



COLLEGE OF PHYSICIANS AND SURGEONS PAKISTAN

FCPS PART-I

SURGERY AND ALLIED

CURRICULUM

2023

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The College of Physicians and Surgeons Pakistan would appreciate any criticism, suggestions, advice from the readers and users of this document. Comments may be sent in writing or by e-mail to the CPSP at:

DIRECTORATE OF NATIONAL RESIDENCY PROGRAM (DNRP)

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ABOUT THE COLLEGE

The College was established in 1962 through an ordinance of the Federal Government. The objectives/functions of the College include promoting specialist practice of Medicine, Obstetrics & Gynaecology, Surgery and other specialties by securing improvement of teaching and training, arranging postgraduate medical, surgical and other specialists training, providing opportunities for research, holding and conducting examinations for awarding College diplomas and admission to the Fellowship of the College.

Since its inception, the College has taken great strides in improving postgraduate medical & dental education in Pakistan. Competency-based structured Residency Programs have now been developed, along with criteria for accreditation of training institutions, and for the appointment of supervisors & examiners. The format of examinations has evolved over the years to achieve greater objectivity and reliability in methods of assessment. The recognition of the standards of College qualifications nationally & internationally, particularly of its Fellowships, has enormously increased the number of trainees and consequently the number of training institutions and the supervisors. The rapid increase in knowledge base of medical sciences & consequent emergence of new subspecialties have gradually increased the number of CPSP fellowship disciplines to eighty one including specialties in dentistry.

The first step in the organization of postgraduate medical and dental education is to select those students who demonstrate that they have adequate fund of knowledge & aptitude to pursue postgraduate medical and dental education. CPSP at present has formulated 11 groups of similar specialties and has designed a curriculum for each of these groups. The format for the FCPS Part-I examination consists of two single best MCQ papers with a clinical scenario so as to test the application of knowledge of basic and clinical sciences learnt during undergraduate studies and Hence, it is treated as a screening test. But this test does not take into

account the aptitude of the candidates and Hence, CPSP allows the accredited institutes to ascertaining it through penal of subject specialists for induction into each specialty.

This booklet covers the curriculum for surgical & allied specialties and provides guidance for the students as well as the examiners regarding the objectives, syllabus and examination format. The students aspiring to appear in FCPS Part-I examination or advised to go through this document while preparing for the exam.

The postgraduate medical and dental education is a combination of learning experiences followed by some sort of test, formative or summative. The purpose of formative tests is to provide constructive feedback to coverup the deficiencies and hence are a powerful tool of learning after completing first two years of training during IMM, the trainees are allowed to proceed to the advance phase of FCPS training in the specific specialty of choice for 2-3 years. However, it is mandatory to qualify IMM examination before taking the FCPS-II exit examination.

The average number of candidates taking CPSP examinations each year is to a minimum of 32,000. The College conducts examinations for FCPS-I (11 groups of disciplines), IMM, FCPS-II (81 disciplines), MCPS (22 disciplines), including MCPS in Health Professions Education and Health Care System Management. A large number of Fellows and senior medical teachers from within the country and overseas are involved at various levels of examinations of the College.

The candidates who wants to pursue postgraduate medical or dental education are advised to select the specialty of their choice after collecting information about that specific specialty from their seniors or from those who have successfully completed the fellowship programme.

Prof. Khalid Masood Gondal

President

College of Physicians and Surgeon Pakistan

FCPS Part-I EXAMINATION

The College conducts FCPS Part-I examinations in the following disciplines:

1. Anaesthesiology

2. Community Medicine

3. Dentistry

4. Diagnostic Radiology

5. Medicine and Allied

6. Obstetrics & Gynaecology

7. Ophthalmology

8. Otorhinolaryngology (E.N.T)

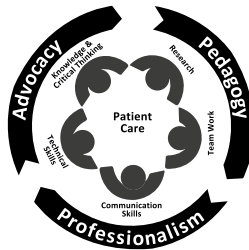
9. Pathology

10. Psychiatry

11. Surgery and Allied

CPSP COMPETENCY MODEL

College of Physicians and Surgeons Pakistan has moved to competency-based medical education and has developed its own competency model shown below. Those who wish to pursue any fellowship programme of the college, should at the outset become aware of its training model. A generic explanation of the model is given below and it is expected that all its residency training programmes follow the components of this model in accordance to the requirements of each specialty.



Patient or population care occupies the pivotal center. Patient care includes all clinical skills such as history taking, physical examination, ordering investigations, making diagnoses and managing the care. The inner leaves of the model represent the five major competencies directly related to patient care, while the three competencies in the outer circle are mega-competencies related to patient care and also incorporate education, professionalism, leadership, advocacy and population health.

By the end of the Residency Programme, residents are expected to acquire these competencies and their constituent learning outcomes, and provide promotive, preventive, curative and rehabilitative patient-centered (or population-centered) care.

