### MIMER Medical College, Talegaon (D)

#### 2.6.1

#### OTHER RELEVANT DOCUMENT

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#### MCI REGIONAL CENTRE FOR MEDICAL EDUCATION TECHNOLOGIES

#### ARMED FORCES MEDICAL COLLEGE, PUNE

#### **REVISED BASIC COURSE WORKSHOP & AETCOM**

Place of workshop- MIMER MEDICAL COLLEGE, Talegaon (D), Pune. Date: 24-26 March 2021

#### **REPORT OF rBCW & AETCOM WORKSHOP**

Revised basic course workshop and AETCOM of MIMER Medical College, Talegaon (D) was conducted from 24 to 26 March 2021. Dr. Priti Shah from Dr. D Y Patil Medical College was the Observer from NMC Regional Centre ( AFMC Pune) for the workshop. Thirty participants attended the workshop on all 3 days. The workshop was conducted according to the programme schedule. The sessions were conducted using the aid of PowerPoint presentations along with group discussions, activities and role plays, to facilitate better understanding of the concepts. Active participation from the participants improved their learning experience.

Pre & Post test were conducted. All 30 participants took pretest. All the participants showed improvement in in post test. Minimum difference in the marks was 5 and maximum difference was 12.

. The majority opinion confirmed that objectives of the workshop were largely achieved. Recommendations were made to conduct similar workshops in the future every 6 months to keep up with the evolving world of medical education. Participants were of the opinion that good lectures and group activities as well as the good time management were the strength of this workshop. They were of the opinion that faculty were able to keep the participants involved in the workshop. There were suggestions to provide study materials. We will be providing study materials to all the participants.

On behalf of Medical Education Unit of MIMER Medical College, I would like to thank NMC for giving us permission to conduct the rBCW & AETCOM workshops in our college. I would also like to thank Lt. Col Karuna Datta (Convener, MCI Regional Centre, AFMC, Pune) I also express my sincere gratitude to the NMC observer, Dr. Priti Shah for her valuable inputs and the efforts she has taken to enrich the works Thanks and Regards,

Dr. Deepa Nair,
MEU Coordinator,
Prof. & Head,
Dept. of Physiology,
MIMER Medical College, Talegaon Dabhade, Pune.
Date: 07 April 2021.

#### MCI REGIONAL CENTRE FOR MEDICAL EDUCATION TECHNOLOGIES

#### ARMED FORCES MEDICAL COLLEGE, PUNE

#### **CURRICULUM IMPLEMENTATION SUPPORT PROGRAMME**

Place of workshop- MIMER MEDICAL COLLEGE, Talegaon (D), Pune. Date: 26-28 June 2019

#### REPORT OF CISP WORKSHOP

1st CISP workshop of MIMER Medical College was conducted from 26 June 2019 to 28 June 2019. Lt. Col. Karuna Datta from AFMC Pune was the MCI observer for the workshop. 29 participants attended the workshop on all 3 days which included 9 participants from preclinical departments, 10 from paraclinical departments, 5 participants from medicine and allied specialties and 5 from surgery and allied specialties. Now a total of 11 trained preclinical faculty including curriculum committee members are there to implement new curriculum. Workshop was conducted according to the programme schedule. Mode of delivery of the sessions was in the form of power point presentation along with group discussions and role plays.

#### Percentage of Faculty trained for Implementation of new curriculum

Professor- 48.64%

Associate Professor- 28.12%

Assistant Professor- 10.44%

**Percentage of preclinical faculty** (Asst. Professor and above) – Trained for Curriculum Implementation- 73%.

On behalf of curriculum committee, MIMER Medical College, I would like to thank Medical Council of India for training curriculum committee members and giving us permission to conduct CISP workshop in our college. This enabled us to train our faculty so that implementation of new curriculum can be achieved without any hassles. I also express my sincere gratitude to MCI observer, Lt. Col. Karuna Datta for the effort she has taken to enrich the workshop

Thanks and Regards,

Dr. Deepa Nair,
MEU Co-ordinator,
Prof. & Head,
Dept. of Physiology,
MIMER Medical College, Talegaon Dabhade, Pune

### MCI REGIONAL CENTRE FOR MEDICAL EDUCATION TECHNOLOGIES REGIONAL CENTRE - ARMED FORCES MEDICAL COLLEGE, PUNE

# MIMER MEDICAL COLLEGE, TALEGAON (D), PUNE 1ST CISP WORKSHOP

26 to 28 June 2019 Attendance

S.No.	Participant Name Sign			Date: 27 June 2019 Sign		Date: 28 June 2019 Sign	
		Morning	Evening	Morning	Evening	Morning	Evening
1	Dr. D. S. Jadhav	sem.	. 0	0	.0	l	-l
2.	Dr.S.B.Vedpathak	也	12	1	100	108	100
3.	Dr.S.,A.Khake	Akhale	arlare	Garlate	Mare	6 Ax hate	ARCH
4.	Dr. Meena J. Agrawal	and.	und.	my.	why.	and.	way.
5.	Dr. Rupali S. Baburdikar	onen:	onto.	onby.	orgin.	asson.	ONB:
6.	Dr. Shital S. Dodhia	Chil	8/11	State	String	Shire	Share -
7.	Mrs. Madhurw Y. Bedekar	Andaur.	The lexus	Belexur	Falence	Belever	For dexu
8.	Dr. Shilpa A. Pratinidhi	My	M	com	me	Car	14
9	Or. Geeta Shatla	Cordia	arans	Maroth	Books	Bath	-Braper
10	Mrs. Nutan Y. Chaudhari	The	July	Alute	that	tut-	-tent-

MCI REGIONAL CENTRE FOR MEDICAL EDUCATION TECHNOLOGIES REGIONAL CENTRE. ARMED FORCES MEDICAL COLLEGE, PUNE

# MIMER MEDICAL COLLEGE, TALEGAON (D), PUNE 157 CISP WORKSHOP

26 to 28 June 2019 Attendance

No.	Participant Name	Date : 26 June 2019 Sign		Date : 27 June 2019 Sign		Date: 28 June 2019 Sign	
ALAID.		Morning	Evening	Morning	Evening	Morning	Evening
11	Dr. R. J. Wagh	(B)	(2)	(B)	(B)	(6)	(%)
12.	Dr. A. S.Chincholkar	Aschin	Aschin	Aschin	Aschin	Aschin	Aschin
13.	Dr. G. S. Pentewar	(may)	W.C.	COL	- Start	(inter-	Gina
14.	Dr. R. V. Kedare	RKedau	phealone	phodore	Rudon	Rudan	Rkedon
15.	Dr. S.R. Joshi	2007-	All.	1111	811	81114	Tille
16.	Dr. Smita Bhide	Blike	May	Mose	Phoen	Don	Br
17.	Dr. C. R. Godbole	BUR	Clark	and	( But	Calle	Continue
18.	Or. Janice Jaison	Janua Jaiso	Januajaisa	Janie Jais	7		a Jame Jais
19	Dr. Sandhya S. Kulkarni	you ship	100	Knowshy	Knowalin	-tours	Mound 5
20	Dr. Anjali C. Jayawant	auphyayaran	algebragains	anjalyzation	anjalyani	Layarjan	anjulyanjawa

MLI REGIONAL CENTRE FOR MEDICAL EDUCATION TECHNOLOGIES
REGIONAL CENTRE-ARMEDFORCES MEDICAL COLLEGE, PUNE

## MIMER MEDICAL COLLEGE, TALEGAON (D), PUNE 1<sup>ST</sup> CISP WORKSHOP

26 to 28 June 2019 Attendance

S.No.	Participant Name		Date : 26 June 2019 Sign		Date : 27 June 2019 Sign		Date: 28 June 2019 Sign	
		Morning	Evening	Morning	Evening	Morning	Evening	
21	Dr. S.V.Chincholikar	Depell	alall	alabell	Darle	Madel	1 alal	
22.	Dr. Aastha Pandey	Randey	Randey	Randey	Handey	Handey	Randey	
23.	Dr. Swati Raje	Base.	Rail	Baje.	Pail	Rege	Bayl.	
24.	Dr. Madhu Bansode	deglant	August	- slegranh	- digse	Dagran	- sologunul	
25.	Dr. Ujjwala Keskar	War.	The -	R.	fy_	The	The state of the s	
26.	Dr. R. N. Sharadwaj	W 2	Dan 3	(Athor)	20 mas	20003	- Samuel	
27.	Dr. Sushma Sharma	X. Mains	to J. Show	S. Morn	A SAMEN	A Show	- Lahar	
28.	Or. Yuwaj V. Kumbhar	The Book	1 Jun-	Man	Qua-	1300	Klow	
29	Dr. Dattatraya Gopalghare	No and	TOUR	The same	TO NO	THOSE	TO ASS	
30	Dr. Deodatta P. Kotnis	Takatur	A Garen	f- CROKING	Myder	50 mm	10	



#### 1st CISP workshop, 26-28 June

----- Forwarded message ------

From: Medical Education Technology <met@mitmimer.com>

Date: Mon, Jun 10, 2019 at 11:49 AM Subject: 1st CISP workshop, 26-28 June

To

HOD

Dear Sir / Madam,

1st CISP (Curriculum Implementation Support Programme) workshop of MIMER Medical College will be organized from 26 to 28 June 2019. Programme schedule will be sent later. Attaching the participant list. Kindly inform the participants regarding the workshop

Thanks and Regards, Dr. Deepa Nair MEU Coordinator Prof. & Head Dept. of Physiology



MIMER Medical College CISP 26-28 June Participant list.xlsx 14K

# MCI regional Centre for Medical Education Technologies- AFMC, Pune CISP- II Workshop at MIMER Medical College, Talegaon( D) 29 to 30 September 2020 Attendance- Participants

S.No.	Participant Name		Sept. 2020 Sign	Date: 30 Sept. 2020 Sign		
		Morning	Evening	Morning	Evening	
1	Dr. Rajendia - Zape	24	201.	2 and	2 stel	
2.	dardi Charan Kaus	Chang	Chang	Chang_	Chur	
3.	Anjum Sayyed	Saujum	Sayund	Sportura	ON SAGE	
4.	Vaishali korde	Coule	all	Mary .	(())	
5.	Dr. Mayor Kylinsefe,	Cette	Mille	. OBTE	- Chillie	
6.	Dr. Sandesh brawade	Laureth G.	Lameng.	Landerhy.	Landerha.	
7.	br. Sachin Naik	Ladiwaik	Sochwark	Sachwaise	SACHINERE	
8.	Dr. Nikler? Phalin-	Wall ?	Swit	News	Dank	
9	Ds. Tushar Whachane	- 18 Thacher			Abreliene	
10	Dr. Aparna S. Chaudhari	Age_	ase-	All	Nee.	

# MCI regional Centre for Medical Education Technologies- AFMC, Pune CISP- II Workshop at MIMER Medical College, Talegaon( D) 29 to 30 September 2020 Attendance- Participants

S.No.	Participant Name		Sept 2020 gn	Date:30 Sept. 2020 Sign		
		Morning	Evening	Morning	Evening	
11	Ar Arito Monoj Kulkarni	Ari-	of:	A.	942.	
12.	Dr Prachi DullyKate	Procubate	Probitate.	Prochitabe	Produkate	
13.	Dr. Vivek K. Nimale	Viral	Virgh	Just	Jag.	
14.	Dr. Gavri Yadaw	Yude	Yude	Yuder	Yud	
15.	Sangeura B. Trimbala	-8182_	ms	802	,8102_	
16.	Dr Ridys R. Ohatker	Qualter.	Madler.	Whater-	Walker.	
17.	DR. SWAPNIL-A-MORE	85	*	*	*	
18.	Or Arupama Saluntre	_A	Am	Amore	Ara	
19	Dr. Yash Shah	your .	galv	gode	gaves	
20	Dr. S. J. Kulkarni	J.	July	July	Why.	

# MCI regional Centre for Medical Education Technologies- AFMC, Pune CISP- II Workshop at MIMER Medical College, Talegaon( D) 29 to 30 September 2020 Attendance- Participants

S.No.	Participant Name		Sept.2020 Sign	Date: 30 Sept. 2020 Sign		
		Morning	Evening	Morning	Evening	
21	Smita Watwe	Quest	Quat	Quet	Bulat	
22	Santom Boston	AND.	1987	NAD-	1W _	
23.	Dr. Pravin N. Baravkar	(Special	63	/addition	The state of the s	
24.	Tor. Sudam Khedkar.	Station -	Contral _	Stall (car	( when	
25.	DR. MANGOLA NAGARE	MANORI	Dian	Son water	PON G.V	
26.	DR. Mueraluh M. Some	houseld.	hieron	Kusal	Messel	
27.					103	
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#### MCI REGIONAL CENTRE FOR MEDICAL EDUCATION TECHNOLOGIES

#### ARMED FORCES MEDICAL COLLEGE, PUNE

#### **CURRICULUM IMPLEMENTATION SUPPORT PROGRAMME-2**

Place of workshop- MIMER MEDICAL COLLEGE, Talegaon (D), Pune. Date: 29-30 Sept. 2020

#### REPORT OF THE WORKSHOP

CISP-2 was successfully conducted at MIMER Medical College from 29- 30 September 2020. On behalf of MIMER Medical College, I thank MCI observer from regional Centre (AFMC) Col. Rakesh Datta for his guidance and support which was essential for the successful organization of the workshop in these trying times. I also thank the MCI for giving us the permission to conduct the CISP-2 workshop and also for providing the resource materials for the same.

#### FEED BACK FROM PARTICIPANTS

Participants were of the opinion that the objectives of the workshop were largely achieved and it is useful for professional activities. Time management was optimum. Faculty were helpful and responsive to learning needs. According to the participants workshop had a balance of theory and practical. Participants appreciated the changes made in the GMER 2019 and are of the opinion that it would help the IMGs competent to carry out his/her professional commitment. At the same time, they realized the responsibility of the faculty for implementation of the new curriculum. Training the entire faculty of the institution is an important task and is necessary for new curriculum implementation. Most of the participants suggested similar workshops once in a year to train the faculty

#### Retrospective pre evaluation

Day 1

Sr No	Topic- How important	Before	After	How skilled	Before	After
1	CBME	2.65	4.58		2.19	4.35
2	IMG- Goal, role &	2.42	4.44		2.07	4.30
	Competencies					
3	Deriving objectives from	2.69	448		2.19	4.41
	competencies					
4	Linking objectives to TLM	2.38	4.52		2.26	4.44
5	Proposed changes in GMER	2.46	4.52		2.41	4.30
	2019					
6	Electives	2.19	4.30		2.22	4.52
7	Foundation course	2.42	4.22		2.37	4.51
8	AETCOM module	2.38	4.44		2.19	4.67

Sr No	Topic- How important	Before	After	How skilled	Before	After
1	Student Doctor Clinical	2.38	4.46		2.21	4.38
	Teaching					
2	Alignment &Integration	2.25	4.67		2.29	4.58
3	Skills Training	2.70	4.71		2.75	4.63
4	Assessment in CBME	2.42	4.38		2.46	4.29
5	Aligning assessment to	2.54	4.33		2.38	4.29
	competency, objective & TLM					
6	Curricular governance	2.12	4.13		2.13	4.0
7	Log book	2.54	4.21		2.46	4.42

#### **Enclosures:**

- 1. Approval letter from MCI
- 2. Programme schedule
- 3. Participant list
- 4. Attendance sheet of participants
- 5. Level of Faculty training CISP-2 MIMER Medical College
- 6. Resource Faculty list
- 7. List of Curriculum Committee members
- 8. Group Photo

Thanks, and Regards,

Dr. Deepa Nair, MEU Coordinator,

Prof. & Head,

Dept. of Physiology,

MIMER Medical College, Talegaon Dabhade, Pune.

Date: 03 October 2020.



PRINCIPAL MIMER < principal@mitmimer.com>

Revised BasicCourse Workshop (rBCW) & AETCOM at MIMER Medical College, Talegaon Dabhade, Pune 23rd - 26th September, 2019 - Nomination of Lt ColDr. Mahima Lall, Associate Professor, Dept of Microbiology, Co-ordinator Deptof Medical Education from RC, AFMC, Pune, as observer - reg

Medical Council of India Academiccell <academiccell@gmail.com> Thu, Sep 12, 2019 at 4:25 PM To: Karuna Datta <karunadatta@gmail.com>, RAKSHA JAIPURKAR <rakshukarade@gmail.com> Cc: mimer@pn3.vsnl.net.in, PRINCIPAL MIMER <principal@mitmimer.com>, Om prakash. 

No.MCI-Academics/2019/

Date:

Lt. Col. (Dr.) Raksha Jaipurkar, Co-Convener, MCI Regional Centre, Armed Forces Medical College. Solapur road, Pune-411040, Phone NO-9560118881

E-mail: karunadatta@gmail.com; rakshukarade@gmail.com

Subject:-Revised Basic Course Workshop (rBCW) & AETCOM at MIMER Medical College, Talegaon Dabhade, Pune 23rd - 26th September, 2019 - Nomination of Lt Col Dr. Mahima Lall, Associate Professor, Dept of Microbiology, Co-ordinator Dept of Medical Education from RC, AFMC, Pune, as observer - reg

Dear Dr. Jaipurkar,

I am directed to inform you that the Medical Council of India is pleased to permit Lt Col Dr. Mahima Lall, Associate Professor, Dept of Microbiology, Co-ordinator Dept of Medical Education from Regional Centre, Armed Forces Medical College, Pune to attend the Revised Basic Course Workshop from 23rd - 25th September, 2019 & one Day AETCOM on 26th September, 2019 at MIMER Medical College, Talegaon Dabhade, Pune, as observer on behalf of Medical Council of India.

The Observer is requested to submit report of the workshop and participant list in the respective proforma (sent earlier) by E-mail (academiccell@gmail.com). Reimbursement of TA/DA and payment of honorarium will be done after receiving the report and list of participants from the observer.

#### Terms & conditions for conduct of workshop & issue of Certificates:

- 1. Since many of the workshop programmes like small group discussion, OSCE/OSPE etc. can be effectively taught only in small groups and since the number of trained resource faculty in the RCs/medical colleges are limited, the Convener of the Regional Centre must ensure that the number of faculty participation in each workshop should not exceed 30. Additional names of participants will not be entered in the MCI Website.
- Only full-fledged faculty of colleges from Assistant Professor to Professor & Teacher administrators are eligible to be participants in the MCI Faculty Development Programme. Observer should ensure that certificates are not issued to others.
- If any participant misses any session, certificate will not be signed by observer & college will not issue the certificate until the participant attends the missed session when the said workshop is conducted again by the said

Government of India Rules will be applicable for entitlement for travel and accommodation. Please note that for travel & booking of accommodation, services of MCI approved travel agent must be used. The details are as under:

M/S Balmer & Lawrie & Co. Ltd. Name

Sh. Om Prakash Contact Person:

#### MCI regional Centre for Medical Education Technologies- AFMC, Pune Revised Basic Course Workshop at MIMER Medical College, Talegaon( D) 23 to 25 September 2019 Attendance

S.No.	Participant Name		Date : 23 Sept. 2019 <u>Sign</u>		Date : 24 Sept. 2019 Sign		Date: 25 Sept .2019 Sign	
		Morning	Evening	Morning	Evening	Morning	Evening	
1	Dr.Vivek Nirmale	Vied	Viet	Vied	July .	July	Yede	
2	Dr. Pravin Baravkar	Gen	CO	au.	COL	COL-	ar-	
3.	Dr. Apama Choudhari	ASE	ASC	ALL	ASL	Ke-	ARR	
4.	Mrs. Smita Watwe	Sulat	Bulat	Sulat	Bulat	Bulate	(B) Jak	
5.	Dr. Surendra Kulkarni	Mr.	The same of the sa	J.h.	Och	Jh_	Joh_	
6.	Dr. Gauri Metkar	(Partie)	Quilery.	200	Builden	Bulle	Distr.	
7.	Dr. Janice Jaison	James Jaisen	gahire Jaison	Jamie Jaise	Janua ) arser	Janua Jaison	Jame Ja sa	
8.	Dr. Ashwini Gundawar	989	930	988	980	980	98	
9	Dr. Avinash Pujari	garligin	. Ally	Tresphi	gholying	Lyden	Anhym	
10	Dr. Rupali Bagga	Rujah	Rupas	Rupots	Rosel	Rupasi	o war	

#### MCI regional Centre for Medical Education Technologies- AFMC, Pune Revised Basic Course Workshop at MIMER Medical College, Talegaon( D) 23 to 25 September 2019 Attendance

5.No.	Participant Name	Participant Name Sign					
		Morning	Evening	Morning	Evening	Morning	Evening
11	Dr. Dilip Bhoge	DROZE	- 50 mgc	1000ge	More	800 Roge	- Solvet
12.	Dr. Sudam Khedkar	Grape	Guller	Godor.	Golvan	Jane .	Jalen
13.	Dr. Sudeep Kumar	Susk	Juni	Luch	Lucik	Juan	Sur
14.	Dr. Usha Khadtare	182	197	1814	NBIL	124	18X-
15.	Dr. Vijay Bhavari	West	Weer	Mar	(M) reserv	Ohor	Moun
16.	Dr. E. P. D'Souza	Sug	3a.	BALL	6	En.	Some
17.	Dr. Derek D'Souza	Mone	Valore	Maria	Malue	Man-a	Da
18.	Or. Tushar Khachane	Muchan	e Wheeling	12 Abochere	Druchas	Theche	" Blucha
19	Dr. Ajit Jadhav	مكمم	- Jaseph	100 Soder	12000	Speles	No de la constante
20	Dr. Shantaram Gulve	0.0	The last	TO THE	M	100	18

#### MCI regional Centre for Medical Education Technologies- AFMC, Pune Revised Basic Course Workshop at MIMER Medical College, Talegaon( D) 23 to 25 September 2019 Attendance

S.No.	Participant Name	Date : 23 Sept.2019 Sign		Date : 24 Sept. 2019 Sign		Date: 25 Sept. 2019 Sign	
		Morning	Evening	Morning	Evening	Morning	Evening
21	Dr. Atul Gowardhant Dy Atul K. GOWARDHAN	Hywoline	Korsh	Klynder	Kase	Shower	Restry
22.	Dr. Santosh Borkar	0	3	1	V	7	11
23.	Dr. Swapnil Bhise						
24.	Dr. Shivraj Konde						
25.	Dr. Poonam Khairnar	P.S. Khairna	PS Khairney	Ps Khaine -	P. o Klainer	1014	for Elmeider
26.	Dr. Anita Kulkarni	dr.	di-	dice	de la	A	di.
27.	Dr. Leena Shibu	Biros	Qub2	Alors.	Mino.	Alibo	Quio
28.	Dr. Jaya Barla	200>	10%	4017	Airyo	ADV.	Bone
29	Dr. Meenakshi Surve						
30	Dr. Rupall Baburdikar	als:	6N64.	028.	B8.	028"	as.

#### MCI REGIONAL CENTRE FOR MEDICAL EDUCATION TECHNOLOGIES

#### ARMED FORCES MEDICAL COLLEGE, PUNE

#### REVISED BASIC COURSE WORKSHOP & SENSITIZATION ON AETCOM

Place of workshop- MIMER MEDICAL COLLEGE, Talegaon (D), Pune . Date: 23-26 Sep 2019

#### REPORT OF rBCW & AETCOM WORKSHOP

Revised basic course workshop and sensitization on AETCOM of MIMER Medical College, Talegaon (D) was conducted from 23<sup>rd</sup> to 26 September 2019. Lt. Col. Mahima Lall from AFMC Pune was the MCI observer for the workshop. Twenty-five participants attended the workshop on all 4 days which included 4 participants from preclinical departments, 5 from paraclinical departments, 8 participants from medicine and allied specialties, 7 from surgery and allied specialties, whereas 1 participant was from administrative department. The workshop was conducted according to the programme schedule. The sessions were conducted using the aid of PowerPoint presentations along with group discussions, activities and role plays, to facilitate better understanding of the concepts. Active participation from the participants improved their learning experience.

#### Percentage of Faculty (Designation wise)

Professor-8%

Associate Professor- 32 %

Assistant Professor- 60 %

#### **Analysis of Pre test & Post test**

All 25 participants took pre test. All the participants showed improvement in in post test. Minimum difference in the marks was 6.5 and maximum difference was 16.

Most participants had not attended an MET workshop before and were very motivated to learn new ways to improve the teaching-learning experience in the classroom and beyond. The majority opinion confirmed that objectives of the workshop were largely achieved. Recommendations were made to conduct similar workshops in the future to keep up with the evolving world of medical education.

On behalf of Medical Education Unit of MIMER Medical College, I would like to thank Medical Council of India for giving us permission to conduct the rBCW & AETCOM workshops in our college. I would also like to thank Lt. Col Karuna Datta (Convener, MCI Regional Centre, AFMC,

Pune) and Lt. Col Raksha Jaipurkar (Co- Covener, MCI Regional Centre, AFMC, Pune). I also express my sincere gratitude to the MCI observer, Lt. Col. Mahima Lall for the efforts she has taken to enrich the workshop.

#### **Enclosures:**

Annexure-I: Approval letter from MCI Annexure –II: Programme schedule

Annexure III: Participant list

Annexure IV: Attendance sheet of participants

Annexure V:- Resource faculty
Annexure VI:- Session evaluation

Annexure VII:- Retrospective evaluation
Annexure VIII;- Programme evaluation
Annexure !X- Analysis of pre & post test

Annexure Xa & Xb- Photos

Annexure XI a &XI b - Format of certificate

Thanks and Regards,

Dr. Deepa Nair, MEU Co-ordinator, Prof. & Head,

\_ . . . . . . . .

Dept. of Physiology,

MIMER Medical College, Talegaon Dabhade, Pune.

Date: 10 October 2019.



