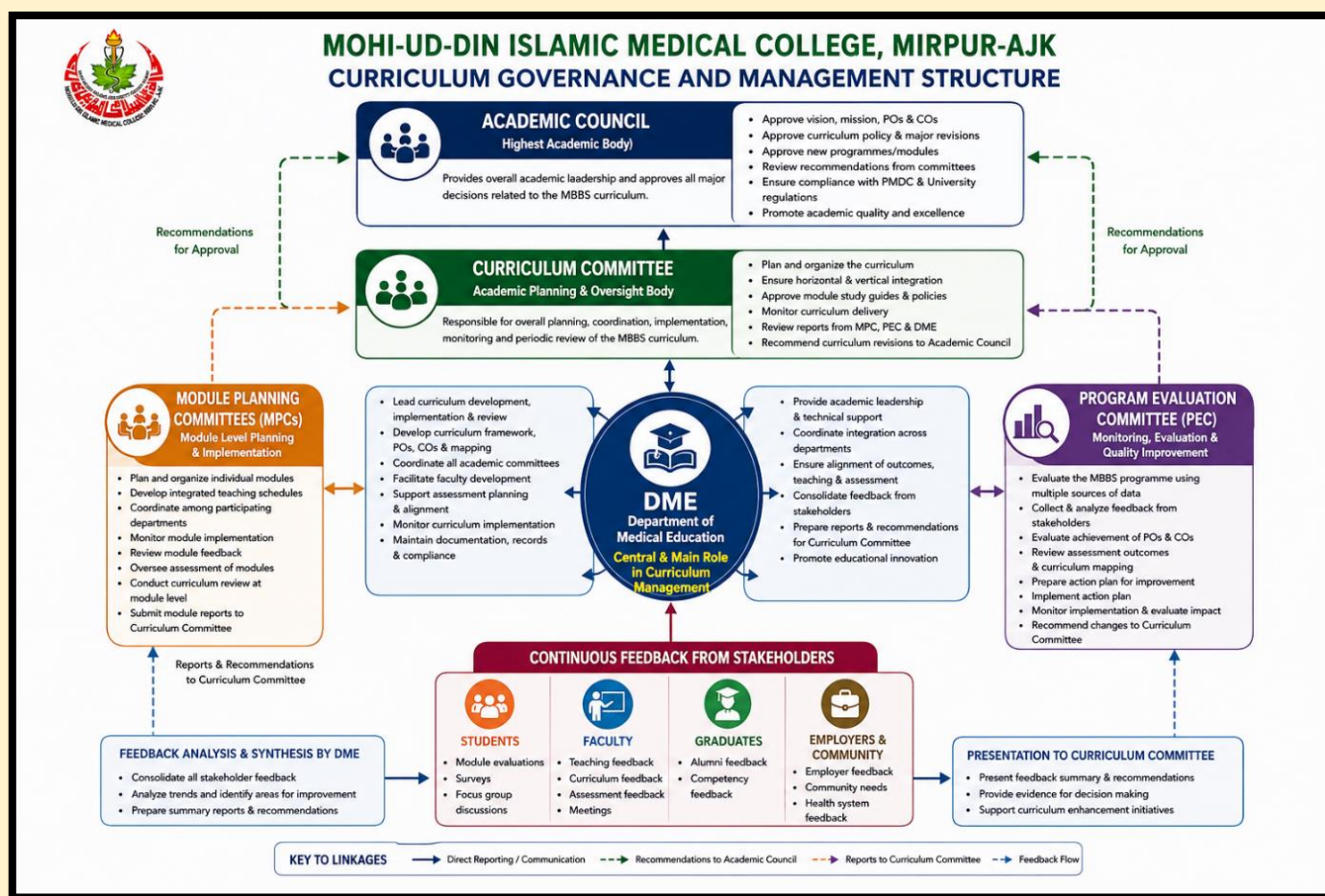


Figure 18. Illustrates the curriculum governance structure of the MBBS programme.

