

**Regulations and Curriculum
For
Doctorate in Medicine (Cardiology)
2019**

D. M. Cardiology



**KALINGA INSTITUTE OF MEDICAL SCIENCES (KIMS)
KUSHABHADRA CAMPUS (KIIT CAMPUS-5), PATIA, BHUBANESWAR-
751024**

KIIT DEEMED TO BE UNIVERSITY



THE EMBLEM

The Emblem of the Kalinga Institute of Medical Sciences is a symbolic expression of the confluence of both Eastern and Western Health Sciences. A central wand with entwined snakes symbolizes Greek and Roman Gods of Health called Hermis and Mercury is adapted as symbol of modern medical science. The wings above it depict Human Soul called Hamsa (Swan) in Indian philosophy. The two twigs of leaves in western philosophy symbolises Olive branches, which is an expression of Peace, Love and Harmony. In Hindu Philosophy it depicts the Vanaspathi (also called as Oushadi) held in the hands of Dhanvanthri, which are the source of all Medicines. The lamp at the bottom depicts human energy (kundalini). The script “Devahitham Yadayahu” inside the lamp is taken from Upanishath Shanthi Manthram (Bhadram Karnebhi Shrunuyanadev...), which says “**May we live the full span of our lives allotted by God in perfect health**” which is the motto of the Kalinga Institute of Medical sciences (PRADYUMN BAL MEMORIAL HOSPITAL)

VISION

Vision & Mission. To be a globally acclaimed Institution, recognized for excellence in **medical** education, scientific research and patient care. ... To provide the best of evidence based **medical** care to patients in an ethical and compassionate environment.

MISSION

To provide state of the art healthcare services to one and all specially to the poor and socially backward class at an affordable cost with up-to-date medical facilities.

QUALITY POLICY

We are committed to maintain the highest standard of care & treatment with special emphasis to patient safety and satisfaction. We constantly strive on improving quality indices and make it our hallmark of practice.

GOAL & OBJECTIVE OF SUPER SPECIALTY MEDICAL EDUCATION PROGRAM

Goal

At the completion of three years super specialty course the professionals should be able to give state of the art tertiary health care in the particular specialty.

Objective

The consultants should be able to take thorough medical history make complete clinical examination, do all diagnosis procedures to reach in diagnosis and at the end complete therapeutic interventions to achieve successful of the treatment of the ailment.

CONTENTS

Chapter-I About D.M. (Doctor of Medicine)	1-6
Chapter-II Course Contents	7-10
Chapter-III Monitoring Learning Progress	11-21
Chapter-IV Medical Ethics Sensitisation and Practice	22-23
Chapter-V Recommended Books and Journals	24-34

CHAPTER- I

About D.M. (Doctor of Medicine)

D. M. Cardiology

In the subjects recognized by Medical Council of India.

1. D.M and M.Ch Courses

D.M.: Candidate seeking admission for D.M courses in any subject must possess recognised degree of MD (or its equivalent recognized degree) in the subject specified in the regulations of the Medical Council of India from time to time.

M.Ch: Candidate seeking admission for M.Ch course in any subject must possess recognised degree of MS (or its equivalent recognized degree) in the subject specified in the regulations of the Medical Council of India from time to time.

2. Obtaining Eligibility Certificate by the University before making Admission

No candidate shall be admitted for any postgraduate degree/diploma course unless the candidate has obtained and produced the eligibility certificate issued by the University. The candidate has to make an application to the University with the following documents along with the prescribed fee:

1. MBBS and MS pass / degree certificate issued by the University.
2. Marks cards of all the university examinations passed MBBS course.
3. Attempt Certificate issued by the Principal.
4. Certificate regarding the recognition of the medical college by the Medical Council of India.
5. Completion of internship certificate.
6. In case internship was done in a non-teaching hospital, a certificate from the Medical Council of India that the hospital has been recognized for internship.
7. Registration by any State Medical Council and
8. Proof of SC/ ST or Category I, as the case may be.

Candidates should obtain the Eligibility Certificate before the last date for admission as notified by the University.

A candidate who has been admitted to postgraduate course should register his / her name in the University within a month of admission after paying the registration fee.