Inner Leaves:

1. Knowledge and Critical Thinking
2. Technical Skills
3. Communication Skills
4. Teamwork
5. Research

Outer Leaves:

6. Professionalism
7. Pedagogy
8. Advocacy

1. Knowledge and Critical Thinking

- Demonstrate application of wide and current readings to critical thinking and problem solving
- Relate the alteration of body function to the presenting condition
- Interpret and integrate history and examination findings to arrive at an appropriate provisional and credible differential diagnoses
- Sequentially order, justify and interpret appropriate investigations
- Apply knowledge and reasoning skills to
 - Analyze data for problem identification and to rule in and rule out contending conditions
 - Synthesize and evaluate solutions for decision-making in solving familiar and less familiar problems based on best current evidence
 - Prioritize different problems within a time frame.
 - Select, outline and provide, with evidence-based justifications, appropriate pharmacological and non-pharmacological management strategies
 - Assess new medical knowledge and apply it to resolve patient problems (Evidence-based practice)
 - Apply quality assurance procedures in daily work. (Professionalism)
 - Demonstrate shared-decision-making with the patient or family
 - Provide cost-effective care while ordering investigations and in management
 - Use resources appropriately
 - Demonstrate awareness of bio-psycho-social factors in assessment and management of a patient.

2. Technical Skills

- Demonstrate International Patient Safety Goals (IPSG)
- Demonstrate competent performance of all required technical skills and procedures in the specialty, including:
 - Obtaining informed consent
 - Preoperative planning
 - Pre-interventional care and preparation
 - Intra-Intervention technique including exposure and closure, global and task specific items, and communication and team skills
 - Post-interventional care
 - Follow-up Care.

3. Communication Skills

- Written Communication Skills
 - Maintain clear, concise, accurate and updated medical records
 - Write clear, focused, evidence-based and logical management plans and discharge summaries
 - Write respectful, clear and focused letters and referrals to other colleagues.
- Verbal Communication Skills: Demonstrate
 - Effective interpersonal communication skills: clear, considerate and sensitive towards patients, their relatives, other health professionals and the public, and towards students
 - Non-verbal communication skills:
 - Empathy and respect towards patients and their relatives
 - Effective counseling of the patient and the family with cultural sensitivity: explain options, educate them and promote joint decision-making.
 - Appropriate verbal and body language on the campus and all work situations including seminars, bedside sessions, outpatient sessions and others
 - Respect and tolerance for all health care professionals, including peers, juniors and seniors
 - Clear, focused and logical presentation of cases.

4. Teamwork

- Demonstrate constructive team-communication skills.
- Facilitate collaborative group interaction as a team member to build strong teams demonstrating respect, tolerance and interdependence.
- Support other team members to grow
- Demonstrate willingness to assume responsibility and leadership as needed.

5. Research

- Interpret and use results of various research studies (critical appraisal)
- Conduct a research study individually or in a group by using appropriate
- Selection of research question(s) and objectives
- Research design and statistical methods to answer the research question
- Ethical and R&RC approval of the synopsis
- Demonstrate competence in academic writing by writing an appropriate dissertation and/or publishing research article(s) as a step towards resolving issues or concerns in their specialty
- Guide others in conducting research by advising about research methodology including study designs and statistical methods
- Demonstrate clear, focused and logical presentations of their research.

6. Professionalism

- Demonstrate the highest level of personal integrity: honesty, punctuality, regularity, timely task completion
- Deal with all patients in a non-discriminatory, prejudice-free manner, demonstrating the same level of care for every human being irrespective of gender, age, ethnic background, culture, socioeconomic status and religion
- Establish a trusting relationship with patients, their relatives and care-givers
- Deal with all patients with honesty, empathy and compassion, putting patients' needs first (altruism)
- Facilitate transfer of information important for promotion of

- health, prevention and management of disease
- Encourage questioning by the patient and be receptive to feedback
- Pursue self-directed and life-long learning. Keep abreast of medical literature and assess new knowledge and apply it to resolve patient problems
- Know one's limitations and ask for help as needed from colleagues, consultations or referrals
- Apply quality assurance procedures for improvement in daily work
- Be a role model for others.

Ethics

- Maintain patient autonomy by demonstrating shared-decision-making with the patient and/or family
- Obtain informed consent, maintain patient confidentiality and do no harm
- Provide cost-effective care while ordering investigations and in management and use resources appropriately.

Leadership

- Demonstrate accountability for their decisions and actions, and that of their team
- Demonstrate willingness to assume leadership role(s) when needed in given situations or events (rush call/code).
- Change and bring about change as necessary, as a leader or supportive leader.

7. Pedagogy

Should be able to demonstrate competence in teaching skills:

- Effective clinical/community-based teaching
- Some evidence of acquisition of theory regarding learning and education
- Practice some of the best teaching methods.

8. Advocacy

Advocacy is needed at multiple levels

- Advocacy for the Patient
 - Doctors and nurses are the advocates of the patients, otherwise patients are likely to be lost in the system. All care should be timely, putting patients first.
- Advocacy for the Practice
 - Working in a service or practice, doctors must highlight limitations and issues
 - They must identify solutions for the problems, and recommend and implement improvements for the practice(s) and institutional system(s).
- Advocacy for the Health System and Society
 - Know one's role in the Health System(s) and build strong referral systems
 - Keep patient and community interests paramount, above one's own personal or professional interest
 - Demonstrate advocacy for elimination of the social determinants of health
 - Demonstrate advocacy for prevention of serious illnesses of their specialty/sub-specialty.
- For the Profession
 - Strive for building trust in the public for your profession
 - Demonstrate improvement and enhancement of profession, specialty and sub-specialty
 - Be conscientious gate-keepers of their profession, specialty and subspecialty.
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GENERAL REGULATIONS

Following regulations apply to all candidates taking FCPS-I examinations. Candidate will be admitted to the examination in the name (surname and other names) as given in the MBBS/BDS degree. CPSP will not entertain any application for change of name on the basis of marriage / divorce / deed.

