

**COURSE CURRICULUM FOR THIRD PROFESSIONAL B.U.M.S.
(PRESCRIBED BY NCISM)**

**AMRAZE JILD WA TAZEENIYAT
(Dermatology and Cosmetology)**

(SUBJECT CODE : UNIUG-AJT)

(Applicable from 2021-22 batch, from the academic year 2024-25 onwards for 5 batches or until further notification by NCISM, whichever is earlier)



॥ आयुषे सर्वलोकानाम् ॥

**BOARD OF UNANI, SIDDHA AND SOWA-RIGPA
NATIONAL COMMISSION FOR INDIAN SYSTEM OF MEDICINE
NEW DELHI-110026**



NCISM

III Professional Kamil-e-Tib-o-Jarahat
(Bachelor of Unani Medicine and Surgery(B.U.M.S.))

Subject Code : UNIUG-AJT

Amraze jild wa Tazeeniyat
(Dermatology and Cosmetology)

Summary

Total number of Teaching hours: 210			
Lecture (LH) - Theory		70	70(LH)
Paper I	70		
Non-Lecture (NLHT)		40	140(NLH)
Paper I	40		
Non-Lecture (NLHP)		100	
Paper I	100		

Examination (Papers & Mark Distribution)					
Item	Theory Component Marks	Practical Component Marks			
		Practical	Viva	Elective	IA
Paper I	100	100	20	10 (Set-TB)*	20
Sub-Total	100	150			
Total marks	250				

Important Note:- The User Manual III BUMS is a valuable resource that provides comprehensive details about the curriculum file. It will help you understand and implement the curriculum. Please read the User Manual III before reading this curriculum file. The curriculum file has been thoroughly reviewed and verified for accuracy. However, if you find any discrepancies, please note that the contents related to the MSE should be considered authentic. In case of difficulty and questions regarding curriculum write to syllabus24uni@ncismindia.org

Preface

The field of Unani *Amraze Jild wa Tazeeniyat* (Dermatology and Cosmetology) has seen rapid advances, integrating traditional Unani principles with modern medical insights. This integration creates a unique learning opportunity for Kamil-e-Tib wa Jarahat (Bachelor of Unani Medicine and Surgery) students to understand and address skin ailments effectively along with use of classical Unani regimens for varied cosmetological purposes. Recognizing the diverse, evolving demands of healthcare in dermatology, this syllabus is designed as a competency-based curriculum and syllabus framework. It provides a structured approach that not only promotes the acquisition of knowledge but also emphasizes practical skills essential for the holistic care of patients within Unani medicine.

The competency-based approach emphasizes the development of practical and diagnostic skills over mere theoretical knowledge, allowing graduates to confidently identify and treat a range of skin conditions. This syllabus is built so that it covers a specific competency area, from foundational knowledge of applied skin anatomy and pathology to hands-on experience with treatments and other regimens specific for skin health and cosmetic care. Key areas include the identification and management of common skin diseases such as eczema, psoriasis, vitiligo, and acne, Hair loss, SLE and other autoimmune disorders, alongside the integration of modern diagnostic techniques and the latest advancements in cosmetology.

Further, this syllabus emphasizes clinical exposure, where students will observe and practice under the guidance of skilled professionals. This hands-on training will be instrumental in developing essential skills, enabling graduates to provide quality patient care in dermatology within the Unani framework encompassing recent advances. To ensure comprehensive learning, assessments are skill-based and designed to evaluate each student's capability in diagnosing and managing dermatological conditions, applying Unani treatments, and utilizing advanced equipment effectively when required.

This syllabus incorporates training and ethical practices which are crucial for building trust in the physician-patient relationship. By adopting this competency-based model of learning, Unani graduates will be better equipped in dealing the dermatological issues Comprehensively by adopting the blend of Unani and Contemporary dermatological practices.

This competency-based syllabus for *Amraze Jild wa Tazeeniyat* encourages early exposure to research, innovation, and entrepreneurship, empowering BUMS graduates to enhance Unani Dermatology and Cosmetology through evidence-based approaches, modern adaptations, and community-focused solutions. This foundation ensures they not only master traditional practices but also lead in expanding Unani medicine's relevance and accessibility in dermatological care.

It is our hope that this approach will cultivate a new generation of BUMS graduates who are not only skilled in dermatological care but also committed to the well-being and confidence of their patients through compassionate and competent service.

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Course Code and Name of Course

Course code	Name of Course
UNIUG-AJT	Amraze jild wa Tazeeniyat

Table 1 : Course learning outcomes and mapped PO

SR1 CO No	A1 Course learning Outcomes (CO) UNIUG-AJT At the end of the course UNIUG-AJT, the students should be able to	B1 Course learning Outcomes mapped with program learning outcomes.
CO1	Illustrate the basic structural and functional variability of skin, hair and nails; relates them with etiopathogenesis of respective diseases in line with the principles of Unani dermatology.	PO1,PO2
CO2	Exhibit fundamental knowledge of Unani Cosmetology and its application.	PO1,PO2
CO3	Demonstrate communication skills and clinical acumen of history taking, clinical examination, diagnosis and differential diagnosis, suggesting investigations and management including Ilaj bil Dawa, Ilaj bil Giza, Ilaj bit Tadabir, for diseases of skin, hair and nails and documentation.	PO1,PO2,PO3,PO4,PO5
CO4	Demonstrate regimens and procedures advised for various Dermatological and cosmetic purposes.	PO1,PO2
CO5	Explain the role of nutrition and care for skin, hairs and nails.	PO1,PO2
CO6	Correlate contemporary knowledge with the Unani descriptions of diseases affecting the skin, hair and nails; devising treatment strategies based on Unani principles	PO2,PO8
CO7	Exhibit professional and moral ethics in Unani Dermatological and Cosmetological practices.	PO7
CO8	Develop insight for research, innovation and entrepreneurship in Unani Dermatology and Cosmetology.	PO1,PO6,PO8

Table 2 : Contents of Course

Paper 1 (Amraz-e-Jild wa Tazeeniyat (Skin Diseases and Cosmetology))						
Sr.No	A2 List of Topics	B2 Term	C2 Marks	D2 Lecture hours	E2 NonLecture hours Theory	F2 NonLecture hours Practica I
1	<p>1.1. جلد کی مختصر اطلاقی تشریح و منافع</p> <p>Jild ki Mukhtasar Itlaqi Tashreeh wa Manafe</p> <p>(Brief applied Anatomy and Physiology of skin)</p> <p>LH: 02, NLHT: 01, NLHP: 00</p> <p>1.2. جلد کے اقسام و متغیرات اور طبی معائنہ</p> <p>Jild ke aqsaam wa mutaghaiyarat aur tibbi muaena</p> <p>(Clinical examination of Skin, types of skin and its variants)</p> <p>LH: 01, NLHT: 01, NLHP: 05</p> <p>1.3. امراض جلد کی عام علامات و نشانیوں اور امراض نظامی کی جلدی علامات</p> <p>Amraze Jild ki Aam Alamaat wa Nishaaniya aur degar Amraz -e- Nizami ki Jildi alamaat (General signs and symptoms of skin diseases; and Cutaneous manifestations of systemic diseases)</p> <p>LH: 01, NLHT: 01, NLHP: 05</p>	1	10	6	4	12

	<p>1.4. امراض جلد کا بنیادی اصول علاج</p> <p>Amraze Jild ka buniyadi Usoole Ilaj</p> <p>(Basic principle of treatment in skin diseases)</p> <p>LH: 01, NLHT: 00, NLHP: 00</p> <p>1.5. امراض جلد و تزئینات میں مستعمل ادویات</p> <p>Amraze Jild wa Tazeeniyat me Mustamal Advaiyat</p> <p>(Medicine used in skin diseases and cosmetology)</p> <p>LH: 01, NLHT: 01, NLHP: 02</p>					
2	<p>2 Tazeeniyat Part-1 (Cosmetology Part-1)</p> <p>2.1. الف) ڈرگ اینڈ کاسمیٹک ایکٹ اینڈ رول کا مختصر تفصیل بالخصوص باب چہارم</p> <p>Drug and Cosmetics Act aur Rules ka mukhtasar tafseel bil khusoos bab chharum A</p> <p>(Brief description of Drug and Cosmetics act and rules especially Chapter IV A)</p> <p>L: 2, NLHT: 1, NLHP: 0</p> <p>2.2. تزئینات کے علاج و معالجہ میں اخلاقی اقدار</p> <p>Tazeeniyat ke ilaj wa moalejah me akhlaqi aqdar</p> <p>(Ethics in practice of Cosmetology)</p> <p>L: 2, NLHT: 1, NLHP: 3</p> <p>2.3. تزئینات کا عمومی بیان</p> <p>Tazeeniyat ka umoomi bayan</p>	1	10	7	2	6

	<p>(General Description of Cosmetology)</p> <p>L: 1, NLHT: 0, NLHP: 0</p> <p>2.4. جلد کا تغذیہ و نگہداشت</p> <p>Jild ka Taghziya wa Nigahdasht</p> <p>(Nutrition and Care of Skin)</p> <p>L: 1, NLHT: 0, NLHP: 2</p> <p>2.5. انفار کا تغذیہ و نگہداشت</p> <p>Azfar ka Taghziya wa Nigahdasht</p> <p>(Nutrition and care of Nails)</p> <p>L: 1, NLHT: 0, NLHP: 1</p>					
3	<p>3 جلد کے ویریسی امراض (Viral diseases in Jild ke Vairusi Amraz (Viral diseases in Dermatology)</p> <p>3.1. حبسہ Hasba (Measles)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p> <p>3.2. حمیقاء Humayqa (Chicken pox/ Varicella)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>3.3. جدری Judari (Small Pox)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p> <p>3.4. نملہ Namla (Herpes)</p> <p>LH: 1, NLHT: 1, NLHP: 3</p> <p>3.5. وقتاً فوقتاً رونما ہونے والے ویریسی امراض اور ان کی جلدی علامات</p>	1	10	5	5	7

	<p>Waqtan fawaqtan runuma hone wale Virusi Amraz aur unki Jildi alamaat (Cutaneous manifestation of evolving viral infectious diseases)</p> <p>LH: 1, NLHT: 1, NLHP: 0</p>					
4	<p>4 جلد کے فنجائی امراض Jild ke Fungal Amraz (Fungal diseases in Dermatology)</p> <p>4.1. قوبا Qooba (Dermatophytosis)</p> <p>LH: 1, NLHT: 0, NLHP: 3</p> <p>4.2. داء المبيضات Daul-Mabeezat (Candidiasis)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p>	1		2	1	5
5	<p>5 جلد کے جراثیمی امراض Jild ke Jarasimi Amraz (Bacterial diseases in Dermatology)</p> <p>5.1. جذام Judham (Hansen's disease)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>5.2. آتشک Atshak (Syphilis)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>5.3. نفاطات طفلیہ Naffatat Tafliyya (Impetigo)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>5.4. دق الجلد Diqq-ul-Jild (TB of Skin)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>5.5. سرخبادہ Surkhbada (Erysipelas) & التهاب نسج خلوی Iltehab Nasij Khalawi (Cellulitis)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p>	2	10	8	3	5

	<p>5.6. دُنبَل Dumbal (Boils or Furuncles)</p> <p>LH: 1, NLHT: 1, NLHP: 0</p> <p>5.7. خُرَاج Khuraj (Abscess)</p> <p>LH: 1, NLHT: 0, NLHP: 0</p> <p>5.8. شَب چَرَاغ Shabchiragh (Carbuncle)</p> <p>LH: 1, NLHT: 1, NLHP: 0</p>					
6	<p>6 جلد کے طفیلی امراض Jild ke Tufaili Amraz (Parasitic diseases in Dermatology)</p> <p>6.1. جرب Jarb (Scabies)</p> <p>LH: 1, NLHT: 0, NLHP: 2</p> <p>6.2. عرق مدنی اور جلدی کالا زار Irq-e-madni (Dracunculiasis medinensis) aur Jildi Kala Azar (Cutaneous Leishmaniasis)</p> <p>LH: 1, NLHT: 0, NLHP: 2</p> <p>6.3. داء الفیل Daa-ul-Feel (Elephantiasis/Filariasis)</p> <p>LH: 1, NLHT: 0, NLHP: 2</p>	2		3	0	6
7	<p>7 جلد کے غیر متعدی امراض Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology)</p> <p>7.1. شور لبنیہ Basoor-e-Labniya (Acne Vulgaris)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>7.2. نار فارسی Naar-e-Farsi (Eczema)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p>	2	15	12	9	18

<p>7.3. التهاب عروق Iltehab e Urooq (Vasculitis)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p> <p>7.4. حكة Hikka (Pruritus)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>7.5. شرى و بنات اللیل Shara (Urticaria) and Banaat-ul-Lail</p> <p>LH: 1, NLHT: 0, NLHP: 2</p> <p>7.6. مسطح حزاز Huzzaz-e-Musattah (Lichen Planus)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>7.7. تقشر جلد Taqashur-e-Jild (Psoriasis)</p> <p>LH: , NLHT: 1, NLHP: 2</p> <p>7.8. نفاطات Naffata (Pemphigus)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>7.9. ذنب حمامیه نظامی Zaib-e-Humamiya Nizami [(Systemic Lupus Erythematosus (SLE)]</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>7.10. بادشنام Badshanam (Acne Rosacea)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p> <p>7.11. دیگر غیر متعددی جلدی امراض</p> <p>Deegar Ghair Mutaddi Jildi Amraz (Other Non-Infectious Skin Disorders)</p>					
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	<p>شواک اسود, Taqallus Mahi (Ichthyosis) تقلس مانی Shuwak-e-Aswad (Acanthosis Nigricans)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p>					
8	<p>8 تازینیات حصہ دوم Tazeeniyat Part-2 (Cosmetology Part-2)</p> <p>8.1. باالوں کا تغذیہ و نگہداشت Baalon ka Taghziya wa Nigahdasht (Nutrition and Care of Hairs)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p> <p>8.2. چہرہ کی نگہداشت کی تدابیر Chehre ki Nigahdasht ki Tadabeer (Measures for Facial Care)</p> <p>LH: 1, NLHT: 0, NLHP: 2</p> <p>8.3. شیخوخت جلد و مانع شیخوخت تدابیر Shaikhokhiyat-e-Jild wa Mane Shaikhokhiyat Tadabeer (Skin Aging and Anti-aging Measures)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>8.4. جلد پر آفتاب کی شعاعوں اور ماحولیات کے اثرات اور ان سے حفاظت کی تدابیر Jild per Aftab ki shu'aon aur maholiyat ke asraat aur un se hifazat ki tadabeer (Effect of sun exposure and environment on skin and their protective measures)</p> <p>LH: 1, NLHT: 0, NLHP: 2</p> <p>8.5. خوشبو، عطر اور مانعات بدبو کا استعمال Khushboo, Itr, aur Mane-aat-e-Badboo ka Istemaal (Use of Perfumes/ Itr, Deodorants)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p>	2	15	5	2	8

9	<p>9 فساد لون Fasad-e-Laun (Disorders of Pigmentation)</p> <p>9.1. برس Bars (Vitiligo)</p> <p>LH: 01, NLHT: 01, NLHP: 02</p> <p>9.2. بہن، کلف، برش، نمش</p> <p>Bahaq (Pityriasis), Kalaf (Melasma/Chloasma), Barsh (Freckles), Namash (Nevus)</p> <p>LH: 01, NLHT: 01, NLHP: 01</p>	2		2	2	3
10	<p>10 غیرطبعی زوائد Jild ke Ghair Tabai Zawaid (Abnormal Growths of Skin)</p> <p>10.1. ٹالیل Sa'leel (Verrucae/warts)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p> <p>10.2. سرطان جلد و سلعات Sal'aat (Tumours) wa Sartan-e-Jild (Carcinoma of Skin)</p> <p>LH: 1, NLHT: 1, NLHP: 1</p>	3	10	2	2	2
11	<p>11 دیگر جلدی امراض Deegar Jildi Amraz (Other Skin Conditions)</p> <p>11.1. کثرت عرق، قلت عرق، عرق مستن</p> <p>Kasrat-e-Arq (Hyperhidrosis), Qillat-e-Arq (Anhidrosis), Arq-e-Muntin (Bromhidrosis)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>11.2. حصف Hasaf (Miliria)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>11.3. مرض حصاف Marz-e-Husaaf (Pellagra)</p>	3		5	1	6

	<p>LH: 1, NLHT: 0, NLHP: 1</p> <p>11.4. تشریح الجلد Tasharrughul Jild (Phrynoderma)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>11.5. دوالی Duali (Vericose Vein)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p>					
12	<p>12 امراض شعر Amraze Shaa'r (Diseases of Hair)</p> <p>12.1. بالوں کے اقسام و متغیرات اور بالوں کا دورانیہ</p> <p>Balon ke aqsaam wa mutaghaiyarat, aur Balon ka dauraniya (Types and Variants of Hair and Hair Cycle)</p> <p>LH: 1, NLHT: 0, NLHP: 3</p> <p>12.2. انتشار شعر Intishar-e-Shaa'r (Hair Fall)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>12.3. داء الحیہ و داء الثعلب، سحفة، صلح</p> <p>Da-us-Salab aur Da-ul-Haiya; Saa'fa (Favus), Sal'a (Baldness)</p> <p>LH: 1, NLHT: 0, NLHP: 1</p> <p>12.4. بفا Bafa (Seborrhoea of Scalp)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>12.5. شیب Shaib (Premature Greying of Hair)</p> <p>LH: 1, NLHT: 0, NLHP: 0</p> <p>12.6. نموست / نموسہ، قمل و صیدیان</p>	3	10	6	3	8

	<p>Namoosat/Namusa (Smelly Scalp Syndrome); Qumal wa Si'byan (Pediculosis)</p> <p>LH: 1, NLHT: 1, NLHP: 0</p>					
13	<p>13 امراض انگفار Amraze Azfar (Diseases of Nails)</p> <p>13.1. غیر طبعی انگفار اور ان کا امتحان. Ghair tabai Azfar aur unka Imtihan</p> <p>(Abnormal presentation of Nails and their examination)</p> <p>LH: 1, NLHT: 1, NLHP: 2</p> <p>13.2. ظفر طلقیہ Zufra-e-Talqiya (Onychomycosis),</p> <p>داخس Daakhis (Paronychia/Whitlow)</p> <p>ظفر ناشب In-growing Nails (Onychocryptosis or Unguis Incarnates)</p> <p>LH: 1, NLHT: 0, NLHP: 2</p>	3		2	1	4
14	<p>14 تزئینات حصہ سوم Tazeeniyat Part-3 (Cosmetology Part-3)</p> <p>14.1. زیبہ کی عمومی تدابیر. Zeenat-e-Jild ki Umoomi Tadabeer</p> <p>(Common Measures for Beautification of Skin),</p> <p>حمام Hammam</p> <p>غسول Ghasool</p> <p>ریاضت وچہ Riyazat-e-Wajh</p> <p>انکباب Inkibab</p> <p>ضماد Zimad</p>	3	10	5	5	10

<p>طلاء Tila</p> <p>غازه Ghaza</p> <p>غاليه Ghaliya</p> <p>ابتن Ubtan</p> <p>مسي Missi</p> <p>روشويه Rooshoya (Face Wash),</p> <p>قشور Qashoor (Scrub)</p> <p>برود Barood,</p> <p>حنا Hina,</p> <p>سرمه / سکل Surma,</p> <p>کاجل Kajal,</p> <p>مسکارا Mascara,</p> <p>عمل تبييض Bleaching,</p> <p>ازالہ اشعر بذريعه موم Waxing,</p> <p>وشم Washam (Tattooing),</p> <p>L: 1 NLHT: 1 NLHP: 2</p> <p>14.2. متعلق عمومي تدابير Baalon ki Zeenat se Mutalliq Umoomi Tadabeer (Common Measures for Beautification of Hairs),</p> <p>تطويل شعر Tatweel-e-Shaar, بالوں کا دراز بنانا / تطويل شعر,</p>					
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<p>ہنگھریلے بنانا/تجمید شعر Tazeed-e-Shaar (Curling of hair),</p> <p>ہالوں کاسیدھا کرنا/تسبیط شعر Straightening of Hair (Tasbeet-e-Shaar),</p> <p>ہالوں کا اگانا/انبات شعر Inbat-e-Shaar (hair growing),</p> <p>نورہ Naura (Hair Remover),</p> <p>حلق الوجہ Halq-ul-Wajh (Facial Epilation),</p> <p>تشتق شعر کی حفاظتی تدابیر (Preventive Measures for Splitting of Hairs),</p> <p>تالوین شعر/انباتی خضابات Talween-e-Shaar (Herbal Hair Dyes).</p> <p>L: 1 NLHT: 1 NLHP: 2</p> <p>14.3. تنخیل Taghseel (Spa Therapy) Skin Tightening, Wrinkles, Skin glowing, Dry skin, Creepy skin, Facial care. Pedicure and manicure.</p> <p>L: 1 NLHT: 1 NLHP: 2</p> <p>14.4. مانع شکن تدابیر Mane-e-ShikanTadabeer (Anti-wrinkle Measures),</p> <p>Micro-needling, Facial massage, Use of Derma roller ,</p> <p>PRP , انکباب Inkebaab, Steam Inhalation, روشویہ Rooshoyah (Face Wash).</p> <p>L: 1 NLHT: 1 NLHP: 2</p>					
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	<p>14.5. امراض جلد میں طبی ہنگامی حالات اور جان لیوا امراض Amraze Jild me Tibbi Hangami Halaat aur Jaan lewa Amraz (Medical emergencies in Dermatology and Life-threatening Skin Disorders).</p> <p>Brief Introduction of the following disorders:</p> <ul style="list-style-type: none"> • Anaphylaxis • Toxic Epidermal Necrolysis (TEN) • Stevens-Johnson Syndrome (SJS) • Erythroderma • Necrotizing Fasciitis • Angioedema • Drug reaction with eosinophilia and systemic symptoms (DRESS) Syndrome <p>L: 1 NLHT: 1 NLHP: 2</p>				
	Total	100	70	40	100
	Grand Total	100	70	40	100

Table 3 : Learning objectives of Course

Paper 1 (Amraz-e-Jild wa Tazeeniyat (Skin Diseases and Cosmetology))										
A3 Course outcome	B3 Learning Objective (At the end of the session, the students should be able to)	C3 Domain/sub	D3 MK/ DK / NK	E3 Level	F3 T-L method	G3 Assessment	H3 Assessment Type	I3 Term	J3 Integration	K3 Type
Topic 1 امراض جلد و تزئینات کا عمومی بیان Amraze Jild wa Tazeeniyat ka Umoomi Bayan (General description of Dermatology and Cosmetology) (LH : 6, NLHT: 4, NLHP: 12 hours)										
A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO1	Enumerate and explain the layers of skin and their functions.	CK	MK	K	L&PPT	P-EXAM, VV-Viva	F&S	1	-	LH
CO1	Discuss the functions and clinical significance of different layers of skin.	CC	MK	KH	DIS	M-POS, PRN, M- MOD, M- CHT, P- EXAM	F&S	1	-	NLHT1.1
CO1	Enlist and mention the types of skin and their variations observed in clinical practice.	CK	MK	K	L&PPT	P-VIVA, P- EXAM	F&S	1	-	LH
CO1	Discuss the stepwise procedure of examination of skin	CAP	MK	KH	CBL	CL-PR, M- CHT, P- EXAM, M- MOD, P- PRF	F&S	1	-	NLHT1.2

CO1, CO2, CO3	Demonstrate the skills of skin examination in a given clinical scenario.	PSY-MEC	MK	SH	FV, D-M, DIS, RP, PBL	OSCE, QZ , SBA, P- EXAM, P- VIVA	F&S	1	-	NLHP1.1
CO1, CO2, CO3	Describe general signs and symptoms of skin diseases; and cutaneous manifestations of systemic diseases.	CK	MK	K	L&PPT	P-EXAM, P- VIVA	F&S	1	-	LH
CO1, CO2, CO3, CO5	Illustrate and differentiate cutaneous manifestations of systemic diseases from skin diseases.	CC	MK	KH	PER, DIS	P-EXAM, VV-Viva, P- VIVA	F&S	1	-	NLHT1.3
CO1, CO2, CO3, CO6, CO7	Identify and interpret different types of skin lesions.	CAN	MK	KH	PBL, CD, D, DIS, D- M	OSCE, PA, P-VIVA, P- RP, PRN	F&S	1	-	NLHP1.2
CO2, CO3, CO4, CO6, CO7	Describe the basic principles of treatment in skin diseases.	CK	MK	K	L&PPT	P-EXAM, P- VIVA	F&S	1	-	LH
CO2, CO3, CO6	Enlist and review the Medicines used in skin diseases and cosmetology.	CK	MK	K	L&PPT	P-EXAM, P- VIVA	F&S	1	-	LH
CO2, CO3, CO6	Classify the medicines used in skin diseases and cosmetology and investigate their role in clinical practice.	CC	MK	KH	PER, DIS	P-VIVA, PRN	F&S	1	-	NLHT1.4

CO2, CO3, CO6	Personalize the utilization of different medicines used in skin diseases and cosmetology according to the patient's needs.	CAP	MK	KH	SIM, DIS, D- M, PT	OSCE, S- LAQ, P- VIVA, P- EXAM, QZ	F&S	1	-	NLHP1.3
Non Lecture Hour Theory										
S.No	Name	Description of Theory Activity								
NLHT1.1	Anatomy and Physiology of Skin.	<p>Learn and discuss the layers of skin and its functions.</p> <p>Focus on the applied part of the anatomy of the skin and discuss various functions of the skin.</p>								
NLHT1.2	Examination of the skin, its types, and their variations.	<p>Students should learn to examine the patient by performing the following steps:</p> <p>Skin Examination:</p> <p>Visual Inspection:</p> <ol style="list-style-type: none"> 1. Color: Note any abnormalities (e.g., erythema, jaundice). 2. Texture: Assess smoothness, roughness, or scaling. 3. Moisture: Evaluate hydration levels. 4. Elasticity: Check the skin's ability to snap back. 5. Lesions: Document size, shape, color, location, and distribution. <p>Palpation:</p>								

		<p>1. Temperature: Check for warmth or coolness.</p> <p>2. Texture: Assess roughness, smoothness, or nodularity.</p> <p>3. Tenderness: Evaluate pain or discomfort.</p> <p>4. Induration: Check for hardened or thickened skin.</p> <p>Regional Examination:</p> <p>1. Face: Inspect for acne, rosacea, or hyperpigmentation.</p> <p>2. Hands: Check for dryness, cracking, or eczema.</p> <p>3. Feet: Evaluate for fungal infections, ulcers, or calluses.</p> <p>4. Body: Examine for lesions, rashes, or skin conditions.</p> <p>Classify the skin types and their variations.</p>
NLHT1.3	Signs and symptoms of skin diseases and cutaneous manifestations of systemic diseases.	<ul style="list-style-type: none"> Describe the primary, secondary and special skin lesions. Explain the Busoorat according to Unani philosophy.
NLHT1.4	Use of Medicines in Dermatology and Cosmetology.	Identify the medications according to their Afaal wa khaawas and their application as topical or systemic treatment in dermatology and cosmetology.
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP1.1	Examination of the skin, Types of skin and its variants	<p>1. Demonstration by Teacher</p> <ul style="list-style-type: none"> Show students how to conduct a systematic skin examination on a volunteer or mannequin.

