Appropriate documentary evidence

- MET workshops conducted by Institute
- Poster competition
- Symposium of UG students (Vertical Integration)
- Ex- Physio Software used by students
- Case presentations/Problem based learning/Lab report analysis (Few samples)
- Algorithms on clinical procedures
- Wall Journal
- Missing word game
- Cross word game
- Flipped classroom
- Power point presentation by students
- Rating scales used by Psychiatry department
- E-learning- E-Journal, E-books, Google classrooms, Video lectures.

Medical Education Technology Unit ACPM Medical College, Dhule

Workshops conducted for Medical education technology and Basic research methodology.

No.	Workshop	Place	Date	No. of participants	No. of resource	
1	Basic MET	ACPM MC Dhule	7 th to 9 th	30	persons 11	
2.	Basic RMW	ACPM MC Dhule	Aug. 2015 5 th to 7 th	50	09	
3.	Basic RMW	ACPM MC Dhule	Feb.2016		09	
4.	Basic RMW	IMETIT, MUHS Nasik	26 th to 28 th Aug. 2016	51	11	
		ACPM MC Dhule IMETTT, MUHS Nasik	15 th to 18 th Feb. 2018	51	09	
5.	Basic RMW	ACPM MC Dhule IMETTT, MUHS Nasik	24 th to 26 th Aug. 2018 12 th to 14 th	55	10	
6.	Basic RMVy	ACPM MC Dhule IMETTT, MUHS Nasik		54		
7.	12 th Revised basic MET	Dept. of MET, GSMC & KEMH- MCI Nodal Centre	29 th to 31 st Jan 2019	05	14	
8,	Attitude, Ethics and Communications Module (AET-COM)	Dept. of MET, GSMC & KEMH- MCI Nodal Centre	1 st Feb. 2019	05	10	
9.	Revised basic MET	Maharashtra University of Health Sciences Nashik	17 th to 19 th June 2019	23	09	
10	Curriculum Implementation Support Programme (CISP)	ACPM MC Dhule IMETTT, MUHS Nasik	1 st to 3 rd July 2019	23	05	
1	CISP II	ACPM MC Dhule IMETTT, MUHS Nasik	22 nd & 23 rd Dec 2020	30	11	
2	Revised Basic Course Workshop	ACPM MC Dhule IMETTT, MUHS Nasik	30 th March to 1 st April 2021	18	11	

Coordinator, (MEU) ACPM Medical College, Dhulc.





Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College

Post Box No. 145, Sakri Road, Dhule - 424 001.

Ph. (02562)276317,18,19 Fax: (02562) 278027 e-mail: scpmmcdhule@gmail.com web: www.acpmimf.com

Date-1/11/2019

Ref No. - 1394 | ncpmmc/shure

Circular

This is to inform all first MBBS students that department of physiology is organizing poster competition on 05 /11 / 2019

Those who are interested should register their name at department of physiology before 05 /11 /2019

Time – 11.00 am to 01.00pm

Venue - Dept. of Physiology

Copy to-

Dean

Student notice board

Prof and HOD

Dept. of Physiology

ACPM MC Dhule

Professor & Head, Department of Physiology, A.C.P.M.Medical College, Dhula M.S.1





Jawahar Medical Foundation's

Annasaheb Chudaman Patil Memorial Medical College

Post Box No. 145, Sakri Road, Dhule - 424 001. Ph. (02562)276317,18,19 Pax : (02562) 278027 e-mail : acpmmcdhule@gmail.com web : www.acpnjmf.com

PROGRAM REPORT

Title of Program	Poster making competition
Objective of Program	To facilitate creativity, innovation among the students To facilitate team work and analytical skill among students.
Participant Type (tick applicable)	First MBBS students
Date and Duration of Program	Date :05/11/2019 From: 11.00am to 1.00pm
Venue of the program/event	Dept. of Physiology
Program Organized by (Department/Committee/Unit)	Dept. of Physiology ,ACPM MC DHULE
Program in-charge	Dr. R.C.Sharma
Name of Faculty/ Guest Speaker	Dr. R.C.Sharma ,Dr. P.S. Shinde
Supporting staff member	All the teaching and non teaching faculty of Dept. of Physiology
Number of participants (attended program/event)	50
Brief about the Program (Activity/Event details)	Poster competition was held in the Dept . of Physiology . Agroup of 2-3 students prepared the posters and were instructed to explain the poster . Best presenter was awarded.

Prepared by Coordinator



Department of Physiology, A.C.P.M.Medical College, Double 1818.1



JAWAHAR MEDICAL FOUNDATION'S A.C.P.M. MEDICAL COLLEGE & HOSPITAL

- Email: deanacpm@gmail.com
- acpmmcdhule@gmail.com
- website: www.jmfacpm.com

- Sakri Road, Dhule 424001 (Maharashtra)
- Ph.No.: 02562 276317,18,19 Mob. 8686585839

Ref:ACPMMC/Path/ II/490A

Date: 30/06/2021

SYMPOSIUM- LEPROSY

Vertical Integration-II MBBS Date: 03rd July 2021

Venue- Auditorium Hall

Time-11 A.M.

No.		Time- 11 A.N			
IVO.	Topic	Subject	Presenter		
1.	Epidemiology & Indian Prospective	PSM	Shinjini Patra 19085		
2.	Clinical Presentation & manifestation	Skin & V.D.	Chahat Singh 19014		
3.	Microbiology & Immunology	Microbiology	Ayushi Jain 19005		
4.	Pathology of Leprosy	2 Pathology	Sneh D. Cruz 19019		
5.	Pharmacology & Therapeutics	Pharmacology	Sudhanshu Patil		
6.	Surgical Intervention & Rehabilitation	Surgery	Sahota Harpreet Kaur 19071		

H.O.D.

Dept of Pharmacology

Dept of Pathology

H.O.D.

Dept of Microbiology

A.C.P.M. Medical College, Dhule

AC.P.M.MEDICAL COLLEGE & HOSPITAL,
DHULE



Bureau for Health and Education Status Upliftment

(Constitutionaly Entitled as Health-Education, Bureau)

55/20, Rajat Path, Mansarovar, Jaipur

Rajasthan, Pin: 302020

Contact: Basic: 0141-2783681, (M) 9636348191, 7976447983

Mail: support@heb-nic.in, serviceheb@gmail.com

Website: www.heb-nic.in



Date: 10/06/2021

Ref. No: EPY/1032/1/22/05R

To. The Principal, ACPM Medical College, Sakri Road, Dhule -424001 (MS).

Subject: Confirmation of subscription.

Dear Sir/Madam,

In response to subscription request & subscription amount received from you, we are here by sending you the dedicated password of Experimental Physiology (Ex-Physio) Series Software & Plag-Check Software (Regular), Checking Limit - In Queries* 50,000 (*1 query means group of words, ending with full stop.) and the invoice for Experimental Physiology (Ex-Physio) Series Software and Plag-Check Software (Regular) (attached with letter).

We hereby confirm your subscription of Experimental Physiology (Ex-Physio) Series & Plag-Check Software (Regular) Software from JUNE-21 to MAY -22 (1 Year).

To use Experimental Physiology (Ex-Physio) Series Software, please enter the password in below mentioned link:

Link: http://heb-nic.in/Ex-Physio/login.php

User ID: acpmm Password: acpmm123

To use Plag-Check Software (Regular) Software, please enter the password in below mentioned link. ientate to other staff

Link: http://bhesu.in/plag-check/login.php

User ID: acpmm

Password: acpmm123

You will be receiving further communications time to time also.

rector. Digital Service Division

Enclosed:

- The Invoice
- User Manual

iNTR



HEALTH EDUCATION BUREAU

(Bringing Innovations in Health & Learning) Address: 55/20, Rajat Path, Mansarovar,

> Jalpur, Rajasthan, Pin:302020 Contact:0141-2783681, 9636348191

Mail: serviceheb@gmail.com, support@heb-nic.in

Website: www.heb-nic.in

INVOICE

PAN	NO:AGAPA7570J		GST Reg.	No: 08AJAPA7570J1Z8		INVOICE NO: 9567/2021 DATE: 10/06/2021	
The Principal, ACPM Medical College , Sakri Road, Dhule -424001 (MS)				FORM:	PRODUCT CODE: HP-JEN	SUB PRODUCT CODE: ONLINE	BOOKING EXECUTIVE CODE: MHMAK
				CLIENT LOCATIO	N: Dhule		
SR.	DESCRIPTION	SUBSCI	RIPTION	AMOUNT IN	NET PRICE	REMARKS	CATEGORY
U		FROM	то	RUPEES (INCLUSIVE ALI TAXES)	100000000000000000000000000000000000000	ACMANAS	CATEGORY
1	Experimental Physiology (Ex- Physio) Series Software	JUNE-21	MAY-22	5,864 ₹			INSTITUTION
2	Plag-Check Software (Regular) Checking Limit – In Queries* 50,000	JUNE-21	MAY-22	7,966₹	13,830		
MOU	NT IN WORDS: Thirteen	Thousand E	ght Hundred	and Thirty Rupe	es Only		
	PAYME	NT RECEIVED	W. T. T.		BA	LANCE TO COLLECT	

	PAY	MENT RECEIVE	BALANCE TO COLLECT						
MODE	AMOUNT	TRANS. NO.	DATE	BANK	MODE	AMOUNT	TRANS. NO.	DATE	BANK
/CHEQUE/ FT/RTGS					D.D./CHEQUE/ CASH				
ANY OTHER	13,830₹			- 2	NEFT/RTGS				

PAYMENT RECEIVED: Thirteen Thousand Eight Hundred and Thirty Rupees Only

BALANCE TO COLLECT:

FOR HEALTH EDUCATION BUREAU

AUTHORISED SIGNATORY DATE: 10/06/2021

Account details for NEFT/RTGS

Name of A/C Holder:Health Education Bureau

Name of the Bank: UCO Bank

Account Number: 20960210003121

IFSC code:UC8A0002096

MICR Code: 302028023

Bank Branch Name & Code:Mansarovar, Jaipur Branch ,Code:002096

District & State: Jaipur, Rajasthan



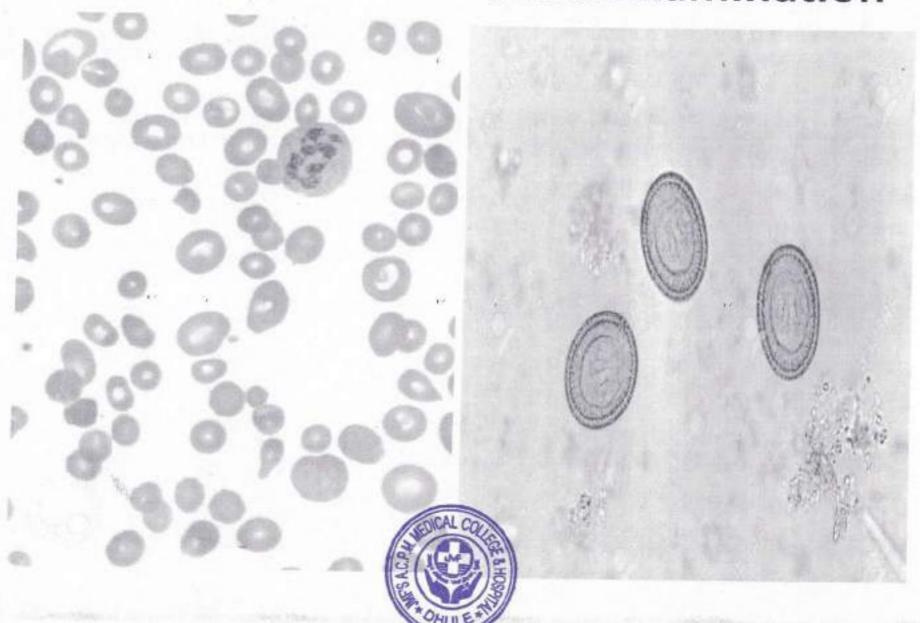
CASE No. 1

A 38 yrs old female came with c/o malaise, fatigue, breathlessness.
 Immediate past H/o 2 fainting episodes.Hb-9.2gm/dl, HCT- 27.9 %, MCV- 132 fL. RDW- 25.8 %.



