THE TAMIL NADU Dr. M.G.R. MEDICAL UNIVERSITY

No. 69, ANNA SALAI, GUINDY, CHENNAI – 600 032.

M.D. / M.S.

POST GRADUATE DEGREE COURSES

SYLLABUS AND CURRICULUM

2021 – 2022

M.D. GENERAL MEDICINE

THE TAMIL NADU Dr. M.G.R MEDICAL UNIVERSITY, CHENNAI

M.D. GENERAL MEDICINE

1. GOAL

The goal of MD General Medicine Programme shall be to producecompetent specialists and/or Medical teachers.

i. who shall recognize the health needs of the community, and carry out professional obligations ethically and in keepingwith the objectives of the national health policy

ii. who shall have mastered most of the competencies, pertaining to General Medicine, that are required to be practiced at the secondary and the tertiary levels of the healthcare delivery system;

iii. who shall be aware of the contemporary advance and developments in General Medicine

iv. who shall have acquired a spirit of scientific inquiry and is oriented to the principles of research methodology and epidemiology; and

v. who shall have acquired the basic skills in teaching of the medical and paramedical professionals.

2. OBJECTIVES:

At the end of the postgraduate training in General Medicine in thestudent shall be able to

A) Knowledge

i. Recognize the importance to General Medicine in the context of the health needs of the community and the national priorities in the health section.

ii. Practice General Medicine ethically and in step with the principles of primary health care.

iii. Demonstrate sufficient understanding of the basic sciences relevant to General Medicine

iv. Identify social, economic, environmental, biological and emotional determinants of health in a given case, and take them into account while planning therapeutic, rehabilitative, preventive and primitive measure/strategies.

B) Attitude

i. Demonstrate empathy and humane approach towards patients and their families and exhibit interpersonal behaviour in accordance with the societal norms and expectations.

C) Skills

ii. Diagnose and manage majority of the conditions in General the basis of clinical assessment, and appropriately selected and conducted investigations.

iii. Plan and advise measures for the prevention and rehabilitation of patients suffering from disease and disability related to General Medicine

iv. Demonstrate skills in documentation of individual case details as well as morbidity and mortality rate relevant to the assigned situation.

v. Play the assigned role in the implementation of national health programme, effectively and responsibly.

vi. Organize and supervise the chosen/assigned health care services demonstrating adequate managerial skills in the clinic/hospital or the field situation.

vii. Develop skills as a self-directed learner, recognizecontinuing education needs; select and use appropriate learning resources.

viii. Develop skills in using educational methods and techniques as applicable to the teaching of medical/nursing / Allied Health Sciences students, general physicians and paramedical health workers.

ix. Function as an effective leader of a health team engaged in health care, research or training.

3. COMPONENTS OF THE POSTGRADUATE CURRICULUM

- THEORETICAL KNOWLEDGE
  As per attached theory syllabus

- PRACTICAL AND CLINICAL SKILLS

No.	Technical Procedures	
I.	HEMATOLOGY Peripheral	
	smear – [preparation,	
	staining & interpretation]	
	• Bone marrow aspiration	
	preparation, collection,	
	transport, processing	
	and interpretation]	
	• Bone marrow biopsy	
II.	RESPIRATORY SYSTEM	
	• Pulmonary function test	
	• Peakflow meter	
	• Endotracheal Intubation	
	• Ventilator Management	
	• Pulse oximetry	
	• Pleural aspiration	
	• Insertion of intercostal	
	tube [ICT]	
	• Pleural biopsy	
	• Pleurodesis	
	• Fiberoptic bronchoscopy	
	• Bronchial Artery	
	Embolization	

		• ABG, VBG, Procedure and interpretation		
		• Polysomnography		
III.		CARDIO VASCULAR		
		• Pericardiocentesis		
		Temporary pacing		
		Defibrillation		
		ECHO cardiogram -		
		training and use in		
		regular and emergency		
		cases and for procedures		
		TMT testing		
		Holter monitoring		
IV.		ABDOMEN		
A		Insertion of catheterfor-		
		1.Peritoneal dialysis		
		2.Hemodialysis		
		3.Care of catheter		
		4.Catheterization of		
		Bladder		
B		Vascular procedures		
		1.Preparing cases for AV		
		Fistula		
		2,Care of AV fistula		
VI		CNS		
		Fundus Examination		

