

# **D**PU

#### Dr. D.Y. PATIL VIDYAPEETH, PUNE (Deemed to be University)

(Re-accredited by NAAC with a CGPA of 3.62 on a four point scale at 'A' Grade) (An ISO 9001 : 2015 Certified University)

Dr. A. N. Suryakar Registrar

#### Ref. No. : DPU/875-vii/20)9 Date : 11/09/2019

#### NOTIFICATION

Whereas in pursuance of the following decisions taken by the Board of Management, it is hereby notified to all concerned that the "Syllabus for PG Medical and Surgical Specialties – 2014-15" is revised upto July 2019 and hereby published.

- Changes in syllabus for UG and PG in General Medicine, Pulmonary Medicine and General Surgery vide Resolution No. BM-07-(iii)-4 dated 28<sup>th</sup> January, 2014.
- Updation in UG and PG syllabus of General Medicine, Obstetrics & Gynecology, Orthopedics, Anaesthesiology, ENT and Ophthalmology vide Resolution No. BM-04(i)-15, dated 31<sup>st</sup> March, 2015.
- Modifications in pattern of PG practical examinations for MD (General Medicine), MD (Pediatrics), MS (General Surgery), and MS (OBGY) vide Resolution No. BM-26(iv)-15, dated 29<sup>th</sup> December, 2015.
- > Updation in PG syllabus in Radio-Diagnosis subject vide Resolution No. BM-26(vii)-15, dated 29<sup>th</sup> December, 2015.
- Introduction of Bioethical aspects in various chapters of all subjects vide Resolution No. BM-26(xi)-15, dated 29<sup>th</sup> December, 2015
- Partial Modifications in Pattern of PG Practical Examinations for MD (General Medicine) and MS (General Surgery) vide Resolution No. BM-17(vii)-16, dated 22<sup>nd</sup> September, 2016.
- Modifications in the syllabus of MD (Emergency Medicine) vide Resolution No. BM-35(iv)-18, dated 12<sup>th</sup> October, 2018.
- Changes in teaching and assessment of MS (Ophthalmology), vide Resolution No. BM-35(v)-18, dated 12<sup>th</sup> October, 2018.
- Changes in the practical examination pattern of M.S. (Orthopedics) vide Resolution No. BM-35(vi)-18, dated 12<sup>th</sup> October, 2018.
- Change in practical examination pattern of MD (Dermatology) vide Resolution No.BM-35(vii)-18, dated 12<sup>th</sup> October, 2018.
- Graduate Attributes, Programme Outcomes (POs), Course Outcomes (Cos) and gap analysis for all courses of UG and PG Programmes for Para-Clinical and Surgical Subjects vide Resolution No. BM-10(vii)-19 dated, 12<sup>th</sup> April, 2019.
- Interdisciplinary subjects (for Surgical Subjects) of M.B.B.S, M.D./M.S. and Super-specialty (D.M./M.Ch.) Programs under the Faculty of Medicine vide Resolution No. BM-10(viii) dated 12<sup>th</sup> April, 2019.
- Changes in syllabus of MD (General Medicine) and MD (Psychiatry) vide Resolution No. BM-27(iv)-19 dated 30<sup>th</sup> July, 2019.
- Modifications in MD (Respiratory Medicine) Practical examination pattern vide Resolution No. BM-27(vii)-19 dated 30 July 2019.



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# MAPPING OF PROGRAMME OUTCOMES [POs] AND COURSE OUTCOMES [COs] OF PG PROGRAMMES

No.	By the end of the programme, the Postgraduate will have / be:		
PO 1	Knowledge and Skills		
PO 2	Planning and problem solving abilities		
PO 3	Communication		
PO 4	Research Aptitude		
PO 5	Professionalism and Ethics		
PO 6	Leadership		
PO 7	Societal Responsibilities		
PO 8	Environment and Sustainability		
PO 9	Lifelong Learner		

