



ODISHA UNIVERSITY OF HEALTH SCIENCES, BHUBANESWAR

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F. No. OUHS/CD//289/ 1561 / 2023

Date: 02/11/2023

To

All the Dean & Principals / Directors,
All Medical Colleges affiliated under OUHS.

Sub:- Approval of

1. Regulation and Courses of Studies of MBBS
2. Regulation and Courses of Studies of MD/MS
3. Regulation and Courses of Studies of DM/M.Ch

Madam/Sir,

With reference to the NMC guidelines, the document as per above subject matter should be followed by the Medical colleges affiliated under OUHS.

Yours faithfully,


2.11.2023
Registrar,

OUHS, Bhubaneswar

Memo No: 1565 / 2023

Date: 02/11/2023

Copy forwarded to:-

1. The Principal Secretary to the Hon'ble Chancellor, Raj Bhavan, Odisha, Bhubaneswar;
2. The Secretary, National Medical Commission, New Delhi;
3. The Commissioner-Cum-Secretary, Health & Family Welfare, Odisha, Bhubaneswar;
4. Registrars of all universities of State (Previously regulated said courses)

Yours faithfully,


2.11.2023
Registrar,


OUHS, Bhubaneswar

Memo No: 1566 / 2023

Date: 02/11/2023

Copy forwarded to OSD to the Vice-Chancellor for information of the Vice-Chancellor.

Yours faithfully,


2.11.2023
Registrar,

OUHS, Bhubaneswar

**REGULATIONS & COURSES OF STUDIES
FOR BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (MBBS)
DEGREE COURSE – 2023
(4 ½ Years Degree Course + 1 Year Internship)**

(Approved in the 1st meeting of the Academic Council held on October, 16, 2023 and
Executive Board held on October, 18, 2023)



Director, Curriculum
DIRECTOR, CURRICULUM
Odisha University of Health Sciences
Bhubaneswar



Registrar
Registrar
Odisha University of Health Sciences
Bhubaneswar



**THE ODISHA UNIVERSITY OF HEALTH SCIENCES,
BHUBANESWAR- 751009**

**REGULATIONS & COURSES OF STUDIES FOR BACHELOR OF MEDICINE AND BACHELOR OF SURGERY (MBBS) DEGREE COURSE – 2023
(4 ½ Years Degree Course + 1 Year Internship)**

1. **Title and commencement of the Program:**
 - i. These regulations may be called "Bachelor of Medicine and Bachelor of Surgery" (In short MBBS) Regulations- 2023".
 - ii. These regulations and courses of studies (syllabus) are in conformity with the National Medical Commission (In Short NMC).
 - iii. They shall come into force with effect from current the academic session 2023-24.
 - iv. The Regulations framed are subject to modification by the Academic Council and Executive Board of the Odisha University of Health Sciences, Bhubaneswar from time to time.

2. **Introduction:** The traditional medical education system, widely adopted throughout the twentieth century, has produced generations of scientifically grounded and clinically skilled physicians who have served medicine and society well. High quality medical education is a fundamental aspect of high-quality health care. Today's medical education should focus more on bedside teaching, hands on training, interventional skills, technology, project-based learning, etc. Bedside teaching is a vital component of medical education, that the learners should have the opportunities to use their senses to learn holistic medicine, a vital aspect often difficult to communicate in words.

Constructs of this curriculum will strengthen physicians to deliver an individualized plan of care that reflects the physician's mastery of basic physiology, awareness of the best current evidence of care, communication skill and collaborative decision-making. This integrated curriculum is characterized by spiral integration, encompassing both horizontal and vertical skills. It combines integration across time and disciplines. Major goals of integration are to break down barriers between the basic and clinical sciences and to promote retention of knowledge and acquisition of skills through repetitive and progressive development of concepts and their applications. The teaching of clinical medicine should be carried out on patients as it involves the diagnosis and management of patients' problems. A clinical teacher should involve patients and learners in the teaching process in a comfortable environment. In this process, the learners will acquire more skills of observation, communication, examination and professionalism. The key to development lies on the exposure of students and faculties to real life research achievers. Medi-leaders should emphasize on creation of student centric classrooms for an integrated teaching practice, and organize continuous lectures in relevant area of life sciences to impress the young minds and create role models.

The call of the hour is to prepare the future day healers with desirable attributes to perform the role of a clinician, leader and member of the health care team, communicator, life-long learner, and a professional with power of high order of critical thinking and research bent of mind in collecting and analyzing clinical and public health data for the wholesome welfare of the community.

3. **Goal:** The goal is to create an "Indian Medical Graduate" (IMG) possessing requisite knowledge, skills, attitudes, values and responsiveness, so that she or he may function appropriately and effectively as a Physician of first contact of the community while being globally relevant.
4. **Objective:** The objective is to develop a professional who is committed to excellence, ethical, responsive and accountable to patients, community and the profession.



5. **Eligibility criteria and admission to the Course:** The eligibility criterions prescribed by the National Medical Commission (from time to time shall be applicable to the affiliated Colleges / Institutions under this University mutatis mutandis. In addition, candidate (s) allotted a seat on the basis of qualifying examination and merit, shall be required to submit college leaving certificate, migration certificate (if applicable) in original, physical fitness certificate and a declaration before the Principal / Director of the Institution that
- (i) I am not continuing in any Degree Course under any State, Deemed, Central University and Autonomous Body,
 - (ii) I have not been involved in any kind of criminal and unlawful activities in the past.

Provided further, after fulfilment of all condition (s), the University on receipt of student detail with prescribed fees, shall issue University Registration Number as per OUHS First Statute- 2023, which shall be used as Roll Number for First, Second and Third Professional Examination (s).

6. **Duration:** The duration of MBBS Degree course shall be of 4 ½ academic years from the date of commencement of course to the date of completion of examination which shall be followed by one year of compulsory rotating internship. A learner shall not be entitled to graduate later than ten (10) years of her/his joining the first MBBS course.
7. **Medium of instruction:** English shall be the medium of instruction for all the subjects of study and for examination of the course excepting the Foundation Course – Local Language "Odia".
8. **Commencement of the Course:** The course will commence from September 1st of every year or as to be prescribed and notified by the National Medical Commission, India from year to year.
9. **Academic Year:** The academic year shall be twelve months commencing on the first day of enrolment into the course. The academic year will have at least 240 teaching days (39 teaching weeks) equivalent to 1521 hours with a minimum of seven hours of working on each day.
10. **Attendance:** The component wise minimum attendance percentage shall be as under;

Subjects	Minimum attendance percentage
Subjects taught in one phase	75% theory, 80% Practical
Subjects taught in more than one phase	75% theory, 80% Practical in each phase
Subjects comprising of more than one subjects	75% theory, 80% Practical in each subject
Electives	75% attendance in each block of the electives

11. **Course Cycle and Structure:** The 5 ½ years course cycle including 1-year compulsory rotating internship and structure prescribed hereunder;

11.1. Code (s)

The codes used in this Regulations & Courses of Studies.

- i. The total number of digits used in the course is 9 and 10 in case of 3rd Professional Part- II.
- ii. The 1st two digits (Numerical) indicates the Year of Courses of Studies.
- iii. The 3rd digit (Letter) indicates the "Faculty" Modern Medicine.
- iv. The 4th & 5th digits (Letters) indicate the Course Code "MBBS".
- v. The 6th & 7th digits (Letters) indicate the Subject Code.
- vi. The 8th, & 9th digits (Numerical) indicate the year and sequence of the Theory Subject (s) of the year.




