L	Т	Р	С
1	0	4	3

#### **Introduction:**

The goal of medical imaging is to diagnose and treat patients using images. A number of technologies are used in medical imaging, including fluoroscopy, endoscopy, magnetic resonance imaging (MRI), X-ray cardiography, elastography, and tactile imaging. Internal structures hidden by the skin and bones are revealed by medical imaging. It generates an anatomy and physiology report on the human body that is used to diagnose diseases. To track down a process of a troubling illness, medical imaging is highly necessary. With the use of MRIs and CT scans, medical professionals may assess the efficacy of a patient's care and make necessary adjustments. Patients receive better care through the information provided by medical imaging.

#### **Course Objectives:**

- > To discuss the fundamentals of digital images and image processing methods.
- To study the various image transforms and filtering techniques in spatial domain and frequency domain for enhancement.
- > To discover the principles filtering techniques for image restoration.
- > To identify the segmentation techniques for feature extraction from images and classification.
- > To study different image compression techniques for medical images.

#### **Course Outcomes:**

On successful completion of this course, the student will be able to

CO1: Understand the basics of digital images and image processing methods.

CO2: Examine image enhancement techniques in medical images such as X-ray and CT- images.

CO3: Apply different filtering techniques to restore the blurred image.

CO4: Execute segmentation and classification techniques in medical images.

CO5: Demonstrate the image coding and compression techniques in medical images.

#### **Pre-requisites:**

Programming in MATLAB



#### **CO/PO Mapping**

CO / PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	1	1	1	1	1	1
CO2	2	3	2	2	2	1	1
CO3	2	3	3	2	2	1	1
CO4	3	3	3	2	2	1	1
CO5	2	3	3	2	2	1	1

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

#### **Instructional Strategy:**

- Engage and Motivate: Instructors should actively engage students to boost their learning confidence.
- **Real-World Relevance:** Incorporate relatable, real-life examples and engineering applications to help students understand and appreciate course concepts.
- **Interactive Learning:** Utilize demonstrations and plan interactive student activities for an engaging learning experience.
- **Application-Based Learning:** Employ a theory-demonstrate-practice-activity strategy throughout the course to ensure outcome-driven learning and employability.
- **Simulation and Real-World Practice:** Conduct demonstrations and hands-on activities in a simulated environment, transitioning to real-world scenarios when possible.
- **Encourage Critical Analysis:** Foster an environment where students can honestly assess experiment outcomes and analyze potential sources of error in case of discrepancies.



#### Assessment Methodology

	Continuous Assessment (40 marks)				End Semester			
	CA1	CA2	CA3		Examination (60 Marks)			
Mode	Assignment	Record Writing	Written Practical Examination Examination		Written Examination	Practical Examination		
Duration	-	-	1 Hour	2 Hours	1 Hour	2 Hours		
Exam Marks	20	10	20	80	20	80		
Converted to	10	10	20		e	50		
Marks	40 60							

#### Note:

• CA 3 Model Examination shall be conducted similar to End Semester Examination which comprises of 100 Marks in which **80 Marks are allocated for Practical** and **20 Marks are allocated for Theory Question pattern.** 

#### Allocation of Marks for End Semester Board Practical Examination and Model Practical

#### Examination

**Practical part (All Experiments)** 

Part	Description	Marks
A	Circuit Diagram	35
В	Procedure/Algorithm	10
С	Connections/Execution	20
D	Output/Result	10
Е	Viva voce	5
	TOTAL MARKS	80



L	Т	Р	С
1	0	4	3

Model Examination /End Semester Examination					
Part	Description	Marks			
Theory	10 Questions to be answered out of 15 Questions, Each Question carries 2 Marks( <b>10Q X 2=20</b> <b>Marks</b> )	20			
Practical	As per Allocation of marks in Practical Part	80			
	Total	100			
		X			

r					
1146235444	MEDICAL IMAGING TECHNIQUES	P C			
Practicum		4 3			
UNIT 1	IMAGE PROCESSING FUNDAMENTALS				
Fundamental steps i	in image processing- Digitizing an image, medical image formats,				
image quality and in	nformation content – histogram, entropy	3			
Experiments					
1. Read th	he given colour image and display the corresponding the gray scale image	12			
and his	togram of that image in MATLAB.				
2. Read th	e given input image and find the entropy of that image in MATLAB.				
UNIT II	MEDICAL IMAGE ENHANCEMENT				
Digital subtraction	angiography, image averaging, gray scale transforms, Histogram				
transformation, Co	ntrast enhancement, Low pass and high pass filtering in spatial and	3			
frequency domain, application to x-ray images and ultra sound images.					
Experiments					
3. Read the	e given x-ray image using MATLAB software and perform contrast				
enhanceme	nt.				
	e given x-ray image using MATLAB software to remove the noise using	12			
spatial low	pass filters. Compare the performance of filters.				
5. Read the	CT image of the given lungs image, perform intensity Enhancement, and				
extract the nodules in the lungs using MATLAB software.					
UNIT III	MODELING IMAGE DEGRADATION				
Inverse filtering, Wi	ener filtering, motion de blurring, blinded blurring.	3			
Experiments		12			
6. Restore the given blurred imaged using inverse filter					
	he given blurred imaged using Wiener filter				
UNIT IV	MEDICAL IMAGE ANALYSIS AND CLASSIFICATION				
0 0	n -pixel based, edge based, and region based morphological operations.				
•	hapes and contours, shape factors, statistical analysis of texture. Feature	3			
extraction and image	ge classification, CT and MRI images.				



Experiments						
8. Perform	segmentation of the given image using (i) single and Multi-threshold.					
Compare th	ne outputs.					
9. Perform morphological operations on the given image and Perform background subtraction.						
10. Segme	nt the tumour from the given MRI image using MATLAB software and	12				
determine i	ts area and perimeter.					
11. Proces	s the given endoscopic images and extract the tumor detected using					
MATLAB	software.					
12. Extract	the blood vessels from the given retinal image using MATLAB software.					
Classify the	e given images using simple neural network classification.					
UNIT V	IMAGE COMPRESSION					
Lossy Vs lossless c	compression, distortion measures and fidelity criteria, direct source coding,					
transform coding, p	redictive coding, Image coding and compression standards, application to	3				
medical images.						
Experiments						
13. Compress the given image using Huffman code.						
14. Perform	i jpeg compression on the given image. Calculate the compression ratio.					
	Total	75				

#### Reference

- Rafael C. Gonzales, Richard E.Woods, "Digital Image Processing", 2016, 3<sup>rd</sup> edition, Pearson Education, Noida.
- 2. Birkfellner, W., 2015. Applied medical image processing: a basic course. CRC Press.
- 3. Rafael C. Gonzalez, Richard E. Woods, Steven L. Eddins, "Digital Image Processing Using MATLAB", Third Edition Tata McGraw Hill Pvt. Ltd., 2011.
- 4. Anil Jain K. "Fundamentals of Digital Image Processing", PHI Learning Pvt. Ltd., 2011.
- 5. William K Pratt, "Digital Image Processing", John Willey, 2002.
- 6. Malay K. Pakhira, "Digital Image Processing and Pattern Recognition", First Edition, PHI Learning Pvt. Ltd., 2011.
- Geoff Dougherty, Medical Image Processing: Techniques and Applications, Springer Science & Business Media, 25-Jul-2011.
- Isaac N. Bankman, Handbook of Medical Image Processing and Analysis, Science Direct, 2nd Edition -2009.

#### Web-based/Online Resources:

- 1. <u>https://in.mathworks.com/learn/training/image-processing-with-matlab.html</u>
- 2. <u>https://www.youtube.com/playlist?list=PL9be9JpeQ7IN3dsbnAMyDmgpVmrt6WJWR</u>
- 3. https://www.javatpoint.com/digital-image-processing-tutorial
- 4. <u>https://www.electronicsforu.com/electronics-projects/image-processing-using-matlab-part-1</u>



# Equipment / Facilities required to conduct the Practical Course. (Batch Strength: 30 Students)

- 1. Windows 10 or higher operating system / Linux Ubuntu 20 or higher
- 2. MATLAB or Python
- 3. Open CV





#### Introduction

Very Large-Scale Integration technology, when especially used for designing digital systems, it is mandatory that the behavior of the required system to be described (modeled) and verified (simulated)before synthesis, translate the design into real hardware fabrication in the foundry (gates and wires). Hardware Description Language (HDL) allows designs to be described using any methodology-top down, bottom-up approach. VHDL can be used to describe hardware at the gate level or in a more abstract way. This course is to introduce the digital system design concepts through hardware description Language, VHDL programming, design flow of VLSI and architectures of CPLD, FPGA. It is mainly aimed at design of combinational and sequential functions simulate or verify their functionality using Hardware Description Language (HDL).

#### **Course Objectives**

The objective of this course is to enable the student to

- 1. Understand the concepts of VLSI design process.
- 2. Develop a VHDL code for combinational circuit.
- 3. Develop a VHDL code for sequential circuit.
- 4. Develop a VHDL code for any digital circuits.
- 5. Understand the concepts of digital circuits / logic function by simulating VHDL programs through XILINX software.
- 6. Understand the concepts of digital circuits by using FPGA kit.
- 7. To know the usage of input switches, output LEDs and seven segment display in FPGA kit

#### **Course Outcomes**

On successful completion of this course, the student will be able to

- CO1: To learn CMOS concepts of VLSI design process logic design.
- CO2: To prepare the student to understand the VHDL language feature to realize the complex digital systems.



CO3: To design and simulate sequential and concurrent techniques in VHDL.

CO4: To explain modeling of digital systems using VHDL and design methodology

CO5: To Understand behavioural, non-synthesizable VHDL and its role in modern design.

**Pre-requisites:** Digital Electronics

#### **CO/PO Mapping**

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	2	3	1	1	3
CO2	3	2	2	3	1	1	3
CO3	3	2	2	3	1	1	3
CO4	3	2	2	3	7	1	3
CO5	3	2	2	3	1	1	3

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

#### Instructional Strategy

• It is advised that teachers take steps to stimulate pupils' attention and boost their learning confidence.

• To help students learn and appreciate numerous concepts and principles in each area, teachers should provide examples from daily life, realistic situations, and real-world engineering and technological applications.



#### Assessment Methodology

	Continuous Assessment (40 marks)				End Semester			
	CA1	CA2	CA3		Examination (60 Marks)			
Mode	Assignment	Record Writing	Written Practical Examination Examination		Written Examination	Practical Examination		
Duration	-	-	1 Hour	2 Hours	1 Hour	2 Hours		
Exam Marks	20	10	20	80	20	80		
Converted to	10	10	20		6	0		
Marks		4	0		6	0		

Note:

• CA 3 Model Examination shall be conducted similar to End Semester Examination which comprises of 100 Marks in which 80 Marks are allocated for Practical and 20 Marks are allocated for Theory.

