



# **"Workshops on Training of Examiners for OSPE, OSCE & TOACS"**

## FACILITATORS :

Prof. Shaheena Manzoor (IPH, Lahore)

Prof. Mussarat Ramzan (WMC, Wah)

Dr. Syed Hasan Shoaib (RMC, Rawalpindi)

## **ATTENDANCE SHEET**

| Sr  | Institutions  | Name of the Faculty Member    | Designation                          |  | Signature          |
|-----|---|-------------------------------|--------------------------------------|--|--------------------|
| 1.  | Allama Iqbal Medical College, Lahore                            | DR. NAHEED HUMAYUN SHEIKH     | PROFESSOR & HEAD                     |  |                    |
| 2.  | Nishtar Medical College, Multan                                 | Khalid Masood                 | Associate Professor                  |  | Khalid Masood      |
| 3.  | Punjab Medical College, Faisalabad                              | Larida Manzoor                | Asst. Prof.                          |  | Larida             |
| 4.  | Quaid-e-Azam Medical College, Bahawalpur                        | IJAZ AHMED SHAH BUKHARI       | PROFESSOR                            |  |                    |
| 5.  | Rawalpindi Medical College, Rawalpindi                          | ABIDA SULTANA SHAHEENA MANZOR | ASSIST. PROFESSOR                    |  |                    |
| 6.  | Services Institute of Medical Sciences, Lahore.                 |                               | Professor                            |  |                    |
| 7.  | Sheikh Zayed Medical College, Rahim Yar Khan                    | Dr. Hafiz Muhammad Yaq        | Associate Prof.                      |  | Hafiz Muhammad Yaq |
| 8.  | CMH Lahore Medical College, Lahore.                             |                               |                                      |  |                    |
| 9.  | Lahore Medical & Dental College, Lahore                         | Dr. Afzal Arif                | Asst. Professor                      |  | Afzal Arif         |
| 10. | Wah Medical College, Wah Cantt                                  | Dr. Mussarat Ramzan           | Prof & HOD                           |  | Mussarat Ramzan    |
| 11. | Fatima Memorial Hospital College of Medicine & Dentistry Lahore | Dr. Amanullah Khan            | Prof & Head                          |  | Amanullah Khan     |
| 12. | College of Medicine & Dentistry, University of Lahore, Lahore.  | IQBAL AKHTAR KHAN             | PROFESSOR                            |  | Iqbal Akhtar Khan  |
| 13. | Faisalabad Medical College, Faisalabad                          | DR ZAHID MASOOD               | Associate Professor                  |  | Zahid Masood       |
| 14. | Independent Medical College, Faisalabad                         | DR. ABDUL SATTAR              | Assistant Professor - or. I.M.C. FBS |  | Abdul Sattar       |
| 15. | Sargodha Medical College, Sargodha.                             | Dr. Mohammad Arif Saad        | Associate Professor                  |  | Mohammad Arif Saad |



### **Format (Practical Examination / OSPE)**

# MBBS Third Professional Examination

# COMMUNITY MEDICINE

## Component - I

**House Hold Survey:**

1. 10 houses.
2. 05 marks (External)

## Component – II

**Research**

1. Mandatory - Group Work (5-6 students)  
10 marks (Internal)
2. Individual viva.

### Component – III

|                              |           |  |
|------------------------------|-----------|--|
| <b>Journal</b><br>(Internal) | <b>A.</b> | Field Visit journal of 10 visits.      |
|                              |           | Defined Population/Area.               |
|                              |           | 05 Marks (Internal)                    |
|                              | <b>B.</b> | Journal of Press Cuttings.             |
|                              |           | 10 cuttings                            |
|                              |           | 5 marks                                |
|                              |           | Critical appraisal - different topics. |
|                              |           | Total 10 marks (Internal)              |