3. Intake of Students: The intake of students to each course shall be in accordance with the ordinance in this behalf.

4. Duration of Study

4.1 D.M /M.Ch: The courses of study shall be for a period of 3 years consisting of 6 terms.

5. Method of training

The training of postgraduate for degree/diploma shall be residency pattern with graded responsibilities in the management and treatment of patients entrusted to his/her care. The participation of the students in all facets of educational process is essential. Every candidate should take part in seminars, group discussions, grand rounds, case demonstration, clinics, journal review meetings, CPC and clinical meetings. Every candidate should be required to participate in the teaching and training programme of undergraduate students. Training should include involvement in laboratory and experimental work, and research studies. Basic medical sciences students should be posted to allied and relevant clinical departments or institutions. Similarly, clinical subjects' students should be posted to basic medical sciences and allied specialty departments or institutions.

6. Attendance, Progress and Conduct

6.1 A candidate pursuing degree/diploma course should work in the concerned department of the institution for the full period as a full time student. No candidate is permitted to run a clinic/laboratory/nursing home while studying postgraduate course.

6.2 Each year shall be taken as a unit for the purpose of calculating attendance.

6.3 Every student shall attend symposia, seminars, conferences, journal review meetings, Grand rounds, CPC, case presentation, clinics and lectures during each year as prescribed by the department and not absent himself / herself from work without valid reasons.

6.4 Every candidate is required to attend a minimum of 80% of the training during each academic year of the post graduate course. Provided further, leave of any kind shall not be counted as part of academic term without prejudice to minimum 80% attendance of training period every year.

6.5 Any student who fails to complete the course in the manner stated above shall not be permitted to appear for the University Examinations.

7. Monitoring Progress of Studies

7.1 Work diary / Log Book - Every candidate shall maintain a work diary and record of his/her participation in the training programmes conducted by the department such as journal reviews; seminars, etc. (please see Chapter IV for model checklists and logbook specimen copy). Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate. The work diary shall be scrutinized and certified by the Head of the Department and Head of the Institution, and presented in the university practical/clinical examination.

7.2 Periodic tests: In case of degree courses of three years duration (MD/MS, DM, MCh.), the concerned departments may conduct three tests, two of them be annual tests, one at the end of first year and the other in the second year. The third test may be held three months before the final examination. The tests may include written papers, practicals / clinicals and viva voce. Records and marks obtained in such tests will be maintained by the Head of the Department and sent to the University, when called for.

In case of diploma courses of two years duration, the concerned departments may conduct two tests, one of them be at the end of first year and the other in the second year three months before the final examination. The tests may include written papers, practicals / clinicals and viva voce.

7.3 Records: Records and marks obtained in tests will be maintained by the Head of the Department and will be made available to the University or MCI.

8. Dissertation/Thesis

8.1 Every candidate pursuing MD/MS degree course is required to carry out work on a selected research project under the guidance of a recognized post graduate teacher. The results of such a work shall be submitted in the form of a dissertation.

8.2 The dissertation is aimed to train a post graduate student in research methods and techniques. It includes identification of a problem, formulation of a hypothesis, search and review of literature, getting acquainted with recent advances, designing of a research study, collection of data, critical analysis, and comparison of results and drawing conclusions.

8.3 Every candidate shall submit to the Registrar (Academic) of the University in the prescribed proforma, a synopsis containing particulars of proposed dissertation work within six months from the date of commencement of the course on or before the dates notified by the University. The synopsis shall be sent through the proper channel.

8.4 Such synopsis will be reviewed and the dissertation topic will be registered by the University. No change in the dissertation topic or guide shall be made without prior approval of the University.

8.5 The dissertation should be written under the following headings:

- i. Introduction
- ii. Aims or Objectives of study
- iii. Review of Literature
- iv. Material and Methods
- v. Results
- vi. Discussion
- vii. Conclusion
- viii. Summary
- ix. References
- x. Tables
- xi. Annexure

8.6 The written text of dissertation shall be not less than 50 pages and shall not exceed 150 pages excluding references, tables, questionnaires and other annexure. It should be neatly typed in double line spacing on one side of paper (A4 size, 8.27" x 11.69") and bound properly. Spiral binding should be avoided. The dissertation shall be certified by the guide, head of the department and head of the Institution.

8.7 Four copies of dissertation thus prepared shall be submitted to the Registrar (Evaluation), six months before final examination on or before the dates notified by the University.

8.8 The dissertation shall be valued by examiners appointed by the University. Approval of dissertation work is an essential precondition for a candidate to appear in the University examination.