ELIGIBILITY

- MBBS or equivalent qualifications registered with the PMDC.
- One year house job in an institution recognized by the CPSP / PMDC, which should have been completed at least two months before the date of examination.
- Deficiency of house job could be compensated by an equal period of residency in an institution recognized by the CPSP.

EXEMPTION

Exemption from FCPS Part-I is regulated as mentioned in CPSP Notification No. Ref#CPSP/Sec/2020/70 dated: 26 February 2020.

AIM AND OBJECTIVES

AIM

The overall aim of FCPS Part-I examination is to select candidates who have acquired a solid foundation of basic science knowledge and the ability to apply it for resolving common clinical problems. The objectives of the two papers are instrumental for achieving this aim.

OBJECTIVES

Paper-I: To test application of core concepts of Basic Sciences to clinical problems common across all groups of specialties of CPSP.

Paper-II: To test application of basic science knowledge to clinical problems related to each specific specialty.

SYLLABUS

Candidates for the Fellowship of the College are expected to have a sound working knowledge of the structure and functions of the human body and the various mechanisms whereby these structures & functions are altered leading to diseased states. The emphasis in the FCPS Part-I examinations is on comprehension of the various mechanisms by which the body works and adjusts to external and internal changes. Concepts of the integration and interrelationship of various parts of the body are to be given more importance than finer details of structure and function.

The outline of various topics given in this syllabus is a guide to what at the moment are considered to be important topics which the candidate is expected to know. This is to help both the candidate and the examiner in defining the minimum boundaries of FCPS Part-I examination.

PAPER-I

The syllabus given below is common for all specialties, but the emphasis should be on clinical problems that are important to know by all candidates seeking entry to any specialty.

ANATOMY

General Embryology:

- Early development
 - Congenital Gametogenesis
 - Fertilization
 - Implantation and Factors Affecting it
 - Process from Fertilized Ovum to Germ Layer Formation
 - Derivatives of the Germ Layers
 - Formation of the Neural Tube, Neural Crest Cells and their Derivatives
 - Twinning
 - Basic concepts of Congenital Abnormalities and their Prenatal Diagnosis
 - Chromosomal Abnormalities and their Consequences (Structural and Numerical)
- Normal and Defective Development of:
 - Musculoskeletal System
 - Urogenital System
 - Gastrointestinal Tract (GIT)
 - Cardiovascular System
 - Respiratory System
 - Central Nervous System (CNS)
 - Head and Neck
 - Special senses

General Histology

- Cells and Tissues Related in the Organization of the Body
- Microscopic Features of:
 - Epithelia and Cell Junctions
 - Connective Tissue including Bone and Cartilages
 - Muscular Tissue
 - Nervous Tissue

Special Histology

- Microscopic Features of the Organs Present in:
 - Gastrointestinal Tract (GIT)
 - Genitourinary System
 - Immune System
 - Endocrine System
 - Respiratory System
 - Integumentary System
 - Special senses

Gross Anatomy

- Normal Features and Anatomical Basis of Common Clinical Conditions in:
 - Upper Limb
 - Lower Limb
 - Thorax
 - Respiratory System
 - Cardio Vascular System (CVS)
 - Abdomen
 - Gastrointestinal Tract (GIT)
 - Biliary System
 - Abdominal Wall
 - Peritoneum
 - Pelvis (Male and Female Genitourinary Organs)
 - Head and Neck

Neuroanatomy

- Structures and Functions of the Parts of Nervous System and Neurological Problems Arising from their Derangement:
 - Spinal Cord
 - Forebrain
 - Midbrain
 - Hindbrain
 - Ventricular System
 - Blood Supply of Brain

PHYSIOLOGY

Cell, Nerve and Muscle

- Cell Functions and Signaling
- Transport across Cell Membrane and Homeostasis
- Nerve Transmission, Skeletal and Smooth Muscle Contraction
- Neuromuscular Transmission

Blood and Immunity

- Blood Cell and Plasma Functions
- Immunity and Allergy
- Hemostasis
- Blood Groups

Cardiovascular System

- Cardiac Excitation
- Cardiac Cycle
- ECG (Applied)
- Blood Pressure Regulation
- Microcirculation
- Circulatory Shock
- Cardiac Failure

Respiratory System

- Pulmonary Ventilation and Perfusion
- Gaseous Exchange
- Transport of Gases
- Regulation of Respiration

Gastrointestinal Tract (GIT) and Liver

- GIT Motility
- Secretions
- Hormones
- Regulation
- Gastrointestinal Disorders
- Hepato-biliary Functions

Renal and Body Fluids

- Regulation of Body Fluids and Electrolytes
- Functions of Kidneys
- Regulation of Urine Osmolarity
- Blood Pressure
- Acid Base Balance

CNS

- Organization of CNS
- Sensory System
- Motor System
- Higher Mental Functions
- Autonomic Nervous System (ANS)
- Neurotransmitters

Special Senses

- Vision
- Hearing and Body Balance
- Olfaction
- Gustation

Endocrinology

- Hormones of:
 - Hypothalamus
 - Pituitary
 - Thyroid
 - Parathyroid
 - Pancreas
 - Adrenal Glands

Reproduction

- Male Reproductive System
- Female Reproductive System (Reproductive Cycle, Fertilization, Pregnancy, Parturition, Lactation)
- Neonatal Physiology

Exercise and Unusual Environment

- Sports Physiology
- High Altitude Physiology
- Deep Sea Physiology
- Disaster Physiology