	Lumbar puncture, EEG,		
	EMG, Muscle Biopsy,		
	Nerve Biopsy		
VII	Endocrine investigations		
VIII.	OTHERS		
	Arterial puncture for		
	ABG		
	Central venous catheter		
	[insertion & care]		
	FNAC		
IX.	SPECIMEN		
	COLLECTION FOR		
	A] Microbiology		
	Urine		
	Stool		
	sputum		
	Blood		
	Body fluids		
	Swabs – Throat, nasal, etc.,		
	B] Pathology		
	Body fluids		
	Smear analysis		
	Specimen		
	C]Biochemistry		
	[special investigation]		
	Collection		
	Transportation		
	PATIENTS-		
	A]. Radiology & Imaging		
	X-rays -		
	Contrast studies		
	CT scan		
	MRI		
	B]. Radio-isotope studies		
	C]. Radiotherapy		
	D]. Invasive / Non invasive Procedures		
XI	Ultrasonogram –		
	training and use in		
	regular and emergency		
	USG guided aspiration procedures & Biopsy		

XI	Echocardiogram		
XII	Advanced high support technique		
XII	Newer aspects as felt		
	by the department/		
	speciality or recommend		
	by Authorities		
	(Audiogram, Evoked		
	potential, Joint		
	aspiration, MRCP/ERCP)		

- WRITING THESIS / RESEARCH ARTICLES

The topic for the dissertation should be registered and sent to the University after Ethics Committee approval before 31st of December of the first Post Graduate Year.

Thesis shall be submitted at-least 6 Months before the Theory and Clinical/Practical Examination.

- ATTITUDES INCLUDING COMMUNICATION SKILLS

Student should develop the art of eliciting the maximum information from patients in a given time considering the sensory deficits of the patient and caregivers. Communication skills can be learnt through observation and from formal communication skills training and workshops. Students have to develop patience and empathy in dealing with elderly patients. They have to learn to show sensitivity to their special needs.

- TRAINING IN RESEARCH METHODOLOGY MEDICAL ETHICSBIO ETHICS AND MEDICOLEGAL ASPECTS

Students should compulsorily attend the research Methodologyworkshop conducted by the University within first six months of the M.D course.

Students are encouraged to attend workshops/CME's on Bioethics conducted by the University and other reputed Institutions.

Medical ethics, moral and legal issues, medical audit are partand parcel of the curriculum and syllabus.

4. THEORY SYLLABUS

M.D. Br. I - GENERAL MEDICINE APPLIED BASIC SCIENCES

ANATOMY INCLUDING HISTOLOGY :

- Embryology - Development of Heart and Great Vessels
- Development of Brain and Spinal Cord.
- Anatomy of Brain and Spinal Cord with their Blood Supply and Venous Drainage.
- Cranial Nerves and Autonomic Nervous System.
- Nervous Control of Bladder and Rectum.
- Anatomy including Histopathology of Endocrine Glands.
- Anatomy of Liver, Pancreas and Portal Circulation.
- Anatomy including Histopathology of Kidneys.
- Anatomy including Histopathology of Spleen.
- Anatomy of Bronchopulmonary Segments, Pleura and
- Mediastinum.
- Surface Anatomy of Head and Neck, Thorax and Abdomen.

PHYSIOLOGY INCLUDING BIOCHEMISTRY:

- Liver: Laboratory tests of liver Function.
- Kidney: Laboratory Tests of Kidney Function.
- Exocrine and Endocrine function of pancreas.

- Hormones: Pituitary, Adrenal, Thyroid, Parathyroid, and Chemistry
- of Steroids - Various tests to study function of Endocrine Glands.
- Pulmonary Function Tests.

- The mechanism of Deglutition.
- Digestion: Gastric and Intestinal secretion and their Hormones- Mechanism of absorption of Fat, Proteins and Carbohydrates.
- Heart: Basic principles of condition system and electro-cardiogram - Circulation - Measurement of cardiac output - Factors controlling arterial blood pressure – Mechanism of production of cardiac failure and syndrome of shock.
- Blood, Plasma, proteins - Coagulation of blood RBC and WBC development - Platelets - Erythropoiesis and its regulation - Blood groups - Iron Metabolism.
- Physiology of Micturition and Defaecation.
- Fluid and electrolyte balance.
- Calcium and Phosphorous Metabolism.
- Carbohydrate metabolism.
- Fat metabolism
- Protein metabolism and electrophoresis.
- Inborn Errors of metabolism.
- Porphyrins and porphyrias.
- Jaundice - Types and Diagnosis.
- Metabolism of Haemoglobin and circulation of Bile pigments.
- Immunoglobulin and the Mechanism of Immunity.
- Physiology of consciousness.
- Physiology of sleep and disorders of sleep.
- Temperature regulation.
- Physiology of hunger and its disorders.

