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PE24.11: Apply the IMNCI guidelines in risk stratification of children with diarrheal dehydration and refer	29.1-2
PE24.12: Perform and interpret stool examination including hanging drop	14.3
PE24.13: Interpret RFT and electrolyte report	21.2, 7.2-5
PE24.14: Plan fluid management as per the WHO criteria	14.10
PE24.15: Perform NG tube insertion in a manikin	32.7
PE24.16: Perform IV cannulation in a model	32.3
PE24.17: Perform interosseous insertion model	32.3
TOPIC: Malabsorption	
PE25.1: Discuss the etiopathogenesis, clinical presentation and management of malabsorption in children and its causes including celiac disease	14.12
TOPIC : Acute and Chronic Liver Diseases	
PE26.1: Discuss the etiopathogenesis, clinical features and management of acute hepatitis in children	15.4
PE26.2: Discuss the etiopathogenesis, clinical features and management of fulminant hepatic failure in children	15.5
PE26.3: Discuss the etiopathogenesis, clinical features and management of chronic liver diseases in children	15.7
PE26.4: Discuss the etiopathogenesis, clinical features and management of portal hypertension in children	15.8
PE26.5: Elicit document and present the history related to diseases of gastrointestinal system	14.2
PE26.6: Identify external markers for GI and liver disorders, e.g. Jaundice, pallor, gynecomastia, spider angioma, palmar erythema, ichthyosis, caput medusa, clubbing, failing to thrive, Vitamin A and D deficiency	14.2, 15.2-3, 15.5, 15.7

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PE26.7:	Perform examination of the abdomen, demonstrate organomegaly, ascites, etc.	14.2
PE26.8:	Analyse symptoms and interpret physical signs to make a provisional/ differential diagnosis	14.2, 15.2-3
PE26.9:	Interpret liver function tests, viral markers, ultra sonogram report	15.1
PE26.10:	Demonstrate the technique of liver biopsy in a perform liver biopsy in a simulated environment	32.6
PE26.11:	Enumerate the indications for upper GI endoscopy	14.3
PE26.12:	Discuss the prevention of Hep B infection – universal precautions and immunization	15.4
PE26.13:	Counsel and educate patients and their family appropriately on liver diseases	15.4-8
TOPIC: Pediatric Emergencies – Common Pediatric Emergencies		
PE27.1:	List the common causes of morbidity and mortality in the under five children	1.2-3, 28.2
PE27.2:	Describe the etiopathogenesis, clinical approach and management of cardiorespiratory arrest in children	27.1
PE27.3:	Describe the etiopathogenesis of respiratory distress in children	16.4, 27.2
PE27.4:	Describe the clinical approach and management of respiratory distress in children	16.4, 27.2
PE27.5:	Describe the etiopathogenesis, clinical approach and management of shock in children	27.3
PE27.6:	Describe the etiopathogenesis, clinical approach and management of status epilepticus	18.6
PE27.7:	Describe the etiopathogenesis, clinical approach and management of an unconscious child	18.3
PE27.8:	Discuss the common types, clinical presentations and management of poisoning in children	27.6
PE27.9:	Discuss oxygen therapy, in pediatric emergencies and modes of administration	27.1, 32.4
PE27.10:	Observe the various methods of administering oxygen	24.1, 32.4
PE27.11:	Explain the need and process of triage of sick children brought to health facility	29.1-2
PE27.12:	Enumerate emergency signs and priority signs	29.1-2, 27.4
PE27.13:	List the sequential approach of assessment of emergency and priority signs	27.1.1
PE27.14:	Assess emergency signs and prioritize	27.1.1
PE27.15:	Assess airway and breathing: Recognize signs of severe respiratory distress. Check for cyanosis, severe chest indrawing, grunting	27.1-3, 16.4
PE27.16:	Assess airway and breathing. Demonstrate the method of positioning of an infant and child to open airway in a simulated environment	27.1
PE27.17:	Assess airway and breathing: Administer oxygen using correct technique and appropriate flow rate	27.1
PE27.18:	Assess airway and breathing: Perform assisted ventilation by bag and mask in a simulated environment	27.1, 32.4
PE27.19:	Check for signs of shock, i.e. pulse, blood pressure, CRT	27.3
PE27.20:	Secure an IV access in a simulated environment	32.3
PE27.21:	Choose the type of fluid and calculate the fluid requirement in shock	27.3
PE27.22:	Assess level of consciousness and provide emergency treatment to a child with convulsions/coma <ul style="list-style-type: none"> Position an unconscious child Position a child with suspected trauma Administer IV/per rectal diazepam for a convulsing child in a simulated environment 	18.3 18.3, 27.1 18.6, 27.1
