

PRAVARA INSTITUTE OF MEDICAL SCIENCES (DEEMED TO BE UNIVERSITY)

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SYLLABUS

PG Programme- MD (MICROBIOLOGY)

(As per MCI Regulations Governing PG Programme 2000 Amended up to May, 2018)

I. PREAMBLE:

The purpose of PG education is to create specialists who would provide high quality health care and advance the cause of science through research & training.

The purpose of preparing these Guidelines is to standardize Microbiology teaching at Post Graduate level throughout the country so that it will achieve uniformity in undergraduate teaching as well.

This document is to provide teachers and learners illustrative guidelines to achieve defined outcomes through learning and assessment. This document was prepared by various subject-content specialists. The Reconciliation Board of the Academic Committee has attempted to render uniformity without compromise to purpose and content of the document. Compromise in purity of syntax has been made in order to preserve the purpose and content. This has necessitated retention of "domains of learning" under the heading "competencies".

II. SUBJECT SPECIFIC OBJECTIVES

A post graduate student upon successfully qualifying in the MD (Microbiology) examination should be able to:

- 1. Demonstrate competence as a clinical microbiologist
- 2. Interact effectively with the allied departments by rendering services in basic as well as advanced laboratory investigations
- 3. Demonstrate application of microbiology in a variety of clinical settings to solve diagnostic and therapeutic problems along with preventive measures.
- 4. Play a pivotal role in hospital infection control, including formulation of antibiotic policy and management of biomedical waste.
- 5. Acquire skills in conducting collaborative research in the field of Microbiology and allied sciences.
- 6. Conduct such clinical/experimental research as would have significant bearing on human health and patient care
- 7. Demonstrate effective communication skills required for the practice of clinical microbiology and while teaching undergraduate students
- 8. Establish good clinical microbiological services in a hospital and in the community in the fields of bacteriology, virology, parasitology, immunology and mycology.
- 9. Plan, execute and evaluate teaching assignments in Medical Microbiology.
- 10. Plan, execute, analyze and present the research work in medical microbiology.
- 11. To acquire various skills for collaborative research.
- 12. To participate is various workshops/seminars/journal clubs/demonstration in the allied departments
- 13. Uphold the prestige of the discipline amongst the fraternity of doctors.

Post-graduate training

The post graduate training should include the following components for a holistic approach.

- a. Laboratory and Diagnostic skills in Clinical Microbiology
- b. Teaching Skills
- c. Research Methodology
- d. Communication and attitudinal skills

a. Laboratory and Diagnostic skills in Clinical Microbiology:

Based on the available facilities, the department should prepare a list of Post Graduate experiments pertaining to basic, diagnostic and applied Microbiology. Active learning should form the mainstay of the postgraduate training. There should be lectures for the postgraduate students (at least 20 per year) along with seminars/symposia/group discussions and journal clubs. The postgraduate student should also attend a minimum of 20 ward rounds, discuss with the faculty, and maintain a log book for the same. They should be able to render consultative and investigative services in microbiology.

b. Teaching Skills

The Medical Education Department/Unit of the institution should be able to sensitize the postgraduate students in basic concepts of medical education like domains of learning, teaching skills, teaching - learning methods, learning resource material, evaluation techniques etc. The postgraduate students should attend all undergraduate lectures in the subject of Microbiology and participate actively in the undergraduate teaching programme including tutorials, demonstrations and practicals.

c. Research Methodology

The postgraduate students should be able to plan, design and conduct research in microbiology, as well as collaborate with other departments, analyze data and become familiar with basic biostatistics. They should also be able to write a research paper. All this can be achieved by writing a thesis on a current and relevant topic in Microbiology.

d. Communication and attitudinal skills

The post graduate student should be able to communicate effectively with patients, their relatives, peers, and consultants for better clinical correlation of laboratory findings as well as research. They should work as an effective team member and leader. They should also demonstrate right kind of attitude while handling clinical material and reports.

III. SUBJECT SPECIFIC COMPETENCIES

A. Cognitive Domain:

At the end of the course, the student should have acquired knowledge in the following theoretical competencies:

General Microbiology

- 1. Important historical events and developments in microbiology
- 2. Basic as well as advanced knowledge in various microscopes and microscopic techniques used in diagnostic microbiology

- 3. Various bio-safety issues including physical and biological containment, universal containment, personal protective equipment for biological agents
- 4. Various isolation precautions including standard and transmission based precautions
- 5. In-depth knowledge about various method of Sterilization, disinfection and lyophilization
- 6. Nomenclature, classification and morphology of bacteria as well as other microorganisms
- 7. Various types and significance of normal flora of human body in health and disease states.
- 8. Requirements for growth and nutrition of bacteria along with bacterial metabolism
- 9. Various types and role of bacterial toxins and bacteriocins
- 10. Microbiology of air, milk, water as well as hospital environment
- 11. Various types of host-parasite relationship and their significance
- 12. Various antimicrobial agents and mechanisms drug resistance
- 13. Bacterial genetics, bacteriophages and molecular genetics relevant for medical microbiology
- 14. Applications of quality assurance, quality control in microbiology and accreditation of laboratories

Immunology

- 1. Components of immune system, types of immunity (Innate, acquired, mucosal, humoral and cell mediated immunity) and immune response
- 2. Describes and identifies uses of various antigens, immunoglobulins (antibodies) and antigen and antibody reactions
- 3. Complement system and Cytokines
- 4. Various disorders like hypersensitivity, immunodeficiency and auto-immunity involving immune system
- 5. MHC complex, Immune tolerance, Transplantation and Tumor immunity
- 6. Various types, techniques, advances, and applications of vaccines and immunotherapy
- 7. Measurement of immunological parameters
- 8. Immunological techniques and their applications in diagnostic microbiology as well as research
- 9. Mechanisms and significance of immune-potentiation and immune-modulation

Systemic bacteriology

- 1. Demonstrate knowledge and skills in various techniques for isolation and identification of bacteria
- 2. Demonstrate knowledge about epidemiology, morphology, biochemical properties, antigenic nature, pathogenesis, complications, laboratory diagnosis treatment and prevention of major bacterial pathogens of medical importance given below
 - a. Gram positive cocci including Staphylococcus, Micrococcus, Streptococcus, anaerobic cocci etc.
 - b. Gram negative cocci including Neisseria, Branhamella, Moraxella etc.
 - c. Gram positive bacilli including Lactobacillus, Coryneform bacteria, Bacillus and aerobic bacilli, Actinomyces, Nocardia, Actinobacillus and other actinomycetales, Erysipelothrix, Listeria, Clostridium and other spore bearing anaerobic bacilli etc.

- d. Gram negative bacilli including Vibrios, Aeromonas, Plesiomonas, Haemophilus, Bordetella, Brucella, Gardnerella, Pseudomonas and other non-fermenters, Pasteurella, Francisella, Bacteroides, Fusobacterium, Leptotrichia and other anaerobic gram negative bacilli etc.
- e. Helicobacter, Campylobacter, Calymmatobacterium, Streptobacillus, Spirillum and miscellaneous bacteria
- f. Enterobacteriaceae
- g. Mycobacteria
- h. Spirochaetes
- i. Chlamydia
- j. Mycoplasmatales; Mycoplasma, Ureaplasma, Acholeplasma and other Mycoplasmas.
- k. Rickettsiae, Coxiella, Bartonella etc.

Mycology

- 1. Explain general characteristics including morphology, reproduction and classification of fungi
- 2. Demonstrate knowledge and skills for isolation and identification of fungi
- 3. Explain tissue reactions to fungi
- 4. Demonstrate knowledge about epidemiology, morphology, biochemical properties, antigenic nature, pathogenesis, complications, laboratory diagnosis treatment and prevention of major fungal pathogens of medical importance given below
 - a. Yeasts and yeast like fungi including Candida, Cryptococcus, Malassezia, Trichosporon, Geotrichum, Saccharomyces etc.
 - b. Mycelial fungi including Aspergillus, Zygomycetes, Pseudallescheria, Fusarium, Piedra, other dematiaceous hyphomycetes and other hyalohyphomycetes etc.
 - c. Dimorphic fungi including Histoplasma, Blastomyces, Coccidioides, Paracoccidioides, Sporothrix, Penicillium marneffei etc.
 - d. Dermatophytes
 - e. Fungi causing Mycetoma, Chromoblatomycosis, Occulomycosis and Otomycosis.
 - f. Pneumocystis jirovecii infection
 - g. Rhinosporidium seeberi and Lacazia loboi (formerly named Loboa loboi)
 - h. Pythium insidiosum
 - i. Prototheca
- 5. Able to identify laboratory contaminant fungi
- 6. Explain Mycetism and mycotoxicosis along with agents involved
- 7. Demonstrates knowledge about antifungal agents and perform *in vitro* antifungal susceptibility tests.