PATHOLOGY INCLUDING MICROBIOLOGY:-

Central nervous system: Brain and spinal cord Meningitis and Encephalitis, Abscess Tumors, Syphilis .of nervous system, Nutritional and metabolic disorders, epilepsy, vascular diseases.

- Heart: Rheumatic fever and carditis, Coronary artery diseases Hypertension, Atherosclerosis, Cardiomyopathy, Pericarditis,
- Specific and non specific arteritis, Congenital Heart diseases.
- Kidneys: Nephritis, Nephrosis, Kidney, changes in metabolic and collagen vascular diseases, Acute and chronic renal failure.
- Lungs: Pulmonary tuberculosis, atypical mycobacteria, Tumours of
- lung.
- Liver: Portal hypertension, Cirrhosis of liver, Tumors of liver.
- Bone: Disorders of Mineral and Bone matrix.
- Endocrine Glands: Myxoedema and Thyrotoxicosis, Hyper and hypoparathyroidism, disease of Pituitary, Adrenal Cortex and Medulla.

- Diabetes Mellitus and its complications – Pathological changes in
- Viscera.
- Gastro intestinal disorders: Peptic ulcer, Malabsorption syndrome, Ulcerative colitis, Amoebiasis (Intestinal and extraintestinal).
- Lymphomas. Leukemias and other blood dyscariasis.

PHARMACOLOGY:

- Chemotherapy, Antibiotics and antimicrobials
- Antimalarialdrugs.
- Antiamoebic drugs.
- Antihelminthics.
- Analgesics.
- Sedatives.
- Tranquilizers.
- Antiviral agents.
- Antimitotics.
- Drugs acting on Autonomic nervous system.
- Hormones.
- Drugs for Epilepsy.
- Diuretics.
- Cardiac glycosides.
- Antiarrythmic drugs.
- Coagulants and anticoagulants.
- Histamine and antihistamine drugs.
- Alcohol.
- Vaccines and Immune Sera.
- Drug abuse, drug tolerance, drug addiction

SYLLABUS FOR PART II

(A) TROPICAL MEDICINE:

- Diseases caused by Protozoa: Malaria, African and American Trypanosomiasis, Leishmaniasis, Toxoplasmosis, Coccidiosis and
- Pneumocystis infection, Ameobiasis, Giardiasis
- Diseases caused by Helminths: Filariasis, Other Nematode infestation, Trematode and Cestode infestation.
- Diseases caused by Viruses: Arbovirus diseases Pox diseases, other viruses' diseases: Measles, Infective Hepatitis, poliomyelitis, Rabies.

- Diseases caused by Bacteria: Leprosy,Tuberculosis, Plague, Meliodosis, Brucellosis Tularaemia, *Cholera,* Shigelloses and Diarrhoea, Salmonelloses, Tetanus, Anthrax, Tropical Pyomyositis,
- Rhinoscleroma, Meningitis.
- Diseases caused by Spirochetes: Relapsing fevers, Rat bite fever, Leptospirosis.
- Diseases caused by Rickettsiae and Bartonella
- Tropical Veneral Diseases: Lymphogranuloma Venereum, Granuloma Inguinale.
- Diseases caused by Fungi: Superficial Mycoses – Systemic
- Mycoses.
- Neurological Diseases, Neurasthenia in Tropics, Kuru
- Heart Disorders: Heat stroke and heat hyperpyrexia.
- Nutritional Diseases: Nutritional deficiency syndromes, Malabsorption in the Tropics, Vitamin deficiencies, Nutritional.
- Poisons: Chiggers, Mites and Animal poisons – plant poisons,leeches and Leech Infestation.
- Ophthalmology in the Tropics:

B. INTERNAL MEDICINE

1. Introduction to Clinical Medicine:

Headache – Pain in the chest, Abdominal pain, Pain in the back andneck, Pain in the extremities, Disturbances of heat regulation, Chills and fever, Nervousness, Anxiety and Depression, Lassitude and Asthenia, Faintness, Syncope and Episodic weakness, Motor paralysis, Tremor, Chorea, Athetosis, Ataxia and other abnormalities of Movement and Posture, Dizziness – Vertigo and Disorders of Gait, Common disturbances of Vision, Ocular movement and hearing, Disorders of sensation, Coma and related disturbances of consciousness – Sleep and its abnormalities, The Convulsive state, Affections of Speech, Delirium and other acute confusions states, Derangement of intellect and behaviour due to diffuse and focal cerebral disease, Dyspnoea, Cyanosis, Hypoxia and Polycythemia, Oedema, Palpitation, Hypotension and the Shock Syndrome, Elevation of Arterial Pressure – Sudden CardiovascularCollapse and Death, Cough and Hemoptysis, Oral manifestations of disease, Dysphagia – indigestion, Anorexia, Nausea and vomiting, Constipation, Diarrhoea and disturbances of Anorectal function, Hemetemesis and Melena, Jaundice and Hepatomegaly, Abdominal swelling and Ascites, Loss of weight, Obesity, Dysuria, Incontinence and

Enuresis, Oliguria, Polyuria and Nocturia, Hematuria, Disturbances of Menstruation – Disturbances of sexual function, Infertility, Pallor and Anemia, Bleeding, Enlargement of Lymph Nodes and Spleen, Alteration inLeukocytes.

2. Genetic Factors in Disease: Cell divison and reproduction
The nature of genetic material, The pattern of familial disorders, Visible abnormalities of Chromosomes – Genetic advice.

3. Immunological factors in disease:
Components of the Immune System, Mechanism of the Immune Response, Immune deficiency and Lymphoproliferative disorders, Types of Immune reaction and their relation to human disease, Suppression of immune reactions and their effects.

4. Infections diseases and Tropical Medicine & Hygiene

5. Infectious Diseases

6. Chemotherapy of infections

7. Antibiotic Audit

8. Infection control Strategies

- Immunisations: Active and passive.

- Nutritional disorders:

Protein - Calorie Malnutrition, Kwashiorkar, Marasmus, Nutritional dwarfing, Mineral deficiencies, Vitamin deficiencies, Obesity, Anorexia Nervosa, Bulimia.

9. Disturbances in water and electrolyte balance

10. DISEASES OF CARDIOVASCULAR SYSTEM:
Principles of clinical electrocardiogram, Cardiac dysarrhythmias, Cardiac failure, Rheumatic fever, Valvular diseases, Congential heart diseases, Ichaemic heart disease, Pericardial diseases, Cardiomyopathies and Myocarditis, Cardiac tumours, Atherosclerosis, Hypertension, Diseases of Aorta, Peripheral vascular diseases, Cardiovascular syphilis.

11. DISEASES OF THE RESPIRATORY SYSTEM:
Disturbances of respiratory functions, diseases of upper respiratorytract, Obstructive Airway Diseases, Bronchiectasis –Lung Abscess, Broncholithiasis, Diffuse, infiltrative diseases of Lung, Pulmonary thromboembolism, Hypersensitivity reactions of Lung, Environmental Lung Diseases – Primary Pulmonary Hypertension, Neoplasms of Lung, Diseases of Pleura, Mediastinum and Diaphragm, Corpulmonale, Acute Respiratory Failure.

12. DISEASES OF THE DIGESTIVE SYSTEM:
Diseases of Oesophagus, Peptic Ulcer,Gastritis and other diseases of Stomach including Carcinoma, Diseases of small intestine, Diseases of Colon and Rectum – Diseases of Peritoneum and Mesentery.

13. DISEASES OF LIVER AND BILIARY TRACT:
Diagnostic Procedures in Liver Diseases, Derangement of Hepatic Metabolism, Disturbance of Biliary Metabolism, Acute Hepatitis, Chronic Active Hepatitis, Cirrhosis of Liver, Tumours of Liver, Suppurative Diseases of Liver,Infiltrative and Metabolic Diseases affecting the Liver, Diseases of Gall bladder and Bile ducts.

14. DISEASES OF PANCREAS:

15. DISEASES OF KIDNEY AND URINARY SYSTEM:
Acute and Chronic Renal Failure, Giomerulonephritis, Nephrotic Syndrome: Vascular Diseases of Kidney, Toxaemia of Pregnancy, Infections of the Urinary Tract, Obstructive Uropathy – Nephrolithiasis, Cystic Diseases of the Kidneys, Other Congential and Hereditary Disorders of the Kidney and Urinary Tract, Tumours of the UrinaryTract.