BIOCHEMISTRY

Structure, Functions and Metabolism of Biomolecules

- Carbohydrates
- Proteins
- Lipids
- Nucleic Acids

Control, Regulation and Disorders of Metabolism

- Enzymatic Control of Metabolism
- Hormonal Regulation of Metabolism
- Clinical Uses of Enzymes, Co-Enzymes, Minerals & Hormones
- Digestive and Metabolic Disorders
- Congenital and Acquired Metabolic Disorders
- Disorders of Enzymes, Co-Enzymes, Minerals and Hormones

Biomedical Diagnostic Techniques and their Application

- Photometry
- Enzyme-linked Immuno-sorbent Assay (ELISA)/ Radio-immuno Assay (RIA)
- Electrophoresis
- Chromatography
- Techniques in Molecular Genetics
- Recombinant DNA and Genomic Technology
- Estimation of Proteins, Lipids, Carbohydrates, Nucleic acids
- Polymerase Chain Reaction (PCR)
- Cloning
- Blotting Techniques
- DNA and RNA Sequencing
- Microarray Techniques

PHARMACOLOGY

Pharmacology syllabus comprises of basic concepts in pharmacokinetics, pharmacodynamics and their clinical application. Systemic pharmacology includes classification of drugs, mechanism of action at molecular level, indications, contraindications and side-effects.

General Pharmacology

- Movement of Drug Molecules across Cell Membrane
 - Ion Trapping
- Metabolism
 - Phase I and II Reactions, Role of Cytochrome p450 Enzymes.
 - Genomics – Fast & Slow Metabolizers, Enzyme Inducers and Inhibitors.
 - Adverse Drug Reactions, Drug-Drug Interactions
- Plasma Protein Binding and Bioavailability
- Clearance

- Half-Life, Steady State Concentration, Loading and Maintenance Dose
- Receptor Types
 - Receptor-Receptor Interaction
 - Efficacy, Potency

Autonomic Nervous System (ANS) and Central Nervous System (CNS)

- Autonomic Nervous System (ANS)
 - Sympathetic and Parasympathetic (Mimetic and Lytic) Drugs
 - Organophosphate Poisoning
- General /Local Anaesthesia
- Anti-depressants, Mood Stabilizers, Anxiolytics, Anti-psychotics, Anti-convulsants, Drugs used in Parkinson's Disorder, Alzheimer's and Dementia
- Analgesics
 - Opioids and Drug Abuse
 - Non-steroidal Anti-inflammatory Drugs (NSAIDs)
 - Disease-modifying Anti-rheumatic Drugs (DMARDs)'s and Anti-Gout Drugs
 - Spasmolytics

Cardiovascular System (CVS) and Blood

- Cardiovascular System (CVS)
 - Anti-hypertensives
 - Anti-arrhythmics
 - Anti-anginal Drugs
 - Drugs used in Dyslipidemia and Cardiac Failure
- Blood
 - Anti-platelet Drugs
 - Anti-coagulant Drugs

Gastro-Intestinal Tract (GIT) and Hepato-Biliary System

- Drugs used in Acid Peptic Disease, Inflammatory Bowel Diseases, Irritable Bowel Syndrome and Intestinal Motility Disorders
- Anti-protozoal and Anti-helminthic Drugs

Respiratory System

- Drugs used in Treatment of Asthma and Chronic Obstructive Pulmonary Disease (COPD)

Endocrine System

- Anti-diabetic Drugs
- Anti-thyroid Drugs
- Adreno-corticoids and Adreno-cortical Antagonists
- Drugs that affect Bone Mineral Homeostasis

Chemotherapeutic Agents

- Anti-microbials
- Anti-tubercular Drugs
- Immunosuppressive Drugs
- Anti-viral Drugs
- Anti-fungal Drugs
- Anti-neoplastic Drugs
- Targeted and Non-targeted Therapy

GENERAL PATHOLOGY

- Effects of Injury on Cell by Physical, Chemical and Biological Agents
- Inflammation
 - Acute
 - Chronic including Granulomatous
- Regeneration and Repair
- Metabolic Response to Trauma
- Disturbance of Homeostatic Mechanism
 - Haemorrhage and Shock - Mechanism and Types
 - Oedema
 - Disturbance of Fluids and Electrolytes
- Thrombosis and Embolism, Infarction and Gangrene
- Disorders of Growth - Atrophy, Hypertrophy, Hyperplasia
- Carcinogens and Pre-Malignant Lesions
- Neoplasia: Types and Spread of Tumor
- General Characteristics of Bacteria, Viruses, Parasites and Fungi
- Immune System: General Principles
- Medical Genetics - Basic Concepts
- Interpretation of Routine Biochemical Tests such as Liver Function Tests, Glucose, Urea, Creatinine
- Nutritional Diseases, Disorders due to Deficiency of Vitamins and Minerals
- Cancer Epidemiology

RESEARCH AND BIOSTATISTICS BASIC CONCEPTS

- An Introduction to Epidemiology and its Role in Understanding Distribution and Determinants of Epidemiology of Disease
- Measures of Disease Occurrence
- Study Designs, their Advantages and Disadvantages
- Measures of Association
- Chances, Bias and Confounding
- Screening

Biostatistics

- Introduction to Biostatistics
- Data and its Kinds
- Summarization of Data
- Measures of Central Tendency and Dispersion
- Normal Distribution
- Point and Interval Estimation and Probability
- Hypothesis Testing, Significance Level and Power
- Sampling and its Techniques