8.9 Guide: The academic qualification and teaching experience required for recognition by this University as a guide for dissertation work is as per Medical Council of India Minimum Qualifications for Teachers in Medical Institutions Regulations, 1998. Teachers in a medical college/institution having a total of eight years teaching experience out of which at least five years teaching experience as Lecturer or Assistant Professor gained after obtaining post graduate degree shall be recognized as post graduate teachers.

8.10 Co-guide may be included provided the work requires substantial contribution from a sister department or from another medical institution recognized for teaching/training by KIIT University of Health Sciences/Medical Council of India. The co-guide shall be a recognized post graduate teacher of KIIT University of Health Sciences.

8.11 Change of guide: In the event of a registered guide leaving the college for any reason or in the event of death of guide, guide may be changed with prior permission from the university.

9. Schedule of Examination

The examination for M.D / M.S courses shall be held at the end of three academic years (six academic terms). The examination for D.M and M.Ch courses shall be held at the end of three years. The examination for the diploma courses shall be held at the end of two academic years (four academic terms). The university shall conduct two examinations in a year at an interval of four to six months between the two examinations. Not more than two examinations shall be conducted in an academic year.

10. Scheme of Examination

11. D.M / M.Ch:

The examination shall consist of theory, clinical/practical and viva voce examination.

11.1 (Theory) (Written Examination): The theory examination shall consist of four question papers, each of three hours duration. Each paper shall carry 100 marks. Out of the four papers, the first paper will be on basic medical sciences. Recent advances may be asked in any or all the papers.

11.2 Practical / Clinical Examination:

In case of practical examination it should be aimed at assessing competence, skills of techniques and procedures as well as testing students ability to make relevant and valid observations, interpretation and experimental work relevant to his / her subject.

In case of clinical examination it should aim at examining clinical skills and competence of candidates for undertaking independent work as a specialist. Each candidate should examine at least one long case and two short cases.

The maximum marks for Practical / Clinical shall be 200.

11.3 Viva Voce: Viva Voce examination shall aim at assessing thoroughly depth of knowledge, logical reasoning, confidence and oral communication skills. The maximum marks shall be 100.

11.4 Examiners: There shall be at least four examiners in each subject. Out of them, two shall be external examiners and two shall be internal examiners. The qualification and teaching experience for appointment as an examiner shall be as laid down by the Medical Council of India.

11.5 Criteria for declaring as pass in University Examination: A candidate shall secure not less than 50% marks in each head of passing which shall include (1) Theory, (2) Practical including clinical and viva voce examination.

A candidate securing less than 50% of marks as described above shall be declared to have failed in the examination. Failed candidate may appear in any subsequent examination upon payment of fresh fee to the Registrar (Evaluation).

11.6 Criteria for Pass: Criteria for declaring as pass in University Examination: A candidate shall secure not less than 50% marks in each head of passing which shall include (1) Theory, (2) Practical including clinical and viva voce examination.

A candidate securing less than 50% of marks as described above shall be declared to have failed in the examination. Failed candidate may appear in any subsequent examination upon payment of fresh fee to the Registrar (Evaluation).

11.7 Declaration of distinction: A successful candidate passing the University examination in first attempt will be declared to have passed the examination with distinction, if the grand total aggregate marks is 75 percent and above. Distinction will not be awarded for candidates passing the examination in more than one attempt.

11.8 Examiners: There shall be at least four examiners in each subject. Out of them, two shall be external examiners and two shall be internal examiners. The qualification and teaching experience for appointment as an examiner shall be as laid down by the Medical Council of India.

12. Number of Candidates per day. The maximum number of candidates for practical/clinical and viva-voce examination shall be as under:

MD / MS Course: Maximum of 6 per day

DM / M.Ch Course: Maximum of 3 per day

CHAPTER-II

Course Contents

Goal

At the end of the course, the candidate should be able to perform diagnostic and therapeutic interventions independently.

Essential Knowledge

All aspects of cardiology starting from basic medical sciences related to cardiology to recent advances in cardiology.