#### Fwd: CISP-2 workshop (29-30 September 2020)

----- Forwarded message ------

From: Medical Education Technology <met@mitmimer.com>

Date: Fri, Sep 25, 2020 at 1:36 PM

Subject: CISP-2 workshop (29-30 September 2020)

To: Anatomy Department <anatomy@mitmimer.com>, Physiology Department <physiology@mitmimer.com>, Biochemistry Department <biochemistry@mitmimer.com>, Pathology Department <pathology@mitmimer.com>, Microbiology Department <micro@mitmimer.com>, Medicine Department <medicine@mitmimer.com>, SKIN & VD DEPARTMENT <skin@mitmimer.com>, PAEDIATRICS DEPARTMENT <pathography mitmimer.com>, Community Medicine <psm@mitmimer.com>, SURGERY DEPARTMENT <surgery@mitmimer.com>, ORTHOPAEDICS DEPARTMENT <ortho@mitmimer.com>, OBST & GYNAE DEPARTMENT <gynaec@mitmimer.com>, OPHTHALMOLOGY DEPARTMENT <ophthal@mitmimer.com>, ANAESTHESIOLOGY DEPARTMENT <anaesth@mitmimer.com>

#### Dear Sir/ madam,

This is a gentle reminder for the 2nd CISP workshop of our college scheduled from 29 to 30 Sept. 2020. Venue- Clinical Pharmacology Hall, 2nd floor College building. Reporting time 9.00 am on all 2 days.

Revised participant list and programme schedule are attached herewith.

Sending the resource materials also

- 1) Competency based UG Curriculum
- 2) AETCOM Module
- 3) Learning Resource Material- CISP

Kindly take the print out of relevant pages of UG curriculum with respect to your department, AETCOM Module, & Learning Resource Material of CISP.

One copy each per department is sufficient.

#### Please follow COVID-19 protocol while attending the workshop

In view of the current situation participants are requested to arrange for their own lunch, to avoid any potential crowding. We will not be providing plastic water bottles. But there will be provision for water. So please bring your own water bottle. Please go through the revised UG curriculum & AETCOM module before attending the workshop. If any faculty is unable to attend the workshop please inform me well in advance.

Thanks and Regards, Dr. Deepa Nair MEU Coordinator Prof. & Head Dept. of Physiology

#### 5 attachments

MIMER Medical College, CISP II participant list ( Revised) 29-30 September 2020.xlsx 16K

Updated Programme\_\_CISP 2\_MIMER MEDICAL COLLEGE 29-30 Sept. 2020.docx 23K

CISP\_ Learning Resource Material.pdf 3565K

AETCOM module.pdf 818K

UG curriculum.pdf 3652K



#### Physiology Department <physiology@mitmimer.com>

Fw: Fwd: Permission to conduct Revised Basic Course Workshop (rBCW) for Teaching Faculty, Tutors/Contract-Temporary Faculty at MIMER, Talegaon, Pune from 24th -26thMarch 2021 - Nomination of Dr. Priti Shah, Professor, Department of Surgery, D.Y Patil Medical College, Pune as observer – reg

DEEPA NAIR <drdeepasnair@rediffmail.com>
To: Physiology Department <physiology@mitmimer.com>

Thu, Apr 29, 2021 at 11:48 AM

From: Karuna Datta <karunadatta@gmail.com>

Sent: Mon, 15 Mar 2021 14:35:05

To: DEEPA NAIR <drdeepasnair@rediffmail.com>, Priti Shah <pritifaimer2010@gmail.com>, dome afmc <domeafmc@gmail.com>

Cc: Brigadier Training <bri>drigtrg.afmc@gmail.com>

Subject: Fwd: Permission to conduct Revised Basic Course Workshop (rBCW) for Teaching Faculty, Tutors/Contract-Temporary Faculty at MIMER, Talegaon, Pune from 24th -26thMarch 2021 - Nomination of Dr. Priti Shah, Professor, Department of Surgery, D.Y Patil Medical College, Pune as observer – reg

—— Forwarded message ———

From: National Medical Commission Academiccell <academiccell@gmail.com>

Date: Mon, 15 Mar, 2021, 2:28 pm

Subject: Permission to conduct Revised Basic Course Workshop (rBCW) for Teaching Faculty, Tutors/Contract-

Temporary Faculty at MIMER, Talegaon, Pune from 24th -26thMarch 2021 - Nomination of Dr. Priti Shah,

Professor, Department of Surgery, D.Y Patil Medical College, Pune as observer - reg

To: Karuna Datta <karunadatta@gmail.com>

Cc: <mimer@pn3.vsnl.net.in>, PRINCIPAL MIMER <principal@mitmimer.com>, Om prakash

prakash.o@balmerlawrie.com>

#### D 11011/1/21/AC

Date:

Col. Dr. Karuna Datta,

Convener, NMC Regional Centre, Professor of Sports Medicine, Armed Forces Medical College, Pune – 411040 M: 09560118881, E-mail: karunadatta@gmail.com

Subject:-Permission to conduct Revised Basic Course Workshop (rBCW) for Teaching Faculty, Tutors/ Contract-Temporary Faculty at MIMER, Talegaon, Pune from 24<sup>th</sup> -26<sup>th</sup> March 2021 - Nomination of Dr. Priti Shah, Professor, Department of Surgery, D.Y Patil Medical College, Pune as observer – reg

#### MCI regional Centre for Medical Education Technologies- AFMC, Pune Revised Basic Course Workshop at MIMER Medical College, Talegaon( D) 24 to 26 March 2021 Attendance

S.No.	Participant Name	Date: 24 March 2021 Sign		Date: 25 March 2021 Sign		Date:26 March 2021 Sign	
		Morning	Evening	Morning	Evening	Morning	Evening
1	Dr. Rajendra Prasad Gupta	Rus	OR .	de	Ris	R	Ro
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S.No.	Participant Name	Date: 24 March 2021 Sign		Date: 25 March 2021 Sign		Date 26 March 2021 Sign	
		Morning	Evening	Morning	Evening	Morning	Evening
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S.No.	Participant Name	Date: 24 March 2021 Sign		Date: 25 March 2021 Sign		Date:26 March 2021 Sign	
		Morning	Evening	Morning	Evening	Morning	Evening
21	Dr. Sandesh Gawade	Jamesh G.	Jamlosh 9.	damens.	January a	James 9	Samora.
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United Nations Educational, Scientific and Cultural Organization UNESCO Chair in Bioethics University of Haifa

UNESCO CHAIR IN BIOETHICS HAIFA

# The Bioethics Core Curriculum (BCC) of UNESCO

Our Core Curriculum is based on the core curriculum of UNESCO. In 2005 UNESCO adopted the Universal Declaration on Bioethics and Human rights. The Declaration embodies a set of bioethical principles that provides a common global platform by which bioethics can be introduced and taught to university students. An advisory expert committee of UNESCO developed the BCC for the teaching of ethics.

The UNESCO Division of Ethics of Science and Technology, the Sector for Social and Human Sciences, has produced the Syllabus for Ethics Education Program: The Bioethics Core Curriculum (BCC). The BCC was developed by an Advisory Expert Committee. It sets out to introduce the bioethical principles of the Universal Declaration that are shared by scientific experts, policy-makers and health professionals from all over the world. The BCC presents a core: it defines what should be regarded as the minimum in terms of teaching hours and contents for appropriate bioethics teaching.

The BCC is meant to provide the teachers a way of getting students to reflect upon the ethical dimensions and human rights considerations of medicine, health-care and science.

### Preface

Professor Dr Russell D'Souza Head Asia Pacific Program of the UNESCO Chair in Bioethics (Haifa) Melbourne Australia

Medicine is one of the time honoured professions that had a pre-existing code of behavior for its practitioners dating as far the Vedic and Hippocratic era. The doctor-patient relationship which was fiduciary and paternalistic, since time immemorial has changed. With the, advancement in medical sciences and technology, the rising costs of medical care and scarce resources, pose new ethical dilemmas to the practitioner of medicine.

Bioethics is now at the centre stage of medical education and calls to intensify its formal teaching in the curriculum, are being addressed. This Horizontal and Vertically Integrated bioethics curriculum has been designed with the foundations of the UNESCO Bioethics core curriculum.

Two international researches were carried by the International Center Health, Law and Ethics at the University of Haifa, under the guidance of Prof. Amnon Carmi. The aim of the project, was to check whether the lack of proper study of ethics in medical schools, was one of the reasons for the phenomenon of deterioration of the relationship between doctors and patients. The findings offered a validation to this assumption and brought about the establishment of an international steering committee that undertook the mission of preparing novel method for inculcating bioethics into medical education.

The International Center for Health, Law and Ethics at the University of Haifa initiated an international project that aimed at designing a new, modern curriculum of medical ethics, to be taught at medical schools across the world.

The need for a modernized curriculum derives, not only from the fact that many of the existent curricula are antiquated and completely discordant with the intricacies of recent scientific developments, but also from the safeguards which is required in the educational innovations. These would inseminate ethical values into students. The new education method that was adopted by UNESCO, laid the foundation for the 10 guiding books and the Ethics Teachers Training Course (ETTC) project. This project culminated in the establishment of the UNESCO Chair in Bioethics at University of Haifa, which was created, developed and promoted by Prof Amnon Carmi and his team. The current curriculum is an extension of this nobel initiative, customised to address the Indian and Asian cultural and health law requirements. This curriculum has been piloted, tested and refined at Indian medical colleges of the program of the UNESCO Chair in Bioethics (Haifa).

The results of this four year work in progress, rests with the Horizontal and Vertically Integrated Bioethics Curriculum for undergraduate medical training programs. This innovative curriculum integrates bioethics into all the pre-clinical, para clinical and clinical subjects and flows from the medical student entering the program, to the successful completion of medical training.

This teaching program acknowledges that the end result is not a bioethicists but rather ensures that the outgoing trained practitioners, will be competent to deliver ethically excellent health care to the community. This curriculum uses a multi-modal innovative teaching technology, with an assessment technology built in to the general assessment of the relevant subjects.

The purpose designed 3T Bioethics Training Program:

- Train '!Teach '!Transfer H' Empower '! Impart, uses tested training methodology that complements the medical teachers advanced training, in teaching bioethics, relevant to the horizontal and vertically integrated bioethics curriculum for undergraduate medical training programs. This sophisticated training of medical teachers, addresses the resource challenges for teachers of bioethics for medical training programs.

I express my gratitude to Professor Amnon Carmi the UNESCO Chair in Bioethics (Haifa), who has inspired me and my distinguished team Professor Dr Princy Palatty, Professor Dr Mary Mathew, Professor Dr Barna Ganguly, Professor Dr Thangaraju, Professor Dr Smita Deshpande, Professor Dr Balakrishnan and Professor Dr E. Mohandas, who are outstanding teachers and contributors from renowned medical universities in India. The aspirations and culmination of this mammoth project is aimed to produce practitioners who will deliver ethically excellent health care.

## The Bioethics Curriculum evolution

Prof Dr Princy Louis Palatty
Chair, Curriculum, Horizontally and vertically integrated
Indian program of the UNESCO chair bioethics (HAIFA)

It was not an arduous task for the team, to draft this curriculum as the UNESCO Bioethics core curriculum stands as a template for all those wishing to do the same.

Since 2011, the work began to reach its culmination now in 2014.

The basic challenge was in maintaining the tempo of bioethics right through the four and a half years of medical education course. Short courses have been adopted by various universities which evaporated, with the ending of the courses. Hence the first ever unique curriculum, that trudges every step of the way, of the medical student, was planned.

The subject of bioethics, being in the affective domain, is difficult to be assessed and to quantify internalization. The highpoint in achieving change of attitude, led to a complex multifaceted assessment program-which has traditional assessment along with in-training report (log book) periodically assessed in every subject of the medical education course.

The medical student finds, the medical curriculum cumbersome in itself and the addition, of this new subject could be the, proverbial 'straw-on-the camel's back'. Allocation of time and staff was an issues, that reached an "impasse".

This led to the evolution of 'dedicated' and 'discipline specific' bioethics classes. This demarcation resolved the issues, leading to most classes having, a 'bioethics component' i.e ethical aspects in every lecturer/bed side class for every subject. The requisite hours would be met with in surfeit. Thus, when bioethics is taken up in every discipline, effectiveness is certain. The hours of teaching supersedes the required criteria.

The traditional didactic lectures would not be effective in bringing about the attitudinal change required, rather thoughtproroking and sensitive awareness would jiggle their mind towards adopting the right attitude.

Hence, the curriculum includes innovative teaching methods that aids active learning for long-lasting results.

The curriculum evolved with every hurdle and brain storming to resolve the encountered problems which has led, to this uniquely pragmatic curriculum.

The curriculum has already spiralled twice since its inception. This curriculum could establish constancy of teaching at the "happening point" wrapped up in prevailing cultural mileu. The current curriculum is a result of earlier piloted enedavours.

The students are attuned to exact science but bioethics has philosophical overtones which is not appreciated by many. The deep philosophical interactions have been shed to maintain core principles of bioethics.

This teaching - learning technique inadvertently makes bioethics second nature to those being taught and those who teach.

Now, it has been validated and implemented by stalwarts in the field. The initial hurdles have been thwarted and is now, well set on the road to completion.

The road to making ethically excellent healthcare is possible by sowing ethical seeds early. This had been visualized and is now, being realized.

This is truly indigenous, relevant and sensitive to our needs which is the highlight of this curriculum.

The horizontally and vertically integrated UG bioethics curriculum, is here to stay.

Dr. Mary Mathew

Chair 3T Bioethics Training Program for Senior Medical Teachers Indian Program of the UNESCO Chair in Bioethics (Haifa)

Historically, ethics was understood to be an innate virtue embedded in a doctor's practice. In the 21" century, medical ethical thinking replaced the old paternalistic model and focused primarily on patient autonomy and rights. The practice of modern medicine now includes basing decisions and confronting challenges in an ethical manner.

Bioethics in the field of medical education came as an afterthought following a spate of litigations against doctors across the globe. Unethical practices and research in medicine by a few pariahs of the profession resulted in lack of respect and trust ire physicians. Majority of the outgoing doctors are unaware of the legal and moral implications of their decisions. Research suggests a correlation with lack of proper study of ethics in medical schools and the deterioration of the relationship between doctors and patients.

This Horizontal and Vertically Integrated bioethics curriculum and the complementing 3T Bioethics training program for medical teachers was developed and tested by the Indian program of the UNESCO chair in Bioethics, in an effort to train and equip teachers and students of medicine on the ethical aspects across disciplines, so as to produce well-balanced holistic doctors equipped to confront and deal with ethical challenges that is inherent in this profession.

# Teaching skills development

Professor Dr. E. Mohandas

Director Skills Development Program

Indian Program of the

UNESCO Chair in Bioethics (Haifa)

The ethical principles emphasize the clinician's dual contract to patient and society. Increased complexity of caring for patients in a consumer-satisfaction oriented society especially with the advent of new technologies, genomics, patenting of human tissue products, transplants and the issue of surrogacy, necessitates learning of ethically driven decision process. The bygone era of paternalistic view of practice of medicine has given way to humanistic and ethically guided principles into clinical reasoning and practice. Prof Donatella Lippi commented "... initiatives for teaching medical humanities and bioethics have the goal of turning high-tech medical performance into a high-touch one in which the human essence is revalued"

I am reminded of Davidoff's seven ethical principles-Rights (people have a right to health and health care), Balance (care of individual patients is central, but the health of population is also our concern), Comprehensiveness (în addition to treating illness, we have an obligation to ease suffering, minimize disability, prevent disease, and promote health. Cooperation (Health care succeeds only if we cooperate with those we serve, each other, and those in other sectors, Improvement (Improving health care is a serious and continuing responsibility. Safety (Do no harm) and Openness (being open, honest, and trustworthy is vital in health care)

Ethics education in India is so heterogeneous and the need of the day is to have a uniform structured curriculum. The Medical Council of India has brought out a vision document in 2015 which unfortunately doesn't have any clear understanding how ethics education has to be done. In September2008 WHO/SEARO expert group identified the lack of suitable learning resources and the paucity of trained faculty to teach medical

ethics. The innovative curriculum 'Horizontal and Vertically Integrated Bioethic Curriculum' integrating bioethics into all the pre-clinical, para clinical and clinical subject developed by multifaceted galaxy of experts Dr Princy Palatty, Dr Mary Matheu Dr Thangaraju, Dr Balakrishnan, Dr Barna Ganguly and Dr Smita Deshpande, will be a milestone in the history of ethics in medical education in India. This effort would no have been realized without the blessings of Prof Amnon Carmi and the leadership and supervision by the 'ever energetic and dedicated' Prof Russel D'Souza.

I am confident that this curriculum will enhance ethical awareness and impart ethical intelligence if taught through 'problem based learning' method -Engage, Explain, Explore, Elaborate and Evaluate. This will offer the opportunity for the trained practitioner to deliver ethically excellent health care to the community.

"Education is the most powerful weapon which you can use to change the very "Selson Mandela"

## Acknowledgement

The team is greatful to UNESCO for the permission to use the template of the Bioethics core curriculum and UNESCO case study series, as majourity of the teaching material is drawn from these resource for this course.

We are indebted to Prof Amnon Carmi and Prof Russell Dsouza in helping us chart this region specific curriculum.

Thank You The Bioethics Curriculum Team

# Contributors

Prof Amnon Carmi

Prof Dr Russell Dsouza

Prof Dr Princy Louis Palatty

Prof Dr Thangaraju

Prof Dr Balakrishnan

Prof Dr Mary Mathew

Prof Dr Smita Deshpande

Prof Dr Barna Ganguly

Prof Dr E. Mohandas

# Preamble

The sweeping cultural changes are impacted by the technological breakthroughs that have brought into new bioethical contexts and challenges, posing new problems and issues. A systematic and standard approach with an organized way of dealing with ethical issues is missing in the Indian Medical curriculum. Despite the plethora of intricate ethical issues in the biomedical arena, India is lagging behind with regard to lively, effective and enduring ethical discussion. Bioethics as an academic discipline is still lively, effective and preliminary levels.

Bioethics needs a systematic effort to work within the ethos of medicine, which has traditionally been service to sick.

There is now a shift of focus from the traditional individual patient, doctor relationship and medical care to a greater accountability to the society. Doctors and health professionals are confronted with many ethical problems. It is, therefore necessary to be prepared to deal with these problems.

This curriculum is to introduce bioethics in the regular teaching of MBBS courses beginning from first year and continuing till the internship.

# Highlights

This bioethics curriculum runs right through the medical course, in parallel. It has universal and national relevance and addresses health needs of the country. The curriculum is synchronized with the medical course. It upholds the universal principles of bioethics and human rights.

The curriculum is effective with an elaborate assessment strategy.

The teaching learning methodology is innovative and specific to each discipline. Ethical decisions are taken considering culture and religious underpinnings.

# Goals

- The bioethics curriculum would allow the development of a basic medical doctor with the following competency.
- > Recognize & identify ethical challenges and issues
- > Have capability to prevent or institute ethical solutions
- > Ability to meet out ethically excellent health care
- Oriented in justice and human rights
- Scientific enquiry in work and research
- Inculcate justification and critical thinking with respect to ethical issues.
- > Enhance and maintain empathy score of student
- > Introduce and promote humanistic values

# Course Objectives

The objectives of teaching medical ethics should be to enable students develop the ability to:

- 1. Identify underlying ethical problems in medical practice
- 2. Consider the alternatives under the given circumstances
- 3. Make decisions based on acceptable moral concepts and traditional practices.
- 4. To provide rational justification for ethical decisions
- 5. Should be able to apply the ethical principles of the Universal Declaration on Bioethics and Human Rights.

# Bioethics Teaching Strategy

This curriculum is the utilitarian model of Kantian perspective. It is imperative to emphasize the 'right course of action' instead of 'best course of action. The test of publicity does not vindicate wrongfulness. The curriculum is designed to link health, disease and environment. Students should be urged to qualify and quantify benefit. Differentiate 'irrational' and unjustified guilt

Appropriate education and decision making process, should be unravelled, to the students. The value-fact relationship is such that some 'facts' have moral impact which should be considered in the situational context.

Classroom teaching would focus on professional relationship, patient-doctor relationships, issues at the beginning and end of life, reproductive technologies, resource allocation and health policy. It will also deal with values, ethical concepts and principles. Clinical ethics must be taught as part of bedside teaching, group discussions, case studies, problem analyzing and problem solving exercises may also be encouraged. Demonstrating by example, how to identify and resolve a particular problem. Increasing the awareness and knowledge of students of the value dimensions of interactions with the patients, colleagues, relations and public. Fostering the development of skills of analysis, decision making and judgment is a necessary requisite. The students should be made aware of the need to respect the rights of the patient as also the duties and responsibilities of the doctor.

# Teaching Protocol

80% innovative teaching + 20% didactic teaching

40% dedicated bioethics hours 60% within discipline allotted hours

Conventional TL method

Innovative TL method

Lectures

Debate.

Group discussion

Street play

Assignments

Skit

Narrative

Case scenario analysis

Elative

Poster.

Skill competency:

Skill development

- Soft skills

- Critical thinking

- Evaluating arguments

- Justification

- Empathy

Articulate communication

- Narrative competence

- 360° view of problem

#### Teaching schedule:

The course goes on through the entire MBBS course and includes 7 modules, assignments and one elective.

The modules will be delivered in a specific order. Elective is compulsory which may be in the field of bioethics, health law, health policy, social dimensions or clinical ethics. The elective topics are chosen in close consultation with the students.

can include National program

make a list of topics 20 by each dept-

For elective\_mentaning-for I month

Antiborotic resistance ethics issue

# Case Scenario Analysis Template

Case synopsis:	111-11009	NAME OF BREEZE	
Identify ethical dilemn	па		
Alternative actions			
1			
2			Resident Marie 1
3			
4	army Advanced		
Stakeholders 1	2		
3	4		
1. Action			
Bioethical principle vi	iolations		
Consequence To stakeholder	Stakeholder 1	Stakeholder2	Stakeholder 3
San			
			17/3/1/1

2. Action			8
Bioethical principle	violations		
Consequence To stakeholder	Stakeholder 1	Stakeholder2	Stakeholder 3
Decision			9
Upheld BE principl	ė		
Review of outcome			
Name of student Year Course		Name of tutor Marks 10 maximum Marks obtained Remarks	•

# Suggested Viewing

Nurse Evers Boys
The Nazi Experience
My Sister's Keeper
Dr Kotnis ki amar kahani
12 angry gentlemen
Publish or perish

Informed consent
Vicky donor
Wit
Bemisal
Note book
Etc....

# Suggested Reading

- Karlawish J ,Paris JJ, Shewcuck TR, Siegler M.Clinical Ethical concerns in the operating room. In: Malangoni MA, editor. Critical issues in operating room management. Philadelphia: Lippincott- Raven publishers; 997.p. 211-30
- Pellegrino E. Humanism and the physician. Knoxville: university of Tennesee Press;
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- Lazar N. Greiner G, Robertson G, Singer PA.
- Bioethics for clinicians: Substitute decision making CMAJ 1996;155: 1435-7
- Jonsen AR, Siegler M, Winslade WJ. Clinical ethics. 4th ed. New York: McGraw Hill;
   1997.p. 63-5, 74-7,92-4.
- Francis C.M., Medical Ethics, 2nd Edn, 2004, Jaypee Brothers, New Delhi.
- Ethical Guidelines for Biomedical Research on Human Subjects, Indian Council of Medical Research, New Delhi, 2000

Etc
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#### Target

#### Course intended for

- > Undergraduate Medical students
- > Adapted version for Nursing, Pharmacy, Physiotherapy and Allied Health Sciences
- > Homeopathy, Ayurveda, Naturopathy courses undergraduates.
- > Life sciences, research students and faculty.

# Distribution of teaching hours

Total teaching hours: 80 (dedicated hours for BE) Unlimited (continuous with regular teaching schedule) e.g. bedside teaching, case discussion, lectures etc...

#### Phase 1

Preclinical Period - 30 hours

2 hours each by Anatomy, Physiology, Biochemistry during 12 months period.

#### Phase II

Para clinical Period - 40 hours

2 hours each from Pharmacology, Pathology and Microbiology during the 18 months.

#### Phase III:

#### Part 1

Community Medicine, Ophthalmology and ENT = 5 hours during the 12 months period.

#### Part 2

Medicine, Surgery, and OBG = 5 hours, during the 12 months period.

N.B: The teaching of Medical Jurisprudence by the department of Forensic Medicine will continue as before

The exclusive dedicated teaching hours will not hinder regular teaching activity. It helps to prepare sound base for ethical sensitivity. Every class, in every subject/ discipline will include ethical aspects at the end.

E.g. Myocardial Infarction

- Definition, type, clinical features, investigation, treatment of complication, ethical issues.

# Evaluation

All major subjects have at least one short answer question of Medical Ethics appropriate for the subject introduced in the University question paper, and a few questions may be asked during the viva voce examination e.g., basic principle in informed consent, confidentiality etc

# Student evaluation

The purpose of this evaluation is to assess whether the teaching of the course has resulted in the accomplishment of the objectives in each student. This evaluation is therefore focused on assessing the impact of the course in individual students. Various methods can be used: a written test, a multiple choice test, paper assignments, case analysis, presentations, essays, oral examinations.

In the future, on the basis of the outcome of the evaluation of the core curriculum, other assessment methods can be suggested. At least one short answer question may be asked on medical ethics appropriate to the subject in all major subjects in the university question paper. A few questions may be asked during viva voce examination.

During the period, the evaluation is nonformal.

Formal examination, comprising of written paper- Long essay, Short essay

Practical: viva voce- case scenario analysis

The rationale for the timing of examination, at the beginning of final year, is because they would have been well exposed to clinical field, to have grasp of possible ethical dilemas.

Summative evaluation

Satisfactory to post test score:

Theory paper, 80 marks. 20 -

Assignments (5) 100 marks

Participation credits 25 marks,

Elective: 25 marks

Attendance percentage should be 80% and above to qualify for examination. Total 300 marks

Marks obtained >60% for award of certificate

#### Course evaluation

After completion of the core curriculum the teaching should be valuated. Stude as well as teachers are invited to provide feedback on the implementation of a curriculum. The purpose of this evaluation is to identify how the course and the teacher can be improved with a standardized questionnaire for the evaluation of the course. Student evaluation from should be satisfactory

Program evaluation should be undertaken and should be satisfactory

Log book: to satisfactory completion

#### 360° Assessment

Formative evaluation, through the passage of the study through various discipline would be monitored by the log book which would assess the students, thoroughly and domains.