BEHAVIOURAL SCIENCE & MEDICAL ETHICS-GENERAL PRINCIPLES

- Medical Ethics
- Communication Skills including Doctor-Patient Relationship and Counseling
- Psycho-social Aspects of General Health Care

PAPER-II

ANATOMY

Embryology:

- Development of musculoskeletal system (including the development of skull, vertebral column, limbs & diaphragm)
- Development of the Face (including the Pharyngeal arches, pouches and membranes and their derivatives)
- Development of the GIT (including the development of fore, mid and hind gut with their rotations and development of the derivatives of the fore gut including the Liver & Biliary tract, Pancreas and Spleen)
- Development of the Urogenital Systems (including the development of Kidneys, Ureters, Urinary Bladder, Prostate, Seminal Vesicles, Ductus Deferens, Testes, Uterus & Ovaries)
- Development of the Heart and Great vessels
- Development of the Trachea, Bronchi and lungs
- Development of the Brain and Spinal cord including their developmental anomalies
- Various congenital hernias and anomalies that can occur during the development of organ especially those of the GIT and genal systems

Histology:

Microscopic structure of the following organs:

- Esophagus, Stomach, Duodenum, Jejunum, Ileum, Appendix and rectum
- Liver
- Gall bladder
- Pancreas
- Spleen
- Trachea
- Bronchi
- Lungs
- Heart
- Arteries
- Veins
- Kidneys
- Urinary Bladder
- Prostate
- Seminal Vesicles

- Ductus Deferens
- Testes
- Epididymis
- Uterus
- Uterine Tubes
- Ovaries
- Cerebral Cortex
- Cerebellar Cortex
- Spinal Cord

Gross Anatomy:

The Cranium:

- Features of the following structures / organs with special emphasis on applied aspects:
- Skull and mandible:
- General description, age and sex differences,
- Component bones, location of important foramina and entry/exit of structures through these foramina
- Nasal and orbital cavities with their boundaries
- Paranasal Sinuses
- The Temporomandibular joint and its movements

Brain:

- Important sulci gyri and cortical areas
- The Basal ganglia and Limbic lobe
- The Internal capsule (Projection fibers)
- The Corpus callosum (Commissural fibers)
- Blood Supply of the brain
- The Cerebellum and its peduncles (with types of fibers passing through each of the peduncles)
- The Brain Stem (Mid brain, Pons & Medulla Oblongata) and location of cranial nerve nuclei in each of its components
- The Blood brain barrier and CSF
- Ventricular System

Vertebral Column:

- Morphology
- Features of typical and atypical Cervical Vertebrae
- Features of Thoracic and lumbar Vertebrae
- Features of The Sacrum
- Different types of intervertebral vertebral and costovertebral joints and movements at each of them

The Upper limb:

- Shoulder girdle (including the Pectoral & Scapular Regions) muscles with their nerve supply and actions.
- The Clavipectoral fascia and its clinical importance
- The Axilla, its boundaries, contents and lymphatic drainage
- The Brachial plexus, its distribution and injuries
- The Shoulder Joint
- Muscles of the flexor and extensor compartments of the arm, their Nerve supply and group actions
- The Cubital fossa, its boundaries, and contents
- The Elbow Joint
- Muscles of the flexor and extensor compartments of the forearm, their Nerve supply and group actions including the mechanism of pronation and supination
- The Wrist Joint
- The Hand - Functional Anatomy
- The Palmar aponeurosis and Dupuytren's contracture
- The Flexor retinaculum, Carpal tunnel and carpal tunnel syndrome
- The intrinsic muscles of the hand (The Thenar, hypothenar, lumbricals, adductor pollicis, interossei and palmaris brevis)
- Group action of the muscles of Hand (including the mechanism of grip) with their nerve supply
- The Palmar spaces
- Course & distribution of the Axillary, Radial, Musculocutaneous, Median and ulnar nerves
- Anastomosis of arteries at various points & their importance
- Pattern of venous drainage in the upper limb
- Osteology: Salient Features of the Clavicle, Scapula, Humerus, radius, ulna and carpal bones and different types of fractures in these bones and their clinical sequelae.

The Lower limb:

- The Lumbosacral Plexus
- The Femoral Triangle, its boundaries and contents
- The Sub-sartorial/Adductor canal and its clinical importance
- Muscles of the anterior (Extensor compartment) of the thigh (The Quadriceps) with their Nerve supply and group actions
- Muscles of the medial (Adductor compartment) of the thigh (The Adductors) with their Nerve supply & group actions

- Muscles of the Posterior (Flexor compartment) of the thigh of the thigh (The Hamstrings) with their Nerve supply and group actions
- Muscles of the Gluteal region including the small deep muscles that act as rotators of hip with their Nerve supply and group actions
- The Hip Joint
- The Popliteal fossa, its boundaries, contents and clinical importance.
- Intermuscular septa and formation of compartments in the thigh and leg and their significance
- The Knee Joint
- Muscles of the anterior compartment of the leg (The Extensors)
- Muscles of the lateral compartment of the leg (The fibular or Peroneal)
- Muscles of the Posterior compartment of the leg (The Flexors or Calf muscles, superficial and deep groups)
- The Ankle Joint
- Skeleton of the foot
- Layers of the sole and muscles in each layer with their nerve supply and actions
- Arches of foot, their skeletal, muscular and connective tissue (ligamentous) components and factors that maintain them
- Posture of the body and anatomical factors responsible for its maintenance
- Mechanism of bipedal stance
- Course and distribution of The Femoral, Obturator, and Sciatic (Tibial & Common Peroneal) nerves
- Anastomosis of arteries at various points & their importance
- Pattern of venous drainage in the lower limb
- Osteology: Salient features of the Hip bone, Femur, Patella, Tibia, Fibula and Tarsal bones, different types of fractures in these bones and their clinical sequelae.