		<ul style="list-style-type: none">○ Use models, videos, and diagrams to illustrate normal vs. abnormal findings.○ Demonstrate basic dermatological tools (dermatoscope, magnifying glass, Wood's lamp).● Student Practice on Peers & Mannequins<ul style="list-style-type: none">○ Students practice inspecting and palpating different skin types.○ Work in pairs or small groups to discuss findings and compare variations.○ Use case scenarios to identify different skin conditions. <p>2. Interactive & Problem-Based Learning</p> <ul style="list-style-type: none">● Case Studies & Group Discussions<ul style="list-style-type: none">○ Provide real-life case scenarios for students to diagnose and describe.○ Encourage critical thinking and application of learned concepts.● Quiz & Identification Exercises<ul style="list-style-type: none">○ Use images, slides, and real-life examples to test students' ability to recognize skin types and conditions.● Role-Playing as Doctor & Patient<ul style="list-style-type: none">○ One student acts as a doctor, another as a patient with a described skin issue.
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		<ul style="list-style-type: none"> ○ Encourages communication skills and clinical reasoning. <p>3. Evaluation & Assessment</p> <ul style="list-style-type: none"> ● Practical Examination <ul style="list-style-type: none"> ○ Students perform a skin examination on a volunteer and describe findings. ● Objective Structured Clinical Examination (OSCE) <ul style="list-style-type: none"> ○ Stations with different skin conditions, images, or mannequins for assessment. ● Reflective Learning & Feedback <ul style="list-style-type: none"> ○ Students write a short reflection on what they learned and areas for improvement. ○ Teachers provide constructive feedback on technique and diagnostic skills. <p>4. Supplementary Learning Methods</p> <ul style="list-style-type: none"> ● Digital Learning Tools <ul style="list-style-type: none"> ○ Use apps, online quizzes, and virtual dermatology cases for self-study. ● Field Visits & Guest Lectures <ul style="list-style-type: none"> ○ Visit dermatology clinics for real-world exposure. ○ Invite dermatologists to share experiences and insights. <p>05 Hours</p>
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<p>NLHP1.2</p>	<p>Signs and symptoms of skin diseases and cutaneous manifestations of systemic diseases.</p>	<p>1. Live Demonstration by Teacher</p> <ul style="list-style-type: none"> • <ul style="list-style-type: none"> ○ Show students how to conduct a systematic skin examination on a volunteer or mannequin. ○ Use models, videos, and diagrams to illustrate normal vs. abnormal findings. ○ Demonstrate basic dermatological tools (dermatoscope, magnifying glass, Wood's lamp). <p>Student Practice on Peers & Mannequins</p> <ul style="list-style-type: none"> • Students practice inspecting and palpating different skin types. • Work in pairs or small groups to discuss findings and compare variations. • Use case scenarios to identify different skin conditions. <p>2. Interactive & Problem-Based Learning</p> <ul style="list-style-type: none"> • Case Studies & Group Discussions <ul style="list-style-type: none"> ○ Provide real-life case scenarios for students to diagnose and describe. ○ Encourage critical thinking and application of learned concepts. • Quiz & Identification Exercises <ul style="list-style-type: none"> ○ Use images, slides, and real-life examples to test students' ability to recognize skin types and conditions.
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		<ul style="list-style-type: none">● Role-Playing as Doctor & Patient<ul style="list-style-type: none">○ One student acts as a doctor, another as a patient with a described skin issue.○ Encourages communication skills and clinical reasoning. <p>3. Evaluation & Assessment</p> <ul style="list-style-type: none">● Practical Examination<ul style="list-style-type: none">○ Students perform a skin examination on a volunteer and describe findings.● Objective Structured Clinical Examination (OSCE)<ul style="list-style-type: none">○ Stations with different skin conditions, images, or mannequins for assessment.● Reflective Learning & Feedback<ul style="list-style-type: none">○ Students write a short reflection on what they learned and areas for improvement.○ Teachers provide constructive feedback on technique and diagnostic skills. <p>4. Supplementary Learning Methods</p> <ul style="list-style-type: none">● Digital Learning Tools<ul style="list-style-type: none">○ Use apps, online quizzes, and virtual dermatology cases for self-study.● Field Visits & Guest Lectures<ul style="list-style-type: none">○ Visit dermatology clinics for real-world exposure.
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		<ul style="list-style-type: none"> ○ Invite dermatologists to share experiences and insights. <p>05 Hours</p>
NLHP1.3	Medicine used in dermatology and cosmetology.	<p>1. Practical & Hands-on Training</p> <ul style="list-style-type: none"> ● Clinical Rotations & Observerships: Students work with dermatologists to diagnose and treat patients. ● Workshops & Hands-on Training: In cosmetic dermatology, students practice botox, fillers, laser therapy, and chemical peels on models or artificial skin. ● Live Demonstrations: Teachers perform procedures while explaining techniques and precautions. ● Simulation & Virtual Reality (VR): 3D models and VR allow students to practice before working on real patients. <p>2. Diagnostic Skill Development</p> <ul style="list-style-type: none"> ● Dermatoscope Training: Learning how to use a dermatoscope for mole mapping and skin cancer detection. ● AI & Digital Dermatology Tools: Use of AI-based apps and digital imaging for diagnosing skin conditions. <p>3. Continuous Assessment & Improvement</p> <ul style="list-style-type: none"> ● MCQs & Case Studies: Regular quizzes and case discussions to test understanding.

		<ul style="list-style-type: none"> Objective Structured Clinical Examination (OSCE): Practical exams where students demonstrate skills in diagnosing and treating skin conditions. Peer Learning & Group Discussions: Students discuss cases and share insights. <p>NLHP: 02 Hours</p>
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Topic 2 تزئینات حاصلہ Tazeeniyat Part-1 (Cosmetology Part-1) (LH : 7, NLHT: 2, NLHP: 6 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO7	Explain cosmetic act and rule briefly with special reference to Chapter IV A.	CK	MK	K	L&PPT	P-EXAM, P-VIVA, T-OBT	F&S	1	-	LH
CO2	Observe the implications of cosmetic act and rules in the clinical practice of Unani dermatology and cosmetology.	CC	MK	K	L&PPT	P-EXAM, P-VIVA	F&S	1	-	NLHT2.1
CO7	Describe the Medical Ethics in the practice of Cosmetology especially the ethical practice of Atibba in the practice of cosmetology.	CK	MK	KH	L_VC, L&PPT	P-VIVA, PRN, P-EXAM	F&S	1	-	LH
CO7	Discuss the Ethical practice of Cosmetology and its Social Importance	CC	MK	KH	DIS, PER, L_VC	P-VIVA, T-OBT, P-EXAM	F&S	1	-	NLHT2.2
CO7	Adopt and reflect on the Ethical practices while engaging in the practice of Cosmetology.	AFT-RES	MK	SH	RP	SP	F&S	1	-	NLHP2.1

CO2	Explain the general and Unani concept of cosmetology with an introduction to its historical background.	CK	MK	K	L_VC, L	P-VIVA, P-EXAM	F&S	1	-	LH
CO2, CO4	Elaborate the concept of nutrition and its importance for healthy skin.	CC	MK	KH	L&PPT, L_VC	P-VIVA, P-EXAM, QZ	F&S	1	-	LH
CO2, CO4	Demonstrate the effects of Nutrition on the skin by advising different diet regimes to the patients.	CAP	MK	SH	D-BED	P-EXAM, P-PRF, T-CS, P-VIVA	F&S	1	-	NLHP2.2
CO5, CO6	Describe the importance of healthy Nails in cosmetics. View and identify the basic nutrition for nail care.	CC	MK	KH	L_VC, L&PPT	P-EXAM, P-VIVA, T-CS	F&S	1	-	LH
CO5, CO6	Demonstrate different measures to keep nails healthy.	CC	MK	SH	DIS, D-BED, PER	P-VIVA, P-EXAM	F&S	1	-	NLHP2.3

Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
NLHT2.1	Importance of Cosmetic act and rules.	<p>The teacher will explain the importance of the Cosmetic act and rules to students with the help of Group Discussion in 01 hour .</p> <p>Students will carefully observe and try to understand the importance of the Cosmetic act and rules.</p>
NLHT2.2	Group discussion on Ethics in practice of cosmetology	<p>Teacher will discuss on Ethics in practice of cosmetology by Presentation, Discussion and Visual Support in 01 hour</p> <p>Students will participate in group discussion actively and learn the Ethical practices of Cosmetology</p>

Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP2.1	Presentation on ethics in the practice of cosmetology.	The teacher will organize a presentation on Ethics in the practice of Cosmetology by Role Play. and Students will participate in this play actively. Duration - 02 Hours
NLHP2.2	Demonstration of the effect of Nutrition on skin.	The teacher will demonstrate the effect of Nutrition on the skin by Bed side discussion in 02 hours. Students will carefully observe the effect of Nutrition on the skin.
NLHP2.3	Presentation on measures to achieve healthy nails.	The teacher will organize a presentation on measures to achieve healthy nails with the help of Discussion, Presentation, Power Point, Bed Side Discussion and Case base Learning in 02 hour. Students will observe the presentation and Learn how to maintain a health nails.

Topic 3 جلد کے ویروسی امراض Jild ke Vairusi Amraz (Viral diseases in Dermatology) (LH : 5, NLHT: 5, NLHP: 7 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO3, CO6, CO7	Define Hasba and illustrate its etiology, cutaneous manifestations, diagnosis, usoole ilaj, and ilaj.	CC	MK	KH	L_VC, L&PPT	P-EXAM, P-VIVA, PRN, T-OBT, S-LAQ	F&S	1	H-MOA, H-AAN	LH

CO3, CO6	Identify a case of Hasba based on its specific features.	CC	MK	KH	PER, L_VC, DIS	M-CHT, P- EXAM, VV- Viva, P- VIVA, PRN	F&S	1	-	NLHT3.1
CO3, CO4	Perform the clinical examination of Hasba patient.	PSY-SET	MK	KH	L_VC, CBL, D- BED	PRN, P- VIVA, P- EXAM	F&S	1	-	NLHP3.1
CO3, CO6, CO7	Describe Humayqa, and explain its cause, mode of transmission, clinical features, course, diagnosis, complications, usoole ilaj, and ilaj.	CE	MK	KH	L&PPT , L_VC, PER	T-OBT, P- VIVA, PRN, P-EXAM, S- LAQ	F&S	1	H-MOA,H- AAN	LH
CO3, CO6	Discuss the causes, risk factors, and modes of transmission of Humayqa	CC	MK	KH	DIS, PER, L_VC	P-EXAM, QZ , PRN, P-VIVA, M- CHT	F&S	1	-	NLHT3.2
CO3, CO4	Demonstrate a case of Humayqa based on its specific features.	PSY-GUD	MK	SH	D, L_VC	VV-Viva, PRN, M- CHT, P- EXAM, P- VIVA	F&S	1	-	NLHP3.2
CO3, CO6	Describe Judari, its etiology, types, clinical features, complications, diagnosis, differential diagnosis, usoole ilaj, and ilaj.	CK	DK	K	L_VC, L, L&PPT	M-CHT, T- OBT, P- VIVA	F&S	1	-	LH

CO3, CO6	Discuss the causes, risk factors, and modes of transmission of Judari.	CK	MK	KH	L&GD	QZ , P-VIVA, PRN, VV-Viva	F&S	1	-	NLHT3.3
CO3, CO4	Demonstrate a differential diagnosis between Judari from Hasba and Humayqa.	PSY-SET	MK	SH	L&GD, L_VC, D-BED	M-POS, P-VIVA, QZ , M-CHT	F&S	1	-	NLHP3.3
CO3, CO4, CO6, CO7	Describe Namla, its types, etiology, clinical features, complications, diagnosis, usoole Ilaj, and Ilaj.	CC	MK	KH	L&PPT , L_VC	PRN, S-LAQ, M-CHT, P-EXAM, P-VIVA	F&S	1	-	LH
CO3, CO6	Differentiate and discuss the different types of Namla.	CC	MK	KH	L&GD	QZ , P-EXAM, M-CHT, VV-Viva	F&S	1	-	NLHT3.4
CO3, CO4	Demonstrate a case of Namla based on its specific features.	PSY-GUD	MK	SH	D-BED, CBL, L_VC	P-VIVA, P-EXAM, M-CHT, VV-Viva	F&S	1	-	NLHP3.4
CO3, CO6, CO7	Describe Molluscum contagiosum, Hand, foot, and mouth disease and Monkeypox and explain their etiology, clinical features, diagnosis, investigations, usoole Ilaj and Ilaj in brief.	CK	MK	K	L_VC, L&PPT	S-LAQ, P-VIVA, M-CHT, T-OBT, VV-Viva	F&S	1	-	LH

CO3, CO6	Identify the case of Molluscum contagiosum based on its specific features.	CC	MK	KH	L_VC, DIS, PER	P-VIVA, PRN	F&S	1	-	NLHT3.5
Non Lecture Hour Theory										
S.No	Name	Description of Theory Activity								
NLHT3.1	Presentation on Hasba.	<ul style="list-style-type: none"> The teacher will demonstrate clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Hasba through L_VC/PER/DIS Students will learn about the clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Hasba. NLHT:01								
NLHT3.2	Case presentation on Humayqa	<ul style="list-style-type: none"> The teacher will demonstrate clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Humayqa through L_VC/ PER/DIS Students will learn about the clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Humayqa. NLHT:01								
NLHT3.3	Group discussion on Judari.	<ul style="list-style-type: none"> The teacher will organize Group discussion on Judari. Students will participate in Group discussion actively. NLHP: 01								

NLHT3.4	Group discussion on Namla.	<ul style="list-style-type: none"> The teacher will organise group discussion on Namla. Students will participate in group discussion actively. <p>NLHT: 01</p>
NLHT3.5	Case presentation on Molluscum contagiosum.	<ul style="list-style-type: none"> The teacher will demonstrate clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Molluscum contagiosum through L_VC/ PER/DIS Students will learn about the clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Molluscum contagiosum. <p>NLHT:01</p>
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP3.1	Examination of Hasba.	<ul style="list-style-type: none"> The teacher will explain stepwise dermatological examination in a case of Hasba through L_VC/CBL/D-BED Students will observe a stepwise examination of the case of Hasba. Student will repeat the same examination of the case of Hasba for 03 times <p>NLHP: 01</p>

NLHP3.2	Demonstration of Humayqa case.	<ul style="list-style-type: none"> The teacher will explain stepwise dermatological examination in a case of Humayqa through L_VC/ CBL/ D Students will observe the whole procedure. Students will repeat the whole procedure of the examination themselves 03 times. 	NLHP: 02							
NLHP3.3	Differential diagnosis of Judari from Hasba and Humayqa.	<ul style="list-style-type: none"> The teacher will discuss the differential diagnosis of Judari from Hasba and Humayqa through D-BED/L_VC/L&GD Students will observe and learn the differential diagnosis carefully. 	NLHP:01							
NLHP3.4	Demonstration of Namla case.	<ul style="list-style-type: none"> The teacher will demonstrate the dermatological examination in a case of Namla through L_VC/ CBL/ D-BED Students will observe the procedure of demonstration carefully Students will repeat the whole procedure of examination themselves 03 times as demonstrated by the teacher. 	NLHP: 03							
Topic 4 جلد کے فنجیال امراض Jild ke Fungal Amraz (Fungal diseases in Dermatology) (LH : 2, NLHT: 1, NLHP: 5 hours)										
A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3

CO3, CO4, CO6, CO7	Describe and classify Qooba and explain its etiology, clinical features, complications, diagnosis, differential diagnosis, investigations, usoole ilaj, and ilaj.	CAN	MK	KH	L&PPT , L_VC	S-LAQ, M- CHT, VV- Viva, T- OBT, P- VIVA	F&S	1	-	LH
CO3, CO4	Perform Wood's Lamp examination in Qooba.	PSY-GUD	MK	SH	W, D, L_VC, PT, CBL	P-VIVA, PRN, VV- Viva, M- CHT, P- EXAM	F&S	1	-	NLHP4.1
CO3, CO4, CO6, CO7	Demonstrate the procedure of Potassium hydroxide scraping	PSY-MEC	MK	SH	DL, PER, L_VC	P-VIVA, PP- Practical, VV-Viva, P- EXAM	F&S	1	-	NLHP4.2
CO3, CO4, CO6, CO7	Define and classify Daul-Mabeezat and explain its etiology, clinical features, complications, diagnosis, differential diagnosis, investigations, usoole ilaj, and ilaj.	CAN	MK	KH	L_VC, L&PPT	P-EXAM, VV-Viva, S- LAQ, P- VIVA, PRN	F&S	1	-	LH
CO3, CO6	Identify and share facts about Daul-Mabeezat, its transmission, symptoms, and complications.	CAN	MK	KH	L&GD, L_VC, DIS	PRN, P- VIVA, QZ , VV-Viva, M- CHT	F&S	1	-	NLHT4.1

CO3, CO4	Diagnose and manage a case of Daul-Mabeezat (Candidiasis).	PSY-GUD	MK	SH	L_VC, D-BED, CBL, PER	P-EXAM, VV-Viva, PRN, P- VIVA	F&S	1	-	NLHP4.3
Non Lecture Hour Theory										
S.No	Name	Description of Theory Activity								
NLHT4.1	Presentation on Daul-Mabeezat.	<ul style="list-style-type: none"> The teacher will discuss etiology, transmission, symptoms, and complications of Daul-Mabeezat through L&GD/L_VC/DIS Students will learn about etiology, transmission, symptoms, and complications of Daul-Mabeezat NLHT: 01								
Non Lecture Hour Practical										
S.No	Name	Description of Practical Activity								
NLHP4.1	Wood's Lamp examination.	<ul style="list-style-type: none"> The teacher will explain and demonstrate the step-by-step procedure of Wood's Lamp examination through L_VC/CBL/PER/PT/D Students will observe the whole process of examination carefully Students will repeat the procedure 03 times NLHP: 01								

NLHP4.2	Potassium hydroxide (KOH) scraping test.	<ul style="list-style-type: none"> The teacher will explain and demonstrate the procedure of KOH scraping test while maintaining relevant SOPs Students will observe the whole procedure carefully. Students will repeat the test 03 times. <p>NLHP: 02</p>
NLHP4.3	Demonstration of Daul-Mabeezat case.	<ul style="list-style-type: none"> The teacher will demonstrate clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj Daul-Mabeezat (Candidiasis) through L_VC/ CBL/ PER/D-BED Students will observe the demonstration carefully. Students will repeat the whole procedure sequentially themselves 03 times. <p>NLHP: 02</p>

Topic 5 جراثیمی امراض (Bacterial diseases in Dermatology) (LH : 8, NLHT: 3, NLHP: 5 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO3, CO4, CO6, CO7	Describe Judham, its etiology, pathogenesis, classification (Unani and Ridley-Jopling classification), clinical features, complications, investigations, diagnosis, differential diagnosis, usoole ilaj, and ilaj.	CC	MK	KH	L&PPT, L_VC	T-OBT, P-VIVA, T-CS, S-LAQ	F&S	2	-	LH
CO3, CO4	Examine and Diagnose a case of Judham.	PSY-GUD	MK	SH	D, CBL, L_VC	P-POS, M-POS, P-	F&S	2	-	NLHP5.1

						CASE, P-VIVA, P-EXAM				
CO3, CO6, CO7	Describe Atshak, its etiology, transmission, classification, clinical features, investigations, diagnosis, differential diagnosis, complications, usoole ilaj, and ilaj.	CK	MK	K	L&PPT, L&GD, L_VC	T-OBT, S-LAQ, P-VIVA, M-CHT	F&S	2	-	LH
CO1, CO2, CO3	Diagnose and identify a case of Atshak (Syphilis).	PSY-GUD	MK	SH	L_VC, DIS, CBL	P-VIVA, M-CHT, P-EXAM, CL-PR, PRN	F&S	2	H-IJ	NLHP5.2
CO3, CO4, CO6, CO7	Explain Naffatat Tafliyya, its etiology, types, clinical features, complications, investigations, diagnosis, differential diagnosis, usoole ilaj and ilaj.	CC	MK	KH	L_VC, L&PPT	VV-Viva, M-CHT, P-VIVA, S-LAQ, QZ	F&S	2	-	LH
CO1, CO2	Diagnose and describe the management of a case of Naffatat Tafliyya.	PSY-GUD	MK	SH	L_VC, DL, CBL, D-BED	P-VIVA, CL-PR, P-EXAM, VV-Viva, PRN	F&S	2	-	NLHP5.3
CO3, CO6, CO7	Define Diqq-ul-jild, and illustrate its etiology, types, investigations, diagnosis, usoole ilaj, and ilaj.	CK	MK	K	L_VC, L&PPT	T-OBT, M-CHT, S-LAQ, P-VIVA, VV-Viva	F&S	2	-	LH

CO3, CO6, CO7	Diagnose and manage a case of Diqq-ul-jild.	PSY-SET	MK	KH	CBL, L_VC, D-BED	P-EXAM, PRN, M- CHT, P- VIVA, CL- PR	F&S	2	-	NLHP5.4
CO3, CO6, CO7	Describe Surkhbada and Iltehab Nasij Khalawi, their etiology, clinical features, complications, usoole ilaj and ilaj.	CC	MK	KH	L&PPT , L_VC	P-VIVA, S- LAQ, VV- Viva, PRN, M-CHT	F&S	2	H-IJ	LH
CO3, CO6	Discuss the cutaneous manifestations of Surkhbada and Iltehab Nasij Khalawi.	CC	MK	KH	DIS, L&GD	PRN, QZ , CL-PR, M- CHT	F&S	2	-	NLHT5.1
CO3, CO4	Demonstrate a differential diagnosis between Surkhbada and Iltehab Nasij Khalawi.	PSY-GUD	MK	SH	D-BED, CBL, L_VC	P-VIVA, VV- Viva, P- EXAM, PRN, M- CHT	F&S	2	-	NLHP5.5
CO3, CO6, CO7	Describe Dumbal, its etiology, clinical features, usoole ilaj and ilaj.	CC	MK	KH	L&PPT , L_VC	VV-Viva, P- VIVA, S- LAQ, T- OBT	F&S	2	H-IJ	LH
CO3, CO6	Identify a case of Dumbal based on its specific features.	CAN	MK	KH	PER, DIS, L&GD,	PRN, DEB, CL-PR, QZ , M-CHT	F&S	2	-	NLHT5.2

					CBL, L_VC					
CO3, CO6, CO7	Describe Khuraj, its etiology, clinical features, complications, investigations, usoole ilaj and ilaj.	CC	MK	KH	L_VC, L&PPT	P-VIVA, CL- PR, PRN, S-LAQ, T- OBT	F&S	2	H-IJ	LH
CO3, CO6, CO7	Describe Shabchiragh, its etiology, clinical features, complications, investigations, usoole ilaj and ilaj.	CK	MK	K	L&PPT , L_VC	S-LAQ, P- VIVA, PRN, M-CHT, T- OBT	F&S	2	H-IJ	LH
CO3, CO6	Identify a case of Shabchiragh based on its specific features.	CAN	MK	KH	L&GD, DIS, BS, PER, D- BED	DEB, QZ , PUZ, VV- Viva, M- CHT	F&S	2	H-IJ	NLHT5.3

Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
NLHT5.1	Group discussion on cutaneous manifestations of Surkhbada and Iltehab Nasij Khalawi.	<ul style="list-style-type: none"> The teacher will discuss differential diagnosis between Surkhbada and Iltehab Nasij Khalawi through L&GD/DIS Students will observe and learn differential diagnosis between Surkhbada and Iltehab Nasij Khalawi <p>NLHT: 01</p>

NLHT5.2	Case presentation of Dumbal.	<ul style="list-style-type: none"> The teacher will Demonstrate clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Dumbal Students will learn about the clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Dumbal <p>NLHT: 01</p>
NLHT5.3	Case presentation of Shabchiragh.	<ul style="list-style-type: none"> The teacher will Demonstrate clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Shabchiragh Students will learn about the clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Shabchiragh <p>NLHT: 01</p>
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP5.1	Case presentation of Judham.	<ul style="list-style-type: none"> The teacher will demonstrate the dermatological manifestations of a case of Judham through L_VC/ CBL/ D Students will observe the whole procedure of demonstration carefully Students will repeat the whole process of clinical examination 03 times themselves <p>NLHP: 01</p>

NLHP5.2	Clinical evaluation and management of Atshak.	<ul style="list-style-type: none"> • The teacher will explain the dermatological examination and management of Atshak [Primary Syphilis (Chancre)] through L_VC/ DIS/CBL/ D-BED • Students will observe and learn the procedure of clinical evaluation and prescribing management based on usoole ilaj • Students will repeat the whole process 03 times themselves <p>NLHP: 01</p>
NLHP5.3	Clinical evaluation and management of Naffatat Tafliyya.	<ul style="list-style-type: none"> • The teacher will explain the dermatological examination and management of Naffatat Tafliyya through L_VC /CBL/ D-BED • Students will observe and learn the procedure of clinical evaluation and prescribing management based on usoole ilaj • Students will repeat the whole procedure of clinical evaluation, diagnosis and management of Naffatat Tafliyya 03 times. <p>NLHP: 01</p>
NLHP5.4	Demonstration of Diqq-ul-jild case.	<ul style="list-style-type: none"> • The teacher will explain the dermatological examination and management of Diqq-ul-jild (Lupus vulgaris / Tuberculous chancre/ Scrofuloderma/ Erythema induratum) through L_VC/ CBL/ D-BED • Students will observe and learn the procedure of clinical evaluation and prescribing management based on usoole ilaj

		<ul style="list-style-type: none"> Students will repeat the whole procedure of clinical evaluation, diagnosis and management of Diqq-ul-jild (Lupus vulgaris / Tuberculous chancre/ Scrofuloderma/ Erythema induratum) 03 times.
NLHP5.5	Demonstration of differential diagnosis between Surkhbada and Iltehab Nasij Khalawi.	<ul style="list-style-type: none"> The teacher will explain the differential diagnosis between Surkhbada and Iltehab Nasij Khalawi through L_VC/CBL/ D-BED Students will observe and learn the differential diagnosis between Surkhbada and Iltehab Nasij Khalawi.