Allocation of Marks for End Semester Board Practical Examination and Model Practical Examination

**Practical part (All Experiments)** 

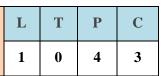
Part	Description	Marks
А	Circuit Diagram	35
В	Procedure/Algorithm	10
С	Connections/Execution	20
D	Output/Result	10
Е	Viva voce	5
	TOTAL MARKS	80



	Model Examination /End Semester Examination						
Part	Description	Marks					
Theory	10 Questions to be answered out of 15 Questions, Each Question carries 2 Marks( <b>10Q X 2=20</b> <b>Marks</b> )	20					
Practical	As per Allocation of marks in Practical Part	80					
	Total	100					

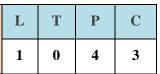
114623	35441		L	Т	Р	C
Practi	icum	Basics of VLSI Design		0	4	3
Unit I	INTRO	DUCTION TO VLSI and VHDL				
Theory						
1.1 NM	OS, CMO	S logic:				
NOT, AN	ND, OR, N	AND, and NOR Gates using NMOS - NOT, AND,				
OR, NAN	ND, and N	OR Gates using CMOS - Implementation of logic func-	tion (SO	P, POS)	in	
CMOS.						
						3
		ON TO VHDL:				5
		ypes of modeling – General format for VHDL program.				
	DL staten					
	—	s statement, if statement, if else statement, if else if				
		for signal declaration and signal assignment statement	–Syntax	for varia	able	
declaratio	n and vari	able assignment statement, component declaration.				
Practical						6
		tudy the VLSI Design Process.				
Experimen		<i>llation of VHDL Code for Logic gates (NOT, AND, OR).</i> Develop code for logic gates. Simulate the code in the soft	ware			6
<b>T</b> T <b>0</b> / <b>T</b> T			ware.			-
Unit II	COMBI	NATIONAL CIRCUIT DESIGN - I				
Theory						
	-	der, Half subtractor and Full subtractor - VHDL program	for Half	adder, 1	Full	3
adder – V	HDL prog	ram for Hall subtractor and Full subtractor.				5
Practical						





	t #3: <i>Simulation of VHDL Code for Adder (Half Adder and Full Adder).</i> velop code for half adder and full adder. Simulate the code in the software.	6
	t #4: Simulation of VHDL Code for Subtractor (Half Subtractor and Full Subtractor).	
	p code for half subtractor and full subtractor. Simulate the code in the software.	
Unit III	COMBINATIONAL CIRCUIT DESIGN - II	
	8 to 1 Mux, 1 to 4 and 8 to 1 Demux, 4 to 2 and 8 to 3 Encoder, 2 to 4 and 3 to 8 decoder. gram for 4 to 1 and 8 to 1 Mux, 1 to 4 and 8 to 1 Demux, 4 to 2 and 8 to 3 Encoder, 2 to 4 decoder	3
<b>Practical</b> Experimen	t #5: <i>VHDL Implementation of 1 to 8 Demultiplexer.</i> Develop the code for a 1 to 8 Demultiplexer and implement it in FPGA kit in which Switches are connected for select inputs and a data input, Eight LEDs are connected to the output of the circuit.	6
Experimen	t #6: <i>VHDL Implementation of 8 to 3 Encoder</i> . Develop code for 8 to 3 encoder. There will be 8 switches and 3 LEDs in the FPGA kit. The input given from switches and it is noted that any one of the switch is active. The binary equivalent for the corresponding input switch will be glowing in the LED as output.	
		6
Unit IV	SEQUENTIAL CIRCUIT DESIGN - I	
<b>Theory</b> Flip-flops-	- JK, D and T Flip-flops. VHDL program for JK, D and T Flip-flops	3
<b>Practical</b> Experimen	t #5: VHDL Code for JK Flipflop (by Simulation or Implementation).	6
1	Develop the code for JK flipflop and simulate using software or implement it in FPGA kit.	6
Experimen	t #6: <i>VHDL Code for D Flipflop (by Simulation or Implementation).</i> Develop the code for D flipflop and simulate using software or implement it in FPGA kit.	
Unit V	SEQUENTIAL CIRCUIT DESIGN - II	
Theory		
Ring Cou	3 Bit Up Counter, 3 Bit DownCounter And 3 Bit Up/Down Counter, Decade counter, nter and Johnson counter. VHDL program for 3 Bit Up Counter, 3 Bit DownCounter And Down Counter, Decade counter, Ring Counter and Johnson counter.	3





#### Practical

Experiment #5: <i>VHDL Implementation of Blinking an Array of LEDs.</i> Design and develop a VHDL Code for 4 bit binary up counter. Four LEDs are connected at the output of the counter. The counter should up for every one second.	6
Experiment #6: <i>VHDL Implementation of a Speller with an array of LEDs</i> Design and develop VHDL Code for a 5 bit Johnson ring counter 4 bit The LEDs are connected at the output of the counter. The speller should work for every one second.	6
TOTAL HOURS	75

#### Suggested List of Students Activity

- 1. Assignments
- 2. Group Activity
- 3. Quiz related to VHDL program

#### Reference

- M. Morris Mano, Michael D. Ciletti, Digital Design: With an Introduction to the Verilog HDL, VHDL, and System Verilog, Pearson Education, 2018.
- 2. J Bhasker, A VHDL Primer, Pearson Education India, 2015.
- 3. Neil H. E. Weste, CMOS VLSI Design: A Circuits and Systems Perspective, Pearson Education India,2015.
- 4. Lizy Kurian John , Charles H. Roth, Digital System Design Using VHDL, Cengage, 2012.

#### Web-based/Online Resources

- https://www.ece.tufts.edu/es/4/
- <u>https://nptel.ac.in/courses/117108040</u>
- https://archive.nptel.ac.in/courses/106/105/106105161/#

#### List of Equipment's

• FPGA KIT with atleast 10 switches for input, 8 LEDs for output, a 7-segment display, debounced push switch (2 Nos) for manual clock input and external clock source – 10Nos with software.



6

#### Introduction:

This subject makes the students to understand the definition for Embedded Systems. It also enables the students to have the knowledge about the different architectures, RISC and CISC processors. This subject makes the students to understand about RTOS. To specific, the subject deals with ARM7 RISC processor and the on chip peripherals of LPC 2148.

#### **Course Objectives:**

The objective of this course is to Students will able to know

- > On completion of the syllabus, the students must be able to
- Understand ARM7 Processor.
- Understand the architecture of LPC 2148.
- Understand ARM7 instruction set.
- Understand the types of buses.
- Explain On chip peripherals.
- Have clear knowledge about RTOS concepts.

#### **Course Outcomes:**

After successful completion of this course, the students should be able to

CO1: Student can perform practical experiments on embedded systems.

CO2: Understand the properties of ARM7.

CO3: Have a sound knowledge of buses and peripherals.

CO4: Understand the application of on chip peripherals.

CO5: The application of RTOS Concepts.

#### **Pre-requisites:**

Knowledge of microcontroller and microprocessor.



#### **CO/PO Mapping**

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	2	3	1	1	3
CO2	3	2	2	3	1	1	3
CO3	3	2	2	3	1	1	3
CO4	3	2	2	3	1	1	3
CO5	3	2	2	3	1	1	3

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

#### **Instructional Strategy:**

- ➢ Focus on controllers and peripherals.
- ▶ Focus on LPC2148.
- Conduct laboratory-based activities.

#### Assessment Methodology

	С	ontinuous Asses	ssment (40 marl	ks)	End Semester				
	CA1	CA2	C	CA3 End Serie Examinat (60 Marl					
Mode	Assignment	Record Writing	Written Examination	Practical Examination	Written Examination	Practical Examination			
Duration	-	-	1 Hour	2 Hours	1 Hour	2 Hours			
Exam Marks	20	10	20	80	20	80			
Converted to	10	10	20		6	0			
Marks		4	0		6	0			



Note:

• CA 3 Model Examination shall be conducted similar to End Semester Examination which comprises of 100 Marks in which 80 Marks are allocated for Practical and 20 Marks are allocated for Theory Question pattern:

Allocation of Marks for End Semester Board Practical Examination and Model Practical Examination

Part	Description	Marks
А	Circuit Diagram	35
В	Procedure/Algorithm	10
С	Connections/Execution	20
D	Output/Result	10
E	Viva voce	5
	TOTAL MARKS	80

**Practical part (All Experiments)** 

	Model Examination /End Semester Examination					
Part	Description	Marks				
	10 Questions to be answered out of 15 Questions,					
Theory	Each Question carries 2 Marks(10Q X 2=20	20				
	Marks)					
Practical	As per Allocation of marks in Practical Part	80				
	Total	100				



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Practicum		EMBEDDED SYSTEMS	1	0	4	3		
Unit I	Unit I Introduction to Embedded Systems and ARM Processor							
THEORY								
Definition of E	mbe	dded System - Features of Embedded System - Types of En	nbedc	led		(		
System – List o	f Em	bedded System Devices- Harvard and Von-Neumann architecture	es-RI	SC		6		
and CISC Proce	ssor							
PRACTICAL						10		
Experiment	#1: \$	Study of ARM Processor kit.(Example LPC 2148 kit)				12		
Experiment	#2:`	Write assembly language program for addition, subtraction and						
	Ν	Aultiplication and simulate						
Unit II		ARM Instruction Set						
THEORY								
ARM state ins	truct	ion set- Data processing instructions-Branch instructions- Lo	ad-st	ore		6		
instructions - Program status register instructions - stack instructions-Conditional execution.								
PRACTICAL								
Experiment #3:	Writ	e and execute C program to blink the LEDs using software delay				12		
	routi	ne.						
Experiment #4:	Writ	e and execute C program to blink the LEDs using on chip						
•		e and execute C program to blink the LEDs using on chip ER//COUNTER for the delay (Using Polling method).						
•								
· ,		ER//COUNTER for the delay (Using Polling method).						
Unit III THEORY	ΓΙΜΙ	ER//COUNTER for the delay (Using Polling method).	eriphe	ral				
Unit III THEORY LPC 2148 ARM	TIMI	ER//COUNTER for the delay (Using Polling method). LPC 2148 Controller	•			6		



L	Т	Р	С
1	0	4	3

PRACTICAL		12
Experiment #5:	Write and execute C program to read the switch and display	12
Experiment #6:	in the LEDs Write and execute C program to display a number in seven segments LED.	
-		
Unit IV	LPC 2148 Peripherals	
THEORY		
Pin connect bl	ock-Features-pin connect block register description-GPIO (Slow)- Features-	
register descrip	tion. UART features – UART0 Block diagram—UART0 register description.	6
PRACTICAL		
Experiment #7:	Write and execute C program for serial transmission and reception using	12
	on chip UART. Send the received character back to the PC by Polling method.	
Experiment #8:	Write and execute C program for PWM generation & View the output in	
	CRO.	
Unit V	Operating System	
THEORY		
Embedded OS	and RTOS	
Introduction to	OS-Functions of OS-Embedded OS- Foreground/background systems -Real	6
	concepts- Resources-shared resources-Critical section- multitasking-Tasks-	U
kernel- Schedu	er-Round Robin-Non Pre-emptive and Pre-emptive scheduling.	
PRACTICAL		
Experiment #9:	Write and execute C program to interface Stepper motor.	12
Experiment #10	): Write and execute C program for PWM generation & View the output in	
	CRO	
	TOTAL HOURS	75

### Suggested List of Students Activity

- > Presentation by students on any recent technological developments based on the course
- > Periodic quizzes conducted on a weekly based on the course
- Students can visit nearby hospital to know more about equipment and hands on experience



#### DIRECTORATE OF TECHNICAL EDUCATION, CHENNAI – 600 025 2023 REGULATION

#### Reference

- Pelezar TR M J chan ECS and Kreig NR" "Microbiology", Fifth edition, Tata Mc Graw-HillINC.New York (2006).
- "Anathanarayan R and Jayaram Paniker CK" "Text book of Microbiology", Seventh edition, Orient Longmam Limited, Hyderabad (2005).
- 3. "Dubey RC and MaheswariDK" "A text of microbiology", Revised edition, S.Chand andCompany Ltd., New Delhi (2012).

