DEPARTMENT OF COMMUNITY MEDICINE

Teerthanker Mahaveer Medical College & Research Centre

Delhi Road, Moradabad - 244001

Ref.No.CM/07/25/ **Date: 01/07/2025**

Attendance sheet of Board of Studies held on 01/07/2025 for approval of value added courses

External member:

S.No	Faculty	Designation	Signature
1	Dr Sumit Chawla	Associate Professor, Community Medicine, Shri Atal Bihari Vajpayee Medical college, Faridabad, Haryana	

Internal Members

S.No	Faculty	Designation	Signature
1	Dr Sadhna Singh	Professor & Head, Community Medicine, TMMC & RC	
2	Dr Chintu Chaudhary	Professor, Community Medicine, TMMC & RC	
3	Dr Dheeraj Sharma	Associate Professor, Community Medicine, TMMC & RC	
4	Dr Bhaskar Watode	Associate Professor, Community Medicine, TMMC & RC	
5	Dr Vishwanath Ghoshal	Associate Professor, Community Medicine, TMMC & RC	
6	Dr Shilpa Reddy Ghanta	Associate Professor, Community Medicine, TMMC & RC	
7	Dr Ramesh J Kumar	Assistant Professor, Community Medicine, TMMC & RC	
8	Dr Shubhangi Srivastava	Assistant Professor, Community Medicine, TMMC & RC	
9	Dr Arif Viqar	Professor & Head, Forensic Medicine , TMMC & RC	

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Ref. No: CM/07/25/ **Date:01/07/2025**

Minutes of Board of Studies (BOS) Meeting

Venue: Department of Community Medicine

Agenda of the meeting

1. Commencement & brief introduction of the following value added courses:

Course A - Connecting for Care: Communication Skills for MBBS Students in Family Adoption Programme.

Course B - Integrated Teaching Schedule Using Case Studies.

2. Suggestions by the external & internal members of the board for effective implementation of the course.
3. Any other matter (with the permission of chairman BOS)

The following members were present in the meeting.

S.No.	Faculty	Designation	Position
1	Dr Sadhna Singh	Professor	Chairperson
2	Dr Sumit Chawla	Associate Professor, Community Medicine, Shri Atal Bihari Vajpayee Medical college, Faridabad, Haryana	External Member
3	Dr Chintu Chaudhary	Professor, Community Medicine, TMMC & RC	Member
4	Dr Bhaskar Watode	Associate Professor, Community Medicine, TMMC & RC	Member
	Dr Dheeraj Sharma	Associate Professor, Community Medicine, TMMC & RC	Member
5	Dr Vishwanath Ghoshal	Associate Professor, Community Medicine, TMMC & RC	Member
6	Dr Shilpa Reddy Ghanta	Associate Professor, Community Medicine, TMMC & RC	Member
7	Dr Ramesh J Kumar	Assistant Professor, Community Medicine, TMMC & RC	Member
8	Dr Shubhangi Srivastava	Assistant Professor, Community Medicine, TMMC & RC	Member
9	Dr Arif Viqar	Professor & Head, Forensic Medicine , TMMC & RC	Member

At the commencement of meeting, the chairman welcomed the members of BOS & placed the agenda.

Course objectives:

Course A:Connecting for Care: Communication Skills for MBBS Students in Family Adoption Programme.

Course B:Integrated Teaching Schedule Using Case Studies.

Course outcomes:

Course A: At the end of these workshop series, MBBS students will not only fulfill the requirements of their Family Adoption Programme but also develop into more compassionate, effective, and community-sensitive physicians, truly ready to serve the diverse health needs of India.

Course B: At the end of sessions the participants will have gone through a robust, engaging, and practical learning journey which is aligned with CBME goals. The case study model fosters real-life problem-solving, teamwork, and professional growth.