Topic 6 طفیلی امراض Jild ke Tufaili Amraz (Parasitic diseases in Dermatology) (LH : 3, NLHT: 0, NLHP: 6 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO3, CO4, CO6, CO7	Define Jarb, and explain its etiology, transmission, types, clinical features, complications, investigations, diagnosis, differential diagnosis, usoole ilaj and ilaj.	CC	MK	KH	L_VC, L&PPT	PRN, S-LAQ, M-CHT, P-VIVA, T-OBT	F&S	2	-	LH
CO3, CO4	Perform scraping in the patient of Jarb (Scabies).	PSY-MEC	MK	SH	D-BED, L_VC, CBL, PT	P-VIVA, P-EXAM, Log book, INT	F&S	2	-	NLHP6.1

CO3, CO6, CO7	Briefly Describe Irq-e-Madni and Jildi Kala Azar, their etiology, clinical features, diagnosis, differential diagnosis, complications, usoole ilaj and ilaj.	CK	NK	K	L&PPT , L_VC	P-VIVA, S-LAQ, T-OBT, VV-Viva	F&S	2	H-MOA	LH
CO3, CO4	Demonstrate cutaneous manifestations of Irq-e-Madni and Jildi Kala Azar.	PSY-GUD	MK	KH	L_VC	M-CHT, PRN, P-VIVA	F&S	2	-	NLHP6.2
CO3, CO6, CO7	Describe Daa-ul-Feel and illustrate its etiology, cutaneous manifestations, usoole ilaj and ilaj.	CAN	MK	KH	L&PPT , L_VC	QZ , S-LAQ, T-OBT, P-VIVA, PRN	F&S	2	H-IJ	LH
CO3, CO4	Demonstrate a case of Daa-ul-Feel	PSY-GUD	MK	KH	L_VC, D-BED, CBL	M-CHT, PRN, P-VIVA, P-EXAM	F&S	2	-	NLHP6.3

Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
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Non Lecture Hour Practical

S.No	Name	Description of Practical Activity
NLHP6.1	Scraping for Jarb.	<ul style="list-style-type: none"> The teacher will explain and demonstrate the step-by-step procedure of Scraping test for Jarb with all relevant SOPs in place through L_VC/ CBL/ PT/ D-BED

		<ul style="list-style-type: none"> Students will observe the whole procedure of scrapping carefully. Students will practice the scrapping test themselves. <p>NLHP: 02</p>								
NLHP6.2	Demonstration of cutaneous manifestations of Irq-e-Madni and Jildi Kala Azar through visual aids.	<ul style="list-style-type: none"> The teacher will demonstrate cutaneous manifestations of Irq-e-Madni and Jildi Kala Azar through L_VC Students will observe and gain an understanding of cutaneous manifestations of Irq-e-Madni and Jildi Kala Azar and acquire the skill to conduct clinical examination of such cutaneous manifestations. <p>NLHP: 02</p>								
NLHP6.3	Demonstration of Daa-ul-Feel case in the clinical settings.	<ul style="list-style-type: none"> The teacher will explain and demonstrate the dermatological examination of a case of Daa-ul-Feel through L_VC/ CBL/ D-BED Students will observe and learn to ascertain dermatological manifestations of Daa-ul-Feel. <p>NLHP: 02</p>								
Topic 7 جلد کے غیر متعدی امراض Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology) (LH : 12, NLHT: 9, NLHP: 18 hours)										
A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3

CO1, CO2, CO4	Describe Basoor e Labaniya, its etiology, clinical features, diagnosis, usoole ilaj and ilaj.	CC	MK	KH	L&PPT , CBL, L	T-CS, P- VIVA, S- LAQ	F&S	2	-	LH
CO1, CO3, CO6, CO7	Evaluate the severity of Acne by the Acne Severity Index (ASI) and Global Acne Grading System (GAGS).	PSY-GUD	MK	SH	CBL, PrBL, D- BED	T-CS, OSCE, P- EXAM	F&S	2	-	NLHP7.1
CO3, CO4, CO6, CO7	Explain Narefarsi, its etiology, types, clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj.	CC	MK	KH	L&PPT , CBL, DIS	S-LAQ, T- CS, PRN	F&S	2	-	LH
CO1, CO3, CO4, CO6, CO7	Determine the step-by-step procedure for the patch test and skin prick test.	CAP	MK	KH	L_VC, SIM, TPW, PBL, DIS	P-CASE, CBA	F&S	2	-	NLHT7.1
CO1, CO3, CO4, CO6, CO7	Demonstrate the procedure of Patch test and skin prick test.	PSY-MEC	MK	SH	CBL, CD, DIS, D-BED, L_VC	CBA, P-EN	F&S	2	-	NLHP7.2
CO3, CO4, CO6	Determine the step-wise procedure of Skin Biopsy.	CAP	MK	KH	L_VC, D-M, CBL	P-VIVA, Log book, P-EN	F&S	2	-	NLHT7.2
CO1, CO3, CO6	Define Iltehab-e-Urooq Vasculitis and explain its etiology, clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj.	CK	DK	K	DIS, L&PPT	T-CS, P- VIVA, P- REC	F&S	2	-	LH

CO3, CO4, CO6	Demonstrate the Procedure for performing Skin Biopsy.	PSY-MEC	MK	SH	D-M, D-BED, DIS, CBL	P-VIVA, P-EXAM, CHK, P-PRF	F&S	2	-	NLHP7.3
CO3, CO4, CO6, CO7	Describe Hikka, its etiology, clinical features, diagnosis, differential diagnosis, and usoole ilaj and ilaj.	CC	MK	KH	L, L&PPT, DIS	S-LAQ, CL-PR, T-CS	F&S	2	-	LH
CO3, CO4, CO5, CO6	Determine the Procedure of Skin scraping for evaluating skin lesions and Wood's lamp examination for detecting fungal/bacterial infections.	CAP	MK	KH	CBL, TUT, DIS, L_VC	CBA, PRN, P-EXAM	F&S	2	-	NLHT7.3
CO3, CO4, CO5, CO6	Demonstrate the Procedure of Skin scraping and Wood's lamp examination for detecting fungal/bacterial infections.	PSY-MEC	MK	SH	D-BED, CBL, DL, CD, D-M	DOAP, Log book, OSPE, P-VIVA, P-EN	F&S	2	-	NLHP7.4
CO3, CO4, CO6, CO7	Describe Shara and Banaat-ul-lail, their etiology, clinical features, diagnosis, differential diagnosis, and usoole ilaj and ilaj.	CC	MK	KH	L_VC, DIS, L&PPT	P-VIVA, S-LAQ	F&S	2	-	LH
CO3, CO4, CO5, CO6	Determine the methods of physical examination and diagnostic tests for Urticaria.	CAP	MK	KH	L&PPT, DIS, L_VC	T-OBT, P-EXAM, P-EN	F&S	2	-	NLHT7.4
CO3, CO4, CO5, CO6	Demonstrate the following procedures: Skin prick test, Patch test, Physical examination of wheals, Dermographism.	PSY-MEC	MK	SH	SIM, CBL,	P-EXAM, P-VIVA, INT, T-OBT	F&S	2	-	NLHP7.5

					L_VC, D-BED					
CO3, CO4, CO6	Define Huzza e Musattah, and illustrate its etiology, types, clinical features, diagnosis, differential diagnosis, usool e ilaj and ilaj.	CK	MK	K	L_VC, L&PPT , DIS	P-VIVA, S- LAQ	F&S	2	-	LH
CO3, CO4, CO6	Demonstrate the Lesion of lichen planus in a clinical scenario.	PSY-MEC	MK	D	DIS, D- M, CD, CBL, D- BED	C-VC, P- EXAM, Log book, S- LAQ	F&S	2	-	NLHP7.6
CO3, CO4, CO6, CO7, CO8	Describe Taqashurul jild & illustrate its etiology and types.	CK	MK	KH	L&PPT , DIS, L_VC	S-LAQ, P- VIVA	F&S	2	-	LH
CO3, CO4, CO6, CO7, CO8	Discuss the clinical features, diagnosis, differential diagnosis, usool e ilaj and ilaj of Taqashurul jild.	CC	MK	KH	RP, DIS, L_VC, L&PPT , CBL	P-VIVA, PRN, S- LAQ	F&S	2	-	NLHT7.5
CO3, CO4, CO6, CO7, CO8	Demonstrate Candle Grease Sign and Auspitz sign in psoriasis.	PSY-MEC	MK	D	D-BED, CD, L_VC, DIS, CBL	P-VIVA, DOAP, CBA, DOPS, DOPS	F&S	2	-	NLHP7.7

CO3, CO4, CO6	Define Naffata & describe its etiology and types.	CK	MK	K	L, L_VC, DIS, L&PPT	S-LAQ, QZ , P-VIVA	F&S	2	-	LH
CO3, CO4, CO6	Describe clinical features, diagnosis, differential diagnosis, usool e ilaj and ilaj of Naffata.	CC	MK	KH	L_VC, DIS, L&PPT , RP, CBL	S-LAQ, P- VIVA, PRN	F&S	2	-	NLHT7.6
CO3, CO4, CO6	Demonstrate the Tzanck smear test & skin biopsy test.	PSY-SET	DK	KH	CBL, L_VC, D-BED, DL, RP	S-LAQ, Log book, INT, P-VIVA	F&S	2	-	NLHP7.8
CO3, CO4, CO6, CO7	Describe Systemic lupus Erythromatousus, its etiology and types.	CK	MK	K	TUT, DIS, L_VC, L&PPT	QZ , P- VIVA, S- LAQ	F&S	2	-	LH
CO3, CO4, CO6	Explain the clinical features, diagnosis, differential diagnosis, usool e ilaj and ilaj of Systemic lupus Erythromatousus.	CC	MK	KH	SIM, L&PPT , DIS, L_VC, RP	PRN, P- VIVA, S- LAQ	F&S	2	-	NLHT7.7
CO3, CO4, CO6, CO7	Demonstrate a case of SLE clinically through bedside examination.	PSY-GUD	MK	SH	DIS, CBL, CD, D-	Log book, CBA, P- PRF, OSCE	F&S	2	-	NLHP7.9

					BED, L_VC					
CO3, CO4, CO6, CO7	Define Bad e shanam & illustrate its etiology and types.	CK	MK	K	L&PPT , L&GD, BS	P-VIVA, PRN, QZ	F&S	2	-	LH
CO3, CO4, CO6, CO7	Illustrate the clinical features, diagnosis, deferential diagnosis, usoole ilaj and ilaj of Bad e shanam.	CC	MK	KH	DIS, L&PPT , SIM, L_VC	P-VIVA, S- LAQ	F&S	2	-	NLHT7.8
CO3, CO4, CO6, CO7	Determine the procedure of Laser Therapy-Pulsed dye Laser.	CAP	DK	KH	DIS, RP, L_VC, CBL, D	INT, P- VIVA, Log book	F&S	2	-	NLHP7.10
CO3, CO4, CO6, CO7	Describe Ichthyosis, Acanthosis Nigricans, their etiology and types.	CK	MK	K	DIS, L&PPT , TUT, L	QZ , PRN, P-VIVA	F&S	2	-	LH
CO3, CO4, CO6, CO7	Describe clinical features, investigations, diagnosis, differential diagnosis, usoole ilaj and ilaj of Ichthyosis and Acanthosis Nigricans in brief.	CC	MK	KH	SIM, L_VC, L&PPT , CBL, PL	S-LAQ, P- VIVA, PRN	F&S	2	-	NLHT7.9
CO3, CO4, CO6, CO7	Demonstrate the clinical examination of a case of Ichthyosis and Acanthosis Nigricans.	PSY-GUD	MK	SH	SIM, L&PPT , L_VC, D-BED, CD	OSCE, P- VIVA, C- VC, Log book	F&S	2	-	NLHP7.11

Non Lecture Hour Theory		
S.No	Name	Description of Theory Activity
NLHT7.1	Patch test and skin prick test.	<p>The teacher will describe the procedure of the patch test and skin prick test through the following methods.</p> <p>Teaching Methods</p> <p>Video Demonstration</p> <p>Use high-quality video clips to demonstrate:</p> <p>Patch Test: Procedure to identify delayed hypersensitivity reactions.</p> <p>Skin Prick Test: Procedure for detecting immediate hypersensitivity (allergies).</p> <p>Pause the video at critical points to explain the steps, equipment, and significance of each step.</p> <p>Interactive Discussion</p> <p>After showing the video, engage students in a discussion to clarify key points:</p> <p>Compare and contrast the two tests.</p> <p>Highlight indications, contraindications, and interpretation of results.</p> <p>Discuss common allergens and how to identify patient-specific triggers.</p> <p>Case-Based Learning</p> <p>Present clinical scenarios where a patch test or skin prick test is indicated. For example:</p> <p>A patient with contact dermatitis for a patch test.</p>

		<p>A patient with suspected allergic rhinitis for a skin prick test.</p> <p>Guide students to decide which test is appropriate and how to proceed based on the scenario.</p> <p>Group Work and Peer Teaching</p> <p>Divide students into small groups and assign each group one aspect of the procedure (e.g., preparation, application, interpretation of results, patient counselling).</p> <p>Groups will present their findings and teach their peers, promoting collaborative learning.</p> <p>Hands-On Practice (If Safe and Feasible)</p> <p>Provide students with simulation kits or dummy models to practice marking, applying patches, or simulating skin pricks under supervision.</p> <p>Ensure safety protocols are in place if real materials are used.</p> <p>Students will be able to:</p> <p>Explain the Purpose</p> <p>Understand the purpose of the patch test and skin prick test in diagnosing hypersensitivity reactions.</p> <p>Describe the Procedure</p> <p>Outline the step-by-step procedure for conducting patch and skin prick tests, including patient preparation and test administration.</p> <p>Differentiate Between the Tests</p>
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		<p>Identify key differences between the patch test (used for delayed hypersensitivity reactions) and the skin prick test (used for immediate hypersensitivity reactions).</p> <p>Interpret Test Results</p> <p>Recognize and interpret positive and negative results for both tests, including their clinical implications.</p> <p>Identify Indications and Contraindications</p> <p>Describe the indications for each test and list any contraindications or precautions to consider.</p> <p>Recognize Safety Measures</p> <p>Understand the necessary safety protocols and emergency management in case of adverse reactions during the skin prick test.</p> <p>1 Hour</p>
NLHT7.2	Skin Biopsy.	<p>The teacher will describe the step-by-step procedure of skin biopsy while maintaining the SOPs through video clips, case-based learning, and demonstration on models.</p> <p>Video Demonstration</p> <p>Use high-quality video clips to show the step-by-step procedure of a skin biopsy (e.g., punch biopsy, excisional biopsy, or shave biopsy).</p> <p>Highlight key elements such as:</p> <p>Patient preparation.</p> <p>Maintaining sterile technique.</p>

		<p>Using the proper tools (e.g., biopsy punch, scalpel).</p> <p>Handling and labelling specimens.</p> <p>Pause the video to explain critical points and allow for student questions.</p> <p>Case-Based Learning (CBL)</p> <p>Present clinical scenarios where a skin biopsy is indicated (e.g., suspicious skin lesion, chronic rash, or melanoma).</p> <p>Guide students through decision-making, including:</p> <p>When and why to perform a skin biopsy.</p> <p>Choosing the appropriate type of biopsy.</p> <p>Understanding diagnostic implications of the results.</p> <p>Demonstration on Models</p> <p>Perform a hands-on demonstration using synthetic models or biopsy simulators to show the procedure in a controlled environment.</p> <p>Emphasize Standard Operating Procedures (SOPs) such as hand hygiene, sterile draping, and safe handling of sharps.</p> <p>Interactive Discussions</p> <p>Facilitate a discussion on the different types of skin biopsies, their indications, and how to interpret results.</p> <p>Discuss patient counselling before and after the procedure.</p> <p>Guided Hands-On Practice</p> <p>Allow students to practice the biopsy procedure on models or simulators under supervision.</p>
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		<p>Use checklists to ensure students adhere to proper technique and SOPs.</p> <p>Reflection and Feedback</p> <p>After the session, ask students to reflect on their understanding of the procedure.</p> <p>Provide constructive feedback to improve their technique and clarify any doubts.</p> <p>Students will learn and be able to:</p> <p>Understand the Purpose</p> <p>Explain the purpose of a skin biopsy and its role in diagnosing dermatological and systemic conditions.</p> <p>Describe the Procedure</p> <p>Outline the step-by-step procedure of performing a skin biopsy, including preparation, execution, and specimen handling.</p> <p>Adhere to SOPs</p> <p>Demonstrate adherence to Standard Operating Procedures (SOPs), including sterile technique, infection control, and safe handling of equipment.</p> <p>Differentiate Biopsy Types</p> <p>Identify the different types of skin biopsies (e.g., punch, shave, excisional) and their appropriate indications.</p> <p>Interpret Results</p>
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		<p>Understand the diagnostic importance of biopsy results and correlate them with clinical findings.</p> <p>Counsel Patients</p> <p>Communicate effectively with patients about the procedure, including its purpose, risks, and post-procedure care.</p> <p>Perform the Procedure</p> <p>Under supervision, following proper technique, perform a simulated skin biopsy on a model or simulator.</p> <p>1 Hour</p>
NLHT7.3	Skin scraping, Wood's lamp examination.	<p>The teacher will describe the procedure of Skin scraping for evaluating skin lesions and Wood's lamp examination for detecting fungal/bacterial infections through:</p> <p>Video Clips</p> <p>Show video tutorials illustrating both procedures in detail.</p> <p>Pause the videos at critical steps to discuss the rationale and highlight potential pitfalls.</p> <p>Case-Based Learning (CBL)</p> <p>Present clinical cases such as:</p> <p>A patient with scaly patches on the skin, suggesting a fungal infection (for skin scraping).</p> <p>A patient with hypopigmented patches where a Wood's lamp is used to confirm the diagnosis (e.g., pityriasis versicolor).</p>

		<p>Discuss the diagnostic approach and how these tests contribute to clinical decision-making.</p> <p>Hands-On Practice</p> <p>Allow students to practice skin scraping on models and use a Wood's lamp in a controlled setting.</p> <p>Provide supervision and feedback to ensure proper technique and understanding.</p> <p>Interactive Discussions</p> <p>After the demonstration, engage students in discussions about:</p> <ul style="list-style-type: none"> The indications, contraindications, and limitations of each procedure. The clinical relevance of the results obtained from these tests. <p>Visual Aids and Reference Materials</p> <p>Provide videos, charts or posters showing examples of fungal and bacterial infections observed under a Wood's lamp and microscopy.</p> <p>Share printed or digital guides outlining the steps and precautions for both procedures.</p> <p>Quizzes and Reflection</p> <p>Use quizzes or interactive polls to reinforce knowledge about the procedures.</p> <p>Encourage students to reflect on how they would apply these techniques in clinical scenarios.</p> <p>Students will learn Skin scraping to evaluate different skin lesions will be able to:</p>
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		<p>Describe the Procedure</p> <p>Explain the step-by-step process for conducting a skin scraping and preparing the sample for microscopic evaluation.</p> <p>Describe how to use a Wood's lamp and interpret its findings.</p> <p>Understand Indications</p> <p>Identify the clinical indications for skin scraping and Wood's lamp examination, including specific dermatological conditions.</p> <p>Adhere to Best Practices</p> <p>Demonstrate adherence to infection control protocols during skin scraping.</p> <p>Show competence in the safe and correct use of a Wood's lamp.</p> <p>Interpret Results</p> <p>Accurately recognize positive findings on microscopic examination (e.g., fungal hyphae, scabies) and under a Wood's lamp (e.g., fluorescence patterns).</p> <p>Recognize Limitations</p> <p>Understand the limitations of these diagnostic tools and when additional investigations may be required.</p> <p>Correlate with Clinical Cases</p> <p>Apply knowledge of these techniques to diagnose and manage common skin conditions, such as tinea infections, scabies, and bacterial skin</p>
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		<p>disorders.</p> <p>Educate Patients</p> <p>Effectively explain the purpose, procedure, and significance of skin scraping and Wood's lamp examination to patients.</p> <p>1 Hour</p>
NLHT7.4	Physical Examination, Skin prick test and patch test.	<p>The teacher will describe the physical examination of wheals and how to elicit dermographism, the procedure for the skin prick test and patch test while maintaining relevant SOPs through:</p> <p>PPT Presentations (Short and Focused)</p> <p>Use brief, interactive PowerPoint slides to highlight:</p> <p>Physical examination of wheals: Features to observe (size, shape, colour, distribution, and duration).</p> <p>Eliciting dermographism: Definition, technique, and clinical importance.</p> <p>Skin prick test: Tools, allergen placement, result interpretation, and SOPs.</p> <p>Patch test: Indications, application of allergens, timing, and interpretation.</p> <p>Include diagrams and high-quality images to clarify key points.</p> <p>Video Demonstrations</p> <p>Present short video clips for:</p> <p>Examining wheals and dermographism elicitation.</p> <p>Conducting the skin prick and patch tests step-by-step.</p> <p>Use videos to demonstrate the practical aspects, safety precautions, and</p>

		<p>result interpretation.</p> <p>Interactive Discussion (Case-Based and Peer-Led)</p> <p>Pose real-life clinical scenarios (e.g., a patient with chronic urticaria or contact dermatitis).</p> <p>Divide students into small groups to discuss:</p> <p>Diagnostic approach and the role of these tests.</p> <p>Expected findings and clinical interpretations.</p> <p>Facilitate a group discussion to summarize insights and clarify any misconceptions.</p> <p>Hands-On Peer Demonstrations (Supervised Practice)</p> <p>Set up small stations for students to practice:</p> <p>Simulating the elicitation of dermographism.</p> <p>Applying mock allergens for skin prick and patch tests on practice models or mannequins.</p> <p>Supervise and provide feedback to ensure proper technique and adherence to SOPs.</p> <p>Reflection and Feedback Session</p> <p>Encourage students to reflect on their learning during the session and share their takeaways.</p> <p>Provide constructive feedback on group participation and practical performance.</p> <p>Students will be able to:</p> <p>Describe Examination Procedures</p>
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		<p>Explain how to examine and document the characteristics of wheals.</p> <p>Describe the process for eliciting dermographism and its clinical relevance.</p> <p>Understand Diagnostic Techniques</p> <p>Describe the procedures for the skin prick test and patch test, emphasizing SOP adherence.</p> <p>Demonstrate Practical Skills</p> <p>Perform the simulation of dermographism elicitation and skin testing techniques under supervision.</p> <p>Interpret Results</p> <p>Accurately identify and interpret findings from wheal examinations, dermographism, skin prick tests, and patch tests.</p> <p>Recognize Clinical Indications and Safety Protocols</p> <p>List clinical indications and contraindications for these diagnostic tests.</p> <p>Adhere to safety protocols and recognize signs of adverse reactions during the procedures.</p> <p>Correlate Findings to Clinical Cases</p> <p>Apply knowledge of these diagnostic tests to real-life clinical scenarios involving allergic and hypersensitivity conditions.</p> <p>Communicate with Patients</p>
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		<p>Provide patients with clear explanations of the procedures, results, and their significance in managing allergic conditions.</p> <p>1 Hour</p>
NLHT7.5	Case Presentation of Taqashurul Jild.	<p>The teacher will describe clinical features, diagnosis, differential diagnosis, usool ilaj and ilaj of Taqashurul jild through:</p> <p>Case-Based Learning (CBL)</p> <p>Present clinical cases of Taqashurul Jild (psoriasis), including its causes.</p> <p>Encourage students to discuss and identify:</p> <p>Clinical features.</p> <p>Possible diagnoses and differential diagnoses.</p> <p>Management approaches (Usoole Ilaj and Ilaj).</p> <p>Discussions</p> <p>Discuss with Students:</p> <p>The pathophysiology of Taqashurul Jild.</p> <p>How to differentiate between Taqashurul Jild and other similar conditions (e.g., dry skin vs. psoriasis).</p> <p>Facilitate a session to consolidate findings from each group.</p> <p>Visual Aids and Clinical Images</p> <p>Use high-quality images or videos of desquamation patterns in different conditions (e.g., thick scales in psoriasis, fine scales in ichthyosis).</p>