#### Note

- 1. Manual for the ARM instruction sets and manual for the trainer kit (Excluding sample program) can be allowed for their board exam.
- 2. Definition for built in function for the board can be given to students for their board function.
- 3. Manual containing procedure for program down loading through boot loader or JTAG can be given to students for their board exam.
- 4. Bit details of Registers of on chip peripheral devices can be given for the board practical examination.

#### LIST OF EQUIPMENTS

- 1. RM7 TDMI KIT 15 numbers with interface boards for the above experiments The chip set may be TMS4701,LPC2138, LPC2148 or STR7 etc.
- 2. Desktop computer / Laptop -15 Nos
- 3. Interfaces: Seven segment display. LEDS, switches and stepper motor.
- 4. Manual for the trainer kit and Interfaces.
- 5. Manual for the built in function for the board.
- 6. Bit details of registers of on chip peripherals.



#### Introduction

A health service is one of the important and growing sectors in India. With the prospect of doubling the amount of skilled workforce as a part of this sector, it gets more significance. This elective course aims at imparting foundational theoretical knowledge about Hospital Management.

#### **Course Objectives**

- 1. To impart the theoretical knowledge about Hospital management.
- 2. To introduce the principles, practices and areas of application in Hospital management.

#### **Course Outcomes**

On successful completion of this course, the student will be able to

- CO1: Explain the principles, practices and areas of application in Hospital Management.
- CO2: Understand the biomedical waste disposal concept.
- CO3: Explain the importance of supportive services.
- CO4: Comprehend the quality aspect specified by the international standards.
- CO5: Knowledge on Hospital safety.

collomapping								
CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7	
CO1	3	1	1	1	1	1	3	
CO2	3	1	3		1	1	3	
CO3	3	1	1	1	1	1	3	
CO4	3	1	1	1	1	1	3	
CO5	3	1	1	1	1	1	3	

#### CO/PO Mapping

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation



#### **Instructional Strategy**

- Engage and Motivate: Instructors should actively engage students to boost their learning confidence.
- Real-World Relevance: Incorporate relatable, real-life examples of hospital management to help students understand and appreciate course concepts. Case Studies can be employed.
- Interactive Learning: Utilize demonstrations and plan interactive student activities for an engaging learning experience.
- Application-Based Learning: Employ a theory-demonstrate-practice-activity strategy throughout the course to ensure outcome-driven learning and employability.
- Encourage Critical Analysis: Foster an environment where students can honestly access case studies to analyse and critique theoretical application.

	(	End Semester			
	CA1	CA2	CA3	CA4	Examination (60 Marks)
Mode	Written Unit I & II (at the end of 6 <sup>th</sup> week)	Written Unit III & IV (at the end of 12 <sup>th</sup> week)	Written Model Exam Units I to V	Quiz/MCQ/ Activity/ Assignment	Written Examination
Duration	2 hours	2 hours	3 hours	2 hours	3 hours
Exam Marks	60	60	100	100	100
Converted to	20	20	10	10	60
Marks	2	20	2	60	

#### **Assessment Methodology:**

#### Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the question pattern.
- CA4 Online quiz examination (MCQ) should be conducted covering the complete syllabus.



#### **Question pattern:**

	CA1 & CA2 Assessment								
Part	Description	Marks							
Α	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each							
		question carries 2 marks)							
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each							
		question carries 7 Marks)							
	CA3 Assessment								
Part	Description	Marks							
А	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each							
		question carries 2 marks)							
В	Answer all 5 questions, choosing any 2 sub-	(5Q X 14 =70 Marks)(7+7)							
	divisions out of 3 from each question under								
	Part –B.								

114623611	3 HOSPITAL MANAGEMENT	L	Т	Р	С	
Theory	HOSTITAL MANAGEMENT	3	0	0	3	
Unit I	Introduction to Hospital Management					
Glob	al and Indian scenario of Healthcare Industry-Pharmaceuticals, Medical	Equip	oment,			
Biotechnolog	y, Information Technology, Medical Tourism; Basic Concepts in Manageme	nt; Ho	ospital	tal		
Management	- Introduction; Managing a Service Organization; Distinction between H	Iospita	and	1 9		
Industry; Cha	allenges in Hospital Administration; Hospital Planning; Distinction between I	Hospit	al and			
Industry, Cha	llenges in Hospital Administration	_				
Unit II	Hospital Management Support Systems					
Intro	duction to Hospital Management Support Systems; Clinical Support;	Inform	nation			
Support Hospital MIS; Administrative Support Systems; Medical Transcription, Medical Records						
Department; Central Sterilization and Supply Department; Pharmacy; Food Services; Laundry						
Services.						
Unit III	Human Resource Management in Hospitals					

X



	TOTAL HOURS	45				
Safety in a ho	ospital Setup.					
Safety Rules;	Health Insurance & Managing Health Care; Medical Audit; Hazard and					
Management	Systems; NABA, JCI, NABL Security; Loss Prevention; Fire Safety; Alarm System;	9				
auditing; Inte	ernational Standards ISO 9000 – 9004 – Features of ISO 9001 – ISO 14000; Environment					
Qual	ity system - Elements, implementation of quality system, Documentation, Quality					
Unit V	Quality and Safety Aspect in Hospitals					
business buye	er behavior; Major types of buying situations; WTO and its implications.					
Consumer B	uyer Behaviour; Model of consumer behaviour; The buyer decision process; Model of	9				
information;	Market Research process; Other market research considerations - Consumer Markets &	0				
Mark	teting information systems; Assessing information needs, developing & disseminating					
Unit IV	Marketing Research Process					
and r	nodes of communication.					
Training Pr	omotion and Transfer, Communication – nature, scope, barriers, styles					
Training Gu	idelines; Methods of Training; Evaluation of Training; Leadership grooming and	9				
Resource Inventory; Manpower Planning; Different Departments of Hospital; Recruitment, Selection,						
Princ	tiples of HRM; Functions of HRM; Profile of HRD Manager; Tools of HRD; Human					

#### Suggested List of Students Activity

• Periodic class quizzes shall be conducted on a weekly or fortnight basis.

Reference

- 1. R.C.Goyal, "Hospital Administration and Human Resource Management", PHI Fourth Edition, 2006.
- G.D.Kunders, "Hospitals Facilities Planning and Management ,TMH, New Delhi, Fifth Reprint 2007.
- 3. Cesar A.Caceres and Albert Zara, "The Practice of Clinical Engineering, Academic Press, New York, 1977.
- 4. Norman Metzger, "Handbook of Health Care Human Resources Management", 2nd edition, Aspen Publication Inc. Rockville, Maryland, USA, 1990.
- 5. Peter Berman "Health Sector Reform in Developing Countries" Harvard University Press,1995.



- William A. Reinke "Health Planning For Effective Management" Oxford University Press.1988
- 7. Blane, David, Brunner, "Health and SOCIAL Organization: Towards a Health Policy for the 2Ist Century", Eric Calrendon Press 2002.
- Arnold D. Kalcizony & Stephen M. Shortell, "Health Care Management", 6th Edition CengageLearning, 2011.
- 9. K.V. Ramani, Hospital Management: Text and Cases, Pearson, 2013.



1146236115	IoT IN HEALTHCARE	L	Т	Р	С
Theory	101 IN HEALTHCAKE	3	0	0	3

#### Introduction

In the current scenario, advanced information technologies have opened a new door to innovation in our daily lives. Out of these technologies, the Internet of Things (IoT) is an emerging technology that provides enhancement and better solutions in the healthcare field by connecting medical tools, devices, and machines to create intelligent information systems as per the individual patient requirements. So, IoT in healthcare is important to be a part of learning which aids the students to learn then use the healthcare applications of IoT and develop new IoT systems and applications in healthcare.

#### **Course Objectives**

The objective of this course is to enable the student to

- 1. Acquire knowledge on the core concepts of Internet of Things
- 2. Understand the working of an IoT system
- 3. Develop a new IoT system or application
- 4. Examine the recent trends of IoT in day-to-day life
- 5. Recognize the importance of IoT in healthcare applications

#### **Course Outcomes**

On successful completion of this course, the student will be able to

- CO1: Understand the concepts of IoT and its architecture
- CO2: Identify various protocols for IoT
- CO3: Design a PoC of an IoT system using Raspberry Pi /Arduino
- CO4: Identify and summarize the concepts of IoT based health care.
- CO5: Analyse applications of IoT in real time scenario. .

#### **Pre-requisites**

Relevant background in basic electronics, digital systems, computer organization/architecture is favourable.



#### **CO/PO Mapping**

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	2	2	-	-	2
CO2	3	2	2	2	-	-	2
CO3	-	-	3	2	-	1	2
CO4	-	-	-	1	2	1	2
CO5	-	-	-	1	2	1	2

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

#### **Instructional Strategy**

• Engage and Motivate: Instructors should actively engage students to boost their learning confidence.

• Real-World Relevance: Incorporate relatable, real-life examples and engineering applications to help students understand and appreciate course concepts.

• Interactive Learning: Utilize demonstrations and plan interactive student activities for an engaging learning experience.

• Application-Based Learning: Employ a theory-demonstrate-practice-activity strategy throughout the course to ensure outcome-driven learning and employability.

• Simulation and Real-World Practice: Conduct demonstrations and hands-on activities in a simulated environment, transitioning to real-world scenarios when possible.

• Encourage Critical Analysis: Foster an environment where students can honestly assess experiment outcomes and analyse potential sources of error in case of discrepancies



#### **Assessment Methodology:**

	(	Continuous Assessment (40 marks)					
	CA1	CA2	CA3	CA4	Examination (60 Marks)		
Mode	Written Unit I & II (at the end of 6 <sup>th</sup> week)	Written Unit III & IV (at the end of 12 <sup>th</sup> week)	Written Model Exam Units I to V	Quiz/MCQ/ Activity/ Assignment	Written Examination		
Duration	2 hours	2 hours	3 hours	2 hours	3 hours		
Exam Marks	60	60	100	100	100		
Converted to	20	20	10	10	60		
Marks	20		20		60		

Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the question pattern.
- CA4 Online quiz examination (MCQ) should be conducted covering the complete syllabus.

#### **Question pattern:**

	CA1 & CA2 Assessment							
Part	Description	Marks						
А	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each question carries 2 marks)						
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each question carries 7 Marks)						
	CA3 Assessment							
Part	Description	Marks						
А	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each question carries 2 marks)						
В	Answer all 5 questions, choosing any 2 sub- divisions out of 3 from each question under Part –B.	(5Q X 14 =70 Marks)(7+7)						



11462361		IOT IN HEALTH CARE	L	Т	Р	С		
Theory			3	0	0	3		
Unit I FUNDAMENTALS OF IoT								
Definition and Characteristics of IOT-Evolution of Internet of Things - Enabling Technologies – IoT Architectures: oneM2M, IoT World Forum (IoTWF) and Alternative IoT models – Simplified IoT Architecture and Core IoT Functional Stack – Fog, Edge and Cloud in IoT – Functional blocks of an IoT ecosystem –Sensors, Actuators, Smart Objects and Connecting Smart Objects						)		
Unit II	INTER	OPERABILITY IN IOT						
IoT protocols -Bluetooth and BLE-Zigbee-Wi-Fi-LoRaWAN-MQTT-CoAP, Wireless sensor network (WSN)-Interfacing of Zigbee module to create WSN-M2M, IoT Platform, IoT Sensors-Biomedical sensors -Wearable sensors, IoT Gateway -Principle of operation -Application -IoT Gateway Using Wi-Fi and Ethernet						)		
Unit III	DESIGN	NAND DEVELOPMENT						
loT system	building l	- Embedded computing logic - Microcontroller, System blocks -Arduino Programming, Integration of Sensors and erry Pi-Interfaces, Implementation of IoT with Raspberry	d Actu		9	)		
Unit IV	IoT BAS	SED HEALTHCARE						
Tele-Health, Tele-Medicine, Tele-care, Tele-Monitoring-Patient Health Monitoring System (PHMS) Mobile Health Things (m-health), Internet of Medical Things - IMoT Devices- IMoT Architecture- Benefits and impact of IoMT. Cybersecurity – vulnerability, penetration & encryption technologies.						3		
Unit V		CATIONS OF IoT						
NSUM Technique for Diabetes Patients, Healthcare Monitoring system through Cyber- physical system, An IoT Model for Neuro sensors, AdaBoost with feature selection using IoT for somatic mutations evaluation in Cancer, A Fuzzy-Based expert System to diagnose Alzheimer's Disease, Secured architecture for IoT enabled Personalized Healthcare Systems, Healthcare Application Development in Mobile and Cloud Environments, Approach to predict Diabetic Retinopathy through data analytics, Diagnosis of chest diseases using artificial neural networks								
		TOTAL HOURS			4	5		

#### Suggested List of Students Activity

• Presentation/Seminars by students on any recent technological developments based on the course.