- vii. The 10th digit (Letter) indicates the type of the subject i.e. Practical of the Theory Subject.
- 11.2. 5 ½ Years Course Cycle including 1-year compulsory rotating Internship:

Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
								1	2	3	4
											IA-I
5	6	7	8	9	10	11	12	13	14	15	16
		IA II			IA III		U-Exam		U-Sup		IA I
17	18	19	20	21	22	23	24	25	26	27	28
		IA II			IA III		U-Exam		U-Sup		
29	30	31	32	33	34	35	36	37	38	39	40
IA I					IA II		U-Exam	Ele	U-Sup		
41	42	43	44	45	46	47	48	49	50	51	52
IA I					IA II						
53	54	55	56	57	58	59	60	61	62	63	64
	NExT-1	1-CRMI	2	3	4	2nd NExT-1	8	7	8	9	10
65	66										
11	NExT-2										

11.3. Structure

Year	Sub Code	Title	Internal Assessment		Total	University Examination & NEXT		Total
			Theory	Practical / Clinical		Theory	Practical / Clinical	
FIRST PROFESSIONAL								
	23MBMF001	Foundation Course						
1 st	23MBMAN11	Anatomy-I	500		1000	100		300
1 st	23MBMAN12	Anatomy-II				100		
1 st	23MBMAN1P	Anatomy-P		500			100	
1 st	23MBMPY11	Physiology-I	500		1000	100		300
1 st	23MBMPY12	Physiology-II				100		
1 st	23MBMPY1P	Physiology-P		500			100	
1 st	23MBMBH11	Biochemistry-I	500		1000	100		300
1 st	23MBMBH12	Biochemistry-II				100		
1 st	23MBMBH1P	Biochemistry-P		500			100	
Total			1500	1500	3000	600	300	900
SECOND PROFESSIONAL								
2 nd	23MBMPH21	Pharmacology-I	500		1000	100		300
2 nd	23MBMPH22	Pharmacology-II				100		
2 nd	23MBMPH2P	Pharmacology-P		500			100	
2 nd	23MBMPA21	Pathology-I	500		1000	100		300
2 nd	23MBMPA22	Pathology-II				100		
2 nd	23MBMPA2P	Pathology-P		500			100	
2 nd	23MBMMI21	Microbiology-I	500		1000	100		300
2 nd	23MBMMI22	Microbiology-II				100		
2 nd	23MBMMI2P	Microbiology-P		500			100	
Total			1500	1500	3000	600	300	900
THIRD PROFESSIONAL PART I								
3 rd I	23MBMCM311	Community Medicine	500		1000	100		300
3 rd I	23MBMCM312	Community Medicine				100		
3 rd I	23MBMCM31P	Community Medicine P		500			100	
3 rd I	23MBMFM311	FMT	375		875	100		150
3 rd I	23MBMFM31P	FMT P		500			50	

Total			875	1000	1875	300	150	450
THIRD PROFESSIONAL PART II								
3 rd II	23MBMM321	General Medicine	500		1150			NExT
3 rd II	23MBMM322	General Medicine						
3 rd II	23MBMM32P	General Medicine		650				
3 rd II	23MBMSU321	General Surgery	500		1150			NExT
3 rd II	23MBMSU322	General Surgery						
3 rd II	23MBMSU32P	General Surgery		650				
3 rd II	23MBMOG321	Obstetrics & Gynaecology	500		1150			NExT
3 rd II	23MBMOG322	Obstetrics & Gynaecology						
3 rd II	23MBMOG32P	Obstetrics & Gynaecology		650				
3 rd II	23MBMPE321	Paediatrics	375		875			NExT
3 rd II	23MBMPE32P	Paediatrics		500				
3 rd II	23MBMEN321	Otorhinolaryngology	375		875			NExT
3 rd II	23MBMEN32P	Otorhinolaryngology		500				
3 rd II	23MBMOP321	Ophthalmology	375		875			NExT
3 rd II	23MBMOP32P	Ophthalmology		500				
3 rd II	23MBMEL321	Electives						
Total			2825	3450	6075			

Note: The syllabus of subject (s) / courses of studies prescribed by NMC shall be followed and are in conformity will be followed by the Colleges / Institutions. The Marks of Third Professional Part II (NExT) shall be included in the University Examinations for award of Degree.

12. Plan of Studies (Teaching, Training & Practice):

12.1. First Professional (12 Months including Examination): It shall consist of - Anatomy, Physiology, Biochemistry, Introduction to Community Medicine, Humanities, Professional development including Attitude, Ethics & Communication (AETCOM) module, family adoption programme (through village outreach where-in each student shall adopt minimum of three (03) families and preferably at least five (05) families), Pandemic module, early clinical exposure ensuring alignment and all types of integration and simulation- based learning. The total number of teachings – shall be Working Week - 39, Hours per Working Week - 39, and total hours excluding internal and university examinations is 1521 hours.

12.2. Second Professional (12 Months including Examination): It will consist of Pathology, Pharmacology, Microbiology, family visit under Community Medicine, FMT, General Surgery, General Medicine & Obstetrics & Gynecology Professional development including AETCOM module, simulation-based learning and introduction to clinical subjects ensuring both alignment & all types of integration. The clinical exposure to learners will be in the form of learner-doctor method of clinical training in all phases. The emphasis will be on primary, preventive and comprehensive health care. A part of training during clinical postings should take place at the primary level of health care. It is desirable to provide learning experiences in secondary health care, wherever possible. This will involve:

- Experience in recognizing and managing common problems seen in outpatient, inpatient and emergency settings,
- Involvement in patient care as a team member,
- Involvement in patient management and performance of basic procedures.

The total number of teaching - Working Week is 39, Hours per Working Week is 39, and total number of teaching hours excluding internal and university examinations is 1521 hours.

12.3. Third Professional Part -I & II (30 Months):

12.3.1. Part - I (12 months) – Forensic Medicine and Toxicology, Community Medicine, Medicine & allied, Surgery & allied, Pediatrics and Obstetrics & Gynecology including AETCOM, Pandemic

module, Clinical teaching in General Medicine, General Surgery, Obstetrics & Gynecology, Pediatrics, Orthopedics, Dermatology, Community Medicine, Psychiatry, Radio-diagnosis (& Radiotherapy) and Anesthesiology & Professional development.

The total number of teachings shall be - Working Week - 39, Hours per Working Week - 39, and total teaching hours excluding internal and university examinations is 1521 hours. In addition, 25% of the allotted time of third Professional shall be utilized for integrated learning with Part I and II subjects. This will be included in the assessment of clinical subjects.

12.3.2. Electives (1 month - 15 Days each) - There will be 2 blocks of 15 days each in Final first; 1st block after Third Professional MBBS Part I Examination and 2nd block after the end of 1st. elective to provide learners an opportunity for diverse learning experiences, and undertake research / community projects that will stimulate enquiry, self-directed experimental learning and lateral thinking.

12.3.3. Part - II (18 Months): There shall be clinical subjects Medicine and allied specialties such as General Medicine, Psychiatry, Dermatology Venereology and Leprosy (DVL), Respiratory Medicine including Tuberculosis), Surgery and allied specialties, General Surgery, Orthopedics [including trauma], Dentistry, Physical Medicine and rehabilitation, Anesthesiology and Radiodiagnosis), Obstetrics and Gynecology (including Family Welfare), Pediatrics, and including AETCOM module. The total number of teachings shall be - Working Week - 62, Hours per Working Week - 39, and total number of teaching hours excluding internal and university examinations - 2418 hours.

In addition, 25% of the allotted time of third Professional shall be utilized for integrated learning with Part I and II subjects. This will be included in the assessment of clinical subjects.

12.4. Internship: 12 Months: The overall duration of compulsory rotating medical internship (CRMI) shall not be less than twelve months and institutions or hospitals from where it may be undergone shall be such as specified in **Table- 1** and shall be completed within a period of two years from the date of qualifying credentials to pursue compulsory rotating medical internship. The Internship shall be completed within two years of passing the final MBBS or Foreign Medical Graduate Examination (FMGE) or NExT Step-1 examination, whenever in force.