		<p>Highlight key clinical features for accurate recognition.</p> <p>Role Play or Peer Teaching</p> <p>Assign students roles as practitioners or patients to simulate the diagnostic process.</p> <p>Include steps such as history-taking, clinical examination, and suggesting management strategies.</p> <p>Interactive Presentation on Usoole Ilaj and Ilaj</p> <p>The teacher discusses Usoole Ilaj (principles of treatment) and specific Ilaj (treatment options) in a guided discussion format, covering:</p> <p>Lifestyle modifications.</p> <p>Ilaj bit Tadbir and pharmacological treatments.</p> <p>Preventive strategies.</p> <p>Reflection and Feedback</p> <p>Allow students to reflect on their learning.</p> <p>Provide feedback on their clinical reasoning and participation.</p> <p>Students will be able to:</p> <p>Describe Clinical Features</p> <p>Identify the characteristic features of Taqashurul Jild, including:</p> <p>Desquamation patterns (e.g., thick, fine, or peeling scales).</p> <p>Associated symptoms like itching, erythema, or dryness.</p> <p>Understand Diagnosis</p>
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		<p>Describe the diagnostic approach, including:</p> <p>History-taking and identifying triggers or underlying causes.</p> <p>Performing a physical examination to assess the type and extent of desquamation.</p> <p>Laboratory tests or investigations if needed (e.g., KOH test for fungal infections, skin biopsy).</p> <p>Recognize Differential Diagnoses</p> <p>Distinguish Taqashurul Jild from conditions with similar presentations, such as:</p> <p>Ichthyosis.</p> <p>Seborrheic dermatitis.</p> <p>Fungal infections or contact dermatitis.</p> <p>Apply Usoole Ilaj (Principles of Treatment)</p> <p>Explain the Usoole Ilaj for managing Taqashurul Jild, including:</p> <p>Detoxification or temperamental correction (Unani approach).</p> <p>Moisturization and skin hydration.</p> <p>Avoidance of triggers like allergens or irritants.</p> <p>Plan Ilaj (Treatment)</p> <p>Suggest specific treatment options, such as:</p> <p>Local applications or ointments</p> <p>Dietary modifications (e.g., increasing fluids and anti-inflammatory foods).</p> <p>Pharmacological treatments</p> <p>Develop Problem-Solving Skills</p>
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		<p>Analyze patient cases to recommend diagnosis and treatment, considering both Unani and modern medicine.</p> <p>Ensure Patient Education</p> <p>Communicate effectively with patients about the condition, emphasizing treatment adherence, prevention, and follow-up.</p> <p>1 Hour</p>
NLHT7.6	Case presentation of Naffata.	<p>The teacher will describe clinical features, diagnosis, differential diagnosis, usool e ilaj and ilaj of Naffata (Pemphigus) through:</p> <p>Case-Based Learning (CBL)</p> <p>Present clinical scenarios of Naffata (Pemphigus) with patient history, physical examination findings, and diagnostic test results.</p> <p>Students analyze the cases to identify clinical features, propose differential diagnoses, and discuss appropriate management plans (Usool-e-Ilaj and Ilaj).</p> <p>Interactive Presentation or PPT</p> <p>The teacher uses an interactive presentation to:</p> <p>Describe the clinical features of Pemphigus (e.g., flaccid blisters, Nikolsky's sign).</p> <p>Explain the diagnostic workup, including biopsy and immunofluorescence.</p> <p>Discuss differential diagnoses (e.g., Bullous Pemphigoid, Stevens-Johnson Syndrome).</p>

		<p>Highlight the principles of treatment and specific therapies.</p> <p>Discussion</p> <p>Discuss with students:</p> <p>Pathophysiology and clinical manifestations of Pemphigus.</p> <p>Diagnostic criteria and distinguishing features of differential diagnoses.</p> <p>Usool-e-Ilaj (treatment principles) and specific management options.</p> <p>Visual Aids and Clinical Images</p> <p>Use high-resolution clinical images or videos to demonstrate:</p> <p>The appearance of flaccid blisters and erosions in Pemphigus.</p> <p>Positive Nikolsky's sign and other diagnostic signs.</p> <p>Role Play or Simulation</p> <p>Students simulate history-taking and clinical examination of a patient with Pemphigus.</p> <p>Emphasize the importance of eliciting Nikolsky's sign and obtaining a thorough history.</p> <p>Problem-Solving Sessions</p> <p>Present problem-based scenarios (e.g., a patient presenting with generalized erosions and oral mucosal involvement).</p> <p>Students work collaboratively to suggest diagnostic and therapeutic approaches.</p> <p>Reflection and Q&A</p>
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		<p>Encourage students to reflect on the session and ask questions about complex aspects of Pemphigus diagnosis and management.</p> <p>Students will be able to:</p> <p>Describe Clinical Features</p> <p>Identify the characteristic features of Pemphigus, including: Flaccid blisters that rupture easily, leaving erosions. Involvement of mucosal surfaces (oral, genital). Positive Nikolsky's sign (skin shearing with gentle pressure).</p> <p>Understand Diagnostic Approaches</p> <p>Explain how to diagnose Pemphigus using: Clinical history and examination. Skin biopsy and direct immunofluorescence for detecting IgG autoantibodies.</p> <p>Recognize Differential Diagnoses</p> <p>Differentiate Pemphigus from similar conditions, such as: Bullous Pemphigoid (tense blisters, subepidermal). Stevens-Johnson Syndrome (target lesions, mucosal involvement with systemic symptoms). Erythema Multiforme.</p> <p>Apply Usool-e-Ilaj (Principles of Treatment)</p> <p>Understand the treatment principles, including: Restoration of humoral balance (Unani approach).</p>
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		<p>Use of immunosuppressive agents to control autoimmunity.</p> <p>Plan Ilaj (Treatment)</p> <p>Suggest appropriate treatment plans, such as:</p> <p>Corticosteroids (e.g., Prednisolone).</p> <p>Immunosuppressants (e.g., Azathioprine, Methotrexate).</p> <p>Adjunct therapies like herbal remedies and dietary modifications in line with Unani principles.</p> <p>Correlate Clinical Findings with Management</p> <p>Integrate clinical signs and test results to propose accurate diagnoses and evidence-based management plans.</p> <p>Develop Diagnostic Reasoning Skills</p> <p>Analyze patient cases to identify distinguishing features and avoid diagnostic errors.</p> <p>Communicate Effectively</p> <p>Explain the condition, its prognosis, and the importance of treatment adherence to patients.</p> <p>Promote Patient-Centered Care</p> <p>Ensure empathy, professionalism, and ethical considerations during patient interactions and care planning.</p> <p>1 Hour</p>
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NLHT7.7	Systemic lupus Erythromatousus.	<p>The teacher will describe the clinical features, diagnosis, differential diagnosis, usool-e-ilaj and ilaj of Systemic lupus Erythromatousus through:</p> <p>Case-Based Learning (CBL)</p> <p>Present a detailed clinical scenario of a patient with symptoms suggestive of Systemic Lupus Erythematosus (SLE) (e.g., malar rash, photosensitivity, joint pain, fever, etc.).</p> <p>Students analyze the case, identify key clinical features, discuss differential diagnoses, and suggest diagnostic tests.</p> <p>Facilitate discussion on Usool-e-Ilaj (principles of treatment) and Ilaj (specific management).</p> <p>Interactive Discussion</p> <p>Discuss with students:</p> <p>Clinical features and diagnostic criteria (e.g., ACR/EULAR classification criteria).</p> <p>Differential diagnoses (e.g., dermatomyositis, rheumatoid arthritis, Sjögren's syndrome).</p> <p>Management plans in accordance with Unani principles and approach.</p> <p>Each group presents their findings for peer feedback and teacher guidance.</p> <p>Visual Aids and Presentations</p> <p>Use PowerPoint slides or visual aids to illustrate:</p> <p>Clinical features such as malar rash, discoid rash, and oral ulcers.</p> <p>Diagnostic tools like ANA (antinuclear antibody) testing, anti-dsDNA,</p>
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		<p>and complement levels.</p> <p>Treatment options including immunosuppressants, corticosteroids, and Unani regimens.</p> <p>Role Play or Simulation</p> <p>Simulate a consultation where students act as practitioners taking a history and performing a physical examination of a patient with suspected SLE.</p> <p>Include elicitation of key clinical features (e.g., joint tenderness, rash distribution).</p> <p>Problem-Solving Session</p> <p>Provide diagnostic challenges or variations in patient presentation.</p> <p>Students work collaboratively to identify features distinguishing SLE from similar conditions.</p> <p>Interactive Question and Answer (Q&A)</p> <p>Conduct an engaging Q&A session to test students' understanding of SLE diagnosis, differential diagnosis, and treatment.</p> <p>Reflection and Feedback</p> <p>Students reflect on their learning process and areas for improvement.</p> <p>Provide constructive feedback on their diagnostic reasoning and proposed treatment plans.</p> <p>Students will be able to:</p> <p>Identify Clinical Features</p>
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		<p>Recognize hallmark signs and symptoms of SLE, such as: Malar rash ("butterfly rash"), discoid lesions, photosensitivity. Arthralgia/arthritis, serositis, renal involvement (proteinuria).</p> <p>Understand Diagnostic Criteria</p> <p>Explain the diagnostic approach, including: Laboratory tests: ANA, anti-dsDNA, anti-Smith antibodies, complement levels, and ESR/CRP. Role of clinical findings and investigations in fulfilling ACR/EULAR criteria.</p> <p>Differentiate from Similar Conditions</p> <p>Distinguish SLE from other autoimmune or connective tissue disorders, such as: Dermatomyositis (Gottron's papules, heliotrope rash). Rheumatoid arthritis (joint deformities, specific serology). Sjögren's syndrome (sicca symptoms, salivary gland involvement).</p> <p>Apply Usool-e-Ilaj (Principles of Treatment)</p> <p>Explain the Unani treatment principles, such as: Detoxification and restoring humoral balance. Strengthening the immune system.</p> <p>Plan Ilaj (Treatment)</p> <p>Propose a comprehensive treatment plan that integrates: Unani therapies: Pharmacological remedies and Ilaj bit tadabir (e.g., anti-inflammatory and immune-modulating unani drugs), dietary</p>
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		<p>modifications, and regimens.</p> <p>Correlate Clinical and Laboratory Findings</p> <p>Integrate patient history, physical examination, and diagnostic test results into a cohesive diagnosis and treatment strategy.</p> <p>Develop Problem-Solving and Critical Thinking Skills</p> <p>Analyze patient presentations and effectively differentiate SLE from mimicking conditions.</p> <p>Communicate Effectively</p> <p>Educate patients about the disease, including:</p> <p>Chronic nature and potential complications.</p> <p>Importance of medication adherence and regular monitoring.</p> <p>Promote Holistic and Patient-Centered Care</p> <p>Emphasize the importance of empathy, ethical considerations, and a holistic approach to managing chronic autoimmune diseases like SLE.</p> <p>1 Hour</p>
NLHT7.8	Description of Bad e shanam.	<p>The teacher will Describe the types, clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj Bad e shanam (Acne Rosacea) through:</p> <p>Teaching-Learning Methods</p> <p>Case-Based Learning (CBL)</p>

		<p>Present a patient case with symptoms of Bad e Shanam (Acne Rosacea), including facial redness, pustules, or telangiectasia.</p> <p>Guide students to identify the type, discuss clinical features, make a diagnosis, and explore differential diagnoses.</p> <p>Discuss the treatment approach (Usool-e-Ilaj and Ilaj) step-by-step.</p> <p>Interactive Group Discussion</p> <p>Organize small group discussions on:</p> <p>Types of Acne Rosacea (e.g., Erythematotelangiectatic, Papulopustular, Phymatous, Ocular).</p> <p>Diagnosis based on clinical examination and ruling out other conditions.</p> <p>Differential diagnosis such as acne vulgaris, seborrheic dermatitis, lupus, or perioral dermatitis.</p> <p>Each group presents their findings, followed by teacher feedback.</p> <p>Visual Aids and Multimedia Tools</p> <p>Use PowerPoint slides, images, or video clips to illustrate:</p> <p>The different stages and types of Acne Rosacea.</p> <p>Diagnostic criteria and key distinguishing features.</p> <p>Management strategies (modern medicine and Unani approaches).</p> <p>Demonstration of Clinical Examination</p> <p>If possible, use a simulated or actual patient to demonstrate clinical examination techniques for identifying facial redness, pustules, and telangiectasia.</p> <p>Highlight how to document findings accurately.</p> <p>Usool-e-Ilaj and Ilaj Discussions</p>
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		<p>Explain Usool-e-Ilaj (Principles of treatment) and Ilaj (specific interventions), integrating:</p> <p>Unani therapies (e.g., Unani remedies for inflammation, detoxification therapies).</p> <p>Modern treatments (e.g. laser therapy).</p> <p>Role Play or Simulation</p> <p>Assign roles for a simulated consultation where students practice explaining the condition, treatment options, and lifestyle modifications to a patient.</p> <p>Problem-Solving Session</p> <p>Provide diagnostic challenges where students analyze and differentiate Acne Rosacea from mimicking conditions like lupus erythematosus or acne vulgaris.</p> <p>Reflection and Feedback</p> <p>Conclude with reflective discussions and provide feedback on diagnostic and treatment strategies discussed during the session.</p> <p>Students will be able to:</p> <p>Understand Types of Acne Rosacea</p> <p>Differentiate between the subtypes of Acne Rosacea:</p> <p>Erythematotelangiectatic: Persistent redness, visible blood vessels.</p> <p>Papulopustular: Redness with acne-like bumps.</p> <p>Phymatous: Skin thickening, irregular surface.</p>
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		<p>Ocular: Irritated eyes, eyelid inflammation.</p> <p>Identify Clinical Features</p> <p>Recognize hallmark signs and symptoms, such as: Persistent facial erythema, telangiectasia, papules, pustules, and rhinophyma.</p> <p>Triggers like heat, spicy food, alcohol, or sunlight.</p> <p>Diagnose Acne Rosacea</p> <p>Apply clinical criteria for diagnosis, emphasizing patient history and physical examination.</p> <p>Understand Differential Diagnoses</p> <p>Differentiate Acne Rosacea from other skin conditions, such as: Acne vulgaris (comedones, no flushing). Seborrheic dermatitis (scaly patches in eyebrows or nasolabial folds). Systemic lupus erythematosus (malar rash without pustules). Perioral dermatitis (localized rash around the mouth).</p> <p>Apply Usool-e-Ilaj (Principles of Treatment)</p> <p>Understand Unani principles for treating Acne Rosacea, including: Detoxification therapies to restore humoral balance. Strengthening natural immunity and lifestyle modifications to avoid triggers.</p> <p>Plan Ilaj (Treatment)</p> <p>Propose a holistic treatment plan integrating Unani and modern medicine:</p>
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		<p>Unani Approach: (anti-inflammatory, blood purifiers), diet adjustments, and stress management.</p> <p>Latest approach: laser therapy for telangiectasia.</p> <p>Educate Patients</p> <p>Counsel patients on avoiding triggers, sun protection, and following prescribed treatment.</p> <p>Develop Diagnostic Reasoning</p> <p>Analyze case scenarios and apply clinical reasoning to diagnose Acne Rosacea accurately.</p> <p>Communicate Effectively</p> <p>Explain the disease process, prognosis, and treatment options to patients with empathy and clarity.</p> <p>Integrate Knowledge into Clinical Practice</p> <p>Combine clinical knowledge with practical skills to manage Acne Rosacea effectively in real-world settings.</p> <p>1 Hour</p>
NLHT7.9	Description of Ichthyosis and Acanthosis Nigricans.	<p>The teacher will demonstrate the clinical features, investigations, diagnosis, differential diagnosis, usool ilaj and ilaj of Ichthyosis and Acanthosis Nigricans through:</p> <p>Case-Based Learning (CBL)</p> <p>Present patient scenarios for Ichthyosis and Acanthosis Nigricans with clinical details (e.g., dry, scaly skin for Ichthyosis and hyperpigmented,</p>

		<p>velvety plaques for Acanthosis Nigricans).</p> <p>Students analyze the cases to identify clinical features, suggest investigations, and propose differential diagnoses.</p> <p>Interactive Group Discussions</p> <p>Discuss with students:</p> <p>Clinical Features: Key differences between Ichthyosis and Acanthosis Nigricans.</p> <p>Investigations: Skin biopsy, blood glucose tests, or lipid profiles for Acanthosis Nigricans; genetic testing for Ichthyosis.</p> <p>Usool-e-Ilaj (Principles of treatment) and Ilaj (specific treatments).</p> <p>Students present their findings, followed by teacher-guided discussions.</p> <p>Visual Aids and Multimedia</p> <p>Use PowerPoint presentations, clinical images, and videos to demonstrate:</p> <p>The characteristic appearance of Ichthyosis and Acanthosis Nigricans.</p> <p>Diagnostic procedures and comparison of differential diagnoses.</p> <p>Problem-Solving Sessions</p> <p>Provide diagnostic challenges where students compare and contrast Ichthyosis and Acanthosis Nigricans with similar conditions (e.g., eczema, psoriasis, Addison's disease).</p> <p>Role Play/Simulated Consultation</p>
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		<p>Assign roles for students to practice patient history-taking and explaining the condition, investigations, and treatment plans to a simulated patient.</p> <p>Guided Reading</p> <p>Assign selected readings on the pathophysiology, clinical features, and treatment of Ichthyosis and Acanthosis Nigricans.</p> <p>Discuss key takeaways in a follow-up session.</p> <p>Peer Teaching</p> <p>Students teach each other specific aspects, such as clinical features or differential diagnoses, under teacher supervision.</p> <p>Reflection and Feedback</p> <p>Encourage students to reflect on their learning experience, and provide constructive feedback to enhance understanding.</p> <p>Students will be able to:</p> <p>For Ichthyosis:</p> <p>Recognize Clinical Features</p> <p>Identify hallmark signs of Ichthyosis, such as:</p> <p>Dry, scaly skin (fish-scale appearance).</p> <p>Symmetrical distribution, commonly on extensor surfaces.</p> <p>Worsening in cold weather.</p> <p>Understand Pathophysiology</p>
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		<p>Explain the genetic basis and impaired keratinization underlying Ichthyosis.</p> <p>Investigate and Diagnose</p> <p>Propose appropriate investigations, such as: Skin biopsy for histopathological examination. Genetic testing for inherited forms.</p> <p>Differentiate from Similar Conditions</p> <p>Compare and contrast Ichthyosis with eczema, psoriasis, and keratosis pilaris.</p> <p>Apply Usool-e-Ilaj and Ilaj</p> <p>Formulate a treatment plan incorporating: Unani principles: Moisturizing and emollient-based therapies, detoxification (tanqiya-e-badan) and hydration therapies. For Acanthosis Nigricans:</p> <p>Identify Clinical Features</p> <p>Recognize the characteristic signs, including: Hyperpigmented, velvety plaques in skin folds (neck, axillae, groin). Associated conditions like obesity, insulin resistance, or malignancy.</p> <p>Understand Pathophysiology</p>
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		<p>Explain the role of insulin resistance, endocrine disorders, or neoplastic syndromes in the development of Acanthosis Nigricans.</p> <p>Investigate and Diagnose</p> <p>Suggest relevant investigations, such as:</p> <p>Fasting blood glucose, HbA1c for diabetes screening.</p> <p>Lipid profile for metabolic syndrome.</p> <p>Biopsy in atypical or suspicious cases.</p> <p>Differentiate from Similar Conditions</p> <p>Compare Acanthosis Nigricans with Addison's disease, post-inflammatory hyperpigmentation, or lichen planus.</p> <p>Plan Usool-e-Ilaj and Ilaj</p> <p>Develop a treatment strategy involving:</p> <p>Unani interventions: Blood purification (tanqiya-e-dam), lifestyle modifications.</p> <p>Treating the underlying cause: e.g., weight loss, controlling diabetes), and topical treatments for hyperpigmentation.</p> <p>General Learning Objectives for both conditions:</p> <p>Understand Diagnostic Principles</p> <p>Correlate clinical features with investigations for accurate diagnosis.</p> <p>Develop Clinical Reasoning</p>
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		<p>Distinguish between Ichthyosis, Acanthosis Nigricans, and mimicking conditions based on history and examination findings.</p> <p>Integrate Unani and Modern Medicine</p> <p>Combine Usool-e-Ilaj with evidence-based modern approaches for holistic patient care.</p> <p>Communicate Effectively</p> <p>Explain conditions, diagnostic procedures, and treatments to patients with clarity and empathy.</p> <p>Promote Patient-Centered Care</p> <p>Emphasize lifestyle modifications and preventive care to improve patient outcomes.</p> <p>1 Hour</p>
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Non Lecture Hour Practical

S.No	Name	Description of Practical Activity
NLHP7.1	Acne Severity Index (ASI) and Global Acne Grading System (GAGS).	<p>The teacher will conduct bedside demonstration for calculating the Acne severity index (ASI)</p> <p>Students will learn how to calculate the lesion count and severity using the Acne severity index (ASI) and repeat and document the results.</p> <p>The teacher will conduct bedside demonstration for calculating the Global Acne Grading System (GAGS)</p>

		<p>Students will learn how to calculate the lesion count and severity using the Global Acne Grading System (GAGS)</p> <p>1 Hour</p>
NLHP7.2	Patch test and skin prick test.	<p>The teacher will demonstrate the procedure of the Patch test and skin prick test through bedside demonstration and other means like:</p> <p>Bedside Demonstration</p> <p>The teacher performs the procedures of the patch test and skin prick test on a volunteer or mannequin.</p> <p>Explain each step in real-time, emphasizing the purpose, equipment, and techniques involved.</p> <p>Interactive Discussion</p> <p>Encourage students to ask questions during or after the demonstration.</p> <p>Discuss the clinical relevance of the tests, including indications, contraindications, and interpretation of results.</p> <p>Hands-On Practice</p> <p>Allow students to practice the procedure under supervision, either on mannequins, simulation kits, or peers (if safe and appropriate).</p> <p>Provide a checklist for students to follow during the practice session.</p> <p>Case-Based Learning</p> <p>Present clinical scenarios where these tests are indicated, such as a patient with suspected contact dermatitis (patch test) or allergic rhinitis (skin prick test).</p>

		<p>Students analyze the case and discuss the application and interpretation of the tests.</p> <p>Visual Aids</p> <p>Use video clips, charts or posters showing common allergens, test reaction patterns, and test interpretation.</p> <p>Provide printed or digital guides summarizing the steps of each procedure.</p> <p>Students will be able to:</p> <p>Understand the Purpose</p> <p>Explain the purpose of the patch test and skin prick test in diagnosing allergic conditions.</p> <p>Perform the Procedures</p> <p>Demonstrate the correct technique for conducting a patch test and a skin prick test under supervision.</p> <p>Differentiate the Tests</p> <p>Identify the differences between the patch test (delayed hypersensitivity) and the skin prick test (immediate hypersensitivity).</p> <p>Interpret Results</p> <p>Accurately recognize positive and negative reactions for both tests and understand their clinical significance.</p> <p>Recognize Indications and Contraindications</p>
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		<p>List the clinical indications, contraindications, and potential complications of each test.</p> <p>Ensure Safety</p> <p>Follow safety protocols during the tests and understand the management of adverse reactions, such as anaphylaxis during the skin prick test.</p> <p>Educate Patients</p> <p>Provide patients with clear instructions regarding preparation, procedure expectations, and follow-up care.</p> <p>2 Hour</p>
NLHP7.3	Skin Biopsy	<p>The teacher will demonstrate the step-by-step procedure for conducting Skin biopsy while maintaining relevant SOPs through:</p> <p>Live Demonstration</p> <p>The teacher demonstrates the step-by-step procedure of a skin biopsy on a mannequin, model, or patient (if appropriate).</p> <p>Emphasizes critical steps, including:</p> <p>Patient preparation.</p> <p>Choice of biopsy type (punch, shave, excisional).</p> <p>Maintaining sterile techniques and other SOPs.</p> <p>Proper specimen handling and labelling.</p> <p>Interactive Discussion</p> <p>During or after the demonstration, engage students in discussions to:</p> <p>Clarify doubts about the procedure.</p>

		<p>Discuss indications, contraindications, and complications of a skin biopsy.</p> <p>Explore real-world applications and scenarios.</p> <p>Case-Based Learning (CBL)</p> <p>Present clinical cases where a skin biopsy is indicated (e.g., suspected melanoma, chronic dermatitis, or unusual skin lesions).</p> <p>Guide students in identifying the appropriate type of biopsy, explaining the rationale for choosing it, and interpreting the results.</p> <p>Hands-On Practice</p> <p>Allow students to practice the procedure on models, mannequins, or biopsy simulators under supervision.</p> <p>Provide a checklist to guide students through each step and ensure adherence to SOPs.</p> <p>Visual Aids</p> <p>Use Video clips, charts, posters, or PowerPoint slides to illustrate:</p> <p>The anatomy of the skin.</p> <p>Different biopsy techniques.</p> <p>Proper specimen handling and storage.</p> <p>Reflection and Feedback</p> <p>After practice sessions, encourage students to reflect on their performance.</p> <p>Provide immediate, constructive feedback to help students refine their skills and address knowledge gaps.</p>
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		<p>Students will learn the process of performing Skin Biopsy with relevant SOPs in place and will be able to:</p> <p>Explain the Procedure</p> <p>Describe the step-by-step process of conducting a skin biopsy, including patient preparation, equipment use, and specimen handling.</p> <p>Understand Indications and Types</p> <p>Differentiate between the types of skin biopsies (punch, shave, excisional) and identify the clinical indications for each.</p> <p>Adhere to SOPs</p> <p>Demonstrate proper adherence to Standard Operating Procedures (SOPs), including sterile techniques, infection control, and safety protocols.</p> <p>Perform the Procedure</p> <p>Conduct a simulated skin biopsy on a model or mannequin while following the correct technique.</p> <p>Recognize Complications</p> <p>Identify potential complications of a skin biopsy and describe how to manage them.</p> <p>Counsel Patients</p>
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		<p>Effectively communicate with patients about the purpose of the biopsy, the procedure steps, potential risks, and post-procedure care.</p> <p>Correlate Findings</p> <p>Understand the role of biopsy results in diagnosing and managing dermatological and systemic conditions.</p> <p>1 Hour</p>
NLHP7.4	Skin scraping and Wood's lamp examination for detecting fungal/bacterial infections.	<p>The teacher will demonstrate the procedure for skin scraping and Wood's lamp examination to evaluate skin lesions and detect fungal/bacterial infections through:</p> <p>Live Demonstration</p> <p>The teacher performs skin scraping and Wood's lamp examination on a volunteer, mannequin, or simulated patient, clearly demonstrating each step.</p> <p>Key focus areas:</p> <p>Skin Scraping:</p> <p>Equipment used (e.g., scalpel, glass slide).</p> <p>Proper collection technique and handling of the sample.</p> <p>Sample preparation for microscopic examination (e.g., KOH test).</p> <p>Wood's Lamp Examination:</p> <p>Proper patient preparation (e.g., cleaning the skin).</p> <p>Correct use of the lamp in a darkened room.</p> <p>Identifying fluorescence patterns for fungal infections (e.g., yellow-green for <i>Microsporum canis</i>) and bacterial infections (e.g., coral red for</p>