16. DISEASES OF THE ENDOCRINE SYSTEM:
The Hypothalamus and Pituitary Gland, Diseases of Anterior Lobe of Pituitary Diseases of Adrenal Cortex and Medulla,Diseases of Testis and Ovaries, Pineal Gland , Diabetes Mellitus, HyperInsulinism,Hypoglycemia, Glucogan Secretion. Diseases of Neurohypophysis, Diseases of Thyroid.

- DISEASES OF THE BLOOD AND BLOOD FORMING ORGANS ORGANS:

Blood Formation Blood Destruction, Anemia, Bone Marrowfailure, Blood Groups and Transfusions Polycythemia Rubra Vera,Abnormal Haemoglobin, Disorders of platelets, Haemorrhagic Disorder, Leukemia, Lymphomas, Diseases of spleen and Reticulo Endothelial system.

- DISEASES OF CONNECTIVE TISSUES, JOINT AND BONES:

Rheumatoid Arthritis, Ankylosing Spondylitis, Systemic Lupus Erythematosis, Scleroderma, Polymyalgia Rheumatica, Gout, PseudoGout, Osteoarthritis, Diseases of Bone, Metabolic and Endocrine Diseases, Tumors of Bone, Metabolic and Endocrine Diseases of Bone,Paget's Disease.

- DISEASES OF THE NERVOUS SYSTEM:

Diagnostic Methods in Neurology, Coma, Headache, Epilepsy, Diseases of Peripheral Nervous System, Diseases of Cranial Nerves, Diseases of Spinal Cord, Cerebro vascular Diseases, Traumatic Diseases of brain, Neoplasms, Pyogenic Infection of Central Nervous System –Tuberculosis and Viral Infections, Multiple Sclerosis, Demyelinating diseases, Metabolic and Nutritional Diseases of Brain, Degenerative Diseases of Nervous system, Developmental and other Congential Anomalies of Nervous Systems, Narcolepsy, Migraine, Disease of Extrapyramidal System, Muscle Disorders, Disorders of Myoneural

Junction.

20. PSYCHIATRY:
Neuroses, Antisocial Personality, Grief, Reactive Depression, Manic depressive Psychosis, Involutional Melancholia and Hypochondriasis, Schizophrenic Syndromes and related Psychoses.

21. ERRORS OF METABOLISM:
Genetic Disorders of Amino acid Metabolism, Cystinuria, Renal Glycosuria Renal Tubular Acidosis, Carcinoid, Syndrome, Gout, Haemochromatosis, Disorders of Porphyrin Metabolism, Hepatolenticular Degeneration, Disorders of Glycogen Synthesis and Mobilization, Galactosemia, Disorders of Lipid Metabolism, Amyloidosis.

- DISORDERS DUE TO CHEMICAL AND PHYSICAL AGENTS INCLUDING NUCLEAR MEDICINE:

Common Poisons, Heavy Metals, Alcohol, Opiates and other Synthetic Analgesic Drugs, Barbiturates, Depressants, Stimulants and Psychogenic Drugs, Disorders Caused by Venoms, Bites and Stings, Disorders due to Environment, temperature. Electric Shock, Lightning, Hanging, Disorders due to Alternations in Barometric Pressure Problems of Air and Space Travel –Radioactive Isotopes and Radiation injury ElectricalInjuries, Immersion Injury and Drowning.

- GERIATRIC MEDICINE:

Problem of old age and disease, condition peculiar to the aged.

24. COMMUNITY MEDICINE:
Problem of over population, Family Planning Programme, National health programmes

25. IATROGENIC DISORDERS:
Induced by Drug and Other forms of Therapy.

DISEASES OF THE SKIN:
Interpretation of alterations in the Skin, Lesions of General Medical significance, Generalized Pruritus, Pigmentatin of the Skin and Disorders of Melanin Metabolism, Photo sensitivity and other Reactions to Light, Hirsutism and Alopecia, Cutaneous Manifestations of Internal Malignancy, Psoriasis, Pemphigus, Scabies and fungal infections of the Skin.

DISEASES OF CHILDREN:
Chromosomal Abnormalities, Social paediatrics, Preventive Paediatrics, Child Health in Developing Countries – Neonatal care – Nutritional Requirements and Nutritional Disturbances – Parenteral Fluid Therapy, Vomiting and Diarrhoeal Disorders – Cardiovascular Respiratory Diseases peculiar to children, Tuberculosis in children – Convulsive disorders, Developmental disorders – Psychiatric Disorders in Childhood

– Immunodeficiency – Metabolic Disorders – Endocrine Disorders.

