# SUMANDEEP VIDYAPEETH

(Declared as Deemed to be University under Section 3 of the UGC Act 1956)
*Accredited by NAAC with a CGPA* 3.61 *out of four-point scale at 'A++' Grade*
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CURRICULUM

# Doctor of Medicine
# (M.D.)
# GENERAL MEDICINE

Attested

15/2/2021

Vice-Chancellor
Sumandeep Vidyapeeth
An Institution Deemed to be University
Vill. Piparia, Taluka: Waghodia.
Dist. Vadodara-391 760. (Gujarat)

Sumandeep Vidyapeeth • Deemed to be University •

Smt. B. K. Shah Med. Insti. & Rese. Centre
Dean

**Programme outcome : MD**

The purpose of MD education is to create specialists who would provide high quality health care and advance the cause of science through research & training. The goal of postgraduate medical education shall be to produce competent specialists and/or Medical teachers.

**Programme specific outcome : MD**

**POS 1.** Scholars shall recognize the health needs of the community, and carry out professional obligations ethically and in keeping with the objectives of the national health policy.

**POS 2.** Scholars shall have acquired the basic skills in teaching of the medical and paramedical professionals.

**POS 3.** Practice the specialty concerned ethically and in step with the principles of primary health care.

**POS 4.** Demonstrate sufficient knowledge of the basic sciences relevant to the concerned specialty**.**

**POS 5.** Develop skills in using educational methods and techniques as applicable to the teaching of medical/nursing students, general physicians and paramedical health workers.

**COURSE OUTCOME (CO):** The postgraduate training shall acquire competencies in the following areas

1. Practice efficiently internal medicine specialty, backed by scientific knowledge including basic sciences and skills
2. Diagnose and manage majority of conditions in his specialty (clinically and with the help of relevant investigations
1. Exercise empathy and a caring attitude and maintain professional integrity, honesty and high ethical standards
2. Plan and deliver comprehensive treatment using the principles of rational drug therapy and Plan and advise measures for the prevention and rehabilitaton of patientsbelonging to his specialty;
3. Manage emergencies efficiently by providing Basic Life Support (BLS) and Advanced Life Support (ALS) in emergency situation.
4. Recognize conditions that may be outside the area of the specialty/ competence and refer them to an appropriate specialist
5. Demonstrate skills in documentation of case details including epidemiological data
6. Play the assigned role in the implementation of National Health Programs
7. Demonstrate competence in basic knowledge of research methodology and clinical epidemiology; and preventive aspects of various disease states
8. Be a motivated 'teacher' - defined as one keen to share knowledge and skills with a colleague or a junior or any learner
9. Continue to evince keen interest in continuing education irrespective of whether he/she is in a teaching institution or is practicing and use appropriate learning resources
10. Be well versed with his medico-legal responsibilities
11. Scholars follow the objectives like Undertake audit, use information technology tools and carry out research - both basic and clinical, with the aim of publishing the work and presenting the work at scientific forums.
12. The student should be able to recognize the mental condition characterized by self absorption and reduced ability to respond to the outside world (e.g. Autism), abnormal functioning in social interaction with or without repetitive behaviour and/or poor communications, etc.

## VISION & MISSION

The department of Medicine at SBKS Medical Institute & research center strives for excellence in patient care, medical education and research of General medicine speciality such that it stands out to be one of the most innovative asand creative departments. The deparment aims to have a rural oriented community based teaching and patient care programmes which encompasses latest developments in the field of medical education and technology. The ultimate mission is to have an integral as well as integerated evidence based medicine approach and to be holistic in ultimate sence in all spheres.

**Syllabus for the postgraduate course in General medicine (M.D.BRANCH)**

- The Present curriculum of MD General Medicine at S.B.K.S Medical College and Dhiraj Hospital of Sumandeep Vidyapeeth University is based on MCI regulation of Post graduate Medical education (2000).