		<p>erythrasma).</p> <p>Case-Based Learning (CBL)</p> <p>Present real-life clinical cases, such as:</p> <p>A scaly lesion on the foot, suspected to be tinea pedis.</p> <p>Hypopigmented patches on the chest, likely pityriasis versicolor.</p> <p>Guide students in determining which diagnostic technique to use and how to interpret findings.</p> <p>Hands-On Practice</p> <p>Allow students to practice skin-scraping techniques on models or simulators under supervision.</p> <p>Provide students access to Wood's lamps to practice observing fluorescence on pre-treated simulated samples or clinical cases.</p> <p>Interactive Discussions</p> <p>After the demonstration, engage students in discussions about:</p> <p>The clinical relevance of the procedures.</p> <p>The significance of findings under the microscope and Wood's lamp.</p> <p>Limitations and possible errors during the procedures.</p> <p>Visual Aids and Multimedia</p> <p>Use video clips, posters, slides, or video clips to illustrate examples of fungal hyphae under a microscope and fluorescence patterns seen with Wood's lamp.</p> <p>Provide a guide summarizing diagnostic features and common errors.</p> <p>Reflective Feedback</p>
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		<p>Encourage students to share their reflections and observations after practising the techniques.</p> <p>Provide detailed feedback on their performance to improve their skills.</p> <p>Students will be able to:</p> <p>Understand the Procedures</p> <p>Explain the step-by-step process for conducting skin scraping and Wood's lamp examination.</p> <p>Identify Indications</p> <p>List the clinical indications for using skin scraping and Wood's lamp in the diagnosis of fungal and bacterial infections.</p> <p>Perform the Techniques</p> <p>Demonstrate skin scraping and specimen preparation for microscopic evaluation.</p> <p>Conduct a Wood's lamp examination while maintaining proper technique and patient comfort.</p> <p>Interpret Diagnostic Findings</p> <p>Recognize fungal hyphae, spores, or mites under the microscope.</p> <p>Identify fluorescence patterns seen in fungal (e.g., tinea capitis) and bacterial (e.g., erythrasma) infections.</p> <p>Maintain SOPs</p>
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		<p>Adhere to Standard Operating Procedures (SOPs), including infection control, sample collection, and safe handling of equipment.</p> <p>Understand Limitations</p> <p>Describe the limitations of skin scraping and Wood's lamp examination and when additional investigations (e.g., culture or biopsy) are needed.</p> <p>Correlate with Clinical Practice</p> <p>Apply the findings from these procedures to diagnose and manage common dermatological conditions effectively.</p> <p>Educate Patients</p> <p>Provide clear explanations to patients regarding the purpose, procedure, and potential findings of the tests.</p> <p>2 Hour</p>
NLHP7.5	<p>Skin prick test and patch test.</p> <p>Physical examination of wheals and Dermographism.</p>	<p>The teacher will Demonstrate the procedure for conducting the Skin prick test and patch test with all relevant SOPs in place and Physical examination of wheals, and how to elicit and evaluate dermatographism through:</p> <p>Live Demonstration</p> <p>The teacher performs the following procedures on a simulated patient, model, or volunteer:</p> <p>Skin Prick Test: Step-by-step demonstration, including allergen application, pricking technique, result evaluation, and maintaining SOPs.</p>

		<p>Patch Test: Application of allergens using adhesive patches, observing proper technique, timing, and result interpretation.</p> <p>Physical Examination of Wheals: Assessing size, shape, colour, distribution, and duration of wheals.</p> <p>Eliciting Dermographism: Using a blunt object to stroke the skin and evaluating the raised wheals and redness.</p> <p>Focus on emphasizing proper technique, patient safety, and adherence to infection control protocols.</p> <p>Video Demonstrations</p> <p>Short videos showing real-world examples of:</p> <p>Positive and negative results of skin prick and patch tests.</p> <p>Examination of wheals and identifying dermographism in different patient scenarios.</p> <p>Videos to supplement live demonstrations for difficult-to-repeat steps.</p> <p>Interactive Group Discussion</p> <p>Engage students in discussions about:</p> <p>The clinical importance of these diagnostic techniques.</p> <p>How to interpret findings and relate them to allergic and hypersensitivity conditions.</p> <p>Use Q&A sessions to clarify common doubts.</p> <p>Hands-On Practice</p> <p>Allow students to practice:</p> <p>Simulated skin prick and patch tests using mannequins or dummy materials.</p>
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		<p>Examining peers (if appropriate) for dermographism and measuring wheals under supervision.</p> <p>Provide immediate feedback to improve their technique and understanding.</p> <p>Case-Based Learning (CBL)</p> <p>Present clinical cases (e.g., chronic urticaria or suspected contact dermatitis).</p> <p>Encourage students to apply these diagnostic methods in identifying the underlying cause.</p> <p>Feedback and Reflection</p> <p>Conduct a reflection session where students share their experiences and learnings from the practice.</p> <p>Provide constructive feedback on their practical skills and participation.</p> <p>Students will be able to:</p> <p>Demonstrate Diagnostic Procedures</p> <p>Perform the skin prick test and patch test while adhering to all relevant SOPs.</p> <p>Perform Physical Examination</p> <p>Conduct a systematic examination of wheals, including measuring size and observing other characteristics.</p> <p>Demonstrate the correct method for eliciting and evaluating</p>
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		<p>dermographism.</p> <p>Interpret Findings</p> <p>Recognize and document the results of skin prick tests, patch tests, and dermographism accurately.</p> <p>Correlate the findings with clinical conditions, such as allergic rhinitis, urticaria, or contact dermatitis.</p> <p>Adhere to SOPs and Ensure Safety</p> <p>Follow infection control and safety protocols while performing these procedures.</p> <p>Identify and manage potential adverse reactions, such as anaphylaxis, during diagnostic tests.</p> <p>Recognize Clinical Indications</p> <p>Identify the clinical indications, contraindications, and limitations of these diagnostic methods.</p> <p>Apply Knowledge to Clinical Practice</p> <p>Use the findings of these diagnostic tests to form a diagnosis and develop a management plan for allergic and hypersensitivity conditions.</p> <p>Communicate Effectively</p> <p>Educate patients about the purpose, process, and significance of these tests in diagnosing their condition.</p> <p>2 Hour</p>
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NLHP7.6	Examination of lichen planus Lesions.	<p>The teacher will demonstrate how to perform the dermatological examination of lichen planus lesions, their distribution and morphology through:</p> <p>Live Demonstration</p> <p>The teacher performs a comprehensive dermatological examination on a simulated patient, mannequin, or clinical image, focusing on:</p> <p>Inspection of lichen planus lesions: Assessing morphology, distribution, and specific features like Wickham's striae.</p> <p>Palpation: Evaluating the texture, tenderness, and scaling of the lesions.</p> <p>Systematic Examination: Covering all affected sites, such as the oral mucosa, scalp, nails, and genital areas.</p> <p>High-Quality Images and Video Demonstrations</p> <p>Use clinical images or video clips to show the range of presentations of lichen planus, including:</p> <p>Violaceous, flat-topped papules or plaques.</p> <p>Koebner phenomenon (lesions appearing at sites of trauma).</p> <p>Variants like hypertrophic, atrophic, or annular lichen planus.</p> <p>Interactive Discussion</p> <p>Facilitate group discussions to:</p> <p>Compare lichen planus lesions with other differential diagnoses (e.g., psoriasis or eczema).</p> <p>Discuss the significance of lesion distribution (e.g., flexural surfaces,</p>
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		<p>oral mucosa).</p> <p>Case-Based Learning (CBL)</p> <p>Present clinical scenarios involving lichen planus affecting different sites (e.g., oral mucosa, nails, or scalp).</p> <p>Encourage students to develop diagnostic and management plans based on their findings.</p> <p>Hands-On Practice</p> <p>Students practice examining simulated lesions on models or clinical images.</p> <p>Focus on identifying specific features like Wickham's striae, pigmentation, and distribution patterns.</p> <p>Reflection and Feedback</p> <p>Encourage students to share their observations after practice.</p> <p>Provide constructive feedback to improve their examination technique and clinical reasoning.</p> <p>Students will be able to:</p> <p>Demonstrate Examination Skills</p> <p>Perform a thorough dermatological examination to evaluate the morphology, distribution, and specific features of lichen planus lesions.</p> <p>Identify Morphological Features</p> <p>Recognize the characteristic appearance of lichen planus lesions, including:</p>
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		<p>Violaceous, flat-topped papules or plaques.</p> <p>Wickham's striae (fine white lines).</p> <p>Variants like hypertrophic, annular, or pigmentary lichen planus.</p> <p>Assess Distribution</p> <p>Identify common sites of involvement, including flexural surfaces, oral mucosa, nails, scalp, and genital areas.</p> <p>Differentiate from Other Conditions</p> <p>Distinguish lichen planus from other dermatological conditions with similar presentations (e.g., psoriasis, eczema, or lupus).</p> <p>Understand Associated Findings</p> <p>Explain systemic associations and complications of lichen planus, such as oral discomfort or scarring alopecia.</p> <p>Correlate with Clinical Scenarios</p> <p>Apply examination findings to develop diagnostic hypotheses and management plans for patients with suspected lichen planus.</p> <p>Ensure Professionalism</p> <p>Maintain patient comfort and confidentiality while conducting a dermatological examination.</p> <p>Communicate Effectively</p> <p>Educate patients about the condition, the significance of findings, and the next steps in diagnosis or treatment.</p> <p>2 Hour</p>
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NLHP7.7	Candle Grease Sign and Auspitz sign.	<p>The teacher will demonstrate the Candle Grease Sign and Auspitz sign in patients of psoriasis through:</p> <p>Live Demonstration</p> <p>The teacher demonstrates the Candle Grease Sign (scraping the scales to reveal shiny skin beneath) and the Auspitz Sign (pinpoint bleeding upon scraping scales) on a simulated patient or a volunteer with psoriasis.</p> <p>Video Demonstrations</p> <p>Show pre-recorded videos of these signs being demonstrated on actual patients with psoriasis.</p> <p>Highlight the proper technique and diagnostic relevance of each sign.</p> <p>Hands-On Practice</p> <p>Provide students with an opportunity to practice eliciting these signs on mannequins, simulated skin, or under supervision on consenting patients (if feasible).</p> <p>Ensure they follow proper infection control measures and patient safety protocols.</p> <p>Interactive Discussion</p> <p>Discuss the pathophysiological basis of these signs (e.g., the buildup of scales, and fragile capillaries in psoriatic lesions).</p> <p>Encourage students to share observations and ask questions during or</p>
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		<p>after the demonstration.</p> <p>Case-Based Learning (CBL)</p> <p>Present a case of a patient with scaly plaques and ask students to identify how Candle Grease and Auspitz signs contribute to the diagnosis of psoriasis.</p> <p>Reflection and Feedback</p> <p>After the demonstration, students reflect on the steps involved in eliciting the signs and their diagnostic value.</p> <p>Provide constructive feedback to improve their technique and clinical reasoning.</p> <p>Students will be able to:</p> <p>Demonstrate Diagnostic Techniques</p> <p>Perform the Candle Grease Sign and Auspitz Sign accurately and systematically under clinical supervision.</p> <p>Identify Diagnostic Features</p> <p>Recognize and interpret positive results of the Candle Grease Sign (shiny appearance of skin) and Auspitz Sign (pinpoint bleeding).</p> <p>Understand Pathophysiology</p> <p>Explain the underlying mechanism of these signs, such as hyperproliferation of keratinocytes and fragile capillaries in psoriasis.</p> <p>Differentiate from Other Conditions</p>
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		<p>Use these signs to differentiate psoriasis from other conditions with scaly lesions (e.g., eczema, seborrheic dermatitis).</p> <p>Apply to Clinical Diagnosis</p> <p>Incorporate these signs into a broader dermatological examination to support the diagnosis of psoriasis.</p> <p>Ensure Patient Safety and Comfort</p> <p>Perform the examination while ensuring patient comfort, explaining the procedure, and maintaining infection control measures.</p> <p>Integrate into Clinical Practice</p> <p>Use the findings from these signs, along with other clinical features, to form a complete diagnostic assessment of psoriasis.</p> <p>Communicate Findings</p> <p>Clearly describe the significance of these signs to peers, teachers, or patients during discussions or case presentations.</p> <p>1 Hour</p>
NLHP7.8	T zanck smear test & skin biopsy test.	<p>The teacher will demonstrate the Tzanck smear test & skin biopsy test while maintaining the relevant SOPs through:</p> <p>Live Demonstration</p> <p>The teacher demonstrates the step-by-step procedure for performing the Tzanck smear test (collection and microscopic examination of vesicle fluid) and skin biopsy test on a mannequin, simulated patient, or clinical setup.</p>

		<p>Emphasize proper techniques, sterile procedures, and safety protocols (SOPs).</p> <p>Video Clips</p> <p>Show high-quality videos of Tzanck smear and skin biopsy procedures, highlighting:</p> <p>Equipment setup.</p> <p>Sample collection techniques.</p> <p>Slide preparation and staining (e.g., Giemsa stain for Tzanck smear).</p> <p>Histopathological examination for biopsy.</p> <p>Hands-On Practice</p> <p>Provide opportunities for students to practice both tests on models or simulated skin under supervision.</p> <p>Use microscopic slides for students to observe the findings (e.g., multinucleated giant cells in Tzanck smear, histological layers in skin biopsy).</p> <p>Interactive Discussion</p> <p>Discuss the indications, clinical significance, and interpretation of results for the Tzanck smear and skin biopsy.</p> <p>Encourage students to ask questions about challenges they might face in real clinical scenarios.</p> <p>Case-Based Learning (CBL)</p> <p>Present a case scenario of a patient with vesicular lesions (e.g., suspected herpes simplex or pemphigus).</p> <p>Students suggest diagnostic steps, including when and why a Tzanck</p>
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		<p>smear or skin biopsy is appropriate.</p> <p>Role Play</p> <p>Assign roles to students to simulate the procedure, with one student acting as the practitioner and another as the patient.</p> <p>Reflection and Feedback</p> <p>After the demonstration and practice, the teacher facilitates a reflective discussion, providing constructive feedback on technique, interpretation, and patient care.</p> <p>Students will be able to:</p> <p>Perform Diagnostic Procedures</p> <p>Demonstrate the correct technique for:</p> <p>Tzanck smear test (vesicle fluid collection, slide preparation, staining, and interpretation).</p> <p>Skin biopsy test (punch or excisional biopsy with sterile techniques).</p> <p>Understand Indications and Clinical Relevance</p> <p>Identify clinical situations where these tests are essential, such as:</p> <p>Tzanck smear: Diagnosing vesicular or bullous skin diseases (e.g., herpes simplex, varicella, pemphigus).</p> <p>Skin biopsy: Diagnosing inflammatory, infectious, or neoplastic skin conditions.</p> <p>Interpret Results</p>
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		<p>Recognize key microscopic findings:</p> <p>Tzanck smear: Multinucleated giant cells, acantholytic cells.</p> <p>Skin biopsy: Histopathological features of specific skin diseases.</p> <p>Adhere to SOPs</p> <p>Follow standard operating procedures for:</p> <p>Ensuring patient safety and sterile technique during sample collection.</p> <p>Proper labelling, handling, and transport of specimens.</p> <p>Correlate with Clinical Scenarios</p> <p>Integrate diagnostic test findings with clinical symptoms to arrive at a comprehensive diagnosis.</p> <p>Differentiate Between Tests</p> <p>Understand the specific advantages and limitations of Tzanck smear versus skin biopsy and when to use each.</p> <p>Develop Problem-Solving Skills</p> <p>Analyze patient cases to determine the most appropriate diagnostic procedure and interpret findings accurately.</p> <p>Communicate Effectively</p> <p>Explain the procedure, its importance, and possible outcomes to patients with clarity and empathy.</p> <p>Integrate Diagnostic Tools into Practice</p>
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		<p>Combine test results with other clinical findings to create an evidence-based treatment plan.</p> <p>1 Hour</p>
NLHP7.9	Examination of SLE patient.	<p>The teacher will conduct/demonstrate Clinical/Bedside examination on SLE patient through:</p> <p>Live Demonstration</p> <p>The teacher conducts a clinical/bedside examination on an actual or simulated patient with Systemic Lupus Erythematosus (SLE), demonstrating:</p> <p>History taking with a focus on systemic and organ-specific symptoms (e.g., fatigue, joint pain, skin rashes, photosensitivity).</p> <p>Physical examination to identify key signs (e.g., malar rash, joint swelling, oral ulcers, alopecia).</p> <p>Interactive Discussion</p> <p>Encourage students to actively participate by asking questions, discussing findings, and correlating clinical features with underlying pathophysiology.</p> <p>Hands-On Practice</p> <p>Allow students to perform supervised clinical examinations on the patient or model to build confidence in identifying SLE-related clinical signs.</p> <p>Case-Based Learning (CBL)</p>

		<p>Present a case scenario with incomplete information, prompting students to ask relevant history questions and suggest physical examination techniques to reach a diagnosis.</p> <p>Visual Aids and Models</p> <p>Use videos, charts, diagrams, and images to reinforce: The systemic nature of SLE. Patterns of organ involvement (e.g., renal, neurological, hematological).</p> <p>Checklist/Guided Practice</p> <p>Provide students with a structured checklist for a systemic examination, emphasizing: Skin examination (rashes, ulcers, hair loss). Joint assessment (pain, swelling, deformities). Cardiopulmonary and renal evaluation.</p> <p>Reflection and Feedback</p> <p>Facilitate a discussion after the session for students to reflect on what they learned and provide constructive feedback on their examination techniques.</p> <p>Students will be able to:</p> <p>Conduct a Systematic Clinical Examination</p> <p>Perform a thorough bedside examination of an SLE patient, including: General appearance (fatigue, pallor, rash). Skin: Malar rash, discoid lesions, photosensitivity, alopecia. Musculoskeletal system: Joint tenderness, swelling, deformities.</p>
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		<p>Cardiovascular and respiratory systems: Signs of serositis (pleuritis, pericarditis).</p> <p>Abdomen: Hepatosplenomegaly.</p> <p>Neurological system: Neuropathy, seizures, cognitive dysfunction.</p> <p>Obtain Relevant History</p> <p>Elicit a detailed history to identify SLE symptoms such as:</p> <p>Fatigue, fever, weight loss.</p> <p>Joint pain and stiffness.</p> <p>Photosensitivity and recurrent oral ulcers.</p> <p>Renal symptoms (e.g., swelling, frothy urine) and neurological symptoms.</p> <p>Identify Clinical Signs of SLE</p> <p>Recognize hallmark signs of SLE, including:</p> <p>Malar rash (“butterfly rash”) and discoid rash.</p> <p>Photosensitivity and oral ulcers.</p> <p>Joint abnormalities (symmetrical arthritis).</p> <p>Correlate Clinical Features with Diagnosis</p> <p>Connect physical findings with diagnostic criteria (e.g., ACR/EULAR SLE criteria) to establish a diagnosis.</p> <p>Recognize Complications</p> <p>Identify signs of organ involvement, such as nephritis (hypertension, edema), serositis, or neurological abnormalities (confusion, seizures).</p> <p>Develop Diagnostic Reasoning Skills</p>
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		<p>Analyze examination findings to:</p> <p>Differentiate SLE from mimicking conditions like rheumatoid arthritis, dermatomyositis, or Sjögren’s syndrome.</p> <p>Suggest appropriate diagnostic tests (e.g., ANA, anti-dsDNA, renal biopsy).</p> <p>Integrate Patient-Centered Care</p> <p>Exhibit empathy and professionalism during history-taking and physical examination.</p> <p>Educate the patient about the importance of follow-up care and treatment adherence.</p> <p>Apply Clinical Findings to Treatment Planning</p> <p>Use examination findings to guide treatment decisions, such as:</p> <p>Identifying patients who need immunosuppressive therapy (e.g., severe organ involvement).</p> <p>Recognizing mild cases suitable for symptomatic management.</p> <p>2 Hour</p>
NLHP7.10	Laser Therapy-Pulsed dye Laser.	<p>The teacher will demonstrate the procedure of Laser Therapy-Pulsed dye Laser through:</p> <p>Live Demonstration</p> <p>The teacher will perform a live demonstration of Pulsed Dye Laser Therapy, highlighting:</p> <p>Pre-procedure preparation (e.g., patient consent, skin cleansing).</p> <p>Laser operation, including parameters such as wavelength, pulse</p>

		<p>duration, and fluence.</p> <p>Post-procedure care and precautions.</p> <p>Interactive Explanation During Demonstration</p> <p>While demonstrating, the teacher will explain the:</p> <p>Mechanism of action of Pulsed Dye Laser (selective photothermolysis targeting hemoglobin).</p> <p>Indications (e.g., vascular lesions, rosacea, port-wine stains) and contraindications.</p> <p>Safety measures (e.g., patient eye protection).</p> <p>Use of Visual Aids</p> <p>Supplement the demonstration with:</p> <p>PowerPoint slides or charts explaining the physics of laser therapy.</p> <p>Videos showing successful outcomes and comparisons between before-and-after treatment images.</p> <p>Simulation Practice</p> <p>Students will practice handling laser devices on simulated models or training pads under supervision to build familiarity with the equipment.</p> <p>Interactive Q&A Session</p> <p>Conduct an engaging Q&A session where students can ask questions about:</p> <p>Patient selection criteria.</p> <p>Possible complications and their management.</p> <p>Case-Based Learning (CBL)</p>
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		<p>Present cases where Pulsed Dye Laser is indicated, prompting students to discuss:</p> <p>Why this treatment is appropriate.</p> <p>Expected outcomes and follow-up care.</p> <p>Problem-solving and Critical Thinking</p> <p>Discuss real-life scenarios where students identify potential challenges (e.g., patient non-compliance or adverse effects) and propose solutions.</p> <p>Reflection and Feedback</p> <p>Students reflect on their learning experience, and the teacher provides constructive feedback on their understanding and skills demonstrated during the session.</p> <p>Students will be able to:</p> <p>Understand the Basics of Pulsed Dye Laser Therapy</p> <p>Explain the mechanism of action (selective photothermolysis) and target chromophores (haemoglobin).</p> <p>Identify Indications and Contraindications</p> <p>List conditions treated with Pulsed Dye Laser, such as:</p> <p>Vascular lesions (e.g., port-wine stains, hemangiomas, spider veins).</p> <p>Rosacea, acne scars, or keloids.</p> <p>Recognize contraindications like photosensitivity disorders or unprotected sun exposure.</p> <p>Prepare for the Procedure</p>
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		<p>Outline the pre-procedure steps, including:</p> <ul style="list-style-type: none"> Taking patient consent. Cleaning and prepping the treatment area. Ensuring eye protection for both patient and practitioner. <p>Operate the Laser Safely</p> <p>Demonstrate proper handling of the Pulsed Dye Laser device, including:</p> <ul style="list-style-type: none"> Adjusting settings like wavelength, pulse duration, and energy fluence. Maintaining a safe distance and ensuring steady application. <p>Manage the Patient During and After the Procedure</p> <p>Monitor patient comfort during the procedure.</p> <p>Explain post-procedure care, including:</p> <ul style="list-style-type: none"> Avoiding sun exposure, applying cooling agents, and managing side effects like redness or swelling. <p>Recognize Complications and Their Management</p> <p>Identify potential adverse effects (e.g., blistering, pigmentation changes).</p> <p>Suggest appropriate interventions to mitigate these complications.</p> <p>Analyze Case Scenarios</p> <p>Apply knowledge of laser therapy to real or simulated cases, recommending treatment plans and follow-up strategies.</p> <p>Develop Hands-On Skills</p>
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		<p>Gain practical experience in handling laser equipment and understanding its application in dermatological conditions.</p> <p>Communicate Effectively</p> <p>Explain the procedure, benefits, risks, and post-treatment care to patients in a clear and empathetic manner.</p> <p>Integrate Theory with Practice</p> <p>Correlate theoretical knowledge of laser physics with clinical application in dermatological treatments.</p> <p>3 Hour</p>
NLHP7.11	Clinical examination of a case of Ichthyosis and Acanthosis Nigricans.	<p>The teacher will demonstrate clinical examination of a case of Ichthyosis and Acanthosis Nigricans as follows:</p> <p>Bedside Clinical Demonstration</p> <p>The teacher will demonstrate a systematic clinical examination on a real patient or a simulated case of Ichthyosis and Acanthosis Nigricans, focusing on:</p> <p>Inspection: Identifying hallmark features such as scaling in Ichthyosis and hyperpigmented, velvety plaques in Acanthosis Nigricans.</p> <p>Palpation: Assessing skin texture, thickness, and moisture.</p> <p>Documentation of findings.</p> <p>Guided Observation</p> <p>Students will observe the teacher's technique and approach to ensure a structured examination, including:</p>