# MD GENERAL MEDICINE PROGRAMME

<b>Course Code</b>	Course Title
PGM01	MD General Medicine

## **PROGRAMME OUTCOMES**

CO No.	At the end of the course, the learner	Mapped
	should be able to:	Programme
		Outcomes
PGM01.1	Practice efficiently internal medicine	PO1,PO2,PO3,
	specialty, backed by scientificknowledge	PO4,PO5, PO6,
	including basic sciences and skills	PO7,PO8, PO9
PGM01.2	Diagnose and manage majority of	PO1,PO2,PO3,
	conditions in his specialty clinically	PO4,PO5, PO6,
	andwith the help of relevant	PO7,PO9
	investigations	
PGM01.3	Exercise empathy and a caring attitude	PO1,PO3,PO5,
	and maintain professional	PO6,PO7,PO9
	integrity, honesty and high ethical	
	standards	
PGM01.4	Plan and deliver comprehensive	PO1,PO2,PO3,P
	treatment using the principles of rational	O4,PO5, PO6,
	drugtherapy	PO7, PO8,PO9
PGM01.5	Plan and advise measures for the	PO1, PO2, PO3,
	prevention and rehabilitation of	PO5, PO6, PO7,
	patientsbelonging to his specialty of	PO9
	internal medicine	
PGM01.6	Manage emergencies efficiently by	PO1,PO2,PO3,
	providing Basic Life Support (BLS)	PO4, PO5, PO6,
	andAdvanced Life Support (ALS) in	PO7, PO8,PO9
	emergency situations	
PGM01.7	Recognize conditions that may be	PO1, PO2, PO3,
	outside the area of his	PO5, PO7
	specialty/competence and refer them to	
	an appropriate super specialist	
PGM01.8	Demonstrate skills in documentation of	PO1, PO2, PO4,
	casedetails including	PO5, PO6, PO7,
	epidemiologicaldata	PO8, PO9
PGM01.9	Play the assigned role in the	PO1,PO2, PO3,
	implementation of National Health	PO4, PO5, PO6,
	Programs	PO7, PO8, PO9

CO No.	At the end of the course, the learner	Mapped
	should be able to:	Programme
		Outcomes
PGM01.10	Demonstrate competence in basic	PO1, PO2, PO3,
	concepts of research methodology	PO4, PO5, PO6,
	andclinical epidemiology; and	PO9
	preventive aspects of various disease	
	states	
PGM01.11	Be a motivated 'teacher' - defined as one	PO1, PO2, PO3,
	keen to share knowledge and skills with	PO4, PO5, PO6,
	a colleague or a junior or any learner	PO7, PO8, PO9
PGM01.12	Continue to evince keen interest in	PO1,PO3,PO4,
	continuing education irrespective of	PO5, PO6, PO7,
	whether he/she is in a teaching	PO9
	institution or is practicing and	
	useappropriatelearning resources	
PGM01.13	Be well versed with his medico-	PO1,PO2, PO3,
	legalresponsibilities	PO4, PO5, PO6,
		PO7, PO8,PO9
PGM01.14	Undertake audit, use information	PO1,PO2,PO3,
	technology tools and carry out research -	PO4, PO5, PO6,
	both basic and clinical with the aim of	PO9
	publishing the work and presenting	
	thework at scientific forums.	



#### **GENERAL MEDICINE**

#### **PREAMBLE:**

The purpose of PG education in General Medicine is to create specialists who would provide high quality health care and advance the cause of science through research & training. A post-graduate student who after undergoing the required training should be able to deal effectively with the needs of the community and should be competent to handle all problems related to his/her specialty including recent advances. The student should also acquire skill in teaching of medical/para-medical students in the subject that he/she has received his/her training. He/she should be aware of his/her limitations. The student is also expected to know the principles of research methodology and modes of accessing literature.