PE27.23:	Assess for signs of severe dehydration	7.1, 14.10
PE27.24:	Monitoring and maintaining temperature: Define hypothermia. Describe the clinical features, complications and management of hypothermia	12.12
PE27.25:	Describe the advantages and correct method of keeping an infant warm by skin to skin contact	12.12
PE27.26:	Describe the environmental measures to maintain temperature	12.12
PE27.27:	Assess for hypothermia and maintain temperature	12.12
PE27.28:	Provide BLS for children in manikin	27.1
PE27.29:	Discuss the common causes, clinical presentation, medico-legal implications of abuse	28.4
PE27.30:	Demonstrate confidentiality with regard to abuse	28.4
PE27.31:	Assess child for signs of abuse	28.4
PE27.32:	Counsel parents of dangerously ill/terminally ill child to break a bad news	27.4
PE27.33:	Obtain informed consent	32.1
PE27.34:	Willing to be a part of the ER team	-
PE27.35:	Attends to emergency calls promptly	-
TOPIC: Respiratory System		
PE28.1:	Discuss the etiopathogenesis, clinical features and management of Nasopharyngitis	16.5
PE28.2:	Discuss the etiopathogenesis of pharyngo tonsillitis	16.5
PE28.3:	Discuss the clinical features and management of pharyngo tonsillitis	16.5
PE28.4:	Discuss the etiopathogenesis, clinical features and management of acute otitis media (AOM)	16.5
PE28.5:	Discuss the etiopathogenesis, clinical features and management of epiglottitis	16.6
PE28.6:	Discuss the etiopathogenesis, clinical features and management of acute laryngo- tracheo-bronchitis	16.6
PE28.7:	Discuss the etiology, clinical features and management of Stridor in children	16.4, 16.6

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PE28.8:	Discuss the types, clinical presentation, and management of foreign body aspiration in infants and children	27.5
PE28.9:	Elicit, document and present age appropriate history of a child with upper respiratory problem including Stridor	16.4-6
PE28.10:	Perform otoscopic examination of the ear	16.5
PE28.11:	Perform throat examination using tongue depressor	16.5
PE28.12:	Perform examination of the nose	16.5
PE28.13:	Analyse the clinical symptoms and interpret physical findings and make a provisional/differential diagnosis in a child with ENT symptoms	16.5
PE28.14:	Develop a treatment plan and document appropriately in a child with upper respiratory symptoms	16.5
PE28.15:	Stratify risk in children with stridor using IMNCI guidelines	29.1
PE28.16:	Interpret blood tests relevant to upper respiratory problems	16.3
PE28.17:	Interpret X-ray of the paranasal sinuses and mastoid; and/or use written report in case of management. Interpret CXR in foreign body aspiration and lower respiratory tract infection, understand the significance of thymic shadow in pediatric chest X-rays	16.3
PE28.18:	Describe the etiopathogenesis, diagnosis, clinical features, management and prevention of lower respiratory infections including bronchiolitis, wheeze associated LRTI pneumonia and empyema	16.7, 16.9, 16.12
PE28.19:	Describe the etiopathogenesis, diagnosis, clinical features, management and prevention of asthma in children	16.8
PE28.20:	Counsel the child with asthma on the correct use of inhalers in a simulated environment	16.8, 32.5
TOPIC: Anemia and Other Hemato-oncologic Disorders in Children		
PE29.1:	Discuss the etiopathogenesis, clinical features, classification and approach to a child with anemia	19.2
PE29.2:	Discuss the etiopathogenesis, clinical features and management of iron deficiency anemia	19.4
PE29.3:	Discuss the etiopathogenesis, clinical features and management of Vit B12, Folate deficiency anemia	19.4
PE29.4:	Discuss the etiopathogenesis, clinical features and management of hemolytic anemia, thalassemia major, sickle cell anemia, hereditary spherocytosis, autoimmune hemolytic anemia and hemolytic uremic syndrome	19.5
PE29.5:	Discuss the National Anemia Control Programme	19.4
PE29.6:	Discuss the cause of thrombocytopenia in children: describe the clinical features and management of idiopathic thrombocytopenic purpura (ITP)	19.11
PE29.7:	Discuss the etiology, classification, pathogenesis and clinical features of hemophilia in children	19.12
PE29.8:	Discuss the etiology, clinical presentation and management of acute lymphoblastic leukemia in children	20.2
PE29.9:	Discuss the etiology, clinical presentation and management of lymphoma in children	20.3
PE29.10:	Elicit, document and present the history related to hematology	19.2, 19.10