		<p>Examination of affected areas and noting lesion characteristics.</p> <p>Assessment of the extent and distribution of lesions.</p> <p>Interactive Discussion During Demonstration</p> <p>The teacher will explain the clinical significance of observed features and their relevance to diagnosis while demonstrating.</p> <p>Student-Led Practice</p> <p>Under supervision, students will practice examining a patient, focusing on:</p> <p>Accurate identification of clinical features.</p> <p>Application of diagnostic reasoning based on observed findings.</p> <p>Multimedia Support</p> <p>Use images and videos of different stages/types of Ichthyosis and Acanthosis Nigricans for comparison.</p> <p>Case-Based Discussion (CBD)</p> <p>Discuss real-life or simulated cases to:</p> <p>Correlate clinical findings with diagnostic investigations.</p> <p>Explore differential diagnoses and appropriate treatment strategies.</p> <p>Reflection and Feedback</p> <p>Students will reflect on their hands-on experience and receive feedback on their examination skills and diagnostic reasoning.</p> <p>Students will be able to:</p>
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		<p>Perform a Structured Clinical Examination</p> <p>Conduct a thorough examination of skin lesions in Ichthyosis and Acanthosis Nigricans, including inspection and palpation.</p> <p>Identify Clinical Features of Ichthyosis</p> <p>Recognize characteristic features such as:</p> <p>Dry, scaly skin (fish-scale appearance).</p> <p>Symmetrical distribution, commonly on extensor surfaces.</p> <p>Identify Clinical Features of Acanthosis Nigricans</p> <p>Recognize hallmark signs, including:</p> <p>Hyperpigmented, velvety plaques in intertriginous areas (e.g., neck, axilla, groin).</p> <p>Associated conditions like obesity or insulin resistance.</p> <p>Correlate Findings with Underlying Conditions</p> <p>Understand the systemic associations:</p> <p>Genetic or acquired Ichthyosis (e.g., due to drugs or systemic diseases).</p> <p>Endocrine or metabolic disorders linked to Acanthosis Nigricans.</p> <p>Differentiate Between Similar Conditions</p> <p>Distinguish Ichthyosis and Acanthosis Nigricans from mimicking conditions such as:</p> <p>Eczema, psoriasis, or keratosis pilaris (for Ichthyosis).</p> <p>Addison's disease or post-inflammatory hyperpigmentation (for</p>
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		<p>Acanthosis Nigricans).</p> <p>Document Findings</p> <p>Accurately describe lesion characteristics, extent, and distribution for clinical records.</p> <p>Discuss Diagnostic Investigations</p> <p>Propose appropriate investigations based on clinical findings, such as:</p> <p>Skin biopsy for histopathology.</p> <p>Fasting blood glucose and lipid profile for metabolic disorders.</p> <p>Apply Clinical Reasoning</p> <p>Interpret findings in the context of differential diagnoses and systemic conditions.</p> <p>Communicate Effectively</p> <p>Explain examination findings, diagnosis, and next steps to patients in a clear and empathetic manner.</p> <p>Integrate Findings into a Holistic Treatment Plan</p> <p>Use clinical findings to guide treatment decisions, based on Unani principles.</p> <p>1 Hour</p>
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Topic 8 تزیینات حصہ دوم Tazeeniyat Part-2 (Cosmetology Part-2) (LH : 5, NLHT: 2, NLHP: 8 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO2, CO5	Describe the Importance of Hair in cosmetics and identify the basic Nutrients for obtaining healthy Hair.	CC	MK	KH	L_VC, L&PPT	PRN, P- VIVA	F&S	2	-	LH

CO2, CO5	Describe different methods for taking care of hair health.	CC	MK	KH	DIS	M-POS, T-OBT, P-VIVA, QZ, PUZ	F&S	2	-	NLHT8.1
CO2, CO5	Demonstrate the effects of nutrition on hair by advising the different diet regimens to keep the patient's hair healthy.	PSY-GUD	MK	SH	DIS, D-BED, CD	P-VIVA, M-POS, P-EXAM	F&S	2	-	NLHP8.1
CO2	Describe the importance of face in cosmetics and identify different measures for facial care.	CK	MK	K	L, L&PPT, L_VC	M-POS, P-VIVA, QZ	F&S	2	-	LH
CO2, CO4	Demonstrate different methods of facial care and observe their effect after use.	CAP	MK	SH	PT, D-BED, CD	INT, P-EXAM, P-VIVA	F&S	2	-	NLHP8.2
CO6, CO8	Enumerate different causes of early skin aging and describe anti-aging measures.	CC	MK	KH	L&PPT, L, L_VC	P-VIVA, PRN, M-POS	F&S	2	-	LH
CO4, CO6, CO8	Demonstrate the use of different measures to prevent early aging.	CAP	MK	SH	D-BED, PT	P-VIVA, P-EXAM, PRN	F&S	2	-	NLHP8.3
CO2, CO8	Explain the effects of the environment on skin, especially the effect due to exposure to the sun.	CC	MK	KH	L&PPT, L_VC	P-VIVA, M-POS, PRN	F&S	2	-	LH
CO2, CO4, CO8	Demonstrate the use of different measures for protection from the environmental effects on the skin.	CAP	MK	SH	PT, D-BED	P-VIVA, P-EXAM	F&S	2	-	NLHP8.4

CO2, CO8	Describe the importance of Perfumes/Deodorants in cosmetics.	CC	MK	KH	L, L&PPT, L&GD, L_VC	T-CS, PRN, M-POS, T- OBT, QZ	F&S	2	-	LH
CO2, CO8	Review the combination of different types of Perfumes/Deodorants.	CC	MK	KH	L&PPT, L_VC	P-VIVA, P- ID, T-CS	F&S	2	-	NLHT8.2
CO2, CO4, CO8	Demonstrate the use of different Perfumes/Deodorants for skin care.	CAP	MK	SH	CD, D- BED, PT	P-EXAM, PRN	F&S	2	-	NLHP8.5

Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
NLHT8.1	Methods to keep hair healthy	The teacher will describe the use of Diet for healthy hair with the help of Discussion and student will learn the importance of diet .
NLHT8.2	Use of different Perfumes/Deodorants for skin care.	The teacher will describe the use of different Perfumes/Deodorants for skin care with the help of power point presentation, group discussion, and Videos and demonstrate their use. Students will learn the use of different Perfumes/Deodorants for skin care.(01 hour)

Non Lecture Hour Practical

S.No	Name	Description of Practical Activity
NLHP8.1	Methods to keep hair healthy.	The teacher will advise the relevant diet that is beneficial for the hair health to the patient and demonstrate the result after use on subsequent follow-ups by discussion, case based learning and case diagnosis method.(01 hor)

		Students will learn to prescribe the relevant diet that is beneficial for the hair health of the patient.
NLHP8.2	Methods of Facial Care.	<p>The teacher will apply/advise the different methods of facial care and demonstrate the result on subsequent follow-ups with the help of practical, case discussion and bed side demonstration (02hour).</p> <p>Students will learn to apply/advise the different methods of facial care.</p>
NLHP8.3	Different measures to prevent early aging.	The teacher will Demonstrate the different methods to prevent early aging as facial massage, Derma needling, Derma roller, etc, by practical, case base learning methods and bed side demonstration and student will learn and under stand the effects of procedures (01 hour).
NLHP8.4	Different measures for protection from the environmental effects on skin.	<p>The teacher will apply/advise different measures for protection from the ill effects of sun exposure and other environmental factors on the skin and demonstrate the effects on subsequent follow-ups with the help of practical, case based learning and bed side demonstration (02hour).</p> <p>Students will learn to apply/advise the different measures for protection from the ill effects of sun exposure and other environmental factors on the skin.</p>
NLHP8.5	Use of different Perfumes/Deodorants for skin care.	The teacher will apply/advise the use of different Perfumes/Deodorants for skin care and demonstrate their effect with the help of practical, case diagnosis and bed side discussion and Students will learn to apply/advise the use of different Perfumes/Deodorants for skin care.(02hour)
Topic 9 فساد لون Fasad-e-Laun (Disorders of Pigmentation) (LH : 2, NLHT: 2, NLHP: 3 hours)		

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO3, CO4, CO6, CO8	Define Bars, and discuss its etiology, types, Unani as well as Modern Pathogenesis, Clinical Features, Diagnosis, Differential Diagnosis, Prognosis, Usool-e-Ilaj and Ilaj.	CC	MK	KH	L&GD, L&PPT, L_VC	M-POS, S-LAQ, P-VIVA	F&S	2	-	LH
CO3, CO6	Discuss the clinical application of PUVA in the case of Bars.	CAP	MK	KH	L&GD, L_VC, CBL	P-VIVA, INT, PRN	F&S	2	-	NLHT9.1
CO3, CO4, CO6	Demonstrate the procedure of PUVA in a patient of Bars	PSY-MEC	MK	SH	D, D-BED	SP, P-EXAM	F&S	2	-	NLHP9.1
CO3, CO4, CO6, CO8	Describe Bahaq, Kalaf, Barsh and Namash and Illustrate their etiology, Unani as well as Modern Pathogenesis, Clinical Features, Diagnosis, Differential diagnosis, Usool-e-Ilaj and Ilaj.	CC	MK	KH	L&PPT, L&GD, L_VC	T-CS, P-VIVA, QZ	F&S	2	-	LH
CO3, CO6	Discuss and differentiate the clinical manifestations of Bahaq, Kalaf, Barsh and Namash.	CAN	MK	KH	L&GD	P-VIVA, PRN	F&S	2	-	NLHT9.2
CO3, CO4, CO6	Examin the cases of Bahaq, Kalaf, Barsh and Namash.	PSY-MEC	MK	SH	D-BED, L_VC, D	P-VIVA, P-CASE, T-CS	F&S	2	-	NLHP9.2

Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
NLHT9.1	Application of PUVA in Bars.	<ul style="list-style-type: none"> The teacher will discuss the application of PUVA therapy in Bars through L&GD/L_VC/CBL

		<ul style="list-style-type: none"> Students will observe and learn the application of PUVA therapy in Bars.
NLHT9.2	Differential Diagnosis of Bahaq, Kalaf, Barsh and Namash.	The teacher will organize a group discussion and students will discuss the differential diagnosis of Bahaq, Kalaf, Barsh, and Namash.

Non Lecture Hour Practical

S.No	Name	Description of Practical Activity
NLHP9.1	PUVA therapy in Bars.	<ul style="list-style-type: none"> The teacher will explain and demonstrate the step-by-step procedure of PUVA therapy in Bars through D/D-BED Students will learn the procedure for PUVA therapy and repeat themselves 03 times. Duration - 02 Hours
NLHP9.2	Dermoscopy in Bahaq, Kalaf, Barsh and Namash.	<ul style="list-style-type: none"> The teacher will explain dermoscopy in cases of Bahaq, Kalaf, Barsh and Namash through L_VC/D/D-BED Students will observe and then demonstrate independently. Duration - 01 Hours

Topic 10 جلد کے غیر طبعی زوائد (Abnormal Growths of Skin) (LH : 2, NLHT: 2, NLHP: 2 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO3, CO4, CO6	Describe Sa'leel, its Etiology, Unani as well as Modern Pathogenesis, and point out the Diagnosis, Differential diagnosis Usool-e-Ilaj and Ilaj.	CC	MK	KH	L_VC, L&PPT, L&GD, L	P-VIVA, S-LAQ, T-CS	F&S	3	-	LH

CO4	Discuss and differentiate different types of warts.	CAN	MK	KH	L&PPT , CBL, L&GD, L_VC	C-VC, T- CS, P- VIVA, PRN	F&S	3	-	NLHT10.1
CO3, CO4, CO6	Perform a Clinical/Bedside Examination of Warts.	PSY-MEC	MK	D	D-BED, DIS, L_VC, CBL	P-ID, T-CS, P-VIVA	F&S	3	-	NLHP10.1
CO3, CO4, CO6	Explain Sal'aat, and Sartan-e-Jild and illustrate Etiology, Unani as well as Modern Pathogenesis, clinical features, Diagnosis, and explore Differential diagnosis Usool-e-Ilaj and Ilaj.	CC	MK	KH	L, L&PPT , L_VC, L&GD	PRN, QZ , P-VIVA	F&S	3	-	LH
CO4	Discuss various modern diagnostic methods of Sal'aat and Sartan-e-Jild.	CC	MK	KH	L_VC, L&PPT , DIS, L&GD	PRN, M- POS, P- VIVA	F&S	3	-	NLHT10.2
CO2, CO3	Conduct the clinical examination of Sal'aat and Sartan-e-Jild.	PSY-SET	MK	KH	L_VC, CBL, PER	P-REC, P- EXAM, P- CASE, P- VIVA, C-VC	F&S	3	-	NLHP10.2

Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
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NLHT10.1	Case Presentation on Warts.	<ul style="list-style-type: none"> The teacher will demonstrate the clinical features, diagnosis, differential diagnosis, usool ilaj and ilaj of Warts through L&PPT/L&GD/L_VC/CBL Students will learn and comprehend the clinical features, diagnosis, differential diagnosis, usool ilaj and ilaj of Warts.
NLHT10.2	Differential diagnosis of Sal'aat and Sartan-e-Jild.	<ul style="list-style-type: none"> The teacher will discuss the differential diagnosis of Sal'aat and Sartan-e-Jild through L&PPT/ L&GD/L_VC/DIS Students will observe and learn the differential diagnosis of Sal'aat and Sartan-e-Jild
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP10.1	Wart removal therapy	<ul style="list-style-type: none"> The teacher will demonstrate the application of different methods of wart removal (chemical, electric cautery, cryotherapy, laser surgery) through L_VC/DIS/CBL/D-BED Students will learn the application of different methods of wart removal (chemical, electric cautery, cryotherapy, laser surgery).
NLHP10.2	Methods of Diagnosis of Sal'aat and Sartan-e-Jild.	<ul style="list-style-type: none"> The teacher will explain the clinical examination of skin tumours and demonstrate the step-by-step procedure of tissue biopsy with relevant SOP's through L_VC/CBL/PER

		<ul style="list-style-type: none"> Students will observe and learn the whole procedure carefully and repeat themselves 02 times 								
Topic 11 دگر جلدی امراض Deegar Jildi Amraz (Other Skin Conditions) (LH : 5, NLHT: 1, NLHP: 6 hours)										
A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO3, CO4, CO6	Describe Kasrat-e-Arq, Qillat-e-Arq and Arq-e-Muntin their etiology, types, Unani as well as Modern Pathogenesis, and elaborate Clinical Features, Diagnosis, Differential diagnosis, Usool-e-Ilaj and Ilaj.	CC	MK	KH	L&PPT , L, DIS, L&GD, L_VC	QZ , P- VIVA, PRN	F&S	3	-	LH
CO3, CO4, CO6	Conduct clinical Examination of a case of Qillat e Arq and demonstrate its cutaneous manifestations.	PSY-GUD	MK	SH	CBL, DIS, D- BED, L_VC	P-VIVA, M- CHT, P- EXAM	F&S	3	-	NLHP11.1
CO3, CO4, CO6	Define Hasaf, Explain its Etiology, Unani as well as Modern Pathogenesis, Clinical Features, and illustrate the Diagnosis, Differential diagnosis, Usool-e-Ilaj and Ilaj.	CC	MK	KH	L&PPT , L&GD, L, L_VC, CBL	P-VIVA, T- OBT, PRN	F&S	3	-	LH
CO3, CO4, CO6	Perform Clinical/Bedside examination on a case of Miliaria.	PSY-SET	MK	KH	D-BED, CBL, L_VC, PER	P-POS, P- REC, PRN, P-VIVA	F&S	3	-	NLHP11.2
CO3, CO4, CO6	Define Maraz-e-Husaaf, and enumerate its Etiology, Cutaneous manifestation, Diagnosis, Differential Diagnosis, Usool-e-Ilaj and Ilaj.	CK	NK	K	CBL, L&GD,	P-VIVA, T- CS	F&S	3	-	LH

					L_VC, L, L&PPT					
CO4	Demonstrate the cutaneous manifestation of Maraz-e-Husaaf through visual aids.	PSY-SET	NK	KH	L_VC, CBL	P-VIVA, PRN, P- CASE, P- MOD	F&S	3	-	NLHP11.3
CO3, CO4, CO6	Define Tasharrughul Jild and explain its Etiology, Cutaneous manifestation, Diagnosis, Differential Diagnosis, Usool-e-Ilaj and Ilaj.	CK	NK	K	L&PPT , CBL, L, L_VC, L&GD	M-POS, P- VIVA, P- CASE, T- CS	F&S	3	-	LH
CO4	Demonstrate the cutaneous manifestations of Tasharrughul Jild through visual aids.	PSY-SET	NK	KH	L_VC	P-EXAM, P- REC, PRN, P-VIVA	F&S	3	-	NLHP11.4
CO3, CO4, CO6	Define Duali and Describe its, etiology, Pathogenesis, Clinical Features, Diagnosis, Differential diagnosis, Usool-e-Ilaj and Ilaj.	CK	DK	K	CBL, L&PPT , L, L_VC, L&GD	M-POS, T- CS, P-VIVA	F&S	3	H-IJ	LH
CO3, CO5	Discuss the potential complications and comorbidities associated with varicose veins.	CK	DK	K	L&GD	P-VIVA, T- CS, M-POS	F&S	3	H-IJ	NLHT11.1
CO4	Conduct a Clinical/Bedside Examination of a case of Duali (Varicose Vein).	PSY-SET	DK	KH	L_VC, CBL	P-VIVA, PRN, P- CASE, P- EXAM, P- POS	F&S	3	H-IJ	NLHP11.5

Non Lecture Hour Theory		
S.No	Name	Description of Theory Activity
NLHT11.1	Potential complications and comorbidities associated with varicose veins.	<ul style="list-style-type: none"> The teacher will form different groups of students, and they will discuss the complications and comorbidities of varicose veins.
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP11.1	Case Presentation on Qillat e Arq	<ul style="list-style-type: none"> The teacher will explain and assess the cutaneous manifestation of Qillat e Arq through L_VC/DIS/CBL/D-BED Students will observe and learn carefully Students will demonstrate the assessment of the cutaneous manifestation of a case of Qillat e Arq themselves.
NLHP11.2	Case presentation on Miliaria	<ul style="list-style-type: none"> The teacher will explain and discuss the clinical examination of Miliaria through L_VC/CBL/PER/D-BED Students will learn and conduct the clinical examination of Miliaria.
NLHP11.3	Case presentation on Maraz-e-Husaaf.	<ul style="list-style-type: none"> The teacher will demonstrate the clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Miliaria through L_VC/CBL Students will learn and demonstrate the clinical features, diagnosis, differential diagnosis, usoole ilaj and ilaj of Miliaria

		<ul style="list-style-type: none"> Duration - 02 Hours
NLHP11.4	Cutaneous manifestations of Tasharrughul Jild through visual aids.	<ul style="list-style-type: none"> The teacher will demonstrate the cutaneous manifestation of Tasharrughul jild (Phrynoderma) through L_VC The students will learn and be able to describe the cutaneous manifestation of Tasharrughul jild (Phrynoderma).
NLHP11.5	Clinical/Bedside Examination of a case of Duali (Varicose Vein).	<ul style="list-style-type: none"> The teachers will demonstrate the cutaneous manifestation in a patient of Duali (Varicose Vein) through L_VC/CBL Students will learn and demonstrate the cutaneous manifestation in of Duali

Topic 12 امراض شعر Amraze Shaa'r (Diseases of Hair) (LH : 6, NLHT: 3, NLHP: 8 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO1, CO2, CO4	Describe the hair cycle and classify the Variants of hair types	CC	MK	KH	L&PPT , L_VC, DIS	P-VIVA, S-LAQ	F&S	3	-	LH
CO1, CO3, CO4, CO6, CO7	Demonstrate Clinical/Bedside Examination of Hair	PSY-GUD	MK	SH	L_VC, CBL, D-BED, CD	DOAP, P-VIVA, Log book, OSCE	F&S	3	-	NLHP12.1

CO1, CO3, CO6	Describe the hair loss and explain its contemporary classification and types, their Etiology, Clinical Features, Diagnosis, Usool-e-Ilaj and Ilaj.	CC	MK	KH	L&PPT , L_VC, DIS	S-LAQ, P- VIVA	F&S	3	-	LH
CO1, CO3, CO5	Describe Clinical Features, Diagnosis, Usool-e-Ilaj and Ilaj of Hair Loss.	CC	MK	KH	L&PPT , L_VC, DIS	P-VIVA, S- LAQ	F&S	3	-	NLHT12.1
CO1, CO3, CO4, CO6, CO7	Demonstrate Clinical/Bedside Examination in cases of Intishar-e-sha'r (Hair Fall)	PSY-GUD	MK	SH	L_VC, D-BED, CD	Log book, DOAP, P- VIVA	F&S	3	-	NLHP12.2
CO1, CO3, CO4, CO6, CO7	Demonstrate the Pull test, Tug Test, Card Test and Trichoscopy in cases of Hair Fall.	PSY-MEC	MK	SH	L_VC, CD, DIS, D-BED	P-VIVA, DOAP, P- PRF	F&S	3	-	NLHP12.3
CO1, CO3, CO4, CO6, CO7	Determine the procedure of PRP therapy step wise	CAP	MK	KH	DIS, L_VC, D, CBL	INT, Log book, P- VIVA	F&S	3	-	NLHP12.4
CO1, CO3, CO6	Define Da-us-salab, Da-ul-haiya & Sal'a (Baldness) their Etiology, Clinical Features, Diagnosis, Differential Diagnosis, Usool-e-Ilaj and Ilaj.	CK	DK	K	DIS, L&PPT , FC	P-VIVA, QZ , CL-PR	F&S	3	-	LH
CO1, CO3,	Demonstrate the Clinical/Bedside Examination of Da-us-Salab aur Da-ul-Haiya; Saa'fa (Favus), Sal'a (Baldness)	PSY-MEC	DK	SH	D-BED, DIS	DOAP, P- EXAM, P- VIVA	F&S	3	-	NLHP12.5

CO4, CO6, CO7										
CO1, CO3, CO6	Define Bafa (Seborrhoea of Scalp) and illustrate its etiology	CC	MK	KH	L&PPT , BL, DIS	S-LAQ, PRN, P- VIVA	F&S	3	-	LH
CO1, CO3, CO6	Describe Clinical features, Diagnosis, Usoole Ilaj and Ilaj of Bafa	CC	MK	KH	L&PPT , DIS, RLE, CD	P-VIVA, S- LAQ	F&S	3	-	NLHT12.2
CO1, CO3, CO4, CO6, CO7	Demonstrate the scalp examination using Dermatoscopy in Seborrhoea of Scalp.	PSY-MEC	MK	SH	L_VC, CBL, DIS, D- BED	P-CASE, P- PRF, DOAP	F&S	3	-	NLHP12.6
CO1, CO3, CO4, CO6, CO7	Demonstrate Skin Scraping and KOH Examination in cases of Seborrhoea of Scalp.	PSY-MEC	MK	SH	L_VC, D-BED, DL	DOAP, P- PRF	F&S	3	-	NLHP12.7
CO1, CO3, CO6	Describe Shaib (Premature Greying of Hair), its Etiology, Usoole Ilaj, Ilaj and illustrate its prevention and Ghiza wa perhez.	CC	MK	KH	DIS, L, L&PPT	PRN, P- VIVA, QZ	F&S	3	-	LH
CO1, CO3, CO6	Describe Namosat/Namusa (smelly Scalp syndrome) and Qummal wa Si'byan (Pediculosis) and their etiology.	CK	NK	K	L&PPT , DIS, L_VC	QZ , PRN, P-VIVA	F&S	3	-	LH

CO1, CO3, CO6	Describe Clinical features, Usoole Ilaj and Ilaj of Namoosat/Namusa (smelly Scalp syndrome) and Qummal wa Si'byan (Pediculosis).	CK	NK	K	L&PPT , DIS, L_VC	P-VIVA, T- CS, PRN	F&S	3	-	NLHT12.3
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Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
NLHT12.1	Clinical Examination and Management of Hair Loss.	<p>The teacher will sequentially describe and explain the Clinical Features, Diagnosis, Usool-e-Ilaj and Ilaj of Hair Loss using lecture with PPT, video clips and interactive discussions.</p> <p>Students will learn and</p> <ul style="list-style-type: none"> Describe and explain the Clinical Features, Diagnosis, Usool-e-Ilaj, and Ilaj of Hair Loss. Utilize the information presented in the lecture, PowerPoint slides, video clips, and discussions to develop a comprehensive understanding of Hair Loss management. <p>1 hour</p>
NLHT12.2	Clinical Examination and Management of Seborrhoea of Scalp.	<p>The teacher will describe the Clinical Features, Diagnosis, Usool-e-Ilaj (Principles of Treatment), and Ilaj (Treatment) of Seborrhoea of the Scalp, using a combination of lecture with ppt, case-based discussions, and interactive teaching methods.</p> <p>Students will be able to:</p>

		<ol style="list-style-type: none"> 1. Identify and describe the clinical features of seborrhoea of the scalp, including its symptoms and associated complications. 2. Understand the diagnostic approach for seborrhoea of the scalp, including clinical examination and differential diagnosis. 3. Explain the Usool-e-Ilaj for managing seborrhoea, focusing on restoring balance, addressing triggers, and preventing recurrence. 4. Discuss the Ilaj (treatment) options, including topical, systemic, and Unani approaches. 5. Apply the knowledge to create a management plan for patients with seborrhoea of the scalp. <p>1 Hour</p>
NLHT12.3	Clinical features and management of Namoosat/Namusa (smelly Scalp syndrome) and Qummal wa Si'byan (Pediculosis).	<p>The teacher will describe the clinical features, Usool-e-Ilaj (Principles of Treatment), and Ilaj (Treatment) of Namoosat/Namusa (Smelly Scalp Syndrome) and Qummal wa Si'byan (Pediculosis) through lecture with PPT, video clips and interactive discussions. The session will include theoretical explanations, case discussions, and treatment strategies.</p> <p>Students will be able to:</p> <ol style="list-style-type: none"> 1. Describe the clinical features of Namoosat/Namusa (Smelly Scalp Syndrome) and Qummal wa Si'byan (Pediculosis). 2. Identify key symptoms to differentiate between the two conditions.

		<ol style="list-style-type: none"> 3. Explain the Usool-e-Ilaj (Principles of Treatment) for both conditions, focusing on prevention, hygiene, and addressing underlying causes. 4. Discuss the Ilaj (Treatment) options for each condition, including topical, systemic, and Unani approaches. 5. Understand preventive measures to reduce the recurrence of pediculosis and smelly scalp syndrome. 6. Apply knowledge to develop a comprehensive management plan for these scalp conditions. <p>1 Hour</p>
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP12.1	Clinical/Bedside Examination of Hair	<p>The teacher will conduct:</p> <p>1. Interactive Introduction:</p> <p>Brief Lecture with Visual Aids covering:</p> <ul style="list-style-type: none"> • Overview of hair anatomy, growth cycle, and function. • Explain the systematic steps of hair examination (Inspection, Palpation, Special Tests). • Discuss common conditions (e.g., alopecia, hirsutism, scalp infections, texture & pigmentation changes). • Use clinical images, videos, and real-case examples to engage students.