PBS

Stool Examination



QUESTIONS

- 1) Enumerate differential diagnosis.
- 2) What are the lab findings in favour of your diagnosis?
- 3) What will be the treatment plan in this patient?



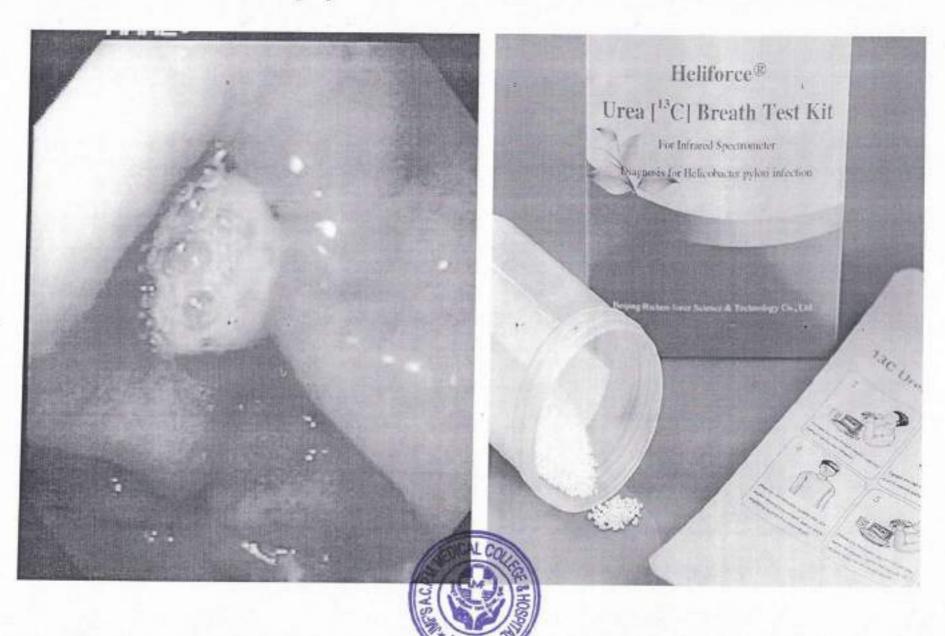
CASE NO.2

 A 40 yrs old corporate manager c/o epigastric pain, nausea since 2 months. Intensity of pain increases at night. He was advised Urea Breath Test, which has been reported as 'Positive'. Gastroscopy revealed an antral ulcer. Biopsy was done.



Gastroscopy

Urea Breath Test



Biopsy interpretation



Questions

- 1) What is the probable diagnosis?
- 2) What should be the pathologic findings confirming the diagnosis?
- 3) How will you treat this patient?



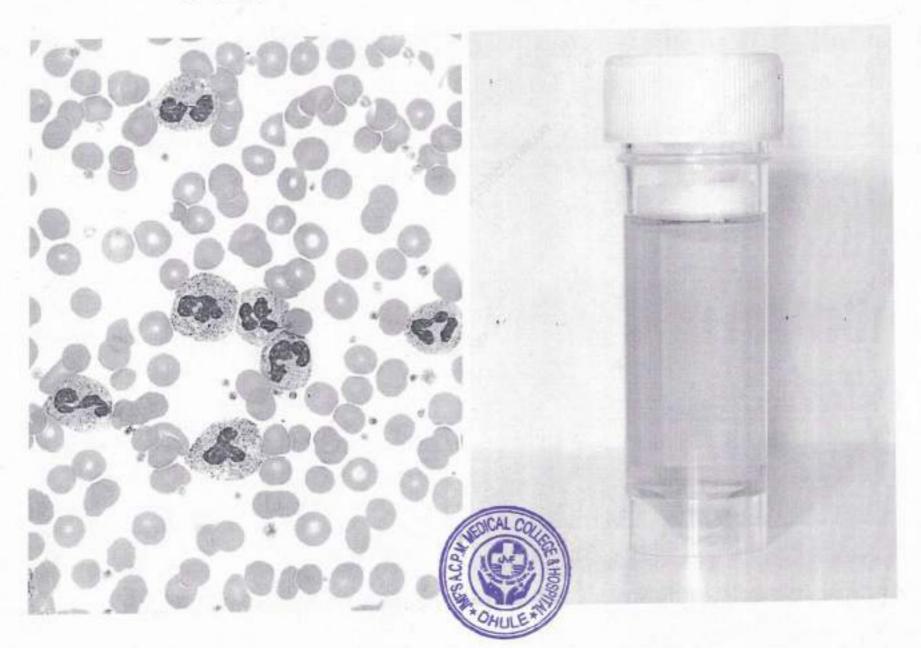
CASE NO. 4

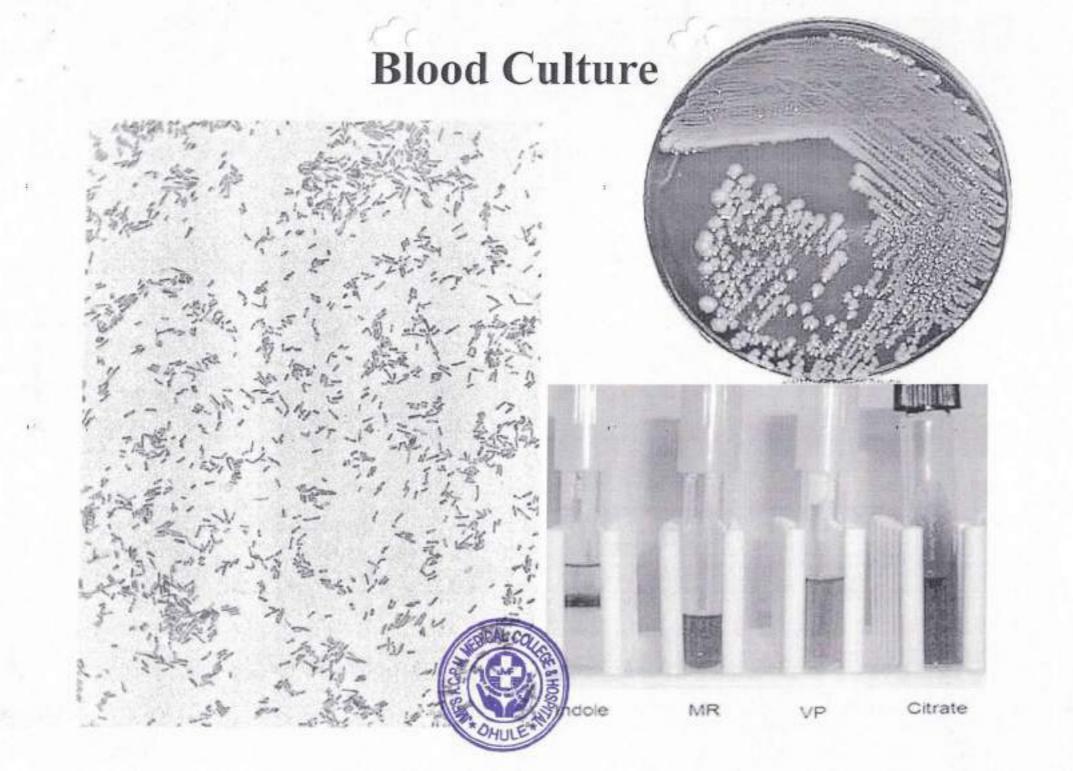
- A 56 yrs old male had an episode of severe abdominal pain and fever 10 days before admission. He self medicated with a cathartic which made him feel worse. He started having cramps in calf muscles. During hospitalisation, icterus was noted. Patient vomited periodically and before admission had 6 bouts of bulky diarrhoea with blood streaks.
- Clinical history- Temp. 43°C, Tachycardia, tachypnoea, Normal BP, Marked icterus. CVS, RS- Within Normal Limits. Abdominal Distension noted with moderate diffuse tenderness.
- Lab investigations- Marked neutrophilic leucocytosis,
 Conjugated hyperbilirubinemia, significant prolonged PT.



PBS

Urine





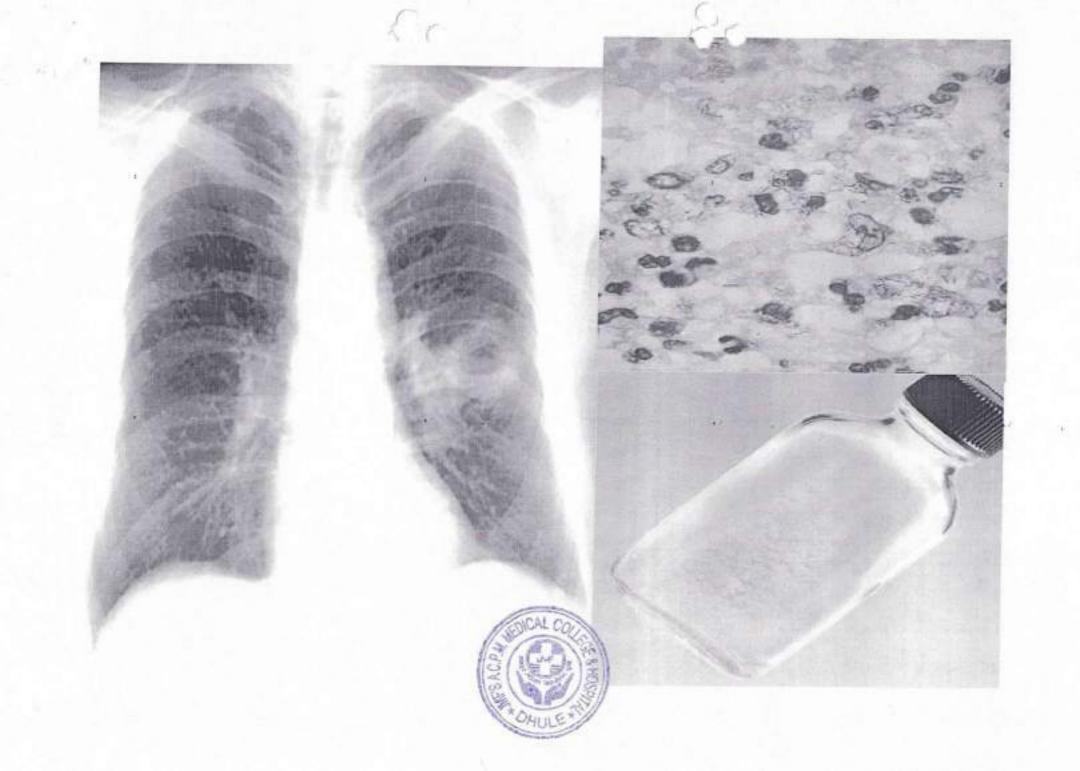
QUESTIONS

- 1) What is the probable clinical diagnosis?
- 2) What is the interpretation of lab tests?
- Discuss your plan of treatment and management.