Table No -1 Compulsory Rotating Medical Internship: -

Sl	Department	Duration
1	Community Medicine (12 Weeks)	12 Weeks
2	General Medicine	6 Weeks
3	Psychiatry	2 Weeks
4	Pediatrics	3 Weeks
5	General Surgery	6 Weeks
6	Anesthesiology & Critical Care	2 Weeks
7	Obstetrics and Gynaecology including Family Welfare and Planning	7 Weeks
8	Orthopaedics including Physical Medicine and Rehabilitation (PM & R)	2 Weeks
9	Emergency/ Trauma/ Casualty	2 Weeks
10	Forensic Medicine and Toxicology	1 Week
11	Dermatology, Venereology and Leprology	1 Week
12	Otorhinolaryngology	2 Weeks
13	Ophthalmology	2 Weeks
14	Electives Exclusive (Broad Specialties)	4 Weeks total; 2 weeks minimum
15	Electives Exclusive (Indian Systems of Medicine)	1 Weeks
	Total	12 Months




Provided, in the case of an unsatisfactory performance of an intern during the period of his / her posting in a Unit / Department, the Head of such Unit / Department shall periodically inform the intern regarding his / her unsatisfactory performance. This regulation is being made so that interns are properly warned during their posting regarding their unsatisfactory performance.

Provided further, if the Principal / Director of the College / Institution receives an unsatisfactory report about the performance of an intern in a Unit / Department, in such case, the intern will be informed that he/she will be detained till such time that his / her performance is certified as satisfactory. The intern may be asked to put extra hours of work in the Department / Unit where the performance has been unsatisfactory. Such an arrangement should have the prior approval of the Heads of Units / Department.

Provided furthermore, the entire block of posting may be repeated subsequent to the completion of one year's internship, and the Principal / Director of the College / Institution, on the recommendation of the Head of the concerned Department / Unit, will be the final authority to decide as to which of the above-mentioned courses should be open to a particular intern.

13. **Scheme of Internal Assessments and passing criteria:** There shall be Internal Assessments in First Professional, Second Professional, Third Professional Part - I & II, and a student is required appear all, secure minimum 40% in individual components and overall aggregate 50% marks. Fulfillment of pass criteria in Internal Assessments are pre-qualification criterion to be eligible for appearing First Professional, Second Professional, Third Professional Part - I University Examinations, and Third Professional Part II Examinations to be conducted as per NEXT Regulations.

13.1. **First Professional:** There shall be three numbers of Internal Assessments of Anatomy, Physiology, and Biochemistry subjects carrying 1000 Marks each during the whole year. In addition, one Internal Assessment is prescribed for community medicine of 150 marks out of total marks prescribed in the Third Professional: Part - I.

P R A C T I C A L S	Subjects	Block I (IA)	Block II IA		Block III (Preliminary)		Other FAs* for Theory	Total Theory Marks	Total Practical IA Marks	Total Theory + Practical
		Theory	Theory	Practical + Viva + RLB*	Theory P1 + P2	Practical + Viva + RLB				
	Anatomy	100	100	120+30+100	100+100	120+30+100	100	500	500	1000
	Physiology	100	100	120+30+100	100+100	120+30+100	100	500	500	1000
	Biochemistry	100	100	120+30+100	100+100	120+30+100	100	500	500	1000
	Community Medicine	---	50	40+10+50	NA	NA	NA	50	100	150
	Total	300	350	850	600	750	300	1550	1600	3150

Abb: RLB: Record Log Book, FA: Formative Assessment

Note: The GMER- 2023 (NMC) prescribes the head wise assessments during the year and mentioned hereunder Table No 1 & 2 respectively;

Table-1: GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment Theory Marks			Continuous Internal Assessment _ (Theory) Marks Anatomy- Physiology- Biochemistry					Total
1 st PCT Theory	2 nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignment	Continuous Class Test (LMS)	Seminar SDL	Museum Study SDL	Library Assignments SDL	

100	100	200	15	30	15	15	15	10	500
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Table-2: GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment			Continuous Internal Assessment (Practical) Marks Anatomy- Physiology- Biochemistry						Total
1 st PCT Practical / First Ward Leaving Examination	2 nd PCT Practical / Second Ward Leaving Examination	Prelims Practical	LOG BOOK (150)						
			Certifiable skill-based competencies (Through OSPE/ OSCE/Sports / Exercise / Others)	AETCOM competencies	SVL Lab activity	Research	Journal (Record book / port)	Attendance (Practical)	
100	100	100	60	30	40	20	40	10	500

13.2. Second Professional: There shall be three numbers of Internal Assessments each of Pharmacology, Pathology, and Microbiology carrying 1000 Marks, one of Forensic Medicine & Toxicology carrying 300 Marks, and two Internal Assessments of Community Medicine carrying 300 Marks out of total marks prescribed in the Third Professional Part I. Further, there shall be clinical assessments of General Medicine, General Surgery, Obstetrics & Gynecology, Community Medicine, Orthopaedics, Dermatology, and Dentistry at the end of respective postings as prescribed hereunder Table-1 & 4.

Table No 1 INTERNAL ASSESSMENTSS (DISTRIBUTION OF MARKS)

Subjects	Block I (IA)	Block II IA		Block III (Preliminary)		Other FAs for Theory	Total Theory Marks	Total Practical IA Marks	Total Theory + Practical
	Theory	Theory	Practical + Viva + RLB	Theory P1 + P2	Practical + Viva + RLB				
Pathology	100	100	120+30+100	100+100	120+30+100	100	500	500	1000
Pharmacology	100	100	120+30+100	100+100	120+30+100	100	500	500	1000
Microbiology	100	100	120+30+100	100+100	120+30+100	100	500	500	1000
FMT	NA	100	80+20+50	NA	NA	50	150	150	300
Community Medicine	100	100	40+10+50	NA	NA	NA	200	100	300
			Clinical						
General Medicine	50	50	40+10+50	--	--	--	100	100	200
General Surgery	50	50	40+10+50	--	--	--	100	100	200
Obstetrics & Gynaecology	50	50	40+10+50	--	--	--	100	100	200
Total	550	650	1300	600	750	350	2150	2050	4200

Table No 2 - GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment - Theory			Continuous Internal Assessments (Theory) Pathology / Pharmacology / Microbiology						Total
1 st PCT Theory	2 nd PCT Theory	Prelims Theory (Paper I & II)	Home Assignment	Continuous Class Test (LMS)	Seminar SDL	Museum Study SDL	Library Assignments SDL	Attendance Theory	
100	100	200	15	30	15	15	15	10	500

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Table No 3 - GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment			Continuous Internal Assessment (Practical) Pathology / Pharmacology / Microbiology					Journal (Record book / port)	Attendance (Practical)	Total
1 st PCT Practical / First Ward Leaving Examination	2 nd PCT Practical / Second Ward Leaving Examination	Prelims Practical	Log Book (150)							
			Certifiable skill-based competencies (Through OSPE/ OSCE/Sports / Exercise / Others)	AETCOM competencies	SVL Lab activity	Research				
100	100	100	60	30	40	20	40	10	500	

Table No 4: CLINICAL ASSESSMENT AT THE END OF POSTING (EOP)

Professional II				
Sl	Clinical / Departments	Period of Training in Weeks	Practical / Clinical	RLB
1	Electives	0		
2	General Medicine	9	40	40
3	General Surgery	7	30	30
4	Obstetrics & Gynaecology	7	50	50
5	Pediatrics	4	50	50
6	Community Medicine	4		
Professional II				
		Period of Training in Weeks	Practical / Clinical	RLB
7	Orthopaedics	2	10	10
8	Otorhinolaryngology	0	00	00
9	Ophthalmology	0	00	00
10	Psychiatry	0	00	00
11	Radio-Diagnosis	0	00	00
12	Dermatology	2	10	10
13	Dentistry	1	10	10
14	Anesthesiology	0	00	00
Total		36	200	200

13.3. Third Professional Part - I: There shall be two number of Internal Assessments of Community Medicine carrying 550 marks out of total 1000 Marks, and Forensic Medicine & Toxicology carrying 575 out of total 875 Marks. In addition, there will be two number of Internal Assessments of Otorhinolaryngology and Ophthalmology carrying 375 marks each out of the total marks of 875 Marks of the concerned subjects. Further, there shall be clinical assessments of Otorhinolaryngology, Ophthalmology, Community Medicine, General Medicine, General Surgery, Obstetrics & Gynecology, Pediatrics, Orthopaedics, Psychiatry, and Dermatology at the end of respective postings of Third Professional Part II as prescribed hereunder Table No 1, 3 & 6 respectively.