### Component – IV

|                        |   |  |
|------------------------|---|--|
| OSPE                   | - | 40 Marks   |
|                        |   | 1. Graph Interpretation.   |
|                        |   | 2. Calculation.  |
|                        |   | 3. Specimen Identification.  |
| Marks for each station |   | 4  |
| Total Stations         |   | 10 non-observed / non-interactive (strictly according to TOS provided) |
| Time allocated         |   | 40 minutes (4 minutes at each station)                                 |

### Component – V

Viva Voce

70 Marks

External – 35  
Internal – 35

# MBBS Third Professional Examination

## COMMUNITY MEDICINE

### Model Questions of OSPE

Total No. of Stations = 10

Total Marks = 40 (4 Marks for each spot / station)

Time = 40 minutes (4 minutes at one station)

#### NUTRITION

Q1.

- a. Calculate the BMI
- b. Give its interpretation.

Key: a

$$\text{BMI} = \frac{\text{Weight in Kg}}{(\text{Height in meter})^2}$$

| INTERPRETATION  | BMI         |
|-----------------|-------------|
| Under weight    | < 18.5      |
| Normal range    | 18.5 – 24.9 |
| Over weight     | ≥ 25        |
| Pre-obese       | 25 – 29.9   |
| Obese class I   | 30 – 34.9   |
| Obese class II  | 35 – 39.9   |
| Obese class III | ≥ 40        |

Key: b

Interpret BMI on the basis of this scale.

Weighting: a. 2 b.1

Reference: Preventive & Social Medicine (K. Park)

## **PUBLIC HEALTH & HEALTH SYSTEM / PHC**

**Q2. POF hospital, Wah is 600 bedded. On an average 500 beds remain occupied throughout the year; calculate bed occupancy rate of this hospital.**

**Key: 2**

Bed occupancy rate

$$= \frac{500 \times 365}{600 \times 365} \times 100$$

$$= 83.33\%$$

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## **IMMUNOLOGY**

**Q.3 Vaccines of EPI are placed in the different compartments of the Refrigerator. Check their placement and corrective shuffling may be done, if needed.**

**Key: 3**

Among the vaccines, Polio is the most sensitive to heat, requiring storage at minus 20°C. Measles and polio vaccines must be stored in the freezer compartment. Vaccines which must be stored in the cold part but never allowed to freeze are typhoid, DPT, Tetanus Toxoid, DT, BCG and diluents.

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## BIOSTATISTICS

Q4.

| Anemia Status | Parity status |          |
|---------------|---------------|----------|
|               | Parity 1      | Parity 4 |
| Anemia        | 14            | 16       |
| Non Anemia    | 46            | 24       |

The calculated Chi-square value of the given data is 3.17.

- Calculate the degree of freedom.
- By referring to the given  $\chi^2$  table, interpret the significance of the result.

**Key: a**

$$\begin{aligned}\text{Degree of freedom} &= (\text{Row} - 1) \times (\text{Column} - 1) \\ &= (2-1) \times (2-1) \\ &= 1\end{aligned}$$