Graded Responsibility in care of patients and operative works

- I Year : Basic medical sciences related to cardiology and general management of cardiac problems.
- II Year: All aspects of clinical cardiology and diagnostic procedures
- III Year : Recent advances including all interventional procedures and six months special training in one of the following.
- a) Adult Cardiology
 - b) Paediatric Cardiology
 - c) Electrophysiology
 - d) Interventional Cardiology
 - e) Cardiac CT and MRI

Teaching and Learning Activities

A candidate pursuing the course should work in the institution as a full time student. No candidate should be permitted to run a clinic / laboratory / nursing home while studying postgraduate course. Each year should be taken as a unit for the purpose of calculating attendance.

Every student shall attend teaching and learning activities during each year as prescribed by the department and not absent himself/herself from work without valid reasons.

A list of teaching and learning activities designed to facilitate students acquire essential knowledge and skills outlined is given below. Depending on the facilities available, any or all of these methods may be employed.

1. **Lectures:** Lectures are to be kept to a minimum. They may, however, be employed for teaching certain topics. Lectures may be didactic or integrated.
 - a. Didactic lectures: Recommended for selected common topics for post graduate students of all specialties. Few topics are suggested as examples:

- 1) Bio-statistics
- 2) Use of library
- 3) Research Methods
- 4) Medical code of conduct and medical ethics
- 5) National health and disease control programmes
- 6) Communication skills etc.

These topics may preferably taken up in the first few weeks of the 1st year.

- b. **Integrated Lectures:** These are recommended to be taken by multidisciplinary teams for selected topics, eg. Jaundice, Diabetes mellitus, Thyroid etc.
2. **Journal Club:** Recommended to be held once a week. All the PG students are expected to attend and actively participate in discussion and enter in the Log Book relevant details. Further, every candidate must make a presentation from the allotted journal(s) of selected articles at least four times a year and a total of 12 presentations in three years. The presentations would be evaluated using check lists and would carry weightage for internal assessment. (See Checklist I of Internal Assessment). A time table with names of the student and the moderator should be announced at the beginning of every year.
3. **Subject Seminar:** Recommended to be held once a week. All the PG students are expected to attend and actively participate in discussion and enter in the Log Book relevant details. Further, every candidate must present on selected topics at least four times a year and a total of 12 seminar presentations in three years. The presentations would be evaluated using checklists and would carry weightage for internal assessment (See Check list II of Internal Assessment). A timetable for the subject with names of the student and the moderator should be scheduled at the beginning of every year.
4. **Student Symposium:** Recommended as an optional multi disciplinary programme. The evaluation may be similar to that described for subject seminar.
5. **Clinico-Pathological Conference:** Recommended once a month for all post graduate students. Presentation be done by rotation. If cases are not available due to lack of clinical postmortems, it could be supplemented by published CPCs.
6. **Inter Departmental Meetings:** Strongly recommended particularly with departments of Pathology and Radio-Diagnosis at least once a week. These meetings should be attended by postgraduate students and relevant entries must be made in the Log Book.

Pathology: A dozen interesting cases may be chosen and presented by postgraduate students and discussed by them as well as the senior staff of Plastic surgery department. The staff of Pathology department would then show the slides and present final diagnosis. In these sessions the advance immuno-histo-chemical techniques, the burgeoning markers other recent developments can be discussed.

Radio-diagnosis: Interesting cases and the imaging modalities should be discussed.

7. **Teaching Skills:** Postgraduate students must teach under graduate students (Eg. Medical, nursing) by taking demonstrations, bedside clinics, tutorials, lectures etc). Assessment is made using a checklist by surgery faculty as well as students. (See model checklist in Checklist). Record of their participation be kept in Log Book. Training of postgraduate students in Educational Science and Technology is recommended.
8. **Continuing Medical Education Programmes (CME):** At least 2 state level CME programmes should be attended by each student in 3 years.
9. **Conferences:** Attending conferences is optional. However it should be encouraged.

Rotation and posting in other departments

- | | |
|--------------------------------------|-----------|
| 1. Cardiac surgery department | - 1 month |
| 2. Cardiac Anesthesiology department | - 1 month |
| 3. Nuclear cardiology | - 1 month |
| 4. Electrophysiology | - 1 month |
| 5. Paediatric cardiology | - 3 month |

University examination

Eligibility: The following requirements should be fulfilled by every candidate to become eligible to appear for the final examination.

Attendance, Progress and Conduct: Every student shall attend symposia, seminars, conferences, journal review meetings, grand rounds, CPC, Case presentation, clinics and lectures during each year as prescribed by the department and not absent himself/herself from work without valid reasons.