General Conditions and Educational objectives

**1)** M.D (General Medicine) course shall be of three years duration after M.B.B.S.

**2)** Postgraduate curriculum of the university is based on competency such that at the end of the course, postgraduate students in General Medicine will be able to fulfill Goals and Educational Objectives which are laid down by the Department.

**3)** Learning in postgraduate programme though will be self directed and autonomous, the PG student will be trained and guided through a well structured module laid down by the university such that learning objectives is fulfilled.

**4)** The students will be assessed on day to day basis by the department and record of their academic activities and skill development will be carried out through log book. Apart from formative assessment, a summative assessment will be come out at the end of the course by the university.

**5)** The students should be able to practice evidence based medicine in aspects including diagnosis, the investigations required and their inference and management

**6)** The training of the PG students will be carried out at Dhiraj Hospital and other Centers attached to S.B.K.S. Medical College, governed by Sumandeep University located in rural area of Waghodia taluka at village Piparia. Thus training will be holistic and community based which also *incorporates evidence based strategies for education and practice*.

**Goals and Educational Objectives:**

**The student at the end of M D General Medicine course will develop**:

I. Skill and competence to manage patients having medical disorders.

II. They will acquire theoretical and practical knowledge of medical diseases which will include principles as well as practice of scientific medicine covering causation, clinical presentation, investigations, diagnosis, differential diagnosis, curative, rehabilitative and preventive management.

III. They will become physician who would be able to practice medicine rationally and ethically.

IV. They will be able to develop skill of performing common procedures. They will also develop skills of diagnosis & management of critically ill patient.

V. They will be able to rationally plan out the investigations and will be able to interpret them correctly.

VI. They will acquire knowledge from the basic disciplines of medicine and also from allied specialty, so that understanding of General Medicine subject is complete and holistic.

VII. They will be able to appreciate recent advances in the field of General Medicine specialty and would develop research potentials, critical and logical thinking ability and also skills to scan medical literature for application in his clinical practice

**The major components of P G Curriculum shall be:**

**A)** Theoretical Knowledge:

Knowledge of following topics would be obtained through ***bed-side discussion, seminars, journal club, demonstration and case presentation incorporating Evidence based education strategies.***

1. Symptoms and signs related with medical disorders.

2. Genetics and disease, regenerative medicine: genetic factors in disease. Genetic diseases- its diagnosis, management and prevention. Stem cell biology and tissue engineering.

3. Nutrition:
   - Normal and abnormal nutrition - Assessment and treatment.
   - Vitamin deficiency and excess.
   - Enteral and parenteral nutrition therapy.
   - Obesity and its management.
   - Eating disorders.

4. General topics:-
   - Quantitative aspects of medicine
     - Diagnostic tests
     - Indications, usefulness, decisions analysis
   - Ethical issues in medicine
   - Geriatric medicine
   - Pregnancy and medicine
   - Preoperative assessment
   - Principals of drug therapy
   - Chemical and physical injuries
   - Occupational diseases
   - Oncology: clinical presentations, principals of management
   - Bio-terrorism and clinical medicine

5. Disorders of immune system, connective tissue and joints

   - Principals of immunology including transplantation immunology
   - Immune deficiency diseases
   - Rheumatoid arthritis, SLE, systemic sclerosis and related disorders, S jogren's syndrome, the vacuities syndromes.
   - Spondyloarthritides
   - Osteoarthritis and related disorders
   - Gout and other crystal-associated arthropathies
   - Infectious arthritis
   - Fibromyalgia and periarticular disorders.