**Key: b**

$$\text{Since } \chi^2 = 3.17$$

$$\chi^2 < 3.84$$

$$\text{So } P > 0.05$$

The difference is not significant

**Weighting:**                      a.1                      b.2

**Reference:**                      Preventive & Social Medicine (K. Park)

| TABLE OF $\chi^2$<br>Probability (P) |      |       |       |       |       |       |       |
|--------------------------------------|------|-------|-------|-------|-------|-------|-------|
| D.F.                                 | .50  | .10   | .05   | .02   | .01   | .005  | .001  |
| 1.                                   | 0.45 | 2.71  | 3.84  | 5.41  | 6.64  | 7.88  | 10.83 |
| 2.                                   | 1.39 | 4.61  | 5.99  | 7.82  | 9.21  | 10.60 | 13.82 |
| 3.                                   | 2.37 | 6.25  | 7.82  | 9.84  | 11.34 | 12.64 | 16.27 |
| 4.                                   | 3.36 | 7.78  | 9.49  | 11.67 | 13.28 | 14.86 | 18.47 |
| 5.                                   | 4.35 | 9.24  | 11.07 | 13.39 | 15.09 | 16.75 | 20.51 |
| 6.                                   | 5.35 | 10.65 | 12.59 | 15.03 | 16.81 | 18.55 | 22.46 |
| 7.                                   | 6.35 | 12.02 | 14.07 | 16.62 | 18.48 | 20.28 | 24.32 |
| 8.                                   | 7.34 | 13.36 | 15.51 | 18.17 | 20.09 | 21.96 | 26.13 |
| 9.                                   | 8.34 | 14.68 | 16.92 | 19.68 | 21.67 | 23.59 | 27.88 |
| 10.                                  | 9.34 | 15.99 | 18.31 | 21.16 | 23.21 | 25.19 | 29.59 |

## **DEMOGRAPHY AND POPULATION CONTROL**

**Q5. Post insertional advice to the patients.**

**Key: 5**

A patient is sitting to be counseled.

1. It is reversible method
2. Immediate → collapse, syncope(Counsel about symptoms)
3. Late → Metrorrhagia, backache, menorrhagia
4. It will not interfere with your marital / sex life
5. You can still become pregnant as it does not give 100% protection
6. It can be lost also.
7. It can perforate the wall of uterus.
8. You can check the IUCD in position by the thread
9. Follow-up
10. Duration
  - a. Copper T → 10 years
  - b. Multiload → 5 years

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## **REPRODUCTIVE HEALTH**

**Q6. A woman reports at BHU with edema and blood pressure of 150/95 mm of Hg at the gestational age of 34 weeks.**

**a. What is this condition called?**

**b. What are the risks to the baby and to the mother?**

**Key: a**

The condition is called pre-eclampsia.

**Key: b**

Patient may develop eclampsia. It is also called Toxemia of pregnancy and it is one of the major causes of maternal mortality, 13% of deaths are due to toxemia of pregnancy. Babies are likely to have low birth weight and are prone to mortality.

**Weighting:                      a.1                      b.2**

**Reference:                      Preventive & Social Medicine (K. Park)**



## **COMMUNICABLE DISEASES / REPRODUCTIVE HEALTH / IMMUNOLOGY**

**Q.7 A pregnant woman is bitten by a rabid dog. Outline the steps of management.**

**Key: 7**

If a woman is bitten by a rabid dog:

- It is advisable to give both active and passive immunization as Rabies vaccine is a killed vaccine and can be given safely during pregnancy.
- Wound toilet with proper antiseptic measures should be done.
- No suturing should be done before 24 hours.

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## **COMMUNICABLE DISEASES / NUTRITION / IMMUNOLOGY**

**Q.8 Mother is Hepatitis B positive, what advice would you give after delivery regarding:**

- a. The baby's immunization**
- b. Breast feeding.**

**Key: a**

- i. Passive immunization

Hepatitis B immunoglobulin 0.05 to 0.07ml/kg body weight should be given. Two doses should be given 30 days apart.

- ii. Active immunization

1<sup>st</sup> dose of Hepatitis B virus vaccine (1ml) should be given intramuscularly within 7 days of birth. 2<sup>nd</sup> and 3<sup>rd</sup> dose should be given after 1 month and 6 months respectively.

**Key: b**

Mother can breast feed her baby as immunization has been done.

**Weighting:                      a.2                      b.1**

**Reference:                      Preventive & Social Medicine (K. Park)**

## **FOOD & NUTRITION**

**Q.9**

- a. Measure the mid arm circumference.**
- b. Interpret the results.**

**Key: a**

Method

**Key: b**

**The interpretation is based on the following:**

- Arm circumference exceeding 13.5cm = Satisfactory nutritional status.
- Between 12.5 and 13.5 = Mild to moderate malnutrition.
- Below 12.5 = Severe malnutrition.

