**Title of Proposal**

A Project proposal submitted to (Institute name), DUHS, in the partial fulfillment of the requirement for the Program of

Master of Philosophy

(Phuysiology/Physiotherapy)

****

By

**Name of the candidate**

M.B.B.S, 2002

(Dow Medical College)

Institute of Basic Medical Sciences

Dow University of Health Sciences

Karachi

April 2013

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**CERTIFICATE**

**Researcher:**

Name:

Designation:

Department:

Qualification:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supervisor:**

Name:

Designation:

Department:

Qualification:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Co-Supervisor: (If Any)**

Name:

Designation:

Department:

Qualification:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Clinical Supervisor: (If Any)**

Name:

Designation:

Department:

Qualification:

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ABSTRACT (Structured)**

1. Background
2. Objective
3. Methodology

**Keywords:**

**1. INTRODUCTION (Sample)**

Adiponectin, an adipose tissue hormone exclusively and abundantly expressed in white adipose tissue is more closely relatedto insulin sensitivity and fasting insulinemia than to adiposity, which suggests that the hypoadiponectinemia inpeople with obesity is in large part attributableto insulin resistance and/or hyperinsulinemia1. Women with PCOS have low levels of circulating adiponectin as compared to normal lean women. Though the levels are low in women with PCOS, it’s the degree of glucose intolerance and insulin resistance that is the strongest predictor of decrement of circulating adiponectin levels2. Recent research suggests that the interaction between adiponectin and PCOS pathogenesis seem independent of BMI3. It has been reported further that high molecular weight (HMW) adiponectin is reduced in PCOS women, independent of BMI and IR4. The present study will explore the association of serum adiponectin and degree of insulin levels in PCOS women.

* 1. Significance of the problem
  2. Statement of the problem
  3. Hypothesis
  4. Operational definitions
  5. Limitations

1. **REVIEW OF LITERATURE**
2. **METHODOLOGY**
   1. Sample Description
      1. **Inclusion Criteria**
      2. **Exclusion Criteria**
   2. Research design
   3. Data collection
   4. Statistical Treatment
      1. **Study variables include:**
      2. **Statistical Analysis**

The software used for data analysis will be **IBM SPSS Base Licensed version 21**……

3.5. Study Time Line & Schedule

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| S.NO | WORKING STEPS | TIME (MONTHS) | | | | | | | | |
|  |  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | |
| 1. | Synopsis writing & approval |  |  |  |  |  |  |  |  |  | |
| 2. | Grant approval |  |  |  |  |  |  |  |  |  | |
| 3. | Pilot study and necessary prep. |  |  |  |  |  |  |  |  |  | |
| 4. | Data collection |  |  |  |  |  |  |  |  |  | |
| 5. | Data processing |  |  |  |  |  |  |  |  |  | |
| 6. | Project writing/presentation |  |  |  |  |  |  |  |  |  | |

3.6 Budget

3.7 **Appendices:** (If Any) **Appendix A**

Questionnaire

* + 1. **Appendix B**

Informed Consent Form

(If in Urdu so it should be type in “Phonetic” Keyboard View not in Arabic)

3.10. Bibliography

The references should be write in **Vancouver Style**. (Suggest to use Endnote)

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