Virology

- 1. Demonstrates knowledge about general properties, classification, morphology, virus replication and genetics of viruses
- 2. Explain pathogenesis of viral infections
- 3. Demonstrates knowledge about isolation and identification of viruses
- 4. Demonstrate knowledge about epidemiology, morphology, genetics, antigenic nature, pathogenesis, complications, laboratory diagnosis, treatment and

- prevention of major DNA viruses of medical importance including Pox viruses,
- Herpes viruses, Adeno viruses, Hepadna virus, Papova viruses and Parvo viruses etc.
- 5. Demonstrate knowledge about epidemiology, morphology, genetics, antigenic nature, pathogenesis, complications, laboratory diagnosis, treatment and prevention of major RNA viruses of medical importance including *Entero viruses, Toga viruses, Flavi viruses, Orthomyxo viruses, Paramyxo viruses, Reo viruses, Rhabdo viruses, Arena viruses, Bunya viruses, Retro viruses, Filo viruses, Human Immunodeficiency Virus, Arbo viruses, Corona viruses, Calci viruses etc.*
- 6. Demonstrate knowledge about epidemiology, morphology, genetics, antigenic nature, pathogenesis, complications, laboratory diagnosis, treatment and prevention of major *Hepatitis viruses*
- 7. Demonstrate knowledge about epidemiology, morphology, genetics, antigenic nature, pathogenesis, complications, laboratory diagnosis, treatment and prevention of unclassified viruses and slow viruses including prions
- 8. Demonstrate knowledge about viral vaccines and anti-viral drugs.

Parasitology

- 1. Demonstrate knowledge about general characters, classification and methods of identification of parasites.
- 2. Demonstrate knowledge about epidemiology, morphology, antigenic nature, life cycle, pathogenesis, complications, laboratory diagnosis, treatment and prevention of Protozoan parasites of medical importance including Entamoeba, Free living amoebae, Giardia, Trichomonas, Leishmania, Trypanosoma, Plasmodium, Toxoplasma, Sarcocystis, Cryptosporidium, Microsporidium, Cyclospora Isospora, Babesia, Balantidium, etc.
- 3. Demonstrate knowledge about epidemiology, morphology, antigenic nature, life cycle, pathogenesis, complications, laboratory diagnosis, treatment and prevention of helminthes of medical importance including those belonging to Cestoda (Diphyllobothrium, Echinococcus, Taenia, Hymenolepis, Dipyllidium, Multiceps etc.), Trematoda (Schistosomes, Fasciola, Fasciolopsis, Gastrodiscoides, Paragonimus, Clonorchis, Opisthorchis etc.) and Nematoda (Trichiuris, Trichinella, Strongyloides, Ancylostoma, Necator, Ascaris, Toxocara, Enterobius, Filarial worms, Dracunculus etc.)
- 4. Demonstrate knowledge about common arthropods and other vectors viz. mosquito, sand fly, ticks, mite, cyclops, louse, myasis of medical importance.
- 5. Demonstrate knowledge about anti-parasitic vaccine and drugs.

Applied Microbiology

- 1. Demonstrate knowledge about epidemiology of infectious diseases
- 2. Demonstrate knowledge about antimicrobial prophylaxis and therapy
- 3. Demonstrate knowledge about hospital acquired infections
- 4. Demonstrate knowledge about management of biomedical waste
- 5. Effectively investigate an infectious outbreak in hospital and community
- 6. Demonstrate knowledge about infections of various organs and systems of human body viz. respiratory tract infections, urinary tract infections, central nervous system infections, congenital infections, reproductive tract infections, gastrointestinal infections, hepatitis, pyrexia of unknown origin, infections of eye, ear and nose, septicaemia, endocarditis, haemorrhagic fever etc.

- 7. Demonstrate knowledge about opportunistic infections
- 8. Demonstrate knowledge about various sexually transmitted diseases
- 9. Demonstrate knowledge about principles, methods of preparation, administration and types of vaccines
- 10. Effectively use information technology (Computers) in microbiology
- 11. Demonstrate knowledge and applications of Automation in Microbiology
- 12. Demonstrate knowledge and applications about molecular techniques in the laboratory diagnosis of infectious diseases
- 13. Demonstrate knowledge in statistical analysis of microbiological data and research methodology
- 14. Demonstrate knowledge in animal and human ethics involved in microbiology
- 15. Demonstrate knowledge in safety in laboratory and Laboratory management

B) Affective Domain:

- 1. Should be able to function as a part of a team, develop an attitude of cooperation with colleagues, and interact with the patient and the clinician or other colleagues to provide the best possible diagnosis or opinion.
- 2. Always adopts ethical principles and maintain proper etiquette in dealings with patients, relatives and other health personnel and to respect the rights of the patient including the right to information and second opinion.
- 3. Develop communication skills to word reports and professional opinion as well as to interact with patients, relatives, peers and paramedical staff, and students for effective teaching.

C) Psychomotor domain:

- 1. Collection/transportation of specimens for microbiological investigations
- 2. Preparation, examination and interpretation of direct smears from clinical specimens
- 3. Plating of clinical specimens on media for isolation, purification, identification and quantification purposes.
- 4. Preparation of stains viz. Gram, Albert's, Ziehl Neelsen (ZN), Silver impregnation stain and special stains for capsule and spore etc.
- 5. Preparation and pouring of media like Nutrient agar, Blood Agar, Mac-Conkey agar, Sugars, Kligler iron agar/Triple sugar iron agar (TSI), Robertson's cooked meat broth, Lowenstein Jensens medium, Sabouraud's dextrose agar etc.
- 6. Preparation of reagents-oxidase, Kovac etc.
- 7. Quality control of media, reagents etc.
- 8. Operation of autoclave, hot air oven, filters like Seitz and membrane filters etc
- 9. Care and operation of microscopes
- 10. Washing and sterilization of glassware (including plugging and packing)
- 11. Care, maintenance and use of common laboratory equipments like autoclave, hot air oven, water bath, centrifuge, refrigerators, incubators etc.
- 12. Aseptic practices in laboratory and safety precautions. Selection of Personal Protective Equipment according to task and donning (gloves, mask, eye protection, gown etc).
- 13. Sterility tests
- 14. Identification of bacteria of medical importance up to species level (except anaerobes which could be up to generic level).
- 15. Techniques of anaerobiosis

- 16. Tests for Motility: hanging drop, Cragie's tube, dark ground microscopy for *spirochaetes*
- 17. Routine and Special tests Catalase test, Oxidase test, slide and tube coagulase tests, niacin and catalase tests for *Mycobacterium*, bile solubility, chick cell agglutination, sheep cell haemolysis, satellitism, CAMP test, and other biochemical tests.
- 18. Preparation of antibiotic discs; performance of antimicrobial susceptibility testing eg. Kirby-Bauer, Stoke's method, Estimation of Minimal Inhibitory/Bactericidal concentrations by tube/plate dilution methods.
- 19. Tests for β-lactamase production.
- 20. Screening of gram negative isolates for ESBL and MBL
- 21. Screening of *Staphylococci* for Methicillin Resistance.
- 22. Screening of *Enterococci* for Vancomycin resistance.
- 23. Testing of disinfectants.
- 24. Quantitative analysis of urine by pour plate method and semi quantitative analysis by standard loop tests for finding significant bacteriuria
- 25. Disposal of contaminated materials like cultures
- 26. Disposal of infectious waste
- 27. Bacteriological tests for water, air and milk
- 28. Maintenance and preservation of bacterial cultures

☐ Time frame to acquire knowledge & skills:

o Knowledge:

End of 1st year	End of 2 nd year	End of 3 rd year
GENERAL MICROBIOLOGY:	IMMUNOLOGY : Clinical	GENERAL MICROBIOLOGY& IMMUNOLOGY:
 1 History and Pioneers in Microbiology 2 Microscopy 3 Nomenclature and classification of microbes 	 Hypersensitivity Immunodeficiency Auto-immunity Immune tolerance Transplantation immunity Tumour immunity Immunoprophylaxis and immunotherapy 	All
 4 Morphology of bacteria and other micro-organisms 5 Growth and Nutrition of bacteria 6 Bacterial metabolism 7 Sterilization and disinfection 8 Culture media and culture methods 9 Identification of bacteria 10 Bacterial toxins 11 Bacterial antagonism: Bacteriocins 12 Bacterial genetics 13 Gene cloning 	8. Measurement of immunity	