Table No - 1 INTERNAL ASSESSMENTS

Subjects	Block I IA		Block II (Preliminary) IA		Total Theory Marks	Total Practical IA Marks	Total Theory + Practical
	Theory	Practical + Viva + RLB	Theory P1 + P2	Practical + Viva + RLB			
Community Medicine	100	80+20+50	75+75	80+20+50	250	300	550
Forensic Medicine and Toxicology	100	80+20+75	125	80+20+75	225	350	575
Otorhinolaryngology	75	120+40+40	100	00	175	200	375
Ophthalmology	75	120+40+40	100	00	175	200	375
Pediatrics	75	120+40+40	100	00	175	200	375

Subjects	Block I IA		Block II (Preliminary) IA		Total Theory Marks	Total Practical IA Marks	Total Theory + Practical
	Theory	Practical + Viva + RLB	Theory P1 + P2	Practical + Viva + RLB			
General Medicine & Allied	50	80+20+50	50	--	100	150	250
General Surgery & Allied	50	80+20+50	50	--	100	150	250
Obstetrics & Gynecology	50	80+20+50	50	--	100	150	250

NB: 25% weightage of the General Medicine and General Surgery shall be included from their allied subjects.

Table No 2 GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment Theory			Continuous Internal Assessment (Theory) Community Medicine						
1	2	3	4	5	6	7	8	9	10
1 st PCT Theory	2 nd PCT Theory	Prelim Theory (Paper I & II)	Home Assignment	Seminar	Continuous Class Test (LMS)	Museum Study	Library Assignments	Attendance Theory	Total
100	100	200	15	15	30	15	15	10	500

Table No 3 GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment			Continuous Assessment (Practical) Community Medicine					Total
1 st PCT Practical / First Ward Leaving Examination	2 nd PCT Practical / First Ward Leaving Examination	Prelim Practical	Log Book (150)			Journal (Record Book / Portfolio)	Attendance (Practical)	
			Certifiable Skill based competencies (Through OSPE/OSCE/ Sports / Exercise / Others)	FAP competencies in Community Medicine	AETCOM Competencies			
100	100	100	70	40	40	40	10	500

Table No 4 GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment Theory			Continuous Internal Assessment (Theory) FMT						Total
1 st PCT Theory	2 nd PCT Theory	Prelim Theory (Paper I & II)	Home Assignment	Seminar	Continuous Class Test (LMS)	Museum Study	Library Assignments	Attendance Theory	
100	100	200	10	10	25	10	10	10	375

Table No 5 GMER GUIDELINE FOR SUBMISSION OF INTERNAL ASSESSMENT MARKS

Formative Assessment			Continuous Internal Assessment (Practical) FMT					Total
1 st PCT Practical / First Ward Leaving Examination	2 nd PCT Practical / First Ward Leaving Examination	Prelim Practical	Log Book (150)			Journal (Record Book / Portfolio)	Attendance Practical	
			Certifiable Skill based competencies (Through OSPE/OSCE/ Sports / Exercise / Others)	FAP competencies	SVL Lab Activity			
100	100	100	70	40	40	40	10	500

Table No 6: Clinical assessment at the end of posting (EOP)

Professional III Part I		Period of Training in Weeks	Practical	RLB
1	Electives	4	00	00
2	General Medicine	4	60	30
3	General Surgery	4	40	40
4	Obstetrics & Gynaecology	4	100	50
5	Pediatrics	4	60	40
6	Community Medicine	4	00	00
7	Orthopaedics	2	30	10
8	Otorhinolaryngology	3	150	50
9	Ophthalmology	3	150	50
10	Psychiatry	2	20	10
11	Radio-Diagnosis	0	00	00
12	Dermatology	2	20	10
13	Dentistry	0	00	00
14	Anesthesiology	0	00	00
Total		36	630	290

13.4. Third Professional Part - II: There shall be two number of Internal Assessments of General Medicine, General Surgery, Obstetrics & Gynecology carrying 700 marks each and Pediatrics 500 Marks. In addition, there will be two number of Internal Assessments of Otorhinolaryngology and Ophthalmology carrying 500 marks each out of the total 875 marks allotted in respect of the concerned subjects. Further, there shall be clinical assessments of Otorhinolaryngology, Ophthalmology, General Medicine, General Surgery, Obstetrics & Gynecology, Pediatrics, Orthopaedics, Psychiatry, Radiodiagnosis, Dermatology, and Anaesthesia, at the end of respective postings of Third Professional Part II as prescribed hereunder Table No 01, 03, 05 & 06 respectively.

Table No -01 Internal Assessments

Subjects	Block I IA			Block II (Prelim) IA Practical + Viva + RLB = Total Practical	Total Theory IA	Total Practical IA	Total Th + Prac IA
	Theory	Practical	Theory				
General Medicine*	150	100+25+75	150	100+25+75	300	400	700
General Surgery**	150	100+25+75	150	100+25+75	300	400	700
Obstetrics & Gynecology	150	100+25+75	150	100+25+75	300	400	700
Pediatrics	100	80+20+60	100	70+20+50	200	300	500
Otorhinolaryngology	100	80+20+50	100	80+20+50	200	300	500
Ophthalmology	100	80+20+50	100	80+20+50	200	300	500

*The discipline of Psychiatry and Dermatology, Venereology and Leprosy (DVL), Respiratory Medicine including tuberculosis will constitute 25 % of the total theory marks in General Medicine incorporated as a separate section in paper II of General Medicine for Examinations (Preliminary) and proportionately as per the time of instruction allotted in each for Block Examination.

The discipline of Orthopaedics, Anesthesiology, Radio diagnosis and Dentistry will constitute 25% of the total theory marks incorporated as a separate section in paper II of General Surgery for Block

Examination (Preliminary) and University examination and proportionately by the time of instruction allotted to each for Block I Examination.