Grading system helps to monitor for satisfactory completion of programme.

#### Interest indicates

Students actively reading more than prescribed books, bioethics research projects, joining association related to subject, of ICMR project in hand etc.

The stratified levels of each domain would be graded.

"Will do' indicates the perception and internalization of the bioethical aspects by the student, as felt by the evaluating staff member

#### Outcome of Course

Skill development, capacity building, confident in handling ethical dilemmas

- Identify ethical issue
- Philosophical thinking capacity
- Construct justification and prevent violation of BE principles
- Awareness of BE issue and "how best to tackle?"



# Syllabus and Division of Classes into Units

### Module I

Unit 1. 1 What is ethics, Medical ethics & Bioethics?

Topics: Ethics, Bioethics, Medical ethics and disciplines of bioethics, law, moral values and norms

#### Learning:

- Student should be able to recognize & Distinguish an ethical issue from other issues
- · Students should be able to reason about ethical issues
- · Student should be able to explain the difference between terms
- Students should be able to differentiate bioethics, law, culture & religion

#### Unit 1.2 Historical perspectives of medical ethics

Topics: Nuremberg code, code of medical ethics, Declaration of Helsinki, Medical Council of India Code of Ethics (2002),

#### Learning objectives

· Student should learn the evolution of Bioethics at relevant junctures.

#### Unit 13 India ethos and tradition

Topics: Indian customs, religions, beliefs

#### Learning objectives

 Student should be able to understand relevance of these concepts in the bioethical context

#### Unit 1.4 Human dignity and human rights

Topics: Forming value systems on ones personal and professional life, ethical and human fulfillment, freedom and personal responsibility, patent as a person, rights to be respected, ethics of behaviour modification

#### Learning objectives

- Student should be able to explain and apply the concepts of human dignity and human rights
- Students should understand the relevance of these concepts in the context of bioethics

### Unit 1. 5 Right to health

Topics: concept of health, concept of disease, concept of healing

#### Learning objectives -

- Students should be able to understand the impact of disease upon physical and social aspects
- Student should also be able to deal with healing and patients motivation for healing to take place

#### Unit 1.6 Comparative Religion

Topics: Hinduism, Christianity Catholicism, Judaism, Islam, Jainism, sikhism, Buddhism.

Learning objective

 Student should be aware of basis of different religions to understand patient beliefs and needs.

# Module II

# Unit 2.1 Autonomy and responsibility

Topics: Freedom and personal responsibility, Patients bill of rights

### Learning objectives

- Student should be able to explain the concepts of autonomy and individual responsibility and to understand their significance for the health care providerpatient relationship
- Students should understand the relationship between autonomy and individual responsibility

# Unit 2.2 Respect of the individual and dignity

Topics: Truth and confidentiality, autonomy of decision, privacy

### Learning objectives

- Students should be able to explain why patient privacy and confidentiality should be respected
- · Students should be able to recognize legitimate exceptions to confidentiality

#### Unit 23 Informed consent and assent

Topics: Informed consent

#### Learning objectives

- Student should be able to explain the meaning of 'consent', 'informed', and
  'informed consent'; they should be able to define the principle of 'informed
  consent'
- · Students should be able to explain what the process of informed consent requires
- Students should be able to explain how the principle of consent is applied in different interventions, research and teaching
- · Students should be able to explain how exceptions to the principle can be justified
- Student should be able to explain the meaning of 'capacity to consent' and criteria, to define it and difference in therapy and research

## Unit 2.4 Role of family and society in bioethics

Topics: Ethics of human life, Family planning perspectives, resource allocation, public health issues

#### Learning objectives

 Student should be able to understand cultural differences and religious beliefs in adopting decisions

### Unit 2.5 Equality and Justice

Topics: Equitable distribution of services

#### Learning objectives

- Students should be able to identify and deal with the ethical issues involved in allocating scarce health care resources
- Students should be able to recognize conflicts between the health care professional's obligations to patients and to society and identify the reasons for the conflicts
- Students should be able to explain the meaning of 'culture' and why it is important to respect cultural diversity
- Students should be able to explain the meaning of pluralism and why it is important
  in the field of bioethics
- Students should be able to deal with cultural diversity and take into consideration cultural specificities (appropriate approach, positive inputs and limits) with respect to the fundamental principles of bioethics and human rights

### Unit 2.6 Non-discrimination and non-stigmatization

Topics: AIDS, TB, Leprosy, Chronic diseases - CVD, COPD. Chronic painful conditions

#### Learning objectives

- Students should be able to explain the concepts of discrimination and stigmatization in the context of bioethics
- Students should be able to identify different contexts and bases of discrimination and stigmatization and their implications
- Students should be able to identify and deal with situations where exceptions to the principle can be justified.

#### Unit 2.7 Sustainable world

Topics: Biocentrism, Biosphere and biodiversity, genetic engineering, ECO bioethics

### Learning objectives

- Students should be able to understand the need for ensuring that scientific knowledge contributes to a more equitable, prosperous and sustainable world
- Analyze environmental issues from anthropocentric, biocentric and ecocentric ethical perspectives
- Describe sustainable development

Panasclinical phase-2

# Module III

# Unit 3.1 Benefit and harm

Topics: Principles of beneficience, non maleficience, concepts with examples

## Learning objectives

- Student should be able to identify and evaluate harms and benefits in health care settings
- · Students should be able to justify decisions taking harms and benefits into account

# Unit 3.2 Research ethics Pharmal

Topics: Animal and experimental research/humanness, Human experimentation, Human volunteer research-Informed Consent, Drug trials, publication ethics, conflict of interest Learning objectives

· Students should be able to prepare an ethically viable research protocol

Unit 33 Self enhancement sung plastic sung. Costro

Topics: immortality, cosmetic surgeries, implant,

#### Learning objectives

• Student should be able to explain and determine the risk — benefit, vulnerability and weigh the impact of enhancement

#### Unit 3.4 Misc BE issues

Topics: Duty to rescue, Biocentrism etc.

#### Learning objectives

Student should be able to understand ethical relevance of these issues

# Unit 3.5 Reproductive ethics

0000

Topics - ART, guidelines, onco fertility

### Learning objective

- Student should be aware of ethical challenges in ART
- Students should be aware of guidelines pertaining to ART

# Unit 3.6 Ethics of caring

Topics: responsibility, receptivity

# Learning objectives

Student would be made aware of empathy, sensitivity, responsiveness.

# Module IV

# Unit 4.1 Beginning of Life Issue

Topics: Prenatal diagnosis, genetic counselling pediatric neonatal euthanasia, assisted reproductive technologies, surrogacy, designer babies, genetically modified food

## Learning objectives

 Be able to evaluate the possibilities and difficulties in the application of the principle in practical Settings

# Unit 4.2 End of life issues

Topics covered: Euthanasia, active, passive, advance directives, life support systems, death awareness, prolongation of life.

## Learning objectives

Be able to evaluate the possibilities and difficulties in the application of the principle on

# Unit 43 Evaluating ethical case studies, rationality

Topics: Gathering all scientific factors, Gathering all human factors, Gathering all value factors, Identifying areas of value-conflict, Setting of priorities, Working our criteria towards decisions

#### Learning objectives

Students should be able to reasonably justify decisions on ethical basis

# Unit 4.4 Ethics of human sexuality, gender reassignment

Topics: transgender

#### Learning objectives

- Student should be able to determine and weigh consequences of gender change
- · Student should be able to empathize and understand sensitivity of the issue

#### Unit 4.5 Organ donation

Topics: Sperm, egg, organ, B.M. transplants, xenografts

#### Learning objectives

Student should be able to determine the ethical relevance transplants

# Module V

# Unit 5.1 Professionalism

Topics: Physician patient relationship, solidarity and co-operation, Code of conduct, Contract and confidentiality, Charging of fees, Fee-splitting, Prescription of drugs, Over-Investigating the patient, Low-cost drugs, vitamins and tonics, Allocation of resources in health cares, Malpractice and Negligence

# Learning objectives

 Students should be able to explain the development of the notion of solidarity, accountability to society.

# Unit 5.2 Ethical intelligence

Topics: IQ, EQ

# Learning objectives

 Student should be able to determine the stages of development of ethical intelligence and factors contributing or trending EQ.

## Module VI

Unit 6.1: Health law and health care

Topics: laws governing countries

# Learning objective:

- Students should be aware of various laws pertaining to countries.
- Students should be aware of existing health policies.

## Unit 6.2 ethics in stem cell and genetic research

Topics: Stemcell, cloning, genetic engineering technology.

### Learning objective

- Students should be aware of the impact of stemcell, genetic and cloning research.
- Students should be aware of ethical guidelines to be followed.

# Module VII

#### Unit 7.1: Clinical Ethics

Topics: Breaking bad news, confidentiality, privacy, advance care, treatment plan choices, rational drug prescribing, Veracity.

# Learning objective

- Student should be able to consider ethical aspects while treating patients
- Students should observe code of conduct,

Student Eva	luation Fo	TTIL	
Student Name:            Term No:            Tutor:	Date:		
	Excellent	Satisfactory	Unsatisfactory
I. Critical Appraisal of Ethical issues	()	0	()
Clarifies, defines and analyses the prob	ilem and is al	ble to generate	justiable reasons
II. Self directed learning Utilizes relevant resource materials; Ap	()	()	()
	()	()	4.4
-	()	()	()
Is aware of personal strengths and list behavioural components of each problem shortcomings of others and their believes.	mitations; In m; Listens t efs	tegrates physic o conflicting o	cal, biological an
V. Overall Performance	()	()	()
Additional Comments:			

Ti	utor Evaluation For	m	
Tutor Name:	Date:	•••••	
Term :			
Student Name (Optional) or St	udent Number:		
		Good	Fai
I. Knowledge	()	()	11
Understands the objectives of what students can learn in t	f Bioethics and familia: time available	with problems;	Unde on
II. Attitudes	()	()	/1
Is interested in students and	their learning and is ap	proachable.	()
III.Teaching skills	()	()	()
Additional Comments:			
			3

# Order Of Lessons

- 1. Terminology Bioethics
- 2. Scope of Bioethics
- 3. Evolution of bioethics
- 4. Principle of bioethics
- 5. Narrative
- 6. Indian culture
- 7. Religion
- 8. Debate
- 9. Assignment
- 10. Spirituality in medicine
- 11. Moral theories
- 12. Sustainable world
- 13. Movie
- 14. Assignment
- 15. Doctor patient relationship I
- 16. Law and ethics
- 17. Case scenario
- 18. Movie
- 19. Privacy
- 20. Confidentiality
- 21. Veracity
- 22. Casuistry
- 23. Ethics in anatomy
- 24. Ethics in Biochemistry
- 25. Ethics in Physiology
- 26. Genetic s and ethics
- 27. Genetics and ethics 1
- 28. Case Scenario analysis

- 29. Stem cell research
- 30. Research ethics II
- 31. Research Ethics III
- 32. Case scenario assessment
- 33. Mock IEC meeting
- 34. Bedside ethics 1
- 35. Bedside ethics II
- 36. Surgeons perspective on ethics I
- 37. Surgeons perspective on ethics II
- 38. Assignment II
- 39. Communication I
- 40. Communication II
- 41. Breaking bad news
- 42. Ethics In Pharmacology
- 43. Ethics in Pathology
- 44. Ethics in RD research
- 45. Ethics in Microbiology
- 46. Ethics in Forensic Medicine
- 47. Professionals I
- 48. Professional II
- 49. Movie
- 50. Assignment
- 51. Case scenario
- 52. Transexuality
- 53. Gender Reassignment
- 54. Beginning of life issue 1
- 55. Beginning of life issue 2
- 56. Case scenario

- 57. End of life issue 1
- 58. End of life issue 2
- 59. End of life issue 3
- 60. Case scenario
- 61. Stigma discrimination 1
- 62. Stigma discrimination 2
- 63. Case scenario
- 64. Justice 1
- 65. Justice 2
- 66. Case scenario
- 67. Patients rights
- 68. Doctors rights
- 69. Case report 1
- 70. Case scenario

- 71. Assignment
- 72. Organ transplantation 1
- 73. Organ transplantation 2
- 74. Case scenario
- 75. Assignment
- 76. Movie
- 77. Assignment
- 78. Publication ethics
- 79. Informed consent
- 80. Brain death
- 81. Duty to rescue
- 82. Ethical intelligence
- 83. Ecobioethics

# Guidelines for Teaching Bioethics

BE has to be taught in a unique and innovative, which is left to the intuition of the teacher. But there is a commonality that has to be followed to assure effective teaching.

The case scenarios have be discussed using template inutility and later without. Each case should be discussed thread bare along with the relevant prevailing law of the land

The UNESCO case book, gives ample cases to suit various units that have to be covered.

It is advocated to state the topic of class and accept student views while adding all the points we need to cover, so that it does not become didactic teaching.

Case scenario should be Indianised, suiting and relevant to our needs for real time situation and in accordance with our laws.

Some classes have to be conventional, to disperse, lot of information, the students are unaware of, but follow it up with active learning techniques.

Ethics of caring is a new concept which is outlined in detail, here.

### 1. Medical Education and Ethics of caring

The important area of ethics of caring, should be included as it applies to the calling that the medical trainees have chosen to pursue, three areas that are required to be to be incorporated in the medical ethics training.

- 1. Including exercises that foster being receptive in students, which is feeling empathy and compassion for patients.
- 2. The need to empower responsibility, that enables, the translation of receptiveness associated with empathy and compassion into action that is reflected in responsibility for their patient and their specific requirements.

3. The fostering of a teaching environment for medical students that is earing and values the attributes of, attentiveness, honesty, patience, respect, compassion, trustworthiness and sensitivity to all aspects of moral behavior.

# 2. Fostering empathy and compassion for patients - Being receptive

Medical student's receptivity to their patients was more intense that what people generally develop in ordinary day to day encounters. This might follow from medical students arrive on the wards idealistic. Being inherently trusted by patients as they are future doctors and often have time to listen to patients who are ill and dependant. This can lead to sharing of their most intimate thoughts and feelings. Medical students are naturally receptive in the beginning of training. Observations confirm that that doctors loose this intense receptivity to patients later in their training. The implications from is that the medical training might fail to maintain the observed receptivity of students at the beginning of their training. Studies suggest that young doctors might supress feelings and put aside values in order to get on with training and work. This phenomena of suppression of empathy albeit temporarily, to get on with training requirements, prevents moral development and can further even erode existing moral values. The medical student's assimilation into a ward culture that does not value empathy, in addition to the suppression, has the potential to harm the students' moral sensitivity, moral commitment and moral character which are aspects of their ability to care. This might can influence their ability to ethical reasoning about ethical issues.

Some success in maintaining medical student's natural receptivity throughout training has been achieved by providing medical students abundant opportunities to reflect on meaning and purpose of their work. This is best achieved in small & practivity, with carefully selected clinical faculty that facilitates the exercise. This small group exercise offers opportunities for students and faculty to share feelings and support each other. Reflection in small groups along with the intense learning on the ward, can balance the intense medical education process for students in a way that offers the maintenance of their caring orientation. Reflection can assist these students to integrate their natural empathy for patients into action. Thus medical students should not only

reflect on their values but learn how to put these values into practice. These can be achieved by the combination of teaching of medical ethics with learning patient – doctor communication skills. There is good data supporting the effectiveness of these exercises.

# 3. Putting the ethics of caring into action- Taking responsibility.

Taking responsibility is the way in which caring is put into action. Medical students must be taught how to translate receptivity into responsibility. Taking responsibility, within the context of ethics of caring, translates to caring, despite the presence of various obstacles, wether institutional or personal. Dealing with these obstacles in the context of caring, centres on expressing empathetic understanding and attempting to build rapport by getting to know patients better. The ethics of caring places high value on maintaining the relationship, which would begin by always seeking to understand the patient's view point and getting to know the patient better. These efforts on maintaining a therapeutic relationship would allow negotiated solutions, when obstacles do present. This then would provide the best care under the circumstances, as part of taking responsibility and translating care into action. Further if obstacles to action or taking responsibility arise, the potential of conflict and avoiding irresolvable conflict between student, doctor and the patient is avoided by opening discussions to a larger number of possible solutions.

Thus good care will require, that a doctor not use the application of respect for autonomy, to get rid of a troublesome patient who prematurely wants to sign out against medical advice. In this the ethics of caring can temper the application of the principal of autonomy by the doctor seeking a full and deep understanding of why this patient chooses to refuse treatment. This is also done with sensitivity, attentiveness, honesty and with respect for the patient. This translates to a caring doctor being respectful always and being aware that the patient is a vulnerable person, with lees knowledge than and is often dependent on their health care providers.

The required actions grounded in caring can differ from those based only on ethical principals in that caring orientation mandates that doctors honestly attempt to identify their blind spots or vulnerability such as frustration, anger, counter transference,

prejudice and even exhaustion that can impair their ability to care for patients. Caring requires not only being receptive to others and seeking their views but also being fully aware of one's fallibilities.

As part of education exercise in empowering responsibility, that enables, the translation of receptiveness associated with empathy and compassion into action, the use of role play as a regular educational exercise is found to be useful. As part of this exercise, students can be asked to role—play a physician facing obstacles in his or her endeavours of taking responsibility for this patient and his or her specific requirements. Students are asked to talk to the patient about the identified obstacle and the consequences. This can be followed by a case discussion. From the ensuing deliberation the role-play might be redirected more productively in several ways that might bring further light on the exercise, of taking responsibility as part of the ethics of caring.

# Discipline Specific Bioethical Concerns

#### Anatomy

Respect to human body

Respect to the dead

Cadaver sources

Genetic counseling

Eugenics

PNDT

Organ donation

Stemcell research guidelines

### Physiology

Animal ethics

Student ethical issues

Whistle blowing

Confidentiality

Privacy

#### Biochemistry

Dichotomy

Confidentiality

Necessity of tests

Prudence in choice of test

Reports confictctality

Informed consent for patients

Refusal of test

Pharmacology

Rational drug prescribing

Research ethics

Use of expensive drugs

Animal ethics

Microbiology ethics in all A

Prudency in tests 1 Prudency in tests -14 ne - SSK/ PW

Lab reports confidentiality, privacy notification - 26 4 - Jaishree

(3) Post/pretest counseling - 131-4 - Sadhana

Report disclosure > 17/4 - 5000

#### Pathology

Veracity

Confidentiality

Privacy

Dichotomy

Competency

Community Medicine

Public health ethics

Clinical ethics

Health education

### Forensic Medicine

Laws

Ethical guidelines

Article 91,92

Death certificate

Responsibility us witness- expert

CPC reflect to doctors CPA act 1992

Medicine

Clinical ethics

Public health ethics

Responsibility of patient

Patients bill of rights

Medical complicity

End of life ethical issues

Benefit risk assessment

Treatment plan

Patient autonomy

Medical futility

Pediatrics

Privacy

Assent, consent

Neonants futility

Respect for children

OBG

Privacy

Confidentiality

Bioethical life issues

Clinical ethics

Informed consent

PNDT

Abortion

Use of contraceptives

Spouse consent

ART + ethical issues

Surgery + orthopedics

Clinical ethics

Brain death

Organ transplantation

Informed consent

Emergency case attention

Ethical perspectives in surgery

Benefit vs Harm

Human enhancement

The discipline specific bioethical concerns will be dealt with in the respective discipline according to the medical course.

Every lecture, tutorial, practical and bedside class has scope for bioethical learning ac ( ).

Thus, every class of every subject, his an ethical learning objective.

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Dr C. B. Mhaske
Professor and Head of Drematology
BJ Govt Medical College
Pune, Maharastra

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- 2. Further resources must be prepared comprehensively (more case books, case studies, lecture notes, power point presentations and posters). We intend to prepare a compendium of resources. It will be globally sourced and the contents shall be peer reviewed.
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## MINER WEDICAL COLLEGE

Talegaon Dabhade-410507

### DEPARTMENT OF ANATOMY

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TO ---/20

Continuous Performance Assessment

Signature of Student

Signature of H.O.D

Name:-

Roll No.

Mobile No.

- e Student:
- · Parent:

### **Continuous Performance Assessment**

Grade A- Excellent B- Good C- Average D- Need Improvement (unsatisfactory)

Sr.	Topic	Grade	Date	Sign of	
No.			(with Remark)	counselor	
1.	General Anatomy -Terminologies - skin & fascia -Bone, Joint, Muscle - Blood Vessels, Nerve		# # # # # # # # # # # # # # # # # # #		
2.	Inferior Extremity				
2.	-Anterior, medial and -Gluteal aspect of Thigh, Hip JtVenous drainage -Popliteal Region, Knee JtFoot-Arches, sole, Walking				
	-Ankle & subtalar joints				
	General Histology		1		
2	-Cytology, Epithelium, glands Connective tissue & cartilage, Bone, Muscle				
	General embryology				
	-Spermatogenesis, Oogenesis, Ovarian Cycle, Uterine Cycle, -Fertilization & Implantation				
3.	Superior Extremity				
<i>J</i> .	-Pectoral Region -Shoulder Girdle, shoulder joint -Arm - Muscles, Vessels and Nerves -Elbow joint				
	-Forearm - Muscles ,Vessels and -Nerves, Wrist joint, Palm				
	General Histology				
	-Blood Vessels and Peripheral Nerve			ing_	
	General Embryology				
	-2 <sup>nd</sup> & 3 <sup>rd</sup> week after Fertilization Folding of Embryo, Neural Tube & Notochord				

Sr. No.	Topic	Grade	Date (with Remark)	Sign of counselor			
4.	Head Neck and Face -						
* 7	-Scalp, Face, Cervical Fascia	1	T				
	-Inangles of neck	The state		L.F. SEME			
	-Extra Ocular Muscles & Lacrimal		Contract of the contract of th				
	apparatus	2 1 1 12 1					
	-Dural Venous Sinuses & Pituitary Gland						
	-Deep structures in Neck			14965			
	-Thyroid Gland			A Date of			
	-Muscles, Vessels &Nerves	2					
	-Parotid Gland						
	-Submandibular Region						
	-Facial Nerve						
	-Infra temporal fossa & TM Joint	2 11					
	-Palate & Palatine Tonsil, Tongue &						
	Hypoglossal N.						
	-Pharynx & Deglutition		K <sub>1</sub>				
	-Larynx						
1	-Nose, PNS, EAR	_ ' .					
	Histology	Histology					
	-Lymphoid tissue	5 m 2 x					
	-Integumentary system	x = 1		-			
	-Salivary glands & Tongue	- ×		-			
	-Endocrine glands	· × × i					
	-Eye						
	Embryology						
Γ	-Pharyngeal Apparatus Pharyngeal	1					
	Pouches& Clefts			w			
	-Development of						
	Tongue	* J					
	Thyroid						
	Thymus						
	Pituitary, Face & Palate Eye, Ear			-u = 1			
	realitary, race & raidle Eye, Ear						

Sr. No.	Topic	Grade	Date (with Remark)	Sign of counse lor		
5.	Thorax -					
	-Typical Intercostal Space					
	-Mediastinum, Lungs & BP segments					
	-Heart and Coronary circulation			-		
	-Diaphragm					
	-Venous Drainage of Thorax					
	Histology	_				
	-Respiratory System		-			
	Embryology - CVS			1		
	-Heart tube,					
	-Development of chambers & partitioning		- 4			
	-Aortic arches		_			
	-Developmental anomalies	L	E .	<u> </u>		
6.	Nervous System	-	<u> </u>	1		
	-Spinal Cord, Meninges, CSF					
	-Brainstem					
	-Cerebellum					
	-Cerebrum- Functional areas &white matter					
	-Ventricles & Blood Supply					
	-Cranial Nerves					
	-Thalamus and Hypothalamus					
	-Autonomic Nervous System					
	Histology	1				
	-Central Nervous System					
	Embryology					
	-Brain Vesicles, Brain stem					
	-Cerebrum & Cerebellum					
	-Developmental anomalies					

Sr.	Topic	Grade	Date	Sign of
No.			(with Remark)	counselo
7.	Abdomen			
	-Anterior abdominal wall, Inguinal Canal -Scrotum, Testes, Epididymis -Spermatic Cord			
	-Peritoneum -Stomach ,Duodenum, -Pancreas, Liver& EHBA			
	-Large Intestine, Caecum & Appendix -Rectum, Anal Canal & Ischiorectal Fossa			
	Histology			4:
	-GIT - I		L.	· ()
	Embryology			
	-Post pharyngeal gut, Stomach, lesser & greater sac			3 -
	- Intestine & Intestinal organs	e erri		
3.	Doctoriou Alala II I			
-	Posterior Addomen wall and	Pelvic	organs	
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney ,Ureter ,U. Bladder	Pelvic	organs	
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney ,Ureter ,U. Bladder -Uterus, Fallopian Tube, Ovary -Pelvic Diaphragm ,Perineal pouches &	Pelvic	organs	
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney ,Ureter ,U. Bladder -Uterus, Fallopian Tube, Ovary -Pelvic Diaphragm ,Perineal pouches & -Urethra	Pelvic	organs	
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney, Ureter, U. Bladder -Uterus, Fallopian Tube, Ovary -Pelvic Diaphragm, Perineal pouches & -Urethra  Histology	Pelvic	organs	
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney ,Ureter ,U. Bladder -Uterus, Fallopian Tube, Ovary -Pelvic Diaphragm ,Perineal pouches & -Urethra  Histology -Urinary System		organs	
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney, Ureter, U. Bladder -Uterus, Fallopian Tube, Ovary -Pelvic Diaphragm, Perineal pouches & -Urethra  Histology			
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney ,Ureter ,U. Bladder -Uterus, Fallopian Tube, Ovary -Pelvic Diaphragm ,Perineal pouches & -Urethra  Histology -Urinary System			
	-Blood Vessels & Portal Vein -Lumbar plexus -Kidney, Ureter, U. Bladder -Uterus, Fallopian Tube, Ovary -Pelvic Diaphragm, Perineal pouches & -Urethra  Histology -Urinary System -Reproductive System			

## MIMER MEDICAL COLLEGE TALEGAON DABHADE

#### **DEPARTMENT OF PHYSIOLOGY**

**BATCH: 2020-2021** 

Photograph

#### CONTINUOUS PERFORMANCE ASSESSMENT CARD

**Signature of Student** 

Signature of H. O. D.