		<p>2. Live Demonstration by Teacher:</p> <ul style="list-style-type: none"> • Demonstrates the Full Examination on a Patient. • Teacher performs a step-by-step examination, covering: Inspection → Hair distribution, density, scalp lesions, bald spots, thinning. Palpation → Hair texture, scalp tenderness, masses. Explain findings and correlate them with potential diagnoses. <p>3. Supervised Hands-on Practice:</p> <p>Students Practice on Peers or patients in Small Groups</p> <ul style="list-style-type: none"> • Divide students into groups of 3–4. • Using a structured checklist, each student performs a full hair and scalp examination on a peer or mannequin. • Teacher and assistants observe, provide real-time feedback, and correct techniques. • Key focus areas: Hair pattern and density assessment. Identifying bald spots, scalp lesions, and infestations. Detecting hair texture and pigmentation changes. <p>4. Case-Based Discussion.</p> <p>Analyzing Clinical Cases in Groups</p> <ul style="list-style-type: none"> • Present 3–4 short patient cases with images/descriptions.
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		<ul style="list-style-type: none"> • Example cases: <ol style="list-style-type: none"> 1. Patchy hair loss in a young male → Alopecia Areata? Tinea Capitis? 2. Female with excessive facial hair → Hirsutism due to PCOS or Cushing's Syndrome? 3. Diffuse hair thinning after illness → Telogen Effluvium? 4. Scaly patches with broken hairs in a child → Tinea Capitis or Psoriasis? • Students analyze cases, identify key findings, discuss differential diagnoses, and suggest investigations. <p>Student Learning Objectives (SLOs) for Practical Class</p> <p>Knowledge Objectives</p> <p>Describe the systematic clinical examination of hair and scalp. Identify key abnormalities such as bald spots, hair thinning, trauma, parasites, and pigmentation changes. Recognize common causes of hair loss and excess hair growth. Explain the significance of hair texture, colour, and structural changes.</p> <p>Skill Objectives</p> <p>Perform a step-by-step bedside hair examination. Accurately describe and document findings.</p>
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		<p>Differentiate between various causes of hair loss and scalp conditions.</p> <p>Develop a differential diagnosis based on clinical findings.</p> <p>Attitude Objectives</p> <p>Demonstrate professionalism and sensitivity while examining patients.</p> <p>Communicate findings clearly and concisely.</p> <p>Apply critical thinking in interpreting examination findings.</p> <p>2 Hour</p>
NLHP12.2	Clinical Examination in Cases of Intishar-e-sha'r (Hair Fall).	<p>The teacher will sequentially describe and explain the Clinical Features, Diagnosis, Usool-e-Ilaj and Ilaj of Hair Loss using lecture with PPT, video clips and interactive discussions.</p> <p>Students will learn and be able to:</p> <ul style="list-style-type: none"> • Describe and explain the Clinical Features, Diagnosis, Usool-e-Ilaj, and Ilaj of Hair Loss. • Utilize the information presented in the lecture, PowerPoint slides, video clips, and discussions to develop a comprehensive understanding of Hair Loss management. <p>1 Hour</p>
NLHP12.3	Pull test, Tug Test, Card Test and Trichoscopy in cases of Hair Fall.	<p>The teacher will demonstrate the Pull Test, Tug Test, Card Test, and Trichoscopy in cases of hair fall using bedside/case demonstrations and</p>

video clips to teach students the techniques, interpretations, and clinical significance of these diagnostic methods.

1. Bedside Demonstration:

- Perform each test on patients with different presentations of hair fall.
- Provide a step-by-step explanation of the procedure, interpretation, and clinical implications.

2. Video Clips:

- Show high-quality video demonstrations of the tests in real-life scenarios.

3. Interactive Discussion:

- Encourage students to ask questions and interpret findings.

students will be able to:

1. Describe and perform the Pull Test to assess active hair shedding.
2. Explain and conduct the Tug Test to evaluate hair shaft fragility.
3. Apply the Card Test to assess hair miniaturization and hair calibre changes.
4. Understand and utilize Trichoscopy to identify characteristic hair and scalp abnormalities.
5. Interpret clinical findings from each test to differentiate between various causes of hair fall (e.g., telogen effluvium, alopecia areata, androgenetic alopecia).

		<p>6. Correlate the results of these diagnostic tests with patient history and other clinical findings for accurate diagnosis and management.</p> <p>7. Document their findings in 2 cases.</p> <p>1 Hour</p>
NLHP12.4	PRP therapy	<p>The teacher will demonstrate the procedure for Platelet-Rich Plasma (PRP) Therapy in cases of hair loss, including preparation, administration, and post-procedure care, using a combination of bedside/case demonstrations and video tutorials.</p> <ol style="list-style-type: none"> 1. Bedside/Case Demonstration: <ul style="list-style-type: none"> ○ Live demonstration of PRP therapy on a patient. ○ Explanation of each step during the procedure. 2. Video Clips: <ul style="list-style-type: none"> ○ High-quality videos showing the procedure in detail, highlighting safety measures and technical skills. 3. Interactive Session: <ul style="list-style-type: none"> ○ Discuss indications, contraindications, and complications of PRP therapy. <p>Students will be able to:</p> <ol style="list-style-type: none"> 1. Explain the principles and mechanism of PRP therapy in promoting hair growth. 2. Identify the indications for PRP therapy in cases of hair loss (e.g., androgenetic alopecia, alopecia areata).

		<ol style="list-style-type: none"> 3. Describe the procedure for preparing PRP, including blood collection and centrifugation. 4. Demonstrate the correct technique for injecting PRP into the scalp, including site preparation, injection depth, and spacing. 5. Discuss post-procedure care and provide appropriate instructions to patients. 6. Recognize potential complications of PRP therapy and explain how to prevent or manage them. <p>1 Hour</p>
NLHP12.5	Examination of Da-us-Salab aur Da-ul-Haiya; Saa'fa (Favus), Sal'a (Baldness)	<p>The teacher will demonstrate and discuss the clinical features of Da-us-Salab (Alopecia Areata), Da-ul-Haiya (Androgenetic Alopecia), Saa'fa (Favus), and Sal'a (Baldness) using a combination of videos and live bedside demonstrations. While focusing on identifying key clinical signs, differentiating between these conditions, and understanding their underlying causes.</p> <p>Methodology:</p> <ol style="list-style-type: none"> 1. Video Demonstrations: <ul style="list-style-type: none"> ○ Use pre-recorded videos showing classic clinical presentations of each condition. 2. Live Bedside Demonstrations: <ul style="list-style-type: none"> ○ Examine patients with varied presentations to showcase real-world examples. 3. Interactive Discussions:

		<ul style="list-style-type: none"> ○ Encourage students to observe and describe findings, followed by group discussions to solidify concepts. <p>Students will be able to:</p> <ol style="list-style-type: none"> 1. Identify and describe the clinical features of Da-us-Salab, Da-ul-Haiya, Saa'fa, and Sal'a. 2. Differentiate between these conditions based on their patterns, progression, and associated signs. 3. Recognize characteristic findings such as exclamation mark hairs (Da-us-Salab), patterned hair loss (Da-ul-Haiya), scutula (Saa'fa), and scarring/non-scarring alopecia (Sal'a). 4. Understand the underlying causes of each condition and their pathophysiology. 5. Correlate clinical findings with patient history to arrive at a differential diagnosis. 6. Develop diagnostic reasoning skills for managing patients with hair and scalp disorders. <p>1 Hour</p>
NLHP12.6	Dermatoscopy in Seborrhoea of Scalp.	<p>The teacher will demonstrate the use of dermatoscopy to examine patients with seborrhoea of the scalp. This session will focus on identifying key dermatoscopic findings, understanding their clinical significance, and correlating them with the patient's condition.</p> <p>Methodology:</p>

		<ol style="list-style-type: none"> 1. Live Demonstration: <ul style="list-style-type: none"> ○ Perform dermatoscopy on patients with seborrhoea of the scalp, highlighting key findings. 2. Video Demonstration: <ul style="list-style-type: none"> ○ Show dermatoscopic images and videos of typical and atypical presentations. 3. Interactive Discussion: <ul style="list-style-type: none"> ○ Engage students in analyzing dermatoscopic findings and linking them to clinical features. <p>Students will be able to:</p> <ol style="list-style-type: none"> 1. Explain the principles and use of dermatoscopy in examining the scalp. 2. Perform dermatoscopy to systematically examine patients with seborrhoea of the scalp. 3. Identify characteristic dermatoscopic findings in seborrhoea of the scalp (e.g., greasy scales, diffuse erythema). 4. Differentiate seborrhoea of the scalp from other scalp conditions using dermatoscopic features. 5. Correlate dermatoscopic findings with the clinical presentation of seborrhoea. 6. Document and interpret images captured during dermatoscopy for diagnostic and educational purposes. <p>1 Hour</p>
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NLHP12.7	Skin Scrapping and KOH Examination in cases of Seborrhoea of Scalp	<p>The teacher will demonstrate the procedure for skin scraping and KOH (Potassium Hydroxide) examination in patients with seborrhoea of the scalp. The focus will be on teaching students the proper technique, interpretation of findings, and the importance of the procedure in diagnosing fungal or secondary infections through lecture with video clips and bedside demonstrations.</p> <p>Students will learn and be able to:</p> <ol style="list-style-type: none"> 1. Explain the purpose and significance of skin scraping and KOH examination in diagnosing secondary fungal infections in seborrhoea of the scalp. 2. Describe and demonstrate the proper technique for collecting scalp scrapings using a sterile blade or glass slide. 3. Prepare a sample for KOH examination using appropriate concentration and handling methods. 4. Identify fungal elements (e.g., hyphae, spores, or yeast forms) under a microscope in positive cases. 5. Differentiate between primary seborrhoea and seborrheic dermatitis with secondary fungal infections based on KOH findings. 6. Apply the knowledge to guide diagnosis and treatment plans for patients with seborrhoea and suspected fungal involvement. <p>1 Hour</p>
<p>Topic 13 امراض اظفار Amraze Azfar (Diseases of Nails) (LH : 2, NLHT: 1, NLHP: 4 hours)</p>		

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO1, CO3, CO6	Identify different abnormalities observed in the human Nails.	CK	MK	K	DIS, L_VC, TUT, L&PPT	S-LAQ, P- VIVA	F&S	3	-	LH
CO1, CO3, CO6	Discuss the step-by-step procedure for the clinical examination of abnormal Nail Presentations.	CC	MK	KH	L_VC, L&PPT	S-LAQ, P- VIVA	F&S	3	-	NLHT13.1
CO1, CO3, CO4, CO6, CO7	Demonstrate the Clinical/Bedside Examination of Nails.	PSY-MEC	MK	D	D-BED, L_VC, CBL	DOAP, OSCE, P- VIVA	F&S	3	-	NLHP13.1
CO1, CO3, CO6	Describe Zufra-e-Talqiya (Onychomycosis), Daakhis (Paronychia/whitlow) In-growing nails (Onychocryptosis or Unguis incarnates) its etiology, clinical features, Usoole Ilaj and Ilaj.	CK	MK	K	L_VC, DIS, L&PPT	P-VIVA, S- LAQ	F&S	3	-	LH
CO1, CO3, CO4, CO6, CO7	Demonstrate the KOH examination in cases of Zufra-e-Talqiya (Onychomycosis)	PSY-GUD	MK	SH	CD, DL, D-BED, L_VC	P-VIVA, P- PRF, P-EN, DOAP, OSPE	F&S	3	-	NLHP13.2
CO1, CO3, CO4, CO6, CO7	Demonstrate the Non-surgical management tadabir and nail softening tadabeer in cases of Daakhis (paronychia/whitlow)	PSY-MEC	MK	D	PBL, L_VC, CBL, D- BED	DOPS, Log book, DOPS, P- VIVA, DOAP	F&S	3	-	NLHP13.3

and Ingrowing nails (onychocryptosis or unguis incarnates)										
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Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
NLHT13.1	Examination of Abnormal Nail Presentations.	<p>The teacher will demonstrate the clinical examination of abnormal nail presentations including common and uncommon nail conditions, and how to assess them and interpret clinical findings through lectures with PPTs and video clips. This aim is to help students identify nail abnormalities, and understand their underlying causes.</p> <p>Students will be able to:</p> <ol style="list-style-type: none"> 1. Identify and describe common and uncommon nail abnormalities, including changes in nail shape, colour, texture, plate, and growth. 2. Assess and differentiate various nail conditions (e.g., clubbing, pitting, leukonychia, onycholysis) through clinical examination. 3. Understand the underlying systemic or local causes of abnormal nail presentations and how to correlate them with the patient's medical history and symptoms. 4. Recognize the importance of abnormal nails as potential indicators of systemic diseases, and apply this knowledge in diagnosis and management planning.

		<p>5. Document findings accurately in a clinical setting, and understand the significance of these findings in the context of patient care.</p> <p>1 Hour</p>
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP13.1	Clinical/Bedside Examination of Nails.	<p>The teacher will demonstrate the complete examination of nails through video clips and bedside demonstrations, focusing on the various structures of the nail, including the nail folds, lunula, nail bed, hyponychium, and nail plate. The teacher will emphasize how to assess abnormalities in colour and shape and compare findings between both hands to help identify potential conditions or systemic diseases.</p> <p>students will be able to:</p> <ol style="list-style-type: none"> 1. Perform a thorough nail examination focusing on the nail folds, lunula, nail bed, hyponychium, and nail plate. 2. Identify nail abnormalities, including changes in colour, shape, and texture, and correlate them with potential systemic or local conditions. 3. Compare the nails from both hands to detect any asymmetry in abnormalities, which can help differentiate between systemic diseases and localized conditions. 4. Differentiate between normal and abnormal findings during a clinical nail examination.

		<ol style="list-style-type: none"> 5. Document findings accurately and understand the clinical significance of abnormal nail presentations. 6. Develop a differential diagnosis based on nail examination findings and formulate an appropriate management plan for the patient. <p>2 Hour</p>
NLHP13.2	KOH examination in cases of Zufra-e-Talqiya (Onychomycosis).	<p>The teacher will demonstrate the procedure for nail bed scraping and direct KOH examination to diagnose onychomycosis using video clips and case-based learning. The goal is to help the students understand the diagnostic process for fungal nail infections and correlate findings with clinical presentations.</p> <p>students will be able to:</p> <ol style="list-style-type: none"> 1. Describe the clinical features of onychomycosis, such as thickened nails, discolouration, and subungual debris. 2. Demonstrate the correct technique for nail bed scraping, ensuring proper collection of an adequate sample for examination. 3. Prepare and interpret a direct KOH examination slide, identifying fungal hyphae or spores under a microscope. 4. Recognize the importance of KOH examination in diagnosing onychomycosis and its limitations (e.g., false negatives, need for culture).

		<p>5. Correlate clinical findings with laboratory results in suspected cases of onychomycosis.</p> <p>1 Hour</p>
NLHP13.3	<p>Non-Surgical management of Daakhis (paronychia/whitlow) and Ingrowing nails (onychocryptosis or unguis incarnates)</p>	<p>The teacher will demonstrate non-surgical management techniques (Tadbir) for treating Daakhis (paronychia/whitlow) and Ingrowing Nails (onychocryptosis/unguis incarnates). This includes nail softening methods for paronychia and the use of an ingrown nail correction tool for onychocryptosis. The session will combine hands-on demonstrations with practical applications, emphasizing safe and effective management approaches.</p> <p>Students will be able to:</p> <ol style="list-style-type: none"> 1. Identify the clinical features of Daakhis (paronychia/whitlow) and ingrowing nails (onychocryptosis) and differentiate between their stages and severity. 2. Demonstrate nail softening Tadbir for managing paronychia, including proper soaking techniques, softening agents, and aftercare strategies. 3. Explain the rationale for non-surgical Tadbir in paronychia and how it promotes healing and relieves pain. 4. Describe the use of an ingrown nail correction tool and its mechanism for relieving pressure and correcting nail growth in cases of onychocryptosis.

		<p>5. Demonstrate safe and effective application of an ingrown nail correction tool, including sterilization, positioning, and follow-up care.</p> <p>6. Recognize the importance of patient education on proper nail care, footwear, and hygiene to prevent the recurrence of paronychia or ingrowing nails.</p> <p>7. Apply knowledge to case-based scenarios, recommending appropriate non-surgical interventions and aftercare for patients.</p>
		1 Hour

Topic 14 تزئینات و عیبات تصحیح (Tazeeniyat Part-3 (Cosmetology Part-3) (LH : 5, NLHT: 5, NLHP: 10 hours)

A3	B3	C3	D3	E3	F3	G3	H3	I3	J3	K3
CO6, CO7, CO8	Explain the application of the following measures for the beautification of skin: Hammam, Ghasool, Riyazat-e-wajh, Inkibab, Zimad, Tila, Ghaza, Ghaliya, Ubtan, Missi, Bleaching and waxing, Washam (Tattooing).	CC	MK	KH	L&PPT , L_VC	PRN, P-VIVA	F&S	3	-	LH
CO6, CO7, CO8	Discuss and illustrate the following beautification measures for skin: Rooshoya (Face wash), Qashoor (Scrub) Barood, Hina, Surma, kajal and Mascara.	CC	MK	KH	L_VC, L&PPT	P-VIVA, PRN	F&S	3	-	NLHT14.1
CO4, CO6, CO7, CO8	Demonstrate the use of Common measures of beautification for skin.	CAP	MK	KH	D, PT	PRN, P-EXAM	F&S	3	-	NLHP14.1

CO2, CO4, CO8	Explain the application of the following measures for the beautification of hair: Tatweel e Sha'ar (Baloon ka daraz banana), Jauo,dat e Sha'ar (Baloon ka ghunghrale banana), Sabootate Sha'ar (Baloon ka seedha karna), Inbaate Sha'ar (Baloon ka Ugana).	CC	MK	KH	L&PPT , L_VC	P-VIVA	F&S	3	-	LH
CO2, CO8	Discuss and illustrate the following Measures for the beautification of hair: Hair remover (Naura), Facial Epilation (Halq-ul-wajh), Preventive Measures for Splitting of Hair Shaqq-ul-sha'ar, Herbal Hair Dyes (Talawwun-e-sha'ar).	CK	MK	KH	L_VC, L&PPT , DIS	P-VIVA, T- OBT	F&S	3	-	NLHT14.2
CO2, CO8	Demonstrate the use of common measures for the beautification of hair.	CAP	MK	KH	D, PT	P-VIVA, P- EXAM	F&S	3	-	NLHP14.2
CO2, CO4, CO8	Describe the concept of Taghseel (Spa therapy) and enumerate different methods of Spa therapy (Taghseel) for skin tightening, wrinkles, skin glowing, dry skin, creepy skin and facial care, pedicure and manicure.	CK	MK	KH	L_VC, L&PPT	T-CS, P- VIVA	F&S	3	-	LH
CO2, CO4, CO8	Discuss and elaborate on the clinical application of Taghseel (Spa therapy).	CC	MK	KH	L_VC, L&PPT	PRN, P- VIVA	F&S	3	-	NLHT14.3
CO2, CO6, CO8	Demonstrate the use of different methods of Spa therapy (Taghseel) for skin tightening, wrinkles, skin glowing, dry skin, creepy skin, facial care, pedicure and manicure.	CAP	MK	KH	D-BED, PT	P-VIVA, P- EXAM	F&S	3	-	NLHP14.3

CO2, CO8	Enlist the causes of early wrinkle formation and explain different anti-wrinkle procedures such as micro-needling, facial massage, use of Derma roller on the face, etc. Inkebaab, roshoyah, spa for facial care.	CC	MK	KH	L&PPT , L_VC	P-VIVA, P- EXAM	F&S	3	-	LH
CO2, CO8	Discuss and elaborate on the clinical application of different anti-wrinkle procedures.	CC	MK	KH	L&PPT , L_VC	P-VIVA, P- EXAM, PRN	F&S	3	-	NLHT14.4
CO2, CO4, CO8	Demonstrate the different anti-wrinkle procedures.	CAP	MK	KH	D-BED, D, PT	P-EXAM, P- VIVA	F&S	3	-	NLHP14.4
CO2, CO3, CO6	Discuss the diagnosis and management of medical emergencies and life-threatening conditions in skin diseases.	CC	MK	KH	L&PPT , L&GD, L_VC	P-VIVA, PRN, T- OBT	F&S	3	-	NLHT14.5
CO2, CO6	Observe the necessity for immediate attention to diagnose and manage medical emergencies and life-threatening conditions of skin diseases.	CC	MK	KH	L_VC, L&GD	P-VIVA, INT	F&S	3	-	NLHP14.5
CO1, CO4	Recognize skin conditions that necessitate immediate attention, such as anaphylaxis or necrotizing fasciitis, and recognize the various skin-related medical emergencies. Recognize the medical emergencies and life-threatening conditions of the skin.	CK	MK	K	L_VC, L&PPT	P-VIVA	F&S	3	-	LH

Non Lecture Hour Theory

S.No	Name	Description of Theory Activity
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NLHT14.1	Zeenat e Jild se Mutalliq Umoomi Tadabeer.	The teacher and students will discuss and understand the Tadabeer with the Help of Videos, PPT, and discussion and students will learn the methods(01hour)
NLHT14.2	Measures for beautification of hair.	The teacher will describe the common Measures for the beautification of hair: Tatweel e Sha'ar, Jauo,dat e Sha'ar, Sabootate Sha'ar, InbaateSha'ar, Naura, Halq-ul-wajh, Preventive Measures for Shaqq-ul-sha'ar .and Talawwun-e-sha'ar with the help of discussion, group discussion and vedios and Students will learn and be able to describe the common Measures for the beautification of Hair:(01 hour)
NLHT14.3	Taghseel (Spa therapy).	The teacher will discuss and describe the different methods of Spa therapy (Taghseel) for skin tightening, wrinkles, glowing skin, dry skin, creepy skin and facial care, pedicure and manicure with the help of vedios, Discussion and power point presentation The students will learn and be able to describe the different methods of Spa therapy (01 hour)
NLHT14.4	Anti-wrinkle procedures.	The teacher will describe how to perform different anti-wrinkle procedures (Mane shikanTadabeer) such as PRP, Micro-needling, Facial massage, Use of Derma roller, Inkebaab, Rooshoyah, Spa for Facial care. with the help of Video, Discussion, and PPT.Students will learn and be able to describe how to perform different anti-wrinkle procedures (Mane shikanTadabeer) (01 hour)
NLHT14.5	Medical emergencies and life-threatening conditions in skin diseases.	The teacher will describe and explain the medical emergencies and life-threatening conditions in skin diseases.

		Students will learn how to recognize the medical Emergencies and life-threatening conditions of skin diseases. And be able to identify the condition and timely referral to an appropriate facility.
Non Lecture Hour Practical		
S.No	Name	Description of Practical Activity
NLHP14.1	Measures for Beautification of Skin.	The teacher will demonstrate the application of common Measures for the Beautification of Skin like Hammam, Ghasool, Riyazat-e-wajh, Inkibab, Zimad, Tila, Ghaza, Ghaliya, Ubtan, Missi, Rooshoya (Face wash), Qashoor (Scrub) Barood, Hina. Surma, Kajal, Mascara, Bleaching and Waxing, TazheelwaTasmeen, Washam (Tattooing) and appraise the result with the help of practical, Demonstration. Students will learn and describe the application of common Measures for the Beautification (02hour)
NLHP14.2	Measures for the beautification of hair.	The teacher will apply and demonstrate the common measures for the beautification of hair, such as Tatweel e Sha'ar, Jauo'dat e Sha'ar, Sabootate Sha'ar, Inbaate Sha'ar, Naura, Halq-ul-wajh, Preventive Measures for Shaqq-ul-sha'ar and Talawwun-e-sha'ar by practical and demonstrtion, Students will learn and describe/demonstrate the application of the common measures for the beautification of hair (02hour)
NLHP14.3	Methods of Spa therapy.	The teacher will demonstrate the different methods of Spa therapy (Taghseel) for skin tightening, wrinkles, skin glowing, dry skin, creepy skin, facial care, pedicure and manicure by practical and Demonstration

		Students will learn and be able to demonstrate the different methods of Spa therapy (Taghseel)(02hour)
NLHP14.4	Anti-wrinkle procedures.	<p>The teacher will demonstrate the application of different anti-wrinkle procedures (Mane shikanTadabeer) such as PRP, Micro-needling, Facial massage, Use of Derma roller, etc. Inkebaab, Rooshoyah and Spa for Facial care by practical and Demonstration and student will learn and participate actively.</p> <p>Duration - 02 Hours</p>
NLHP14.5	Medical emergencies and life-threatening conditions of skin diseases.	<p>The teacher will describe and discuss different medical emergencies and life-threatening conditions of skin, their diagnosis, immediate management and referral.</p> <p>Students will learn and should be able to tackle such conditions by:</p> <ol style="list-style-type: none"> 1. Stay up-to-date with emergency protocols. 2. Maintain a high index of suspicion. 3. Collaborate with emergency medicine and other specialists. 4. Educate patients on emergency signs and symptoms. 5. Develop a plan for tackling any emerging emergency. <p>Duration - 02 Hours</p>

Table 4 : NLHT Activity

(*Refer table 3 of similar activity number)

Sr No	CO No	Topic name
1.1	CO1	Anatomy and Physiology of Skin.
1.2	CO1	Examination of the skin, its types, and their variations.
1.3	CO1,CO2,CO3,CO5	Signs and symptoms of skin diseases and cutaneous manifestations of systemic diseases.
1.4	CO2,CO3,CO6	Use of Medicines in Dermatology and Cosmetology.
2.1	CO2	Importance of Cosmetic act and rules.
2.2	CO7	Group discussion on Ethics in practice of cosmetology
3.1	CO3,CO6	Presentation on Hasba.
3.2	CO3,CO6	Case presentation on Humayqa
3.3	CO3,CO6	Group discussion on Judari.
3.4	CO3,CO6	Group discussion on Namla.
3.5	CO3,CO6	Case presentation on Molluscum contagiosum.
4.1	CO3,CO6	Presentation on Daul-Mabeezat.
5.1	CO3,CO6	Group discussion on cutaneous manifestations of Surkhbada and Iltehabe Nasij Khalawi.
5.2	CO3,CO6	Case presentation of Dumbal.
5.3	CO3,CO6	Case presentation of Shabchiragh.
7.1	CO1,CO3,CO4,CO6,CO7	Patch test and skin prick test.
7.2	CO3,CO4,CO6	Skin Biopsy.
7.3	CO3,CO4,CO5,CO6	Skin scraping, Wood's lamp examination.
7.4	CO3,CO4,CO5,CO6	Physical Examination, Skin prick test and patch test.
7.5	CO3,CO4,CO6,CO7,CO8	Case Presentation of Taqashurul Jild.
7.6	CO3,CO4,CO6	Case presentation of Naffata.
7.7	CO3,CO4,CO6	Systemic lupus Erythromatousus.
7.8	CO3,CO4,CO6,CO7	Description of Bad e shanam.
7.9	CO3,CO4,CO6,CO7	Description of Ichthyosis and Acanthosis Nigricans.
8.1	CO2,CO5	Methods to keep hair healthy
8.2	CO2,CO8	Use of different Perfumes/Deodorants for skin care.