Table No 02. GMER GUIDELINES FOR SUBMISSIONS OF INTERNAL ASSESSMENT MARKS

Formative Assessment _Theory			Continuous Internal Assessment _Theory Pediatrics/ ENT/ Ophthalmology						Total
1 st PCT Theory	2 nd PCT Theory	Prelim Theory (Paper I & II)	Home Assignment	Continuous Class Test (LMS)	Seminar SDL	Museum Study SDL	Library Assignments SDL	Attendance Theory	
100	100	100	10	25	10	10	10	10	375

Table No 03. GMER GUIDELINES FOR SUBMISSIONS OF INTERNAL ASSESSMENT MARKS

Formative Assessment			Continuous Internal Assessment _Practical Pediatrics/ ENT/ Ophthalmology					Journal (Record Book / Portfolio)	Attendance Practical	Total
1 st PCT Practical / First Ward Leaving Examination	2 nd PCT Practical / First Ward Leaving Examination	Prelim Practical	Log Book (150)							
			Certifiable Skill based competencies (Through OSPE/OSCE/ Sports / Exercise / Others)	AETCOM Competency	S/VL Lab Activity	Research				
100	100	100	60	30	40	20	40	10	500	

Table No 04. GMER GUIDELINES FOR SUBMISSIONS OF INTERNAL ASSESSMENT MARKS

Formative Assessment _Theory			Continuous Internal Assessment _Theory Medicine / Surgery / OBGY						Total
1 st PCT Theory	2 nd PCT Theory	Prelim Theory (Paper I & II)	Home Assignment	Continuous Class Test (LMS)	Seminar SDL	Museum Study SDL	Library Assignments SDL	Attendance Theory	
100	100	200	15	30	15	15	15	10	500

Table No 05. GMER GUIDELINES FOR SUBMISSIONS OF INTERNAL ASSESSMENT MARKS

Formative Assessment			Continuous Internal Assessment _Practical Medicine / Surgery / OBGY						Total
1 st PCT Practical / First Ward Leaving Examination	2 nd PCT Practical / First Ward Leaving Examination	Prelim Practical	Log Book 200						
			Certifiable Skill based competencies (Through OSPE/OSCE/ Sports / Exercise / Others)	AETCOM Competency	S/VL Lab Activity	Research	Journal (Record Book / Portfolio)	Attendance Practical	
100	100	200	100	40	40	20	40	10	650

Table No 06: Clinical Assessment at the end of posting (EOP)

Professional III Part II				
Sl	Clinical / Departments	Period of Training in Weeks	Practical / Clinical	RLB
1	Electives	0		

Sl	Clinical / Departments	Period of Training in Weeks	Practical / Clinical	RLB
2	General Medicine	14	200	60
3	General Surgery	10	200	60
4	Obstetrics & Gynaecology	10	300	100
5	Pediatrics	5	200	100
6	Community Medicine	0	00	00
7	Orthopaedics	4	50	20
8	Otorhinolaryngology	4	200	100
9	Ophthalmology	4	200	100
10	Psychiatry	4	60	25
11	Radio-Diagnosis	2	25	10
12	Dermatology	2	40	15
13	Dentistry	0	00	00
14	Anesthesiology	3	25	10
Total		62	1500	560

13.5. Elective: Assessments: Formative Record of activities in logbook and portfolio (or annexure to logbook) to be submitted before the college / institution as prerequisite for recommendation to take Part II summative examination to be conducted under NExT Regulations 2023.

Table No. 1 Block of Electives:

Block of Elective (Days of Block)	To be assessed and recommended by the College
Block 1 (15 Days with regular clinical postings)	
Block 2 (15 Days full time without clinical postings)	
Total Marks Electives	

13.6. Remedial Classes / Assessment: Each College / Institution shall arrange remedial classes / sessions for students who are either not able to score qualifying marks or have missed on some assessments due to any valid reason soon after the publication of college / institution level examinations results.

Provided, the candidate must have fulfilled the minimum percentage of attendance in the theory, and practical / clinical sessions. This chance would be extended only after thorough analysis of the reasoned grounds for his / her absence or poor performance.

Provided further, such cases shall be placed before the Examination Committee of the College / Institution whose decision shall be final and binding.

13.7. Internship: 12 Months: During the rotational posting (s), the performance of an intern in a Unit / Department shall be assessed as satisfactory or un-satisfactory. If, unsatisfactory, s/he may be required to repeat the ones or whole subject to approval of competent authority of the Unit / Department.

14. Eligibility criteria for appearing University and NExT Examinations:

14.1. The final First Professional, Second Professional, and Third Professional Part-I Examinations shall be conducted by the University. The Third Professional Part II Examinations shall be conducted as per NExT Regulations- 2023. A student is required fulfill the following to be eligible for appearing final Professional University and NExT Examination;




- (i) Attended 75 % theory and 80% practical classes,
- (ii) completed required certifiable competencies including log book for the concerned phases of training, and successful completion of electives;
- (iii) Secure at least 50% of marks of the total marks combined in theory and practical / clinical; not less than 40% marks in theory and practical separately for the internal assessment in a particular subject in order to be eligible for appearing at the final University examination of that subject.
- (iv) An average of the marks scored in all internal assessment examinations and the average of all marks scored in the end of posting clinical assessment will be considered as the final internal assessment scores and eligibility for University examinations.
- (v) Not been debarred for any objectionable mis-conduct or malpractice by the Institution, and University.

Provided further, if a candidate has not secured requisite aggregate in the internal assessment may be subjected to remedial measures by the institution. If he/she successfully completes their remedial measures, he/she will be eligible to appear for University Examination. Remedial measures shall be completed before submitting the internal assessment marks off / online to the university.

- 14.2.** A candidate to be eligible, shall be required to pass in the first Professional Examination for second Professional, second Professional for third Professional Part I, and third Professional Part I for NExT Examination (Third Professional Part II).

- 15. Examinations:** There shall be one main examination in an academic year, and a supplementary to be processed not later than 3- 6 weeks from the date of the declaration of the results of the main examination for every professional year. The University shall conduct examinations for First Year (First Professional), Second Year (Second Professional), Third Year (Third Professional Part- I). The Fourth - Final year (Third Professional Part - II) Examinations shall be conducted as per NExT Regulations-2023.

15.1. End Term Examinations (University & NExT):

a. First Professional:

- (i) The first Professional examination shall be held at the end of first Professional training (12 months including examination), in the subjects of Human Anatomy, Physiology and Biochemistry.
- (ii) A maximum number of four permissible attempts would be available to clear the first Professional University examination, whereby the first Professional course will have to be cleared within 4 years of admission to the said course. Partial attendance at any University examination shall be counted as an availed attempt.

b. Second Professional:

- (i) The second Professional examination shall be conducted at the end of second professional training (12 months including examination), in the subjects of Pathology, Pharmacology and Microbiology.

c. Third Professional:

- (i) **Third Professional Part I** examination shall be conducted at end of third Professional Part 1 of training (12 months including examination) in the subjects of Community Medicine and Forensic Medicine and Toxicology.




- (ii) **Third Professional Part II** - (Final Professional) examination shall be conducted at the end of training [18 months including 1 (15 Days Each) months of electives] in the subjects of General Medicine, General Surgery, Obstetrics & Gynaecology, Pediatrics, Ophthalmology and Otolaryngology or as per NExt Regulations 2023.
- d) The internal assessment marks (theory and practical) conducted by College / Institution i.e. First, Second, Third Professional Part - I & II, and marks secured by a student will be reflected under separate head in the marks sheet, but shall not be added to the marks secured (theory / practical) in the university examinations. However, no class shall be reflected in the Mark Sheet.

15.2. Formative and Internal Assessment / Examinations (College / Institution): There shall be three numbers of college / institution level formative and internal assessments of both theory and practical preceding to First and Second Professional University Examinations, and two numbers preceding Second Professional to Third Professional Part I & II Examinations.

15.2.1 Theory - Internal Assessment (IA) will include:

- (i) Written tests, should have essay questions, short notes and creative writing experiences.
- (ii) Practical / Clinical IA can include: practical / clinical tests, Objective Structured Clinical Examination (OSCE) / Objective Structured Practical Examination (OSPE), Directly Observed Procedural Skills (DOPS), Mini Clinical Evaluation Exercise (mini-CEX), records maintenance and attitudinal assessment.
- (i) Assessment of Log-book. Log book should record all activities like seminar, symposia, quizzes and other academic activities. Achievement of certifiable competencies should also be recorded in logbooks. It should be assessed regularly and submitted to the department. Up To twenty per cent IA marks (Theory and Practical) should be from Log book assessment.,
- (ii) Internal Assessment for Professional development programme (AETCOM) will include:
 - a. Written tests comprising of short notes and creative writing experiences in each subject.
 - b. OSCE based clinical scenarios and/or viva voce. Skill competencies acquired during the Professional Development Programme must be tested during the clinical, practical and viva voce in every subject.