Every candidate shall maintain a work diary and Log Book for recording him/her participation in the training programmes conducted by the department such as journal reviews, seminars, etc. Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the Head of the department and Head of the Institution and among other things forms the basis for certifying satisfactory progress. The Log Book if demanded be presented in the University clinical or viva-voce examination.

Every candidate should have fulfilled the minimum attendance requirement prescribed by the Medical Council of India and respective University (80% of the training during each academic year of the postgraduate course. Provided further, leave of any kind shall not be counted as part of academic term without prejudice to minimum 80 % attendance of training period every year).

Scheme of Examination

The examination shall consist of:

- Written papers (theory),
- Clinical examination and

- Viva-voce.

1. Written Examination (Theory)

There shall be four question papers, each of three hours duration. Each paper shall consist of two long essay questions each question carrying 20 marks and 6 short essay questions each carrying 10 marks. Total marks for each paper will be 100. Questions on recent advances may be asked in any or all the papers. Details of distribution of topics for each paper will be as follows:

Part I : Principles and Practice of Cardiology – Basic Science bearing cardiology

Part II : Coronary Artery Diseases

Part III : Congenital and Rheumatic Heart Diseases

Part IV : Other Cardio Vascular Diseases

Note: The distribution of topics shown against the papers are suggestive only.

2. Clinical Examination:

It should aim at examining clinical skills and competence of candidates for undertaking independent work as a specialist. Each candidate should examine at least one long case and two short cases. The total marks for clinical examination shall be 200.

3. Viva Voce:

Viva Voce Examination shall aim at assessing depth of knowledge, logical reasoning, confidence and oral communication skills. The total marks shall be 100.

D. M. Cardiology	Theory	Clinical/Practical	Viva-voce	Grand Total
	400	200	100	700

CHAPTER-III

Monitoring Learning Progress

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only also helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Checklists are given in Chapter IV.

The learning out comes to be assessed should included: (i) Personal Attitudes, (ii) Acquisition of Knowledge, (iii) Clinical and operative skills, and (iv) Teaching skills.

i)Personal Attitudes. The essential items are:

- Caring attitudes
- Initiative
- Organisational ability
- Potential to cope with stressful situations and undertake responsibility
- Trust worthiness and reliability
- To understand and communicate intelligibly with patients and others
- To behave in a manner which establishes professional relationships with patients and colleagues
- Ability to work in team
- A critical enquiring approach to the acquisition of knowledge

The methods used mainly consist of observation. It is appreciated that these items require a degree of subjective assessment by the guide, supervisors and peers.

ii)Acquisition of Knowledge: The methods used comprise of 'Log Book' which records participation in various teaching / learning activities by the students. The number of activities attended and the number in which presentations are made are to be recorded. The log book should periodically be validated by the supervisors. Some of the activities are listed. The list is not complete. Institutions may include additional activities, if so, desired.

Journal Review Meeting (Journal Club): The ability to do literature search, in depth study, presentation skills, and use of audio- visual aids are to be assessed. The assessment is made by faculty members and peers attending the meeting using a checklist (see Model Checklist – I, Chapter IV)

Seminars / Symposia: The topics should be assigned to the student well in advance to facilitate in depth study. The ability to do literature search, in depth study, presentation skills and use of audio- visual aids are to be assessed using a checklist (see Model Checklist-II, Chapter IV)

Clinico-pathological conferences: This should be a multidisciplinary case study of an interesting case to train the candidate to solve diagnostic and therapeutic problems by using an analytical approach. The presenter(s) are to be assessed using a check list similar to that used for seminar.

Medical Audit: Periodic morbidity and mortality meeting be held. Attendance and participation in these must be insisted upon. This may not be included in assessment.

iii) Clinical skills

Day to Day work: Skills in outpatient and ward work should be assessed periodically. The assessment should include the candidates' sincerity and punctuality, analytical ability and communication skills (see Model Checklist III, Chapter IV).

Clinical meetings : Candidates should periodically present cases to his peers and faculty members. This should be assessed using a check list (see Model checklist IV, Chapter IV).