9.1	CO3,CO6	Application of PUVA in Bars.
9.2	CO3,CO6	Differential Diagnosis of Bahaq, Kalaf, Barsh and Namash.
10.1	CO4	Case Presentation on Warts.
10.2	CO4	Differential diagnosis of Sal'aat and Sartan-e-Jild.
11.1	CO3,CO5	Potential complications and comorbidities associated with varicose veins.
12.1	CO1,CO3,CO5	Clinical Examination and Management of Hair Loss.
12.2	CO1,CO3,CO6	Clinical Examination and Management of Seborrhoea of Scalp.
12.3	CO1,CO3,CO6	Clinical features and management of Namoosat/Namusa (smelly Scalp syndrome) and Qummal wa Si'byan (Pediculosis).
13.1	CO1,CO3,CO6	Examination of Abnormal Nail Presentations.
14.1	CO6,CO7,CO8	Zeenat e Jild se Mutalliq Umoomi Tadabeer.
14.2	CO2,CO8	Measures for beautification of hair.
14.3	CO2,CO4,CO8	Taghseel (Spa therapy).
14.4	CO2,CO8	Anti-wrinkle procedures.
14.5	CO2,CO3,CO6	Medical emergencies and life-threatening conditions in skin diseases.

Table 5 : List of Practicals

(*Refer table 3 of similar activity number)

Sr No	CO No	Practical Activity details
1.1	CO1,CO2,CO3	Examination of the skin, Types of skin and its variants
1.2	CO1,CO2,CO3,CO6,CO7	Signs and symptoms of skin diseases and cutaneous manifestations of systemic diseases.
1.3	CO2,CO3,CO6	Medicine used in dermatology and cosmetology.
2.1	CO7	Presentation on ethics in the practice of cosmetology.
2.2	CO2,CO4	Demonstration of the effect of Nutrition on skin.
2.3	CO5,CO6	Presentation on measures to achieve healthy nails.
3.1	CO3,CO4	Examination of Hasba.
3.2	CO3,CO4	Demonstration of Humayqa case.
3.3	CO3,CO4	Differential diagnosis of Judari from Hasba and Humayqa.
3.4	CO3,CO4	Demonstration of Namla case.
4.1	CO3,CO4	Wood's Lamp examination.
4.2	CO3,CO4,CO6,CO7	Potassium hydroxide (KOH) scraping test.
4.3	CO3,CO4	Demonstration of Daul-Mabeezat case.
5.1	CO3,CO4	Case presentation of Judham.
5.2	CO1,CO2,CO3	Clinical evaluation and management of Atshak.
5.3	CO3,CO4	Demonstration of differential diagnosis between Surkhbada and Iltehab Nasij Khalawi.
5.4	CO1,CO2	Clinical evaluation and management of Naffatat Tafliyya.
5.5	CO3,CO6,CO7	Demonstration of Diqq-ul-jild case.
6.1	CO3,CO4	Scraping for Jarb.
6.2	CO3,CO4	Demonstration of cutaneous manifestations of Irq-e-Madni and Jildi Kala Azar through visual aids.
6.3	CO3,CO4	Demonstration of Daa-ul-Feel case in the clinical settings.
7.1	CO1,CO3,CO6,CO7	Acne Severity Index (ASI) and Global Acne Grading System (GAGS).
7.2	CO1,CO3,CO4,CO6,CO7	Patch test and skin prick test.

7.3	CO3,CO4,CO6	Skin Biopsy
7.4	CO3,CO4,CO5,CO6	Skin scraping and Wood's lamp examination for detecting fungal/bacterial infections.
7.5	CO3,CO4,CO5,CO6	Skin prick test and patch test. Physical examination of wheals and Dermographism.
7.6	CO3,CO4,CO6	Examination of lichen planus Lesions.
7.7	CO3,CO4,CO6,CO7,CO8	Candle Grease Sign and Auspitz sign.
7.8	CO3,CO4,CO6	T zanck smear test & skin biopsy test.
7.9	CO3,CO4,CO6,CO7	Examination of SLE patient.
7.10	CO3,CO4,CO6,CO7	Laser Therapy-Pulsed dye Laser.
7.11	CO3,CO4,CO6,CO7	Clinical examination of a case of Ichthyosis and Acanthosis Nigricans.
8.1	CO2,CO5	Methods to keep hair healthy.
8.2	CO2,CO4	Methods of Facial Care.
8.3	CO4,CO6,CO8	Different measures to prevent early aging.
8.4	CO2,CO4,CO8	Different measures for protection from the environmental effects on skin.
8.5	CO2,CO4,CO8	Use of different Perfumes/Deodorants for skin care.
9.1	CO3,CO4,CO6	PUVA therapy in Bars.
9.2	CO3,CO4,CO6	Dermoscopy in Bahaq, Kalaf, Barsh and Namash.
10.1	CO3,CO4,CO6	Wart removal therapy
10.2	CO2,CO3	Methods of Diagnosis of Sal'aat and Sartan-e-Jild.
11.1	CO3,CO4,CO6	Case Presentation on Qillat e Arq
11.2	CO3,CO4,CO6	Case presentation on Miliaria
11.3	CO4	Case presentation on Maraz-e-Husaaf.
11.4	CO4	Cutaneous manifestations of Tasharrughul Jild through visual aids.
11.5	CO4	Clinical/Bedside Examination of a case of Duali (Varicose Vein).
12.1	CO1,CO3,CO4,CO6,CO7	Clinical Examination in Cases of Intishar-e-sha'r (Hair Fall).
12.2	CO1,CO3,CO4,CO6,CO7	Clinical/Bedside Examination of Hair
12.3	CO1,CO3,CO4,CO6,CO7	Pull test, Tug Test, Card Test and Trichoscopy in cases of Hair Fall.
12.4	CO1,CO3,CO4,CO6,CO7	PRP therapy
12.5	CO1,CO3,CO4,CO6,CO7	Examination of Da-us-Salab aur Da-ul-Haiya; Saa'fa (Favus), Sal'a (Baldness)
12.6	CO1,CO3,CO4,CO6,CO7	Dermatoscopy in Seborrhoea of Scalp.
12.7	CO1,CO3,CO4,CO6,CO7	Skin Scrapping and KOH Examination in cases of Seborrhoea of Scalp

13.1	CO1,CO3,CO4,CO6,CO7	Clinical/Bedside Examination of Nails.
13.2	CO1,CO3,CO4,CO6,CO7	KOH examination in cases of Zufra-e-Talqiya (Onychomycosis).
13.3	CO1,CO3,CO4,CO6,CO7	Non-Surgical management of Daakhis (paronychia/whitlow) and Ingrowing nails (onychocryptosis or unguis incarnates)
14.1	CO4,CO6,CO7,CO8	Measures for Beautification of Skin.
14.2	CO2,CO8	Measures for the beautification of hair.
14.3	CO2,CO6,CO8	Methods of Spa therapy.
14.4	CO2,CO4,CO8	Anti-wrinkle procedures.
14.5	CO2,CO6	Medical emergencies and life-threatening conditions of skin diseases.

Table 6 : Assessment Summary: Assessment is subdivided in A to H points

6 A : Number of Papers and Marks Distribution

Subject Code	Papers	Theory	Practical/Clinical Assessment (150)					Grand Total
			Practical	Viva	Elective	IA	Sub Total	
UNIUG-AJT	1	100	100	20	10 (Set-TB)*	20	150	250

6 B : Scheme of Assessment (formative and Summative)

PROFESSIONAL COURSE	FORMATIVE ASSESSMENT			SUMMATIVE ASSESSMENT
	First Term (1-6 Months)	Second Term (7-12 Months)	Third Term (13-18 Months)	
Third	3 PA & First TT	3 PA & Second TT	3 PA	UE**

PA: Periodical Assessment; **TT:** Term Test; **UE:** University Examinations; **NA:** Not Applicable.
****University Examination shall be on entire syllabus**

6 C : Calculation Method for Internal assessment Marks

Term	Periodical Assessment*				Term Test**	Term Assessment	
	A	B	C	D	E	F	G
1 (20)	2 (20)	3 (20)	Average (A+B+C/3) (20)	Term Test (MCQ+SAQ+LAQ and Practical) (Converted to 20)	Sub Total	Term Assessment	
First						D+E	D+E /2
Second						D+E	D+E /2
Third					NIL		D
Final IA	Average of Three Term Assessment Marks as Shown in 'G' Column						
	* Select an Evaluation Methods which is appropriate for the objectives of Topics from the Table 6 D. Convert it to 20 marks. ** Conduct Theory (100 Marks) (MCQ (20*1 Marks), SAQ (8*5), LAQ (4*10)) and Practical (100 Marks) Then convert to 20 Marks.						

6 D : Evaluation Methods for Periodical Assessment

S. No.	Evaluation Methods
1.	Practical / Clinical Performance
2.	Viva Voce, MCQs, MEQ (Modified Essay Questions/Structured Questions)
3.	Open Book Test (Problem Based)
4.	Summary Writing (Research Papers/ Samhitas)
5.	Class Presentations; Work Book Maintenance
6.	Problem Based Assignment
7.	Objective Structured Clinical Examination (OSCE), Objective Structured Practical Examination (OPSE), Mini Clinical Evaluation Exercise (Mini-CEX), Direct Observation of Procedures (DOP), Case Based Discussion (CBD)
8.	Extra-curricular Activities, (Social Work, Public Awareness, Surveillance Activities, Sports or Other Activities which may be decided by the department).
9.	Small Project
10.	Activities Indicated in Table 3 - Column G3 as per Indicated I, II or III term in column I3.

Topics for Periodic Assessments

Exam Type	Paper 1
PA1	Topic No. 1
PA 2	Topic No. 2
PA 3	Topic No. 3
TT 1	Topic No. 1-4
PA 4	Topic No. 5, 6
PA 5	Topic No. 7
PA 6	Topic No. 8 / 9
TT 2	Topic No. 5-9
PA 7	Topic No. 10, 11
PA 8	Topic No. 12, 13
PA 9	Topic No. 14

6 E : Question Paper Pattern

III PROFESSIONAL BUMS EXAMINATIONS

PAPER-I

Time: 3 Hours Maximum Marks: 100

INSTRUCTIONS: All questions compulsory

		Number of Questions	Marks per question	Total Marks
Q 1	MULTIPLE CHOICE QUESTIONS (MCQ)	20	1	20
Q 2	SHORT ANSWER QUESTIONS (SAQ)	8	5	40
Q 3	LONG ANSWER QUESTIONS (LAQ)	4	10	40
				100

6 F : Distribution of theory examination

Paper 1 (Amraz-e-Jild wa Tazeeniyat (Skin Diseases and Cosmetology))						
List of Topics	Term	Marks	MCQ	SAQ	LAQ	
1 بیان عامیہ امراض جلد و تزئینات کا عمومی بیان (General description of Dermatology and Cosmetology)	1	10	Yes	Yes	Yes	
2 تزئینات حصہ اول Tazeeniyat Part-1 (Cosmetology Part-1)	1	10	Yes	Yes	Yes	
3 جلد کے ویریسی امراض Jild ke Vairusi Amraz (Viral diseases in Dermatology)	1	10	Yes	Yes	Yes	
4 جلد کے فنجائی امراض Jild ke Fungal Amraz (Fungal diseases in Dermatology)	1		Yes	Yes	Yes	
5 جلد کے جراثیمی امراض Jild ke Jarasimi Amraz (Bacterial diseases in Dermatology)	2	10	Yes	Yes	Yes	
6 جلد کے طفیلی امراض Jild ke Tufaili Amraz (Parasitic diseases in Dermatology)	2		Yes	Yes	Yes	
7 جلد کے غیر متعدی امراض Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology)	2	15	Yes	Yes	Yes	
8 تزئینات حصہ دوم Tazeeniyat Part-2 (Cosmetology Part-2)	2	15	Yes	Yes	Yes	
9 فساد لون Fasad-e-Laun (Disorders of Pigmentation)	2		Yes	Yes	Yes	
10 جلد کے غیر طبعی زوائد Jild ke Ghair Tabai Zawaiid (Abnormal Growths of Skin)	3	10	Yes	Yes	Yes	
11 دیگر جلدی امراض Deegar Jildi Amraz (Other Skin Conditions)	3		Yes	Yes	Yes	
12 امراض شعر Amraze Shaa'r (Diseases of Hair)	3	10	Yes	Yes	Yes	

13 امراض الظفار Amraze Azfar (Diseases of Nails)	3		Yes	Yes	Yes
14 تزئینات حصہ سوم Tazeeniyat Part-3 (Cosmetology Part-3)	3	10	Yes	Yes	Yes
Total Marks		100			
Grand Total		100			

6 G : Instructions for UG Paper Setting & Blue print

1. All questions shall be compulsory.
2. The maximum marks for one question paper shall be 100.
3. Questions shall be drawn based on Table 6F, which provides the topic name, types of questions (MCQ(Multiple Choice Question), SAQ(Short Answer Question), LAQ(Long Answer Question)).
4. The marks assigned in Table 6F for each topic/group of topics shall be considered as the maximum allowable marks for that topic/group of topics.
5. Ensure that the total marks allocated per topic/group of topics do not exceed the limits specified in Table 6F.
6. Refer to Table 6F before setting the questions. Questions shall be framed only from topics where the type is marked as “YES”, and avoided if marked as “NO”.
7. Each 100-mark question paper shall contain:
 - 20 MCQs
 - 8 SAQs
 - 4 LAQs
8. MCQs:
 - Majority shall be drawn from the Must to Know part of the syllabus.
 - Questions from the Desirable to Know part of syllabus shall not exceed 3.
 - Questions from the Nice to Know part of syllabus shall not exceed 2.
9. SAQs:
 - Majority shall be drawn from the Must to Know part of the syllabus.
 - Questions from the Desirable to Know part of syllabus shall not exceed 1.
 - No questions shall be drawn from the Nice to Know part of syllabus.
 - SAQs shall assess understanding, application, and analysis, rather than simple recall.
10. LAQs:
 - All LAQs shall be drawn exclusively from the Must to Know part of the syllabus.
 - No questions shall be taken from the Desirable to Know or Nice to Know part of the syllabus.
 - Number of LAQs should not exceed one per topic unless maximum marks exceed 20 for the topic.
11. Long Answer Questions shall be structured to assess higher cognitive abilities, such as application, analysis, and synthesis.
12. Follow the guidelines in User Manual III for framing MCQs, SAQs, and LAQs.

Demo Blueprint for Illustration. Blue printing should be done based on Instructions for Question paper setting and using 6 F table.

Paper No: 1 (Amraz-e-Jild wa Tazeeniyat (Skin Diseases and Cosmetology))		
Question No	Type of Question	Question Paper Format
Q1	<p>Multiple choice Questions</p> <p>20 Questions</p> <p>1 mark each</p> <p>All compulsory</p>	<ol style="list-style-type: none"> 1. Amraze Jild wa Tazeeniyat ka Umoomi Bayan (General description of Dermatology and Cosmetology) 2. Jild ke Jarasimi Amraz (Bacterial diseases in Dermatology) 3. Tazeeniyat Part-1 (Cosmetology Part-1) 4. Jild ke Ghair Tabai Zawaid (Abnormal Growths of Skin) 5. Jild ke Tufaili Amraz (Parasitic diseases in Dermatology) 6. Jild ke Vairusi Amraz (Viral diseases in Dermatology) 7. Jild ke Fungal Amraz (Fungal diseases in Dermatology) 8. Deegar Jildi Amraz (Other Skin Conditions) 9. Amraze Azfar (Diseases of Nails) 10. Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology) 11. Tazeeniyat Part-2 (Cosmetology Part-2) 12. Fasad-e-Laun (Disorders of Pigmentation) 13. Tazeeniyat Part-3 (Cosmetology Part-3) 14. Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology) 15. Amraze Jild wa Tazeeniyat ka Umoomi Bayan (General description of Dermatology and Cosmetology) 16. Jild ke Fungal Amraz (Fungal diseases in Dermatology) 17. Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology) 18. Fasad-e-Laun (Disorders of Pigmentation) 19. Tazeeniyat Part-3 (Cosmetology Part-3) 20. Amraze Shaa'r (Diseases of Hair)
Q2	<p>Short answer Questions</p>	<ol style="list-style-type: none"> 1. Tazeeniyat Part-1 (Cosmetology Part-1) / Jild ke Jarasimi Amraz (Bacterial diseases in Dermatology) / Amraze Jild wa

	<p>Eight Questions 5 Marks Each All compulsory</p>	<p>Tazeeniyat ka Umoomi Bayan (General description of Dermatology and Cosmetology)</p> <p>2. جلد کے طفیلی امراض / Jild ke Vairusi Amraz (Viral diseases in Dermatology) / جلد کے ویروسی امراض Jild ke Tufaili Amraz (Parasitic diseases in Dermatology) / جلد کے غیر طبعی زوائد / Jild ke Ghair Tabai Zawaid (Abnormal Growths of Skin)</p> <p>3. تازینیات حصہ دوم / Tazeeniyat Part-2 (Cosmetology Part-2) / جلد کے غیر متعدی امراض / Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology) / امراض اظفار / Amraze Azfar (Diseases of Nails)</p> <p>4. فساد لون / Fasad-e-Laun (Disorders of Pigmentation) / تازینیات حصہ دوم / Tazeeniyat Part-2 (Cosmetology Part-2) / دیگر جلدی امراض / Deegar Jildi Amraz (Other Skin Conditions)</p> <p>5. تازینیات حصہ دوم / Tazeeniyat Part-2 (Cosmetology Part-2) / امراض شعر / Amraze Shaa'r (Diseases of Hair) / تازینیات حصہ اول / Tazeeniyat Part-1 (Cosmetology Part-1)</p> <p>6. جلد کے غیر متعدی امراض / Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology) / جلد کے طفیلی امراض / Jild ke Tufaili Amraz (Parasitic diseases in Dermatology) / امراض جلد و تازینیات کا عمومی بیان / Amraze Jild wa Tazeeniyat ka Umoomi Bayan (General description of Dermatology and Cosmetology)</p> <p>7. فساد لون / Fasad-e-Laun (Disorders of Pigmentation) / جلد کے غیر متعدی امراض / Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology)</p> <p>8. فساد لون / Fasad-e-Laun (Disorders of Pigmentation) / تازینیات حصہ سوم / Tazeeniyat Part-3 (Cosmetology Part-3) / امراض جلد و تازینیات کا عمومی بیان / Amraze Jild wa Tazeeniyat ka Umoomi Bayan (General description of Dermatology and Cosmetology)</p>
<p>Q3</p>	<p>Long answer Questions Four Questions 10 marks each All compulsory</p>	<p>1. تازینیات حصہ اول / Tazeeniyat Part-1 (Cosmetology Part-1) / جلد کے غیر طبعی زوائد / Jild ke Ghair Tabai Zawaid (Abnormal Growths of Skin) / جلد کے جراثیمی امراض / Jild ke Jarasimi Amraz (Bacterial diseases in Dermatology) / امراض جلد و تازینیات کا عمومی بیان / Amraze Jild wa Tazeeniyat ka Umoomi Bayan (General description of Dermatology and Cosmetology)</p> <p>2. جلد کے فنجائی امراض / Jild ke Fungal Amraz (Fungal diseases in Dermatology) / دیگر جلدی امراض / Deegar Jildi Amraz (Other Skin Conditions) / جلد کے ویروسی امراض / Jild ke Vairusi Amraz (Viral diseases in Dermatology) / جلد کے طفیلی امراض / Jild ke Tufaili Amraz (Parasitic diseases in Dermatology)</p> <p>3. جلد کے غیر متعدی امراض / Jild ke Gair-Muta'ddi Amraz (Non-infectious diseases in Dermatology) / امراض اظفار / Amraze Azfar (Diseases of Nails) / امراض شعر / Amraze Shaa'r (Diseases of Hair)</p>

		4. تزءینیات حصہ سوم / Fasad-e-Laun (Disorders of Pigmentation)
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6 H : Distribution of Practical Exam

S.No	Head	Marks
1	Bed side Case Diagnosis of patients (History taking, Clinical examination, Differential Diagnosis and Diagnosis and Managment) (01 case per Student)	30
2	Dermatological and Cosmetological Procedures (02 Procedure/Student)	30
3	Investigations (01 Investigaton/Stuent)	20
4	Record Book/Log Book	20
5	Viva Voice	20
6	Internal Assessment	20
7	Electives	10
Total		150

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Abbreviations

Domain		T L Method		Level		Assessment		Integration	
CK	Cognitive/Knowledge	L	Lecture	K	Know	T-CS	Theory case study	V-UAM F	V-UAM F
CC	Cognitive/Comprehension	L&PP T	Lecture with PowerPoint presentation	K H	Know show	T-OBT	Theory open book test	V-KUT	V-KUT
CAP	Cognitive/Application	L&GD	Lecture & Group Discussion	S H	Show show	P-VIVA	Practical Viva	V-TB	V-TB
CAN	Cognitive/Analysis	L_VC	Lecture with Video clips	D	Does	P-REC	Practical Recitation	V-MZ	V-MZ
CS	Cognitive/Synthesis	REC	Recitation			P-EXAM	Practical exam	V-TT	V-TT
CE	Cognitive/Evaluation	SY	Symposium			PRN	Presentation	V-IA	V-IA
PSY - SET	Psychomotor/Set	TUT	Tutorial			P-PRF	Practical Performance	V-ISM	V-ISM
PSY - GUD	Psychomotor/Guided response	DIS	Discussions			P-SUR	Practical Survey	V-TST	V-TST
PSY - MEC	Psychomotor/Mechanism	BS	Brainstorming			P-EN	Practical enact	V-MA	V-MA
PSY - ADT	Psychomotor Adaptation	IBL	Inquiry-Based Learning			P-RP	Practical Role play	V-TQS	V-TQS
PSY - OR G	Psychomotor/Origination	PBL	Problem-Based Learning			P-MOD	Practical Model	V-SUI	V-SUI

AFT- REC	Affective/ Receiving	CBL	Case-Based Learning			P-POS	Practical Poster	H- MOA	H- MOA
AFT- RES	Affective/Responding	PrBL	Project-Based Learning			P-CASE	Practical Case taking	H- QAN	H- QAN
AFT- VAL	Affective/Valuing	TBL	Team-Based Learning			P-ID	Practical identification	H-IJ	H-IJ
AFT- SET	Affective/Organization	TPW	Team Project Work			P-PS	Practical Problem solving	H- AUH	H- AUH
AFT- CHR	Affective/ characterization	FC	Flipped Classroom			QZ	Quiz	H- AJT	H- AJT
PSY - PER	Psychomotor/perception	BL	Blended Learning			PUZ	Puzzles	H-IBT	H-IBT
PSY - COR	Psychomotor/ Complex Overt Response	EDU	Edutainment			CL-PR	Class Presentation	H- AAN	H- AAN
		ML	Mobile Learning			DEB	Debate	H- RMS	H- RMS
		ECE	Early Clinical Exposure			WP	Word puzzle		
		SIM	Simulation			O-QZ	Online quiz		
		RP	Role Plays			O-GAME	Online game- based assessment		
		SDL	Self-directed learning			M-MOD	Making of Model		
		PSM	Problem- Solving Method			M-CHT	Making of Charts		
		KL	Kinaesthetic Learning			M-POS	Making of Posters		

		W	Workshops			C-INT	Conducting interview		
		GBL	Game-Based Learning			INT	Interactions		
		LS	Library Session			CR-RED	Critical reading papers		
		PL	Peer Learning			CR-W	Creativity Writing		
		RLE	Real-Life Experience			C-VC	Clinical video cases		
		PER	Presentations			SP	Simulated patients		
		D-M	Demonstration on Model			PM	Patient management problems		
		PT	Practical			CHK	Checklists		
		X-Ray	X-ray Identification			Mini-CEX	Mini-CEX		
		CD	Case Diagnosis			DOPS	DOPS		
		LRI	Lab Report Interpretation			CWS	CWS		
		DA	Drug Analysis			RS	Rating scales		
		D	Demonstration			RK	Record keeping		
		D-BED	Demonstration Bedside			COM	Compilations		
		DL	Demonstration Lab			Portfolios	Portfolios		
		DG	Demonstration Garden			Log book	Log book		

		FV	Field Visit			TR	Trainers report		
						SA	Self-assessment		
						PA	Peer assessment		
						360D	360-degree evaluation		
						PP-Practical	Practical		
						VV-Viva	Viva		
						DOAP	Demonstration Observation Assistance Performance		
						SBA	Scenario Based Assessment		
						CBA	Case based Assessment		
						S-LAQ	Structured LAQ		
						OSCE	Objective Structured Clinical Examination		
						OSPE	Objective Structured Practical Examination		
						DOPS	Direct observation of		

							procedural skills		
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