15.3. Scheme of Theory Examinations (Summative):

- (i) The Nature of questions will include different types such as structured essays (Long Answer Questions - LAQ), Short Answers Questions (SAQ) and objective type questions (Selection / Supplied) (e.g. Multiple Choice Questions - MCQ). Marks for each part should be indicated separately. MCQs shall be accorded a weightage of not more than 20% of the total theory marks.
- (ii) The Practical / clinical examinations will be conducted in the laboratories and /or hospital wards.
- (iii) The Viva / oral examination should assess approach to patient management, emergencies, attitudinal, ethical and professional values.

15.4. Uniform Formats / Templates: The University, therefore, has prescribed following uniform format (s) to be followed at the college / institution level, and university end for all purposes under **Annexure A (Series)**.



- 15.5. **Preservation of Evidences:** All evidences (Questions, Answer Booklets, and other records) maintained at College / Institution and University level shall be preserved at respective end as a part of record (Electronic / Hard Copy) for the whole tenure of 10 years of the Course and shall be subject to scrutiny at the time of verification.
16. **Registration (Formative & Summative):**
- (i) The College / Institution shall register the subjects of eligible students with the University on payment of a fee as to be notified by the University towards conduct of main professional (Regular / Supplementary / Attempt / Detained) examinations. The College shall retain 15% of the University Examination fees towards Examination Centre expenditures. However, such retention of fees @ 15% shall not be applicable in case of Supplementary / Attempt / Detained Examinations.
- (ii) The College / Institution shall follow uniform Question pattern / template / Answer Booklets and Records for conducting Part Completion Theory, and Practical Assessments.
17. **Passing Heads:** In a subject that has two papers, the learner must secure minimum of 40% of marks in aggregate (Both papers taken together) to pass in the theory of the said subject.
- A candidate shall obtain 50% marks in aggregate and 60:40 (Minimum) or 40:60 (Minimum) in University conducted examinations separately in theory and in practical (Practical includes Practical / Clinical and Viva Voce) in order to be declared as passed in that subject.
18. **Promotion, Carry over benefit and Re-admission:**
- (i) If the candidate fails in the supplementary examination of first Professional, he shall join the batch of next academic / subsequent year.
- (ii) A candidate, who fails in the second Professional examination, shall be allowed to join the third Professional Part I training, however he shall not be allowed to appear for the examination unless he has passed second professional examination.
- (iii) A candidate who fails in the third Professional (Part I) examination shall be allowed to join third Professional part II training, however he shall not be allowed to appear for the examination unless he has passed Third Professional Part I Examinations.
- (iv) A candidate seeking re-enter to the any Professional Year Course shall be subject to condition that s/he is not subject to any disciplinary action and no charges are pending or contemplated against them. The student shall follow the curriculum / syllabus in vogue (currently approved / is being followed) for the Course. However, candidates having a break of study of 2 years and above from the date of admission will not be considered for readmission.
19. **Supplementary Examination:** A supplementary examination will be held within 3 - 6 weeks after the date of declaration of the results of the main Examination for every professional year.
20. **Classification of successful candidates and award of Degree:** The University shall follow the Class pattern till the adoption of Grading System in the Academic Council and Executive Board.
- 20.1. **Declaration of Class:** A candidate having appeared in all the subjects in the same examination and passed in all University's First, Second, Third Professional Part – I, and Part II (Next Regulation) irrespective of percentage of marks secured by him / her in the whole examinations, and be eligible for award of Bachelor in Medicine and Bachelor in Surgery.

20.2. Honours in Subject (s): The University will award Honours in Theory Subject (s) in the following manner;

(i) If a student secures more than 75% marks in a Subject (Theory, Practical / Clinical, & Oral; if any) in the first attempt will be awarded "Honours" in the relevant Subject only.

(ii) Similarly, if a students passed in a Subject (Theory, Practical / Clinical, & Oral; if any) and has secured less than 75% will be awarded Pass in the relevant subject.

Furthermore, it is clarified, that if a student's combined mark (if any) in the subject (Theory, Practical / Clinical, & Oral - Viva Voce; if any) is one – i.e. half or more, then its value shall not be rounded off / increased to one percent, and s/he shall not be eligible for Honours in the that Subject.

20.3. Ranks if any shall be declared as per the decision of the Academic Council on the basis of the aggregate marks obtained by the candidate in the university examination subjects of the course (includes Third Professional Part II to be conducted as per NExt Regulations). Only those candidates who have passed all the subjects in all examination in the first attempt shall be eligible for the award of rank.

20.4. Degree Certificate, Provisional (Pass) Certificate, Marks Sheet (s), and Attempt Certificate: The University upon successful completion and passing of each Professional Examinations (s) shall issue Provisional Pass Certificate, Attempt Certificate indicating number of chance (s) availed to pass a Subject under the seal and signature of the Controller of Examinations. The Degree Certificate will be issued after the date of Convocation under the seal and signature of Vice Chancellor.

21. Log Book, Record and Evaluation Guidelines: The Log Book, Record, and guidelines as prescribed in the GMER, vis a vis University shall be strictly followed mutatis mutandis by the Examiners when assessing a theory and practical component etc.

22. Withdrawal from Course, Struck off from the rolls of the College / Institution Admitted and withdrawal of Degree:

22.1. The University upon application, shall cancel the registration number issued to the candidate, and issue migration certificate on payment of fee to be prescribed by the University.

22.2. A student's name will be struck off from the rolls of the College / Institution in any of the following cases if he/ she does not qualify / pass:

- a) First Professional Examination in 4 attempts including regular and supplementary exams (for all subjects),
- b) Second Professional Examination in 4 attempts i.e. 2 regular plus 2 supplementary examinations (for all subjects)
- c) Third Professional Examination (Part I / Part II) in 4 attempts i.e. 2 regular plus 2 supplementary examinations (for all subjects).

22.3. Any student found to have obtained admission in fraudulent manner, if the documents furnished for gaining admission by any student are found to be forged/ false/ doctored at any stage of study.

22.4. If any student is found to be involved in serious breach of discipline.

22.5. A degree awarded by the University may be withdrawn if it is found at the later stage that the candidate has submitted any forged document or ineligible at the time of admission to the course.

23. **Medal (s), Award (s) & Prize (s):** The University shall notify as and when decided by the Academic Council and Executive Board from time to time.
24. **Discretionary Power:** Notwithstanding anything contained in the above, in case of any doubt or difficulty as to the interpretation of these Regulation (s), the matter shall be referred to the Vice Chancellor and his / her decision in this behalf, subject to the provisions of the OUHS Act - 2021, and 1st Statute - 2023 shall be final.
25. **Glossary of Terms Used:**

