

KUZHANTHAI MARUTHUVAM

6-DAYS CME MODULE FOR TEACHERS

S.No	Topic	Content	Duration
1.	Diagnostic methods and preventive aspects of children disorders	To instill the importance of protection and preventive healthcare in creating a sense of WELLNESS in children, families and society at large, Learning the Five components of Preventive, Pediatrics Health are and Health Maintenance, Recommended Childhood Immunization, properties of breastmilk, immunologic specificity, perfect food for babies breast milk composition, benefits of breastfeeding, prevention of disorders of children before birth	1 ½ Hour
2.	Diagnostic methods and preventive aspects of children disorders	Maternal Nutrition, Maternal Immunization - prevention of primary infection during pregnancy, Avoidance of teratogens Maternal Disease Management, Diagnose maternal disorders and treatment, Maternal autoimmune disorders identify and treat Newborn screening, Surgical management of birth defects	1 ½ Hour
3.	Digestive /Enzymatic disorders and Mantham	Clinical varieties, Classifications, Common Gastro Intestinal Problem in Pediatrics, Inflammatory Bowel diseases, Extra intestinal manifestations	1 ½ Hour
4.	Digestive /Enzymatic disorders and Mantham	compared manthams described in Siddha literature with modern scientifically proved pediatric diseases with excellent examples like Paal Mantham (Lactose intolerance) Gluten-Sensitive Enteropathy Celiac Disease, Kal Mantham (Hepatic Amebiasis), Akkara Mantham (Acute Herpetic Gingivostomatitis) Varal Mantham (Kwashiorkor), Vida Mantham (Congestive Cardiac Failure) Neer Mantham (Congenital Hypothyroidism), Kattu Mantham Brill-Zinnser disease Eri Mantham (Malaria), Kana Mantham (Bacterial Pneumonia) Seriya Mantham (Viral Gastroenteritis) Karpa Mantham (Hirschsprung's disease)	1 ½ Hour
5.	National projects in Mother and child care including ASHA	National Rural Health Mission (NRHM) to address the health needs of rural population, Mobilize the community and facilitate them in accessing health Oral Rehydration Therapy (ORS), Iron Folic Acid Tablet (IFA), Disposable Delivery Kits (DDK), Oral Pills & Condoms	1 ½ Hour

		etc. A Drug Kit will be provided to each ASHA., AYUSH ASHA ROLE, AYUSH KIT	
6.	National projects in Mother and child care including ASHA	Malnutrition and Anaemia Rates Are High among Children Only 44 percent of breastfeeding children 6-23 months are fed at least the minimum recommended number of times per day. Iron and Folic Acid supplementation, Vulnerability to Iodine Deficiency, Integrated Child Development Scheme (ICDS) , UNICEF & ICDS – WHAT THEY WORK FOR? Prime Minister's Letter to Chief Ministers of Every State, School health scheme , Mass Deworming Programme, Screening for cardiac diseases, Health Education	1 ½ Hour
7.	Recent advances in cardio vascular disorders in children	Congenital heart disease, Rheumatic heart disease , Ischemic & degenerative heart disease COMPLICATION, SURGICAL MANAGEMENT	1 ½ Hour
8.	Recent advances in cardio vascular disorders in children	CYANOTIC AND ACYANOTIC CYANOTIC - Right – Left shunt, Tetralogy of fallot, Pulmonary atresia with VSD, Tricuspid atresia, Transposition of great arteries, Ebsteins anomaly ACYANOTIC : LT – RT SHUNT - Atrial septal defect ,Ventricular septal defect, Patent ductus arteriosus	1 ½ Hour
9.	Management of childhood Asthma and Tuberculosis	Factors that Influence Asthma Development and Expression, Inflammation in asthma, Asthma Inflammation: Cells and Mediators, Smooth muscle contraction – Asthma, Airway Pathology - Asthma	1 ½ Hour
10.	Management of childhood Asthma and Tuberculosis	Airway remodeling -permanent structural changes in airway Focal Or Persistent Radiological Changes Stepwise management of asthma in children	1 ½ Hour
11.	Overview of Allergic diseases in Children	Allergic Disease: Prevalence Of Symptoms In Children Phases Of Allergy, Concept Of "Minimal Persistent Inflammation" Hygiene Hypothesis Allergy Threshold, Aria Definition Of A.R.	1 ½ Hour
12.	Overview of Allergic diseases in Children	Inter Relationship Between Allergic Rhinitis And Associated Airway Disease, Co-Morbidities And Allergic Rhinitis, How Common Is The Association, Link Between Ar And Asthma, Children With Chronic Cough, Diagnosis Of Allergy Case Scenarios	1 ½ Hour
13.	Integrated Neo-Natal Management of Childhood Illness	The inequities of child health & the Indian situation, Rationale for an evidence-based syndromic approach to case management, Components of the integrated approach, The principles of integrated care The IMNCI case	1 ½ Hour