**Weighting:**                      **a.1              b.2**

**Reference:**                      **Preventive & Social Medicine (K. Park)**

## **COMMUNICABLE DISEASES / NUTRITION**

**Q.10 The mother is tuberculous:**

- a. What instructions would you give for breast feeding of the baby?**
- b. What measures should be taken to prevent the baby from acquiring this infection in the immediate post natal period.**

**Key: a**

Breast feeding recommended.

**Key: b**

- Baby should be given INH prophylactically
- BCG immunization.
- Mother should observe personal hygiene for protection of tuberculous transmission to baby:
  - Use of mask.
  - Avoid spitting in the room.
  - etc.

**Weighting:**                      **a.1              b.2**

**Reference:**                      **Preventive & Social Medicine (K. Park)**

## **HEALTH EDUCATION**

**Q.11            Educate a group of people regarding hepatitis B & C.**

**Key: 11**

- a. It is called “kala yarqan” in common language.
- b. Modes of transmission:
  - Blood transfusion
  - Sharing of needles / syringes / blades
  - Sexual transmission
  - Vertical transmission
- c. Health education pertaining to the modes of transmission:
  - Not to share razors / blades / syringes
  - Screenings of blood / blood products before transfusion
  - Remain confined to your marriage partner only and use of condoms.
  - Avoid unnecessary surgical / dental procedures
- d. Immunization:
  - Hepatitis B vaccine has been recently included in national EPI campaign. 3 doses of vaccine are given on 6, 10 and 14 weeks after birth, along with DPT vaccine.
  - There is no vaccine against Hepatitis C. All the preventive measure are the same as against hepatitis B. Concept of safe sex is important in control of both types of hepatitis, which include confinement to marriage partners only and use of barrier methods (Condoms).

**Weighting:                            3**

**Reference:                            Preventive & Social Medicine (K. Park)**



## ENVIRONMENT

**Q.12 Calculate the amount of bleaching powder (33% strength) required to disinfect a well having diameter of 1.8m and depth of water 30m.**

**Key: 12**

First method.

$$\begin{aligned}\text{Volume in liters} &= \frac{3.14 \times d^2 \times h}{4} \times 1000 \\ &= \frac{3.14 \times (1.8)^2 \times 30}{4} \times 1000 \\ &= \frac{3.14 \times 3.24 \times 30}{4} \times 1000 \\ &= 76302 \text{ liters}\end{aligned}$$

For 1000 liter required amount of bleaching powder = 2.5 gm

$$\begin{aligned}\text{For 76302 liter required amount of bleaching powder} &= \frac{2.5 \times 76302}{1000} \\ &= 190.755 \text{ gms} \\ &= 191 \text{ gms}\end{aligned}$$

Second method.

$$\begin{aligned}\text{Volume in liters} &= D^2 \times W \times 800 \quad (D = \text{diameter in meters}) \\ &\quad W = \text{depth of water in meter)} \\ &= (1.8)^2 \times 30 \times 800 \\ &= 3.24 \times 30 \times 800 \\ &= 77760 \text{ liters}\end{aligned}$$

For 1000 liter required amount of bleaching powder = 2.5 gm

$$\begin{aligned}\text{For 77760 liter required amount of bleaching powder} &= \frac{2.5 \times 77760}{1000} \\ &= 194 \text{ gms}\end{aligned}$$

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## **EPIDEMIOLOGY**

**Q.13** In a population of 1000, measles immunization coverage is 60%, one child goes out of station and comes back with measles from whom 20 more children get measles. Calculate secondary attack rate of measles.