Clinical and Procedural skills: The candidate should be given graded responsibility to enable learning by apprenticeship. The performance is assessed by the guide by direct observation. Particulars are recorded by the student in the log book. (Table No.3, Chapter IV)

iv) Teaching skills : Candidates should be encouraged to teach undergraduate medical students and paramedical students, if any. This performance should be based on assessment by the faculty members of the department and from feedback from the undergraduate students (See Model checklist V, Chapter IV)

v) Periodic tests: The departments may conduct three tests, two of them be annual tests, one at the end of first year and the other in the second year. The third test may be held three months before the final examination. The tests may include written papers, practicals / clinicals and viva voce.

vi) Work diary / Log Book- Every candidate shall maintain a work diary and record his/her participation in the training programmes conducted by the department such as journal reviews, seminars, etc. Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate.

vii) Records: Records, log books and marks obtained in tests will be maintained by the Head of the Department and will be made available to the University or MCI.

Log book

The log book is a record of the important activities of the candidates during his training, Internal assessment should be based on the evaluation of the log book. Collectively, log books are a tool for the evaluation of the training programme of the institution by external agencies. The record includes academic activities as well as the presentations and procedures carried out by the candidate.

Format for the logbook for the different activities is given in Tables 1,2 and 3 of Chapter IV. Copies may be made and used by the institutions.

Procedure for defaulters: Every department should have a committee to review such situations. The defaulting candidate is counseled by the guide and head of the department. In extreme cases of default the departmental committee may recommend that defaulting candidate be withheld from appearing the examination, if she/he fails to fulfill the requirements in spite of being given adequate chances to set himself or herself right.

CHAPTER-III (CONTD.)

Format of Model Check Lists

Check List -1. MODEL CHECK-LIST FOR EVALUATION OF JOURNAL REVIEW PRESENTATIONS

Name of the Student:

Name of the Faculty/Observer:

Date:

Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Article chosen was					
2.	Extent of understanding of scope & objectives of the paper by the candidate					
3.	Whether cross references have been consulted					
4.	Whether other relevant publications consulted					
5.	Ability to respond to questions on the paper / subject					
6.	Audio-Visual aids used					
7.	Ability to defend the paper					
8.	Clarity of presentation					
9.	Any other observation					
	Total Score					

Check List - 2. MODEL CHECK-LIST FOR EVALUATION OF SEMINAR PRESENTATIONS

Name of the Student:

Name of the Faculty/Observer:

Date:

Sl. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Whether other relevant publications consulted					
2.	Whether cross references have been consulted					
3.	Completeness of Preparation					
4.	Clarity of Presentation					
5.	Understanding of subject					
6.	Ability to answer questions					
7.	Time scheduling					
8.	Appropriate use of Audio-Visual aids					
9.	Overall Performance					
10.	Any other observation					
	Total Score					

Check List - 3**MODEL CHECK LIST FOR EVALUATION OF CLINICAL WORK IN WARD / OPD**

(To be completed once a month by respective Unit Heads including posting in other departments)

Name of the Student:

Name of the Unit Head:

Date:

Sl. No.	Points to be considered:	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Regularity of attendance					
2.	Punctuality					
3.	Interaction with colleagues and supportive staff					
4.	Maintenance of case records					
5.	Presentation of cases during rounds					
6.	Investigations work up					
7.	Beside manners					
8.	Rapport with patients					
9.	Counseling patient's relatives for blood donation or PM					
10.	Over all quality of Ward work					
	Total Score					

Check List – 4 EVALUATION FORM FOR CLINICAL PRESENTATION

Name of the Student:

Name of the Faculty:

Date:

Sl. No.	Points to be considered	Poor 0	Below Average 1	Average 2	Above Average 3	Very Good 4
1.	Completeness of history					
2.	Whether all relevant points elicited					
3.	Clarity of Presentation					
4.	Logical order					
5.	Mentioned all positive and negative points of importance					
6.	Accuracy of general physical examination					
7.	Whether all physical signs elicited correctly					
8.	Whether any major signs missed or misinterpreted					
9.	Diagnosis: Whether it follows logically from history and findings					
10	Investigations required ▪ Complete list					
	▪ Relevant order					
	▪ Interpretation of investigations					
11.	Ability to react to questioning Whether it follows logically from history and findings					
12.	Ability to defend diagnosis					
13.	Ability to justify differential diagnosis					
14.	Others					
	Grand Total					