Academic Council

The Academic Council is the highest academic decision-making body responsible for providing strategic oversight of the MBBS programme.

Its major responsibilities include:

- Approval of curriculum policies and major curriculum revisions;
- Approval of po and cos;
- Approval of new modules, courses, and educational innovations;
- Review of recommendations from the curriculum committee;
- Monitoring compliance with university regulations and pmdc standards; and
- Promoting academic quality and institutional excellence.

The Academic Council ensures that the curriculum remains aligned with the mission of MIMC and the vision of MIU.

Curriculum Committee

The Curriculum Committee serves as the principal academic body responsible for the planning, coordination, implementation, monitoring, and periodic review of the MBBS curriculum.

The committee functions through a multidisciplinary membership representing basic medical sciences, clinical sciences, behavioural sciences, community medicine, the Department of Medical Education, and student representatives, where appropriate. PMDC requires that the committee include at least one

member with a recognized postgraduate qualification in medical education from the Department of Medical Education.

The committee is responsible for:

- Curriculum planning and organization;
- Curriculum implementation;
- Curriculum mapping;
- Integration of disciplines;
- Approval of module study guides;
- Monitoring curriculum delivery;
- Recommending curriculum innovations;
- Reviewing programme evaluation reports;
- Ensuring alignment between outcomes, teaching, and assessment; and
- Recommending curriculum revisions to the Academic Council.

The detailed Terms of Reference of the Curriculum Committee are given below.

1. Curriculum aligns with the institutional mission of MIMC, Mirpur, and the regulatory frameworks of the PM&DC, HEC.
2. Conduct reviews of the integrated curriculum, incorporating structured feedback from faculty, students, and others to ensure its relevance and effectiveness.
3. Develop, maintain, and implement a detailed curriculum map and corresponding educational policies to track content delivery, ensure integration, and achieve defined learning outcomes.
4. Guarantee that the curriculum comprehensively addresses the required Knowledge, Skills, and Attitudes (KSA) for all disciplines, supported by validated Tables of Specifications (TOS) for assessments.
5. Promote and incorporate diverse teaching and learning methodologies, including lectures, small group discussions, PBL, journal club, clinical skills training, and community-based education.
6. Implement a transparent, valid, and reliable system for formative and summative assessments, with a clear mechanism to address and resolve student concerns regarding examinations.
7. Integrate electives and essential competencies, such as research methodology, medical ethics, leadership, communication skills, and information technology, into the curriculum structure.
8. Formulate and oversee policies for the ethical and effective use of technology, including digital tools and online learning platforms, in medical education.
9. Nominate one student from the each-year MBBS class to the committee as a member, ensuring formal consideration of their constructive feedback.
10. Develop a framework to conduct periodic qualitative and quantitative analyses of curricular effectiveness based on stakeholder feedback and educational research, using findings to inform continuous improvement.

Module Planning Committees

Module Planning Committees are responsible for the academic planning and implementation of individual modules within the MBBS programme.

Each committee consists of the Module Coordinator, Module representatives of participating disciplines, and headed by the Department of Medical Education.

Major responsibilities include:

- Preparation of module study guides;
- Development of integrated teaching schedules;
- Coordination among departments;

- Monitoring module implementation;
- Review of module feedback;
- Recommendation of improvements; and
- Submission of module reports to the Curriculum Committee.

These committees play a central role in maintaining horizontal and vertical integration within the organ system-based modular curriculum.

Department of Medical Education

The Department of Medical Education provides academic leadership and technical support for curriculum development, implementation, assessment, faculty development, and programme evaluation.

The DME is responsible for:

- Facilitating curriculum development and revision;
- Supporting curriculum mapping;
- Promoting educational innovation;
- Coordinating faculty development programmes;
- Assisting in assessment planning and blueprinting;
- Monitoring curriculum implementation;
- Coordinating programme evaluation; and
- Supporting continuous quality improvement.