CASE NO. 5

· A cachectic 34 yrs old male presented with progressive shortness of breath and cough with expectoration since 1 month. There was increasing fatigue, breathlessness on exertion and mild chest discomfort. C/o periodically night sweats with rise in temperature. He noted loss of weight since last 3 months. The chest X-Ray and Lab findings are submitted for interpretation.



Questions

- 1) What is the clinical diagnosis?
- 2) What is the interpretation of investigations done?
- 3) Which other additional investigations should be done to confirm diagnosis?
- 4) What is the treatment plan and difficulties in managing this patient?



ACPM Medical College Dhule Department Of Medicine Clinical Scenario

CASE 2) A 36 Year old male, farmer presented to emergency department with swelling and bleeding from left leg after he was bitten by a snake early in the morning when he was working in the farm he also complined of bleeding from gums, hemturia, and not passed urine since morning. he was conscious and oriented. his blood pressure was 90/60 mmhg. neurological examination did not reveal any abnormality.

DATE- 25/5/2020

TIME- 11AM-1PM

PLACE-SEMINAR ROOM

TOPIC-CLINICAL SCENARIO



Professor & Head,
Bepartment of General Medicine
A.C.P.M. Medical College, Dhule (M.S.)

ACPM Medical College Dhule Department Of Medicine Clinical Scenario

Case 1) A 20 year old male presented with history of diffuse abdominal pain , myalgia ,difficulty in swallowing , pooling of secretions. He also complained of difficulty in breathing and diplopia with acute onset drooping of eyes . He was conscious, oriented to time and place , with a respiratory rate of 12 per minute and single breath count of 12. The power in all limbs was 4/5 but all reflexes were absent . He had ptosis , and the rest of the general and systemic examination was normal .He was absolutely normal the previous night when he had slept on the floor.

DATE- 25/5/2020

TIME- 11AM-1PM

PLACE-SEMINAR ROOM

TOPIC-CLINICAL SCENARIO

Department of medicine

Professor & Head, Department of General Medicine A.C.P.M. Medical College, Dhule (M.S.)

Long case:2

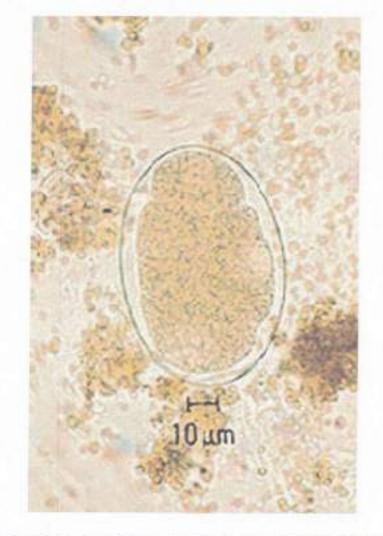
A 60 year old gentleman comes with ulcer over rt foot since 6 months. Patient is a known diabetic since 15 years on medications.

What other history will you ask for?
What general examination finding you look for?

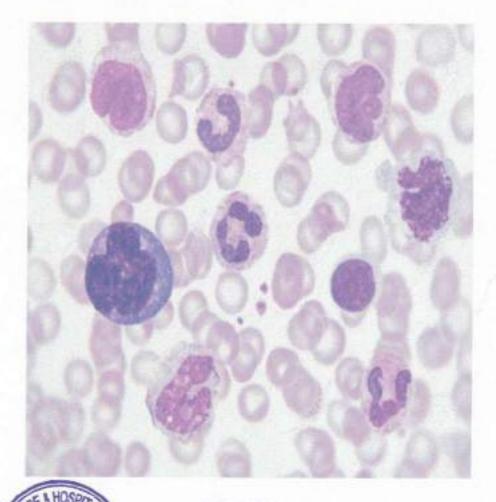
Describe how will you proceed with local examination?

What are your differential diagnosis? How will you proceed?

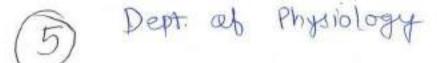




STOOL EXAMINATION



PBS



Early Clinical Exposure-IV

Mrs. Maria is a 32-year-old white woman, working as assistant operation manager in manufacturing cotton unit, presents with symptoms of recurrent abdominal pain and loose stools. She states that she has experienced these symptoms since adolescence, with periods of improvement and worsening over the years. She notes that her symptoms were most pronounced when she was in college. Over the past year, her symptoms have been occurring more frequently and with greater severity. Bloating and distention also have increasingly bothered her over the past 6 months. The bloating seems to worsen with food intake, while the distention progresses throughout the day. When questioned about abdominal pain, she describes it as 7 (on a scale of 10), with acute worsening immediately prior to defecation and significant improvement after defecation. She has loose stools approximately one third of the time and often will have 2-3 bowel movements per day. She jogs about a kilometer once in week, tries to eat 4-6 servings of fruits and vegetables daily, and taking a daily multivitamin, for many years, She feels that she is loosing weight but her vital signs seems to be within normal limits: height 5'6", weight 46 kg, blood pressure 108/64 mm Hg, pulse 60 beats per minute, and respiratory rate 12 breaths per minute. On physical examination, she is a welldeveloped, well-nourished woman but exhibit some employment distress. Her physical examination is notable for mild tenderness to palpation in the left lower quadrant, but there is no rebound tenderness, guarding, or other peritoneal signs. The remainder of the physical examination is unremarkable.

About 5 years back, she presented to the emergency room complaining that she had vomited up blood at home. She had been suffering with sharp epigastric pain, especially in the morning, for one week before the vomiting began. The pain was accompanied by mild nausea and was relieved by food or antacids. She had a long history of peptic ulcer disease and was initially diagnosed with duodenal ulcer at age of 16. Despite at least six discrete episodes of ulcer documented by x-ray or endoscopy, she had never undergone surgery. The physician had worked up for Zollinger-Ellison syndrome, which was negative. Her endoscopy findings revealed scarring of the pylorus with a 2 cm ulcer in the first portion of the duodenum. Biopsy of the ulcer revealed curved bacilli with Warthin—Starry silver staining and a positive urease test. She was started on an H₂ blocker and the pain rapidly subsided.

- Describe the clinical features of irritable bowl syndrome and duodenal ulcer.
- Compare and contrast the irritable bowl syndrome and inflammatory bowl disease.
- Explain the gut-brain axis [GBA]. Explain the role GBA in GI disorder.
 Explain the feature of Gastric Mucosal barrier and its function.
- 5. Explain the neuronal mechanism of Gastro-iliac reflex and enterogastric reflex.
- Explain the mechanism of nausea and vomiting.
- Describe the pathophysiology of Zollinger-Ellison syndrome and its management.
- 8. What phenotypic characteristics of H. pylori are thought to account for its virulence? Which of them appear to be most important?
- 9. What further treatment might be helpful?What long-term benefits could she expect if she were to receive the additional treatment?
- 10. Describe mechanism of defecation reflex.

Protestor & Meed, Department of Prosidently, a C PM Method Called Trees

Before Induction of Anaesthesia

(with at least nurse & anaesthetic)

1) Has the patient confirmed his/her ic ntity, site, procedure and consent)

Yes

2) Is the site marked?

Yes/Not applicable

 Is the anaesthesia machine and medication check complete?

Yes

4) Is the pulse conther ient and

ctioning?

Yes

Does the patient have a known allergy?

Yes/No

6)Difficult airway or aspiration risk?

Yes, and two IV's /Central access and fluids planned

No

Name and Signature of Anaesthetic with date and time:

Jan Joseph

Before skin incision

(With nurse ,anaesthetic and surgeon)

Confirm all team members have introduced themselves by name and role

Confirm the patient's name, procedure, and where the incision will be made

1)Has antibiotic prophylaxis been given within the last 60 minutes?

Yes

Not applicable

2)Anticipated critical events

To Surgeon:

What are critical on non-routine steps ?

How long will the case take ?

What is the anticipated blood loss?

To anaesthetic:

Are there any patient specific concern?

To Nursing team:

Has Sterility (including indicator result) been confirmed?

Are there equipment issues or any concerns?

3) Is essential imaging displayed?

Yes /Not applicable Name & Signature of Surgeon with Date & Time:

Algerithms

Before patient leaves operating room

(With nurse, anaesthetic and surgeon)

Nurse Verbally Confirms:

The name of the procedure

Completion of the instrument, sponge, needle counts

Specimen labelling (read specimen labels aloud, including patient name)

Whether there are any equipment problems to be addressed

> To surgeon, anaesthetic and nurse:

What are the key concerns for recovery and management of this patient?

Name & signature of Nurse with

PROF.Dr.N.B.GOYAL

DEPT, OF ORTHOPAEDICS

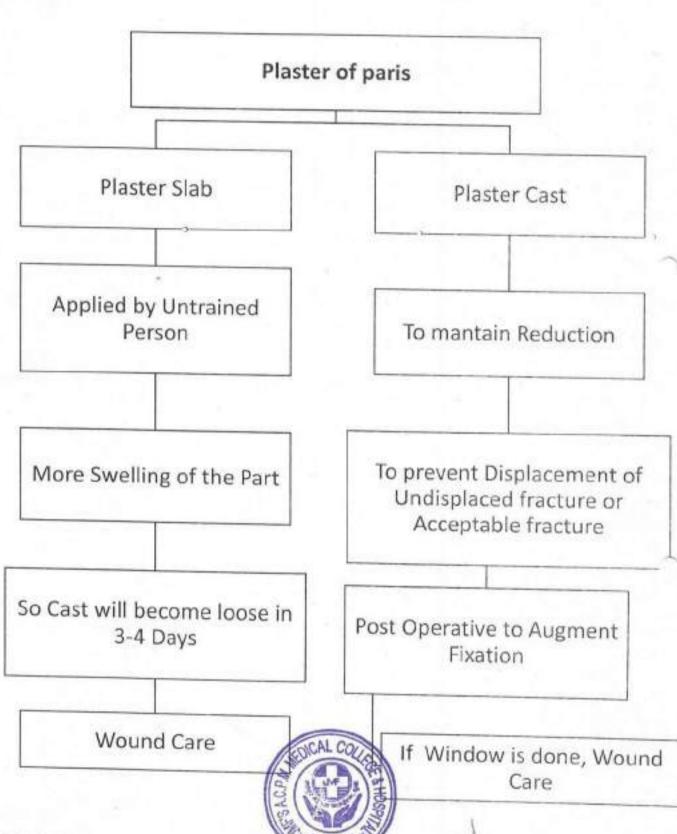


JAWAHAR MEDICAL FOUNDATION'S A.C.P.M. MEDICAL COLLEGE & HOSPITAL

- D Email : demacangagmait.cu
- acpmmcdhule@gmail.com
- O vzebsite : www.jmfacjam.com

- Sakri Read, Ohule 424001 (Maharashtra)
- Ph.No.: 02562 276317,18,19 Mitb. 8686585839
 Ref No.