Name:

**Roll No:** 

Year: 2020-2021

### **Continuous performance assessment (2020-2021)**

### **Department of Physiology**

Sr. No.	Topic	Grade	Signature with date
A	General Physiology		
1.	Introduction & branches of Physiology		
	Functional organization of human body		
2.	External & internal environment & Homeostasis		
3.	Biofeedback mechanisms		
4.	Cell Physiology		
5.	Transport across cell membrane		
В	Haematology		
1.	Composition & function of blood		
	Plasma proteins (Types, concentration, functions)		
2.	Haemopoesis –General concept		
	Erythrocytes, Erythropoesis,		
	Reticulocyte- its clinical significance		
3.	Haemoglobin- Fate of haemoglobin & jaundice		
4.	Anameia, polycythemia		
5.	Leukocytes- types, differential WBC count, functions Granulopoiesis& lymphopoiesis		
6.	Immunity- Defination, Antigen-Antibody, types, innate &		
	acquired & their mechanism		
7.	Humeral & cell mediated immunity, Basis of vaccination		
8.	Blood grouping		
9.	Rh system & blood transfusion		
10.	Monocyt		
11.	Hemostasis		
12.	Platelets		
13.	Blood coagulation		
14.	Anticoagulants		
15.	Body fluid compartments		
C	Nerve Physiology		
1.	Nerve fibres –different types of classification		
2.	Resting membrane potential		
3.	Action potential		
4.	Properties of action potential significance		
5.	Conduction of nerve – affecting factors		
D	Muscle Physiology		

1.	Classifiaction & structure of skeletal muscle	
2.	Sarcoplasmic tubular system	
	Excitation – contraction coupling	
3.	Neuromuscular transmission	
4.	Molecular basis of skeletal muscle contraction	
5.	Energetics & oxygeon debt	
6.	Properties of skeletal muscle	
7.	Developments of tension in the muscle different	
	affection factors & EMG	
E	Respiratory Physiology	
1.	Physiologic anatomy & functions of Respiratory system	
	Non-respiratory functions of lung	
2.	Mechanics of respiration	
3.	Ventilation – I	
4.	Ventilation – II	
	(Alveolar dead space- applied aspect)	
5.	Diffusion of gases	
6.	Gas transport (O <sub>2</sub> )	
7.	Transport of Co <sub>2</sub>	
8.	Neural control- higher centers	
9.	Neural control- reflexes	
10.	Chemical control	
11.	Pulmonary circulation	
12.	Exercise & artificial respiration	
13.	Hypoxia & high altitude Physiology	
14.	Pulmonary function tests (vol & capacities)	
15.	Oxygen therapy	
F	CVS	
1.	Introduction, functions & general organization of sy	
2.	Structure of heart	
3.	Properties of cardiac muscle – I	
4.	Properties of cardiac muscle – II	
5.	Pacemaker potential & A. P. of cardiac muscle	
6.	Generation & conduction of cardiac impulse	
7.	ECG – I	
8.	ECG – II	
9.	Cardiac cycle - I	
10.	Cardiac cycle – II	
11.	Heart rate & its regulation	
12.	Haemodynamics	
13.	Cardiac output	
14.	Blood pressure – I	
15.	Blood pressure – II	

16.	Capillary circulation & tissue fluid formation	
17.	Lymphatic system	
18.	Regional circulation – I	
<b>—</b>	Regional circulation – II	
19.		
20.	Hemorrhagic shock	
G	Reneal Physiology	
1.	General introduction, structure & functions of kidney	
2.	Reneal circulation	
3.	GFR & reneal blood flow	
4.	Concentration & dilution of urine	
5.	Formation of urine- glomerular stage	
6.	Formation of urine- tubular stage	
7.	Role of kidney in acid –basis balance	
8.	Physiology of micturition	
9.	Blood volume	
10.	Blood volume regulation	
Н	Body temperature regulation	
1.	Homeothermia	
2.	Regulation of body temperature	
۷.	Regulation of body temperature	
i		
T	Alimantary system	
I	Alimentary system  Introduction & organization of system	
I 1.	Introduction & organization of system	
1.	Introduction & organization of system Innervations & blood supply	
1. 2.	Introduction & organization of system Innervations & blood supply Salivary secretion	
1. 2. 3.	Introduction & organization of system Innervations & blood supply Salivary secretion Mastication & deglutition	
1. 2. 3. 4.	Introduction & organization of system Innervations & blood supply Salivary secretion Mastication & deglutition Gastric secretion	
1. 2. 3. 4. 5.	Introduction & organization of system Innervations & blood supply Salivary secretion Mastication & deglutition Gastric secretion Gastric Motility	
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2.	Mechanism of hormone action	
3.	Anterior pituitary hormone	
4.	Posterior pituitary hormone	
5	Thyroid	
6.	Parathyroid – I	
7.	Parathyroid – II	
8.	Adrenal cortex & Medulla – I	
9.	Adrenal cortex & Medulla – II	
10.	Pancreatic hormones	
L	Reproductive Physiology	
1.	Sex chromosomes, determination & differentiation	
2.	Puberty & Menopause	
3.	Spermatogenesis & testosterone	
4.	Menstrual sycel	
5.	Ovarian cycle & ovulation	
6.	Physiology of pregnancy & functions of placenta	
7.	Parturition & lactation- Advantages of breast feeding	
8.	Contraception	
	•	
M	Special senses	
1.	Functional anatomy of eye & structure of retina & image	
	formation	
2.	Photochemistry of ovision	
3.	Papillary reflexes, accommodation & refraction & colour	
	vision	
4.	Visual pathway	
5.	Physics of sound, external ear, middle ear – function &	
	assessment	
6.	Cochlea, inner ear & audiometry	
7.	Taste	
8.	Smell	
N	Central nervous system	
1.	General outline of CNS	
2.	Introduction	
3.	Synapse- definition & structure	
4.	Synapse- synaptic transmission	
5.	Synapse- properties & its significance	
6.	Neurotransmitters – I	
7.	Neurotransmitters – II	
8.	Receptor – Definition & classification	
9	Receptor – properties	
10.	Receptor – sensation of touch, pain & propreoception	
11.	Reflex – definition & classification	

12.	Streach reflex	
13.	Reflex – properties	
14.	Ascending tracts – dorsal column	
15.	Ascending tracts – spinothalamic	
16.	Pyramidal tracts	
17.	Extrapyramidal tracts	
18.	Spinal trans section – I	
19.	Spinal trans section – II	
20.	Spinal trans section – III	
21.	Posture & equilibrium – I	
22.	Posture & equilibrium – II	
23.	Posture & equilibrium – III	
24.	Vestibular apparatus – I	
25.	Vestibular apparatus – II	
26.	Thalamus (connection & classification of nuclei)	
27.	Hypothalamus	
28.	Hypothalamus – functions	
29.	Limbic system – parts & connection	
30.	Limbic system – functions	
31.	Reticular formation	
32.	Sleep & wakefulness	
33.	Cerebellum – I	
34.	Cerebellum – II	
35.	Cerebellum – III	
36.	Cerebellum – IV	
37.	Basal ganglia – I	
38.	Basal ganglia – II	
39.	Basal ganglia – III	
40.	Cerebral cortex – I	
41.	Cerebral cortex – II	
42.	Prefrontal cortex	
44.	Speech	
45.	Memory – I	
46.	Memory – II	
47.	Learning – I	
48.	Learning – II	
49.	Brain death & organ donation	

## MIMER MEDICAL COLLEGE

Talegaon Dabhade

## DEPARTMENT OF BIOCHEMISTRY

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## Continuous Performance Assessment Card

Signature of Student

Signature of H. O. D.

Name:

**Roll No:** 

Year: 2020-2021

**Email of students:** 

Email of parents:

Mob. No. students:

Mob. No. parents:

Sr.No.	TOPIC	GRADE
1 001	Introduction to Biochemistry	
2	Structure and function of cell	
3	Introduction and classification of carbohydrates	
4	Monosaccharides, Isomerism of Monosaccharides	
5	Propertise of Monosaccharides	
6	Disaccharides & Polysaccharides - Classification and propertise	
7	Heteroplysaccharides and their importance	
8	Introduction, classification and properties of amino acids	
9	Classification of proteins	
10	Properties of proteins and biologically important peptides	
11	Structural organisation of proteins	
12	Plasma proteins	
13	Molecular defence - Immunoglobulins	
14	Introduction and classification of lipids	
15	Chemistry and functions of fatty acids	
<b>1</b> 6	Chemistry and functions of prostaglandins	
17	Chemistry and functions of Cholesterol	
18	Introduction and classification of vitamins and vitamin A	
19	Vitamin D	-
20	Vitamin E and K	
21	Vitamin C and Biotin	
22	Thiamine	
23	Niacin, Riboflavin and Pantothionic acid	
24	Folic acid and cobalamin	
25	General nature, classification of enzymes	
26	Specificity and mode of action of enzymes	
27	Factors affecting enzyme activity	
28	Enzyme inhibition	
29	Clinical importance of enzymes Diagnostic, therapeutic	
30	Clinical importance of enzymes as a laboratory reagent and isoenzymes	
31	General concept of oxidation reduction, role of conenzymes	
32	ETC, substrate level and oxidative phosphorylation, inhibitors	
33	Chemistry and function of haemoglobin	
34	Types of normal and abnormal haemoglobin	
35	Chemistry of nucleoproteins, Biological importance of nucleotides	
36	Structure and function of DNA & RNA	
37	Digestion and absorption of carbohydrate, Glycolysis, Rapoport Luebering cycle	
38	Glycogen synthesis and break down	
39	Citric acid cycle	
40	Gluconeogenesis, Metabolism of galactose and galactosemia	
41	HMP shunt and its significance, uronic acid pathway	
42	Blood sugar level regulation, Glycosuria, diabetes mellitus	

43	GTT diabates mollitus	
	GTT, diabetes mellitus	
44	Digestion and absorption of Lipids	
45	Beta oxidation of fatty acids	
46	Biosynthesis of fatty acids	
47	Adipose tissue metabolism, Ketone body metabolism	
48	Cholesterol biosynthesis, role of HDL, LDL	
49	Fatty liver and atherosclerosis.	
50	Digestion and absorption of proteins, fate of amino acids	
51	General reactions of amino acids	
52	Fate of ammonia, Urea cycle, glutamine formation	
53	Metabolism of glycine	
54	Metabolism of aromatic amino acid	
55	Metabolism of Sulphur containing amino acids	
56	Intertation of metabolism and metabolic changes during starvation	
57	Synthesis and catabolism of purines, gout	
58	Synthesis and catabolism of pyrimidine	
59	Genetic code, mutations	
60	DNA replication, Transcription	
61	Protein biosynthesis chain initiation, elongation, termination	
62	Post translation modification and Inhibitors of protein biosynthesis	
63	Gene expression and its regulation, Lac-operon model	
64	Genetic engineering: Recombinant DNA technology	
65	Application recombinant DNA technology and PCR	
66	Synthesis of haemoglobin, porphyria	
67	Break down of haemoglobin, fate of bilirubin	
68	Different types of jaundice	
69	Liver function tests	
70	General characteristic and mechanism of hormone action	
71	Importance of nutrition, balance diet, RQ, SDA	
72	Importance and classification of minerals, calcium	
73	Phosphorous, sodium, potassium, mangnesium and chloride	
74	Metabolism of iron	
75	Importance of copper, iodine, manganese, selenium, zinc and fluoride	
76	Water and electrolyte balance	
77	Water and electrolyte imbalance	
78	Acid base balance	
79	Acid base imbalance, anion gap, laboratory investigations	
80	Detoxication mechanisms, Free radicals, enzymtic and nonenzymtic antioxidants	
81	Applications of radioisotopes, therapeutic & diagnostic	
82	Kidney function tests	
83	Thyroid function tests	
84	Biochemistry of cancer, tumour markers	
85	Environmental Biochemistry, air and water pollution, effects of tempeature.	

## MIMER MEDICAL COLLEGE TALEGAON DABHADE

#### **DEPARTMENT OF PHARMACOLOGY**

**BATCH: 2020-2021** 

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#### CONTINUOUS PERFORMANCE ASSESSMENT CARD

**Signature of Student** 

Signature of H. O. D.

Name:

**Roll No:** 

Year: 2020-2021

### **Continuous performance assessment (2020-2021)**

### **Department of Pharmacology**

Sr. No.	Topic	Grade	Signature with date
1	Intro to Pharmacology		
2	Routes of Admin		
3	Pharmacokinetic - I		
4	Pharmacokinetic - II		
5	Pharmacodynamics -I		
6	Pharmacodynamics -II		
7	Factors Modifying drug		
8	ADR		
9	Intro to ANS		
10	Anticholinergic		
11	Adrenergic		
12	α Blockers +β Blockers		
13	SMR-I		
14	SMR-II		
15	LA		
16	Sedative & Hypnotics		
17	Parkinsonism		
18	Psychopharm –I		
19	Psychopharm –II		
20	Antiepileptics		
21	Analgesics		
22	Treatment of RA & Gout		
23	Diuretics		
24	Antidiuretics		
25	Angina		
26	HTN		
27	CHF		
28	Shock& MI		
29	Drugs Affecting Blood		
30	Asthma		
31	Cough		
32	Haematinics		
33	Antiulcer Agents		

34	Antiemetics	
35	Constipation	
36	Diarrhea	
37	GERD & IBD	
38	Thyroid and antithyroid	
39	Glucocorticoids	
40	Treatment of Type 1DM	
41	Treatment of Type 2DM	
42	Calcium	
43	Estrogen and Progestin	
44	Drugs acting on uterus	
45	Cephalosporins	
46	Broad spectrum agents	
47	Macrolides and Skin	
47	Leprosy	
48	Beta lactam antibiotics	
49	Aminoglycosides	
50	Tuberculosis	
51	Antivirals	
52	Antifungals	
53	Anthelminths	
54	Anticancer drugs	
55	Vaccine And Sera	
	v deeme / mu gera	
<u> </u>		

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#### MIMER MEDICAL COLLEGE Talegaon Dabhade

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#### DEPARTMENT OF MICROBIOLOGY

----/201 TO ----/201

Continuous Performance Assessment Card

Signature of Student

Name: DARSHAN N. SORYAWANSHI

Roll No. 134

Year: 2019-2020

Signature of H.O.D.

#### DEPT. OF MICROBIOLOGY

S.No	Topic	Grade	Sign
1	Introduction & Historical background		
2	Morphology of bacteria & Physiology of bacteria, growth		
	requirements & metabolism		
3	Sterilization & disinfection, Waste disposal		
4	Bacterial genetics & Drug resistance		
5	Normal flora & Host-parasite relationship		WE H
6	Identification of bacteria		
7	Introduction to Immunology		
8	Antigens		
9	Antibody		
10	Complement		
11	Antigen - Antibody reactions		
12	Structure and function of immune system		
13	Immune response		
14	Hypersensitivity & Autoimmunity		
15	Transplantation / tumour immunity, Immunodeficiency		
16	Staphylococci		
17	Streptococci & Pneumococci		
18	Neisseria 4		
19	Corynebacteria		
20	Mycobacteria		
21	Bacillus, Methods of Anaerobiosis & Non-sporing anaerobes		
22	Clostridia		
23	Enterobacteriacea- E.coli; Kleb, Proteus, Salmonella, Shigella		
24	Vibrio, Pseudomonas		
25	Misc. Bacteria		
26	Spirochaetes		
27	Actinomycetes & Nocardia		

28	Rickettsia, Mycoplasma/Chlamydiae	
29	i leav of water, air, food, milk	
30	Bacteriology of water,  Introduction to parasitology, E. histolytica,, Free living amoeba	
30	, Giardia, trichomonas, Haemoflagellates	
31	Malaria	
32	Misc. Pathogenic Protozoa, Cryptosporidia,	
33	Cestodes	
34	Trematodes	
35	Intestinal Nematodes	
36	Tissue Nematodes	
37	Introduction to Mycology, Superficial mycosis, subcutaneous mycosis	
38	Systemic mycosis, Opportunistic mycosis, Candidiasis & Cryptococcosi	
39	General properties of viruses & Lab. Diagnosis of viral infections	
40	Viral immunity & Bacteriophage	
41	Pox viruses & DNA viruses	1
42	Respiratory Viruses, Picorna viruses	
43	Hepatitis viruses	
44	Arbo viruses	
45	Rhabdo viruses	
46	Slow and Oncogenic viruses	
47	Retroviruses	
48	G.I.T. Infection	
49	Respiratory tract infection [Upper, Lower]	
50	Urinary tract infection	
54	CNS infection	
52	Septicemia, PUO and lab diagnosis	
53	Wound infection & pyogenic infections	
54	Sexually transmitted diseases & lab diagnosis	
55	Role of lab. in cross infections & nosocomial infection, outbreaks and epidemics.	
56	Vehicle and vectors of communicable diseases and Zoonosis	
57	Preventive inoculations, immunomodulation immunotherapy	

#### MIMER MEDICAL COLLEGE Talegaon Dabhade

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### DEPARTMENT OF PATHOLOGY

-----/201 TO -----/201

Continuous Performance Assessment Card

Signature of Student

Signature of H.O.D.

Name:

Roll No.

Year:

## Continuous Performance assessment

Sr. No	Торіс		Gr	ade	Signature with Date	
	General Pathology	Α	В	С	D	
	General Pathology					
	Introduction I					
2	Introduction II & III					
3	cell Injury & Cellular adaptation					
4	Retrogressive Changes					
5	Necrosis & Gangrene					
6	Disorders of pigmentation & Calcification					•
7	Amyloidosis					
8	Acute Inflammation I Introduction Vascular & Cellular events					
9	Acute Inflammation II Chemical Mediaters					
10	Acute Inflammation III Morphological types & Fate					
11	Chronic Inflammation					
12	Wound healing & Repair					
13	Fracture Healing					
14	Tuberculosis I					
15	Tuberculosis II					
16	Leprosy					
17	Syphilis					
18	Acute Pyogenic Infections					
19	Amoebiasis, Enteric fever, malaria					
20	AIDS					
21	Fungal Infections					
22	Oedema					
23	Hyperanaemia					
24	Shock					
25	Thrombosis					
26	Embolism					
27	Infarction					
28	Neoplasia IDefinition, Nomenclature					
29	Neoplasia IIEpidemology				-	
30	Neoplasia IIICarcinogenesis			-	-	
31	Neoplasia IVMetastatis of tumors					

	Noorly					
32	Neoplasia V Grading staging & Lab diagnosis					
33	Genetics					
34	Genetics					
	Haematology					
35	Haematopoiesis					
36	Anaemia IGeneral Introduction					-
	Anaemia II					
37	Microcytic Hypochromic Anaemia					
38	Anaemias IIIMegaloblastic anaemias					
39	Haemolytic Anaemia I Sickle Cell anaemia					
40	Haemolytic Anaemias IIThalassemia					
41	Aplastic Anaemia					
42	Leukocytic Disorder					
43	Acute Leukemia					
44	Chronic Leukemia					
45	Haemorrhagic disorders – I					
46	Haemorrhagic disorders – II					
47	Blood banking – I					
48	Blood banking – II					
	Systemic Pathology					
49	Atherosclerosis					
50	Other diseases of blood vessals					
51	Ischaemic heart disease					
52	Inf. Endocarditis & pericarditis					
53	Rhumatic heart disease	+				
54	Congenital heart disease & Cardiomyopathy					
55	Pneumonias					
56	Lung abscess & Brochiactesis					
57	Chronic bronchitis & Emphysema					
58	Occupational lung diseases					
59	Tumours of lung & pleura			-		
60	Oral cavity, salivary gland	+-		-		
61	Oesophagus, stomach		-	+		
62	Ulcers of intestine	+	-	+-		
63	Inflammatory Bowel disease					
03	The state of the s	Page 2.0	f 3			

64	Tumours of upper GIT		,	,	
65	Tumours of lower GIT				
66	Liver introduction				
67	Hepatitis				
68	Cirrhosis - I				
69	Cirrhosis - II				
70	Liver tumors				
71					
72	Non neoplastic lesions of FGT				
73	Uterine & cervical tumours				
74	Ovarian Tumors				
75	Trophoblastic tumours				
76	Non neoplastic lesions of Breast				
77	Neoplastic lesions of Breast				
	Glomerulonephritis - I				
78	Glomerulonephritis - II				
79	Tubulointerstitial disease-				
80	PN, Obstructive uropathy				
81	Renal failure, Nephrotic, nephritic syndrome				
82	Hypertension				
83	Renal tumours	+			
84	Miscellaneous renal lesions	+			
85	Non-Neoplastic lesions of Lymphnode	+			
86	Neoplastic lesions of Lymphnode	+		-	
87	MGS - lesions of prostate & penis	+		-	
88	MGS - lesions of testies	+	+		
89	Non-Neoplastic lesions of bones				
90	Neoplastic lesions of bones				
91	Soft tissue tumors	+			
92	CNS - Nonneoplastic lesions				
93			_	+	
	CNS - Neoplastic lesions	+		-	
94	Skin	+	+-		
95	Endocrine				

## MIMER MEDICAL COLLEGE, Talegaon Dabhade DEPARTMENT OF FORENSIC MEDICINE & TOXICOLOGY

#### **IInd MBBS**

Name :	Photograph
Roll No:	

**Continues Performance Assessment Card** 

AUG. 20 - 20

## MIMER MEDICAL COLLEGE, Talegaon Dabhade DEPARTMENT OF FORENSIC MEDICINE & TOXICOLOGY

# Continues Performance Assessment Card AUG. 20 - 20 IInd MBBS

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		w	Μі	a	P	

Nam	e:	
Roll	No	:

C. p. A. III Term

Sr. No.	Topic	Grade				Signature
	Theory	Α	В	С	D	
1	Legal Procedures					
2	Courts and their powers					
3	Summon, Oath, and recording of evidences					
4	Dying declaration					
5	Death Changes after Death c					
6	Modified form of putrefaction					
7	Asphyxia, Classification					
	Pra	actica		•		
1	Certificates(sickness fitness)					
2	Death Certificate					
3	Determination of Age,					
4	Dactylography					
5	Age of foetus					
6	Study of Bones					
7	Skia grams					

#### C.P.A. :- IV Term

Sr. No		Topic		Gr	Signature		
110		Theory	Α	В	С	D	
1	S	Suffocation					
2		Prowning					
3	N	Mechanical Firearm Injury					
4	F	lead , Thermal Injury					
5	E	Electrocution					
6		Medicolegal Aspects of njury					
7	A	ge of Injury					
8	C	Causes of Death					
9	Ir	ndian Medical Council					
10	S	State Medical Council					
	P	Professional Misconduct					
11	P	Professional Negligence					
12	C	Consent					
13	Ir	nfanticide					
14	C	Cram Abortion					
15	N	I.T.P. ACT					
16	R	Rape					
Practical							
1	Ir	njury Report					
2		Veapon					
5	R	Regional injuries					
4	S	Sexual Assault (Victim)					
5	Р	otency Certificate					

#### C. p. A.:- V Term

Sr.No	Торіс	Grade			Signature			
	Theory	Α	В	С	D			
1	General Toxicology							
2	Mineral Acids ,Carbolic Acids, Arsenic ,Lead							
3	Phosphorus							
4	Delirrints							
5	Opium Barbiturate							
Practical								
1	Drunkenness'							
2	Strong Acid							
3	Carbolic Acids							
4	Phosphorus							
5	Metallic initants							
6	Vegetable irritants							
7	Orgomphorphorus I							
8	Cardiac Poisons							
9	Nux vomica							

Signature of Student:-

Signature of H.O.D.