The Thorax:

- Thoracic cage, Thoracic Inlet (superior thoracic aperture) and outlet (inferior thoracic aperture), their boundaries and structures passing through each thoracic aperture
- Typical and Atypical ribs with their salient features
- Thoracic Vertebrae with their salient features

- The intercostal muscles, their actions and nerve supply
- The Posterior and Anterior Intercostal Vessels
- The Breast, its Structure, blood supply & lymphatic drainage
- Diaphragm:
 - Its Structure and attachments,
 - Nerve and blood supply,
 - Functions, and Structures transmitted through it at various levels
- Thoracic Cavity:
 - The Mediastinum:
 - Its boundaries and divisions
 - Disposition of the contents in each division
 - Major blood vessels (The aorta, Superior vena cava, Azygos and hemi azygos veins, their formation, course and relations
- The Lungs and Pleura:
 - Surface marking of pleura and lungs including fissures
 - Reflexions of the pleura
 - Roots (Hila) of both lungs with the structures passing through them and their relations to each other.
 - Blood supply, nerve supply and lymphatic drainage of the lungs and pleuraThe Bronchopulmonary segments
- The Heart and Pericardium:
 - Fibrous and Serous Pericardium
 - Position and surface projections of the heart
 - Parts and chambers of the heart with the external and internal features of each chamber
 - Coronary arteries and their branches and variations
 - Cardiac Veins and their tributaries
 - The Vagus nerve, its course in the thorax and distribution
 - Lymphatic drainage of the thorax
 - Formation, course and drainage of the thoracic duct
 - The Sympathetic trunk

The Abdomen:

- Anterolateral abdominal wall:
 - The abdominalDermatomes
 - The Superficial fascia of the anterolateral abdominal wall, its two components and their clinical importance

- Muscles of the Anterolateral Abdominal Wall:
 - Attachments, nerve supply and actions
 - Formation and contents of the rectus sheath
 - Anatomy of Inguinal and femoral canals and Hernias
 - Surface Anatomy of the internal organs
- Abdominal Cavity:
 - General disposition morphology and blood supply of the abdominal viscera.
- Peritoneum:
 - Vertical and horizontal disposition, formation of omenta, mesenteries and main ligament
 - Division of the peritoneal cavity (Greater & Lesser sacs) along with their extent and boundaries
 - Formation of portal vein & sites of Porto-systemic anastomosis
- Posterior Abdominal:
 - Muscles of the posterior abdominal wall-actions and nerve supply
 - Morphology of the retroperitoneal structures
 - Thoracolumbar fascia
 - Abdominal aorta, course, relations and branches
 - Inferior Vena Cava:Course, relations and tributaries
 - Lymphatic drainage & main group of lymph nodes
- Kidney and Ureter:
 - Structure
 - Renal Capsule, Fascia, Para & Peri renal fat
 - Blood and nerve supply
 - Lumbosacral plexus

Pelvis and Perineum:

- The bony pelvis, its components, divisions and sex differences
- Structures in the pelvis:
 - Male genital organs - Relations and Blood Supply
 - Female genital organs - Relations and blood supply
 - Urinary bladder - Structure, blood supply and sphincter control
- Prostate:
 - Lobes
 - Blood supply
 - Lymphatic drainage

- Pelvic Diaphragm:
 - Structure
 - Opening
 - Functions and Nerve supply
- Perineal Region:
 - Superficial & Deep Perineal Pouches with their sex differences
 - The Ischio-anal fossa
 - Male and Female external genitalia
 - Anal sphincter

Head and Neck:

- Muscles of the face: Their Nerve supply & effects of paralysis
- Muscles of mastication: Their Nerve supply and actions
- Muscles of the tongue: Their actions, nerve supply and lymphatic drainage
- The Scalp, its layers, clinical significance and its Blood and nerve supply
- The Oral cavity
- Salivary glands:
 - Their gross structure
 - Relations and Nerve supply
- Lateral Wall of the Nose and Nasal Septum
- Gross anatomy of the External, Middle and Internal ear
- Structure of the Eye ball
- Extra Ocular Muscles and their actions
- Fascia of Neck:
 - The Deep cervical fascia, its arrangement & sub-divisions
 - Gross anatomy, relation and blood supply of the Thyroid and parathyroid glands
- Triangles of Neck:
 - Boundaries, contents and sub divisions of the Anterior and Posterior Triangles of the Neck
 - The Pharynx, its subdivisions, the internal and external features of each division and the gaps between these divisions and important structures passing through these gaps
 - Larynx –Its skeleton (Cartilages) Connective tissue element (Membranes), Extrinsic and intrinsic Muscles, their nerve Supply and actions.
 - Mechanism of deglutition

- Vessels in the neck and their distribution:
 - Common and external Carotid arteries: Their course and branches
 - The Internal and External Jugular veins and their tributaries
 - Intra & extra cranial courses of individual Cranial Nerves
- Cervical lymph drainage:
 - Nodes and area of drainage
 - The Cervical Plexus