Date:



PROF.Dr.N.B.GOYAL
DEPT.OF ORTHOPAEDICS

Algo nithmo

Recognition 30/201



JAWAHAR MEDICAL LOUNDATION'S A.C.P.M. MEDICAL COLLEGE 8 HOSPITAL

© Sabri Bead, Dimbe - SZLORT (Paulor/Additi)

O Ca to - Office - SYCHY, 10, to the Codestions

Comments of the comment of the comme

trint in ...

In all procedures, for patients we do following..

Isolation of patient till covid status

Fitness of patient for that procedure.

For minor procedure, Only Diabetes check up

Counselling of the patient about Pro/cons of procedure and Possible results of procedure

Autoclave materials-Implants, Instruments, Drapes etc.

required for pathological examination

Sample if

Painting and draping of part

Anaesthesia
GA / SPINAL/IV REGIONAL/ LOCAL

Under C Arm Monitoring

Surgery Done, Implant used, Body part disposed as per BMW protocols

Post OP. Care

Description of the state of the

PROF.Dr.N.B.GOYAL
DEPT.OF ORTHOPAEDICS

Department of General Surgery, A.C.P.M. Medical College, Dhule

Invites you to

"WALL JOURNAL"

Venue: The White House

Date & Time: 5th Sept, 12:00 noon

By: Hon. Shri Dr. Annasaheb Bhaidas C. Patil



"e-Wall Journal" Inauguration by Hon. Shri Dr. Ashish V. Patil Sir.

DEPARTMENT OF GENERAL SURGERY A.C.P.M. MEDICAL COLLEGE, DHULE

Presents

"WALL JOURNAL"



1ST INAUGURAL ISSUE - SEPTEMBER 5TH, 2017

INDEX

- Data, data everywhere, not a drop of insight to glean?
- Even Handed Future Of Surgery Ambidextrous,
 Serious Gamers With Innate Left Hand Laterality
 - Source: Nayan Agrawal, UCMS & GTB Hospital, New Delhi, India. Published in Indian Journal of Surgery (December 2016)
- New ultra-fast test to determine antibiotic resistance
 Journal Proceedings of the National Academy of Sciences
- New type of MRI scan developed to predict stroke risk
 - Source JACC: Cardiovascular Imaging Volume 10, Issue 7
- Genes that make you friendlier identified
 Times of India, Aug 27, 2017
- New potential breast cancer drug identified
 Source: Times of India, Aug 18, 2017
- 7. Seven Important Patient Engagement Statistics

 By Dr. Neelesh Bhandari
- Robots better than humans at helping with gut surgeries: Study

Times of India, Aug 13, 2017

ACPM Medical College Department of Medicine

Department of medicine presents to you missing word game.

- 1)Acute Respiratory dishess syndrome.
- 2) Von Hipple linday Syndrome.
- 3) Steven Johnson Syndrome.
- 4) Systemic lupus __englimatous
- 5) Malignant neurolephic syndrome.

Date - 30/5/2020

Place- Lecture Hall 2

Time - 11am-1pm

Conducted by- Dr.Manjit Sisode

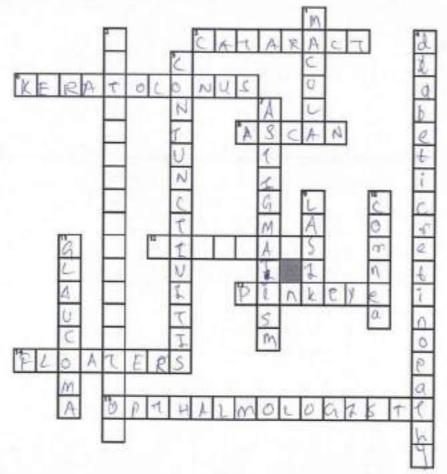
Prof. and HOD

ACPM medical college Dhule

Professor & Head,
Department of General Medicine
A.C.P.M. Medical College, Dhule (M.S.)

Name:	0-	1		
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Ophthalmology Terminology Vroyesh Sabji





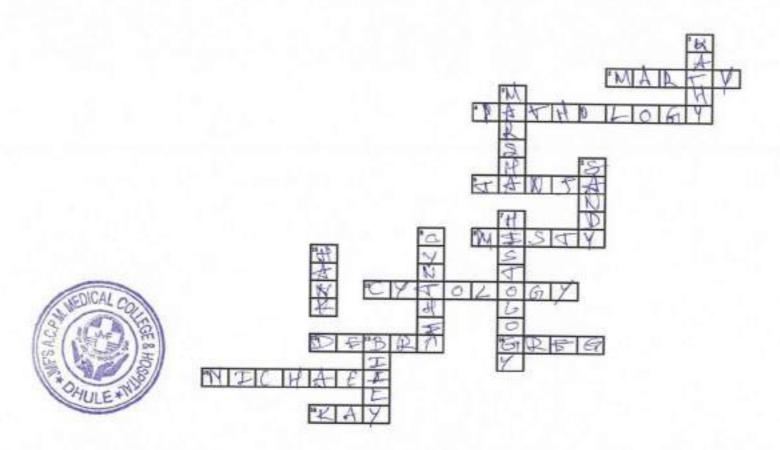
Across

- 3. Opacity or cloudiness of the crystalline lens.
- 6. Thinning and cone-shaped protrusion of the central comea.
- 8. Type of ultrasound that is used for differentiating normal and abnormal eye tissue or for measuring length of eyeball.
- 12. Eyeglasses that are used for near and distance corrections.
- 13. Characterized by discharge, grittiness, redness and swelling: contagious.
- 14. Particles that float in the vitreous.
- 15. Physician specializing in diagnosis and treatment of problems related to eye diseases.

Down

- 1. Small central area of the retina surrounding the fovea.
- 2. Removal of a cloudy lens from the eye.
- 4. Retinal changes caused by long standing diabetes mellitus.
- 5, Inflammation of the conjunctiva.
- 7. Optical defect that prevents formation of a sharp Image focus on the retina.
- 9. Type of refractive surgery that reshapes the cornea to correct for astigmatism, myopia, and hyperopia.
- 10. Transparent front part of the eye that covers the iris, pupil and anterior chamber.
- 44 Nones described to be seen 4 to the

Heramb



Across

- 2. Clinical Support Assistant PRN
- 4. The form of medical science and specialty practice concerned with all aspects of disease.
- 6, 4:30 cm Histotech I
- 9.8:30 Histotech
- 11. The study of the anatomy, physiology, pathology, and chemistry of the cell. 10. Clinical Support Assistant PRN
- 12. Editor/Transcriptionist
- 14. Histotech I Entertainer
- 15. Gross Room Histotech I 16. Keens the Pathologists straight

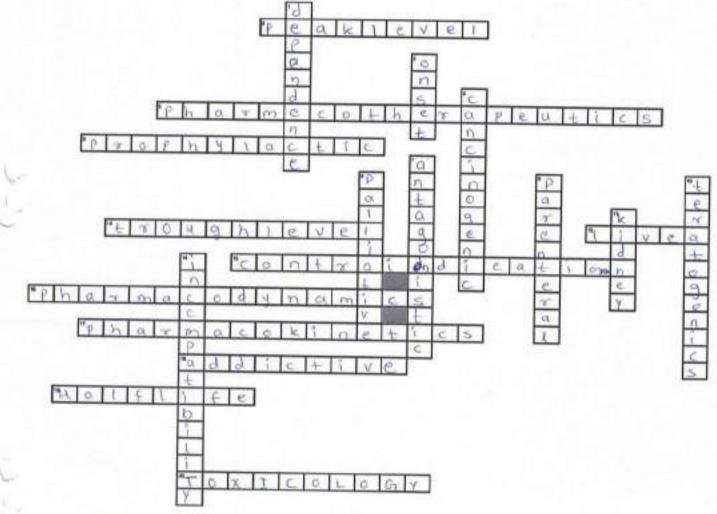
Down

- 1. Histotech II
- 3. 8 am Cytotech
- 5. Cytotech 7 am
- 7. What is the science of cells, tissues and organs?
- 8. Manager of Pathology
- 13. Courier

Name:							
	_	_	_	_		 	

Date: _	6	7	2021	
_			,,,,,	_

Pharmacology crossword Jash Shah



cro

- . highest blood level (two words)
- the use of drugs and the clinical indications for drugs to prevent and treat disease 3. the time it takes for a drug to elicit a therapeutic reponse
- therapy given to prevent an illness during a planned event
- 2. lowest blood level (two words)
- place where metabolism frquently occurs
- 5. any characteristic of the patient especially a disease state that makes the use of 9, route by which a drug is administered iv. im or subcut
- given medication dangerous to the patient
- 5, what the drug does to the body
- 7. study of drugs movementinto, within and out of the body
- it. effect thit occurs when drugs that have similar action and are given together
- the time it takes for one half of the original ammount of a drug to be removed om the body
- the study of poisons and unwanted responses to drugs and other chemicals

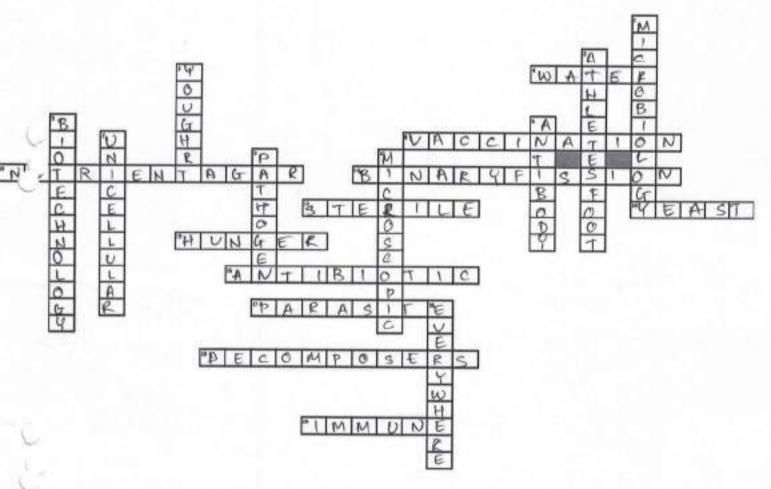
- physiologic or psychological need for a drug.
- 4. cancer causing effect
- 7. drud effects are opposite of each other
- 8. therapy to make the patient as comfortable as possible
- 10. fetal defects due to medication
- 11. main organ for excretion
- 14. drugs cannot be given together