6. Infectious disease syndromes

   - Approach to the acutely ill infected febrile patient
   - PUO
   - Sepsis and SIRS
   - Infection in compromised host
   - Urinary tract infection
   - Sexually transmitted infections
   - Community acquired pneumonias
   - Acute meningitis
   - Nosocomial infections
   - Infective diarrhoea
   - Infective endocarditis
   - HIV and AIDS
   - Principals of adult immunization
   - Bacterial, viral, mycobacterial, spirochetal, rickettsial, claymydial, protozoal, helminthic and fungal diseases

7. Disorder of cardiovascular system

- Cardinal manifestation and clinical methods of examinations of cardiovascular diseases.
- Cardiovascular examination:
  - Non invasive method: ECG, X-rays, Echo-cardiography, Radionuclide technique and treadmill test.
  - Invasive methods
- Cardiac arrhythmias-recognition and management
  - Antiarrhythmatic agents
  - Cardiovesion
  - Cardiac pacing
  - Anti-tachycardia devices
  - Assessment of need for implantation of cardioveter / defibrillator
- Heart failure
  - Clinical diagnosis and management
  - Specific pharmacologic agents
- Cardiac transplantation
- Ischemic heart disease- recognisation and management
  - Unstable angina and non ST-elevation myocardial infarction
- Myocardial infarction- risk factors, complications and management
- Percutaneous coronary intervention
- Valvular heart diseases- recognition, medical and surgical management
- Cardiomyopathies and myocarditis
- Pericardial diseases
- Infective endocarditis
- Cardiac tumors
- Cardiac manifestation of systemic diseases
- Congenital heart diseases in adults
- Arthrosclerosis and other forms of arteriosclerosis, metabolic syndrome
- Hypertension
  - definition and diagnostic evaluation
  - therapeutic and special consideration
- vascular diseases of extremities and diseases of aorta
- Cardiac risk assessment and stratification in patients undergoing non cardiac surgery.

8. Disease of central and peripheral nervous system

- Anatomy and physiology of nervous system
- Cardinal manifestation of neurological diseases
- Neurological examination- clinical methods
- Imaging and electrophysiological study for diagnosis of the neurological disorders
- Epilepsies and convulsive disorders
- Cerebrovascular diseases
- Demylinating diseases
- Nutritional and metabolic diseases of C.N.S
- Degenerative diseases of C.N.S.-parkinsonism, Alzheimer's disease and others
- Diseases of spinal cord –compressive myelopathy and non-compressive myelopathy
- Intracranial space occupying lesions- solid tumors and cysts
- Developmental diseases of nervous system
- Alcohol, drugs and nervous system
- Peripheral neuropathies
- Cranial neuropathies
- Muscular dystrophies and myopathies
- Neuromuscular junction disorders
- Headache
- Dementia
- Ataxic disorder, gait
- Amyotrophic lateral sclerosis and other motor neuron disease
- Concussion and other head injuries
- Aphasia
- Sleep disorders
- Movement disorders
- Meningitis:
  - Acute meningitis
  - Chronic meningitis
  - Recurrent meningitis
- Prion diseases
- Neuro-imaging in neurological disorders.

9. Diseases of alimentary, hepatobilliary and pancreas

- Physiology of gastrointestinal (GI) disorders
- Cardinal manifestation of GI disorders
- Diagnostic techniques in GI disorders
- Esophageal diseases
- Peptic ulcer diseases
- Malabsorption syndromes
- Inflammatory bowel diseases
- Diseases of small and large intestine
- Diseases of peritoneum and mesentery
- Acute and chronic pancreatitis
- Endocrinal tumors of GIT and pancreas
- Pancreatic malignancy
- Acute and chronic hepatitis
- Cirrhosis of liver
- Bilirubin metabolism and hyper-bilirubinemia
- Neoplasm of liver
- Infiltrative and metabolic disorders affecting liver
- Hepatic encephalopathy
- Liver transplantation
- Cholecystitis and gallstones

10. Respiratory system:
- Anatomy, physiology, lung defenses, pulmonary function and gas transport
- Special investigations
- Obstructive pulmonary diseases
- Bronchial asthma
- Bronchiectasis and cystic fibrosis
- Respiratory infections- upper and lower: bacterial, fungal, parasitic, in immune compromised patients
- Pneumonia-community acquired, Nosocomial, aspiration, atypical
- Interstitial and infiltrative pulmonary disease
- Pulmonary hypertension and cor pulmonale
- Pulmonary thromboembolic disease
- Primary and secondary tumors of the lung including extra-pulmonary syndromes
- Tumors of mediastinum
- Neoplasm of pleura, chest wall and diaphragm
- Pleural dynamics, pleural effusion, pneumothorax
- Pulmonary tuberculosis and other mycobacterial diseases of the lung
- ARDS
- Oxygen therapy
- Acute respiratory failure
- Intubation and management of the airway
- Sleep apnoea syndrome
- Sarcoidosis
- Pulmonary complications of drug abuse
- Pulmonary rehabilitation