## MIMER MEDICAL COLLEGE, TALEGAON TALEGAON DABHADE.

#### **DEPARTMENT OF COMMUNITY MEDICINE**

Student	
Photograph	

**Continuous Performance Assessment Card** 

Year:

Signature of Students:	Signature of H.O.D:				
Name:					
Roll No:					
Year:					

#### Syllabus of I/I

Sr. No			Grade		Signature	
1	Introduction to Community Medicine		A	В	С	
2.	2. Health Problem of India		A	В	С	
3. Health care delivery system in India- Urban & Rural			A	В	С	
4.	4. Concept of Health			В	С	
5. Spectrum & Health determinants I & II		A	В	С		
1.		Hospital Round ( OPD), Visit to IPD	A	В	С	
2.		OT, ICU Immunization clinic	A	В	С	
3.		Physiotherapy Dept. Blood Bank	A	В	С	
4.		Leprosy Rehab center( arogyadham) Hospital waste Management & Laundry Medical store CLL	А	В	С	

#### Syllabus of -II/I

Sr. No	Topic	Grade		Signature	
1	Introduction to water, water borne disease sanitary well	A	В	С	
2	Disinfection of water on a large scale	A	В	С	
3	Entomology, General Aspects Prevention & Control-I	A	В	С	
4.	Entomology, General Aspects Prevention & Control-II	A	В	С	
5.	Vector Control Methods/ Insecticides	A	В	С	
6.	Solid Waste Disposal	A	В	С	
7.	Excreta Disposal in Un-sewered area	A	В	С	
8	Excreta Disposal in sewered area	A	В	С	
9	Air Pollution	A	В	С	

Housing, Ventilation light & Noise	A	В	С	
Heat & Climate	A	В	С	
Radiation & Altitude & Pressure	A	В	С	
Food & Milk Sanitation	A	В	С	
Practical				
Horrock's test. OT test, well disinfection	A	В	С	
Large scale purification of water	A	В	С	
Assessment of portability of water & its treatment, domestic disinfection of water	A	В	С	
Visit to sewage Treatment Plant	A	В	С	
arthropods of Medical Importance-I ( Housefly, sandfly, fleas)	A	В	С	
	Radiation & Altitude & Pressure  Food & Milk Sanitation  Practical  Horrock's test. OT test, well disinfection  Large scale purification of water  Assessment of portability of water & its treatment, domestic disinfection of water  Visit to sewage Treatment Plant  arthropods of Medical Importance-I (	Heat & Climate A  Radiation & Altitude & Pressure A  Food & Milk Sanitation A  Practical  Horrock's test. OT test, well disinfection A  Large scale purification of water A  Assessment of portability of water & its treatment, domestic disinfection of water  Visit to sewage Treatment Plant A  arthropods of Medical Importance-I ( A	Heat & Climate A B  Radiation & Altitude & Pressure A B  Food & Milk Sanitation A B  Practical  Horrock's test. OT test, well disinfection A B  Large scale purification of water A B  Assessment of portability of water & its treatment, domestic disinfection of water  Visit to sewage Treatment Plant A B  arthropods of Medical Importance-I ( A B	Heat & Climate A B C  Radiation & Altitude & Pressure A B C  Food & Milk Sanitation A B C  Practical  Horrock's test. OT test, well disinfection A B C  Large scale purification of water A B C  Assessment of portability of water & its treatment, domestic disinfection of water  Visit to sewage Treatment Plant A B C  arthropods of Medical Importance-I (A B C

6.	Arthropods of Medical Importance-II ( Mosquitoes, Ticks, Mites, Louse. etc)	A	В	С	
7.	Insecticides	A	В	С	
8.	Milk sanitation	A	В	С	
9	Visit to swimming Pool	A	В	С	
10	Demonstration of control of physical environment, light, sound, temperature, ventilation	A	В	С	

### Syllabus of -II/II

#### **Epidemiology & Biostatistics**

Sr. No	Topic	Grad	е		Signature
1	Introduction to epidemiology( Concepts, scope and uses)	A	В	С	
2	Natural History of Disease-I ( General principals)	A	В	С	
3	Natural History of Disease- II ( Airborne, faeco-oral, vehicle borne)	A	В	С	
4	Five levels of prevention	A	В	С	
5	Descriptive and epidemiology (Time, Place, Person)	A	В	С	
6	Casual association- analytical Epidemiology	A	В	С	
7	Casual Association- Experimental Epidemioloy( Including study designs)	A	В	С	
8	Concepts and assessments of "Risks"	A	В	С	
9	Epidemiological Investigation- communicable and Non- Communicable disease	A	В	С	
10	Lifestyle & health	A	В	С	
11	Screening of Disease	A	В	С	

	Biostatistics Prac	tical			
1	Introduction- Types of data, Collection of Data	A	В	С	
2	Presentation of Data	A	В	С	
3	Measures of central tendency	A	В	С	
4	Measures of variability	A	В	С	
5	Normal distribution	A	В	С	
6	Sampling	A	В	С	
7	Standard Error of Mean and standard Error of Proportion	A	В	С	
8	Standard Error of difference between means & proportion	A	В	С	
9	Paired 't'	A	В	С	
10	Unpaired 't' test	A	В	С	
11	Chi-square test	A	В	С	
12	Clinical trial	A	В	С	

13	Common statistical fallacies	A	В	С	
14	Morbidity & Mortality statistics	A	В	С	
15	Screening test	A	В	С	

#### Syllabus of -III/I Communicable Disease Lecture

Sr. No	Topic	Grade			Signature
1	Epidemiology & control of Communicable disease	A	В	С	
2	Air borne infection: Chickenpox, Small pox	A	В	С	
3	Measles & Mumps	A	В	С	
4	Diphtheria & pertussis	A	В	С	
5	Influenza & ARI	A	В	С	
6	Tuberculosis	A	В	С	
7	Faeco-oral infection: Enteric Fever	A	В	С	
8	Cholera & diarrhoeal disease	A	В	С	

9	Poliomyelitis	A	В	С	
10	Bacillary and Amoebic Dysentery	A	В	С	
11	Soil transmitted, helminthic, infections	A	В	С	
12	Gunia warm infestations and national gunia warm eradication programme	A	В	С	
13	Hepatitis	A	В	С	
14	Tetanus	A	В	С	
15	Leprosy	A	В	С	
16	Arboviruses and yellow fever	A	В	С	
17	Meningitis, Encephalitis, Dengue fever	A	В	С	
18	STD & Its control	A	В	С	
19	AIDS	A	В	С	
20	Malaeria	A	В	С	
21	Filariasis	A	В	С	

22	Rabies and other viral Zoonotic Disease	A	В	С	
23	Plague and other viral bacterial Zoonotic	A	В	С	
24	Riclattcial Disease	A	В	С	
25	National Programme for communicable disease-I (T.B., Leprosy, AIDS, STD, Diarrheal disease)	A	В	С	
26	National programme- II( UIP, Malaria, Filariasis & ARI)	A	В	С	

#### **Community health**

Sr. No	Topic	Grad	е		Signature
1	Community development programme and Multis ectoral Development	A	В	С	
2	Comprehensive Medical care & Primary health care	A	В	С	
3	Maternal and child Health care- I ( Maternal Health)	A	В	С	
4	Maternal and child Health care- II ( Child Health- under fives)	A	В	С	
5	Maternal and child Health care- III (ICDS, Creche, Juvenile delinquencies etc))	A	В	С	
6	Family welfare programme- I ( demography. Fertility)	A	В	С	
7	Family welfare programme- II ( Population control, birth control, current strategy)	A	В	С	
8	Nutritional Health	A	В	С	
9	Protein Energy Malnutrition	A	В	С	
10	Comprehensive Nutritional assessment and Nutritional education	A	В	С	
11	National nutritional Programme – I ( Nutrition Anaemia, vit-A)	A	В	С	
12	National nutritional Programme – II( Endemic disease, Food toxins, Adulteration)	A	В	С	

13	Rehabilitation	A	В	С	
14	Vital statistics( collection including MIS and Mortality statistics)	A	В	С	
15	Vital statistics ( Morbidity, Fertility)	A	В	С	
16	Health Education	A	В	С	
17	Genetics	A	В	С	
18	Diabetes	A	В	С	
19	Cardiovascular disease	A	В	С	
20	Cancer	A	В	С	
21	Occupational Health-I	A	В	С	
22	Occupational Health-II	A	В	С	
23	Problems of adolescence including drug dependence	A	В	С	
24	Geriatrics	A	В	С	
25	International & Voluntary Health agency	A	В	С	

#### **Community health**

Sr. No	Topic	Grad	е		Signature
1	Community development programme and Multis ectoral Development	A	В	С	
2	Comprehensive Medical care & Primary health care	A	В	С	
3	Maternal and child Health care- I ( Maternal Health)	A	В	С	
4	Maternal and child Health care- II ( Child Health- under fives)	A	В	С	
5	Maternal and child Health care- III (ICDS, Creche, Juvenile delinquencies etc))	A	В	С	
6	Family welfare programme- I ( demography. Fertility)	A	В	С	
7	Family welfare programme- II ( Population control, birth control, current strategy)	A	В	С	
8	Nutritional Health	А	В	С	
9	Protein Energy Malnutrition	A	В	С	
10	Comprehensive Nutritional assessment and Nutritional education	A	В	С	
11	National nutritional Programme – I ( Nutrition Anaemia, vit-A)	A	В	С	
12	National nutritional Programme – II( Endemic disease, Food toxins, Adulteration)	A	В	С	

# MIMER MEDICAL COLLEGE Talegaon Dabhade

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### DEPARTMENT OF ANATOMY

#### BATCH 2020-2021

Continuous Performance Assessment Card

Signature of Student

Signature of H.O.D.

Name: Roll No.

# Continuous performance assessment

Sr. No	Topic		Gra	Signature with Date		
		A	В	С	D	
1	Anatomy of EAR					
2	Physiology of ear and hearing					
3	Methods of Examination of Ear					
4	Diseases of Buccal Cavity					
5	Diseases of External Ear					
6	ASOM					
7	CSOM (TT)					
8	CSOM AA					
9	Deafness					
10	Facial Nerve					
11	Hearing Loss					
12	DNS					
13	Epistaxix					
14	Nasal Polyp					
15	Chronic Tonsilitis					
16	Deep Space Infection					

		1		
17	Striodor & Tracheostomy			
18	Dysphegia			
19	Tonsilitis			
20	Pharynx			
21	Maligant Lesions of Larynx			
22	Vocal Cord Paralysis			
23	Menier's Diseases			
24	Otosclerosis			
25	Otitis Media			
26	Allergic Rhinitis			
27	Sinusitis Class			
28	Anatomy of Nose			
29	Benign Lesions of Larynx			
30	Chronic Sinusitis			

## MIMER MEDICAL COLLEGE Talegaon Dabhade

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#### DEPARTMENT OF OPHTHALMOLOGY

Continuous Performance Assessment Card

Signature of Student

Signature of H.O.D.

Name: Roll No.

Batch: 2020-21

# Continuous performance assessment

Sr. No	Topic	Grade		Teacher Name	Date	Sign		
		A	В	С	D			
01	Anatomy and Physiology of Eye					Dr. Sambarey	06.01.2020	
02	Refractive Error-1					Dr. Bhamini	09.01.2020	
03	Eye Lids-1					Dr. Sambarey	13.01.2020	
04	Refractive Error-2					Dr. Bhamini	16.01.2020	
05	Eye Lids-2					Dr. Sambarey	20.01.2020	
06	Refractive Error-3					Dr. Bhamini	23.01.2020	
07	Eye Lids-3					Dr. Sambarey	27.01.2020	
08	Lacrimal Appratus-1					Dr.Vibhavari	30.01.2020	
09	Uvea-I					Dr. Smita	03.02.2020	
10	Lacrimal Apparatus-II					Dr. Amol	06.02.2020	
11	Cornea-I					Dr. Smita	10.02.2020	
12	Uvea-II					Dr. Sambarey	13.02.2020	
13	Cornea-II					Dr. Smita	17.02.2020	
14	Uvea-III					Dr. Sambarey	20.02.2020	
15	Cornea-III					Dr. Smita	24.02.2020	
16	Orbit-I					Dr. Vibhavari	27.02.2020	
17	Cornea-IV					Dr. Smita	02.03.2020	
18	Orbit-II					Dr. Vibhavari	05.03.2020	
19	Cornea-V					Dr. Smita	09.03.2020	
20	Lens-I					Dr. Amol	12.03.2020	
21	Conjunctiva-I					Dr.R.P. Gupta	16.03.2020	
22	Lens-II					Dr. Amol	19.03.2020	
23	Lens-III					Dr. Amol	26.03.2020	
24	Conjunctiva-II					Dr.R.P. Gupta	30.03.2020	
25	Glacucoma-I					Dr. Smita	16.04.2020	
26	Glacucoma-II					Dr. Smita	20.04.2020	
27	Glacucoma-III					Dr. Smita	23.04.2020	
28	Glacucoma-IV					Dr. Smita	27.04.2020	
29	Conjunctiva					Dr. Bhamini	30.04.2020	
30	Glaucoma-V					Dr. Smita	04.05.2020	
31	Gonjunctiva-II					BSK	07.05.2020	
32	Glaucoma-VI					Dr. Smita	11.05.2020	
33	Ocular Trauma-I					Dr. Vibhavari	18.05.2020	

Sr.	Topic	Grade		Teacher	Date	Sign		
No						Name		
		A	В	C	D			
34	Retina-I					Dr. Amol	21.05.2020	
35	Ocular Trauma-II					Dr. Vibhavari	25.05.2020	
36	Retina -II					Dr. Amol	28.05.2020	
37	Hypertensive					Dr. Amol	01.06.2020	
	Retinopathy CRVO and							
	CRAO							
38	ROP-Retina Blastoma					Dr. Amol	15.06.2020	
39	Squint-1					Dr. Smita	15.06.2020	
40	Squint-3					Dr. Smita	18.06.2020	
41	Squint-III					Dr. Smita	29.06.2020	
42	Squint-IV					Dr. Smita	02.07.2020	
43	Conjunctiva					Dr. Smita	06.07.202	
44	Optic Nerve					Dr. Amol	09.07.2020	
45	Conjunctiva					Dr. Vibhavari	13.07.2020	
46	Optic Nerve					Dr. Amol	16.07.2020	
47	Diseases of sclera					Dr. Vibhavari	20.07.2020	
48	Cataract Surgery					Dr. Amol	23.07.2020	
49	Cataract Surgery					Dr. Vibhavari	27.07.2020	
50	Ocular Examination					Dr. Vibhavari	30.07.2020	
	(Clinic Topic)							
51	Ocular Examination					Dr. Smita	03.08.2020	
	(Clinic Topic)							
52	Ocular Examination					Dr. Vibhavari	06.08.2020	
	(Clinic Topic							
53	Instrument					Dr. Sayali	06.08.2020	
54	Pterygium (Lecture)					Dr. Smita	07.09.2020	
55	Tonometery (Lecture)					Dr. Vibhavari	10.09.2020	
56	Ophthalmoscopy (Tut)					Dr. Pankaj	10.09.2020	
						Gaikwad		
57	Enucleation &					Dr. Avdhoot	14.09.2020	
	Evisceration ( Lecture)					Wagle		
58	Retinoscopy (Tut)					Dr. Amol	17.09.2020	

 $\label{lem:co-curious} Part-II \\ Co-curricular activites like-seminar/quiz/Gr.\ Discussion/problem\ based\ learning/any\ other$ 

Sr. No.	Date	Activity	Topic	Name of the Participants	Assessment of Participants	
				_		

## MIMER MEDICAL COLLEGE

**TALEGAON DABHADE** 

### **DEPARTMENT OF OBSTETRICS & GYNAECOLOGY**

**BATCH: 2020-2021** 

Photograph

#### CONTINUOUS PERFORMANCE ASSESSMENT CARD

**Signature of Student** 

Signature of H. O. D.

Name:

**Roll No:** 

## **Continuous performance assessment (2020-2021)**

### **Department of Obstetrics & Gynaecology**

## Part-I Continuous performance assessment

Sr.	Topic		Gı	rade		Sign.	Name of the	Date
No		A	В	C	D		Teacher	
1	Development of genital tract, congenital anomalies and clinical significance,							
2	Chromosomal abnormalities and intersex.							
3	Physiology of Menstruation, Menstrual abnormalities -Dysmenorrhea.							
4	Amenorrhoea							
5	Abnormal Uterine Bleeding, DUB							
6	Puberty and its disorders, Adolescent Gynaecological problems							
7	Menopause & H R T.							
8	Infections of genital tract, Leucorrhoea, Pruritus vulvae, Vaginitis,							
9	Cervicitis & erosion							
10	PID							
11	Genital TB							
12	Benign & Malignant tumors of the genital tract.							
13	Leiomyoma /Fibroid							
14	CIN							
15	Carcinoma cervix I							
16	Carcinoma cervix II							
17	Carcinoma endometrium							
18	Chorio carcinoma							
19	Ovarian tumor Benign							
20	Ovarian tumor Malignant							
21	Ovarian tumor management							
22	Benign & Malignant Lesions of Vulva							
23	Radiotherapy & Chemotherapy in							
	Gynaecology							
24	Other gynaecological disorders -							
	Adenomyosis, Endometriosis							

25	Genital Prolapse	
26	Genital Prolapse	
27	Genital Tract displacement,	
28	Urinary disorders in Gynaecology, ,	
29	Perineal tears,	
30	Genital Fistulae	
31	RVF & VVF.	

## Part-II

## **Continuous performance assessment**

Sr.	Topic		Gra	de		Sign.	Name of the	Date
No		A	В	C	D		Teacher	
1	Abortion – Definition, Classification,							
1	Atiology.							
	Thratened & Inevitable Abortion							
2	Abortion – Incomplete & Complete							
	Abortion.							
	Missed Abortion, Septic Abortion,							
	Habitual Abortion							
3	Ectopic Pregnancy							
4	Vesicular mole & Gestational							
	Trophoblastic Disease.							
5	Hyperemesis Gravidorum.							
6	A.P.H Definition, Classification.							
	Placenta Previa							
7	A.P.H. – Abruotio Placentae.							
8	Multiple Pregnancy							
9	Anaemia in Pregnancy							
10	Heart Disease in Pregnancy							
11	Pregnancy Induced Hypertension							
12	Eclampsia							
13	Diabetes Mellitus in Pregnancy							
14	Jaundice in Pregnancy							
15	Respiratory Diseases in Pregnancy							
16	U.T.I. in Pregnancy							
17	S.T.D.& H.I.V. in Pregnancy							
18	Maleria & TORCH in Pregnancy							
19	Gynaecological & Surgical conditions in							
	Pregnancy							
20	Preterm Labour.							
21	Post term Pregnancy							
22	I.U.G.R.							
23	Intrauterine Foetal Death							
24	Rh Incompatibility.							
			I	1	11			

25	Occipito- Posterior Position.			
26	Breech Presentation			
27	Transverse Lie.			
28	Face & Brow Presentation			
29	Compound Presentation & Cord			
	Prolapse.			
30	Cephalopelvic Dysproportion			
31	Abnormal Uterine Action			
32	Obstructed Labour & Uterine Rupture.			
33	Obstructed Labour & Uterine Rupture.			
34	IIIrd Stage Complications- Postpartum			
	Haemorrhage			
35	IIIrd Stage Complications- Uterine			
	Inversion,			
	Retained Placenta, Amniotic Fluid			
	Embolism.			
36	Abnormal Puerperium			
37	Antepartum & Intrapartum Foetal			
	Survelillance			
38	Birth Injuries			
39	PNDT			
40	Previous LSCS			
41	Maternal & Perinatal mortality and			
	RCH programmes			
42	Anencephaly & Hydrocephalus and			
	other			
	Congenital Anomalies of fetus.			

# MIMER MEDICAL COLLEGE TALEGAON DABHADE

#### **DEPARTMENT OF MEDICINE**

**BATCH: 2020-2021** 

Photograph

#### CONTINUOUS PERFORMANCE ASSESSMENT CARD

**Signature of Student** 

Signature of H. O. D.

Name:

**Roll No:** 

## **Continuous performance assessment (2020-2021)**

## **Department of Medicine**

Sr. No.	Topic	Grade	Signature with date
A	<b>Introduction to Medicine:</b>		
1	Concept & objectives of history taking.		
	Diagnosis, Provisional Diagnosis, Differential		
	diagnosis.		
2	Symptomatology of Cardiovascular Diseases.		
3	Symptomatology of Respiratory diseases.		
4	Symptomatology in Nervous system.		
5	Symptomatology in Gastrointestinal and Hepatobiliary diseases. Lect.		
6	Approach towards a patient with Fever / Oedema.		
7	Approach towards a patient with anaemia / jaundice.		
8	Approach towards a patient with Lymphadenopathy.		
9	Investigations ( Non- Invasive )		
10	Investigations (Invasive )		
В	INFECTIOUS DISEASES		
1	Introduction.		
2	Viral hepatitis.		
3	Tetanus/ Diphtheria		
4	Malaria		
5	Rabies		
6	Typhoid fever		
7	Gastroenteritis		
8	Plague & Dengue		
9	HIV & AIDS		
C	CARDIOVASCULAR SYSTEM		
1	Introduction. CARDIOVASCULAR SYSTEM		
2	Methods of evaluation		
3	Arrhythmias		
4	Cardiac arrest		
5	C.C.F.		
6	C.H.D.		
7	Rheumatic fever		

8	Presentation and haemodynamics of various Valvular	
	lesions including investigations, Diagnosis, D/D	
	treatment & Prevention.	
9	Infective endocarditis	
10	C.A.D, (Coronary artery disease)	
11	Pericardial diseases and cardiomyopathy	
12	Hypertension	
D	GASTROENTEROLOGY, HEPATOBILIARY	
	SYSTEM & PANCREAS:	
1	Oesophagus	
2	Oesophagus	
3	Peptic Ulcer	
4	Peptic Ulcer	
5	Small and large intestine diseases	
6	Small and large intestine diseases	
7	Ulcerative colitis & Crohn"s disease	
8	Liver. Introduction LFT & their interpretation	
9	Hepatitis - Acute & Chronic	
10	Hepatitis - Acute & Chronic	
11	Cirrhosis of liver	
12	Cirrhosis of liver	
13	Gall bladder diseases	
14	Pancreas Functions Investigations	
15	Pancreas Functions Investigations	
16	Misc. & Revision.	
17	Misc. & Revision.	
<u>E</u>	Collegen Vascular Disorder –	
1	Allergy	
2	Collagen Disease	
3	Rheumatoid Arthritis	
4	Sero negative Arthritis	
5	Revision HIV, Alcohol Related Disease	
F	Geriatric Medicine	
1	Approach to older patient	
2	Medical assessment of elderly patient	
3	Preventive Medicine in Geriatric age group	
4	Common problems in Geriatric age group people	
G	Applied Anatomy and physiology of R.S.	
	II	
<u> </u>	I.	<u>I</u>

1	P.F.T. ( Pulmonary Function Testing)		
2	Resp. Infection- Pneumonias		
3	COPD - Chronic bronchitis and emphysema	1	
	Bronchiectasis and lung abscess		
4	COPD - Chronic bronchitis and emphysema		
'	Bronchiectasis and lung abscess		
5	COPD - Chronic bronchitis and emphysema		
	Bronchiectasis and lung abscess		
6	Bronchial asthma		
7	Malignancies		
8	Mediastinum and its disorders.		
9	Pleural disease - Emphasis on pneumothorax - Pleural		
	effusion.		
10	Pleural disease - Emphasis on pneumothorax- Pleural		
	effusion.		
11	Occupational lung disease. Its concept and short review		
12	Fungal & Parasitic diseases		
13	Respiratory emergencies & Introduction to mechanical		
	ventilators		
H	TUBERCULOSIS		
1	History and introduction		
2	Pathogenesis and pathology		
3	Pathogenesis and pathology Role of host related factors		
2 3 4	Pathogenesis and pathology Role of host related factors Microbiology of AFB		
3	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its		
2 3 4 5	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations		
2 3 4	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of		
2 3 4 5	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment		
2 3 4 5	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/		
2 3 4 5 6	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test		
2 3 4 5	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion		
2 3 4 5 6	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test		
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2 3 4 5 6 7 8	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion Empyema, others		
2 3 4 5 6 7 8	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion Empyema, others  NEUROLOGY:		
2 3 4 5 6 7 8	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion Empyema, others  NEUROLOGY: Introduction Applied anatomy & physiology Investigations CVD (Cerebro Vasular Disease)		
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2 3 4 5 6 7 8 I 1 2 3	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion Empyema, others  NEUROLOGY: Introduction Applied anatomy & physiology Investigations CVD (Cerebro Vasular Disease)		
2 3 4 5 6 7 8 I 1 2 3 4	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion Empyema, others  NEUROLOGY: Introduction Applied anatomy & physiology Investigations CVD ( Cerebro Vasular Disease) CVD ( Cerebro Vasular Disease)		
2 3 4 5 6 7 8 1 1 2 3 4 5	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion Empyema, others  NEUROLOGY: Introduction Applied anatomy & physiology Investigations CVD ( Cerebro Vasular Disease) CVD ( Cerebro Vasular Disease) S.O.L. (Space Occupying Lesions) Encephalitis and meningitis		
2 3 4 5 6 7 8 I 1 2 3 4 5 6	Pathogenesis and pathology Role of host related factors Microbiology of AFB Clinical features of pulmonary tuberculosis and its investigations Anti – Tubercular drugs Pharmacology & Schedules of treatment Resistant tuberculosis DOTS Prophylaxis - Drugs BCG/Tuberculin test Extra - pulmonary tuberculosis, Plural Effusion Empyema, others  NEUROLOGY: Introduction Applied anatomy & physiology Investigations CVD (Cerebro Vasular Disease) CVD (Cerebro Vasular Disease) S.O.L. (Space Occupying Lesions)		

9	Parkinsonism	
10	Paripheral neuropathy	
11	Muscle disorders in brief	
12	Spinal cord disorders	
13	Spinal cord disorders	
14	CSF	
- 1		
J	HEMATOLOGY:	
1	Introduction,	
2	Anemias Introduction Classification	
3	Microcytic hypochromic	
4	Macrocytic anaemias	
5	Anaemias (continued) Brief of Chronic infections and	
	inflammation Hemolytic anaemias	
6	Hemoglobinopathies	
7	Hypoplastic / Aplastic anemia	
8	Introduction to WBCs. Agranulocytosis	
9	Management of leukemia	
10	Lymphomas	
	Hodgkin"s disease / NHL (Non-Hodgkin"s lymphoma)	
11	Approach to a patient with bleeding disorders	
12	Blood groups & Blood Transfusion & Component	
	Therapy	
13	Revision	
K	Genetics	
1	Genetics Introduction	
2	Common genetic disorders	
3	Application of Genetic Engineering in Medicine	
L	ENDOCRINOLOGY:	
1	Introduction - Hormones Concept Types Action	
2	Pituitary Anatomy Regulation Disorders of Ant. Pituitary	
	A.G. Syndrome Acromegaly	
3	Pituitary Anatomy Regulation Disorders of Ant. Pituitary	
	A.G. Syndrome Acromegaly	
4	Thyroid	
5	Thyroid	
6	Adrenal gland	
7	Adrenal gland	
8	Vit. D. Metabolism.	
9	Diabetes Mellitus	
10	Diabetes Mellitus	
11	FSH < H. Oestrogens Progesterone"s	

12		
	Multiple endocrine-syndrome and paraneoplastic	
	syndrome Overview. Diabetes insipidus.	
M	NEPHROLOGY:	
1	Anatomy & Physiology	
2	R.F.T. (Renal Function Tests)	
3	Acute Glomerulonephropathy	
4	Chronic Glomerulonephropathy	
5	Infections of urinary system.	
6	Nephrotic syndrome	
7	Approach towards common problem Proteinuria ii.	
	Hematuria iii. Renal colics	
8	Dialysis - Diet - Drugs. In renal failure	
9	Acute & Chronic renal failure	
N	NUTRITION:	
1	Concepts of carbohydrate, proteins, fats, vitamins and	
	minerals.	
2	Vitamin deficiency state Scurvy / Beribery / Pellegra /	
	Vit.A	
3	Vitamin deficiency state	
4	Obesity	
	Diagnosis"Complications and management	
5	Asthenia	

## MIMER MEDICAL COLLEGE Talegaon Dabhade

Photograph	

#### DEPARTMENT OF PAEDIATRICS

2020 To 2021

Continuous Performance Assessment Card

Signature of Student

Signature of H.O.D.