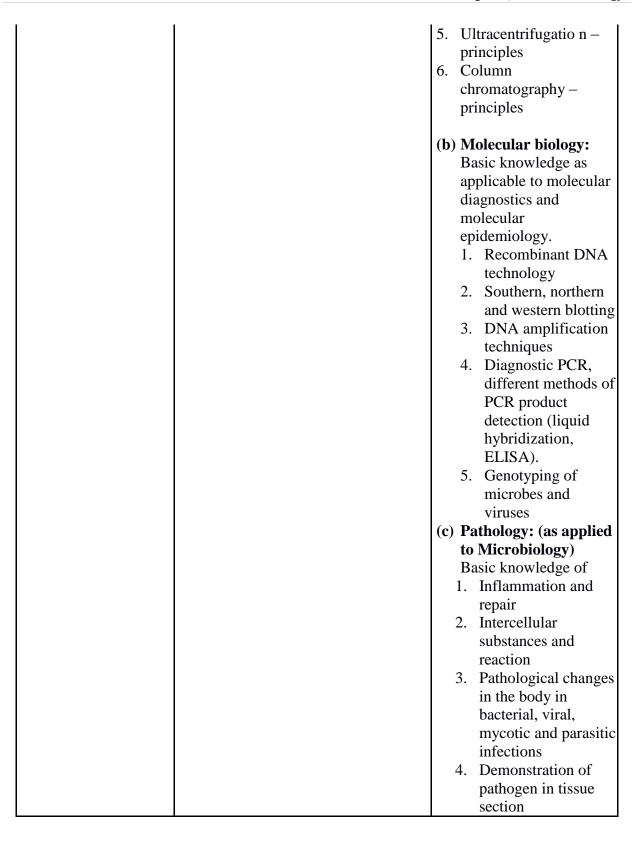
treatment of infections and drug	
resistance in bacteria	
15 Bacterial ecology- Normal flora of	
human body, Hospital environment,	
Air, Water and Milk	
16 Host-parasite relationship	

IMMUNOLOGY:	SY	STEMATIC	SYS	STEMATIC
	BA	CTERIOLOGY	BA	CTERIOLOGY (2 nd year)
			: pl	
1 Innate and	1	Streptococcus and	1	Actinomycetes Nocardia
acquired		Lactobacillus		and Actinobacillus
immunity				
2 Antigens	2	Staphylococcus and	2	Erysipelothrix and
		Micrococcus		Listeria
3 Immunoglobulins	3	Pseudomonas	3	The
				Bacteroidaceae:
				Bacteroides,
				Fusobacterium
				and Leptotrichia
4 Antigen and	4	The Enterobacteriaceae	4	Chromobacterium,
antibody				flavobacterium,
Reactions				Acinetobacter and
				Alkaligenes
5 Complement	5	Mycobacteria	5	Pasteurella, Francisella
System				_
6 The normal	6	Corynebacterium and other	6	Brucella
immune system:		Coryneform bacteria		
structure and function	l_		_	~
7 Immune	7	Vibrios, Aeromonas,	7	Chlamydia
Response		Plesiomonas,		
		Campylobacter &		
		Spirillum	0	D: 1:
	8	Neisseria, Branhamella &	8	Rickettsiae
		Moraxella	0	M 1 1
	9	Haemophilus and	9	Mycoplasmatales:
		Bordetella		Mycoplasma,
				Ureaplasma and
	10	Decilled the could be seen	10	Acholeplasma
	10	Bacillus: the aerobic spore-	10	Miscellaneous
	11	bearing bacilli		bacteria
	11	Clostridium: the spore-		
		bearing anaerobic bacilli		
	12			
		Non-sporing anaerobe The Spirochaetes		
	13	The Sphochaetes		

MICROBIOLOGY	VIROLOGY:	VIROLOGY (2 nd
APPLIED TO		year): plus
TROPICAL	2. Classification of viruses	1. Vaccines
MEDICINE AND	3. Morphology: virus structure	2. Pox viruses
RECENT AND	4. Virus replication	3. Vesicular viruses
ADVANCES	5. The genetics of viruses	4. Toga viruses
ADVANCES	6. The pathogenicity & lab	5. Bunya viruses
1. Normal Microbial	diagnosis of viruses	6. Arena viruses
flora	7. Epidemiology of viral infections	7. Marburg and
2. Epidemiology of	8. Anti-viral drugs	Ebola viruses
infectious	9. Bacteriophages	8. Rubella virus
diseases	10. Herpes viruses	9. Orbi viruses
3. Hospital acquired	11. Paramyxoviruses	10. Respiratory
infections &	12. Influenza virus	diseases:
Hospital waste	13. Hepatitis viruses	Rhinoviruses,
disposal	14. Rabies virus	adenoviruses and
4. Bacteriology of	15. Human immunodeficiency	corona viruses
water milk and	viruses	11. Enteroviruses;
air	, in the co	Polio, Echo, and
****		Coxsackie viruses
		12. Other enteric
		viruses
		13. Slow viruses
		14. Oncogenic viruses
		15. Teratogenic
		Viruses
	PARASITOLOGY:	PARASITOLOGY
	1. General Parasitology	(2 nd year): plus
	2. Protozoan parasites of medical	1. Protozoan
	importance:	parasites of
	Entamoeba,	medical
	Giardia,	importance:
	Trichomonas,	Toxoplasma,
	Leishmania,	Sarcocystis,
	Trypanosoma,	Cryptosporidium,
	Plasmodium	Babesia,
		Balantidium etc.
		2. Helminthology:
		All those medically
		important
		helminthes
		belonging to
		Cestoda,
		Trematoda and
		Nematoda.
		3. Cestodes:
		3. Cestodes: Diphyllobothrium,

	Echinococcus, Hymenolepis, Dipyllidium, Multiceps etc. 4. Trematodes: Schistosomes, Fasciola, Gastrodiscoides, Paragonimus, Clonorchis, Opisthorchis etc. 5. Nematodes: Trichuris, Trichinella, Strongyloides, Ancylostoma, Necator, Ascaris, Toxocara, Enterobius, Filarial worms, Dracunculus, etc. 6 . Ecto-parasites: Common arthropods and other vectors viz., Mosquito, Sand
MYCOLOGY 1 . The morphology and	fly, Ticks, Mite, Cyclops MYCOLOGY (2 nd year): plus
reproduction in fungi 2 . Classification of fungi 3 . Dermatophytes 4 . Candida 5 . Aspergillus	Contaminant and opportunistic fungi Fungi causing superficial mycoses Fungi causing subcutaneous mycoses Fungi causing subcutaneous mycoses Fungi causing systemic

1	infections
	5
	. Anti-mycotic
	agents
	MICROBIOLOGY
	APPLIED TO
	TROPICAL
	MEDICINE AND RECENT
	ADVANCES
	ADVANCES
	various organs and
	systems of human
	body
	2 . Molecular
	genetics as
	applicable to
	microbiology
	3 Vaccinalogy
	. Vaccinology:
	principle, methods
	of preparation,
	administration of
	vaccines.
	4
	. Bio-terrorism
	ALLIED BASIC
	SCIENCES
	(a) Biochemistry: Basic
	understanding of
	biochemistry as applied
	to immunological/
	molecular methods for
	study of microbial
	diseases and
	pathogenesis of
	infections.
	1. Protein purification and
	estimation
	2. Protein estimation
	3. Nucleic acid
	purification and
	characterization
	4. Agarose and
	polyacrylamide gel
	electrophoresis –
	principles
<u> </u>	Francisco



o **SKILLS:**

1st year residency-skills list

Area	Sr. no.	Procedure	Observed no.	no./	Performed independent ly no.(under supervision)
General	1.	Microscopy for unstained	5	5	10
microbiology		preparations/ wet mount			
	2.	Microscopy for stained preparation	5	5	10
	3.	Preparation of direct smears from clinical specimens	5	5	10
	4.	Hanging drop preparation	5	5	10
	5.	Washing, sterilization and packing of glassware	10 sessions	-	-
	6.	Infection control activities- environmental sampling	10	10	-
	7	Identification of HAI	5	5	
	8	Calculation of HAI quality indicators	5	5	
	9	Bacteriology of water	5	5	-
	10	Bacteriology of air	5	5	-
	11	Antibiotic disc preparation	-	-	_
	12	Handling of laboratory animal	-	-	_
	13	Methods for preservation of bacteria	10	-	-
	14	Maintenance of stock cultures	10	_	_
Staining	1	Gram staining	10	20	30
	2	Acid fast staining (Ziehl- Neelsen method)	10	20	30
	3	Albert staining	5	10	10
	4	Modified ZN staining for <i>M</i> . <i>leprae</i>	5	5	5
	5	Modified ZN staining for Nocardia	5	5	5
	6	IQC-staining	5	5	5
Media	1	Preparation of stains	4	4	4
preparation	2	Preparation of reagents	10	10	10
	3	Preparation, plugging, pouring& Quality Control (QC) of culture media	20	20	30
	4	Operation & maintenance of autoclave	10	10	20
Bacteriology	1	Specimen collection for Blood Culture	5	5	5