11. Endocrine and metabolic diseases including diabetes mellitus

- Anatomy of endocrine glands
- Physiology of hormones
- Neuroendocrinology
- Test for endocrine functions
- Disorders of growth – anterior pituitary – syndromes due to hypo secretion, hyper secretion, tumors of pituitary, gigantism and acromegaly, posterior pituitary –diabetes insipidus
- Thyroid- hyperthyroidism, hypothyroidism , thyroid tumors, evaluation of thyroid function
- Parathyroid-hypo and hyper Parathyroidism and calcium metabolism
- Adrenal gland –adrenal failure, Cushing's syndrome and pheochromocytoma, corticosteroids and its uses
- Disorders of gonads
- Endocrine disorder of the breast
- Non metastatic endocrine manifestation of malignancy
- Diabetes mellitus –IDDM,NIDDM, complications and management
- Hypoglycemia
- Disorder affecting multiple endocrine systems

12. Hematology:

- Diagnosis and therapeutic approach to hematological problems
- Origin and development of blood and blood component therapy
- Anemia – approach to the patient
- Iron metabolism and iron deficiency anemia
- Megaloblastic and non-megaloblastic macrocytic anemia
- Hemolytic anemia: congenital, hemoglobinopathies, acquired hemolytic anemia
- Anemia due to defective erythrocyte production
- Leukemia
- Agranulocytosis
- Plasma cell dyscrasias
- Lymphomas
- Erythrocytosis and polycythemias

13. Nephrology

- Glomerular filtration, renal handling of various substances and disorder related to it
- Renal acidification mechanism and disorders related to it
- Acid base disorders, fluids and electrocytes
- Clinical and laboratory assessment of patients with renal disease
- Acute renal failure
- Acute nephritic syndrome
- Chronic kidney diseases, end stage renal diseases and its management
- Disorder of stone formation
- Tubulointerstitial diseases
- Urinary tract infection, pyelonephritis and reflux nephropathy
- Kidney and diabetes , hypertension, pregnancy, drugs and toxin
- Reno-vascular aspects of hemodialysis, peritoneal dialysis
- Renal transplantation clinical aspects

14. Diseases of skin

- Common dermatological problems :
  - Infections
  - Psoriasis
  - Dermatitis
  - Eczema
  - Vesiculobullous eruptions,
  - Disorders of pigmentation
  - Hairs and nails
  - Urticaria and angioedema
  - Skin tumors
  - Skin and systemic disease

15. Psychiatry:

- Neurosis
- Affective disorders
- Schizophrenia
- Organic psychosis
- Substance misuse
- Stress related and somatoform disorders
- Personality disorders
- Clinical syndromes related with eating, sleeping and sex

16. Critical care and emergencies
    - Coma
    - Neurological critical care including hypoxemic ischemic encephalopathy
    - Subarachnoid hemorrhage
    - Poisoning
    - Drug overdose
    - Bites including snake bite and its management , envenomation
    - Heat stroke
    - Basic life support and cardiopulmonary resuscitation
    - Advance cardiac life support
    - Cardiac arrest
    - Mechanical ventilation
    - End of life care
    - Cardiac emergences
    - Pulmonary embolism
    - Acute respiratory failure
    - ARDS
    - Sepsis and other emergencies in infective disorders
    - Oncological emergencies
    - Acute renal failure

**B)** Practical:

**C)** The practical knowledge of the subject will be gained through observation, guidance and self directed learning. The essential skills of diagnosis, management, interpretation of investigations and performing various ward procedures will be obtained by working in Medicine Out Patient Dept. and in the wards and also through rotation in specialty clinics, ICU, ICCU, Casualty and allied specialty as below. The P G student will be doing full time three years residency course.