Name: Roll No.

## **Continuous Performance Assessment**

		Conda Tarahan Data Tarah						T
Sr.	Name of Topic		G	rade	)	Teachers	Date	Teachers
No		<u> </u>	_		_	Name		Sign
		Α	В	С	D			
	Growth and Development							
1								
	Growth & development with charts							
2	Failure to Thrive							
3	PEM 1 - Genesis							
	- Clinical features							
	Classification (grading)							
4	PEM 2 – Do's & Don'ts in PEM							
	management							
	SAM Management							
5	Adolescence Problem							
6	Normal New Born & thermo							
7	Vit.D, C & other trace elements deficiency							
8	Vit – A & other trace element Deficiency							
9	Diphtheria , Pertussis and Tetanus							
	Whooping Cough in Young Infants							
	Immunology of Pertussis							
10	Acute Flaccid Paralysis, GBS &							
4.4	Poliomyelitis							
11	Breast Feeding, Weaning and Artificial							
	Feeding							
12	Vitamin D, Rickets, Scurvy							
13	Tuberculosis							
	RNTCP Vs IAP treatment							
14	Malaria – Respiratory manifestations							
	Sepsis & malaria differentiation,							
	Malarial Hepatitis, Role of CBC							
15	Treatment, Cerebral malaria							
15	Child with Fever– D/Ds, Dengue Fever,							
16	Leptospirosis, Chickengunya, H1N1, Sepsis							
	HIV and AIDS							
17	Acute diarrhea & Chronic diarrhea including							
4.5	cholera and there Management							
18	Abdominal Pain in Children							
19	Hepatitis in Children							
20	Portal Hypertension							
21	Chronic Liver Disease and ICCI							
				<u> </u>	<u> </u>		L	

Sr. No	Name of Topic		Grade				Grade			achers me	Date	Teachers Sign
		Α	В	С	D							
1	Prematurity & IUGR											
2	Neonatal Sepsis											
3	Pain in abd											
4	Neonatal Jaundice											
5	RDS in neonate											
6	DPT											
7	Neonatal Asphyxia & cannulation in neonate											
8	Bronchial Asthma											
9	Acute Gastroenteritis											
10	Thalassemia											
11	Approach to Anemia & Nutritional anemia											
12	Seminar Thalassemia											
13	Bleeding disorder & coagulation disorders											
14	Paediatric surgical Problems											
15	Leukemia Lymphoma											
16	Nephrotic Syndrome											
17	Haematuria / AGN											
18	UTI in children											
19	Nephrotic Syndrom											
20	Neonatal Jaundice											
21	Hypertension in children											
22	Common exanthematas illness MMRV											
23	Chromosomal disorder											
24	DPT											
25	CCHD with Cyanotic spells											
26	Pediatric surgical problems											
27	ACHD											
28	Acute Gastroenteritis											
29	CCF in Children											
30	Pain in abd											
31	Pediatric HIV											
32	IMNCI											
33	GBS and AFP											
34	Leukemia Lymphoma											
35	Cerebral Palsy											
36	DMD & other neuromuscular disorders											
37	Meningitis- in children Bacterial Viral, TB											
38	Mental Retardation											
39	Neural tube defects, Hydrocephalus											
40	Adolescence and disorders of puberty											

# MIMER MEDICAL COLLEGE & B.S.T.R. Hospital TALEGAON DABHADE

#### DEPARTMENT OF GENERAL SURGERY

2020	TO 2021		

#### CONTINOUS PERFORMANCE ASSESSMENT CARD

Signature of Student

Name:

Roll No.

Year:

Signature of H.O.D.

Department of Orthopedics

Signature of H.O.D.

Department of Surgery

## **Continuous performance assessment (2020-2021)**

## **Department of General Surgery**

<u>Sr.</u>	Tonio		<u><b>G</b></u> 1	rade		<u>Date</u>	Teacher Signature
<u>No</u>	<u>Topic</u>	A	В	С	D		
1	Introduction to Surgery						
2	Body response to injury						
3	Wound and wound healing						
4	Acute infection, Boils; Carbuncle etc						
5	Chronic infections						
6	Tetanus and Gas gangrene						
7	Neoplasm General Consideration						
8	Surgical Nutrition						
9	Pre operative fu'ldPost operative Care						
10	Sepsis and Anti Spesis						
11	Burns						
12	Shock 1						
13	Fluid and Electrolyte Balance						
14	Monitoring of surgical Patients						
15	Hemostasis and Blood transfusion.						
	III MBBS – (MINOR) Part I						
1	Missiles and their effects & blast injuries						
2	Poly trauma						
3	Management of war wounds ,and surgical diseases skin conditions						
4	Minimally invasive surgery						

5	Principal of radiotherapy			
6	OT techniques.			
7	Aids in surgery			
8	foot including diabetic foot			
9	Hand infection			
10	Vascular surgery			
11	Arterlal disorders acute arterial obstruction diagnosis and initial management athreosclerosis and crush; types of gangrene; diagnosis of chronic arterial insufficiency with emphasis on burger's disease, injuries.			
12	Investigations in cases of arterial obstruction. Amputations;			
13	Vascular injuries: basic principles of management.			
14	Surgically correctable hypertension			
15	Venous disorders: acute arterial obstruction diagnosis and initial management; types of gangrene; diagnosis of chronic arterial insufficiency with emphasis on burger's disease, athreosclerosis and crush			
16	injuries			
17	Venous disorders :investigations in cases of arterial obstruction. Amputations			
18	Venous disorders :- vascular injuries: basic principles of management			
19	Venous disorders:- surgically correctable hypertension			
20	Lymphatics and lymph nodes.			
21	Oral cavity :cleft lip and palate; leukoplakia; retention cyst; ulcers of the tongue.			
22	Oral cavity: features, diagnosis and basic principles of management of carcinoma lip, buccal mucosa and tongue, prevention and staging of oral carcinomas.			
23	Salivary glands:. Acute s.ialoadenitis, neoplasm: diagnosis and principles of treatment			
24	Salivary glands: salivary fistulae.			
25	Neck: branchial cyst; cystic hygroma.			
26	Neck: cervical lymphadenilis: nonspecific and			

	specific		
27	Neck: tuberculosis of lymphnodes, secondaries of neck.		
28	Neck: thoracic outlet syndrome: diagnosis.		
29	Thyroid gland - i) thyroid: surgical anatomy, physiology, investigations of thyroid disorders; types, clinical features, diagnosis and principles of management of goitre, thyrotoxicosis and malignancy, thyroglossal cyst and fistula.		
30	Thyroid gland :- thyroglossal cyst and fistula.		
31	Thyroid gland ii) thyroiditis, hypothyroidism.		
32	Parathyroid and adrenal glands: .clinical features and diagnosis of hyperparathyroidism,		
33	Parathyroid and adrenal glands:.turnours of the adrenal gland		
34	Parathyroid and adrenal glands: .adrenal hyperfunctionl hypofunction		
35	adrenal hyperfunctionl hypofunction		
36	C. diseases of thymus		
37	Neuro-surgery: 1. Head injury		
38	Neuro-surgery: 2. Intracranial tumours & other icsol		
39	Neuro-surgery: 3. Congenital anomalies of brain & spinal cord		
40	Neuro-surgery: 4. Surgery of peripheral nerves & diseases		
41	Surgery of breast: 1. Surgical anatomy; nipple discharge; acute mastitis, breast abscess; mammary dysplasia; gynaecomastia; fibroadenomas.		
42	Surgery of breast: 2. Assessment and investigations of a breast lump.		
43	Surgery of breast: 3. Cancer breast: diagnosis, staging, principles of management		
44	Plastic & reconstructive surgery:- i.management of burns		
45	Plastic & reconstructive surgery:- 2.skin grafting including flaps		
46	Plastic & reconstructive surgery:- 3.injuries of the hand		
47	Plastic & reconstructive surgery:-4.infections of the hand		

	III MBBS (MINOR ) Part II		
1	Cardio Thoracic surgery, Injuries of the chest		
2	Turnours of the lung & bronchial tree,congenital heart disease		
3	Acquired heart disease, Surgery of ischaernic heart disease		
4	Diseases of pericardium, Cardiac arrest		
5	Peadiatric Surgery- Oesophagealatresia and Intestinal atresia, Anorectalmalfonnations		
6	Constipation in children: Hirschsprung's disease, Acquired megacolon, Congenital diaphragmatic hernia, Extrophy, Epispadias complex and hypospadias		
7	Spinal diastrophism and Hydrocephalus, Urinary tract infections in children- Vesicoureteral reflux, posterior urethral Valves, Vesico Ureteral Junction obstruction/Duplex ureter, Obstructive uropathy in Children : Hydronephrosis, Hydroureteronephrosis		
8	Testicular Maldescent, Umbilical Hernia, Exompholos: Majodminor, Wilm's Tumours: Neuroblastoma, Ganglionioneuloblestoma, Ganglioneuroma, Endo-dennal Sinus Tumours.		
9	Perritoneum, Omentum, Mesentery and Retroperitoneal space		
10	Oesophagus, Cancer oesophagus: Principles of management.		
11	Stomach & Duodenum		
12	Dysphagia: Causes, investigations and principles of management.		
13	Stomach & Duodenum		
14	Small Intestines		
15	Small Intestines-Diagnosis and principles of treatment of, tuberculosis of intestine,		
16	Surgical consideration in Amoebiasis & Enteric fever, Filariasis, Dracontiasis & Ascariasis		
17	Hydatid disease, Leprosy, Madura foot, Tropical ulcer Actionomycosis		
18	hepatobillary pancreatic Surgery + Spleen		

19	Gall Bladder & bileducts		
20	Pancreas- Acute pancreatitis: Clinical features,		
0.4	diagnosis; complications and management Pancreas - Chronicpancreatitis,		
21	pancreatictumours.		
22	Portal Hypertation		
	III MBBS (MAJOR)		
1	Diagnosis and principles of management of phimosis paraphimosis		
2	Principles of management of urethral injuries		
3	Urethral stricture		
4	Carcinoma penis		
5	testies and scrotum		
6	carcinoma penis		
7	Diagnosis and perinciples of treatment of undercended testis; torsion testis		
8	Hydrocele, epididymo-orchitis		
9	Testicular Tumours		
10	Genito-Urinary Systen		
11	Symptoms and investigations of the urinery tract		
12	Kidney and Ureterer		
13	Congenital anomalies of kidny and ureter		
14	Hydronephrosis, pyonephrosis, perinephric abscess		
15	Renal tuberculosis		
16	Renal Tuerculosis		
17	Abdominal Wall		
18	Large Intestines - Ulcerative colitis		
19	Large intestines- premalignant conditions of large bowel carcinoma colon		
20	Large intestines - lower gastrointestional Haemorrhage		
21	Appendicuclar Lump and abscess		
22	Rectum- Management of colostomy		
23	Rectum - Prolapse of rectum		
24	anal canal - Dignosis and reference of anorectal		

	anomalies		
25	Anal Carcinoma		
26	Acute Ahrlomen		
27	Liver- clinical fitures, diagnosis & principles and management		
28	amoebic liv er abscess		
29	liver trauma		
30	Surgical Anatomy Primery and secondary neoplasms of liver		
31	spleen		
32	Splenomegaly; causes, investigations and indeations for splenectomy		
33	Splenic injury		
34	Gall Bladder and bile ducts		
35	Anatomy physiology and investigation of biliary tree		
36	Clinical Features, diagnosis, complications and prinicples of mangement of cholelithiasis and cholecytitis		
37	Obstrutive Jaundice		
38	Choledochal cyst		
39	Acute Pancreatitis, clinical features diagnosis		
40	Carcunoma of gall bladder		
41	complication and management of acute pancreatitis		
42	Portal Hypertension		
43	Hepatobillary pancreatic surgery+spleen		
44	Hernia		
45	Hernia - Indroduction		
46	Hernia Clinical features and diagnosis		
47	Hernia - conplications		
48	Umibilical Hernia		
49	Inguinal Hernia		
50	Epigaastic Hernia		
51	Femoral Hernia		
52	Vascular Surgery		

53	Neurosurgery			
54	Neurosurgery			
55	Breast Surgery			
56	Paediatric Surgery			
57	urinary tract			
58	Wilm's tumours			
59	tropical Surgery			
60	General Surgery			
61	Acute Abdomen			
62	Intestinal Obstruction			
63	Large intestines - Parasitic infestations			
64	Apendix			
65	Anal Canal- Surgical Anatomy clinical features and management of fissure			
66	Anal canal - Perianal and ischiorectal abscess and haemorrhoids			
67	Rectum - Management of carcinoma rectum			
1	Rivision			
2	Rivision			
3	Rivision			
4	Rivision			
5	Rivision			
6	Rivision			
7	Rivision			
8	Rivision			
9	Rivision			
10	Rivision			

## MIMER MEDICAL COLLEGE Talegaon Dabhade

Photo	

#### DEPARTMENT OF E.N.T.

/	TO/
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Continuous Performance Assessment Card

Signature of Student

Name:

Roll No.

Year: 2020-2021

Signature of H.O.D.

#### Continuous performance assessment

Sr. No	Topic	Grade				Signature with Date
		A	В	С	D	
1	Anatomy of EAR					
2	Physiology of ear and hearing					
3	Methods of Examination of Ear					
4	Diseases of Buccal Cavity					
5	Diseases of External Ear					

#### **AETCOM LINK**

https://www.nmc.org.in/wp-content/uploads/2020/01/AETCOM\_book.pdf

## 3.1.3 (QnM) Number of research projects/clinical trials funded by government, industries and non-governmental agencies during the last five years

Year	Name of the Principal Investigator	Title of the project	Name of the Funding agency	Type (Government/N on- Government)	Department of Principal Investigator	Year of Award
2020-21	Dr. Shashwat Banerjee	Selfpropelled magnetically controlled nanorockets for transportation and pH triggered drug delivery	Department of Biotechnology (DBT)	Government	Central Research Laboratory	2020-21
	Dr Sushma Sharma	i Doctor: An intelligent Diagnosis and drug dispensing platform	BIRAC	Government	OBGY	2020-21
	Manasi Joshi	A Cross -sectional study of Spirometric evaluation of lung functions and respiratory symptoms in rice mill workers	ICMR	Government	Physiology	2020-21
	Pooja Shinde	Awareness among first time expectant fathers regarding contraception	ICMR	Government	OBGY	2020-21
	Atharva Nimbane	Study of emotional Intelligence among undergraduate medical students in a college in Maharashtra	ICMR	Government	PSM	2020-21
	Ashmitha Sharma	Evaluation of Knowledge, Attitude and Practices of Second Year MBBS students about use of Over the counter drugs	ICMR	Government	Pharmacology	2020-21
	Suditi Wasnik	Prevalence of Thrombocytosis in an Inpatient Setting of a tertiary hospital and study of associated co morbidities	ICMR	Government	Pathology	2020-21
	Devanshi Sane	Awareness of cancer and help seeking barriers in urban Maharashtra: A community- based study	ICMR	Government	PSM	2020-21

	Rutuja Amrutkar	Microorganisms in conjunctival sac of pre- operative cataract patients	ICMR	Government	Opthalmology	2020-21
	Ankit Bonde	A study of Library utilization by undergraduate and postgraduate medical students of a tertiary health care institute in Maharashtra	ICMR	Government	PSM	2020-21
	Rujvi Chandane	Awareness of Stroke among general population residing in urban area of Western Maharashtra	ICMR	Government	PSM	2020-21
	Rajat Maiya	Eyelid hygiene knowledge and practices among general population	ICMR	Government	Opthalmology	2020-21
	Kunal Jasnani	Prevalence of musculoskeletal (MSDs) among rural females carrying domestic loads on head	ICMR	Government	Orthopeadics	2020-21
	Nishant Jayawant	To study the prevalence of nutritional anaemia in patients with Type 2 Diabetes Mellitus in a rural tertiary care centre	ICMR	Government	Pathology	2020-21
	Shefali Ganatra	To study corelation between serum ferritin and thyroid dysfunction in known beta thalassemia patients	ICMR	Government	Biochemistry	2020-21
2019-2020	Dr. Vaishali Korde	To study thr effects of yoga on endocrine parameters in young unmarried girls with polycystic ovarian syndrome (PCOD)	LTRG,MUHS	Government	OBGY	2019-2020
	Ms. Aparna Suresh	Use of pre-operative endoscopy in distinguishing symptoms of pain due to cholelithiasis from symptoms in upper gatroeinstestinal disease	STRG MUHS	Government	SURGERY	2018-2019

Ms	. Arshiya Shamshap	Perinatal outcome in cases of eclampsia in a rural referral hospital: A cross sectional study	STRG MUHS	Government	OBGY	2018-2019
	Ms. Jai Jabade	A study of the knowledge and practices of breast feeding by mothers in rural referral hospital in maharashtra	STRG MUHS	Government	OBGY	2018-2019
	Ms. Dhwani Bhat	A prospective study of episiotomy in a rural tertiary care hospital	STRG MUHS	Government	OBGY	2018-2019
	Ms. Peenal Satra	To evaluate the use of topical mupirocin as a prophylaxis for surgical site infections in elective gynecological surgeries.	STRG MUHS	Government	OBGY	2018-2019
	Ms. Greeshma Keny	Evaluation of Mentzer's formula as screening test for thalassemia in ANC patients in tertiary referral hospital.	STRG MUHS	Government	OBGY	2018-2019
	Ms. Prachi Jethwa	Maternal and perinatal outcome in pregnancy induced hypertension and preeclampsia in rural area of Maharashtra.	STRG MUHS	Government	OBGY	2018-2019
ľ	ฟร. Aishwarya Ingole	Awareness of contraceptive methods in reproductive age group women in rural India	STRG MUHS	Government	OBGY	2018-2019

Ms. Vrushali La	Maternal and fetal outcome associated with normal vaginal and instrumental vaginal delivery in a tertiary rural referral hospital.	STRG MUHS	Government	OBGY	2018-2019
Ms. Muskan S	Perinatal outcome in patient with pre-term premature rupture of membranes: A cross-sectional study in rural tertiary care hospital.	STRG MUHS	Government	OBGY	2018-2019
Hardik Ma	Neonatal anthropometry: estimate of gestational age and foetal growth	STRG MUHS	Government	OBGY	2018-2019
Muskan Lalv	Assesment of material nutritional status in 1st trimester of preganacy in rural tertiary referal hospital: A cross sectional study.	STRG MUHS	Government	OBGY	2018-2019
Wagale Awo	Comarison of effect of standard sized eye drop, mini drop and micro drop of commercially Topicamide 0.8% and phenylephinehrine 5% dose combination	STRG MUHS	Government	OBGY	2018-2019
Shamal Kulk	A review of causes of still births in a rural hospital: A corss sectional study	STRG MUHS	Government	OBGY	2018-2019
Ger Marina Ri	Assessement of Dry eye Disease in Young adults.	STRG MUHS	Government	OBGY	2018-2019
Dr Sushm Sharma	i Doctor: An intelligent Diagnosis and drug dispensing platform	BIRAC	Non- Government	OBGY	2019-2020

	Dr. Shashwat Banerjee	Self-propelled water driven nanomachine for rapid capture and isolation of circulating tumor cells	Department of Science and Technology (DST), New Delhi	Government	Central Research Laboratory	2017-2021
	Dr. Shashwat Banerjee	Self-propelled water driven nanomachine for rapid capture and isolation of circulating tumor cells	Department of Science and Technology (DST), New Delhi	Government	Central Research Laboratory	2017-2021
2019-20	Greeshma Keny	ASSESSMENT OF RESPIRATORY , VENDORS IN A SEMI URBAN AREA.'MORBIDITIES AMONG SHOPKEEPERS AND, VENDORS IN A	ICMR	Government	ommunity Medicii	2019
	Shivani Masne	A cross-sectional study about awareness of Rabies prophylaxis and animal bite management among Medical Interns in Maharashtra	ICMR	Government	ommunity Medicii	2019
	Tanisha Saraf	Caesarean section or normal vaginal delivery : A cross sectional study of attitude of medical students	ICMR	Government	ommunity Medicii	2019
	Sahil Kothawade	AWARENESS OF MEASLES-RUBELLA VACCINE CAMPAIGN, AND ITS COVERAGE IN RURAL AREAS OF MAHARASHTRA	ICMR	Government	ommunity Medicii	2019
	Dnyanada Lolage	aluation of risk factors for age related catara	ICMR	Government	Ophthalmology	2019
	Varun Dake	A prospective study of relationship between Ankle –brachial Index and Microalbuminuria in diagnosis of subclinical atherosclerosis	ICMR	Government	Medicine	2019
_	Uma Chandurkar	nds in saturation of oxygen in healthy newbo	ICMR	Government	Paediatrics	2019

	Kosha Gala	A comparative study of the effect of supervised physiotherapy with or without local corticosteroid injection in early stage of adhesive capsulitis of the shoulder	ICMR	Government	Orthopaedics	2019
	Aparna Suresh	To Study application of Scoring System for starting antibioticsby National Neonatology Forum(NNF),India and actual use of Antibiotics in NICU	ICMR	Government	Paediatrics	2019
	Varun Kulkarni	Association between preoperative scrubbing and Surgical Site infections of clean and contaminated wounds	ICMR	Government	Surgery	2019
	Merlin S Mathew	Study Of Serum Ferritin As A Potential Risk Factor In Acute Myocardial Infarction - Merlin Sara Mathew	ICMR	Government	Biochemistry	2019
2018-19	Tanvi Patil	assessment of occupational and social hazards among domestic solid waste collectors and to suggest remedial measure: a cross sectional study.	ICMR	Government	PSM	2018
	Advait A Joshi	Study of Platelet parameters- Mean Platelet Volume(MPV) and Platelet Distribution Width(PDW) in Type 2 Diabetes Mellitus	ICMR	Government	Pathology	2018
	C. Maria	Serum Magnesium levels in Antenatal Patients and its Correlation with various Medical Disorders	ICMR	Government	Biochemistry	2018
	Nidhi Patil	n of risk factors for age related macular dcg	ICMR	Government	Ophthalmlogy	2018
	Tejas Mhapankar	Assessment of behavioural problems in children visiting child psychology clinic of a tertiary health care center	ICMR	Government	Paediatrics	2018

	Shraddha Lazar	Prevalence and risk factors of prehypertension/hypertension amongst school going adolescents	ICMR	Government	Paediatrics	2018
	Girija Nawdikar dy of prevalence of diabetes in adhesive car		ICMR	Government	Orthopaedics	2018
	Prajakta Kurhade	Awareness about adolescent changes in school and college going girls.	ICMR	Government	Psychiatry	2018
	Qais Shabbir Naik	Awareness of Bio-medical waste management among clinical teaching staff in a private medical college in a rural area.	ICMR	Government	ommunity Medicii	2018
	Gayatri M.N.	Analysis of port site infection in basic laparoscopic surgeries at rural hospital	ICMR	Government	Surgery	2018
	Jayraj Patil	Study of Morphological types of Anemia in pregnant womwn with low socioeconomic status attending ANC at rural tertiary care hospital	ICMR	Government	Pathology	2018
	Dr.Sushma Sharma	i Doctor: An intelligent Diagnosis and drug dispensing platform	BIRAC	Non Governmen	OBGY	2018
	Dr. Shashwat Banerjee	Self propelled water driven naomachine for rapid capture and isolation of circulationg tumor cells	Department of Biotechnology (DST), New Delhi	Government	Central Research Laboratory	2018
	Dr. Shashwat Banerjee	Self - propelled magnetically controlled nanorockets for transportation and pH triggered drug delivery	Department of Biotechnology (DBT)	Government	Central Research Laboratory	2018-2020
2017- 2018	Narmrata Deshpande	Thyroid Status in Type II Diabetes Mellitus	ICMR	Government	Biochemistry	2017
	Rohit Telap	screening of kidney disease by proteinuria in a teachning hospital of maval taluka, pune	ICMR	Government	Biochemistry	2017

		Dr.Sushma Sharma	i Doctor: An intelligent Diagnosis and drug dispensing platform	BIRAC	Non-Government	OBGY	2018
		Dr. Shashwat Banerjee	Selfpropelled magnetically controlled nanorockets for transportation and pH triggered drug delivery	Department of Biotechnology (DBT), New Delhi	Government	Central Research Laboratory	2018
201	16-2017	Dr. Shashwat Banerjee	Self propelled water driven naomachine for rapid capture and isolation of circulationg tumor cells	Department of Biotechnology (DST), New Delhi	Government project	Central Research Laboratory	2017

#### 3.1.3 (QnM) Number of research projects/clinical trials fund

Year	Name of the Principal Investigator
7.09.2020	Dr. Shashwat Banerjee
27.07 2020	Dr. Shashwat Banerjee
03.02.2020	Dr Sushma Sharma
2020	Manasi Joshi
2020	Pooja Shinde
2020	Atharva Nimbane
2020	Ashmitha Sharma
2020	Suditi Wasnik
2020	Devanshi Sane
2020	Rutuja Amrutkar
2020	Ankit Bonde
2020	Rujvi Chandane

2020	Rajat Maiya
2020	Kunal Jasnani
2020	Nishant Jayawant
2020	Shefali Ganatra
2020	Maheshgauri Darpan Maroti
2020	Pratinidhi Shilpa Aditya
2020	Shah Yash Kishor
2020	Giri Pramod Nagnath
2020	Jain Hardik Mahendra
2020	Wasnik Suditi Sumedh
2019-2020	Maheshgauri Darpan Maroti
	Pratinidhi Shilpa Aditya