Sl	Glossary	Explanations
1	AETCOM	Attitude, Ethics and Communication (AETCOM) competencies for the Indian Medical Graduate.
2	Case Based Learning	Case-Based Learning involves diving into real-life situations. Here, students engage with a case, often drawn from clinical practice or real-life scenarios, as a starting point for learning. These cases encourage students to apply their knowledge and think critically. They analyze the situation, consider different angles, and propose solutions. This approach transforms learning into a practical adventure where students put their knowledge to the test by solving genuine problems.
3	Case Presentation	Presentations offer a multifaceted assessment platform. They not only gauge students' depth of subject knowledge but also hone their verbal communication, organization, and public speaking abilities, fostering well-rounded development.
4	Case Taking	Assessing students' interactions with simulated patients or cases evaluates their clinical and communication skills. It demonstrates their ability to gather information, diagnose, and recommend appropriate solutions.
5	Certifiable Skill-based Competencies	Knowledge, skills, values and attitudes acquired by a learner for dealing with real life situations at the age and grade appropriate level and certified by the Teacher / Tutors / Instructors.
6	Checklist-Based Assessments	Checklist-based assessments provide structured evaluation criteria for various skills or tasks. They offer a systematic way to measure performance against predefined standards, ensuring comprehensive coverage of essential competencies.
7	Class Presentation	Presentations offer a multifaceted assessment platform. They not only gauge students' depth of subject knowledge but also hone their verbal communication, organization, and public speaking abilities, fostering well-rounded development.
8	Clinical Cases	Clinical case exams present scenarios resembling real patient encounters. Students diagnose, analyze, and propose treatment plans based on the provided information, demonstrating clinical reasoning and decision-making skills.
9	Clinical Video Cases	Clinical video cases provide a virtual insight into real-world scenarios, testing students' diagnostic and decision-making skills. By evaluating their ability to analyze and respond to complex patient situations, this assessment mirrors clinical practice.
10	Competency	An observable activity of the health professional with a judicious and habitual use and mix of knowledge, skills, attitudes and communication.
11	Compilations	Compilations involve students gathering and presenting a collection of their work or accomplishments. This assessment method showcases their

		achievements, growth, and learning journey, offering a holistic view of their progress.
12	Course Code	A Code allotted by the University for smooth management of courses.
13	Creativity Writing	Creative writing assessments tap into students' imaginative prowess, challenging them to apply theoretical concepts in innovative ways. This approach fosters expression, original thinking, and the synthesis of diverse ideas.
14	Critical Reading of Papers	Critical reading of papers hones students' analytical skills as they assess research articles. This method evaluates their capacity to extract meaningful insights, identify strengths and limitations, and engage with scholarly literature.
15	CWS	Case-Writing Skills assesses students' ability to construct comprehensive clinical cases. It evaluates their understanding of clinical concepts, communication skills, and their capacity to present complex medical scenarios.
16	Debate	Debates immerse students in dynamic discussions, honing research skills, critical analysis, and effective articulation of viewpoints. They encourage in-depth exploration of theoretical topics while evaluating persuasive capabilities.
17	DOPS	Directly Observed Procedural Skills assesses procedural skills under supervision. Trained assessors directly observe and evaluate students' performance, ensuring competence in performing practical tasks and procedures.
18	FAP	Family Adoption Programme during which a learner will be taken to the community and adopt three to five families and follow them up till the end of their Course.
19	Formative Assessment	An assessment conducted during the instruction with the primary purpose of providing feedback for improving learning.
20	Hands-On Skills	Practical assessments involve performing specific procedures or tasks. Students demonstrate psychomotor skills, accuracy, and attention to detail, showcasing their competence in applying theoretical knowledge in real-world settings.
21	Home Assignments	Any task given to learners beyond regular hours with an instruction for evaluation.
22	Identification	Identification tasks assess students' knowledge of different elements, such as specimens, objects, or components relevant to their field. It evaluates their recognition and categorization skills. Problem Solving: Practical problem-solving tasks replicate real-world challenges. Students apply their theoretical understanding to find solutions, showcasing their critical thinking and analytical skills.
23	Interactions	Interactions foster dynamic engagement by assessing students' ability to communicate, collaborate, and respond effectively to diverse situations. These interactions can encompass discussions, debates, and role plays, evaluating their interpersonal and teamwork skills.
24	Internal Assessment	Range of assessments conducted by the teachers teaching a particular subject with the express purpose of knowing what is learnt and how it is learnt. Internal assessment can have both formative and summative functions.
25	LAQ	Long Answer Questions assess in-depth understanding and critical analysis. Students are expected to provide detailed, structured responses that

		demonstrate their grasp of complex topics.
26	Library Assignments	Self-directed learning based on the identified learning resources in the physical and e-library.
27	Log Book	Log books provide a chronological record of students' practical experiences, activities, and accomplishments. This assessment method offers insight into their hands-on training, clinical exposure, and the development of practical skills.
28	Making of Charts	Designing charts showcases students' data interpretation and presentation skills. These assessments demand clarity in conveying complex information visually, assessing their ability to communicate effectively.
29	Making of Model	Crafting models bridges the gap between theory and practicality, evaluating students' ability to translate abstract concepts into tangible representations. This method fosters creativity, attention to detail, and spatial understanding.
30	Making of Posters	Posters amalgamate creativity and communication skills. Crafting visually compelling representations of theoretical concepts evaluates students' visual design abilities and their capacity to synthesize and present information.
31	MCQ	Multiple Choice Questions evaluate a wide range of content efficiently. They test students' recall, application, and analytical skills, offering a diverse assessment of their understanding.
32	Mini-CEX	Mini Clinical Evaluation Exercise evaluates clinical skills through direct observation in real clinical settings. It provides immediate feedback on students' performance, assessing clinical decision-making, patient interaction, and problem-solving.
33	Model	Using models, students demonstrate their understanding of complex structures, systems, or processes. This hands-on approach assesses their ability to manipulate and interact with physical representations of theoretical concepts.
34	Museum Study	Study of the museum specimens in a self-directed learning
35	Online Quiz	Online quizzes blend technology with assessment, catering to tech-savvy learners. They provide immediate insights into students' understanding, making it a convenient tool for self-assessment and targeted improvement.
36	Online Game-Based Assessment	Game-based assessments leverage the allure of gaming to evaluate learning outcomes. By embedding educational objectives into interactive games, they enhance engagement while measuring knowledge application.
37	OSPE	Objective Structured Practical Examination evaluates practical skills in controlled settings. It involves multiple stations, each assessing specific skills or techniques, providing a well-rounded assessment of students' proficiency.
38	OSCE	Objective Structured Clinical Examination evaluates clinical skills through a series of stations, each focusing on specific tasks. This method rigorously assesses students' ability to perform practical procedures, communicate effectively, and demonstrate critical thinking under timed conditions.
39	Patient Management Problems	Patient management problems simulate real clinical challenges, evaluating students' ability to diagnose, treat, and manage patient conditions. This method assesses their clinical reasoning and application of theoretical concepts.
40	Peer Assessment	Peer assessment involves students evaluating their peers' work, performance, or contributions. This method encourages collaboration, teamwork, and a deeper understanding of assessment criteria.

41	Portfolios	Portfolios are curated collections of students' work that showcase their achievements, reflections, and growth over time. This method encourages self-assessment, critical thinking, and the documentation of diverse learning experiences.
42	Poster	Poster presentations require students to visually present information, combining textual and visual elements. This method evaluates their capability to organize and convey complex concepts in a clear and concise manner.
43	Practical	Practical consists of laboratory skills, procedures in the laboratory setting.
44	Practical Record, or case sheet and portfolio.	Journal (Record book / Portfolio)
45	Practical Record	Practical Record, or case sheet
46	Presentation	Presentations require students to communicate their understanding of a topic to an audience. This method enhances public speaking and communication skills, while also assessing the student's grasp of the subject matter and their ability to synthesize information effectively.
47	Practical Exam	Spotting, Identifications, Clinical Cases, Hands-On Skills Spotting and Identifications: These assessments test students' ability to identify and label specific elements, such as anatomical structures or specimens. They focus on recognition and recall of visual information.
48	Practical Performance	Practical performance evaluations gauge students' competency in applying acquired skills. Whether in a laboratory, clinical setting, or workshop, students are observed as they execute tasks, demonstrating their proficiency and practical application of knowledge.
49	Practical Survey	Practical surveys involve students collecting data from real-world scenarios. They learn how to design surveys, gather information, and analyze results. This method offers a hands-on experience in data collection and analysis, aligning theory with practical research skills.
50	Professional	Annual Examination is termed as Professional Examination.
51	Puzzles	Puzzles: Problem-solving puzzles push students to apply theoretical understanding in innovative ways. By challenging them to unravel intricate scenarios, these assessments nurture critical thinking, analytical skills, and adaptive reasoning.
52	Quiz	Quizzes serve as efficient assessments, evaluating students' grasp of core concepts and reinforcing theoretical fundamentals through repeated practice. They prompt ongoing review, aiding memory consolidation and providing immediate feedback on knowledge gaps.
53	Rating Scales	Rating scales provide a structured approach to evaluating students' performance across predefined criteria. They offer a quantifiable assessment of skills, behaviors, or competencies, allowing for consistent and standardized evaluation.
54	Record Keeping	Record keeping assessments focus on accurate documentation of clinical encounters, procedures, and patient interactions. This method evaluates students' attention to detail, organization, and communication skills in maintaining comprehensive records.
55	Role Play	Role-playing scenarios assess students' ability to apply theoretical concepts to real-life situations. It tests their problem-solving, communication, and interpersonal skills by immersing them in simulated scenarios.
56	SAQ	Short Answer Questions require concise written responses to specific