All PG students to be trained in Evidence based diagnosis and management to be applied in real case scenarios

**Posting of PG students in various intradepartmental specialties**:

**1st year of post-graduation**:

**Posting in medical section (General)**

- Outpatient department
- Inpatient department
- Emergency care
- Under-graduate teaching
- Participation in departmental and institutional programs
- Scientific study for dissertation
- To introduce Basic life support (BLS) and Advanced Cardiac Life Support (ACLS) training for all the First year Postgraduate Resident Doctors from academic year 2017-18.

- *To introduce New chapter / topic 'Intellectual Property Rights (IPR) for all the First year Postgraduate Resident Doctors from academic year 2020-2021 of duration of 4hrs (Board of Studies letter no.: SBKS/DEAN/742/2021,dated 05/06/2021 and Vide Notification of Board of Management Resolution Ref no.:SVDU/R/3051-1/2020-21, dated - 29" July 2021)*

*List of topics :*

1. *Introduction - Concept of Intellectual Property, Historical view of Intellectual Property system in India and International Scenario, Evolution of Intellectual Property Laws in India, Legal basis of Intellectual Property Protection, Need for Protecting Intellectual Property, Theories on concept of property - Major IP Laws in India.*
2. *Types of IPR: Patents, Copyright, Trademark Industrial Designs, Trade Secrets.*
3. *Patents: Concept of Patent, Criteria of Patentability, Inventions NOT patentable, Process of Obtaining a Patent, Duration of Patents, Rights of Patentee, Limitation of rights, Infringement and Enforcement.*
4. *Copyrights: Meaning of Copyright, Copyright Vs. Moral rights, Copyright eligibility, Term of Copyright, Registration of Copyright, Infringement and Remedies*
5. *Trademark: Meaning of Trademark, Criteria for trademark, Procedure for Trademark Registration, Term of protection, Infringement and Remedies.*
6. *Industrial Designs: Meaning of Industrial Designs, Rights in Industrial Designs: Nature, Acquisition and duration of rights.*
7. *Trade Secrets: Meaning of Trade Secrets, Need to protect Trade secrets, Criteria of Protection, Procedure for registration, Infringement.*
8. *Commercialization of IPR: Traditional IP and Evolving IP, Assignment, Licensing, Cross License, Patent Pool, Negotiations, Defensive Publications, Technical Disclosures, Patent Pooling, Patent Trolling, Brand Management, Brand and Pricing Strategies.*

**2nd year of post-graduation**:

**Posting in special section**

- Cardiology/ ICCU/Echocardiography- 3 months
- ICU/Casualty/Dialysis- 3 months
- Chest and Tuberculosis-3 months
- Epilepsy & Neurology Clinic and Psychiatry- 1 month
- Hematology & Oncology Clinic / Central lab- 1 month
- Diabetes clinic/ Endoscopy clinic - 1 month
- Scientific Study For dissertation

**3rd year of post-graduation**:

- Outpatient department
- Inpatient department
- Emergency care
- Under-graduate teaching
- Participation in departmental and institutional programmers
- Guidance to junior post-graduate students (in hospital)
- Scientific study for dissertation
- Participation and presentation in National and International conferences under guidance of PG teachers

Skill development will be in graded fashion. Student will be posted as above and will develop the skills during first year, second year and third year of residency as below.