#### **OBJECTIVES OF PG TRAINING IN GENERAL MEDICINE**

(Based upon MCI recommendations 2018)

The postgraduate training should enable the student to:

- 1. Practice efficiently internal medicine specialty, backed by scientific knowledge including basic sciences and skills
- 2. Diagnose and manage majority of conditions in his specialty (clinically and with the help of relevant investigations
- 3. Exercise empathy and a caring attitude and maintain professional integrity, honesty and high ethical standards
- 4. Plan and deliver comprehensive treatment using the principles of rational drug therapy
- 5. Plan and advise measures for the prevention and rehabilitation of patients belonging to his specialty;
- 6. Manage emergencies efficiently by providing Basic Life Support (BLS) and Advanced Life Support (ALS) in emergency situations
- 7. Recognize conditions that may be outside the area of the specialty / competence and refer them to an appropriate specialist
- 8. Demonstrate skills in documentation of case details including epidemiological data
- 9. Play the assigned role in the implementation of National Health Programs

- 10. Demonstrate competence in basic concepts of research methodology and clinical epidemiology; and preventive aspects of various disease states
- 11. Be a motivated 'teacher' defined as one keen to share knowledge and skills with a colleague or a junior or any learner
- 12. Continue to evince keen interest in continuing education irrespective of whether he/she is in a teaching institution or is practicing and use appropriate learning resources
- 13. Be well versed with his medico-legal responsibilities
- 14. Undertake audit, use information technology tools and carry out research- both basic and clinical, with the aim of publishing the work and presenting the work at scientific forums.

The intended outcome of training programme is a consultant specialist who canpractice medicine at a defined level of competency in different practice settings. i.e. Ambulatory (outpatient), inpatient, intensive care and emergency medicine.

The student is expected to know his subject in depth; however, emphasis should be on the diseases/health problems most prevalent in that area. Knowledge of recent advances and basic sciences as applicable to his/her specialty should get high priority. Competence inskills commensurate with the specialty (actual hands-on training) must be ensured.

No limit can be fixed and no fixed number of topics can be prescribed as course contents.

#### **EXPECTED COMPETENCIES** (Based upon MCI recommendations 2018) **Clinical Assessment Skills**

- Elicit a detailed clinical history
- Perform a thorough physical examination of all the systems

#### **Procedural skills**

- Test dose administration
- Mantoux test
- Sampling of fluid for culture
- IV- Infusions
- Intravenous injections
- Intravenous cannulation
- ECG recording
- Pleural tap
- Lumbar puncture
- TMT
- Holter Monitoring
- Cardiopulmonary Resuscitation (CPR)
- Central venous line insertion, CVP monitoring
- Blood and blood components matching and transfusions
- Arterial puncture for ABG
- Fine needle aspiration cytology (FNAC) from palpable lumps
- Bone marrow aspiration and biopsy
- Abdominal paracentesis diagnostic
- Aspiration of liver abscess
- Pericardiocentesis
- Joint fluid aspiration
- Liver biopsy
- Nerve/ muscle/ skin/ kidney/ pleural biopsy
- Nebulization
- Inhaler therapy
- Oxygen delivery
- Monitoring a sick person
- Endotracheal intubation
- CPR
- Using a defibrillator
- Pulse oximetry
- Feeding tube/Ryle's tube, stomach wash
- Naso-gastric intubation
- Urinary catheterization male and female

- Haemodialysis
- Certification of Brain death
- Intercostal tube placement with underwater seal Thoracocentesis
- Sedation, Analgesia

## Laboratory-Diagnostic Abilities

- Urine protein, sugar, microscopy
- Peripheral blood smear
- Malarial smear
- Ziehl Nielson smear-sputum, gastric aspirate
- Gram's stain smear-CSF, pus
- Stool pH, occult blood, microscopy
- KOH smear
- Cell count CSF, pleural, peritoneal, any serous fluid

## **Observes the procedures**

- Subdural, ventricular tap
- Joint Aspiration Injection

#### Endoscopic Retrograde Cholangio- Pancreatography (ERCP)

• Peritoneal dialysis

#### **Interpretation Skills**

- Clinical data (history and examination findings), formulating a differential diagnosis in
- order of priority, using principles of clinical decision making, plan investigative work-up,
- keeping in mind the cost-effective approach i.e. problem solving and clinical decision making.
- Blood, urine, CSF and fluid investigations hematology, biochemistry
- X-ray chest, abdomen, bone and joints
- ECG
- Treadmill testing
- ABG analysis
- Ultrasonography
- CT scan chest and abdomen
- CT scan head and spine
- MRI
- Barium studies
- IVP, VUR studies