PE29.11:	Identify external markers for hematological disorders, e.g. jaundice, pallor, petechiae purpura, ecchymosis, lymphadenopathy, bone tenderness, loss of weight, mucosal and large joint bleed	19.2, 19.10, 19.17
PE29.12:	Perform examination of the abdomen, demonstrate organomegaly	14.2, 15.2, 19.16
PE29.13:	Analyse symptoms and interpret physical signs to make a provisional/ differential diagnosis	19.2, 19.10
PE29.14:	Interpret CBC, LFT	19.2, 15.1
PE29.15:	Perform and interpret peripheral smear	19.2
PE29.16:	Discuss the indications for hemoglobin electrophoresis and interpret report	19.2, 19.5
PE29.17:	Demonstrate performance of bone marrow aspiration in manikin	32.6
PE29.18:	Enumerate the referral criteria for hematological conditions	19.2,4-15
PE29.19:	Counsel and educate patients about prevention and treatment of anemia	19.2,4-6
PE29.20:	Enumerate the indications for splenectomy and precautions	19.16.1
TOPIC: Systemic Pediatrics–Central Nervous System		
PE30.1:	Discuss the etiopathogenesis, clinical features, complications, management and prevention of meningitis in children	18.12
PE30.2:	Distinguish bacterial, viral and tuberculous meningitis	18.12
PE30.3:	Discuss the etiopathogenesis, classification, clinical features, complication and management of hydrocephalus in children	18.10
PE30.4:	Discuss the etiopathogenesis, classification, clinical features, and management of microcephaly in children	18.10,23.2
PE30.5:	Enumerate the neural tube defects. Discuss the causes, clinical features, types, and management of neural tube defect	18.10
PE30.6:	Discuss the etiopathogenesis, clinical features, and management of infantile hemiplegia	18.7-8
PE30.7:	Discuss the etiopathogenesis, clinical features, complications and management of febrile seizures in children	18.6
PE30.8:	Define epilepsy. Discuss the pathogenesis, clinical types, presentation and management of epilepsy in children	18.6
PE30.9:	Define status Epilepticus. Discuss the clinical presentation and management	18.6
PE30.10:	Discuss the etiopathogenesis, clinical features and management of mental retardation in children	3.6

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PE30.11: Discuss the etiopathogenesis, clinical features and management of children with cerebral palsy	18.11
PE30.12: Enumerate the causes of floppiness in an infant and discuss the clinical features, differential diagnosis and management	18.19
PE30.13: Discuss the etiopathogenesis, clinical features, management and prevention of poliomyelitis in children	10.21
PE30.14: Discuss the etiopathogenesis, clinical features and management of Duchenne muscular dystrophy	18.18
PE30.15: Discuss the etiopathogenesis, clinical features and management of ataxia in children	18.9
PE30.16: Discuss the approach to and management of a child with headache	18.5
PE30.17: Elicit document and present an age appropriate history pertaining to the CNS	18.1
PE30.18: Demonstrate the correct method for physical examination of CNS including identification of external markers. Document and present clinical findings	18.1
PE30.19: Analyse symptoms and interpret physical findings and propose a provisional /differential diagnosis	18.1, 18.3-9, 18.17, 18.19
PE30.20: Interpret and explain the findings in a CSF analysis	18.2
PE30.21: Enumerate the indication and discuss the limitations of EEG, CT, MRI	18.2
PE30.22: Interpret the reports of EEG, CT, MRI	18.2
PE30.23: Perform in a mannequin lumbar puncture. Discuss the indications, contraindication of the procedure	18.2, 32.6
TOPIC: Allergic Rhinitis, Atopic Dermatitis, Bronchial Asthma, Urticaria Angioedema	
PE31.1: Describe the etiopathogenesis, management and prevention of allergic rhinitis in children	16.5
PE31.2: Recognize the clinical signs of allergic rhinitis	16.5
PE31.3: Describe the etiopathogenesis, clinical features and management of atopic dermatitis in children	25.8
PE31.4: Identify atopic dermatitis and manage	25.8
PE31.5: Discuss the etiopathogenesis, clinical types, presentations, management and prevention of childhood asthma	16.8
PE31.6: Recognise symptoms and signs of asthma	16.8
PE31.7: Develop a treatment plan for asthma appropriate to clinical presentation and severity	16.8
PE31.8: Enumerate criteria for referral	16.8
PE31.9: Interpret CBC and CX-ray in asthma	16.8
PE31.10: Enumerate the indications for PFT	16.3, 16.8
PE31.11: Observe administration of nebulization	16.8, 32.5
PE31.12: Discuss the etiopathogenesis, clinical features and complications and management of urticaria angioedema	25.5
TOPIC: Chromosomal Abnormalities	