**In First Year**:

a. CPR
b. Endotracheal Intubation
c. Lumbar Puncture
d. Pleural Aspiration
e. Ascites tapping
f. Initiation of mechanical ventilation
g. Interpretation of ABG report & Lab investigation
h. Interpretation of ECG & X-rays
i. Peripheral vein access
j. Fundus examination
k. Ward procedures (Ryle's tube insertion, folley's catheterization, etc)
l. Cardiovesion
m. Monitoring of critically ill patient

**In Second Year / Third Year:**

a. **Evidence based** protocol management of common illnesses.
b. CPR
c. Endotracheal Intubation
d. Lumber Puncture
e. Plural Aspiration
f. Ascites Tapping
g. Bone marrow aspiration & Biopsy
h. Liver Biopsy
i. Renal Biopsy
j. USG guided Biopsies
k. FNAC
l. Central venous access
m. Management of critically ill patient
n. Insertion of Peritoneal Dialysis catheter
o. Peritoneal dialysis and monitoring patient on Hemodialysis
p. Interpretation of specialized investigations (PFT, EEG,CT)

*With reference to the Notification vide no. MC!-18(1)12020-Med.1121415, dated 16.09.2020, related to 'Postgraduate Medical Education (Amendment) Regulations 2020'; all the postgraduate students pursuing MD / MS in broad specialties in Sumandeep Vidyapeeth Deemed to be University, as a part of course curriculum, shall undergo a compulsory Residential rotational posting in the 3rd or 4th or Sth semester of the Postgraduate programme, for a duration of three months, in the District Hospitals / District Health System, is confirmed and approved for execution.*

- *(Board of Studies letter no.:SBKS/DEAN/1576/2020,dated 0/10/2021 and Vide Notification of Board of Management Resolution* : *Ref no. SVDU/R/1271-1/2020-21, dated - 30th December 2020)*

**C**: **EBES – GENERAL MEDICNE**

Post graduate students will be taught regarding importance of incorporating Evidence based medicine and its practice in clinical medicine i.e. EBP.

**Aims and objective:** At the end of course postgraduate students should be able to

1. Apply evidence based Gen. Medicine in clinical practice.

2. Demonstrate skills of asking answerable questions, able to do PICO analysis, able to find and interpret grades of evidence, to do search cascade, critical appraisal and integration of the best research evidence with clinical expertise and patient's values as well as circumstances.

**Methodology**

a. Sensitization and training regarding EBES – Each Post graduate students are trained regarding concept of evidence based medicine including evidence searching skills, interpretation and application on real time basis.
*All post graduates after enrollment will be exposed to organized evidence searching skills lectures along with teaching of clinical epidemiology, biostatistics and research methodology.*

b. Journal Club – Weekly presentation and assessment of topics from reputed journals and critical appraisal of its content and statistics. It infer regarding the final recommendation from the article.
*All the post graduate Journal Clubs will be carried out on a prescribed Evidence Based format with emphasis on critical appraisal. A designated teacher/facilitator wills asses every post graduate student for each journal club presentation.*

c. Seminars – Incorporating evidence based research on topics provided and deduce the inference from them.
*All PG seminars will have evidence embedded in the presentation and all references relating to the subject matter will be incorporated. At the end of the seminar all the references will be listed and the seminar will be assessed by the facilitator*.

d. Evidence based protocols for management of illness – All postgraduate students are educated and trained regarding usage of evidence based protocols for management of common clinical illness.

e. Case scenario & discussion with evidence based management strategies including evidence searching activities daily in wards – role modeling.

f. Activities including Questionnaire regarding recent topics and its statistical analysis by students followed by its evidence based discussion.

*g. <u>In the OPD/ward/ICU/OT/Practical Skills/Equivalent activity</u> in pre-para clinical department, every post graduate student will be exposed to at least one encounter of role modeling in which a consultant after raising a relevant query will search for its evidence and demonstrate evidence searching methodologies, its importance and utility to the student.*

**Main Elements of an Evidence-Based Presentation**

| Section | Description of Contents |
|---|---|
| Introduction | • Brief presentation of the patient case that elicits the clinical question for case-based review; for review paper, introduction and background as below<br>• Introduction that describes the impact and relevance of the clinical question and limited background information (e.g., epidemiology, pathophysiology)<br>• Presentation of focused clinical question |
| Methods | • Inclusion and exclusion criteria for the final study(s) chosen<br>• Description of the search strategy in enough detail to be duplicable |
| Discussion | • Brief summary of the study(s) (usually article(s) with the highest level of evidence), including validity assessment of each<br>• Discussion and synthesis of evidence from the studies collectively by appraising evidence critically to provide an answer to the question<br>• Includes evidence interpretation as it applies to the patient in question. |

D: Dissertation skills:

Student who is registered for the postgraduate studies in General Medicine will be doing dissertation work under recognized PG teacher of the university The student will do the dissertation work such that following objective are full filled.