PHYSIOLOGY

Respiratory System:

Respiration:

- Pulmonary volume and capacities:
 - Pulmonary Function Tests
 - Mechanics of Respiration
 - Transport of gases between the lungs & the tissues
 - Diffusion of oxygen and carbon dioxide through the respiratory membrane

Regulation of Respiration:

- Neural Control of Breathing
- Chemical Control of Breathing, Peripheral chemoreceptors

Respiratory Adjustments:

- Hypoxia
- Hypercapnia and Hypocapnia
- Oxygen treatment
- Artificial ventilation
- Cyanosis
- ABGs

Pulmonary Circulation

Cardiovascular System:

Heart:

- Physiology of cardiac muscle.
- Regulation of heart pumping, cardiac output & venous return
- Electrical activity of the heart-electrocardiogram
- Heart block
- Control of Rhythmicity, Cardiac arrhythmias

Circulation:

- Capillary fluid exchange
- Exchange of water, nutrients between the blood & interstitial fluid; lymph flow
- Nervous regulation of circulation & control of arterial pressure
- Role of kidneys in long term regulation of arterial pressure
- Renin-Angiotensin system
- Shock, its types, mechanisms involved in each type

Gastro Intestinal System:

- Neural control of G.I.T. functions
- Hormonal control of motility
- Mastication and Swallowing - Mechanism
- Regulation of movements of stomach and intestine
- Secretory function of the alimentary tract
- Principles of Gastro intestinal absorption
- Metabolic functions of the liver
- Secretion of bile from the liver & its function

Renal System:

- Functions of kidneys in homeostasis
- Glomerular filtration and regulation of tubular reabsorption
- Filling of bladder and bladder wall tone - cystometry
- Micturition reflex

Endocrine System:

- Pituitary gland & its relation to hypothalamus-growth hormone
- Formation and secretion of thyroid hormones
- Regulation of secretion of thyroid hormones
- Function of the Pancreas and Regulation of carbohydrate metabolism
- Synthesis and Function of Adrenocortical Hormones
- Regulation of Adrenal Medullary secretion
- Role of Parathyroid Hormone in control of calcium metabolism. Physiology of bone and teeth

Reproductive System:

- Control of testicular Function-Sex hormones, spermatogenesis
- Control of ovarian function
- Physiological changes during pregnancy
- Lactation - Functions of prolactin

Nervous System:

- Sensory and Motor Nervous System
- Central regulation of Visceral function Mechanism of Visceral Pain
- Autonomic Nervous system - Autonomic reflexes
- Control of Posture and movement.
- Somatic sensations - pain, headache and thermal sensations- Ascending tracts
- Functions of the thalamus
- Referred Pain
- Major levels of C.N.S Function
- Motor cortex and corticospinal tract
- Role of brain stem in controlling motor function
- Extrapyramidal system
- Contribution of cerebellum & basal ganglia to overall motor control
- The limbic system and the hypothalamus
- Spinal cord, functions and Reflexes
- Brown-Sequard syndrome

Special Senses:

- Neurophysiology of Vision
- Sense of hearing, smell and taste

PHARMACOLOGY

- Antibiotics
- Analgesics
- Local and general anaesthetics
- Diuretics, fluids/Electrolytes, Inotropic agents, TPN
- Antithyroid drugs
- Antiseptics and disinfectants

PATHOLOGY

- Types of biopsies
- Specimens handling and request form filling
- Disorders of R.B.C - Causes
- Diminished erythropoiesis
- Disorders of white cells - Non-neoplastic and Neoplastic
- Disorders of spleen

- Bleeding disorders - thrombocytopenia, thrombocytosis, platelet function defects and Disseminated Intravascular Coagulation
- Coagulation disorders
- Pathology of lymphoid tissue
- Clinical manifestations and investigations for common cancers like brain tumors, neck tumors, lung cancers, esophagus, stomach, pancreas cancers, HCC, cholangiocarcinoma, colorectal cancer, genitourinary cancer and soft tissue/musculoskeletal malignancies
- Effects of tumor, paraneoplastic syndromes
- Grading and staging of cancer
- Laboratory diagnosis of cancer
- Causes of Sepsis - Sterilization/infection prevention measures
- Microorganisms responsible for surgical infections
- Hepatitis B and C infections - Transmission and Precautions
- Common Viral, Chlamydial and fungal diseases and their mode of transmission
- Modes of transmission and pathogenesis of common parasitic diseases in Pakistan including amoebiasis, malaria, hydatid diseases and worm infestations
- Pathology of arterial and venous diseases
- Secondary hypertension due to renal pathology
- Clinical manifestations and investigations for common surgical conditions like, acute cholecystitis, gall stones, acute / chronic pancreatitis, intestinal obstruction, obstructive jaundice, peritonitis, hematuria, acute appendicitis, dysphagia, goiter, hematemesis, hemoptysis, bleeding per rectum and abdominal wall abnormalities

EXAMINATION SCHEDULE

The FCPS Part-I examinations will be held four times a year as per schedule notified on CPSP website.