	2	Inoculation of liquid & solid	20	20	30
		media			
	3	Identification test	20	20	30
	4	Antimicrobial sensitivity	10	20	30
		testing- modified Kirby-bauer			
		technique			
	5	IQC- Antibiotic disc potency	5	5	-
	6	Operation of BacT/ALERT	5	10	20
	7	Operation of Vitek 2 compact	5	10	20
	8	Petroff's concentration	10	10	20
		technique			
	9	AFB culture & sensitivity	5	10	20
Mycology	1	KOH Wet mount	5	10	20
	2	Germ tube test	5	10	20
	3	Slide culture	5	10	20
	4	Negative staining for fungus	5	5	5
	5	LPCB mount	10	10	10
Parasitology	1	Giemsa staining for thick & thin	5	-	-
		peripheral blood smear			
	2	Stool wet mount for R/M	10	20	30
	3	Stool concentration techniques	5	10	5
	4	Modified ZN staining for <i>C</i> .	2	2	2
		parvum			
Serology/	1	Phlebotomy & separation of	10	10	5
Immunology		serum			
	2	Operation & maintenance of	5	10	20
		mini-VIDAS			
	3	Operation & maintenance of	5	10	
		ELISA reader & washer			
		Performance of serological			
		tests			
	1	Latex agglutination test(RA,	10	20	30
		ASO)			
	2	RPR card test	10	20	30
	3	Tube agglutination test	10	20	30
	4	Gold conjugate Rapid card test	10	20	30
	5	ANA by IF	5	5	
	6	ANA by Immunoblot	5	5	
	7	IQC-serology	5	5	5

2nd year residency-skill list

Area	Sr. no.	Procedure	Observed	Assisted no./	Performed
			no.	practice on	independently no.
				dummy	(under supervision)
General	1.	Microscopy for unstained			
microbiology		preparations/ wet mount			
	2.	Microscopy for stained			
		preparation			
	3.	Preparation of direct smears			
		from clinical specimens			
	4.	Preparation of slit skin smear	5	5	5
		for lepra bacilli			
	5.	Hanging drop preparation			10
	6.	Washing, sterilization and	05 sessions	-	-
		packing of glassware			
	7	Infection control activities-		10	10
		environmental sampling			
	8	Identification of HAI		5	5
	9	Calculation of HAI quality		5	5
		indicators			
	10	Bacteriology of water		5	5
	11	Bacteriology of air		5	5
	12	Antibiotic disc preparation	05 lots	-	-
	13	Handling of laboratory	-	-	-
		animal			
	14	Methods for preservation of		05	10
		bacteria			
	15	Maintenance of stock		05	10
		cultures			
Staining	1	Gram staining			30
	2	Acid fast staining (Ziehl-			30
		Neelsen method)			
	3	Albert staining			05
	4	Modified ZN staining for <i>M</i> .			5
		leprae			
	5	Modified ZN staining for			5
		Nocardia			
	6	IQC-staining			5
Media	1	Preparation of stains			5
preparation					
	2	Preparation of reagents			15
	3	Preparation, plugging,			50
		pouring & Quality Control			
		(QC) of culture media			
	4	Operation & maintenance of			20

		autoclave			
Bacteriology	1	Specimen collection for			5
		Blood Culture			
	2	Inoculation of liquid & solid			30
		media			
	3	Identification test			30
	4	Antimicrobial sensitivity			30
		testing- modified Kirby-			
		bauer technique			
	5	IQC- Antibiotic disc potency		5	5
	6	Operation of BacT/ALERT			20
	7	Operation of Vitek 2			20
		compact			
	8	Petroff's concentration			20
		technique			
	9	AFB culture & sensitivity			20
Mycology	1	KOH Wet mount			20
	2	Germ tube test			20
	3	Slide culture			20
	4	Negative staining for fungus			5
	5	LPCB mount			10
Parasitology	1	Giemsa staining for thick &	-	10	-
		thin peripheral blood smear			
	2	Stool wet mount for R/M			30
	3	Stool concentration			5
		techniques			
	4	Modified ZN staining for <i>C</i> .			2
		parvum			
Serology/	1	Phlebotomy & separation of			5
Immunology		serum			
	2	Operation & maintenance of			20
		mini-VIDAS			
	3	Operation & maintenance of			20
		ELISA reader & washer			
		Performance of serological			
		tests			
	1	Latex agglutination test(RA,			30
		ASO, CRP)			
	2	RPR card test			30
	3	Tube agglutination test			30
	4	Gold conjugate rapid card			30
		test			
	5	ANA by IF			10
	6	ANA by Immunoblot			10
_	7	IQC-serology			5

3rd year residency-skill list

Area	Sr. no.	Procedure	Observed no.	Assisted no./ practice on dummy	Performed independently no. (under supervision)
General microbiology	1.	Microscopy for unstained preparations/ wet mount			
	2.	Microscopy for stained preparation			
	3.	Preparation of slit skin smear for lepra bacilli			
	4.	Hanging drop preparation			
	5.	Washing, sterilization and packing of glassware	05 sessions	-	-
	6.	Infection control activities- environmental sampling			10
	7	Identification of HAI			5
	8	Calculation of HAI quality indicators			5
	9	Bacteriology of water	-	-	5
	10	Bacteriology of air	-	-	5
	11	Antibiotic disc preparation	-	5 lots	2 lots
	12	Handling of laboratory animal	-	-	10
	13	Methods for preservation of bacteria	-	-	10
	14	Maintenance of stock cultures	-	-	10
Staining	1	Gram staining			30

	2	Acid fast staining (Ziehl-Neelsen method)	 	30
	3	Albert staining	 	05
	4	Modified ZN staining for <i>M</i> . <i>leprae</i>	 	5
	5	Modified ZN staining for Nocardia	 	5
	6	IQC-staining	 	5
Media preparation	1	Preparation of stains	 	10
	2	Preparation of reagents	 	15
	3	Preparation, pouring & Quality Control (QC) of culture media	 	50
	4	Operation & maintenance of autoclave	 	20
Bacteriology	1	Specimen collection for Blood Culture	 	5
	2	Inoculation of liquid & solid media	 	30
	3	Identification test	 	30
	4	Antimicrobial sensitivity testing- modified Kirby-bauer technique	 	30
	5	IQC- Antibiotic disc potency	 	5
	6	Operation of BacT/ALERT	 	20
	7	Operation of Vitek 2 compact	 	20
	8	Petroff's concentration	 	20

		technique		
	9	AFB culture & sensitivity	 	20
Mycology	1	KOH Wet mount	 	20
	2	Germ tube test	 	20
	3	Slide culture	 	20
	4	Negative staining for fungus	 	5
	5	LPCB mount	 	10
Parasitology	1	Giemsa staining for thick & thin peripheral blood smear	 	-
	2	Stool wet mount for R/M	 	30
	3	Stool concentration techniques	 	5
	4	Modified ZN staining for <i>C</i> . parvum	 	2
Serology/ Immunology	1	Phlebotomy & separation of serum	 	5
	2	Operation & maintenance of mini-VIDAS	 	20
	3	Operation & maintenance of ELISA reader & washer	 	20
		Performance of serological tests		
	1	Latex agglutination test(RA, ASO, CRP)	 	30
	2	RPR card test	 	30
	3	Tube agglutination test	 	30
	4	Gold conjugate rapid card	 	30

	test			
5	ANA by IF	1		10
6	ANA by Immunoblot	1	-1	10
7	IQC-serology			5

IV. SYLLABUS

Course contents:

Paper I: General Microbiology

- 1. History of microbiology
- 2. Microscopy
- 3. Bio-safety including universal containment, personal protective equipment for biological agents
- 4. Physical and biological containment
- 5. Isolation precautions including standard precautions and transmission based precautions
- 6. Sterilization, disinfection and lyophilization
- 7. Morphology of bacteria and other microorganisms
- 8. Nomenclature and classification of microorganisms
- 9. Normal flora of human body
- 10. Growth and nutrition of bacteria
- 11. Bacterial metabolism
- 12. Bacterial toxins
- 13. Bacteriocins
- 14. Microbiology of hospital environment
- 15. Microbiology of air, milk and water
- 16. Host-parasite relationship
- 17. Antimicrobial agents and mechanisms drug resistance
- 18. Bacterial genetics and bacteriophages
- 19. Molecular genetics relevant for medical microbiology
- 20. Quality assurance and quality control in microbiology
- 21. Accreditation of laboratories