- Student will develop skill of deriving scientific knowledge in the field of General Medicine by gathering scientific facts and analyzing it. They will be able to scrutinize and derive conclusions from of it such that knowledge of such scientific work can be applied in clinical practice.
- Acquire the spirit of scientific inquiry and will be able to scan medical literature
- They are oriented with principles of research methodology as well as epidemiology and will develop potential which is needed to for personal and professional growth.
- They would be able to practice General Medicine which is evidence based.
- They would be able to present scientific material at conference and develops ability to publish it in scientific journal.
- Promotion of topics including **evidenced based** studies in thesis.

**Following is the plan for dissertation work**

- Student with mutual consultation with PG Teacher will decide the dissertation topic. The topic should be approved by the departmental committee of all PG teachers. The topic should be decided within first three months of PG registration.

- At the and of three months and not later than six months the plan of work and small synopsis (not move than 10 pages) shall be submitted to departmental PG committee which will be reviewed and put to the institutional ethics committee.

- Once the scientific study is approved by the departmental PG committee and institutional etches committee the student will start his scientific study.

- The study work will be supervised and gulden by the PG teachers. The progress of the work is recorded in the log book.

- At the end of the study work the scientific work will be presented in the department.

- The dissertation should be submitted to the university before 6 months of the course completion date.

- The dissertation will be assessed by 2 internal examiners and 2 external examiners. The examiners will give their remarks for “acceptance” or “non acceptance” If the dissertation is accepted by three examiners out of four. Then student will be allowed if appear for there by examination

**Attitudes including Communication skills**

Skills and behavioral attributes to function effectively as professional, healer, leader teacher and researcher will be imbibed through reinforcement demonstration and atmosphere conducive to such value based training. Communication skill pertaining to doctor patient relationship, teacher student relationship and “one to masses” (leadership communication) will be learned during the residency training program. The attribute to demonstrate empathy and human approach towards patients and their families and exhibit interpersonal behavior in accordance with societal norms and expectations will be developed.

**Training in research methodology & epidemiology**

Student will be trained in research methodology with the help of community medicine department of the institution. Didactic lectures cum workshops will be arranged to fulfill this objective. The student will be encouraged to take part in the department research work.

## III. Scheme of Examination

| | |
|---|---|
| Paper I:<br><br>Duration:3 hours<br><br>Max marks: 100 | Basic Medical Sciences |
| Paper II:<br><br>Duration:3 hours<br><br>Max marks: 100 | Medicine & its allied specialties including pediatrics, dermatology and psychiatry |
| Paper III:<br><br>Duration:3 hours<br><br>Max marks: 100 | Tropical Medicine and Infectious diseases |
| Paper IV:<br><br>Duration:3 hours<br><br>Max marks: 100 | Recent advances in medicine. |
| Practical and oral/viva voce examination:<br><br>Viva-voce Examination | The final clinical examination should include:<br>• cases pertaining to major systems<br>• stations for clinical, procedural and communication skills<br>• Log Book Records and day-to-day observation during the training<br>• Oral/viva voce examination shall be comprehensive enough to test the post graduate student's overall knowledge of the subject |

*Implementation of Revised Competency Based Post Graduate Training Programme for MD in General Medicine as per the guidelines prepared by the National Medical Commission through Subject Expert Groups{ Date of Bos 21.07.2022 Ref :SBKSMIRC/Dean/Outward No.1301/2021-22, Date of Academic council :29.07.2022 Ref :SVDU/NOTFN/O370/2021-22 dated 30.07.2022}*