Shah Yash Kishor	
Industry sponsored Projects	
Dr. Shashwat Banerjee	
Dr. Shashwat Banerjee	
Giri Pramod Nagnath	
Jain Hardik Mahendra	
Wasnik Suditi Sumedh	
Greeshma Keny	
Shivani Masne	
Tanisha Saraf	
Sahil Kothawade	
Dnyanada Lolage	
- Stryatiada Loiage	
Varun Dake	

	Lima Chandurder
	Uma Chandurkar
	Kosha Gala
	Varun Kulkarni
	Aparna Suresh
	Merlin S Mathew
2018-19	Tanvi Patil
	Advait A Joshi
	C. Maria
	Nidhi Patil
	Tejas Mhapankar
	Shraddha Lazar
	Girija Nawdikar
	Prajakta Kurhade
	Qais Shabbir Naik
	Gayatri M.N.
	Jayraj Patil

Dr. Vaishali Korde	
Dr. Shashwat Banerjee	
Dr. Shashwat Banerjee	
Dr.Sushma Sharma	
Dr.Sushma Sharma	
Dr. P. N. Baravkar	
Dr. Raje, Dr .Mujumdar	
Roshni Hemwani +Sangeeta Trimbake	
Dr. Poyekar	
Dr. Vaishali Korde	
Dr. Shusma Sharma	
Dr. Ashlesha Dandekar	
 Ms. Aparna Suresh	
Ms. Arshiya Shamshapure	
Ms. Jai Jabade	
Ms. Dhwani Bhat	

	Ms. Peenal Satra
	Ms. Greeshma Keny
	Ms. Prachi Jethwa
	Ms. Aishwarya Ingole
	Ms. Vrushali Lahane
	Ms. Muskan Sataria
2017- 2018	Narmrata Deshpande
	Rohit Telap
	Dr. Shashwat Banerjee
	Dr. Shobha Vatkar
	Dr. Poyekar
	Roshni Hemwani +Sangeeta Trimbake
	Dr. Shusma Sharma
2016-2017	Poonam Nayak
	Miss Aishwarya Pravin Agarwal
	Dr. Shashwat Banerjee

led by government, industries and non-governmental agencies during the last five years

Title of the project	Name of the Funding agency
Selfpropelled magnetically controlled nanorockets for transportation and pH triggered drug delivery	Department of Biotechnology (DBT)
Self-propelled water driven nanomachine for rapid capture and isolation of circulating tumor cells	Department of Science and Technology (DST), New Delhi
Intelligent Diagnosis and drug dispensing platform	BIRAC
A Cross sectional study of Spirometric evaluation of lung functions and respiratory symptoms in rice mill workers	ICMR
Awareness among first time expectant fathers regarding contraception	ICMR
Study of Emotional Intelligence among undergraduate medical students in a college in Maharashtra	ICMR
Evaluation of Knowledge, Attitude and Practices of Second Year MBBS students about use of Over the counter drugs	ICMR
Prevalence of Thrombocytosis in an Inpatient Setting of a tertiary hospital and study of associated co morbidities	ICMR
Awareness of cancer and help seeking barriers in urban Maharashtra: A community- based study	ICMR
Microorganisms in conjunctival sac of pre-operative cataract patients	ICMR
A study of Library utilization by undergraduate and postgraduate medical students of a tertiary health care institute in Maharashtra	ICMR
Awareness of Stroke among general population residing in urban area of Western Maharashtra	ICMR

Eyelid hygiene knowledge and practices among general population	ICMR
Prevalence of musculoskeletal (MSDs) among rural females carrying domestic loads on head	ICMR
To study the prevalence of nutritional anaemia in patients with Type 2 Diabetes Mellitus in a rural tertiary care centre	ICMR
To study corelation between serum ferritin and thyroid dysfunction in known beta thalassemia patients	ICMR
Prevalance of musclosketal diseases in rice farmers of Maval Taluka	LTRG MUHS
Identification and Validation of biomarkers for oral submucous fibrosis in Habitual Chewers	LTRG MUHS
To study customers of external factor alongwith multiple K wires for proximal humour	LTRG MUHS
Prevalance of depression and perceived stress among Medical undergratuate of a private Medical college in Maharshtra	STRG MUHS
Prediction of Diabetes and Prediabetes using Indian Diabetic risk score in adult population attending our Hospital	STRG MUHS
Prevalance of orthostatic hypotension in the elderly in the Pune district, state of Maharashtra.	STRG MUHS
Prevalance of musclosketal diseases in rice farmers of Maval Taluka	LTRG MUHS
Identification and Validation of biomarkers for oral submucous fibrosis in Habitual Chewers	LTRG MUHS

To study customers of external factor alongwith multiple K wires for proximal humour	LTRG MUHS
Intelligent Diagnosis and drug dispensing platform	BIRAC
Self-propelled water driven nanomachine for rapid capture and isolation of circulating tumor cells	Department of Science and Technology (DST), New Delhi
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Prevalance of depression and perceived stress among Medical undergratuate of a private Medical college in Maharshtra	STRG MUHS
Prediction of Diabetes and Prediabetes using Indian Diabetic risk score in adult population attending our Hospital	STRG MUHS
Prevalance of orthostatic hypotension in the elderly in the Pune district , state of Maharashtra.	STRG MUHS
ASSESSMENT OF RESPIRATORY , VENDORS IN A SEMI URBAN AREA.'MORBIDITIES AMONG SHOPKEEPERS AND, VENDORS IN A SEMI URBAN AREA.'	ICMR
A cross-sectional study about awareness of Rabies prophylaxis and animal bite management among Medical Interns in Maharashtra	ICMR
Caesarean section or normal vaginal delivery : A cross sectional study of attitude of medical students	ICMR
AWARENESS OF MEASLES-RUBELLA VACCINE CAMPAIGN, AND ITS COVERAGE IN RURAL AREAS OF MAHARASHTRA	ICMR
Evaluation of risk factors for age related cataract	ICMR
A prospective study of relationship between Ankle –brachial Index and Microalbuminuria in diagnosis of subclinical atherosclerosis	ICMR

Trends in saturation of Oxygen in healthy newborns	ICMR
A comparative study of the effect of supervised	
physiotherapy with or without local corticosteroid	101.55
injection in early stage of adhesive capsulitis of the	ICMR
shoulder	
Association between preoperative scrubbing and	
Surgical Site infections of clean and contaminated	ICMR
wounds	
To Study application of Scoring System for starting	
antibioticsby National Neonatology	ICMR
Forum(NNF),India and actual use of Antibiotics in	ICIVIN
NICU Study Of Serum Ferritin As A	
Potential Risk Factor In Acute Myocardial Infarction -	
Merlin Sara Mathew	ICMR
INTELLIFI Sala IVIALITEW	
assessment of occupational and social hazards	
among domestic solid waste collectors and to	ICMR
suggest remedial measure : a cross sectional study.	.c.m.
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Study of Platelet parameters- Mean Platelet	ICMD
Volume(MPV) and Platelet Distribution Width(PDW)	ICMR
in Type 2 Diabetes Mellitus	
Serum Magnesium levels in Antenatal Patients and	ICMR
its Correlation with various Medical Disorders	ICIVIN
Evaluation of risk factors for age related macular dcge	ICMR
Assessment of behavioural problems in children	
visiting child psychology clinic of a tertiary health	ICMR
care center	
Prevalence and risk factors of	
prehypertension/hypertension amongst school	ICMR
going adolescents	
To study of prevalence of diabetes in adhesive capsul	ICMR
Awareness about adolescent changes in school and d	ICMR
Awareness of Bio-medical waste management among	ICMR
Analysis of port site infection in basic laparoscopic	_
surgeries at rural hospital.	ICMR
Study of Morphological types of Anemia in pregnant	
womwn with low socioeconomic status attending	ICMR
ANC at rural tertiary care hospital	ICIVIII
Aire at rural tertiary care nospital	

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Study of effects of yoga on endocrine parameters in young unmarried girls with polycystic ovarian syndrome (PCOD)	LTRG,MUHS
Government of India project,	Department of Biotechnology (DST), New Delhi
Self-propelled magnetically controlled nanorockets for transportation and pH trigered drug delivery	Department of Biotechnology (DBT), New Delhi
Intelligent Diagnosis and drug dispensing platform	BIRAC
Intelligent Diagnosis and drug dispensing platform	BIRAC
Effect of Yoga on Overweight and obese students of MIMER Medical College -	Research Society of MIMER Medical College
Effect of Pranayam on reduction of hypertension	Research Society MIMER Medical College
Serum hsCRP & Lipid Profile in obesity -	Research Society of MIMER  Medical College
Screening of newborns for congenital hypothyroidism by TSH (Thyroid Stimulating Hormone) estimation- A hospital based study	Research Society of MIMER Medical College
Study of effects of yoga on endocrine parameters in young unmarried girls with polycystic ovarian syndrome (PCOD)	Research Society of MIMER Medical College
Effect of lead on ANC patients	Research Society of MIMER  Medical College
Assesment of Occupational & Social Health of Polyhouse worker in horticulture industry in Rural Maharashhtra	Research Society of MIMER Medical College
Use of pre-operative endoscopy in distinguishing symptoms of pain due to cholelithiasis from symptoms in upper GI endoscopy	STRG MUHS
Perinatal outcome in cases of eclampsia in a rural referral hospital	STRG MUHS
A study of the knowledge and practices of breast feeding by mothers in rural referral hospital in maharastra	STRG MUHS
A prospective study of episiotomy in a rural tertiary care hospital	STRG MUHS

To evaluate the use of topical mupirocin as a prophylaxis for surgical site infections in elective gynecological surgeries.	STRG MUHS
Evaluation of Mentzer's formula as screening test for thalassemia in ANC patients in tertiary referral hospital.	STRG MUHS
Maternal and perinatal outcome in pregnancy induced hypertension and pre-eclampsia in rural area of Maharashtra.	STRG MUHS
Awareness of contraceptive methods in reproductive age group women attending gynaecology OPD in a teaching hospital.	STRG MUHS
Maternal and fetal outcome associated with normal vaginal and instrumental vaginal delivery in a tertiary rural referral hospital.	STRG MUHS
Perinatal outcome in patient with pre-term premature rupture of membranes: A cross-sectional study in rural tertiary care hospital.	STRG MUHS
Thyroid Status in Type II Diabetes Mellitus	ICMR
screening of kidney disease by proteinuria in a teachning hospital of maval taluka, pune	ICMR
Government of India project,	Department of Biotechnology (DBT), New Delhi
Comparison of different doses of Injection Cisatracurium to establish optimal dose for reduction of propofol injection pain	Research Society of MIMER Medical College
Screening of newborns for congenital hypothyroidism by TSH (Thyroid Stimulating Hormone) estimation- A hospital based study	Research Society of MIMER Medical College
Serum hsCRP & Lipid Profile in obesity -	Research Society of MIMER Medical College
Effect of lead on ANC patients	Research Society of MIMER Medical College
Dental Caries & Iron Status in Preschool Children	ICMR
Assessment of awareness of health schem amongst female population of low socioeconomic status	ICMR
Government of India project,	Department of Biotechnology (DST), New Delhi

Type (Government/Non-Government)	Department of Principal Investigator	Year of Award	Funds provided (INR in Lakhs)	Duration of the project
Government	Central Research Laboratory	2020-2021	573705	3 years
Government	Central Research Laboratory	2017-2021	100000	3.5 years
Non-Government	OBGY	2018-2021	1489784	2 years
Government	Physiology	2020-2021	20000	2 months
Government	OBGY	2020-2021	20000	2 months
Government	PSM	2020-2021	20000	2 months
Government	Pharmacology	2020-2021	20000	2 months
Government	Pathology	2020-2021	20000	2 months
Government	PSM	2020-2021	20000	2 months
Government	Opthalmology	2020-2021	20000	2 months
Government	PSM	2020-2021	20000	2 months
Government	PSM	2020-2021	20000	2 months

Government	Opthalmology	2020-2021	20000	2 months
Government	Orthopeadics	2020-2021	20000	2 months
Government	Pathology	2020-2021	20000	2 months
Government	Biochemistry	2020-2021	20000	2 months
Government	ortho	2019-2020	100000	1 year
Government	biochemistry	2019-2020	75000	1 year
Government	ortho	2019-2020	100000	1 year
Government	PSM	2019-2020	10000	6 months
Government	PSM	2019-2020	15000	6 months
Government	PSM	2019-2020	7500	6 months
Government	ortho	2019-2020	0.00	1 year
Government	biochemistry	2019-2020	0.00	1 year

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Government	ortho	2019-2020	0.00	1 year
Non-Government	OBGY	2018-2020	5.19	2 years
Government	Central Research Laboratory	2017-2021	6.00	3.5 years
Government	Central Research Laboratory	2019	10.00	3 years 2017-2020
Government	PSM	2019-2020	0.00	6 months
Government	PSM	2019-2020	0.00	6 months
Government	PSM	2019-2020	0.00	6 months
Government	mmunity Medic	2019	0.00	2 months
Government	mmunity Medic	2019	0.20	2 months
Government	mmunity Medic	2019	0.20	2 months
Government	mmunity Medic	2019	0.20	2 months
Government	Ophthalmology	2019	0.20	2 months
Government	Medicine	2019	0.20	2 months

Government	Paediatrics	2019	0.20	2 months
Government	Orthopaedics	2019	0.20	2 months
Government	Surgery	2019	0.20	2 months
Government	Paediatrics	2019	0.20	2 months
Government	Biochemistry	2019	0.20	2 months
Government	PSM	2018	0.10	2 months
Government	Pathology	2018	0.10	2 months
Government	Biochemistry	2018	0.10	2 months
Government	Ophthalmlogy	2018	0.10	2 months
Government	Paediatrics	2018	0.10	2 months
Government	Paediatrics	2018	0.10	2 months
Government	Orthopaedics	2018	0.10	2 months
Government	Psychiatry	2018	0.10	2 months
Government	mmunity Medic	2018	0.10	2 months
Government	Surgery	2018	0.10	2 months
Government	Pathology	2018	0.10	2 months

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Government	OBGY	2018-2019	0.00	12 months
Government	Central Research Laboratory	2018	9.45	3 years(2017-2020)
Government	Central Research Laboratory	2019	8.69	3 years 2018-2021
Non Government	OBGY	2018	7.80	2 years
Non-Government	OBGY	2018	11.70	2 years(2018-2020)
Non-Government	Biochemistry	2018	0.19	1 Year
Non-Government	PSM	2018	0.20	1 year
Non-Government	Biochemistry	2018	0.18	2 years
Non-Government	Biochemistry	2018	0.15	1 year
Non Government	OBST. & GYN	2018	0.20	1 year
Non-Government	Biochemistry	2016-2017	0.20	1 year
Non-Government	Community Medicine	2018	0.2	18 months
Government	SURGERY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months

Government	OBGY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months
Government	OBGY	2018-2019	0.00	6 months
Government	Biochemistry	2017	0.10	2 months
Government	Biochemistry	2017	0.10	2 months
Government	Central Research Laboratory	2018	23.86	3 years(2018-2021)
Non-Government	Anaesthesiology	2017	0.17	2 months
Non-Government	Biochemistry	2017	0.15	1 year
Non-Government	Biochemistry	2017	0.20	2 years
Non-Government	Biochemistry	2017	0.20	1 year
Government	Biochemistry	2016	0.10	2 months
Government	PSM	2016	0.10	2 months
Government project	Central Research Laboratory	2017	23.9965	3 years (2017-2020)

# M.I.M.E.R. MEDICAL COLLEGE ORIENTATION PROGRAMME

SR. NO.	PROGRAMME
1	1 <sup>st</sup> Year Orientation Programme
2	Internship Orientation Programme
3	PG Orientation Programme
4	Certificate Course in Modern Pharmacology
	Orientation Programme

#### 1. FIRST MBBS ORIENTATION PROGRAMME (2021-2016)

### Time table of the Foundation Course 1<sup>st</sup> Year MBBS 2020-2021

Date	Time	Topic	Teacher
Mon 18/01/2021	10.00 am to 11.00 am	Introduction	Dr. Swati Belsare
	11.30 am to 12.45 pm	Principal's Address	
	2.00 pm to 4.00 pm	Introduction to Anatomy department Hospital Visit - OPD / wards visit	Dr. Swati Belsare Dr. Ashwini Bhele Mr Sandeep khalkar
Tue	9.00 am to 11.00 am	Medical ethics, attitudes & professionalism	Dr. Derek D'souza
19/01/2021	11.00 am to 1.00 pm	Health care system & its delivery	Dr. S. V. Chincholikar
2.00 pm to 4.00 pm		Introduction to Physiology & Alternate health systems in the country Visit to Herbal Garden, Hospital Visit and OT complex visit	Dr. Deepa Nair Dept. of Physiology
Wed 20/01/2021	9.00 am to 11.00 am	National health priorities & policies	Dr. Aastha Pandey
	11.00 am to 1.00 pm	Introduction to Biochemistry. Patient Safety, Biohazard Safety	Dr. S. A. Pratinidhi
	2.00 pm to 4.00 pm	History of medicine and UG lab, Blood bank, CCL visit	Dept. of Biochemistry
Thu 1/01/2021	9.00 am to 11.00 am	Universal precautions & vaccinations	Dr. Madura Ashturkar
11.00 am to 1.00 pm		Principles of primary care (general & community based care)	Dr. S.J.Kulkarni
	2.00 pm to 4.00 pm	Extra curricula activity – Movie "Shwas"	Dept. of Anatomy

Date	Time	Topic	Teacher
Date	9.00 am to 11.00 am	Physician's role in the Society	Dr Sudam Khedkar
Fri 22/01/2021	11.00 am to 1.00 pm	Movie – Patch Adams	Dept of Anatomy
	2.00 pm to 4.00 pm	E. C.A –Debate/ speech "Why I want to become a Doctor"	Dept of Physiology
	9.00 am to 12.00 am	Yoga	Dr. Sonali Khake Dr. Rupali Baburdikar Dr.Vaishali Lunawat
Mon 25/01/2021	12.00 am to 1.00 pm	"Euthanasia" short film "Baluta" short film	Dept. of Anatomy
	2.00 pm to 4.00 pm	Language (Student Questionnaires)	Dept of Physiology
Tue 26/01/2021	9.00 am to 10.30 am	Flag hoisting ceremony	
	9.00 am to 11.00 am	Interpersonal relationships	Derek Dsouza
Wed 27/01/2021	11.00 am to 1.00 pm	UGC film- Anti-ragging documentary	Dept of Anatomy
2.00 pm to 4.00 pm	Community Visit – 1	Dept. of Community Medicine	
	9.00 am to 11.00am	Communication Skills	Smita Watve
Thu	11.00 am to 1.00	Universal Precautions in Laboratory	Dr Sandhya Kulkarni
28/01/2021	pm	Introduction to Computer	Dr Shashank Vedpathak
	2.00 pm to 4.00 pm	Community Visit-2	Dept of Community Medicine

Sat 30/01/2021		Medical Health Check up	
	2.00 pm to 4.00 pm	First Aid	Dr. Ajit Jadhav
		Review of Movie Shwas, Euthenesia and Baluta Interactive session	Dr. Sonali Khake Dr. Sushama Chavan Dr Ashwini Bhele
	11.00 am to 1.00 pm	Reflection writing	Dr Sushama Chavan
Fri 29/01/2021	9.00 am to 11.00 am	Time management	Dr. Ashish Ubale

Dr.S.M.Belsare Prof & Head Dept of Anatomy

Prof. & Head Dept. of Anatomy MIMER Medical College Talegaon Dabhade

# **GENERAL INSTRUCTIONS**

1. Satisfactory attendance and performance is crucial for the student to be eligible to appear for university examination.

Mandatory requirement for the attendance is as follows

Theory classes --- 75% attendance
Practicals --- 80% attendance

- 2. Attendance and performance status of the ward will be notified to the parents AFTER THE INTERNAL ASSESSMENT EXAMINATION Response and counseling thereafter from the parents is highly appreciated.
- 3. Scoring Maximum marks in INTERNAL EXAMINATIONS is always beneficial to reduce the pressure during University Examinations.
- 4. Students should NOT leave the college premises after preliminary examination without signing the FINAL INTERNAL ASSESSMENT MARKSHEETS.

# **2. INTERNSHIP ORIENTATION PROGRAMME**

# MIMER MEDICAL COLLEGE, TALEGAON (D) DEPT. OF COMMUNITY MEDICINE INTERNSHIP ORIENTATION PROGRAMME

#### DAY - 1

Sr No.	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Welcome, Brief about internship	Dept. Of Community Medicine	1 hr
2	Internship Distribution ,Display of "Groups"	Dept. of Community Medicine	30 mins
3	Internship Inauguration Programme	Dept. of Community Medicine	2 hrs
4	Biomedical Waste Management	Dept. of Community Medicine	1 hr
5	Distribution of Posting Orders	Dept. of Community Medicine	2 hrs

# INTERNSHIP ORIENTATION PROGRAMME DEPT. OF COMMUNITY MEDICINE

# DAY - 2

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Visit to NDRF, Sudumbare (Disaster Management, First-aid and CPR)	Dept.of Community Medicine MSW	3 hrs
2	Organ Donation	Dept.of Community Medicine	1 hr
3	Overview of the Department, Superspeciality clinics with name of specialists, Departmental facilities. Role of interns in the department their behaviour	Dept.of Orthopedics	1 hr
4	Overview of the Department, Superspeciality clinics with name of specialists, Departmental facilities, Role of interns in the department, their behaviour	Dept. of Surgery	1 hr

# INTERNSHIP ORIENTATION PROGRAMME DEPT. OF COMMUNITY MEDICINE

# Day - 3

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Visit to Cipla palliative care centre , Warje	Dept.of Community Medicine	4 hrs
		nch 1.00pm to 2.00pm	
2	Overview of the Department, Superspeciality clinics with name of specialists, Departmental facilities, Role of interns in the department, their behavior.	Dept. of OBGY	30 mins
3	Overview of the Department, Superspeciality clinics with name of specialists, Departmental facilities, Role of interns in the department, their behavior.	Dept. of General Medicine	30 mins
4	Overview of the Department, Superspeciality clinics with name of specialists, Departmental facilities, Role of interns in the department, their behavior.	Dept. of Skin & VD	1 hr

# INTERNSHIP ORIENTATION PROGRAMME, DEPT. OF COMMUNITY MEDICINE

# Day - 4

SR.	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
NO			
1	Communication Skills	Dept.of Psychiatry	1 hr
2	Stress Management	Dept. of Psychiatry	1 hr
3	Allotment of Internship groups	Dept.of Community	1 hr
		Medicine ,	
4	PCPNDT act & abortion care	Dept. Of OBGY	
4	PCPNDT act & abortion care	Dept. Of Obd (	1 hr
		Lunch 1.00pm	
5	Infection control	to 2.00pm  Dept of Microbiology	
			1 hr
6	Medical Certification and cause	Dept. of FMT.	
Ь	of death	Dept. of Fivit.	1 hr

# INTERNSHIP ORIENTATION PROGRAMME DEPT. OF COMMUNITY MEDICINE

# Da<u>y – </u>5

SR. NO	PROGRAMME	DEPT. & IN-CHARGE	TIME & VENUE
1	Bioethics workshop	Dr. Derek d'souza Bioethics unit	4 hrs
	LUN	ICH 1.30pm To 2.00pm	
2	Overview of the Department, details of , Role of interns in the department	Dept. of Ophthalmology	30 mins
3	Overview of the Department, details of role of interns in the department.	Dept of ENT	30 mins
4	Distribution of Orders and reporting to respective departments	Dept.of Community Medicine	1 hrs

#### Note:

- Orientation Programme is compulsory forInterns.
- Interns must attend all sessions in time.
- Interns must report to the concerned department on 05/05/2021.

#### 3. PG ORIENTATION PROGRAMME

# MIMER MEDICAL COLLEGE, TALEGAON (D) POST GRADUATE

#### **Orientation Programme**

Date: Time: 1.5 hrs

Venue - MIMER Medical College building, Examination hall, third floor

- 1) Compere Welcome to new batch
- 2) World Peace Prayer
- 3) Principal's address
- 4) Introductory remarks
  - a) HOD of clinical department
  - b) HOD of pre-clinical department
  - c) HOD of para clinical department
  - d) Medical Superintendent
- 5) Students speech
- 6) Director/ Executive Director's speech
- 7) Pasayadan

Followed by Tea

- Reporting to concerned department
- Individual department orientation
- C. C. To:
- 1. Medical Director
- 2. Executive Director (P & D)
- 3. Executive Director (HA)
- 4. Principal
- 5. Principal- College of Physiotherapy
- 6. All HOD's- Pre/ Para/ Clinical
- 7. Medical Superintendent
- 8. Dy. Registrar
- 9. Warden- Girls & Boys hostel

#### MIMER MEDICAL COLLEGE –TALEGAON (D)

#### POSTGRADUATE ORIENTATION PROGRAMME IN

#### MEDICINE DEPARTEMENT

# 2 DAYS program

#### Day 1:

- a. Introduction to the department, faculty and residents by the professor
- b. Talk by Head of department regarding attitude and behavior in handling patients, staff and departmental work
- c. Talk by a faculty regarding PG teaching schedule, teaching material available and library use
- d. Talk by faculty: orientation and co-ordinate work with other departments.
- e. Orientation regarding Thesis and log book

#### <u>Day 2:</u> Orientation of the infrastructure

- a. Administration: Office, various sections working in the office
- b. Research lab
- c. Central and digital library facilities
- d. Canteen
- e. Auditorium
- f. Resident quarters
- g. Labour room and Wards
- h. Radiology
- i. Clinical laboratories
- j. Intensive care unit
- k. Neonatal ICU
- 1. Operation theatre
- m. Physiotherapy college

Total no. of PG students per year: 4

Allotment of PG students to the respective units and their Guides

#### Duties and responsibilities of all residents in medicine-

#### 1) Discipline and Conduct-

All residents JR1, JR2, JR3 should be punctual for duties in wards and OPDs.