The department also provides educational expertise to institutional committees and ensures that curriculum development remains aligned with PMDC standards and contemporary educational practices.

Assessment Cell

The Assessment Cell oversees the planning, quality assurance, and continuous improvement of assessment practices within the MBBS programme.

Its responsibilities include:

- Development of assessment policies;
- Approval of examination blueprints;
- Review of assessment methods;
- Moderation of examination papers;
- Review of item analysis reports;
- Monitoring examination quality;
- Recommending improvements in assessment practices; and
- Ensuring alignment between assessment and curriculum outcomes.

The committee works closely with academic departments and the Department of Medical Education to maintain valid, reliable, and fair assessment systems.

Programme Evaluation Committee

The Programme Evaluation Committee is responsible for systematic monitoring and evaluation of the MBBS programme to determine whether the curriculum is achieving its intended educational outcomes.

The committee collects and analyses evidence from multiple sources, including:

- Student feedback;
- Faculty feedback;
- Block evaluation reports;
- Graduate feedback;
- Employer feedback;
- Assessment outcomes;
- Curriculum mapping;
- External examiner reports; and
- Accreditation recommendations.

The committee submits annual evaluation reports to the Curriculum Committee and Academic Council, which use these findings to guide curriculum revision and continuous improvement. PMDC recommends a curriculum evaluation committee, supported by medical education experts and institutional quality assurance processes, to obtain stakeholder feedback and use it for curriculum enhancement.

Student Participation

Students are recognized as important stakeholders in curriculum development and quality assurance.

Their participation includes:

- Representation on designated academic committees, where applicable;
- Module evaluation;
- Programme evaluation;
- Structured feedback surveys;
- Focus group discussions; and
- Consultation during curriculum review activities.

Student feedback is analysed systematically and incorporated into curriculum planning and improvement processes.

Curriculum Review and Decision-Making Process

Curriculum governance follows a structured decision-making pathway to ensure effective planning, implementation, and continuous improvement.

The process includes:

1. Module Planning Committees review individual modules and prepare recommendations.
2. The Curriculum Committee reviews module reports, programme evaluation findings, stakeholder feedback, and proposed curriculum revisions.
3. Recommendations are submitted to the Academic Council for academic review and approval.
4. Approved revisions are implemented by academic departments with support from the Department of Medical Education.
5. Programme evaluation findings are used to monitor implementation and initiate subsequent cycles of curriculum improvement.

This governance framework promotes transparency, accountability, and evidence-based curriculum management.

Continuous Curriculum Management

Curriculum governance at MIMC is viewed as a continuous process rather than a periodic administrative activity. Regular committee meetings, curriculum monitoring, module reviews,



assessment analyses, programme evaluations, and stakeholder consultations ensure that the curriculum remains responsive to educational advances, healthcare priorities, institutional goals, and PMDC accreditation standards.

Through this structured governance system, MIMC is committed to maintaining an academically rigorous, learner-centred, and continuously improving MBBS programme capable of producing competent and compassionate medical graduates.

APPENDICES

S.N	APPENDIX NO	APPENDIX DETAILS (MODULE GUIDES)
1.	APPENDIX 1-5	Foundation-I, Blood-I, MSK-I, CVS – I, RES – I
2.	APPENDIX 6-11	Neurosciences 1A, Neurosciences 1B, GIT -I, Renal-I, Endo – I, Repro - I
3.	APPENDIX 12-18	Foundation – II, Infection & Inflammation-II, Multisystem-I, Blood & Immunology-II, CVS – II, RES – II
4.	APPENDIX 19-24	Neurosciences-II, GIT & Hepatobiliary – II, Renal-II, Endo & Repro- II, ENT, EYE
5.	APPENDIX 25-33	Foundation-III, Blood & Immunology-III, MSK-III, Cardiorespiratory-III, Renal-III, Endo & Repro-III