Name:		
1011100		

Snehal Voum

Microbiology



cross

- . A condition needed for the growth of microbes
- . A harmless dose of a disease causing microbe
- 1. A substance which contains food needed for the growth of microbes
- 2. How bacteria reproduce
- 3. Free from microorganisms
- 4. microorganisms used in the brewing and baking industry
- 5. A fungal disease which caused the Great Irish Famine
- 6. A chemical which kills bacteria and fungi but not viruses
- 7. An organism that lives in or on another living thing
- 9. Organisms which feed on the dead remains of living things
- O. Resistant to a disease

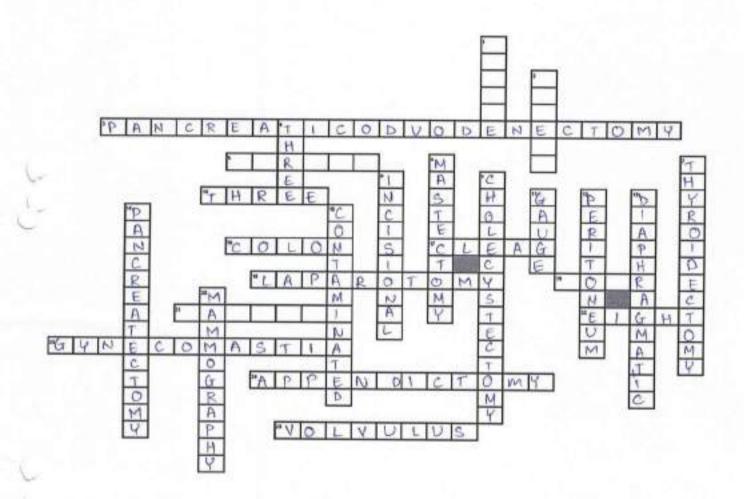
- 1. The study of microorganisms
- 2. a human disease caused by a fungus
- 3. A food made with the help of bacteria
- 5. The use of living things to make a product
- 6. A protein produced by white blood cells in response to an antigen
- 7. Composed of only one cell
- 9. An organism that cause disease
- 10. A term used to describe things which can only be seen by a microscope
- 18. Microorganisms are found here



Name:				
-------	--	--	--	--

Date: 18	1	2019
Shubha	m	Muttha

General Surgery



Cros

- . Whipple procedure
- . Defect in abdominal wall
- O. Number of sections in the colon
- 6. Anal canal is the last portion of this
- 7, Class 1 wound
- Surgical opening of the abdomen into peritoneal cavity
- 9. How many layers of the colon
- 1. Another name for gallstones
- 2. Number of liver segments
- 3. Breast disorder in men
- 4. Removal of the appendix
- 5. Twisting of the bowel

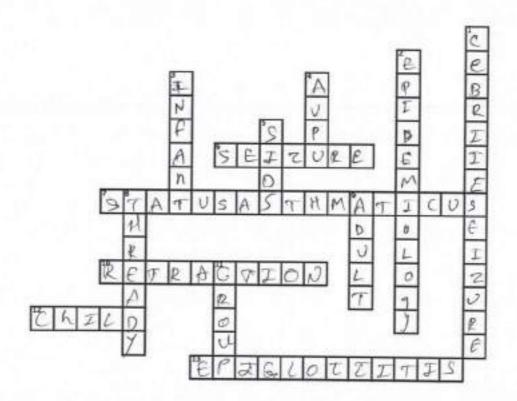
- 1, AKA total mastectomy
- 2. Acquired Hernla
- 4. How many regions of the pancreas
- 6. Removal of the breast
- 7. Removal of the thyroid gland
- 8. Hernia at the site of previous surgery
- 9. Removal of the gallbladder
- 11. What type of needleused on the liver
- 12. Serous membrane that lines abdominal cavity
- 13. Hemia of the diaphragm
- 14. Removal of the pancreas
- 15. Class 3 wound
- 20. Diagnostic breast test



Name:	- 2	
	-	

Voibhav Patil

Pediatrics





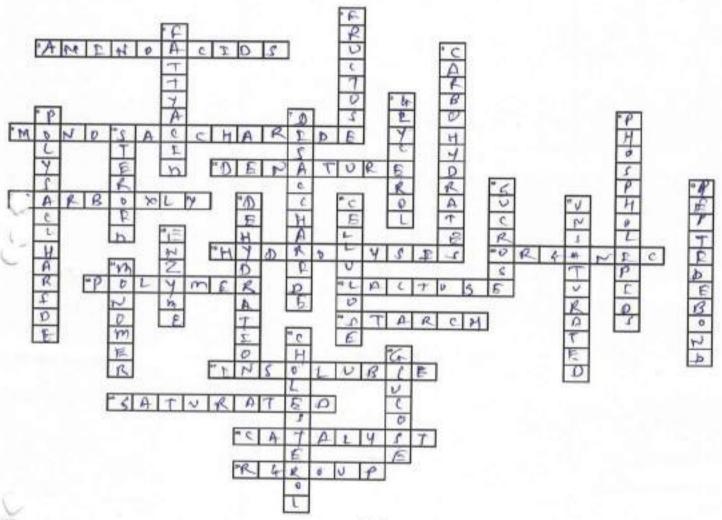
Across

- 6. ABNORMAL ELECTRICAL ACTIVITY IN THE BRAIN CAUSED BY INJURY, DISEASE, FEVER, INFECTION, METABOLIC DISTURBANCE OR DECREASED OXYGEN LEVELS
- 7. POTENTIALLY FATAL EPISODE OF ASTHMA IN WHICH PATIENT DOES NOT RESPOND TO INHALED MEDICATIONS
- 10. VISIBLE SINKING IN OF SOFT TISSUE BETWEEN THE RIBS 4. USED TO DETERMINE THE CHILDS LOC
- 12. ANYONE WHO APPEARS THE AGES OF 1 YEAR AND 12 YEARS

- 1. SEIZURE CAUSED BY AN EXCESSIVELY HIGH FEVER IN A CHILD OR INFANT
- 2. BRANCH OF MEDICINE THAT DEALS WITH THE INCIDENCE AND PRECALENCE OF DISEASE IN POPULATIONS
- 3. ANYONE WHO APPEARS YOUNGER THAN 1
- 5. SUDDEN INFANT DEATH SYNDROME
- 8. PULSE THAT IS BARELY PRECEPTIBLE
- 13. BACTAERIAL INFECTION THAT CAUSES SE RE SWELLING9. ANYONE WHO APPEARS OLDL. THAN 12 OF THE EPIGLOTTIS RESULTING IN RESPIRATORY EATLLINE

Name:	
, 400 mar.	

Biochemistry Crossword Puzzle farashar Kulkan



. Ba

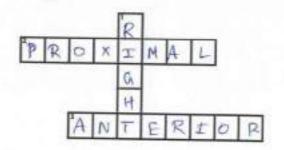
- . Pro Monomera
 - 'uilding Blocks of Carbohydrates
- 1. Morecules Changing Shape Because of Hydrogen Bonds Breaking
- 4. Gives Directionality to a Protein
- 9. The Process in Which H2O is Added to Bresk Bonds
- to. Came From Something Living
- 2. "many" monomers linked together
- 3. A Disaccharide Commonly Known as Milk
- 4. Holds Reserve Energy (Storage)
- 7. Lipids Can't Dirsolve or Are...
- 8. Fats Found in Animals Are...
- 9. Another Name For Enzymes Not Used in Reactions
- o. Differentiates the Different Amino Acids

- t. "Fruit Sugars"
- 2. The Type of Acids Found in Fat
- 4. Their Primary Function is to Provide Energy
- 5. Fets That Come From Animals Contain 1
- 6. Takes the Longest to Break Down
- 7. 2 Sugar Groups Bonded Together
- 8. Important For Cell Membranes
- 10. A Ring Of Fatty Acid
- 12. A Dissecharide Commonly Known as Table Selt
- 13. A Bond Between Amino Acids
- 15. Taking Away H2O
- 16. Also Known As Fiber...
- 17. Fats Found in Plants Are...
- 18. A Type of Protein that Speeds Up Reactions
- 24. Building Blocks of Macromolecules
- 25. The Most Important Steroid For the Body
- 26. Most Common Simple Sugar



Anatonical Positions and Directions

6/7/2021 Shiv kawle







Across

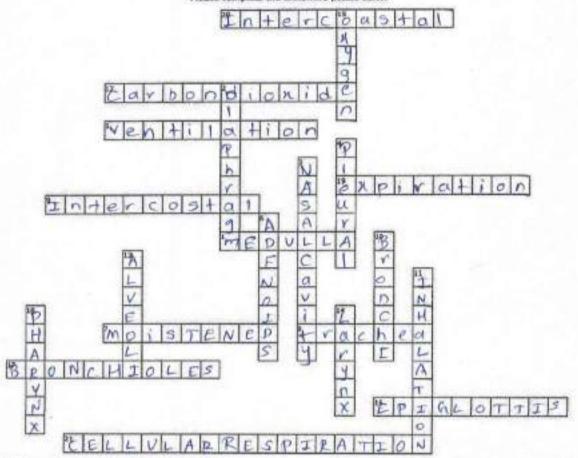
- 2. describes 2 points on the same limb, closer to where it inserts
- 3. front of body (ventral)
- 5. any point further from the midline of the body
- 7. closer to the surface
- 9. further into the body cavities
- 10. left side of the person in anatomical position
- standing upright, feet together, arms at sides, palms forward STANDARD
- 13, back of body (dorsal)

- 1. right side of the person in anatomical position
- 4. any point closer to the midline of the body
- 6. above, or towards the head
- 8. below, or towards the feet
- describe 2 points on the same limb, further away from where it inserts

6171204

The Respiratory System

Please complete the crossword puzzle below



alveoli intercostals bronchi intercostal bronchicles medulla pharynx larynx carbondioxide epiglottis ventilation trachea

inhalation expiration adencids oxygen moistened cellularrespiration nasalcavity disphragm pleural

Across:

- the part of the brain which controls the rate of respiration
 the mechanics of breathing in and out
- 7. air entering the body is warmed, cleaned and 8. what brings air into lungs 9. muscle that rasise the ribs

- 12. the gas which has the major influence on controlling the rate of
- 16. What seals the opening into the respiratory tract during swallowing and prevents the passage of food into the lungs
- 17. numerous small tubes that branch from each bronchus into the
- 19. the ribs and diaphragm return to their former relaxed position in

Down:

- 2. a sheet of muscle which seperates the thoracic and abdominal cavities
- 3. air passes through the
- 4. thin membrane that cover the lungs, separate them from other organs and form a fluid-filled chest cavity 6. the pharynx centains tonsils and
- 10, tubes that branch off from the trachea into the lungs
- the ribs move upwards and outwards during _
 tiny sacs where gases are exchanged
- 14, the part where the vocal cords are found
- 15, the body uses
- 15, the body uses _______ to release energy from food 18, tube which connects the nasal and oral cavities with the trachea

20, rouscle that raises the ribs

21. process in which the energy in glucose is released



A.C.P.M MEDICAL COLLEGE DHULE DEPARTMENT OF MEDICINE CROSS WORD GAME

- 1) DIARRHOEAL EPIDEMIC (vertical)
- 2) PANDEMIC IN 2019 (horizontal)
- 3) SPREAD BY AEDES EGYPTI (horizontal)
- 4) TYPE OF ARTHRITIS (vertical)

18/1/2019 Dipak Gaikwad

13

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0				4				ı
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R				E				1
A				THE IN				•



* dengue *cholera * gout * covid19

Professor & Head,
Department of General Medicine
A.C.P.M. Medical College, Dhule (M.S.)