#### References

 Venkata Krishna, Sasikumar Gurumoorthy, Mohammad S. Obaidat, "Internet of Things and Personalized Healthcare Systems", Springer Briefs in Applied Sciences, and Technology, Forensic and Medical Bioinformatics, 2019.



- David Hanes, Gonzalo Salgueiro, Patrick Grossetete, Rob Barton and Jerome Henry, "IoT Fundamentals: Networking Technologies, Protocols and Use Cases for Internet of Things", Cisco Press, 2017.
- Arshdeep Bahga, Vijay Madisetti, "Internet of Things A hands-on approach", Universities Press, 2015
- Ayan Kumar Panja, Amartya Mukherjee, Nilanjan Dey "Biomedical Sensors and Smart Sensing" 2022
- Donald Norris, "The Internet of Things: Do-It-Yourself at Home Projects for Arduino, Raspberry Pi and Beagle Bone Black", 2014.
- 6. Agnivesh Pandey, Amrit Gupta ,Rajiv Pandey "The Internet of Medical Things (IoMT) and Telemedicine Frameworks and Applications", 2022
- Khandpur R S, "TELEMEDICINE Technology and Applications", PHI Learning Pvt Ltd., New Delhi, 2017.
- Michael Margolis, Arduino Cookbook, "Recipes to Begin, Expand, and Enhance Your Projects", O'Reilly Media, 2nd Edition
- Dieter Uckelmann, Mark Harrison, Michahelles, Florian (Eds), "Architecting the Internet of Things", Springer, 2011.Jan Holler, Vlasios Tsiatsis, Catherine Mulligan, Stamatis, Karnouskos, Stefan Avesand.
- 10. David Boyle, "From Machine-to-Machine to the Internet of Things Introduction to a New Age of Intelligence", Elsevier, 2014.
- 11. Olivier Hersent, David Boswarthick, Omar Elloumi, "The Internet of Things Key applications and Protocols", Wiley, 2012.

#### Web-based/Online Resources

- Internet of Things : https://onlinecourses.nptel.ac.in/noc22\_cs53/preview
- Internet of Medical Things (IoMT)-Based Smart Healthcare System: Trends and Progress: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9308524/
- Telemedicine: https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2782224/



#### Introduction

To create a bridge between the Engineering and Medical fields to make the diagnosis of disease and to analyses the medical data from instrumentation with the help of engineering applications.

#### **Course Objectives**

The objective of this course is to enable the student to

- 1. To gain knowledge about the basics of human physiological parameters, measurement, recording and interpreting the data.
- 2. To study about assist devices for health care.
- 3. To enhance the knowledge based information from recently developed diagnostic and therapeutic techniques.

#### **Course Outcomes**

On successful completion of this course, the student will be able to

- CO1: Differentiate and analyses the bio medical signal sources
- CO2: Elucidate cardiovascular system and related measurements.
- CO3: Explain the brain, muscle, nervous systems and related measurements
- CO4: Apply suitable medical image system for diagnosing the disease.
- CO5: Recommend problem solving and service procedures for safety use of medical instruments asper medical standards

Pre-requisites: Secondary Board level Human Physiology system



#### **CO/PO** Mapping

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	2	3	1	1	3
CO2	3	2	2	3	1	1	3
CO3	3	2	2	3	1	1	3
CO4	3	2	2	3	1	1	3
CO5	3	2	2	3	1	1	3

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

#### **Instructional Strategy**

- It is advised that teachers take steps to stimulate pupils' attention and boost their learning confidence.
- To help students learn and appreciate numerous concepts and principles in each area, teachers should provide examples from daily life, realistic situations, and real-world engineering and technological applications.
- The demonstration can make the subject exciting and foster in the students a scientific mindset. Student activities should be planned on all the topics.
- Throughout the course, a theory-demonstrate-practice-activity strategy may be used to ensure that learning is outcome- and employability-based.
- Do not let students work on an activity or an experiment with the expected outcome, rather allow students to be honest about whatever the results of the experiment are. If the results are different from the expectations, students should do an analysis where they could be the source of error, if any.



#### **Assessment Methodology:**

	(	End Semester			
	CA1	CA2	CA3	CA4	Examination (60 Marks)
Mode	Written Unit I & II (at the end of 6 <sup>th</sup> week)	Written Unit III & IV (at the end of 12 <sup>th</sup> week)	Written Model Exam Units I to V	Quiz/MCQ/ Activity/ Assignment	Written Examination
Duration	2 hours	2 hours	3 hours	2 hours	3 hours
Exam Marks	60	60	100	100	100
Converted to	20	20	10	10	60
Marks	2	20	2	0	60

Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the question pattern.
- CA4 Online quiz examination (MCQ) should be conducted covering the complete syllabus.

#### **Question pattern:**

CA1 & CA2 Assessment							
Part	Description	Marks					
A	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each question carries 2 marks)					
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each question carries 7 Marks)					
	CA3 Assessment						
Part	Description	Marks					
A	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each question carries 2 marks)					
В	Answer all 5 questions, choosing any 2 sub- divisions out of 3 from each question under Part –B.	(5Q X 14 =70 Marks)(7+7)					



114623	6116	MEDICAL INSTRUMENTATION		Т	Р	С
Theo	ory		3	0	0	3
Unit I		<b>BIO-POTENTIAL MEASUREMEN</b>	ITS.			
Functi	onal com	oonents of a biomedical system - Cell and its Structure -	Actior	n poter	ntial –	
Restin	g potentia	l – Half cell potential- Propagation of Action potential in	cell- E	Bio po	tential	10
measu	rements: ]	Types of electrodes for different bio signal-Need of Electr	olyte.			
Unit II	CA	RDIAC SYSTEM				
Blood	flow in H	eart rooms - Origin of ECG- SV node and AV node - Nor	rmal an	d Abn	ormal	
ECG ·	waveform	s and heart diseases - ECG Lead systems and recordi	ng sys	tem -	Basic	10
Cardia	ac pacema	ker - External and Implantable pacemaker - Fibrillation-	Defibr	illator	- AC	10
defibri	illator - D	C defibrillator				
Unit III	NEU	JROLOGICAL SYSTEM AND SKELETAL SYSTEM	M			
EEG -	Wave cha	aracteristics -Frequency bands - Spontaneous and evoked	respons	se - 10	-20%	9
Lead s	system- EI	G Recording - Analysis of EMG waveforms - muscle late	ent velo	ocity		
Unit IV	TH	ERAPEUTIC & Medical Imaging DEVICES				
Spiror	neter - H	eart-Lung Machine - Oxygenators - Blood Gas Ana	alyser ·	- Fing	ger-tip	0
oximeter. Medical Imaging: MRI and CT scan (Principle and Quantitative approach only).				8		
Unit V	Me	lical Safety Management				
Electri	ical safety	Management and Maintenance: Shock hazards, LET-G	O curre	nt- Le	akage	
current- Safety of medical equipment: Protection for earth fault, short circuit, static charge			8			
and EMI.						
		TOTAL HOURS				45



#### **TEXT BOOKS**

- Khandpur R.S, "Handbook of Biomedical Instrumentation", Tata McGraw-Hill, New Delhi, 3rd Edition, 2014.
- Leslie Cromwell, "Biomedical Instrumentation and measurement", Prentice hall of India, New Delhi,2010.

#### **REFERENCE BOOKS**

- 1. John G. Webster, "Medical Instrumentation Application and Design", John Wiley and sons, New York, 2011.
- Joseph J.carr and John M. Brown, "Introduction to Biomedical Equipment Technology", John Wiley and sons, New York, 2001.
- Prof.Venkataram S.K, "Biomedical Electronics and Instrumentation", Galgotia Publications Pvt. Ltd., 2003.
- 4. Webb, Andrew G, "Principles of Biomedical Instrumentation. India", Cambridge University Press, 2018.



#### Introduction

Interpretation of ECG course reviews basic cardiac anatomy, physiology, and electro physiology and teaches ECG rhythm, acquisition, and identification.

#### **Course Objectives**

The objective of this course is to enable the student to

- 1. To integrate knowledge of the basic anatomy and physiology of the heart
- 2. To demonstrate the steps in analyzing an ECG rhythm strip.
- 3. To Explain ECG findings and nursing actions for a variety of atrial, ventricular, and junctional dysrhythmias.

#### **Course Outcomes**

On successful completion of this course, the student will be

able to

- CO1: Describe the anatomy and electrophysiology of the heart
- CO2: Maintain ECG equipment and demonstrate lead placement
- CO3: Identify ECG medical emergencies

#### **Pre-requisites**

-> Basic knowledge of anatomy of the heart to interpret ECG.

#### **CO/PO** Mapping

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	2	1	1	1	1
CO2	3	3	2	3	1	1	1
CO3	2	3	2	3	1	1	1

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation



#### **Instructional Strategy**

- Hands-on Laboratory Sessions: Provide students with practical experience in utilizing different recording techniques and equipment to record and analyze bio-signals and non-electrical parameters. This hands-on approach will enhance their proficiency and understanding of the subject matter.
- Case Studies and Problem-Solving Exercises: Present real-world case studies and problemsolving exercises to challenge students to apply theoretical concepts to practical scenarios. This will help them develop critical thinking and problem-solving skills essential for recording and interpreting bio-signals accurately.
- Group Projects and Collaborative Learning: Encourage collaborative learning through group projects that require students to work together to record and analyze bio-signals and non-electrical parameters. This will foster teamwork and communication skills while deepening their comprehension of the course material.

	Continuous Assessment (40 marks)				End Semester Examination	
	CA1	CA2	CA3	CA4	(60 marks)	
Mode	Written Test 1 ( Units 1 & II)	Written Test 2 ( Units III & IV)	Model Written Examination	Record Work	Written Examination	
Duration	2 hours	2 hours	3 hours	-	3 hours	
Exam Marks	60	60	100	20	100	
Converted to	20	20	10	10	60	
Internal Marks		20	10	10	60	

#### Assessment Methodology



1146236231	Interpretation of ECG	L	Т	Р	С
Practicum		2	0	2	3

Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the end exam question pattern.
- CA4: Record for the experiments should be maintained and the same have to be evaluated after completion of each practical exercise before the commencement of the next exercise for **20** Marks. The marks awarded should be converted to **10 Marks** for the internal assessment.