PE32.1: Discuss the genetic basis, risk factors, complications, prenatal diagnosis, management and genetic counseling in Down's syndrome	11.3
PE32.2: Identify the clinical features of Down's syndrome	11.3
PE32.3: Interpret normal Karyotype and recognize Trisomy 21	11.3
PE32.4: Discuss the referral criteria and multidisciplinary approach to management	11.3
PE32.5: Counsel parents regarding 1. Present child 2. Risk in the next pregnancy	11.3
PE32.6: Discuss the genetic basis, risk factors, clinical features, complications, prenatal diagnosis, management and genetic Counseling in Turner's syndrome	11.3
PE32.7: Identify the clinical features of Turner syndrome	11.3
PE32.8: Interpret normal Karyotype and recognize the Turner karyotype	11.3
PE32.9: Discuss the referral criteria and multidisciplinary approach to management of Turner syndrome	11.3
PE32.10: Counsel parents regarding 1. Present child, 2. Risk in the next pregnancy	11.3
PE32.11: Discuss the genetic basis, risk factors, complications, prenatal diagnosis, management and genetic Counseling in Klinefelter syndrome	11.3
PE32.12: Identify the clinical features of Klinefelter syndrome	11.3
PE32.13: Interpret normal karyotype and recognize the klinefelter karyotype	11.3
TOPIC: Endocrinology	
PE33.1: Describe the etiopathogenesis clinical features, management of hypothyroidism in children	22.3
PE33.2: Recognize the clinical signs of hypothyroidism and refer	22.3
PE33.3: Interpret and explain neonatal thyroid screening report	22.3
PE33.4: Discuss the etiopathogenesis, clinical types, presentations, complication and management of diabetes mellitus in children	22.7
PE33.5: Interpret blood sugar reports and explain the diagnostic criteria for Type 1 Diabetes	22.7
PE33.6: Perform and interpret urine dip stick for sugar	22.7
PE33.7: Perform genital examination and recognize ambiguous genitalia and refer appropriately	22.6
PE33.8: Define precocious and delayed puberty	22.6
PE33.9: Perform sexual maturity rating (SMR) and interpret	13.1
PE33.10: Recognize precocious and delayed puberty and refer	22.6
PE33.11: Identify deviations in growth and plan appropriate referral	2.4-5

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TOPIC: Vaccine Preventable Diseases–Tuberculosis	
PE34.1: Discuss the epidemiology, clinical features, clinical types, complications of tuberculosis in children and adolescents	10.13
PE34.2: Discuss the various diagnostic tools for childhood tuberculosis	10.13
PE34.3: Discuss the various regimens for management of tuberculosis as per national guidelines	10.13
PE34.4: Discuss the preventive strategies adopted and the objectives and outcome of the National Tuberculosis Control Programme	10.13
PE34.5: Able to elicit, document and present history of contact with tuberculosis in every patient encounter	10.13
PE34.6: Identify a BCG scar (Photograph)	10.13, 9.2
PE34.7: Interpret a Mantoux test	10.13
PE34.8: Interpret a chest radiograph	10.13
PE34.9: Interpret blood tests in the context of laboratory evidence for tuberculosis	10.13
PE34.10: Discuss the various samples for demonstrating the organism, e.g. gastric aspirate, sputum, CSF, FNAC	10.13
PE34.11: Perform AFB staining	10.13
PE34.12: Enumerate the indications and discuss the limitations of methods of culturing <i>M. tuberculosis</i>	10.13
PE34.13: Enumerate the newer diagnostic tools for tuberculosis including BACTEC, CBNAAT and their indications	10.13
PE34.14: Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of fever in children	10.1
PE34.15: Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with exanthematous illness like Measles, Mumps, Rubella and Chickenpox	10.1, 10.18-20
PE34.16: Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Diphtheria, Pertussis, Tetanus.	10.1, 10.5-6, 10.15
PE34.17: Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with typhoid	10.1, 10.7
PE34.18: Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Dengue, Chikungunya and other vector born diseases	10.1, 10.23
PE34.19: Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of children with common parasitic infections, malaria, leishmaniasis, filariasis, helminthic infestations, amebiasis, giardiasis	10.1, 10.33-37
PE34.20: Enumerate the common causes of fever and discuss the etiopathogenesis, clinical features, complications and management of child with Rickettsial diseases	10.1, 10.17
TOPIC: The Role of the Physician in the Community	
PE35.1: Identify, discuss and defend medicolegal, socio-cultural and ethical issues as they pertain to health care in children (including parental rights and right to refuse treatment)	27.4, 28.4, 32.1