Immunology

- 1. Components of immune system
- 2. Innate and acquired immunity
- 3. Cells involved in immune response
- 4. Antigens
- 5. Immunoglobulins
- 6. Mucosal immunity
- 7. Complement
- 8. Antigen and antibody reactions

- 9. Hypersensitivity
- 10. Cell mediated immunity
- 11. Cytokines
- 12. Immunodeficiency
- 13. Auto-immunity
- 14. Immune tolerance
- 15. MHC complex
- 16. Transplantation immunity
- 17. Tumor immunity
- 18. Vaccines and immunotherapy
- 19. Measurement of immunological parameters
- 20. Immunological techniques
- 21. Immunopotentiation and immunomodulation

Paper II: Systematic bacteriology

- 1. Isolation and identification of bacteria
- 2. Gram positive cocci of medical importance including Staphylococcus, Micrococcus, Streptococcus, anaerobic cocci etc.
- 3. Gram negative cocci of medical importance including Neisseria, Branhamella, Moraxella etc.
- 4. Gram positive bacilli of medical importance including Lactobacillus, Coryneform organisms, Bacillus and aerobic bacilli, Actinomyces, Nocardia, Actinobacillus and other actinomycetales, Erysipelothrix, Listeria, Clostridium and other spore bearing anaerobic bacilli etc.
- 5. Gram negative bacilli of medical importance including Vibrios, Aeromonas, Plesiomonas, Haemophilus, Bordetella, Brucella, Gardnerella, Pseudomonas and other non-fermenters, Pasteurella, Francisella, Bacteroides, Fusobacterium, Leptotrichia and other anaerobic gram negative bacilli etc.
- 6. Helicobacter, Campylobacter, Calymmatobacterium, Streptobacillus, Spirillum and miscellaneous bacteria
- 7. Enterobacteriaceae
- 8. Mycobacteria
- 9. Spirochaetes
- 10. Chlamydia
- 11. Mycoplasmatales; Mycoplasma, Ureaplasma, Acholeplasma and other Mycoplasmas.
- 12. Rickettsiae, Coxiella, Bartonella etc.

Mycology

- 1. General characteristics and classification of fungi
- 2. Morphology and reproduction of fungi
- 3. Isolation and identification of fungi
- 4. Tissue reactions to fungi
- 5. Yeasts and yeast like fungi of medical importance including Candida, Cryptococcus, Malassezia, Trichosporon, Geotrichum, Saccharomyces etc.
- Mycelial fungi of medical importance including Aspergillus, Zygomycetes, Pseudallescheria, Fusarium, Piedra, other dematiaceous hyphomycetes and other hyalohyphomycetes etc.

- 7. Dimorphic fungi including Histoplasma, Blastomyces, Coccidioides, Paracoccidioides, Sporothrix, Penicillium marneffei etc.
- 8. Dermatophytes
- 9. Fungi causing Mycetoma, Chromoblatomycosis, Occulomycosis and Otomycosis.
- 10. Pythium insidiosum
- 11. Prototheca
- 12. Pneumocystis jirovecii infection
- 13. Rhinosporidium seeberi and Lacazia loboi (Loboa loboi)
- 14. Laboratory contaminant fungi
- 15. Mycetism and mycotoxicosis
- 16. Antifungal agents and in vitro antifungal susceptibility tests.

Paper III: Virology

- 1. General properties of viruses
- 2. Classification of viruses
- 3. Morphology: Virus structure
- 4. Virus replication
- 5. Isolation and identification of viruses
- 6. Pathogenesis of viral infections
- 7. Genetics of viruses
- 8. DNA viruses of medical importance including Pox viruses, Herpes viruses, Adeno viruses, Hepadna virus, Papova and Parvo viruses etc.
- 9. RNA viruses of medical importance including Enteroviruses, Toga viruses, Flavi viruses, Orthomyxo viruses, Paramyxo viruses, Reo viruses, Rhabdo viruses, Arena viruses, Bunya viruses, Retro viruses, Filo viruses, Human immunodeficiency virus, Arbo viruses, Corona viruses, Calci viruses etc.
- 10. Slow viruses including prions
- 11. Unclassified viruses
- 12. Hepatitis viruses
- 13. Viriods, prions
- 14. Vaccines and anti-viral drugs.

Parasitology

- 1. General characters and classification of parasites.
- 2. Methods of identification of parasites
- 3. Protozoan parasites of medical importance including Entamoeba, Free living amoebae, Giardia, Trichomonas, Leishmania, Trypanosoma, Plasmodium, Toxoplasma, Sarcocystis, Cryptosporidium, Microsporidium, Cyclospora Isospora, Babesia, Balantidium, etc.
- 4. Helminthology of medical importance including those belonging to Cestoda (Diphyllobothrium, Taenia, Echinococcus, Hymenolepis, Dipyllidium, Multiceps etc.), Trematoda (Schistosomes, Fasciola, Fasciolopsis, Gastrodiscoides, Paragonimus, Clonorchis, Opisthorchis etc.) and Nematoda (etc.)
- 5. Entomology: common arthropods and other vectors viz. mosquito, sand fly, ticks, mite, cyclops, louse, myasis.
- 6. Anti-parasitic agents.

Paper IV: Applied Microbiology

- 1. Epidemiology of infectious diseases
- 2. Antimicrobial prophylaxis and therapy
- 3. Hospital acquired infections
- 4. Management of biomedical waste
- 5. Investigation of an infectious outbreak in hospital and community
- 6. Infections of various organs and systems of human body viz. respiratory tract infections, urinary tract infections, central nervous system infections, congenital infections, reproductive tract infections, gastrointestinal infections, hepatitis, pyrexia of unknown origin, infections of eye, ear and nose, septicaemia, endocarditis, haemorrhagic fever etc.
- 7. Opportunistic infections
- 8. Sexually transmitted diseases
- 9. Vaccinology: principles, methods of preparation, administration of vaccines, types of vaccines
- 10. Information technology (Computers) in microbiology
- 11. Automation in Microbiology
- 12. Molecular techniques in the laboratory diagnosis of infectious diseases
- 13. Statistical analysis of microbiological data and research methodology
- 14. Animal and human ethics involved in microbiological work.
- 15. Safety in laboratory and Laboratory management

V. TEACHING AND LEARNING METHODS

The training programme should be designed to enable the student to acquire a capacity to learn and investigate, to synthesize and integrate a set of facts and develop a faculty to reason. The curricular programme and scheduling of postings must provide the student with opportunities to achieve the above broad objectives. Much of the learning is to be accomplished by the student himself. Interactive discussions are to be preferred over didactic sessions. The student must blend as an integral part of the activities of an academic department that usually revolves around three equally important basic functions of teaching, research and service. As mentioned earlier, the emphasis recommended under a residency programme is of learning while serving/working.

Post Graduate Training programme

Teaching methodology

Based on the available facilities, the Department can prepare a list of post graduate experiments pertaining to basic and applied microbiology. Active learning should form the mainstay of post graduate training; there should be lectures for post graduates (at least 20 per year), along with seminars, symposia, group-discussions and Journal clubs. The post graduate students should regularly do the ward rounds of various clinical departments and learn cases of interest for discussion with the clinical faculty. Each college should have a Medical Education Unit to generate teaching resource material for undergraduates and evolving of problem solving modules.

Rotation:

Postings to laboratories/assignments

The three-year training programme for the MD degree may be arranged in the form of postings to different assignments/laboratories for specified periods as outlined below. The period of such assignments/postings is recommended for 35 months. Posting schedules may be modified depending on needs, feasibility and exigencies. For facilities not available in the parent institution as well as for additional knowledge and skill, extramural postings may be undertaken.

Suggested schedule of rotation:

Within Department

- 1. Bacteriology
- 2. Mycobacteriology
- 3. Serology/Immunology
- 4. Mycology
- 5. Virology
- 6. Parasitology
- 7. Media preparation

Other Departments

- 1. Clinical Pathology
- 2. Clinical Biochemistry
- 3. Skin & VD
- 4. ICTC & RNTCP

Practical training

Practical training should be imparted by posting the students in various sub-specialties (sections) as detailed in the intrinsic and extrinsic rotation. The student should be actively involved in day to day working of all the sections. He/she should be trained under the guidance of teachers in all the aspects of Clinical Microbiology and applied aspects of laboratory medicine including collection and transport of specimens, receiving of samples, preparation of requisite reagents, chemicals, media and glassware, processing of specimens, performing required antimicrobial susceptibility testing and reporting on the specimens, interpretation of results, sterilization procedures, bio-safety precautions, infection control practices, maintenance of equipments, record keeping and quality control in Microbiology.