#### **Question pattern:**

CA1 & CA2 Assessment						
Description	Marks					
16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each					
To Questions to be answered out of 20 Questions	question carries 2 marks)					
4 Questions to be answered out of 6 Questions	4QX7 = 28 Marks (Each					
	question carries 7 Marks)					
CA3 Assessment						
Description	Marks					
15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each					
	question carries 2 marks)					
Answer all 5 questions, choosing any 2 sub-	(5Q X 14 =70 Marks)(7+7)					
divisions out of 3 from each question under						
Part –B.						
	CA1 & CA2 Assessment         Description         16 Questions to be answered out of 20 Questions         4 Questions to be answered out of 6 Questions         CA3 Assessment         Description         15 Questions to be answered out of 20 Questions         Answer all 5 questions, choosing any 2 sub- divisions out of 3 from each question under					

1146236231	Interpretation of ECG	L	Т	Р	С
Practicum		2	0	2	3
Unit I	INTRODUCTION				
History of ECG – Physiology of Conduction System of Heart – Rates of Pacemakers – Normal Spread of Electrical Activity in the Heart – Basics of ECG – ECG Leads – Placement of Leads – Normal ECG Morphology – Parts of ECG Strip – Normal ECG Pattern – Normal R Wave Progression in Chest Leads					



	Interpretation of ECG	Т	Р	С
Practicum	2	0	2	3
				·
Experiment	#1: Relationship between electrocardiogram to the electrical events of the heart.		7	
Experiment	#2: Relationship between electrical events to the mechanical events			
Experiment	of the cardiac cycle. #3: The electrocardiogram associated with an artificial cardiac			
Experiment	pacemaker			
	□ - Identification of pacemaker stimulus on the electrocardiogra	ım		
TT */ TT	- Differentiation between atrial and ventricular pacing.			
Unit II	SYSTEMATIC INTERPRETATION OF ECG			
	nterpretation guidelines for electrocardiogram - Look for ion and lead aVR - Rate - Rhythm - Axis - P wave morphology - P-	R	5	
	pertrophy - Bundle branch block		5	
	t #4: Calculation of the heart rate from the electrocardiogram.			
Experimen	t #5: Normal variations of the electrocardiogram in relation to (i) ag (ii) state of activity, (iii) body build and (iv) ethnic origin	e, '	7	
Experimen	t #6: Normal cardiogram and some common abnormalities.			
Unit III	DIFFERENTIAL DIAGNOSIS			
P wave - P-I	R interval - Q wave - R wave - QRS complex - ST segment - T wav	e -		
U wave - Q-			5	
	t #7:Waveform components of (P, Q, R, S, T and U) t #8: Definitions of normal ranges of PR interval and QRS duration			
	t #9:Measurement of QT interval and calculation of corrected QU	•	7	
	interval (QTc) by Bazett's formula.			
TT *4 TT7				
Unit IV	ARRHYTHMIAS - I			
Disorders of	impulse formation - Disorders of impulse conduction - Premature			
Disorders of the beats/Ectopic	impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node		4	
Disorders of a beats/Ectopic block - Abno tachycardia	impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus		4	-
Disorders of a beats/Ectopic block - Abno tachycardia	impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus t #10: Rhythms arising from the sinus node		4	
Disorders of a beats/Ectopic block - Abno tachycardia	<ul> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>It #10: Rhythms arising from the sinus node         <ul> <li>i. Normal sinus rhythm</li> <li>ii. Sinus arrhythmia</li> </ul> </li> </ul>		4	-
Disorders of a beats/Ectopic block - Abno tachycardia	<ul> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Node rhythms - Sinus arrhythmia in Sinus arrhythmia in Sinus arrhythmia in Sinus tachcadria</li> </ul>		4	-
Disorders of a beats/Ectopic block - Abno tachycardia	<ul> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>t #10: Rhythms arising from the sinus node         <ul> <li>i. Normal sinus rhythm</li> <li>ii. Sinus arrhythmia</li> <li>iii. Sinus tachcadria</li> <li>iv. Sinus bradycardia</li> </ul> </li> </ul>			-
Disorders of a beats/Ectopic block - Abno tachycardia	<ul> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Node rhythms - Sinus arrhythmia in Sinus arrhythmia in Sinus arrhythmia in Sinus tachcadria</li> </ul>			
Disorders of the beats/Ectopic block - Abnotachycardia Experiment Experiment Unit V Atrial Rhythr	Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus t #10: Rhythms arising from the sinus node <ul> <li>i. Normal sinus rhythm</li> <li>ii. Sinus arrhythmia</li> <li>iii. Sinus tachcadria</li> <li>iv. Sinus bradycardia</li> <li>v. Sinus arrest</li> </ul> <li>ARRHYTHMIAS - II</li>			
Disorders of the beats/Ectopic block - Abno tachycardia Experiment Experiment Unit V Atrial Rhythr fibrillation - A	<ul> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus bradycardia ii. Normal sinus rhythm ii. Sinus arrhythmia iii. Sinus tachcadria iv. Sinus bradycardia v. Sinus bradycardia v. Sinus arrest</li> <li>Impulse Arrange - Arrial Sinus array - Arrial Arrial flutter - Differences between atrial tachycardia, flutter and</li> </ul>			
Disorders of the beats/Ectopic block - Abnottachycardia Experiment Experiment Unit V Atrial Rhythr fibrillation - Affibrillation - V	<ul> <li>Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus</li> <li>t #10: Rhythms arising from the sinus node         <ul> <li>i. Normal sinus rhythm</li> <li>ii. Sinus arrhythmia</li> <li>iii. Sinus tachcadria</li> <li>iv. Sinus bradycardia</li> <li>v. Sinus arrest</li> </ul> </li> <li>ARRHYTHMIAS - II</li> <li>ns - Paroxysmal supraventricular tachycardia (PSVT) - Atrial</li> <li>Atrial flutter - Differences between atrial tachycardia, flutter and</li> <li>Ventricular rhythms - Ventricular tachycardia - Torsades De Pointes</li> </ul>			
Disorders of the beats/Ectopic block - Abnotachycardia Experiment Experiment Unit V Atrial Rhythra fibrillation - A fibrillation - V Ventricular fitachycardia a	Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus         t #10: Rhythms arising from the sinus node <ul> <li>i. Normal sinus rhythm</li> <li>ii. Sinus arrhythmia</li> <li>iii. Sinus tachcadria</li> <li>iv. Sinus bradycardia</li> <li>v. Sinus bradycardia</li> <li>v. Sinus arrest</li> </ul> ARRHYTHMIAS - II         ns - Paroxysmal supraventricular tachycardia (PSVT) - Atrial         Atrial flutter - Differences between atrial tachycardia, flutter and         Ventricular rhythms - Ventricular tachycardia - Torsades De Pointes         brillation - Idioventricular rhythm - Differences between ventricula         nd ventricular fibrillation - Wolf-Parkinson-White (WPW) syndrom	r	4	
Disorders of the beats/Ectopic block - Abnotachycardia Experiment Experiment Unit V Atrial Rhythm fibrillation - Affibrillation - Ventricular fit tachycardia a - Syste,matic	Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus t #10: Rhythms arising from the sinus node <ul> <li>i. Normal sinus rhythm</li> <li>ii. Sinus arrhythmia</li> <li>iii. Sinus tachcadria</li> <li>iv. Sinus bradycardia</li> <li>v. Sinus bradycardia</li> <li>v. Sinus arrest</li> </ul> <li>ARRHYTHMIAS - II</li> <li>ns - Paroxysmal supraventricular tachycardia (PSVT) - Atrial</li> <li>Atrial flutter - Differences between atrial tachycardia, flutter and</li> <li>Ventricular rhythms - Ventricular tachycardia - Torsades De Pointes</li> <li>brillation - Idioventricular rhythm - Differences between ventricular</li> <li>nd ventricular fibrillation - Wolf-Parkinson-White (WPW) syndrom</li>	r	4	
Disorders of the beats/Ectopic block - Abnotachycardia Experiment Experiment Unit V Atrial Rhythr fibrillation - Affibrillation - Ventricular fit tachycardia a - Syste,matic Experiment	Impulse formation - Disorders of impulse conduction - Premature beats/Extrasystole - Nodal rhythm or junctional rhythm - SA node rmalities of rhythms - Sinus arrhythmia - Sinus bradycardia - Sinus         t #10: Rhythms arising from the sinus node <ul> <li>i. Normal sinus rhythm</li> <li>ii. Sinus arrhythmia</li> <li>iii. Sinus tachcadria</li> <li>iv. Sinus bradycardia</li> <li>v. Sinus bradycardia</li> <li>v. Sinus arrest</li> </ul> ARRHYTHMIAS - II         ns - Paroxysmal supraventricular tachycardia (PSVT) - Atrial         Atrial flutter - Differences between atrial tachycardia, flutter and         Ventricular rhythms - Ventricular tachycardia - Torsades De Pointes         brillation - Idioventricular rhythm - Differences between ventricula         nd ventricular fibrillation - Wolf-Parkinson-White (WPW) syndrom	r	4	



146236231 Interpretation of ECG	L	Т	Р	С	
Practicum		2	0	2	3
□ v. Suprav         □ vi. Accel         Experiment         □ i. Ventric         □ ii. Left an         □ iii. 1st de         □ iv. 2nd de         □ v. 3rd deg         Experiment         □ i. Ventric         □ ii. Ventri         □ ii. Ventri         □ iv. Ventri         □ iv. Ventri         □ vi. Dextro         Experiment         □ ii. Left v         □ ii. Compli         □ ii. Left b         □ iii. Right         □ vi. Ventri         □ vi. Ventri	fibrillation entricular tachycardia erated AV noda (junctional rhythm) #12 : Conduction abnormalities ular pre-excitation d right bundle branch block gree AV block egree AV block: Mobitz 1 ( Wenckebach), II and 2:1 block gree (complete) AV block #13: Rhythms arising from the ventricles: cular escape beats cular premature beats (ectopics) icular tachycardia icular flutter cular fibrillation icular standstill (asystole) #14: Interpretation of changes in the electrocardiogram arising r ardiac conditions dial ischaemia rdial infarction entricular hypertrophy rditis cardia #15: Essential ECG Interpretation (12- lead ECG's taken from st) ete heat block bundle branch block icular fibrillation fibrillation icular tachycardia ow complex tachycardia te ST elevation myocardial infarct			10	
	TOTAL HOURS		60	)	



#### Suggested List of Students Activity

- Presentation/Seminars by students on any recent technological developments based on the course
- Periodic lab quizzes conducted on a weekly/fortnightly based on the course
- Organize a workshop where students can practice using different bio-signal recording devices and techniques to gain practical experience in capturing bio-signals accurately.
- Provide students with simulation exercises that simulate practical scenarios where they must apply theoretical concepts to accurately record and analyze bio-signals and non-electrical parameters.



#### Introduction:

Radiology plays a huge role in disease management by giving physicians more options, tools, and techniques for detection and treatment. Every DMLT engineer is in need of knowledge and skill about various diagnostic equipments which plays vital role in medical field. This subject provides the basics, construction and working of X-Ray, MRI, CT scan, fluoroscopy and radiological safety

#### **Course Objectives:**

The objective of this course is to

- Understand the generation of X-ray and its uses in imaging
- Learn different types of radio diagnostic instruments and techniques
- Describe the principle of Computed Tomography
- Know the techniques used for visualizing various sections of the body.
- Learn radiation therapy methodologies and the safety.