		prompts. They assess students' ability to provide focused answers, showcasing their comprehension and application of key concepts.
57	SDL	Self-Directed Learning which a learner learns in absence of a teacher guided by the identified objectives and learning resources.
58	Self-Assessment	Self-assessment encourages students to reflect on their own learning and performance. By evaluating their strengths, weaknesses, and areas for improvement, students take an active role in their educational journey.
59	SGL	Small Group Learning formed to facilitate one to one guidance of the learners and to support identified poor learners and encourage bright scholars.
60	Simulated Patients:	Simulated patients offer a controlled environment for students to interact with lifelike scenarios. This assessment method assesses clinical skills, communication, empathy, and the application of theoretical knowledge in a practical context.
61	Structured Viva	Structured viva exams have predetermined questions and evaluation criteria. This focused approach ensures consistent assessment across students and covers specific learning objectives.
62	SP	Standardized / Simulated Patients a prototype.
63	Summative Assessment:	An assessment conducted at the end of a term to check how much the student has learnt and here undertaken by the University applicable for promotion and certification.
64	Sub Code	A Code allotted by the University for smooth management of theory and practical subjects.
65	SVL Lab activity	Student Virtual Labs, which is a platform that enables students to engage in interactive, and hands-on learning.
66	Team-Based Learning	In Team-Based Learning, learning is a team effort. Students prepare for class on their own, then come together in small groups to apply what they've learned. It's like a structured group activity where everyone contributes. The cool part is that it encourages students to be ready before class and helps them use what they've learned in a practical way. It's all about teamwork and applying knowledge to solve problems.
67	Theory	Theory exams assess students' understanding of fundamental concepts and principles. They often require comprehensive written responses that showcase students' knowledge, critical thinking, and ability to communicate ideas clearly.
68	Theory Extended Matching Item (EMI)	Theory Extended Matching Items present students with scenarios or clinical cases along with a list of possible responses. Students are tasked with matching the most suitable response to each scenario, thereby demonstrating their comprehension of theoretical concepts in practical contexts. This assessment method not only evaluates students' ability to recall information but also tests their application of knowledge to real-world situations, encouraging critical thinking and decision-making skills.
69	Theory Essay Writing	Theory essay writing provides students with an opportunity to explore topics in-depth. By crafting well-structured essays, students not only showcase their theoretical understanding but also their ability to analyze, synthesize, and present coherent arguments. This method assesses not just knowledge retention but also the higher-order cognitive skills of analysis, evaluation, and effective communication.

70	Theory Modified Essay Questions (MEQs)	Theory Modified Essay Questions challenge students to address complex scenarios that require the integration of theoretical concepts. By applying their theoretical knowledge to practical situations, students demonstrate their aptitude for critical thinking, problem-solving, and decision-making. This method goes beyond surface-level understanding, probing into students' ability to synthesize information and apply it effectively.
71	Theory Constructed Response Questions (CRQs)	Theory Constructed Response Questions (CRQs): Theory Constructed Response Questions require students to provide detailed written responses to specific prompts. This method assesses not only students' comprehension of theoretical material but also their capability to apply that knowledge to real-world scenarios. CRQs demand thoughtful analysis and application of theories, providing insights into students' ability to translate theoretical concepts into practical solutions.
72	Trainers' Report	Trainers' reports offer valuable insights into students' performance from the perspective of educators or supervisors. These assessments provide an external perspective on students' progress, clinical skills, and overall competence.
73	Viva Exams	General and Structured General Viva: General viva exams involve oral questioning on various subjects. Students must articulate their knowledge, reasoning, and problem-solving abilities in response to questions posed by examiners.
74	Word Puzzle	Word puzzles inject an element of entertainment into vocabulary acquisition. Alongside assessing knowledge of essential terms, these puzzles stimulate cognitive connections, making learning engaging and memorable.
75	Ward Leaving Examination	Examination at the end of the clinical posting.
76	360-Degree Evaluation	360-degree evaluation gathers feedback from multiple sources, including trainers, peers, and self-assessment. This comprehensive approach provides a well-rounded view of students' competencies, behaviors, and interactions.




Registration no:

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Total Number of Pages: (XX)		Course: MBBS
		SUB CODE:
[Professional Regular / Supplementary / Attempt / Detained Examination: 20__ -__]		
SUBJECT NAME:		
BRANCH:		
Max Time: 3 Hours	Sitting: 1 st 10.00 AM to 1.00 PM	
Max Marks: 100		
Q. CODE: (To be allotted by the University)		
<i>(Applicable for Theory Subjects where there are two Parts of one Subject)</i>		
Any Question having parts should be answered as whole at one place only. Illustrate answer with diagrams wherever relevant / required if any)		
The figures in the right-hand margin indicate marks.		
Section- A		
Q 1	Structured Long Answer Questions	(1 x 15 Marks)
	a)	
Q 2	Short Answer Questions (Focused)	(5 x 4 Marks)
	a)	
	b)	
	c)	
	d)	
	e)	
Q 3	Short Answer Questions (Applied)	(5 x 2 Marks)
	a)	
	b)	
	c)	
	d)	
	e)	
Q 4	Case based/ problem-based question	(1 x 5 Marks)
	a)	
Section- B		
Q 5	Structured Long Answer Questions (Attempt any two out of 3)	(1 x 15 Marks)
	a)	
Q 6	Structured Short Answer Questions	(5 x 4 Marks)
	a)	
	b)	
	c)	
	d)	
Q 7	Short Answer Questions (AETCOM)	(1 x 5 Marks)
	a)	
Q 8	Objective Type (Selection / Supplied)	(10 x 1 Marks)
	a)	
	b)	
	c)	
	d)	
	e)	
	f)	
	g)	
	h)	

Registration no:

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		SUB_CODE:
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SUBJECT NAME:		
BRANCH:		
Max Time: 3 Hours	Sitting: 1 st 10.00 AM to 1.00 PM	
Max Marks: 100		
Q. CODE: (To be allotted by the University)		
All Questions are compulsory. Illustrate answer with diagrams wherever relevant / required (Applicable for Theory Subjects where there is one Paper)		
The figures in the right-hand margin indicate marks.		
Q 1	Long Answer Question	(2 X 15 Marks)
	a)	
	b)	
Q 2	Short Answer Questions (Focused)	(5 x 5 Marks)
	a)	
	b)	
	c)	
	d)	
	e)	
Q 3	Short Answer Questions (Applied)	(5 x 4 Marks)
	a)	
	b)	
	c)	
	d)	
	e)	
Q 4	Case based / problem-based question	(2 x 5 Mark)
	a)	
	b)	
Q 5	Short Answer Questions (AETCOM)	(1 x 5 Mark)
	a)	
Q 6	Objective Type (Selection / Supplied)	(10 x 1 Mark)
	a)	
	b)	
	c)	
	d)	
	e)	
	f)	
	g)	
	h)	
	i)	
	j)	