- Pulmonary function tests
- Immunological investigations
- Echocardiographic studies
- Nerve Conduction studies, EEG, Evolved Potential interpretation

#### Interpretation under supervision

- Hemodynamic monitoring
- Nuclear isotope scanning
- MRI spectroscopy/SPECT
- Ultrasound guided aspiration and biopsies

## **Communication skills**

- While eliciting clinical history and performing physical examination
- Communicating health, and disease
- Communicating about a seriously ill or mentally abnormal
- Communicating death
- Informed consent
- Empathy with patient and family members
- Referral letters, and replies
- Discharge summaries
- Death certificates
- Pre-test counselling for HIV
- Post-test counselling for HIV
- Pedagogy-teaching students, other health functionaries-lectures, bedside clinics,
- discussions
- Health education prevention of common medical problems, promoting healthy
- lifestyle, immunization, periodic health screening, counselling skills in risk
- factors for common malignancies, cardiovascular disease, AIDS
- Dietary counseling in health and disease
- Case presentation skills including recording case history/examination, preparing
- follow-up notes, preparing referral notes, oral presentation of new cases/follow-upcases
- Co-coordinating care team work (with house staff, nurses, faculty etc.)
- Linking patients with community resources
- Providing referral
- Genetic counseling

## Others

Demonstrating

- Professionalism
- ethical behavior (humane and professional care to patients)

Utilization of information technology

- Medline search, Internet access, computer usage

Research methodology

- Designing a study
- interpretation and presentation of scientific data

Self-directed learning

- Identifying key information sources
- literature searches
- information management

Therapeutic decision-making

- Managing multiple problems simultaneously
- assessing risks, benefits and costs of treatment options
- Involving patients in decision-making
- selecting specific drugs within classes
- rational use of drugs

PG TEACHING/TRAINING PROGRAMME TIMETABLE
<b>Time:</b> 2.00pm to 3.30pm

Sr.	Days	Presentation	Year
No.			
1	Every Monday	Seminar	JR- I
2	Every Tuesday	Case Discussion	JR- III
3	Every Wednesday $1^{st}$ , $2^{nd}$ , $4^{th}$ , & $5^{th}$	day 1 <sup>st</sup> , 2 <sup>nd</sup> , 4 <sup>th</sup> , & Journal Class	
4	Every Thursday	Group Discussion	JR- III
5	3 <sup>rd</sup> Wednesday of Every Month	CPC/Quiz	JR- III
6	First Friday of Every Month	Departmental Death Audit	JR- II
7	Second Friday of Every Month	Guest Lecture	All JR
8	Last Friday of Every Month	Institutional Clinical	All JR
		Meeting	

- Monthly Video Conference with Johns Hopkins University, USA for Global Grand Rounds in Infectious Diseases on last Wednesday of every month at 5.30pm
- Twice a month Online lectures from Institute of Liver & Biliary Diseases(ILBS), New Delhi with presentation & discussions on difficult cases of hepatobiliary diseases.

### **ROTATION PROGRAMME**

Secondyear PG students are rotated to the allied specialties and as under

- 1. MICU-1Month
- 2. Cardiology -1Month
- 3. Nephrology- 1Month
- 4. Neurology- 1Month
- 5. Emergency Medicine- 1Month
- 6. Community Health Camps year round by rotation (1 Month)

## CERTIFICATE OF ROTATION PROGRAMME

Name of Student: Dr. ..... (Batch 20 - )

Dept.	Date	Signature, Remarks & Stamp of Head
MICU/ICU		
Cardiology		
Nephrology		
Neurology		
Community Camps		
Emergency Medicine		

PG Teaching Inchrge

Professor & Hod

(This certificate should to be attached to Logbook)