#### **Course Outcomes:**

After successful completion of this course, the students should be able to

- CO1: Describe the working principle of X ray machine and its application.
- CO2: Illustrate the principle computed tomography.
- CO3: Describe the principle of fluoroscopy
- CO4: Explain the principle of MRI and mammography
- CO5: Outline the methods of radiation safety.

#### **Pre-requisites:**

Basic knowledge on medical equipments



1146236232	RADIOLOGY	L	Т	Р	С
Practicum		2	0	2	3

# **CO/PO Mapping**

CO / PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	3	1	1	2	3
CO2	3	2	3	1	1	2	3
CO3	3	2	3	1	1	2	3
CO4	3	2	3	1	1	2	3
CO5	3	2	3	1	1	2	3

Legend: 3-High correlation, 2-Medium Correlation, 1-Low Correlation Instructional Strategy:

- Focus on health science context.
- Focus on medical terminology.
- Conduct laboratory-based activities that allow students to use their own bodies.
- Explore and solve a medical mystery.

# **Assessment Methodology**

	C	ontinuous Assessmer	nt (40 marks)		End Semester Examination
	CA1	CA2	CA3	CA4	(60 marks)
Mode	Written Test 1 ( Units 1 & II)	Written Test 2 ( Units III & IV)	Model Written Examination	Record Work	Written Examination
Duration	2 hours	2 hours	3 hours	-	3 hours
Exam Marks	60	60	100	20	100
Converted to	20	20	10	10	60
Internal Marks		20	10	10	60

Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the end exam question pattern.



1146236232	RADIOLOGY	L	Т	Р	С
Practicum		2	0	2	3

• CA4: Record for the experiments should be maintained and the same have to be evaluated after completion of each practical exercise before the commencement of the next exercise for **20** Marks. The marks awarded should be converted to **10 Marks** for the internal assessment.

# Question pattern:

CA1 & CA2 Assessment				
Part	Description	Marks		
А	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each		
		question carries 2 marks)		
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each		
		question carries 7 Marks)		
CA3 Assessment				
Part		M		
rari	Description	Marks		
raft	Description	Marks		
A	Description           15 Questions to be answered out of 20 Questions	Marks 15Q X 2 = 30 Marks(Each		
	15 Questions to be answered out of 20 Questions			
	-	15Q X 2 = 30 Marks(Each		
A	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each question carries 2 marks)		

1146236232 RADIOLOGY	L	Т	Р	С
Practicum	2	0	2	3
Unit I X-RAY				
THEORY Electromagnetic spectrum - properties of electromagnetic waves, Types of rays - Quantum effects existing for Electromagnetic waves-units to measure radioactivity, Types of X-Ray radiations, X-ray , Block diagram of X-ray Tube, Block diagram of X-ray Machine- applications of X-Ray				
PRACTICAL Experiment-1: Study the working of X-ray Experiment 2: Maintenance of X-ray				3 3



1146236232	RADIOLOGY	L	r
Practicum		2	

L	Т	Р	С
2	0	2	3

UNIT II COMPUTED TOMOGRAPHY	
THEORY Basic principle-Mathematical basis of image construction(back projection reconstruction)-block	ĸ
diagram of computed tomography(CT)-scanner-spiral CT -3D Imaging and its applications	6
PRACTICAL	3
<b>Experiment-3</b> : Visit the hospital and study the working of CT	
UNIT III FLUOROSCOPY	
THEORY	
Fluoroscopic Equipment- Direct fluoroscopy-Fluoroscopic screen-	
Fluoroscopic image- factors affecting fluoroscopic image-Difference	6
between radiography and fluoroscopy, Angiography-concepts and types	
PRACTICAL	3
Experiment-4: Preparation of patient for fluoroscopy imaging	3
Experiment-5: Study of working principle of fluoroscopy	
UNIT IV MRI AND MAMMOGRAPHY	
THEORY	
MRI: Fundamentals of Magnetic resonance-Interaction of Nuclei with static magnet	tic
field and Radio frequency wave-rotation and precession- Induction of magnet	tic
resonance signals, MRI parameters-spindensity, Spin lattice relaxation time t1, Spin-sp	oin
relaxation time t2, blockdiagram of a MRI system and its applications	6
Mammography: Basic principles-equipment details-heel effect-	
compression paddle-and its advantages-viewing conditions-Magnificationmammograph	IV
and digital mammography	- )



Radiation Therapy-linear accelerator, Tele gamma medicine, SRS-SRT,- recent techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters – electronic dosimeter- Radiation protection in medicine–radiation protection principles		
Experiment-7:       Study of working principle of MRI       3         UNIT-V       RADIATION THERAPY AND RADIATION SAFETY         THEORY       Radiation Therapy-linear accelerator, Tele gamma medicine, SRS-SRT,- recent         techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation       6         electronic dosimeter- Radiation protection in medicine-radiation protection principles       6		
Experiment 7. Study of working principle of Mid         UNIT-V         RADIATION THERAPY AND RADIATION SAFETY         THEORY         Radiation Therapy-linear accelerator, Tele gamma medicine, SRS-SRT,- recent         techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation         measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters –         electronic dosimeter- Radiation protection in medicine-radiation protection principles		-
THEORY Radiation Therapy-linear accelerator, Tele gamma medicine, SRS-SRT,- recent techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters – electronic dosimeter- Radiation protection in medicine–radiation protection principles	Experiment-7: Study of working principle of MRI	3
THEORY Radiation Therapy-linear accelerator, Tele gamma medicine, SRS-SRT,- recent techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters – electronic dosimeter- Radiation protection in medicine–radiation protection principles		
Radiation Therapy-linear accelerator, Tele gamma medicine, SRS-SRT,- recent techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters – electronic dosimeter- Radiation protection in medicine–radiation protection principles	UNIT-V RADIATION THERAPY AND RADIATION SAFETY	
techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters – electronic dosimeter- Radiation protection in medicine–radiation protection principles	THEORY	
measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters – electronic dosimeter- Radiation protection in medicine–radiation protection principles	Radiation Therapy-linear accelerator, Tele gamma medicine, SRS-SRT,- recent	l
measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters – electronic dosimeter- Radiation protection in medicine–radiation protection principles	techniques in radiation therapy- 3DCRT-IMRT-IGRT and Cyber knife- radiation	6
	measuring instruments-Dosimeter, film badges, Thermo Luminescent dosimeters –	Ū
PRACTICAL	electronic dosimeter- Radiation protection in medicine-radiation protection principles	
	PRACTICAL	
<b>Experiment-8</b> : Visit the hospital and study about various radiological equipments and its	<b>Experiment-8</b> : Visit the hospital and study about various radiological equipments and its	9
safety measures	safety measures	
		l
Total Hours 60	Total Hours	60

# **STUDENT ACTIVITY:**

• Visit the hospital and submit the report.

# TEXT BOOKS:

- B.H. Brown, R.H. Smallwood, D.C. Barber, P.V. Lawford, D.R. Hose, "Medical Physics and Biomedical Engineering", Institute of physics publishing, Bristol and Philadelphia, 1999.
- Gopal B. Saha "Physics and Radiobiology of Nuclear Medicine" Fourth edition Springer, 2006.

#### REFERENCES

- W.J. Meredith and J.B. Massey "Fundamental Physics of Radiology" Varghese Publishing house, Third Edition, 2013.
- Steve Webb, The Physics of Medical Imaging, Taylor & Francis, Newyork, Second Edition, 2012.
- R.S. Khandpur, "Handbook of Biomedical Instrumentation", Tata McGraw-Hill, New Delhi, 2003.

# **E- Web-based/Online Resources**

- <u>http://www.nptel.ac.in/courses/115102017/</u>, "Nuclear science and Engineering", Dr. Santanu Gosh, Department of Physics, IIT, Delhi.
- <u>http://www.uthgsbsmedphys.org/GS02-0093/</u>," Introduction to Medical Physics", Dr George Starkschall, The University of Texas at Houston.



# Introduction

A medical device design course is specialized to equip students with the knowledge and skills needed to create innovative medical devices. This course typically covers a range of topics related to designing, prototyping, and developing medical technologies. It helps to describe about the design realization and understand the validation and verification of various medical devices.

#### **Course Objectives**

The objective of this course is to enable the student to

- 1. Understand about basic design processes of medical devices
- 2. Illustrate the design procedure of medical devices
- 3. Outline the quality assessment in design

#### **Course Outcomes**

On successful completion of this course, the student will be able to

- CO1: Define the problem statement from a database of new medical device requirements
- CO2: Explain the concept generation and concept selection methods.
- CO3: Summarize the concept of medical device development.
- CO4: Develop operating plan and business plan.
- CO5: Demonstrate the testing and validation of medical equipment.

# **Pre-requisites**

Basics of medical science



1146236233	Medical Device Design	L	Т	Р	С
Practicum		2	0	2	3

# **CO/PO Mapping**

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	3	-	-	1	-	-
CO2	3	3	-	-	1	-	-
CO3	3	-	3	-	1	-	-
CO4	3	-	3	-	1	-	-
CO5	3	-	-	3	1	-	-

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

## **Instructional Strategy**

- Instructors should actively engage students to enhance their learning capability.
- The fundamental concepts in medical device design are to be taught with real life examples using theory and demonstrative classes.
- The concepts learnt are to be applied step by step to real world scenarios in laboratory sessions. In depth reading in related area is required to prepare a report on any chosen topic.

	C	ontinuous Assessmen	nt (40 marks)		End Semester Examination
	CA1	CA2	CA3	CA4	(60 marks)
Mode	Written Test 1 ( Units 1 & II)	Written Test 2 ( Units III & IV)	Model Written Examination	Record Work	Written Examination
Duration	2 hours	2 hours	3 hours	-	3 hours
Exam Marks	60	60	100	20	100
Converted to	20	20	10	10	60
Internal Marks		20	10	10	60

# Assessment Methodology

Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the end exam question pattern.



• CA4: Record for the experiments should be maintained and the same have to be evaluated after completion of each practical exercise before the commencement of the next exercise for **20** Marks. The marks awarded should be converted to **10 Marks** for the internal assessment.

# **Question pattern:**

	CA1 & CA2 Assessment	
Part	Description	Marks
A	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each question carries 2 marks)
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each question carries 7 Marks)
	CA3 Assessment	
Part	Description	Marks
А	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each question carries 2 marks)
В	Answer all 5 questions, choosing any 2 sub- divisions out of 3 from each question under Part –B.	(5Q X 14 =70 Marks)(7+7)

114623		L	Т	Р	С
Practi	cum	2	0	2	3
Unit I	NEED FINDING AND SCREENING				
Strategic F	ocus – observation and problem identification – Need statement deve	elopn	nent.		6
Experiment given by do	t #1: Problem selection from a database of new medical device requestors	luiren	nents		6
Unit II	CONCEPT GENERATION AND SELECTION				
intellectual	eneration: Ideation and Brainstorming – concept screening, Concept property basics – reimbursement basics – business models – prot pt selection.				6
Experiment	t #2: Concept generation for the identified problem				6
Unit III	DEVELOPMENT STRATEGY AND PLANNING				
	property strategy – research and development strategy – clinical strategy – quality and process management – reimbursement strategy		_		6



marketing and stakeholder strategy – sales and distribution strategy – competitive advantage and business strategy.	
Experiment #3: Planning and Modular Implementation for the identified problem	6
Unit IV INTEGRATION	
Operating plan and financial model- business plan development- funding sources- licensing and alternate pathways.	6
Experiment #4: Integration of modules	6
Unit V TESTING AND VALIDATION	
Basis and Types of Testing, Hardware Verification and Data Analysis, Software Verification and Data Analysis.	6
Experiment #5: Testing and Validation	6
TOTAL HOURS	60

# Suggested List of Students Activity

- In this course students are expected to form a group of 4 to 5 members and formulate a new medical device requirement.
- The details like its background, problem definition, state-of-art technology in that area are to be prepared from literature review.
- The development strategy, integration, testing and formal conclusion are expected in a report form which is to be submitted at the end of the semester.