**Key: 13**

Total no. of children = 1000

No. of immunized = 600

No. of un-immunized = 400

Primary case = 1

Secondary attack rate =  $20 / 400 - 1 = 20 / 399 \times 100 = 5\%$

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## SCREENING

**Q.14** By referring to the following table, calculate:

- Sensitivity (1)
- Specificity (1)
- Positive predictive value (0.5)

|        | DISEASE | NO DISEASE |      |
|--------|---------|------------|------|
| Test + | 9       | 50         | 59   |
| Test - | 1       | 940        | 941  |
|        | 10      | 990        | 1000 |

**Key: 14**

- Sensitivity =  $9/10 \times 100 = 90\%$
- Specificity =  $940 / 990 \times 100 = 95\%$
- PPV =  $9/59 \times 100 = 15\%$

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## **DEMOGRAPHY & REPRODUCTIVE HEALTH**

**Q.15 Statistics of a Maternity Unit include the following:**

- Total numbers of reported live births at this obstetrical unit = 5000.
  - No of deaths of children < 1 year of age = 80
  - No of deaths of children below 6 months of age = 70
  - No of deaths of children below 28 days of age = 60
- Calculate Neonatal Mortality Rate.**

**Key: 15**

$$60 / 5000 \times 1000 = 12 / 1000 \text{ live births}$$

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**

## **OCCUPATIONAL HEALTH**

**Q.16 The person sitting in front of you is a nursing assistant, working in the medical ward of POF hospital, Wah Cantt. On average he gives 10 to 15 injections to the patients per day. How will you educate him to prevent himself from the needle stick injury?**

**Key: 16**

- He must keep in mind the risk of having needle stick injury while giving the injections to the patients.
- He must take particular care during the following stages of giving injections:
  - During tightening the needle on the syringe
  - Pulling out the needle from the ampoule after filling the injection
  - Insertion of the needle into the skin or vein
  - Pulling out of the needle after giving injection
  - During capping of the used needle
- In case of needle stick injury he should report to his senior immediately about the incident.
- Active immunization if not vaccinated.
- Passive & active immunization if needle stick injury results before active immunization. (When handling a hepatitis B+ patient)

**Weighting: 3**

**Reference: Preventive & Social Medicine (K. Park)**



## **Conduct of OSPE**

- The Batches for Major viva voce and Practical / OSPE exam will be the same on any particular day and will be 30 students strong each.
- All OSPE Questions will be sent by the Department of Examinations, UHS in sealed confidential envelopes to each center clearly marked for each day of Examination and shall be kept secure in our Regional Safety Lockers at respective centres.
- For any particular day of Examination the same OSPE questions will be sent to each center to maintain uniformity and standardization.
- The sealed confidential envelope containing the OSPE questions for that particular day will be collected from the UHS regional safe locker by both the Internal and External Examiners in the presence of the Principal or his nominee and the Regional Coordinator up to Two hours before the commencement of Examination.
- Each packet of examination material will contain for that particular day the complete set of OSPE questions with keys and instructions for the candidates and the examiners.
- Instruction/ questions for the candidates will be included in the examination material and should be placed on each station.
- The Practical Answer Books for stations will be sent separately to each centre one for each candidate.
- The candidates are to carry the Practical Answer Books from station to station and are to register their responses to each question at these desks separately on the same Practical Answer Sheet in the designated areas.
- Before leaving the Assessment Hall the candidate should deposit the Answer Book either at the “Marking Desk” or with the organizer as per decision of the convener.
- The answer books will be checked by both the Internal and External (5 Questions by the Internal and 5 by the External) and awards will be transferred to the Award Lists.
- Both the Award List and the Answer Books will be sent to the Examination Department on the same day.
- The candidates leaving the OSPE Hall will not mingle with candidates awaiting assessment, who are to be kept under supervision in a separate holding bay.
- Each batch of the candidates while waiting for the OSPE in the waiting area should be briefed about the OSPE process and the layout of the OSPE hall as well as the flow of candidates through the hall. They are not to bring any mobile phones or any other technology that could be used for communication within the premises of the examination centre.
- Any student found having mobile phone or any other electronic medium should be removed from the OSPE examination centre and an Unfair Means Case registered against him/ her.
- All candidates will complete a mandatory “Feedback Proforma” and deposit the same confidentially in the sealed collection boxes provided.