		management process, Assessment of sick young infants, Communicating with the caretaker	
14.	Integrated Neo-Natal Management of Childhood Illness	Checking for Possible Bacterial Infection / Jaundice, Checking for Diarrhoea, Checking for Feeding problems or malnutrition, Checking immunization status, Assessing other problems, Assessment of sick children, Checking for general danger signs, Checking main symptoms - Cough or difficult breathing - Diarrhoea - Fever - Ear problems Checking for malnutrition, Checking for anaemia, Checking immunization, vitamin A & folic acid supplementation status, Assessing other problems	1 ½ Hour
15.	An approach to Infertility in Siddha & Modern aspects	Beginning of a New Life, Integration of Reproductive Systems in siddha and modern theories, Male and Female Reproductive System, The Menstrual Cycle, Fertility, essential facts on caring for couples with infertility in primary care	1 ½ Hour
16.	An approach to Infertility in Siddha & Modern aspects	Causes for Infertility in Siddha aspect, Medical management of infertility, Assisted Reproductive Technologies (ARTs), In-Vitro Fertilization and Embryo Transfer (IVF-ET), Intracytoplasmic Sperm Injection (ICSI), Multiple Gestations, Sperm Bank	1 ½ Hour
17.	Diarrheal disorders Management and limitations	Causes of diarrhoea, physiological disturbance and clinical approach, impact of diarrhoea on the general physique of children and discussed about the various preventive, management strategies.	1 ½ Hour
18.	Diarrheal disorders Management and limitations	Determine the frequency and severity of symptoms, red flag symptoms, Assess for complications of diarrhoea, such as dehydration, Consider a rectal examination, stool specimen for culture and sensitivity	1 ½ Hour
19.	New drug development process & Ethical guidelines for paediatric clinical research	Drug Development Stages, Pre clinical studies, Reasons For Drug Failure, Clinical Studies – Phases, Timing of Studies, Regulatory, terms, Ethical Guidelines for paediatric clinical research, Various Phases of New Drug Development	1 ½ Hour
20.	New drug development process & Ethical guidelines for paediatric clinical research	Clinical Trial Regulations, Preclinical Testing,. Cost Per Stage, Regulatory Terms, Clinical Trial: Legal & Procedural aspects, What should you consider before joining a clinical trial, The evaluation of Clinical Trial Regulations, Who are all doing Clinical Research, Clinical Trial Protocol, Type of Clinical Trials, Types of Blinding , Benefits of Participation in Clinical Trials, Review boards	1 ½ Hour
21.	Growth and development and its congruence with Paruvangal	Child Health and its problems relating with Paruvangal, Importants of Growth & Development in the childhood & Adolescence, Promotion of the physical and psychological development of the child and adolescent within	1 ½ Hour

		the family, Periods of Intrauterine growth, STAGES OF GROWTH & DEVELOPMENT, Neonatal Reflexes	
22.	Growth and development and its congruence with Paruvangal	Weight, HEIGHT (LENGTH), MUAC (Mid upper arm circumference) CALCULATION OF ANTHROPOMETRICAL PARAMETERS, Mnemonic for Growth and Development, BODY PROPORTIONS, FINE MOTOR, SUMMARY OF MILESTONES OF DEVELOPMENT Handling the Child	1 ½ Hour
23.	Integrated Management of Maternal and Childhood illness.	In today's scenario with a slight exxagation no women deliveries without a cut, Is episiotomy a real need or a ritual. Why do we do episiotomy, Prevention of perineal damage and its sequelae , revention pelvic floor relaxation, Protection of new born from intra cranial hemorrhage and intra partum asphyxia	1 ½ Hour
24.	Integrated Management of Maternal and Childhood illness.	Protection of new born from intra cranial hemorrhage and intra partum asphyxia, Episiotomy Vs Natural tear, The association between episiotomy and a reduction in the likelihood of subsequent pelvic relaxation has never been proven, Antenatal care SIDDHA, Every patient was treated individually based on the imbalance in her pancha bhoota according to her symptoms and diet was advised. The research proves that by using siddha medicine episiotomy can be totally avoided and also it provides a pleasant motherhood with a healthy child.	1 ½ Hour
	Pre and Post Training Assessment	Assessment and feedback form may be given to participants before the commencement of sessions, so that they fill the forms at the end of each session/day and put them in sealed overlaps	1 Hour
Total			37 Hours

Total sessions – 24 (Twenty Four)

Total Duration – 6 (Six) days