ACPM Medical College

Department of Medicine

NOTICE

This is to inform all student of batch 2016-17 that dept. of Medicine, ACPMMC Dhule conducting flipped classroom plan.

Details are as follows:

Topic	Neurolept Malignant Syndrome
Time	11am-1pm
Date	12/4/2020
Venue	Lecture hall 2
Batch	2016

Classroom will be conducted by:

1) Dr.Puneet Patil

NOTE: 1)Attendence is compulsory to all students.

Question and answer will be followed by flipped classroom plan.



PROF And HOD

Dept. of Medicine

ACPMM CollegeDhule

Department of General Medicine

A.C.P.M. Medical College, Dhule (M.S.)

Bone Marrow Aspiration and Biopsy.

Presentor –Bhargavi Gawhankar Roll no- 29.



INTRODUCTION

Bone marrow aspiration is the process of removing the liquid part of the bone marrow by suction through a needle to diagnose and follow the progress of various conditions like anemia, cancer and also, for bone marrow transplant.

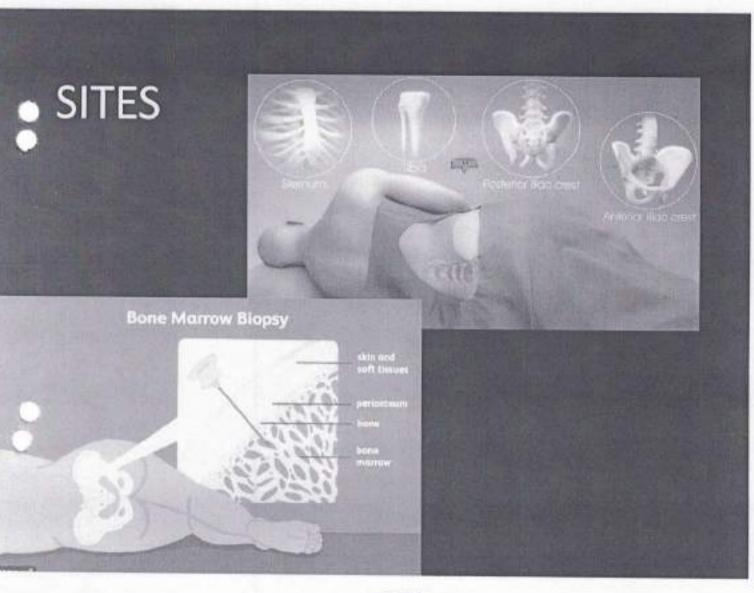
Bone marrow biopsy takes out a larger piece of solid bone marrow by coring out the sample with a saw (or trephine) that cuts a small amount of bone tissue as well with it. This provides a more complete examination of the bone marrow.



INDICATIONS.

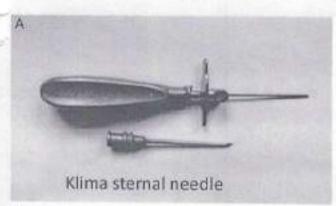
- 1. Anemia- Microcytic, macrocytic, normocytic, aplastic.
- Non hodgkin's lymphoma, Hodgkin's lymphoma and metastatic carcinoma
- 3. Stromal changes like fibrosis, necrosis, gelatinous marrow transformation.
- 1. Hyoplastic myeloplastic syndrome
- 5. Hypoplastic leukemia
- 5. Hairy cell leukemia
- 7. Multiple myloma
- 3. Pyrexia
- . Amyloidosis
- 10. Metabolic bone disorders
- L1.Paraproteinemia.
- L2. Iron assessment.







INSTRUMENTS



В



Salah bone marrow aspiration needle



C

Watherfield needle -iliac crest



Jamshidi needle for aspiration and biopsy



Aspiration VS Biopsy

- Aspiration gives better cytological details.
- Ideal for cytogenetics and molecular genetics.
- · Dry tap in fibrosis.
- Less painful.
- Helpful in Iron deficiency anemia, megaloblastic anemia and acute leukemia.

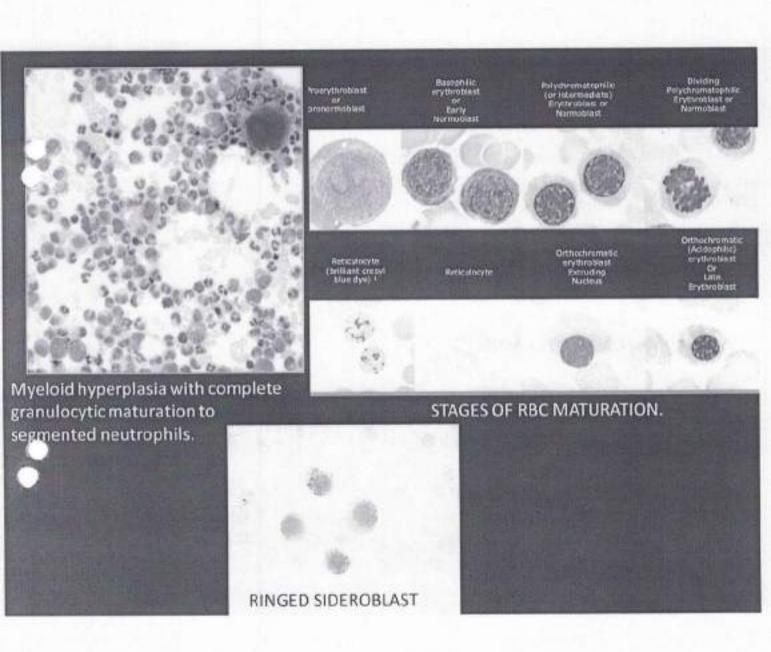
- Biopsy gives better topographical details, cellularity and infilteration.
- · Can be used for both.
- Essential for diagnosis in dry tap.
- · More painful
- Helpful for Aplastic anemia, lymphoma, metastatic carcinoma and neoplasms.



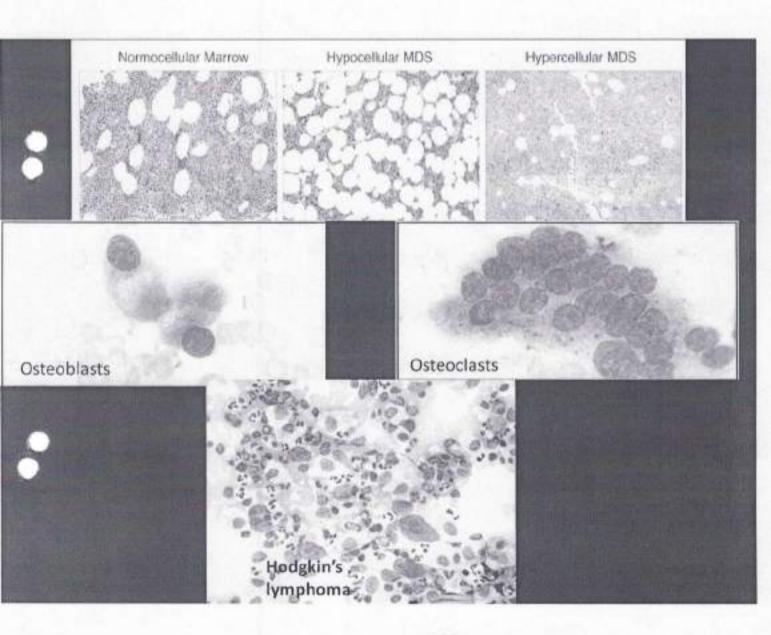
Report Interpretation.

- Determine cellularity identify megakaryocytes, their morphology and maturation stages and abnormalities.
- 2. Determine myloid: erythroid ratio.
- Perform differential count for categories erythroid, myloid, lymphoid, plasma cell and others noting their morphological abnormalities.
- . Look for clumps of abnormal cells.
- Identify macrophages.
- 6.Look for areas of bone marrow necrosis.
- 7. Assess the iron content.

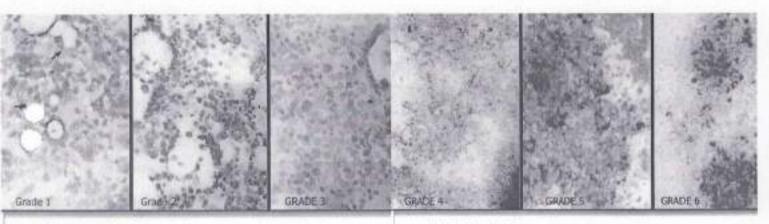










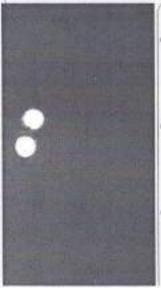


Grading for iron on bone marrow aspirate:

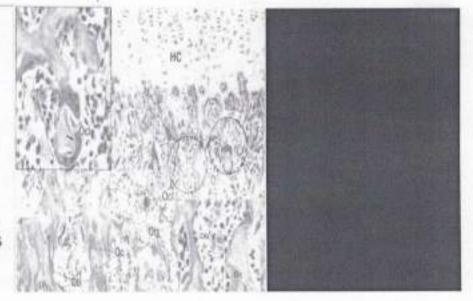
- Small may particles (sad webbe in retriebung calls vering an oil objective Small, sparse may particles in noticeture calls, wealth at tower pavine. Humanians small particles in retrodum calls.

fron grading.

- 4- Larger particles with a tendency to aggregate into clumps
- 1+ Dense, large clumps
- 5+ Very large cumps and extracefular ann



- Osteocytes: Seen in bony lacunae.
- Osteoblasts: Seen lining the trabeculae.
- Osteoclasts: Seen in howship's lacunae





THANK YOU



Hamilton Anxiety Rating Scale (HAM-A)

Reference: Hamilton M.The assessment of anxiety states by rating. Br J Med Psychol 1959; 32:50-55.

Rating Clinician-rated

Administration time 10-15 minutes

Main purpose To assess the severity of symptoms of anxiety

Population Adults, adolescents and children

Commentary

The HAM-A was one of the first rating scales developed to measure the severity of anxiety symptoms, and is still widely used today in both clinical and research settings. The scale consists of 14 items, each defined by a series of symptoms, and measures both psychic anxiety (mental agitation and psychological distress) and somatic anxiety (physical complaints related to anxiety). Although the HAM-A remains widely used as an outcome measure in clinical trials, it has been criticized for its sometimes poor ability to discriminate between anxiolytic and antidepressent effects, and somatic anxiety versus somatic side effects. The HAM-A does not provide any standardized probe questions. Despite this, the reported levels of interrater reliability for the scale appear to be acceptable.

Scoring

Each item is scored on a scale of 0 (not present) to 4 (severe), with a total score range of 0–56, where <17 indicates mild severity, 18–24 mild to moderate severity and 25–30 moderate to severe.

Versions

The scale has been translated into: Cantonese for China, French and Spanish. An IVR version of the scale is available from Healthcare Technology Systems.