Skills & performance

The student should be given graded responsibility to enable learning by apprenticeship. The faculty throughout the year should assess performance of the student in skills. Area of improvement/remarks should be mentioned for the skill and student should be reassessed for the skills which are not acquired. To go to the next level, it should be mandatory for the student to acquire lower level skills satisfactorily, i.e only on satisfactory completion of assisted/performed with assistance skills should the student be permitted to perform the skill independently.

Emergency duty

The student should be posted for managing emergency laboratory services in Microbiology. He/she should deal with all the emergency investigations in Microbiology.

Training in research methodology

Training in research methodology should be imparted by planning of a research project by the student under the guidance of a recognized guide to be executed and submitted in the form of a thesis.

The thesis is aimed at training the post graduate student in research methods and techniques. It should include identification of a research question, formulation of a hypothesis, search and review of relevant literature, getting acquainted with recent advances, designing of research study, collection of data, critical analysis of the results and drawing conclusions. The thesis should be completed and submitted by the student six months before appearing for the final university examination.

Communication and attitudinal skills

Post-graduate student is expected to imbibe professional attributes of honesty, integrity, accountability, honour, humanism and excellence and demonstrate the same in the day-by-day conduct and dealings with the teacher, peers, the nursing and paramedical staff and most-importantly patients. To ensure that student is able to acquire these attributes, their personal conduct should be keenly observed by the teachers and student should be counselled as and when required. Personal attributes of the student should be regularly assessed by peers, senior, and junior students and Head of the Unit/ In charge.

The following is a rough guideline to various teaching/learning activities that may be employed.

- Collection of specimens, smear examination, culture and sensitivity analysis
- Discussion during routine activities such as during signing out of cases.
- Presentation and work-up of cases including the identification of special stains and ancillary procedures needed.
- Clinico-microbiological conferences, active involvement with hospital infection control committee
- Intradepartmental and interdepartmental conferences related to case discussions.
- Conferences, Seminars, Continuing Medical Education (CME) Programme.
- Journal Club.
- Research Presentation and review of research work.
- A postgraduate student of a postgraduate degree course in broad specialties/super specialties would be required to present one poster presentation, to read one paper at a national/state conference and to present one research paper which should be published/accepted for publication/sent for publication during the period of his postgraduate studies so as to make him eligible to appear at the postgraduate degree examination.
- Participation in workshops, conferences and presentation of papers etc.
- Laboratory work.
- Use and maintenance of equipment.

- Maintenance of records. **Log books** should be maintained to record the work done which shall be checked and assessed periodically by the faculty members imparting the training.
- Postgraduate students shall be required to participate in the teaching and training programme of undergraduate students and interns.
- Department should encourage e-learning activities.

During the training programme, patient safety is of paramount importance, therefore, skills are to be learnt initially on the models, later to be performed under supervision followed by performing independently; for this purpose, provision of skills laboratories in medical colleges is mandatory.

VI. ASSESSMENT

FORMATIVE ASSESSMENT, i.e., assessment during the training

Formative assessment should be continual and should assess medical knowledge, patient care, procedural & academic skills, interpersonal skills, professionalism, self directed learning and ability to practice in the system.

General Principles

Internal Assessment should be frequent, cover all domains of learning and used to provide feedback to improve learning; it should also cover professionalism and communication skills. The Internal Assessment should be conducted in theory and practical/clinical examination.

Quarterly assessment during the MD programme should be based on:

- 1. Journal based / recent advances learning
- 2. Patient based /Laboratory or Skill based learning
- 3. Self directed learning and teaching
- 4. Departmental and interdepartmental learning activity
- 5. External and Outreach Activities / CMEs

The student to be assessed periodically as per categories listed in postgraduate student appraisal form (Annexure I).

SUMMATIVE ASSESSMENT, i.e., assessment at the end of training

The summative examination would be carried out as per the Rules given in **POSTGRADUATE MEDICAL EDUCATION REGULATIONS, 2000.**

The post-graduate examinations should be in three parts:

1. Thesis.

Every post graduate student shall carry out work on an assigned research project under the guidance of a recognized Post Graduate Teacher, the result of which shall be written up and submitted in the form of a Thesis. Work for writing the Thesis is aimed at contributing to the development of a spirit of enquiry, besides exposing the post graduate student to the techniques of research, critical analysis, acquaintance with the latest advances in medical science and the manner of identifying and consulting available literature.

Thesis shall be submitted at least six months before the Theory and Clinical / Practical examination. The thesis shall be examined by a minimum of three examiners; one internal and two external examiners, who shall not be the examiners for Theory and Clinical examination. A post graduate student shall be allowed to appear for the Theory and Practical/Clinical examination only after the acceptance of the Thesis by the examiners.

2. Theory Examination

The examinations shall be organized on the basis of 'Grading' or 'Marking system' to evaluate and to certify post graduate student's level of knowledge, skill and competence at the end of the training. Obtaining a minimum of 50% marks in 'Theory' as well as 'Practical' separately shall be mandatory for passing examination as a whole. The examination for M.D./ MS shall be held at the end of 3rd academic year. An academic term shall mean six month's training period.

There should be four theory papers:

Paper I:General Microbiology and Immunology

Paper II:Systematic Bacteriology

Paper III: Virology Parasitology and Mycology

Paper IV: Applied Microbiology and Recent advances

3. Practical and Oral/viva voce Examination

Practical should be spread over **two** days and include the following components:

Bacteriology:

- 1. Identification of a pure culture.
- 2. Isolation and Identification of Bacteria from Clinical Samples

Serology:

Common Serological Tests like ELISA/VDRL/Widal/Brucella Agglutination test etc.

Virology:

- 1. Preparation of tissue cultures
- 2. Virus Titration
- 3. Haemagglutination and its inhibition test
- 4. Virus Neutralization Test
- 5. Other rapid tests for diagnosis of viral infections

Mycology

- 1. Identification of fungal cultures
- 2. Slide culture techniques
- 3. Examination of histopathology slides for fungi

Parasitology

- 1. Processing and Identification of ova and cysts in stool samples
- 2. Amoebic Serology
- 3. Microscopic Slides
- 4. Examination of histopathology slides for parasites
- 5. Spots: 10 spots

Oral/Viva-Voce Examination:

This must include a component of teaching session of not more than 15 minutes duration.

VII. MANDATORY COMPLIANCE

1	The Model Weekly Time Table for Teaching learning activities		A mm oversmo T
	is enclosed as	•	Annexure – I

- Mandatory compliance of a PG student in T.L. process and CIA during the three year of study are given in
 Annexure II
- 3 The units for Quarterly assessment for CIA is given in : Annexure III
- Post Graduate student Quarterly Appraisal form for CIA is enclosed as : Annexure IV
- 5 Mandatory Requirements to be eligible to appear for the University Summative Evaluation Examination is given in : Annexure V
- The Proforma of the Certificate on Attendance, Training Completion, Publication and Presentation Research / Poster / oral submission of Dissertation and present of all theory practical fee to be duly filled in and duly signed by PG Guide : Annexure VI HOD, Finance Officer, Dean of faculty an HOI to be submitted to university COE before the issue of Hall Ticket for final exam is given us
- 7 The model QP pattern of paper I/II/III/IV, each of 100 marks and of 3 hours duration is enclosed as : Annexure VII
- 8 The model Blue print for setting of Question papers and proper verbs/ phrases to be used in QP setting is given in : Annexure VIII
- 9 The model marks list for practical and Vivavoce for PG medical MD/MS/ examination is enclosed as. : Annexure IX

VIII. RECOMMENDED READING:

Books (Latest edition)

- 1. Forbes B, Sahm D, Weissfeld A. Bailey and Scott's Diagnostic Microbiology, Mosby, St. Louis.
- 2. Koneman EW, Allen SD, Janda WM, Schreckenberger PC, Winn WC. Color Atlas and Textbook of Diagnostic Microbiology, J.B. Lippincott, Philadelphia.

- 3. Murray PR, Baron EJ, Pfaller MA, Tenover FC, Yolken RH. Manual of Clinical Microbiology, American Society for Microbiology.
- 4. Garcia LS, Bruckner DA. Diagnostic Medical Parasitology, American Society for Microbiology.
- 5. Wiedbrauk DL, Johnston SLG. Manual of Clinical Virology, New York, Raven Press.
- 6. Bailey and Scott's Diagnostic Microbiology.