# Reference

- Matthew Bret Weinger, Michael E. Wiklund, Daryle Jean Gardner-Bonneau'Handbook of Human Factors in Medical Device Design', CRC press, 2010
- Peter J. Ogrodnik, "Medical Device Design: Innovation from Concept to Market", Academic Press Inc; 1st Edition, 2012
- 3. Paul H. King, Richard C. Fries, Arthur T. Johnson, "Design of Biomedical Devices and Systems", Third Edition, 2014
- StefanosZenios, Josh Makower, Paul Yock, Todd J. Brinton, Uday N. Kumar, Lyn Denend, Thomas M. Krummel, "Biodesign: The Process of Innovating Medical Technologies", Cambridge University Press; 1 edition, 2009.

# Web-based/Online Resources

• https://www.taylorfrancis.com/books/mono/10.1201/b10439/



## Introduction

Basics of Biochemistry explore the fundamental principles of biomolecules and cellular processes essential for understanding life at a molecular level.

#### **Course Objectives**

- 1. Gain foundational understanding of biomolecules and cellular processes.
- 2. Develop skills in analyzing and applying biochemical principles.

## **Course Outcomes**

On successful completion of this course, the student will be able to

- CO1: Demonstrate a thorough grasp of the structure and function of bio molecules, as well as key cellular processes in biochemistry.
- CO2: Exhibit the ability to analyze biochemical principles and apply them to solve problems in various biological contexts.

# **Pre-requisites**

-> Basic knowledge of cellular biology and general chemistry.

#### **CO/PO Mapping**

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	2	2	1	1	1
CO2	3	3	3	2	1	1	1

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

# Instructional Strategy

• Hands-on Laboratory Sessions: Provide students with practical experience in utilizing different recording techniques and equipment to record and analyze bio-signals and non-electrical parameters. This hands-on approach will enhance their proficiency and understanding of the subject matter.



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- Case Studies and Problem-Solving Exercises: Present real-world case studies and problem-solving exercises to challenge students to apply theoretical concepts to practical scenarios. This will help them develop critical thinking and problem-solving skills essential for recording and interpreting bio-signals accurately.
- Group Projects and Collaborative Learning: Encourage collaborative learning through group projects that require students to work together to record and analyze bio-signals and non-electrical parameters. This will foster teamwork and communication skills while deepening their comprehension of the course material.

sinch methou	01055				
	C	ontinuous Assessme	nt (40 marks)		End Semester Examination
	CA1	CA2	CA3	CA4	(60 marks)
Mode	Written Test 1 ( Units 1 & II)	Written Test 2 ( Units III & IV)	Model Written Examination	Record Work	Written Examination
Duration	2 hours	2 hours	3 hours	-	3 hours
Exam Marks	60	60	100	20	100
Converted to	20	20	10	10	60
Internal Marks		20	10	10	60

## Assessment Methodology

Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the end exam question pattern.
- CA4: Record for the experiments should be maintained and the same have to be evaluated after completion of each practical exercise before the commencement of the next exercise for 20 Marks. The marks awarded should be converted to 10 Marks for the internal assessment.



1146236234	Basics of Bio-Chemistry	L	Т	Р	С
Practicum		2	0	2	3

# **Question pattern:**

	CA1 & CA2 Assessment	
Part	Description	Marks
Α	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each
		question carries 2 marks)
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each
		question carries 7 Marks)
	CA3 Assessment	
Part	Description	Marks
А	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each
		question carries 2 marks)
В	Answer all 5 questions, choosing any 2 sub-	(5Q X 14 =70 Marks)(7+7)
	divisions out of 3 from each question under	
	Part –B.	

				•	
114623	5234 Basics of Bio-Chemistry	L	Т	Р	С
Practio		2	0	2	3
Unit I	Water and Electrolytes				
intake (Ex Lungs, Fac fluids (Ext balance (A	ater balance – distribution of water in body – water ogenous and Endogenous)– water output (Urine, Skin, ces). Electrolyte – composition of electrolyte in the body racellular and Intracellular fluids)–Regulation of Electrolyte Idosterone, ADH & Renin-angiotensin). #1: Collection of blood and Preparation of Serum and Plasn			8	
Unit II	Carbohydrates				
pathways glycogeno Regulation determina	ates – definition, classifications of Carbohydrates – major of carbohydrate metabolism–Glycolysis, glycogenesis, lysis, gluconeogensis, TCA cycle, electron transport system of blood glucose level- abnormalities of glucose metabolist ion of blood glucose level – clinical significance- hypoglyce glycemia complications. Effect of insulin–Role of horm one	m		8	



## DIRECTORATE OF TECHNICAL EDUCATION, CHENNAI – 600 025 2023 REGULATION

	234	Basics of Bio-Chemistry	L	Т	Р	С
Practicu	ım	Dasks of Dio-Chemistry	2	0	2	3
in blood g	glucose	homeostasis-IDDM,NIDDM.				
Experimen	t #2: Es	timation of True glucose – Glucose oxidase (GOD)method			2	
Unit III	Protei	ns and Amino acids				
classificat proteins- f digestion- creatine at Essential a proteins - Glycogen	tion of l function -urea cy nd crea and No Metabo ic – ket	ion- simple, conjugated and derived proteins – Nutritional Protein-metabolism of protein–components of Plasma as of albumin and globulin – abnormalities of Protein ycle –bio synthesis of Creatine–clinical importance of tinine. Amino acids – classification of amino acids – n-essential amino acids- amino acids derivatives of blic fate of amino acids–(glycogenic, Ketogenic and ogenic amino acids)–			8	
		of Phenylketonuria, albinism, Proteinuria, Micro kinson's disease.				
albuminur Experime	ria, Parl nt #3: E nt #4: E	of Phenylketonuria, albinism, Proteinuria, Micro kinson's disease. Estimation of Total Protein–Biuret method Estimation of Blood Urea – Diacetyl monoxime – Thiosemicart	pazide		4	
albuminun Experimen Experimen	nt #3: E nt #4: E C) metl	of Phenylketonuria, albinism, Proteinuria, Micro kinson's disease. Estimation of Total Protein–Biuret method Estimation of Blood Urea – Diacetyl monoxime – Thiosemicart	pazide		4	

Experiment #7:Estimation of HDL/LDL cholesterol

Experiment #6: Estimation of Triglycerides-Enzymatic method

Unit V Vitamins and Minerals



6

1146236234	Basics of Bio-Chemistry	L	Т	Р	С
Practicum	ŕ	2	0	2	3

Vitamins- classification of vitamins– fat soluble and water soluble vitamins – distary requirements – biochemical functions of vitaminsDeficiency syndromes. Minerals-Biochemical function of minerals– dietary requirements–diseases related to minerals – Hypocalcemia, rickets, osteoporosis, Addison's disease (Cushing's syndrome), Wilson's disease.	8
Experiment #8: Estimation of serum creatinine – Alkaline picrate method	6
Experiment #9: Estimation of serum Bilirubin–Malloy & Evelyn method	
TOTAL HOURS	60

## Suggested List of Students Activity

- Presentation/Seminars by students on any recent technological developments based on the course
- Periodic lab quizzes conducted on a weekly/fortnightly based on the course
- Organize a workshop where students can practice using different bio-signal recording devices and techniques to gain practical experience in capturing bio-signals accurately.
- Provide students with simulation exercises that simulate practical scenarios where they must apply theoretical concepts to accurately record and analyze bio-signals and non-electrical parameters.

# **Reference Books :**

- 1. KanaiL. Mukherjee-Text book of Medical laboratoryTechnologyVol1,2 & 3.
- 2. U.Satyanarayana and U.Chakrapani-Biochemistry-third Edition 2009
- 3. Prem Prakash Gupta-Text book of Biochemistry with biomedical significance-2ndedition
- 4. R.C.Guptaand S.Bhargava-Practical Bio chemistry 5thEdition



#### Introduction:

Blood banking is the process in the lab to make sure that donate blood and blood products are safe before the use of transfusion. So on completion of this course the student can aware of the importance of blood donation in saving many lives

## **Course Objectives:**

The objective of this course is to

- Know about blood banking method
- Know about blood groups and antigens
- Get knowledge about anticoagulants
- Know about blood transfusion
- Know about compatibility testing

#### **Course Outcomes:**

After successful completion of this couíse, the students should be able to

- CO1: Describe the maintenance record and documentation blood bank
- CO2: Explain the mechanism of antigen antibody reactions
- CO3: Identify the various techniques of blood grouping
- CO4: Understand the purpose of anticoagulants used in blood banks
- CO5: Understand the importance of pretransfusion testing.

#### **Pre-requisites:**

Knowledge on Human anatomy and physiology

# **CO/PO** Mapping

CO/PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	3	1	1	2	3
CO2	3	2	3	1	1	2	3
CO3	3	2	3	1	1	2	3
CO4	3	2	3	1	1	2	3
CO5	3	2	3	1	1	2	3

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation



#### **Instructional Strategy:**

- Focus on body fluids..
- Focus on medical terminology.
- Conduct laboratory-based activities that allow students to use their own blood samples
- Explore and solve a medical mystery with laboratory equipments.

#### Assessment Methodology

	С	Continuous Assessment (40 marks)				
	CA1	CA2	CA3	CA4	Examination (60 marks)	
Mode	Written Test 1 ( Units 1 & II)	Written Test 2 ( Units III & IV)	Model Written Examination	Record Work	Written Examination	
Duration	2 hours	2 hours	3 hours	-	3 hours	
Exam Marks	60	60	100	20	100	
Converted to	20	20	10	10	60	
Internal Marks		20	10	10	60	

#### Note:

- CA1 and CA2 Assessment test should be conducted as per the question pattern. Best of one will be considered for 20 Marks.
- CA3 Model examination should be conducted as per the end exam question pattern.
- CA4: Record for the experiments should be maintained and the same have to be evaluated after completion of each practical exercise before the commencement of the next exercise for **20** Marks. The marks awarded should be converted to **10 Marks** for the internal assessment.