Additional references

Maier W, Buller R, Philipp M, Heuser I. The Hamilton Anxiety Scale: reliability, validity and sensitivity to change in anxiety and depressive disorders. J Affect Disord 1988;14(1):61–8.

Borkovec T and Costello E. Efficacy of applied relaxation and cognitive behavioral therapy in the treatment of generalized anxiety disorder. J Clin Consult Psychol 1993; 61(4):611–19

Address for correspondence

The HAM-A is in the public domain.



Hamilton Anxiety Rating Scale (HAM-A)

Balow is a list of phrases that describe certain feeling that people have. Rate the patients by finding the answer which best describes the extent to which he/she has these conditions. Select one of the five responses for each of the fourteen questions.

0 =	Not present.	I = Mild,	2 = Modera	te.	3 = Severe,		4 = Very severe	
1	Anxious mood	0000	D (4)		Somatic (sensory)	0 1 2	I 4	
We	orries, anticipation of the wor	st, fearful anticipation		Tinnitus, blurring of vision, hot and cold flushes, feelings of weaks pricking sensation.				
2	Tension		0		Cardiovascular symptoms	0 1 2	3 4	
Feelings of tension, fatigability, startle response, moved to tears easily, trembling feelings of restlessness, inability to relax.				Tachycardia, palpitations, pain in chest, throbbing of vessels, fainting feelings, missing best.				
3	Fears	O D D D	D 4	0	Respiratory symptoms		3 4	
Of dark, of strangers, of being left alone, of animals, of traffic, of crowds.				res	ssure or constriction in chest, the	oking feelings, o	ighing, dyspnea	
4	Insomnia	0 1 2 1	DA I	1	Gastrointestinal symptoms	0 11 2	34	
Difficulty in falling asleep, broken sleep, unsatisfying sleep and fatigue on waking, dreams, nightmanes, night terrors.				Difficulty in swallowing, wind abdominal pain, burning sentations, abdominal fullness, rauses, vomiting, borborygmi, looseness of bowels, loss of weight, consupation.				
5	Intellectual	012		2	Genitourinary symptoms	[0] [T] [Z]	ITT (41)	
Di	fliculty in concentration, poor	memory		Frequency of micturition, urgency of micturition, when				
4	Depressed mood	0 1 2 (3] [4]	menorrhagia, development of frigidity, premature ejaculati			aculation, loss of	
	ss of interest, lack of pleasure	in habbies, depressio	n, early waking,	ю	fo, impotence.			
du	urnal swing.			13	Autonomic symptoms	0 1 2	114	
7	Somatic (muscular)				mouth, flushing, pallor, tendency	to sweat, gide	liness, tension	
	ins and aches, twitching, stiffs		grinding of	100	dache, raising of heir.			
009	eth, unsteady voice, increased	muscular tone.		14	Behavior at interview	0 1 2	1 4	
				Fidj stri	geting, restlessness or pacing, tre- lined face, sighing or rapid respira	mor of hards, i stion, facial pall	lurrowed brow, or, swallowing.	



रुग्ण आरोग्य प्रश्नावली - 9 (PHQ-9)

मागील २ आठवड्यांच्या काळात, आपन्यांना चालील पैकी कोण्ड्याही समस्येमुळे कितीयेळा वास झाला आहे ? (अपने उत्तर ४) अभी कृष करून छा।	अजियात गाही	अनेक दिवस	अध्योद्धा अधिक दिवस	जयळपार प्रत्येक दिवशी
1. गोही करण्यान थोडीशी रुचि किंवा आलंद	0	1	2	3
2. हताश, उद्दीग्गला, किंवा निराश बाटणे	0.	1	2	3
3. झीप लागण्यात किंवा झीपलेले शहण्यात समस्या, किंवा खूप झीप येणे	0	+	2	3
4. थकलेले किया थोडी ऊर्जा असल्याचे वाटले	0	1	2	3
5. भूक मंदायणे किया अति खाणे	0	1	2	3
6. स्वतः बहुत वाईट वाटणं — किंवा आपण अपयशी आऱ्येत किंवा आपण स्वतःचा किंवा आपल्या कुटुंबाचा अपेक्षासंग केला आहे असे वाटणे	0	1	2	3
7. वर्तमानपत्र वाचणे किया टेलिव्हिजन पाहणे यासारख्या गोशिवर लक्ष एकाच करण्यास जस होणे	0	- 1	2	3
8. हमलचान किंवा बोलणे इतके संथ होते की इतर सोकांच्या लक्षात येणे? किंवा याच्या उलट — इतके चिंताकात किंवा अस्वस्थ होणे की आपण सामाल्यपेक्षा बरेच अधिक इक्डे-तिकडे फिरत आहात	0	1	2	3
9. आपण मेलो असले तर चांगले झाले असते किया स्वतःला काही प्रकाराने जखमी करन घेण्याचे विचार	0	1	2	3
FOR OFFICE CODE	og <u>0</u> +		+	

आपण कोणत्याही समस्येयर खूग केल असेल तर, आपले काम करणे, घरी यस्तुंची काळजी घेणे, किंवा इतर लोकांसीयल वावरणे यामधे या समस्यांनी आपल्याला किती अवघड झाले ?

अजियात अयघड	बोडेफार	खूप	अत्यंत
झाले नाही	अवषड	अवचड	अवघड

Drs. Robert L. Spitzer, Janet B.W. Williams, Kurt Kroonko आणि सहकारी यांच्यदारे Pfizer Inc. पांच्याकडून प्राप्त तैक्षणिक अनुदानातृत् विकसित. प्रतिनिधी, लाघांतर,ककाशन करणे. आणि याटप ग्राप्ताठी परचनगीची अनुस्थकता नाही.

PATIENT HEALTH QUESTIONNAIRE (PHQ-9)

Ш#;		DATE		
Over the last 2 weeks, how often have you been				
bothered by any of the following problems? (use "\" to indicate your answer)	Not at all	Several days	More than half the days	Nearly every day
Little interest or pleasure in doing things	0	1	2	3
2. Feeling down, depressed, or hopeless	0	1	2	3
Trouble falling or staying asleep, or sleeping too much	0	1	2	3
4. Feeling tired or having little energy	0	1	2	3
5. Poor appetite or overeating	0	1	2	3
Feeling bad about yourself—or that you are a failure or have let yourself or your family down	0	1	2	3
7. Trouble concentrating on things, such as reading the newspaper or watching television	0	1	2	3
 Moving or speaking so slowly that other people could have noticed. Or the opposite —being so figety or restless that you have been moving around a lot more than usual 	0	1	2	3
Thoughts that you would be better off dead, or of hurting yourself	0	1	2	3
	add columns		•	
(Healthcare professional: For interpretation of TOT) please refer to accompanying scoring card).	AL, TOTAL:			
10. If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?	DICAL CO	Somew Very di	icult at all that difficult fficult ely difficult	

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PHQ-9 Patient Depression Questionnaire

For initial diagnosis:

- Patient completes PHQ-9 Quick Depression Assessment.

Consider Major Depressive Disorder

Consider Other Depressive Disorder

if there are 2-4 √s in the shaded section (one of which corresponds to Question #1 or #2).

Note: Since the questionnaire relies on patient self-report, all responses should be verified by the clinician, and a definitive diagnosis is made on clinical grounds taking into account how well the patient understood the questionnaire, as well as other relevant information from the patient,

Diagnoses of Major Depressive Disorder or Other Depressive Disorder also require impairment of social, occupational, or other important areas of functioning (Question #10) and ruling out normal bereavement, a history of a Manic Episode (Bipolar Disorder), and a physical disorder, medication, or other drug as the biological cause of the depressive symptoms.

To monitor severity over time for newly diagnosed patients or patients in current treatment for depression:

- Patients may complete questionnaires at baseline and at regular intervals (eg, every 2 weeks) at home and being them in at their next appointment for scoring or they may complete the questionnaire during each scheduled appointment.
- Add up √s by column. For every √: Several days = 1 More than half the days = 2 Nearly every day = 3
- 3. Add together column scores to get a TOTAL score.
- 4. Refer to the accompanying PHQ-9 Seoring Box to interpret the TOTAL score.
- Results may be included in patient files to assist you in setting up a treatment goal, determining degree of response, as well as guiding treatment intervention.

Scoring: add up all checked boxes on PHQ-9

For every ✓ Not at all = 0; Several days = 1; More than half the days = 2; Nearly every day = 3

Interpretation of Total Score

Total Score	Depression Severity
1-4	Minimal depression
5-9	Mild depression
10-14	Moderate depression
15-19	Moderately severe depression
20-27	Severe depression

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A2662B 10-04-2005



ACPM MEDICAL COLLEGE, DHULE e-learning resources used by students

5206571	and the same and a supplication	Full text access		Validity period	Whether remote access		Web link of remote access	
Year	Name of service with membership/registration	Yes	No	validity period	Yes	No	Web link to relied access	
2020-21	MUHS open source digital library	Yes	n	2020 onwards	Yes	.66	https://www.muhs.ac.in/dl_main.aspx	
2020-21	e-Shodhsindhu	Yes	377	29.04.2021 onwards	Yes	411	https://ess.inflibnet.ac.in/	
2020-21	SWAYAM	Yes	5***	18,04,2021 onwards	Yes	***	https://nptel.ac.in/LocalChapter/	
2020-21	Discipline-specific databases PUBMED	Yes	***	19.04,2021 onwards	Yes	C#+45	https://www.ncbi.nlm.nih.gov/myncbi/	
2020-21	DVI. Medical online Database	Yes		19.04,2021 onwards	Yes	***	https://www.medscape.com/viewarticle/451577_3	
2020-21	Indian Journal of Microbiology	Yes	744	19.04.2021 onwards	Yes	***	https://scholar.google.co.in/scholar?as_ylo=2021&q=indian+journa +of=microbiology&hl=en&as_sd=0.5&as_vis=1	
2020-21	Indian Journal of Physical Medicine & Rehabilitation	Yes		19.04.2021 onwards	Yes	in	https://www.ijopmr.com/journalDetails/IJOPMR	
2015-16	The Journal of Reproductive Medicine	Yes	+++	02.08.2016 onwards	Yes	***	https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4971550/	
2015-16	Chest	Yes		27.07.2016 onwards	Yes		https://journal.chestnet.org/issues#decade=loi_decade_201	





ACPM MEDICAL COLLEGE DHULE e- journals and e- books available at central library for students