Course content:

Course A: Connecting for Care: Communication Skills for MBBS Students in Family Adoption Programme

Workshop 1	Building Bridges – The Art of Initial Engagement (Early MBBS Years - Phase 1 FAP	Learning Objectives: By the end of this workshop, students will be able to: • Understand the importance of a strong first impression and rapport-building in community settings. • Practice effective greetings and introductions tailored to different age groups and social strata. • Identify and overcome initial communication barriers (e.g., shyness, language differences, skepticism) • Demonstrate active listening and non-verbal communication cues to establish trust. • Explain the purpose of the Family Adoption Programme clearly and concisely to families	3 hours

Workshop 2:	Listening & Understanding – Eliciting the Patient's Perspective (Mid-MBBS Years - Phase 2 FAP)	Learning Objectives: Differentiate between "disease" (biomedical) and "illness" (patient's lived experience). • Utilize advanced active listening skills to uncover patient concerns, beliefs, and expectations. • Ask culturally sensitive questions about health practices, traditional remedies, and social determinants of health. • Identify implicit messages and emotional cues from family members. • Document findings accurately while respecting confidentiality.	3 hours
Workshop 3	Explaining & Empowering – Health Education and Shared Decision-Making (Later MBBS Years - Phase 3 FAP)	Learning Objectives • Translate complex medical information into simple, understandable language for diverse audiences. • Employ effective techniques for health education and behavior change counseling. • Facilitate shared decision-making, respecting family autonomy and preferences. • Handle difficult conversations (e.g., non-compliance, end-of-life discussions, sensitive topics like domestic violence or addiction with appropriate referrals). • Provide constructive feedback and follow-up plans.	3 Hours

Process: Integration into Community Medicine Postings & FAP Structure

- **Pre-FAP Orientation:** Workshop 1
- **Mid-FAP Check-ins:** Workshop 2
- **Advanced FAP Stages:** Workshop 3

Additional activities for Integration

- **Mentorship:** Faculty mentor from Community Medicine & an experienced local healthcare worker to each group of students for ongoing guidance and feedback on communication.
- **Structured Debriefs:** Regular, facilitated group discussions after FAP visits where students can

share communication challenges, discuss solutions, and receive peer and faculty feedback.

- **Logbook/Reflection Journal:** Mandate students to maintain a logbook or journal specifically for documenting communication challenges, strategies tried, and lessons learned during their FAP visits. This can be reviewed by faculty.
- **Video Recording (with consent):** For advanced practice, consider brief, consented video recordings of student-family interactions for self-reflection and confidential faculty feedback.
- **Simulated Patients/Actors:** While FAP provides real experience, using trained actors for specific challenging communication scenarios (e.g., breaking bad news, discussing contraception) can provide a safe space for practice.
- **Inter-departmental Collaboration:** Involve departments like Psychiatry and Social Work for their expertise in counseling, empathy, and social determinants of health.

Course B. Integrated Teaching Schedule Using Case Studies.

PHASE - I	**FOUNDATION (1 – 12 months)**	**Month 2: Social Determinants of Health** "Meena: A 7-year-old girl from tribal village	1 hour
		Month 3: Demography "The shrinking family: Population growth in slums"	1 hour
		Month 5: Environment and Health "Water that kills: Diarrhea outbreak in a rural school"	1 hour
		Month 6: Nutrition "Two brothers – One obese, one stunted"	1 hour
		Month 7: – Health Education "Handling myths during a dengue outbreak"	1 hour
		Month 9: Communication Skills (AETCOM 1.2): "Breaking bad news: Diagnosing TB in a teenager"	1 hour
PHASE - II	**PRE-CLINICAL TO PARA-CLINICAL TRANSITION (Months 13–24)**	**Month 13 – Epidemiology Basics** "Tracking a fever: Outbreak in college hostel"	1 hour
		Month 14 – Screening "Mammography: Early or late?"	1 hour
		Month 16 – Immunization "Cold chain failure in a PHC"	1 hour
		Month 18 – Health Systems "Public vs Private: The family's dilemma"	1 hour
		Month 20 – Occupational Health "Silicosis in a factory worker"	1 hour
		Month 22 – Research Methods "Designing a KAP study on smoking among students"	1 hour
PHASE - III	**CLINICAL INTEGRATION (Months 25–54)**	**Month 26 – NCDs** "Hypertension in a tea stall owner"	1 hour
		Month 30 – Maternal Health "Anaemia in pregnancy – A missed chance"	1 hour