Check List - 5**MODEL CHECK LIST FOR EVALUATION OF TEACHING SKILL PRACTICE**

Sl. No.		Strong Point	Weak Point
1.	Communication of the purpose of the talk		
2.	Evokes audience interest in the subject		
3.	The introduction		
4.	The sequence of ideas		
5.	The use of practical examples and/or illustrations		
6.	Speaking style (enjoyable, monotonous, etc., specify)		
7.	Attempts audience participation		
8.	Summary of the main points at the end		
9.	Asks questions		
10.	Answers questions asked by the audience		
11.	Rapport of speaker with his audience		
12.	Effectiveness of the talk		
13.	Uses AV aids appropriately		

LOG BOOK

Table 1: Academic activities attended

Name:

Admission Year:

College:

Date	Type of Activity Specify Seminar, Journal Club, Presentation, teaching	UG	Particulars

LOG BOOK

Table 2 : Academic presentations made by the student

Name:

Admission Year:

College:

Date	Topic	Type of Presentation Specify Seminar, Journal Club, Presentation, UG teaching etc.

LOG BOOK

Table 3 : Diagnostic and Operative procedures performed

Name:

Admission Year:

College:

Date	Name	ID No.	Procedure	Category O, A, PA, PI*

- * Key:**
- O - Washed up and observed
 - A - Assisted a more senior Surgeon
 - PA - Performed procedure under the direct supervision of a senior surgeon
 - PI - performed independently

Model Overall Assessment Sheet

Name of the College:
Academic Year:

Check List No	Particulars	Name of Student and Mean Score				
		A	B	C	D	E
I	Journal Review Presentations					
II	Seminars					
III	Clinical work in wards					
IV	Clinical presentation					
V	Teaching skill practice					
Total Score						

Note: Use separate sheet for each year.

CHAPTER-IV

Medical Ethics Sensitisation and Practice

Introduction

There is now a shift from the traditional individual patient, doctor relationship, and medical care. With the advances in science and technology and the needs of patient, their families and the community, there is an increased concern with the health of society. There is a shift to 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. To accomplish the Goal (i), General Objective (ii) stated in Chapter II (pages 9 & 10), and develop human values it is urged that **ethical sensitisation** be achieved by lectures or discussion on ethical issues, clinical case discussion of cases with an important ethical component and by including ethical aspects in discussion in all case presentation, bedside rounds and academic postgraduate programmes.

Course Contents

1. Introduction to Medical Ethics
 - What is Ethics
 - What are values and norms
 - Relationship between being ethical and human fulfillment
 - How to form a value system in one's personal and professional life
 - Heteronomous Ethics and Autonomous Ethics
 - Freedom and personal Responsibility
2. Definition of Medical Ethics
 - Difference between medical ethics and bio-ethics
 - Major Principles of Medical Ethics
 - Beneficence = fraternity
 - Justice = equality
 - Self determination (autonomy) = Liberty
3. Perspective of Medical Ethics
 - The Hippocratic oath
 - The Declaration of Helsinki
 - The WHO Declaration of Geneva
 - International code of Medical Ethics (1993)
 - Medical Council of India Code of Ethics
4. Ethics of the Individual
 - The patient as a person
 - The Right to be respected
 - Truth and Confidentiality
 - The autonomy of decision
 - The concept of disease, health and healing
 - The Right to health
 - Ethics of Behaviour modification
 - The Physician – Patient relationship
 - Organ donation
5. The Ethics of Human life
 - What is human life
 - Criteria for distinguishing the human and the non-human
 - Reasons for respecting human life
 - The beginning of human life
 - Conception, contraception

Abortion

Prenatal sex-determination

In vitro fertilization (IVF), Artificial Insemination by Husband (AIH)

Artificial Insemination by Donor (AID),

Surrogate motherhood, Semen Intrafallopian Transfer (SIFT),

Gamete Intrafallopian Transfer (GIFT), Zygote Intrafallopian Transfer (ZIFT),

Genetic Engineering

6. The Family and Society in Medical Ethics
 - The Ethics of human sexuality
 - Family Planning perspectives
 - Prolongation of life
 - Advanced life directives – The Living Will
 - Euthanasia
 - Cancer and Terminal Care
7. Profession Ethics
 - 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
8. Research Ethics
 - Animal and experimental research / humanness
 - Human experimentation
 - Human volunteer research – Informed Consent
 - Drug trials
9. Ethical workshop of cases
 - Gathering all scientific factors
 - Gathering all human factors
 - Gathering all value factors
 - Identifying areas of value – conflict, Setting of priorities,
 - Working out criteria towards decisions