3.N.	SUBJECT	NAMEOFJOURNAL	Year	Publicatin	INDIAN FOREIGN	WEB LINK OF REMOTE ACCESS
- 1	Demetology	Dermatology Online Journal	2021	DOI	Indian	https://escholarship.org/uc/item/9w82x7z1
2	Medicine	AACE Clinical Case Report	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/aace-clinical-case- reports?dgcid=5TMJ 1615988260 STMJIN QTR&utm source=WEB&utm medium=BAN
3	Pharmacology	Acta Pharmaceutica Sinica B	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/acta-pharmaceutica-sinica-b/vol/11/issue/1
	Dematology	Journal of med-sur dermatology & venered	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/actas-dermo-sifiliograficas/voi/112/issue/5
5	Pathology	Blood	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/blood/vol/137/issue/19
6	Dematology	Annales de Dermat et Vénéréologie - FMC	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/annales-de-dermatologie-et-de-venereologie- fmc/vol/1/issue/5
_	Anesthesia	British Journal of Anaesthesia	2021	Elsvier	FOREIGN	https://bjanaesthesia.org/current
	Pediatrics	Paediatrics and Child Health	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/paediatrics-and-child-health
9	Surgery	Eur Jour of Vascular & Endovasc Surgery	2021	Elsvier	FOREIGN	https://www.eives.com/current
10	Microbiology	Indian Jour of Medical Microbiology	2021	Elsvier	Indian	https://www.sciencedirect.com/journal/indian-journal-of-medical-microbiology
11	FMT	Current Research in Texicology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/current-research-in-toxicology/vol/1/suppl/C
_	The second secon	ic African Jour of Emergency Medicine	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/african-journal-of-emergency: medicine/vol/11/issue/1
	Pathology	American Journal of Clinical Pathology	2021	ACA	FOREIGN	https://aip.amipathol.org/
	Pathology	Archives of Pathology & Laboratory Medici	2021	Allen Press	FOREIGN	https://meridian.allenpress.com/aplm/issue/145/1
-	E.N.T	Annals of Otology, Rhinology & Laryngolo	2021	Sage pub	FOREIGN	https://journals.sagepub.com/ioc/aora/current
_	Orthpaedics	European Spine Journal	2021	Springer	FOREIGN	https://link.springer.com/journal/586/volumes-and-issues
	Medicine	European Respiratory Journal	2021	Erj	FOREIGN	https://erj.ersjournals.com/content/57/5?current-issue=y
18	Radiology	British Journal of Radiology	2021	Rsna	FOREIGN	https://www.birpublications.org/journal/bjr
19	Pathology	Indian Journal of Hernat & Blood Transfusion	2021	Springer	Indian	https://www.springer.com/journal/12288
_	E.N.T	Indian Jou of Otolar - Head & Neck Surgery	2021	Springer	Indian	https://www.springer.com/journal/12070
-	Opthalmology	Journal of Current Glaucoma Practice	2021	Jotjp	FOREIGN	https://www.jocgp.com/journalDetails/JOCGP
_	Orthpaedics	Indian Journal of Orthopedics	2021	isafog	Indian	https://www.springer.com/journal/43465
عدد	Orthpaedics	Journal of Foot & Ankle Surgery	2021	Springer	FOREIGN	https://www.jfasap.com/journalDetails/JFASAP
	Anesthesia	Indian Journ of Anesthesia & Analgesia	2021	Rfppl		https://rfppl.co.in/about_journal.php%jid=24
_	Surgery	Indian Journal of Surgery	2021	Springer	Indian	https://www.springer.com/journal/12262
26	Biochemistry	Indian Journal of Clinical Biochemistry	2021	Springer	Indian	https://www.springer.com/journal/1229)

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	7 E.N.T	Annals of Otology Rhinology & Laryngology	2021	Sage pub	Indian	https://journals.sagepub.com/home/aor
2	Orthpaedics	The Bone & Joint Journal	2021	BJJ	Indian	https://anline.boneandjoint.org.uk/loi/bjj
25	Medicine	Chest Journal	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/chest
36	Surgery	Journal of Medical Mycology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/science/article/abs/pii/S1156523321000263
_	Pharmacology	Asian Journal of Pharmaceutical Sciences	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/asian-journal-of-pharmaceutical- sciences/vol/16/issue/1
	Surgery	Asian Journal of Surgery	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/asian-journal-of-surgery
33	RADIOLOGY	Advances in Radiation Oncology	2021	Elsvier	FOREIGN	https://www.advancesradonc.org/ssue/52452-1094(21)x0002-4
34	Medicine	American Journal of Medicine Open	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/american-journal-of-medicine-open/
35	Opthalmology	American Journal of Ophthalmology Case Reports	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/american-journal-of-ophthalmology-case- reports/vol/22/suppl/C
_	Medicine	American Journal of Preventive Cardiology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/american-journal-of-preventive- cardiology/vol/6/suppl/C
	Dematology	Anais Brasileiros de Dermatologia	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/anais-brasileiros-de-dermatologia/
38	Pediatrics	Anales de Pediatria (English Edition)	2021	Elsvier	FOREIGN	https://www.aeped.es/anales-pediatria
-	Medicine	Annals of Medicine and Surgery	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/annals-of-medicine-and-surgery
40	Orthpaedics	Arthroplasty Today	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/arthroplasty-today/
-	Orthpaedics	Arthroscopy, Sports Medicine, and Rehabilitation	2021	Elsvier	FOREIGN	https://arthroscopysportsmedicineandrehabilitation.org/
42	Orthpaedics	Arthroscopy Techniques	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/arthroscopy-techniques
	Pharmacology	Asian Journal of Pharmaceutical Sciences	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/asian-journal-of-pharmaceutical-sciences
PRODUCE	Urology	Asian Journal of Urology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/asian-journal-of-urology
45	Nursing	Asian Nursing Research	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/asian-nursing-research
46	Biochemistry	Biochemistry and Biophysics Reports	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/biochemistry-and-biophysics-reports
_	E.N.T	Brazilian Journal of Otorhinolaryngology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/brazilian-journal-of-otorbinolaryngology
48	Surgery	Burns Open	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/burns-open
	Surgery	Cancer Treatment and Research Communications	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/cancer-treatment-and-research-communications
_	Medicine	Canadian Journal of Cardiology	2021	Elsvier	FOREIGN	https://www.onlinecic.ca/
51	Medicine	Canadian Cardiovascular Society	2021	Elsvier	FOREIGN	https://ccs.ca/
52	viediche	Brain and Spine	2021	Elsvier	FOREIGN	https://www.elsevier.com/journals/brain-and-spine/2772-5294/open-access-journal
53	nesthesia.	Brazilian Journal of Anesthesiology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/brazilian-journal-of-anesthesiology-english-edition

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54	E.N.T	Brazilian Journal of Otorhinolaryngology	2021	Elsvier	FOREIGN	hereas / house and asset for the state of th
55	surgery	Burns Open	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/brazillen-journal-of-oterhinolaryngology
	Surgery	Cancer Treatment and Research Communications	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/burns-open
57	Microbiology	Carrent Research in Immunology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/cancer-treatment-and-research-communications https://www.sciencedirect.com/journal/current-research-in-immunology
	Physiology	Current Research in Physiology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/current-research-in-physiology
_	FMT	Current Research in Toxicology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/current-research-in-toxicology
_	Medicine	EBioMedicine	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/ebiomedicine
61	Medicine	EClinicalMedicine	2021	Elsvier	FOREIGN	https://www.thelancet.com/journals/eclinm/home
62	Surgery	European Journal of Cancer	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/european-journal-of-cancer-supplements
63	Obst & Gynecolo	European Journal of Obstetrics & Gynecology and Reproductive Biology: X	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/european-journal-of-obstetrics-and-gynecology-an- reproductive-biology-x
64	Radiology	European Journal of Radiology Open	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/european-journal-of-radiology-open
65	Urology	European Urology Open Science	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/european-urology-open-science
66	Orthpaedics	Foot & Ankle Surgery: Techniques, Reports & Cases	2021	Elsvier	FOREIGN	https://www.elsevier.com/journals/foot-&, ankle-surgery-techniques, reports-&- cases%20/2667-3967/open-access-journal
67	FMT	Forensic Science International: Digital Investigation	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/forensic-science-international-digital-investigation/
_	FMT	Forensic Science International: Reports	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/forensic-science-international-reports
minutes and		Global Epidemiology	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/global-epidemiology
70		Global Pediatries	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/global-pediatrics/
$\overline{}$	Pathology	Hematology, Transfusion and Cell Therapy	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/hematology-transfusion-and-cell-therapy
72	Microbiology	Human Microbiome Journal	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/human-microbiome-journal
_		The Journal of Microbiological Methods	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/journal-of-microbiological-methods
14	Pathology	Human Pathology: Case Reports	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/human-pathology-case-reports/
_		IHJ Cardiovascular Case Reports	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/lhj-cardiovascular-case-reports-cycr
16 1	Medicine	Indian Heart Journal	2021	Elsvier	Indian	https://www.sciencedirect.com/journal/Indian-heart-journal
-		Infectious Medicine	2021	Elsvier	FOREIGN	https://www.elsevier.com/journals/infectious-diseases/2772-431X/open-access-journal
78 1	Medicine	Integrative Medicine Research	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/integrative-medicine-research

1	79 Physiology	Indian Pacing and Electrophysiology Journal	2021	Elsvier	FOREIGN	https://www.sciencedicon.com/less-state
8	80 Medicine	Infection Prevention in Practice	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/indian-pacing-and-electrophysiology-journal
_	11 Medicine	Infectious Medicine	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/infection-prevention-in-practice/vol/3/issue/3
_	2 Medicine	Intelligence-Based Medicine	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/informatics-in-medicine-unlocked
_	3 Surgery	Interdisciplinary Neurosurgery	2021	Elsvier	FOREIGN	1011032//www.sciencedirect.com/journal/intelligence-Based-Medicine
9	4 Dental	International Dental Journal	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/interdisciplinary-neurosurgery
85	S Microbiology	International Journal for Parasitology: Drugs and Drug Sesistance		1000000	Function	https://www.sciencedirect.com/journal/international-dental-journal https://www.sciencedirect.com/journal/international-journal-for-parasitology-drugs-and-drug-resistance
			2021	Elsvier	FOREIGN	drug-resistance
86	6 Microbiology	International Journal for Parasitology: Parasites and Wildlife International Journal of Africa Nursing Sciences	2021	Elswier	FOREIGN	https://www.sciencedirect.com/journal/international-ipumal-for-parasitology-parasitos-and
87	7 Microbiology		2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/international-journal-of-africa-nursing-sciences
88	Medicina	International Journal of Cardiology: Cardiovascular Risk & Prevention International Journal of Cardiology	2021	Elsvier	FOREIGN	https://www.elsevier.com/journals/international-journal-of-cardiology-cardiovascular-risk- and-prevention/2772-4875/open-access-journal
89	Medicine	Congenital Heart Disease	2021	Elsvier	FOREIGN	https://www.sciencedirect.com/journal/international-journal-of-cardiology-congenital-hear disease
90	Medicine	International Journal of Cardiology: Hypertension	2021	Elsvier	FOREIGN	
91	Medicine	International Journal of Infectious	1041	E-STATES.	FUREIGN	https://www.sciencedirect.com/journal/international-journal-of-cardiology-hypertension
24	wearing	Diseases	2021	Elsvier	FOREIGN	https://www.journals.elsevier.com/international-journal-of-infectious-diseases/
92	Microbiology	International Journal of Medical Microbiology	2021	Elsvier	FOREIGN	
93	Nursing	International Journal of Nursing Sciences	2021	Elsvier	I Description (VV)	https://www.sciencedirect.com/journal/international-journal-of-medical-microbiology https://www.sciencedirect.com/journal/international-journal-of-nursing-sciences

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