History of Medicine

Occupational hazards

Space medicine including high altitude

Problems in industrial medicine

Organ transplantation

Imaging technique including CT scan and MRD

1. Medical disorders in Pregnany
2. Stem cell therapy
3. Critical care including ABG analysis / Toxicology
4. Disaster Management
5. Bioterrorism
6. Environmental Medicine
7. International Travel Regulations
8. Medical Fitness
9. International Health Regulations
10. Pharmacovigilance
11. Health Economics
12. HMIS

5. TEACHING LEARNING METHODS

The teaching and training of the students shall include graded responsibility in the management and treatment of patients entrusted to their care; participation in Seminars, Journal Clubs, Group Discussions, Clinical Meetings, Grand Rounds, and Clinico- Pathological Conferences; practical training in Diagnosis and Medical treatment; training in the Basic Medical Sciences, as well asin allied clinical specialties.

The following teaching learning methods are recommended.

- Lectures
- Case based discussion
- Bed side clinics
- Teaching on ward rounds
- Symposia
- Seminars
- Journal clubs
- Problem based learning
- Telemedicine

STRUCTURED TRAINING PROGRAM

1st Year:

Haematology	15 days
Endocrinology	15 days
Paediatrics	15 days

Psychiatry	15 days
Dermatology	15 days
Coronary care unit	15 days
Intensive Medical care unit	15 days
Thoracic Medicine	15 days
Radiology including imaging techniques & Nuclear Medicine	15 days
Diabetology	15 days
Rheumatology	15 days
Cancer Chemotherapy	15 days
Geriatrics	15 days
General Medical Wards	5 1/2 months
TOTAL	12 months

2nd Year:

Cardiology	1 Month
Nephrology	1 Month
Neurology	1 Month
Medical Gastroenterology	1 Month
General Medical Ward	8 Months
TOTAL	12 Months

During IInd year, the Students are encouraged to undergo special postings for learning new advanced techniques / procedure / skills in institutions of higher repute where the requisite facilities are available without affecting the duties of the parent department.

3rd Year:

General Medical Wards … 12 Months

7. Evaluation of the candidates in both theory and practical aspects will help the candidate in improvement of his/her knowledge, skills and attitude.

8. COMPETENCY ASSESSMENT:

1 OVERALL:

1. a) Communication / commitment / Contribution / ()
   Compassion towards patients and Innovation () - 5 Marks
   b) Implementation of newly learnt techniques/Skills ()

2. Number of cases presented in Clinical Meetings/ - 5 marks
   Journal clubs/seminars

3. Number of Posters/Papers presented in Conferences
   /Publications and Research Projects - 5 marks

4. No. of Medals / Certificates won in the conference /Quiz
   competitions and other academic

meetings with details. - 5 marks

Total 20 Marks

PG CLINICAL COURSES

VIVA including Competency Assessment -80 Marks (60 + 20)Log

Book - 20 marks

ASSESSMENT SCHEDULE IS AS FOLLOWS

Year of study	Period				Total Max.20 marks
I year	Upto Dec	10 marks	Upto June	10 marks	20 Marks
II year	Upto Dec	10 marks	Upto June	10 marks	20 Marks
III year	Upto Oct	10 marks	Upto Feb	10 marks	20 Marks
	AVERAGE				20 Marks

9. DISSERTATION AND UNIVERSITY JOURNAL OF MEDICALSCIENCES

As per the 49th SAB Resolution under Point No. 2 and in the 52nd SAB it was reiterated regarding the topic for dissertation

The topic for the dissertation should be registered and sent to the University after Ethics Committee approval before 31st of December of the first Post Graduate Year. Only one change of topic with proper justification from the Head of the Department is permitted before 31st March of the first Post Graduate Year. The change of dissertation title will not be permitted after 31st March of the First Post Graduate Year. This modification in regulation will be scrupulously followed from the academic year 2015-16 admission onwards.

As per Medical Council of India Post Graduate Medical Education Regulations 2000 (amended upto 10th August 2016)clause 13.9 A Postgraduate student of a Postgraduate degree Course in broad specialties/Super Specialties would be required to present one poster presentation to read one paper at a National/State conference and to present one Research paper which should be published/accepted for publication/sent for publication during the period of his Postgraduate studies so as to make him eligible to appear at the Postgraduate Degree Examination.