# MONTHLY DUTIES FOR PGS BY ROTATION

- o MICU/CCU
- 2D-Echo room
- o GI Endoscopy Room
- Community Camps

## EXPOSURE TO SPECIALTY CLINICS BY PGs

Sr.	Specialty Clinic	On, Tues, Fri	Time
No.			
1	Diabetes Clinic	Monday	2pm-4pm
2	Gastroenterology Clinic	Monday	12.30pm-1.30pm
3	Rheumatology Clinic	Tuesday	12 noon-1pm
4	Geriatric Clinic	Wednesday	2pm-4pm
5	Oncology clinic	Friday	11am -12 noon
6	Endocrinology Clinic	Tue/Thurs	12 noon-1pm
7	Cardiology	Mon-Satur	10am -1pm
8	Neurology	Mon-Satur	9am-1pm
9	Nephrology	Mon, Tues, Fri	9am-1pm
10	Hematology	Mon,Wed,Fri	9 am to 1pm

# PATTERN OF PG LOGBOOK

# LOGBOOK: POST GRADUATE COURSE

Sr.	Particular		
No.		No.	
1	Bio-Data		
2	Academic Activities		
3	Clinical and Scientific Meetings		
4	Symposia/Seminars/Workshops		
5	Journal Club		
6	Conference Attended		
7	Research Activities		
8	Teaching Rounds Attended		
9	Case Presentation		
10	Clinics/ Lecture/ Treatment undertaken		
11	Procedures undertaken		
12	For Surgery Subjects		
13	Remarks of the guide including		
14	Seminars		
15	Slide Seminars		
16	Group discussions		
17	Assigned Exercise		
18	Record of intrinsic and extrinsic postings		
19	Undergraduate teaching assignments		
20	Personal Notes		

# **BIO-DATA**

Full Name of Student :-

Date of Joining :-

Course :-

Date of Birth :-

Permanent Address :-

Telephone No.Office :-

Residence :-

Mobile :-

Local Guardian's Address :-

Telephone No. :-

Campus Address :-

Mobile No.:-

Sr. No.	Degree/ Diploma	University/ Institute	Year of Passing	Attempts	Awards Year

Previous service if any\_\_\_\_\_

# **Clinical and Scientific Meeting**

Sr. No.	Date	Topic /Discussed Cases



#### Journal Club

Sr. No.		Date:	Present / Attended	
Topic/ Title of Paper				
Journal	Vol	Pages	Year	
Sign. of Faculty -				

#### **Teaching Rounds Attended**

Sr. No.	Date/Day	Name of Professor/ Assoc Prof.
	2	

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	man	

Sr. no.	Date:	Present/ Attended		
Topic/Title of Paper				
References, if presented				
Signature -				

#### ELIGIBILITY CRITERIA FOR APPEARING IN PG EXAMINATION

- 1. Onepublication (proof of paper sent/accepted for publication / published)
- 2. One poster presentation in state/national conference (copy of certificate needed)
- 3. One oral presentation in state/national conference (certificate needed)
- 4. Dissertation submission & letter of acceptance (to be obtained from university)

#### **LEAVE RULES :**

- 1. A PG is entitled to 7 days C.L. in one term of 6 months.
- 2. Total of 10 days of special CL can be availed by PGs in one academic term for attending conferences/ CMEs/Workshops or training programmes.
- 3. Maternity leave is permitted to female PG students but If her attendance falls below 80%, she will be required to repeat one term.

# FORMAT OF PROGRESS REPORT

Dr. D. Y. Patil Medical College, Hospital & Research Centre (A constituent college of Dr. D. Y. Patil Vidyapeeth) (Deemed University) Pimpri, Pune-411018

## TERM-WISE PROGRESS REPORT OF POST GRADUATE RESIDENTS

De	epartment of :	
1.	Part – I (Students Profile) Name of P. G. Resident :	
2.	Name of the PG Course :	
3.	Year of admission :	
4.	Term : From to	
5.	Dissertation Topic : (for Degree Course Only)	
6.	Name of P.G. Guide :	
7.	Name of the H.O.D. :	
8.	Leave availed during the:	period
9.	Total percentage of :	attendance

## Part – II

Assessment according to Clinical/Academic Performance

Grading : A - Above 80%

- B 60% to 80%
- C 50% to 59%
- D Less than 50%

## (1) CLINICAL PERFORMANCE (Grading) :

(i) O.P.D. Work :	
(ii) Ward Work :	 
(iii)OT Work ·	 
(iv) Other :	 