Journals

03-05 international Journals and 02 national (all indexed) journals

Annexure - I

P.G. Teaching Time Table – Model

Clinical postings (OPD – IPD Duties Ward Rounds, Casualty posting, ICU posting, posting to support Departments like Radiology, Anaesthesia CCL, Pathology, FMT, Postings to field work and PHCs Camps and other postings as per provisions of MCI, are mandatory on all week Day as per posting.

Day of the week	Time 03 to 5 PM
Monday	Journal Club
Tuesday	Case presentation / Micro Clinic- Patient based Training
Wednesday	Seminar / GD / Panel Discussion
Thursday	Lecture by Faculty on select Topics
Friday	Clinical Meet / CPC / CME
Saturday	Guest Lecture by Experts / Skill Lab or Simulation Lab
Sunday	Medical Camps / Blood Donation Camp / Other types of
(Select ones)	Camps

Note

- 1. The Dept may select suitable days for a particular task assigned. But all of 7 tasks per week are a must
- 2. All the PG Teachers, PG students must attend these PG TLE Activities.
- 3. Attendance for these activities shall be maintained at the Department and Institutions. Implementation of the MCI Regulations, Syllabus and Time Table is the responsibility of HOD / HOI.

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Annexure – II

Mandatory Compliance of a PG student in Teaching – Learning Activities
As per MCI Regulations Syllabus and Advisory

C	r.				Number per	Total Number
		Activities to be carried at by a PG student	I st year	II nd Year	III rd year	(Minimum)
No.			(Minimum)	(Minimum)	(Minimum)	For 3 years
1		Presentation of Journal Articles in	12	12	6	30
		Journal club				
2	a	Case Presentation / Clinic	4	8	8	20
	b	Skill Lab & Simulation	4	4	4	12
3	a	Presentation of Seminars	4	4	4	12
	b	Leading a Group Discussion on a select	4	4	4	12
		Topic				
	c	Assignment submission	4	4	4	12
4	a	Lectures / Tutorials to UG students	4	4	4	12
		/panel Discussion				
	b	Clinical meeting CMC/ CPC	12	12	12	36
	c	BLS	1			1
	d	ACLS	1			1
5		Medical Camps Health Checkup at	6	6	6	18
		Villages / Schools/ Blood Donation / etc.				
6	a	Orientation Programme	1	1	1	3
	b	Research Methodology Workshop	1			1
	C	Presentation of synopsis of the Thesis /	1			1
		Dissertation				
	d	Presentation of Mid Term work of Thesis		1		1
		/ Dissertation				
	e	Presentation of final Draft of Dissertation			1	1
		/ Thesis				
	f	Presentation of Research Article		0 or 1	0 or 1	1
	g	Publication of an Article		0 or 1	0 or 1	1 or 2
7		LOG Book	1 (a)	1 (b)	1 (c)	1 a+b+c
8		CIA	4	4	4	12
9		Any other Activity Specified by Dept.				

Note :- 1. The Department may conduct periodic preparatory tests in Theory / Practical/Clinicals and Vivavoce. Quiz and MCQ test may to be adopted

2. The 12th CIA may also include a preparation examination on the model of university examination as a training cum assessment

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Annexure – III

Units of Quarterly Assessment of Every student (Internal) Formative Assessment – Quarterly Assessment (Total 12 CIAs)

As per Annexure III.

1. Journal Based / Recent Advances learning

(Bases on Journal Clubs / Select Article Presentation , Review Article preparation and presentation)

2. Patient Based and Laboratory Based and skill Based learning

(Based on clinical Posting – OPD / IPD Ward Rounds/ casualty/ Case Examination/ presentation /Diagnosis / Interpretation /of Clinical Diagnostics/ Differential Diagnosis, Prognosis/ Morbidity/ Mortality/ Community Medicine/ Promotion/ prevention/ Control/ Prophylaxis/ Epidemiology/ Simulation Studies/ Skill Based Studies and so on)

3. Self Directed Learning and Teaching

(Seminars Panel Discussion Group Discussion, Assignments, Case studies, Preparation of Charts and Models etc., Role Play, Debates, Moot courts, etc)

4. Departmental and Inter Departmental Learning Activities.

(Participation in UG/PG teaching / Horizontal and Vertical Integrated Lectures, Clinical meeting / CPC / CME)

5. External and out research Activities

(Participation in Camps, Posting and Visit to PHCs, Satellite clinics, Mobile Clinics, Health checkup Camps, Blood Donation Camps, Immunization Camps school Visits. Crisis / Disaster Management, Celebration of Commemorative Days and soon)

- 6. Thesis / Dissertation Research Work related to selected Topic
- 7. a) Log Book maintenance/ Portfolio management To maintain LOG Book or portfolio management of all the TL Activities

b) Presentation / Publications of Research Article

No.		Particulars	Minimum for 3 months
1		Journal based Recent Advance Learning- Presentation of	3
		select Article in Journal clubs	
2	a	Patient Based laboratory or Skill based learning- Case	1 (1 st year)
		presentation / Clinic	2 (2 nd & 3 rd year)
	b	Skill Lab / Simulation Lab Work	1
3	a	Self Directed Learning & Teaching- Presentation of	1
		Seminar	
	b	Leading a Group Discussion on select Topic in GD	1
	c	Assignment Submission	1
4	a	Lecture / Tutorials / Panel Discussions with UG students	1
	b	Clinical Meetings (CME's) CPC/Dept. meeting	3
5		Medical Camps	1
6		Dissertation Work Research methodology workshop	Yes / No
7	Log Book & Attendance		Yes / No
8		Any other Activity Prescribed (T/P/Viva)	Yes / No

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Annexure IV

Postgraduate Students Appraisal Form Pre / Para /Clinical Disciplines – MD/MS Degree

	Name of the Department/Unit : Name of the PG Student : Period of Training : FROM				Roll No.:						
	Quarterly Assessment (1							• • • • •	•••		
Sr. No.	PARTICULARS		Not sfac	tory	Sati	isfac	tory			Γhan etory	Remarks
		1	2	3	4	5	6	7	8	9	
1.	Journal based / Recent advances learning										
2.	Patient based/Laboratory or Skill based learning										
3.	Self-directed learning and teaching										
4.	Departmental and interdepartmental learning activity										
5.	External and Outreach Activities / CMEs										
6.	Thesis / Research work										
7.	Log Book Maintenance										
8.	Performance in Theory/Practical/Viva voce Tests										
	Overall Assessment										
	 Publications of Research Article Presentation of Research Article The student has complied with mand assessment & presentation of Research 	ch Pi	ofi	le			or qu	ıarte	rly	Yes/ N Yes/No	
	Remarks*										
	*REMARKS: Any significant positive o student to be mentioned. For score less that suggested. Individual feedback to postgrade	ın 4 i	n aı	ny ca	ateg	ory,	rem	edia	tion	must l	
	SIGNATURE OF ASSESSEE				SIC	GNA'	TURE	E OF	HOD		
	HEAD OF THE	INCTI	יון ז ירן	TION							

Annexure - V

Mandatory Requirements to be eligible to eligible to appear for university Summative Examination / Evaluation – As per MCI Regulations. (As per MCI Medical Education Regulation 2000, amended from time to time till date)

- 1. Minimum percent of Attence as per MCI Regulations.
- 2. Satisfactory performance in 12 CIA conducted and certified by HOD HOI and PG Guide.
- 3. Certificate from F.O. stating that all the fees due from the student are paid and credited to PIMS-DU A/.c
- 4. Presentation of a Research Article / Poster in a national / state level conference /Seminar / Workshop.
- 5. Publication of a Research Articles as first author in (indexed in supus or web of science or as fixe by MCI Regulations and visited by UGC (ARE list).
- 6. a) Thesis Finalisation of Topic and Title submission of Synopsis following IEC clearance within 6 months of Adm. Topics
 - b) After II year of a Admission or 3 terms Midterm Review.
 - c) Thesis to be submitted at least 6 months before final examination.
 - d)Thesis to be examined by 3 Examiners. (1 Internal and 2 External PG Examiners)
 - e) Its Acceptance is a must for appearing for University T & P Exam

Note: HOD & HOI shall ensure provisions of 1,2,3,4,5,6 a,b,c. The COE shall ensure provisions of 1,2,3,4,5,6 a,b,c,d,e & e as per MCI Regulations