- The computer-based examination is held at headquarter and specified regional centres. At present, the centres are Karachi, Quetta, Hyderabad, Larkana, Bahawalpur, Multan, Lahore, Faisalabad, Islamabad, Peshawar, Abbottabad and Gilgit. Overseas Centres are Riyadh in Saudia Arabia, Kathmandu in Nepal and Birmingham in UK.
- Medium of examinations will be English.
- Any change in the dates and format of the examinations will be notified by the College before the examinations.
- Every successful candidate in FCPS Part-I examinations will be issued a letter to enable him/her to seek placement for training in a recognized training institute after which he/she will have to register with R&RC.
- The competent authority of the College has the power to debar any candidate from any examination if it is satisfied that such a candidate is not a fit person to take the College examinations because of using unfair means/ misconduct or other disciplinary reasons.

EXAMINATION FEES

- Applications along with the prescribed examination fee and required documents should be submitted latest by the last date notified for this purpose before each examination.
- The details of examination fee and fees for change of centre, subject, etc. shall be notified before each examination.
- Fees deposited for a particular examination, shall not be carried over to the next examination in case of withdrawal / absence/ exclusion.

PAYMENT OF EXAMINATION FEE

For appearing in examination in Pakistan:

- Fee may be deposited in any branch of Meezan Bank, throughout Pakistan, in favour of 'College of Physicians and Surgeons Pakistan Karachi'.
- Fee may also be paid online by using debit/credit card.

For appearing in examination in Kathmandu, Riyadh & Birmingham, the fee may be deposited as indicated in the examination form and its annexed notification.

REFUND OF FEES

On a written request for not appearing in the examination, submitted up to the last date of withdrawal of application, the refund is admissible to the extent of 75% of fees only. No request for refund will be accepted after the last date of withdrawal of the application. In case the application of a candidate is rejected by the CPSP, 75% of the examination fee will be refunded, after deducting 25% as processing charges. No refund will be made, for fees paid for any other reason, e.g. late fee, change of centre/subject fee, etc.

FORMAT OF EXAMINATION

The examinations shall consist of two theory papers (Paper-I and Paper-II), consisting of 100 MCQs (One Best Type) each.

PAPER-I: will contain questions from the core knowledge of the following subjects:

- Anatomy
- Physiology and Biochemistry
- Pathology
- Pharmacology
- Research and Biostatistics
- Behavioural Sciences and Medical Ethics

PAPER-II: will contain questions from specialty related Basic Medical Sciences that call for application of Basic Medical Sciences to surgical disorders and their management.

Validity of FCPS-I

- A candidate who successfully qualifies FCPS Part-I examination is required to register as FCPS resident within three years of passing FCPS Part-I.
- The validity of FCPS Part-I Exam shall vary with the presence or absence of Intermediate Module (IMM) in the specialty:

Specialty programs with Intermediate Module (IMM):

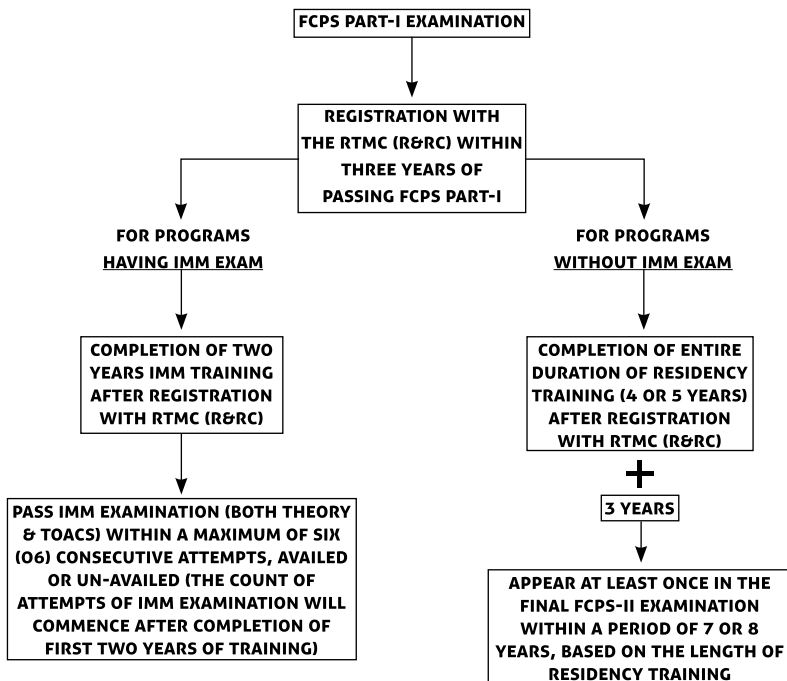
Following registration with the RTMC (R&RC), the resident must pass Intermediate Module (IMM) examination (both Theory & TOACS) within six (06) consecutive attempts, availed or un-availed, from the date of completion of two years in training.

Specialty programs without Intermediate Module (IMM):

Following registration with the RTMC (R&RC), the resident must appear at least once in the final FCPS-II examination within a period of 7 or 8 years depending upon the length of their residency training (4 or 5 years) plus 3 years.

Note:

Failure to comply with the above mentioned policies will result in the pass status of FCPS Part-I to become null and void. The candidate will therefore be required to re-appear and pass FCPS Part-I examination to keep the residency status alive and to make further attempts in IMM or FCPS-II examination.



Note:

Failure to comply with the above mentioned policies will result in the pass status of FCPS Part-I to become null and void. The candidate will therefore be required to re-appear and pass FCPS Part-I examination to keep the residency status alive and to make further attempts in IMM or FCPS-II examination.

THE COLLEGE RESERVES THE RIGHT TO ALTER/AMEND ANY RULES/REGULATIONS

Any decision taken by the College on the interpretation of these regulations will be binding on the applicant.

Published: 13 October 2023

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