#### (2) PROGRESS OF DISSERTATION (Wherever applicable) :

#### (3) ACADEMIC PERFORMANCE:

(1) $(1)$ $(1)$ $(1)$ $(1)$ $(1)$ $(1)$	(i)	Written	Tests:
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Date	Marks obtained

#### (ii) \*Seminar/Symposia:-

Date	Topic	Evaluation

## (iii) \*Case Presentation:-

Date	Topic	Evaluation

## (iv) \*Journal Club:-

Date	Topic	Evaluation

## (v) Practical /Viva:-

Date	Marks obtained

# (vi) \*Microteaching:-

Date	Topic	Evaluation

(\*May be assessed on a scale of 1 to 10)

# (4) PAPERS/POSTERS PRESENTED:-

Sr.	Title of Presentation	Paper/	Event	Month/	Venue
No.		Poster		Year	

Overall Grading: \_\_\_\_\_

# Part – III

	Remarks of Pos	st-Graduate Guide
Certified that Dr		has a total attendance of %
(For duration has been	to	). His/her overall performance (satisfactory/average/unsatisfactory)
Date:		Name & Signature of PG Guide
Progress of Dr	Remarks of He	ead of Department has been (Satisfactory / Unsatisfactory)
Date:		Name & Signature of HOD
	Remark	ks of Dean
(a) Progress		(Satisfactory / Unsatisfactory)
(b) Term granted		(Yes / No)
Date:		Signature of Dean

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# SYNOPSIS FORMAT

То,					
The Dean					
Dr. D.Y. Patil Medical College,	Dr. D.Y. Patil Medical College,				
Hospital & Research Centre.					
Pimpri, Pune.					
Subject:- Submission Of Synopsis Respected sir,					
I,	registered for(	April			
2013 session) am Submitting Synopsis ti	tled				
for scientific and Ethics Committee approval. The study will be done under					
the guidance of					
Thanking you,					
Signature & Name of PG student	Signature & Name of PG Gui	de			

# PROF. AND HOD.

# **DEPT. OF MEDICINE**

#### Synopsis for Dissertation Topic submitted for degree of \_\_\_\_\_ (April 2013 to March 2016 Session)

Title :

Name of student :

Name & Designation of Guide :

Name of Department :

Department of Medicine :

## SUMMARY SHEET

(To be given by each department)

## Name of Department:- Department of Medicine

Sr. No.	Title of Study	PG Student	PG Guide

#### Prof. & HOD

## **Dept. of Medicine**

Sr. No.	Day	Specialty Clinic	Faculty
1	Monday	Diabetic Clinic	Dr. V. S. Gokhale
			Dr. Anu Gaikwad
2	Monday	Gastroenterology Clinic	Dr. A. L. Kakrani
			Dr. A. A. Bamanikar

#### **DISSERTATION FORMAT**

#### Appendix- A (Cover page)

## TITLE DISSERTATION SUBMITTED TO DR. D. Y. PATIL VIDYAPEETH (Deemed University), PUNE,

IN PARTIAL FULFILLMENT OF THREE YEARS FULL TIME DEGREE PROGRAMME.

Doctor of Medicine (MD)/ Master of Surgery (MS) (Specialty)

Name of department \_\_\_\_\_

#### Appendix- B

#### **CERTIFICATE BY THE GUIDE**

This is to certify that the Dissertation titled "

" is a bonafide and genuine research work done by

Dr. \_\_\_\_\_

Under my guidance and supervision, in fulfillment of the requirement for the degree of Doctor of Medicine/ Master of Surgery (Name of Specialty)\_\_\_\_\_.

Name and Designation of PG Guide Department of \_\_\_\_\_ Dr. D. Y. Patil Medical College, Pimpri, Pune.

Place: Date:

Dept. Stamp.