HEAD OF DEPARTMENT HEAD OF INSTITUTION DEAN OF FACULTY REGISTRAR

			Page 35 MD (Microbiology)
	f. No.		Annexure - VI Date:
omp	plaince to MCI's Regulations Gover	ming Post Graduate Pr	ogramme in Medical Facul
Dei	partment ofPO	G Programme: MD/ MS	in
PR	me of Candidate:N No	Date of Admission	·
	Attendance a Publication & Presentation		(Poster/ Oral)
	Submission of Dissertation & It is hereby certified that		
	at Rural Medic		-
202	demic years and fulfilled the prevai		
	D/MS PG programmes and the rules of		
	F. 18		
1.	Attendance Fulfillment *	% Attendance	Remark – Eligibility
	I Academic Term		
	II Academic Term		
	III Academic Term		
	IV Academic Term		
	V Academic Term		
	VI Academic Term		
	Overall fulfillment		Fulfilled / Not
			Fulfilled
	* Fulfillment of a minimum of 80° including imparted training, assign facets of PG education process in Regulations.	ment, fulltime responsib neluding periodic assess	oilities and participation in a ment and so on as per MC
2.	Log Book maintained as per responsibilities in the managemen care	t and treatment of patie	ents entrusted for their No
	Verified by Dr.		Certified by Dr.
3.	Successful participation in teaching	ng and training program	imes organized by the
	department for UG and Interns		
4.	Presented and Participated in Semi	nars, Journal Clubs, Cas	e Presentations, Group
	Discussions, Clinical Meetings, CM		
	the Department as per the timetable		
5.	Participated in training sessions basic/ applied medical and allied the timetable		
6.	The Performance of the PG stud	dents in 12 CIAs (Cor	nducted quarterly) are
	satisfactory as per appraisal proform		- · · · · · · · · · · · · · · · · · · ·
			(oral) in a Seminar/

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	Symposia/ Workshop/ Conference (National/State). The certificates for presentation of paper/ poster are enclosed.
8.	Published one research article in a scientific journal as per norms. The copy of the published research article is enclosed.
9.	Submitted a Dissertation entitled
	under the guidance of Dr.
10.	Paid all the fees (tution fees and other fees) vide receipt No for
10.	all 3 years.
11.	Produced NOC from all the sections of PMT PIMS-DU concerned about "NO DUES"
12.	Paid Examination fees of Rs vide Challan/ Receipt No dated issued by Finance Officer PIMS-DU.
aspe Rura Prin and	hereby declared that the all the duly certified and verified documents, related to the ects mentioned above, are in the custody of department concerned and student section of al Medical College with due authentication and signature of concerned HOD/ Dean/cipal/ Dean of Faculty) and will be made available for any MCI inspection as per norms Regulations. ordingly He/She is eligible/ not eligible for appearing in final year PG examination as
	the MCI Regulations governing PG Programmes.
per t	
PG Dr.	Guide Seal Head of the Department Dr dified and certified that all types of prescribed fees and fines PMT, PIMS-DU, College, tel & Others mentioned at sl.no. 10, 11, 12 are paid by the student and credited to the bunts of PMT & PIMS-DU. Finance Officer
PG Dr. Veri	Guide Seal Head of the Department
PG Dr. Veri Hos acco	Guide Seal Head of the Department Dr. Ified and certified that all types of prescribed fees and fines PMT, PIMS-DU, College, tel & Others mentioned at sl.no. 10, 11, 12 are paid by the student and credited to the bunts of PMT & PIMS-DU. Finance Officer PIMS-DU Ified the relevant documents and certify that the candidate is eligible to appear for final PG Examination as per MCI Regulations and rules of PIMS-DU.
PG Dr. Veri Hos acco	Guide Seal Head of the Department Dr. Gried and certified that all types of prescribed fees and fines PMT, PIMS-DU, College, tel & Others mentioned at sl.no. 10, 11, 12 are paid by the student and credited to the bunts of PMT & PIMS-DU. Finance Officer PIMS-DU Gried the relevant documents and certify that the candidate is eligible to appear for final of PG Examination as per MCI Regulations and rules of PIMS-DU. Dean

The HOD, HOI and Dean have certified that the

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- a. Candidate is eligible to appear for PG Theory and Practical/ Clinical Examination as per MCI Regulations. F.O. has certified that all the fees has been credited to PMT, PIMS-DU Accounts.
- b. The Dissertation submitted has been evaluated by external examiners and then have approved the same for acceptance as per MCI Regulations.
- c. Hence the candidate be permitted to appear for the PG examinations (Theory & Practical/ Clinical) scheduled in the month of ______ year _____.

Controller of Examinations



Submitted for perusal and approval

Vice Chancellor

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Annexure - VII

PRAVARA INSTITUTE OF MEDICAL SCIENCES (Deemed to be University)

Post Graduate Degree in Microbio	ology (MD)
Examination	20
Paper – I/ II/ II/ IV	

Paper Title : _____ Date: / /20

Marks : 100 Time:

Instructions to candidate:

- 1) All questions are compulsory
- 2) Answer written in illegible handwriting will not be assessed.
- 3) Write answers on both sides of answer paper.
- 4) Neat diagrams must be drawn wherever necessary.
- 5) Write prescription where indicated, and in the use of drugs their doses should be given.

 Que. 1
 Marks 20

 Que. 2
 Marks 20

 Que. 3
 Marks 20

 Que. 4
 Write Short notes on

 Marks 40
 (10x4)

a

b

c

Annexure - VIII

Table 1: Showing BLUEPRINTING for theory paper setting

The number of Questions & their distribution of marks shall be as per MCI model Question Paper [only Illustration]

LAQ/ SAQ and their Marks

LEVEL	Q	Q	Q	Q	Q	Q	Q	Total
LEVEL	Mark	Total						
Knowledge								
Comprehension								
Application								
Analysis								
synthesis								
Evaluation								
TOTAL								1000

The Questions (Whether LAQ or SAQ) Must aim at assessing all the 6 domains

Note: This is only an illustration. Actual Number of Questions and their distribution of marks shall be as per model Question Paper of MCI. (i.e. regarding the number of LAQ / SAQ and their marks distribution)

Table 2: Showing appropriate verbs suitable to level of knowledge for theory paper setting

Level	Suggested Verbs		
Knowledge	Define, Describe, Draw, Find, Enumerate, Cite, Name, Identify, List,		
	label, Match, Sequence, Write, State		
Comprehension	Discuss, Conclude, Articulate, Associate, Estimate, Rearrange,		
	Demonstrate understanding, Explain, Generalize, Identify, Illustrate,		
	Interpret, Review, Summarize		
Application	Apply, Choose, Compute, Modify, Solve, Prepare, Produce, Select, Show,		
	Transfer, Use		
Analysis	Analyze, Characterize, Classify, Compare, Contrast, Debate, Diagram,		
	Differentiate, Distinguish, Relate, Categorize		
Synthesis	Compose, Construct, Create, Verify, Determine, Design, Develop,		
	Integrate, Organize, Plan, Produce, Propose, rewrite		
Evaluation	Appraise, Assess, Conclude, Critic, Decide, Evaluate, judge, Justify,		
	Predict, Prioritize, Prove, Rank		

Table 3: Showing examples of theory questions

Sr. No.	Туре	Explanation	Examples
1	Long essay question	 ✓ Question should pose clinical problem that will require student to apply knowledge along with integration with disciplines ✓ Avoid one liner as question ✓ Question stem should be structured ✓ Marking distribution should be provided ✓ Use of proper verbs from higher domains as given in this document ✓ Avoid recall based questions 	
2	Short notes Sample a wider content Questions should be task oriented Reasoning questions provide opportunity for testing integration, clinical reasoning and analytical ability of the student		

Table 4: Showing Objective structured clinical examination [OSCE] typical station

Sr. No.	Type of station	Time allotted	Example	Evaluation
1	Procedure			
2	Response			

Annexure – IX

University Examination Model Marks Sheet For Practical / Clinical Examination and Viva voce

Duration	Max Mark – 400

Illustration only

No.	Type of Examination	Marks Allotted	Scored
1	Long Cases		
2	a) Short cases (No. of small cases		
	and Marks for each cases)		
	1/2/3/4		
	b) Ward Round		
	c) Any other		
3	Spotter / OSPE/ Oral / Vivavoce		
	Sub Divisions		
	i) iv)		
	ii) v)		
	iii) vi)		
	Ground Total	400	

PG E	xaminers	Name	Signature
1	Chairman Name		
2	Internal Examiner		
3	External Examiner		
4	External Examiner		

Date:-Place :-

Note:- 1) The Number of cases, type of cases and type of practical and orals / vivavoce

and their distributions of marks shall be as per MCI Regulations / Syllabi.

2) The HOD / Chairman / Co Chairman BOS shall ensure at this proforma is prepared as per the MCI Regulations / Syllabi.

Registrar

Pravara Institute of Medical Sciences
(Deemed to be University)
Loni - 413736, Tal. Rahata
Dist. Ahmednagar (M.S. India)