## **List of Calculations**

1. Mortality ratio.
2. Morbidity ratio.
3. Disability ratio.
4. Fertility ratio.
5. Dependency ratio.
6. Bed Occupancy ratio.
7. Secondary attachment rate.
8. Ration.
9. Doubling Time.
10. Growth Rate.
11. Mean, Median, Mode, Standard Deviation, Range.
12. Measures of Dispersion.
13. Sensitivity / Specificity.
14. Negative Predictive Value.
15. R.R.
16. Att. Risk.
17. Odds Ratio.
18. Incidence / Prevalence.
19. Chi-Square (p Value).
20. BMI.
21. Calculation of Caloric Value.
22. B. demographic equation.
23. Doubling Time of Population.
24. Quality of H<sub>2</sub>O in well.
25. Chlorine Demand.

## **List of Models**

1. Sand fly.
2. Lifecycle of flea.
3. Lifecycle of House Fly.
4. Lifecycle of Mosquito.
5. Diphtheria open mouth.
6. Measles.
7. Iodine deficiency goiter.
8. Kwashiorkor.
9. Chicken pox.
10. Mumps.
11. Healthfull house.
12. Various desk (plus).
13. Various desk (minus).
14. Various desk (zero).
15. Various desk (Normal).
16. Mite.
17. Tetanus (model).
18. Leprosy.
19. Tick.
20. Septic Tank.
21. Hydatid cyst.
22. Worms.
23. AIDS.

## **List of Oils**

All oils.

## **List of Antiseptics and Chemicals**

1. Dettol liquid.
2. Dettol soap.
3. Pyodine.
4. Sulphur.
5. Phenyl tablet.
6. Bleaching powder.
7. Formalin.

## **List of Pulses, Rice and Salts**

1. Pulses.
2. Beans.
3. Corns.
4. Wheat.
5. Rice.
6. Iodized Salt.

## **Miscellaneous**

1. Stop watch.
2. Snake.
3. Anti Snake kit.
4. All vaccines.
5. All contraceptives.
6. O.R.S.
7. Cigarette.
8. Syringes.
9. Huka / Shisha.
10. Anti TB drugs.
11. Anti Malarial drugs.
12. Deworming medication.
13. Iron dust.
14. Cotton fibers.
15. Coal.
16. Skimmed milk.
17. Population pyramid.
18. X-Ray (TB).

# MBBS Third Professional Examination

## COMMUNITY MEDICINE

### TOS for OSPE

**TOTAL SPOTS / STATIONS: 10**

**TOTAL MARKS: 40 (4 MARKS / STATION)**

**TOTAL DURATION: 40 MINS (4 MINS AT A STATION)**

| S.# | Topics  | C1<br>(30%) | C2<br>(30%) | C3<br>(40%) | Weighting | % of items per Content  |
|-----|---|-------------|-------------|-------------|-----------|-------------------------|
| 1   | Concept of health and disease, Natural history of disease and levels of prevention, Control, Elimination and eradication<br>1a. General epidemiology and research methodology, Dynamics of infectious disease transmission.<br>1a. Epidemiology, control and prevention of Communicable and non communicable diseases.<br>Screening | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 2   | Introduction to public health and health system<br>Primary health care, Health system in Pakistan.  | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 3   | Immunology / Vaccination  | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 4   | Biostatistics/HMIS  | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 5   | Food & Nutrition  | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 6   | Environment (Air, water , radiation, climate, noise, housing, waste disposal)   | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 7   | MCH / Reproductive health   | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 8   | Health education / Dental health / School health / Mental health / Behavioral sciences / Counseling   | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 9   | Accidents /Disasters / Occupational health / Parasitology / Entomology / Snake bite   | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |
| 10  | Demography and population control   | ✓           | ✓           | ✓           | 1 Spot    | 1 Spot = 4 Marks<br>10% |