# Appendix- C

#### ENDOREMENT BY THE HEAD OF DEPARTMENT

This is certify that	the Dis	sertatior	n titled '	د				
	" is	bonafi	de and	genuine	research	work	done	by
Dr		,	under	th	e gi	uidance	;	of
Dr			(1	Name and	Designati	on of <b>(</b>	Guide)	, in
fulfillment of the	require	ment for	the de	gree of D	octor of N	<b>l</b> edicin	e/ Mas	ster
of Surgery	_	·						
(Name of Specialit	y)			Dı	•			
-				р	C 1 T T	1		

Prof. and Head

Dept. of \_\_\_

Padmashree Dr. D. Y. Patil Medical college, Pimpri, Pune. **Dept. Stamp.** 

Place : Date :

#### Appendix- D CONTENTS OF DISSERTATION Cover Page

#### **INDEX:**

- 1. Introduction
- 2. Aims and Objectives
- 3. Review of Literature
- 4. Materials and Methods
- 5. Observations and Results
- 6. Discussion
- 7. Conclusions
- 8. Summery
- 9. References

#### **APPENDICES :**

- A) Consent Form
- B) Proforma / Questionnaire
- C) Master Chart

### UNIVERSITY EXAMINATION SYLLABUS

#### **THEORY EXAMINATION :**

There will be four Theory papers on four days. The syllabus covered paper wise will be as follow:-

#### PAPER-I (3 HOURS) MAX MARKS 100

**Title:** - Basic Sciences, Symptomatology, Infections Genetics, Immunology, Ethics, Nutritional Disorders Basic sciences, Symptomatology of diseases/disorders, Medical Ethics, Tropical & infectious diseases, HIV infection & AIDS, Genetic disorders, Immunology, Nutritional Disorders

#### Paper-II (3 hours) Max Marks 100

**Title:** - CVS, RS, Renal, Hemato oncology, Regenerative medicine Diseases of Cardiovascular system, Diseases of Respiratory system, diseases of kidney and urinary tract, Hematology & Oncology, Regenerative Medicine.

#### Paper-III :( 3 hours)Max Marks 100

**Title:** - GIT, Liver, Musculoskeletal, Toxicology, Endocrines & Metabolic GIT, Diseases of Liver & gall bladder, Pancreas, Bones & joints disorders & connective tissues diseases, Toxicology (insect bites, snake & scorpion bites, poisonings), Endocrine/Metabolic diseases.

#### Paper-IV (3 hours) Max Marks 100

**Title:** - Recent advances, Drug trials, Critical care, Acid base & Electrolytes, Neurology, Psychiatry & Dermatology.

Recent advances in medicine, new Research & drug trials, Emergency medicine-Intensive care, Acid-Base –Water/ Electrolyte disturbance, Diseases of nervous system and muscle diseases, Basic concepts of psychiatry & dermatology

## UNIVERSITY PAPER PATTERN PRACTICAL

Dr. D. Y. Patil Vidyapeeth (Deemed University) Pimpri, Pune-18

#### PRACTICAL EXAMINATION PATTERN

Practical examinations for the student admitted in 2012 or earlier will have

- 1. One Long case 120 marks
- 2. Two Short cases 60 marks each
- 3. Ward Round X 2 30 marks each
- 4. 4 table vivas of 25 marks each (total 100 marks) as mentioned below

Pattern for the batches admitted in year 2015 onwards is as per the following details -  $% \left( \frac{1}{2}\right) =0$ 

New Pattern of M. D. (Medicine) practical examination				
Clinical (300 marks)	Viva (100 marks)			
1) Structured Long case (120 marks)	- Four tables– 25 marks each			
2) Short Case (2 x 60 marks)(120 marks)	* Imaging (Xray, USG, CT,			
3) Ward Round $-5$ cases (100 marks)	MRI)			
30 marks ICU	* Lab reports and ECG			
30 marks CCU	* Instruments and Drugs			
	* Recent Advances			

#### INTERNAL ASSESSMENT PATTERN FOR PG STUDENTS

Term	Examination Pattern
Ist	Synopsis writing and Presentation
	Test of procedures and wards skills
IInd	Theory examination of seminar topics
IIIrd	Ward round test & ICU skills
IVth	Theory examination covering Symptomatology, Infectious
	Disease, Genetics Nutrition, Hemato-Oncology, Immunology &
	Dissertation Progress
Vth	Dissertation Completion & submission, ward round test(five cases)
VIth	Preliminary examination as per University pattern