They should be wearing clean aprons with nameplate, well groomed and clean shaven.

They should have a good stethoscope (littman), hammer, torch etc with them.

Proper dress code should be followed at all times, i.e at nights or on holidays, apart from the office working hours.

They should be in campus at all times and traceable on phone.

They should convey their wherabouts to concerned faculty and staff nurses.

Leaves will be sanctioned only for genuine reasons and after putting up a formal application through proper channel and signature of locum.

18 Leaves in 1 year (8 CL & 10 SL) will be officially sanctioned.

#### 2) Clinical /Administrative duties -

Ensure vaccination of self, peers and nursing and paramedical staff against hepatitis B, swine flu etc. Take pre and post exposure prophylaxis whenever and wherever indicated.

ICU duties / Basic Life Support trainings will be done as per rotation .

Co- ordinate with staff nurses for all laboratory and radiological investigations.

Coordinate with social worker for various scheme of patientsi.e RGJY, CGHS, PMC etc.

Co-ordinate with other departmental faculty and staff (Cross references)

Coordinate with MRD (medical record department) for death summaries and discharge summaries, MLC file work etc.

Filling of discharge or death summaries at the earliest with the ICD coding of diseases.

Notification to Talegaon Dabhade Municipality and inform to PSM Department for TB, Dengue, Malaria, Cholera, H1N1 etc.

#### 3) Academic /Research activities-

All residents should attend ward rounds and OPDs actively and punctualy..

They should put name, stamp, date and time on every page of file.

All residents should compulsorily attend PG activities and death audits and present cases.(Mortality & morbidity meeting 2<sup>nd</sup> Wednesday each month)

They should attend periphery health check up camps whenever allotted.

They should actively work for their respective dissertation with regular guidance and meeting with the PG guide and attend dissertation review meetings in this regard. They should update the PG guide regarding progress of thesis work.

1 Oral paper, 1 publication and 1 poster is compulory for each resident for appearing for final examination. Hence they should complete all these 3 tasks well in advance.

In addition to above,

## **Duties and responsibilities of JR 1**

1<sup>st</sup> 3 months –

Attend JR Induction programme by medicine department.

Attend Research Methodology workshop Part I

Will work in Ward under supervision of JR 2 and JR3.

From 4<sup>th</sup> month onwards—

1. Patient Care – They should attend OPDs in time and work under the senior residents and faculty. Filling the primary assessment sheet and care plan of patient file. Take care of proper documentation in MLC files.

- 2. Daily rounds of allotted ward (male ,female) or ICU/HDU, Pulse & BP checking, systemic examinations, writing the prescriptions & checking the medicines with the patient. Each JR will be responsible for specific allotted number of patients.
- 3. JR will co-ordinate all laboratory investigations (blood, urine, sputum, CSF, pleural &ascitic fluid studies). This includes filling lab. form, sending samples with proper labelleling to labs, collecting reports and filing and entering the lab sheet of files.
- 4. Academic They should select topic for dissertation, approve it from PG guide, do literature search and prepare the synopsis for approval by departmental and central ethical committee of college. after the ethical approval ,they should start collecting their data and report to their PG guide.
- 5. BLS training should be done as per rotation.
- 6. Monitor and carry out all procedures like blood transfusions, tapping procedures, biopsies in ward .Written informed consent will be taken before any ward procedure.
- 7. Report any incident by documenting in the form with staff nurse (regarding any abnormal occurence or behaviour of patient, staff, doctor, relative, or of treatment or management fault).
- 8. Filling of discharge or death summaries at the earliest with the ICD coding of diseases.
- 9. Report to PMC for TB, Dengue, Malaria, Cholera, H1N1 etc.
- 10.Put name, stamp, date and time on every page of file.
- 11. Co-ordinate with social worker for various scheme of patientsi.e RGJY, CGHS, PMC etc.
- 12.Co-ordinate with other departments (Cross references) and nursing and paramedical staff.

# **Junior Resident 2 – (Patient care, Teaching, Research)**

- 1. They should supervise the work of JR1.
- 2. Take regular ward or ICU rounds in morning and evening and more often if needed. They should fill care plan and take sign of faculty .They should also check the initial assessment plan filed by JR1.
- 3. Check into laboratory reports and confirm that they are received in wards &ICU's and attached to file.
- 4. To attend casualty calls on emergency duties strictly without any delay.

- 5. Should remain traceable at all times.
- 6. Attend periphery patients along with the Assistant Professor on duty.
- 7. ICU procedure like CVP line, intubation, arterial line, pacing etc will be done by JR2 under guidance of ICU physician.
- 8. All file work with the assessment forms, care plan sheets and discharge sheets duly signed with date, time, name, signature and MCI registration number.
- 9. Check with JR if the discharge and death summaries are filled properly and then JR2 will take signature of faculty.
- 10. Co-ordinate superspeciality work.
- 11. Fill adverse drug reaction form.
- 12. Fill Incident reporting form and take signature of faculty on it .
- 13. Their dissertation work will include data collection, ROL (review of literature) and making master chart and report the same to PG guide.
- 14.Co-ordinate UG attendance with faculty taking clinics.

### Junior Resident 3– (Patient care, Teaching, Research)

- 1. Presenting the patient round to faculty regularly on time.
- 2. Patient informing to faculty in evening (telephonically) at specific time regularly and making the necessary changes in the treatment plan as advised with signature of faculty next day.
- 3. Take undergraduate clinics as per allottment in UG teaching programme..
- 4. Attend PG activities on regularly & strictly. He /she will sign the PG attendance muster during PG activity.
- 5. ICU procedure like CVP line, intubation, arterial line, pacing etc will be done by JR3 under guidance of ICU physician.
- 6. Teach BLS training to juniors with ICU faculty.
- 7. Address any issues of wards, teaching, nursing staff etc.
- 8. Involvement in research activities.
- 9. Dissertation work wil include results, conclusions and submission of pilot copy to the guide and to college later.
- 10. JR3 must ensure smooth functioning of the whole unit and bring unresolvable issues to the notice of faculty.

# MIMER MEDICAL COLLEGE TALEGAON DABHADE

## **DEPARTMENT OF GENERAL SURGERY**

# POSTGRADUATE ORIENTATION PROGRAMME

Title	Orientation Programme
DAY -1	
Orientation to Surgery Department	<ul> <li>Overview of the dept. &amp; SOPs</li> <li>Introduction to the department, faculty and residents</li> <li>Attitude and behavior in handling patients, staff and departmental work</li> <li>Working hours, behavior, and coordination between each other.</li> <li>Medical Documentation</li> </ul>
How to study for MS	<ul> <li>Overview of the syllabus</li> <li>PG teaching schedule, teaching material available and library use</li> <li>Study technique and timeline</li> <li>Introduction to Dept. resources</li> <li>Orientation regarding Thesis and log book</li> </ul>
PG Teaching Programme	<ul> <li>Case discussion Long and short case once week</li> <li>Journal club once week</li> <li>Seminar once week</li> <li>Theory lecture twice in month</li> <li>Grand round once a week</li> </ul>
SOPs in OT	<ul> <li>Preparing the patient for OT</li> <li>OT protocols</li> <li>Equipment care</li> </ul>
Post op Care	<ul> <li>Post op orders</li> <li>Post-op pain care</li> <li>Things to watch for in wards</li> </ul>
OPD/Casualty patient examination	<ul> <li>Case History</li> <li>Patient Examination and Management</li> <li>Treatment</li> </ul>
Super specialty introduction	Orientation to the superspecialities pro's and con's
DAY -2	
Orientation of the infrastructure	<ul> <li>Administration: Office, various sections working in the office</li> <li>Research lab</li> <li>Surgery Skill lab</li> <li>Central and digital library facilities</li> </ul>

Canteen
Auditorium
Resident quarters
• Wards
<ul> <li>Radiology</li> </ul>
Clinical laboratories
Intensive care unit
Operation theatre
<ul> <li>Physiotherapy college</li> </ul>

- Total no. of PG students per year: 6
- Allotment of PG students to the respective units and their Guides.
- Research methodology workshop is conducted by our institution for research orientation that helps during thesis work.
- PG students are continuously taught during their daily rounds by all the faculty and during emergency duties.
- Guest lectures are arranged regularly by the department and eminent Faculty is invited for various subject discussions and participation by PG students is reviewed.
- Postgraduate students are encouraged to participate in various conferences and many students have made us proud by winning awards.

# MIMER MEDICAL COLLEGE TALEGAON DABHADE DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

# POSTGRADUATE ORIENTATION PROGRAMME

Title	Orientation done by	Orientation Programme	Signature
DAY -1			
Orientation to Obst. &Gyn Department	HOD	<ul> <li>Overview of the dept. &amp; SOPs</li> <li>Introduction to the department, faculty and residents</li> <li>Attitude and behavior in handling patients, staff and departmental work</li> <li>Working hours, behavior, and coordination between each other.</li> <li>Medical Documentation</li> </ul>	
How to study for MS	HOU	<ul> <li>Overview of the syllabus</li> <li>PG teaching schedule, teaching material available and library use</li> <li>Study technique and timeline</li> <li>Introduction to Dept. resources</li> <li>Orientation regarding Thesis and log book</li> </ul>	
PG Teaching Programme	PG Teaching Incharge - OBGY	<ul> <li>Case discussion once weekly</li> <li>Journal club once weekly</li> <li>Seminar once weekly</li> <li>Theory lecture once weekly</li> <li>Grand round once a month</li> </ul>	
SOPs in OT	HOU	<ul><li>Preparing the patient for OT</li><li>OT protocols</li><li>Equipment care</li></ul>	
Post op Care	HOU	<ul> <li>Post op orders</li> <li>Post-op pain care</li> <li>Things to watch for in wards</li> </ul>	
Iatrogenic Infections	Associate Professor	<ul><li>Types of infection</li><li>Prevention Aseptic measures, prophylaxis</li></ul>	
Drugs in Obst. & Gyn. Practice	Associate Professor	<ul><li>Common drugs used in OPDs&amp; IPDs</li><li>Writing prescription</li></ul>	
DAY -2 Orientation of the	Assistant Professor	<ul> <li>Administration: Office, various sections working in the office</li> </ul>	

infrastructure	Research lab	
	<ul> <li>Central and digital library facilities</li> </ul>	
	Canteen	
	Auditorium	
	Resident quarters	
	<ul> <li>Labour room and Wards</li> </ul>	
	<ul> <li>Radiology</li> </ul>	
	Clinical laboratories	
	Intensive care unit	
	Neonatal ICU	
	Operation theatre	
	Physiotherapy college	

- Total no. of PG students per year: 2
- Allotment of PG students to the respective units and their Guides.
- Research methodology workshop is conducted by our institution for research orientation that helps during thesis work.
- PG students are continuously taught during their daily rounds by all the faculty and during emergency duties.
- Guest lectures are arranged regularly by the department and eminent Faculty is invited for various subject discussions and participation by PG students is reviewed.
- Postgraduate students are encouraged to participate in various conferences and many students have made us proud by winning awards.

# MIMER MEDICAL COLLEGE - TALEGAON (D)

# POSTGRADUATE ORIENTATION PROGRAMME IN ORTHOPAEDIC DEPARTEMENT

## 2 DAYS program

# Day 1:

- a. Introduction to the department, faculty and residents by the professor
- b. Talk by Head of department regarding attitude and behavior in handling patients, staff and departmental work
- c. Talk by a faculty regarding PG teaching schedule, teaching material available and library use
- d. Talk by faculty: orientation and co-ordinate work with other departments.
- e. Orientation regarding Thesis and log book

# Day 2: Orientation of the infrastructure

- a. Administration: Office, various sections working in the office
- b. Research lab
- c. Central and digital library facilities
- d. Canteen
- e. Auditorium
- f. Resident quarters
- g. Labour room and Wards
- h. Radiology
- i. Clinical laboratories
- j. Intensive care unit
- k. Neonatal ICU

- I. Operation theatre
- m. Physiotherapy college

Total no. of PG students per year: 1

Allotment of PG students to the respective units and their Guides

Research methodology workshop is conducted by our institution for research orientation that helps during thesis work.

Teaching Program includes the following (A teacher is allotted for each teaching program)

- a. Case discussion once weekly
- b. Journal club once weekly
- c. Seminar once weekly
- d. Theory lecture once weekly
- e. Grand round once a month

PG students are continuously taught during their daily rounds by all the faculty and during emergency duties.

Guest lectures are arranged regularly by the department and eminent Faculty is invited for various subject discussions and participation by PG students is reviewed.

#### MIMER MEDICAL COLLEGE – TALEGAON (D)

#### POSTGRADUATE ORIENTATION PROGRAMME-

#### **OPHTHALMOLOGY**

#### 2 DAYS Program

#### **Day 1:**

- a. Introduction to the department, faculty and residents by the professor
- b. Introduction to various facilities of college like Research lab ,Central and digital library facilities- (library orientation programme as per library schedule.) Canteen, Auditorium, Resident quarters, Wards, Radiology department , Clinical laboratories, Intensive care unit, Neonatal ICU etc. Orientation of the college infrastructure like Administrative: Office, various sections working in the office and completion of remaining formalities if any.

#### **Day 2:**

- a. Talk by Head of department regarding attitude and behavior in handling patients, interaction with staff, overview of departmental work, discipline and decorum of MIMER.
- b. **Teaching Program** -Talk by a faculty regarding awareness of teaching schedule, teaching material available in departmental library, online and offline available reference material, maintenance of log book, the need to do presentation in proper way, making proper presentation as per the standard format, use of reference books for making good presentation and saving the presentation in drive for future reference are some of the topics which are covered in orientation. Orientation regarding

Thesis, Literature search for paper and choosing the right topic for thesis in

brief (Research methodology workshop is conducted by our institution for research orientation) Demonstration of reference software mendeley.

**Awareness of departmental work**- Talk by faculty on awareness about posting in wards and work culture of OPD and ward are covered in orientation.

- **a**. Maintenance of various records of speciality day and case sheet writing as per correct format, importance of signing the documents.
- **b. ROP screening protocol** and its importance, documentation and follow up of
   ROP cases, coordination with pediatrics department.
- **c.OT protocol** -working of OT and requirement of different types of anesthesia and protocol for medical fitness for anesthesia. Taking consent form for various ocular surgeries.
- **d. Bioethics in Ophthalmology**-ethical issues brief overview.**e**. overview of Hospital Working, Govt. Schemes certificate etc., contact no of social workers
- **f.** Casualty Protocol-Handling of cases in Casualty and informing the senior residents and faculty on call as per the protocol.
- g. Protocol about maintenance of equipment-Taught about equipment care in brief .
- **h**. Active participation in conducting various camps , activities related to different programme of importance to Ophthalmolgy and Guest lectures are discussed.

**Studyguidelines** -PG Students are given over view of syllabus, study material for MS course, study technique, time line and introduction to departmental resources.

Assessment- They are told about assessment protocol in the department during their

post graduation. In addition to yearly formal assessment residents are encouraged to
involve themselves in daily learning and reading habits .They are also judged by their
different assignments for their academic activities and surgical skills and are provided
with verbal feedback.
Thanking You,
Prof & Head
Dept. of Ophthal

#### MIMER MEDICAL COLLEGE -TALEGAON (D)

#### POSTGRADUATE ORIENTATION PROGRAMME-

#### **DERMATOLOGY**

#### 2 DAYS program

#### Day 1:

- a. Introduction to the department, faculty and residents by the professor
- b. Talk by Head of department regarding attitude and behavior in handling patients, staff and departmental work
- c. Talk by a faculty regarding PG teaching schedule, teaching material available and library use
- d. Talk by faculty: orientation and co-ordinate work with other departments.
- e. Orientation regarding Thesis and log book

# Day 2: Orientation of the infrastructure

- a. Administration: Office, various sections working in the office
- b. Research lab
- c. Central and digital library facilities
- d. Canteen
- e. Auditorium
- f. Resident quarters
- g. Radiology
- h. Clinical laboratories
- i. Intensive care unit
- j. Neonatal ICU
- k. Operation theatre
- 1. Physiotherapy college

Total no. of PG students per year: 2

Allotment of PG students to the respective units and their Guides

Research methodology workshop is conducted by our institution for research orientation that
helps during thesis work.
Teaching Program includes the following (A teacher is allotted for each teaching program)
a. Case discussion twice weekly
b. Journal club once weekly
c. Seminar once week
d. Theory lecture once weekly
e. Grand round once a week
PG students are continuously taught during their daily rounds by all the faculty and during emergency duties.
Guest lectures are arranged regularly by the department and eminent Faculty is invited for
various subject discussions and participation by PG students is reviewed.
various subject discussions and participation by 1 3 students is reviewed.

#### MIMER MEDICAL COLLEGE -TALEGAON (D)

#### DEPARTMENT OF COMMUNITY MEDICINE

#### POSTGRADUATE ORIENTATION PROGRAMME

#### 2 DAYS program

### <u>Day 1:</u>

- a. Orientation to the department, faculty and residents by the professor
- b. Sensitization by Head of department regarding attitude and behavior in handling patients, staff and departmental work
- c. Briefing by a faculty regarding PG teaching schedule, teaching material available and library use
- d. Talk by faculty: orientation and co-ordinate work with other departments.
- e. Instructions regarding Thesis and log book of Research Methodology.

#### <u>Day 2:</u> Orientation of the infrastructure

- 1. Familiarization of institutional academic & physical environment.
- 2. Familiarization of UHTC
- 3. Familiarization of RHTC
- 4. Familiarization of PHC, Talegaon
- 5. Familiarization of Rural Hospital Kanhe
- 6. Information about Field Visits conducted by department.
- 7. Briefing about clinical posting in other departments such as microbiology, Medicine, OBGY, Pediatrics, Chest TB.
- 8. Allotment of PG students to their Guides. (Total no. of PG students per year: 1)

Teaching Program includes the following (A teacher is allotted for each teaching program)

- a. Case discussion once weekly
- b. Journal club once weekly
- c. Seminar twice a month.

d. Theory lecture once weekly
e. Field visits once a month.
f. Hands on training twice a month mandatory for PG students to attend mortality &
morbidity meeting for better understanding.
g. PG students are involved in patient observation at UHTC and RHTC.
h. PG students learn implementation National Health programme and issues and health
education of general population during regular departmental activities.
Guest lectures are arranged regularly by the department and eminent Faculty is invited for
various subject discussions and participation by PG students is reviewed.

#### DEPARTMENT OF BIOCHEMISTRY

## POSTGRADUATE ORIENTATION PROGRAMME for MD BIOCHEMISTRY

- PG students are taken to all sections of the department (various Laboratories- under graduate, post graduate, research, museum & central clinical laboratory). Thus, they are oriented to the department.
- After visit to the department, they are oriented with daily working of the department.
- They are -made aware of their rotation in the department.
- They are also informed about PG activities (Journal club, Seminars, microteaching, PG special topic presentation) to be presented by them weekly.
- They are made aware about the UG teaching which they have to conduct.
- They are informed about internal exams which are conducted in the department.

Prof & Head Dept. of Biochemistry

#### DEPARTMENT OF PATHOLOGY

#### POSTGRADUATE ORIENTATION PROGRAMME for MD PATHOLOGY

2 DAYs program -

#### Day 1:

- a. Introduction to the department, faculty and residents by the Prof.& Head.
- b. Overview of academics given by senior faculty of department which will include Syllabus periodic assessments, Timeline for Synopsis & dissertation, reference books for MD Pathology and Orientation regarding log book
- c. Talk by a faculty regarding PG teaching schedule, teaching material available and library use
- d. Talk by faculty: orientation of instruments, software & working of CCL, Histopathology & Cytology labs.
- e. Working of Blood Bank, Blood donation Camps & maintenance of registers in blood bank.

#### Day 2: Orientation of the infrastructure

- a. Administration: Office, various sections working in the office
- b. Research lab
- c. Central and digital library facilities
- d. Canteen
- e. Auditorium
- f. Resident quarters
- g. Labour room and Wards
- h. Radiology
- i. Intensive care unit
- j. NICU & PICU
- k. Operation theatre
- I. Physiotherapy college

Total no. of MD Pathology PG students per year: 2

Allotment of PG students is done to the respective Guide.

Research methodology workshop is conducted by our institute for research orientation that helps during thesis work.

PG Activities includes the following (A faculty is allotted for each teaching program)

- a. Grossing once weekly
- b. Journal club once fortnightly.
- c. Subject Seminar once fortnightly.
- d. Slide seminar once weekly
- e. Micro teaching once weekly.

MD Pathology PG students are continuously taught during their routine postings by the entire faculty and during emergency duties.

MD Pathology Post graduate students are given allied posting in biochemistry for 1 month & Serology for 15days as per MUHS requirement.

Sd/- Dr. Smita P. Bhide Prof. & Head, Dept. of Pathology

# MIMER MEDICAL COLLEGE -TALEGAON (D)

# M.D. (Pharmacology.) ORIENTATION PROGRAMME

#### Day 1:

- a. Introduction to the department, faculty and other residents by the HOD.
- b. A briefing by the HOD regarding PG teaching schedule, teaching materials available and the departmental library use allocation of place to sit.
- c. A briefing regarding attitude and behavior in with, staff and departmental activities as well as the regular maintenance of a Log Book.
- d. Allotment of PG students to an MUHS approved Guide and Orientation regarding Dissertation Thesis.

## Day 2: Orientation of the infrastructure

- a. Administration: Office, various sections working in the office
- b. Research lab
- c. Central and digital library facilities
- d. Canteen
- e. Auditorium
- f. Resident quarters
- g. OPD
- h. Hospital wards

Teaching Program includes the following (A teacher is allotted for each teaching program)

- a. Theory lectures twice weekly
- b. Journal club once weekly
- c. Seminar once fortnightly
- d. Practical exercises once a month.
- e. Theory Terminal exam every six months. Prelim exam at the end of the six terms

f.	A compulsory Research Methodology workshop during the 1st term is conducted by
	our institution for research orientation that helps during thesis work.
g.	Another compulsory Basic Teaching Workshop usually during the second term.
h.	Participation and attendance at International / National / State level Conferences and
	Workshops.
i.	Two allied subjects' clinical postings of 3 months duration each.
j.	Incidental UG practical teaching exposure.

# MIMER MEDICAL COLLEGE – TALEGAON (D) Department of Microbiology PG Orientation

- PG students are taken to all sections of the department (various Laboratories-Bacteriology, Mycobacteriology, Parasitology, Mycology, Virology, Serology, and Immunology). Thus, they are oriented to the department.
- After visit to the department, they are oriented with daily working of the department.
- They are -made aware of their rotation in the department.
- They are also informed about PG activities (Journal club, Seminars, Slide seminar, case presentations) to be presented by them weekly.
- They are made aware about the UG teaching which they have to conduct.
- They are informed about internal exams which are conducted in the department.

**Prof & Head** 

**Dept. of Microbiology** 

#### DEPARTMENT OF BIOCHEMISTRY

#### POSTGRADUATE ORIENTATION PROGRAMME FOR PG DMLT

#### **Day 1**:

- a. Introduction to the department, faculty and residents by the Prof.& Head.
- b. Overview of academics given by senior faculty of department which will include
- Syllabus periodic assessments, journal &biochemistry books for PG DMLT.
- c. Talk by a faculty regarding teaching schedule, teaching material available and library use.
- d. Talk by faculty: orientation of instruments, software & working of CCL.
- e. Working of various instruments used for clinical biochemistry and their maintenance.
- f. Maintenance of CCL registers.
- g. Orientation of the infrastructure of department and CCL.
- I. Administration: Office, various sections working in the office
- II. Research lab
- III. Central and digital library facilities
- IV. Canteen
- V. Auditorium

#### Total no. of PG DMLT students per year: 10

By rotation students are posted in Pathology, Microbiology & Biochemistry lab.

Teaching is done via Lectures & Practicals.

Prof. and Head Department of Biochemistry

#### **DEPARTMENT OF PATHOLOGY**

#### POSTGRADUATE ORIENTATION PROGRAMME for PG DMLT

#### Day 1:

- f. Introduction to the department, faculty and residents by the Prof.& Head.
- g. Overview of academics given by senior faculty of department which will include Syllabus periodic assessments, journal & Pathology books for PG DMLT
- h. Talk by a faculty regarding teaching schedule, teaching material available and library use.
- Talk by faculty: orientation of instruments, software & working of CCL,
   Histopathology & Cytology labs.
- j. Working of Blood Bank, Blood donation Camps & maintenance of registers in blood bank.
- k. Orientation of the infrastructure
  - n. Administration: Office, various sections working in the office
  - o. Research lab
  - p. Central and digital library facilities
  - q. Canteen
  - r. Auditorium

Total no. of PG DMLT students per year: 10
By rotation students are posted in Pathology, Microbiology & Biochemistry lab.
Teaching is done via Lectures & Practicals.

Sd/- Dr. Smita P. Bhide Prof. & Head, Dept. of Pathology

#### **Certificate Course in Modern Pharmacology**

#### **ORIENTATION PROGRAMME on Day 1 and 2:**

- a. Introduction to the CCMP teaching schedule as well as orientation regarding clinical postings is done by the course Co-ordinator.
- b. Introduction to the concerned departments, viz. Pharmacology, Comm. Medicine, Gen. Surgery, Gen. Medicine, Obs. Gynaec., Paediatrics and the allied subjects. The students are acquainted with the infrastructure available and the concerned faculty of the individual departments.
- c. Tentative teaching program, teaching materials available of individual departments are briefed.
- d. The Co-ordinator also briefs the students about the attitude and behavior in dealing with patients, and departmental staff.
- e. The students are introduced to various other college facilities like Lecture Halls and Library use as well as the canteen and toilets etc.
- f. They are also briefed about the maintenance of regular Practical and Clinical record keeping in a log books with their timely assessments.
- g. The students are informed about the nature and pattern of the examination.
- h. The importance of regular attendance is stressed about.