As per MCI Clause 14 (4)(a), thesis shall be submitted atleast 6 Months before the Theory and Clinical/Practical Examination.

A candidate shall be allowed to appear for the Theory and Practical/Clinical Examination only after the acceptance of the Thesis by the Examiners.

The periodical evaluation of dissertation/log book should be done by the guide / HOD once in every six months. The HOD should ensure about the submission of dissertation within the stipulated time.

Regarding submission of articles to the University Journal of Medical Sciences for all the PG Degree/Diploma courses, it is mandatory that the students have to submit at-least one research paper. Case Reports are not considered as Research Paper

10. THEORY EXAMINATION

Theory examination will comprise 4 papers.

Paper I: Basic Medical Sciences
Paper II: Medicine and allied specialties including pediatrics, Dermatology & Psychiatry
Paper III: Tropical Medicine and Infectious Diseases
Paper IV: Recent Advances in Medicine

Question paper Pattern:

Paper I : Write notes on

i.	Anatomy	4 x 5 = 20
ii.	Physiology	4 x 5 = 20
iii.	Biochemistry	3 x 5 = 15
iv.	Pharmacology	3 x 5 = 15
v.	Pathology	3 x 5 = 15
vi.	Microbiology	3 x 5 = 15

Total = 100 marks

Paper II, III & IV :

i.	Elaborate on :	2 x 15 = 30
ii.	Write notes on	10 x 7 = 70

Total = 100 marks

11. PRACTICAL EXAMINATION

	EXAMINATION TIME	DISCUSSION TIME	MARKS
LONG CASE - 1X 80 MARKS	60 MIN	30 MIN	80
SHORT CASES – 3 x 20 MARKS	45 MIN	30 MIN	60
WARD ROUNDS 4 CASES X 10 marks (one case per examiner)	50 MIN	30 MIN	40
OSCE(3 STATIONS) 2 STATIONS X 5 MARKS 1 station X10 marks			20
TOTAL	155 MIN	90 MIN	200 (A)
VIVA			80
LOGBOOK			20
VIVA TOTAL			100 (B)
TOTAL AGGREGATE			300 (A+B)

MINIMUM REQUIRED FOR PASS (50 %)			150
DISSERTATION	APPROVED / NOT APPROVED		

12. LOG BOOK

The post graduate students shall maintain a record(log)book of the work carried out by them and the training program undergone during the periodof training.

The record or log book shall be checked and assessed periodically by thefaculty members imparting the training

Periodic review of Log book and Dissertation have to be done in theDepartment by guide/HOD once in every 6 months

In the Log Book the student should document the various procedures he has observed or assisted or done independently with date and time and brief history of the patient. This should be counter signed by the Unit Chief.

A detailed log book should be maintained for the entire duration ofthe course. It should contain the following details.

1. Procedures performed
2. Journal clubs
3. Seminars
4. Important cases discussed/ presented

13. VIVA including competency Assessment - 80 marks

VIVA including Competency Assessment - 80 Marks (60 + 20) An unstructured viva will be carried out by the examiners.

14. OSCE (Objective Structural Clinical Examination)

The following are suggested stations for the OSCE. Any 4 can bechosen at the discretion of the examiners.

S.No.	Stations	Marks
1.	Images (X-ray/CT/MRI)	05
2.	Lab Data	05
3.	Procedures	05
4.	Emergency	05
5.	Communication Skills	05
6.	Drugs	05
7.	Nutrition	05
8.	ECG	05
9.	Simulation Lab – Techniques & Procedures (intubation or CPR or ALS demonstration, etc.,)	10

15. REFERENCE BOOKS

1. Harrison’s Principles and practice of medicine
2. Davidson Principles and practice of medicine
3. Oxford Textbook of Medicine
4. API Textbook of Medicine
5. Braunwald’s
6. Hurst Cardiology
7. Manson’s tropical Disease
8. Williams Endocrinology
9. Murray and Nadel
10. Fishman Respiratory Medicine
11. Crofton Respiratory Medicine
12. Brain Neurology
13. Adams Neurology
14. Shella Sherlock
15. Shamroth ECG Book
16. Mandell and Douglas infectious disease

** Note : The editions are as applicable and the latest editionsshall be the part of the syllabi.

16. JOURNALS

1. New England Journal of Medicine
2. British Medical journal
3. Lancet
4. JAPI
5. National Medical Journal of India

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