#### **Question pattern:**

	CA1 & CA2 Assessment	
Part	Description	Marks
A	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each question carries 2 marks)
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each question carries 7 Marks)
	CA3 Assessment	
Part	Description	Marks
А	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each question carries 2 marks)
В	Answer all 5 questions, choosing any 2 sub- divisions out of 3 from each question under Part –B.	(5Q X 14 =70 Marks)(7+7)



11462362	235	BLOOD BANKING TECHNIQUES	L	Т	Р	С
Practicu	m			0	2	3
Unit I	BLO	DOD BANK MANAGEMENT				
THEORY Reception a	and re	cording of specimen – cataloging and indexing-maint	tenan	ice		
of records-b	oio sat	fety and infection control in blood bank—Medico legal	٦		6	5
aspects – ar	ntigen	and antibody reactions.				
PRACTICAL Experiment-1: Testing of antigens and antibodies Experiment 2: Study of Maintenance of medical records in blood bank						
Unit II	INH	ERITANCE OF BLOOD GROUP SYSTEM				
THEORY Blood group antigensandantibodies—ABO & Hantigens — Rh blood group						
system-testir	ng for	A1 and A2 subgroups-Technique of Blood grouping and	Rh			6
typing Source	ces of	error in grouping and Rh typing.				0
PRACTICA	L					
Experiment 3	: ABC	D Blood grouping -slide method and tube method				3
Exporiment A	· Ph t	uning slide method and tube method				3
Experiment 4	Experiment 4: Rh typing slide method and tube method   3					5
Unit III	PRI	EPARATION OF ANTICOAGULANTS				
THEORY Preparation and uses of –Acid citrate dextrose (ACD), Citrate phosphate Dextrose (CPD-A, CPD-A1, CPD-A2), heparin, ethylene diaminete traacetic acid (EDTA), Optimal additive						
		brage and transportation of blood-physical and biochemical cha	anges	in		



PRACT	ICAL		
Experime	nt 5: Preparation of anticoagulants	3	
Experime	nt 6: Testing for A1 and A2 subgroups	3	
Unit IV	BLOOD TRANSFUSION		
THEOR Collection	Y n of blood-Pre transfusion Clinical significance of Compatibility testing—		
Major cro	oss Matching, Minor cross matching- separation of blood components-	6	
blood transfusion technique.			
PRACTICAL			
	ent 7: Cross matching-Major cross matching ent 8: Cross matching-Minor cross matching	3 3	
Unit V	COMPATIBILITY TESTING		
THEOR	Y		
LISS(Low ionic strength solution) method,			
Coomb's Test or Antihuman globul in test-Direct and indirect methods			
PRACTICAL			
Experiment 9: Compatibility testing-Coomb's test-direct method			
Experime	ent 10: Compatibility testing-Coomb's test-indirect method	3	
	TOTAL HOURS	60	

# Suggested List of Students Activity

- Presentation/Seminars by students on any recent technological developments based on the course
- Periodic quizzes conducted on a weekly/fortnightly based on the course
- Students can visit nearby Laboratory to know more about various blood tests.

#### **Text Books:**

- S R Mehdi. Text "Essentials of blood banking". Jaypee brothers medical publishers 2013.
- Ganga S Pilli "Blood banking and transfusion medicine", second Edition, CBS publishers 2021



#### **References:**

- 1. Kanai L. Mukherjee-Text book of Medical laboratoryTechnologyVol1,2&3.
- 2. V.H. Talib Practical Textbook of Laboratory Medicine.
- **3.** A.B. Dutta Blood bank and Transfusion.
- 4. H.B. Williams- Laboratory manual of Serology, Immunology and Bloodbanking
- 5. Dacee-Haematology and Blood banking

## **E- Web-based/Online Resources**

- <u>https://www.researchgate.net/publication/277935782\_A\_Novel\_Technique\_for\_Online\_Blood\_Bank\_Management</u>
- https://www.gihsonline.com/blood-banking-management/

## List of Equipments

S.No	Name of Equipments	Quantity
1	Test tube	30
2	Chemical reagents	As required
3	Burners	2
4	Centrifuge	2
5	Microscope	2
6	Test tube holders	15
7	Beakers	20
8	Incubator	2
9	Glass slides	100
10	Syringes	As required
11	Cotton	As required
12	Lancet	As required
		•



#### Introduction

This Course deals with the methods of identifying heart conditions associated with unhealthy, pathologic heart function.

# **Course Objectives**

The objective of this course is to enable the student to

- 1. Define an ECG and state the fundamental principles of electrocardiography.
- 2. Calculate the heart rate from an ECG tracing.
- 3. Identify the various planes and Axis of an ECG.
- 4. Comprehend the steps of ECG interpretation including the properties of a normal sinus rhythm.
- 5. Describe the need for a holter monitor
- 6. Conduct independently a tread mill test.
- 7. List the various emergencies that can be expected during a tread mill test.

#### **Course Outcomes**

On successful completion of this course, the student will be able to

- CO1: Enumerate on the working of an ECG machine, the various parts and the maintenance of the same.
- CO2: Describe the properties and characteristics of each type of arrhythmia
- CO3: Interpret sinus node arrhythmias, atrial and ventricular arrhythmias on an ECG.
- CO4: Enumerate the technologist's role in maintaining a holter monitor.
- CO5: Explain the physiology of exercise testing the indications, contraindications and the precautions to be taken for the tread mill test.

#### **Pre-requisites**

Knowledge of basic science



# **CO/PO Mapping**

CO / PO	PO1	PO2	PO3	PO4	PO5	PO6	PO7
CO1	3	2	1	-	1	2	3
CO2	2	2	3	1	-	2	3
CO3	3	-	1	-	2	3	2
CO4	2	3	-	2	1	3	2
CO5	1	2	2	1	3	3	1

Legend: 3-High Correlation, 2-Medium Correlation, 1-Low Correlation

## **Instructional Strategy**

- It is advised that teachers take steps to stimulate pupils' attention and boost their learning confidence.
- To help students learn and appreciate numerous concepts and principles in each area, teachers should provide examples from daily life, realistic situations, and real-world engineering and technological applications.
- The demonstration can make the subject exciting and foster in the students a scientific mindset. Student activities should be planned on all the topics.
- Throughout the course, a theory-demonstrate-practice-activity strategy may be used to ensure that learning is outcome- and employability-based.
- Do not let students work on an activity or an experiment with the expected outcome, rather allow students to be honest about whatever the results of the experiment are. If the results are different from the expectations, students should do an analysis where they could be the source of error, if any



## **Assessment Methodology**

	С	Continuous Assessment (40 marks)				
	CA1	CA2	CA3	CA4	Examination (60 marks)	
Mode	Written Test 1 ( Units 1 & II)	Written Test 2 ( Units III & IV)	Model Written Examination	Record Work	Written Examination	
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Internal Marks		20	10	10	60	

Note:

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- CA3 Model examination should be conducted as per the end exam question pattern.
- CA4: Record for the experiments should be maintained and the same have to be evaluated after completion of each practical exercise before the commencement of the next exercise for 20 Marks. The marks awarded should be converted to 10 Marks for the internal assessment.

Question pattern.		

Question pattern.

	CA1 & CA2 Assessment							
Part	Description	Marks						
A	16 Questions to be answered out of 20 Questions	16Q X 2 = 32 Marks(Each						
		question carries 2 marks)						
В	4 Questions to be answered out of 6 Questions	4QX 7 = 28 Marks (Each						
		question carries 7 Marks)						
	CA3 Assessment							
Part	Description	Marks						
А	15 Questions to be answered out of 20 Questions	15Q X 2 = 30 Marks(Each						
		question carries 2 marks)						
В	Answer all 5 questions, choosing any 2 sub-	(5Q X 14 =70 Marks)(7+7)						
	divisions out of 3 from each question under							
	Part –B.							



114623		CARDIOVASCULAR INVESTIGATION	L	Т	Р	С
	Practicum 2 0		0	2	3	
Unit I BASIC ELECTROCARDIOGRAPHY (ECG)						
Theory						
Fundament	Fundamental principles of electrocardiography - Cardiac electrical field generation					
during activ	during activation - Cardiac electrical field generation during ventricular recovery - Leads					
and their position - Standard limb leads - Precordial leads and the Wilson central						<i>с</i>
terminal -	Augmente	ed limb leads - The hexaxial reference frame and electr	ical a	ixis -		6
Recording	adult and	pediatric ECGs - Normal electrocardiogram-explaining	PQR	ST -	Þ	
Normal timings - Heart rate calculations - Sinus tachycardia - Sinus bradycardia - Sinus						
arrhythmia	arrhythmia- Removal of leads					
Practical Experiment #1: Recording a 12 lead ECG and a rhythm strip						6
Unit II ADVANCED ELECTROCARDIOGRAPHY (ECG)-I						
Theory						
Interpretation of and ECG strip - Steps involved - ECG abnormalities - Atrial						
arrhythmias - Left atrial abnormality - Right atrial abnormality - Ventricular arrhythmias						
- Left ven	tricular h	pertrophy and enlargement - Right ventricular hypertr	rophy	and		6
enlargement - Intraventricular conduction delays - Left anterior fascicular block - Left						
posterior fascicular block - Left bundle branch block - Right bundle branch block -						
Myocardial ischemia and infarction						
Practical Experiment #2: Steps in interpretation of an ECG Atrial premature contractions (ectopics) Atrial tachycardia Ventricular pre-excitation Left and right bundle branch block Ventricular escape beats Ventricular premature beats (ectopics).						9
Unit III ADVANCED ELECTROCARDIOGRAPHY (ECG)-II						
Theory						6



146236236	CARDIOVASCULAR INVESTIGATION		Т	Р	(
Practicum			0	2	
Atrial flutter Ventricular p de pointes - Ventricular b and 2 block Maintenance Practical	<ul> <li>/thmias - Premature atrial contraction - Supra-ventricular tage</li> <li>/fibrillation - Junctional rhythm - Accelerated junctional</li> <li>remature beats - Ventricular Tachycardia/Ventricular fibrillation</li> <li>Idioventricular rhythm - Accelerated idioventricular rhyth</li> <li>lock - Atrio Ventricular block - First degree - Second degree M</li> <li>Complete heart block - A technologist's role in ECG integend Care of the ECG Machine.</li> <li>3: Maintenance and care of ECG machines.</li> <li>Atrial flutter</li> <li>Atrial fibrillation</li> <li>Supraventricular tachycardia</li> <li>Accelerated AV noda (junctional rhythm)</li> </ul>	l rhy n - To hm - Iobitz	orsedes Atric type 1	- 5 )	
Theory	IOLTER				
Introduction to the Holter test - Indications for a holter test - Precautions to be taken during holter testing - Principles of Holter Recording - Connections of the Holter recorder - Holter Analysis - Guidelines for ambulatory electrocardiography - Procedure for a Holter test					
Practical Experiment #4: Interpretation of a Holter test					
				6	
Unit V 7	4: Interpretation of a Holter test <b>TREADMILL EXERCISE STRESS TESTING</b>			6	
Unit V7TheoryHistory Takipreparationcardiographicprecautions-		Non cation	electro s and		
Unit VTTheoryHistory Takipreparationcardiographicprecautions-Cardiac arrhyPractical	<b>READMILL EXERCISE STRESS TESTING</b> ng- Exercise physiology - Exercise protocols - Lead system         ST segment displacement – types and measurement – 1         observations - Exercise test indications, contra-indic         Recognition of patient risk factors associated with exercise	Non cation	electro s and		

# Suggested List of Students Activity

- Presentation by students on recent trends on the relevant topics
- Periodic quizzes can be conducted



L	Т	Р	С
2	0	2	3

# Reference

- 1. Dhanjoo N. Ghista Noninvasive Cardiac assessment technology
- 2. Alberto Benchimol Non-invasive diagnostic techniques in cardiology Williams & Wilkins, 1981
- 3. Atul Luthra ECG Made Easy JP Medical Ltd, 2012
- 4. Malcolm S. Thaler The Only EKG Book You'll Ever Need, Volume 365 Lippincott Williams &

Wilkins, 2009

# Web-based/Online Resources

https://nptel.ac.in/courses/127106232

https://www.primescholars.com/cardiovascular-investigations-open-access.html

# List of Equipment's

S.No	Equipments	Quantity Required
1	ECG machine	2
2	Holter Monitor	2
3	Electrodes	As required