		Month 33 – Child Health "A lost opportunity: Delayed polio vaccination"	1 hour
		Month 36 – Geriatrics "Alone but not heard – Geriatric neglect"	1 hour
		Month 42 – Disaster Management "The flood that washed away hope"	1 hour
		Month 48 – Health Planning "The failing PHC: What went wrong?"	1 hour

Process: These Sessions will be case studies with live data / Simulated settings / Standard patients / role plays along with integration with faculties of corresponding departments to enhance integration

Phase – I: Six one-hour sessions

Phase – II: Six one-hour sessions

Phase – III: Six one-hour sessions

Assessment Strategy:

1. OSCEs based on cases.
2. Reflective journals.
3. Group presentations.

Course completion guidelines

1. Total course duration for both the courses will be 21 hours with flexible timetable.
2. The courses will be available to all medical/allied health sciences UGs/interns/PGs/ research scholars enrolled in TMU through online/offline mode.
3. Each enrolled student shall have to complete attendance as per university norms.
4. The relaxation of attendance requirement up to 10% maybe granted for valid reasons such as illness.
5. Assessment will be done by Multiple Choice Question/Problem bases question/ OSCEs/Journals evaluation/Short Questions and students has to secure passing marks as per university norms
6. Certificate will be awarded on successful completion of the course.

Resource Faculty:

1. Dr Sadhna Singh (Prof. & Head)
2. Dr Chintu Chaudhary (Professor)
3. Dr Dheeraj Sharma (Associate Professor)
4. Dr Bhaskar Watode (Associate Professor)
5. Dr Vishwanath Ghoshal (Associate Professor)
6. Dr Shilpa Reddy Ganta (Associate Professor))
7. Dr Ramesh J Kumar (Assistant Professor)
8. Dr Shubhangi Srivastava (Assistant Professor)
9. Dr Umme Afifa (Assistant Professor cum Statistician)

Comments by Members (if any):

Effective & Good Communication Skill is necessary for all the future-doctors. This will be great help to the students in learning to connect with community during FAP and the patients in the hospitals.

Integrated Teaching will help students in deeper understanding of the subjects.

Sadhna

(Dr. Summit Chandra)

Finalization of approval:

Introduction of Value Added Courses for all medical/allied health sciences UGs/interns/PGs/ research scholars enrolled in TMU by the Department of Community Medicine is approved by all the members unanimously.

The meeting ended with vote of thanks to Chair & External expert.

Dr Arif Viqar
(Prof. & Head)
Dept. of Forensic Medicine
TMMC & RC, Moradabad
(Member)

Dr Sadhna Singh
(Prof. & Head)
Dept. of Community Medicine
TMMC & RC, Moradabad
(Chairperson)

Dr Sumit Chawla
(Associate Professor)
Dept. of Community Medicine
SABVGMC, Faridabad, Haryana
(External Expert)

Dr Chintu Chaudhary
(Professor)
Dept. of Community Medicine
TMMC & RC, Moradabad
(Member)

Dr Dheeraj Sharma
(Associate Professor)
Dept. of Community Medicine
TMMC & RC, Moradabad
(Member)

Dr Bhaskar Watode
(Associate Professor)
Dept. of Community Medicine
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(Member)

Dr Vishwanath Ghoshal
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Dr Shilpa Reddy Ganta
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Dept. of Community Medicine
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(Member)

Dr Ramesh J Kumar
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(Member)

Dr Shubhangi Srivastava
(Assistant Professor)
Dept. of Community Medicine
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(Member)

TMU

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Ref.No.CM/07/25/ **Date: 01/07/2025**

Minutes of meeting of board of studies held on 01/07/2025

A board of studies meeting was held under the chairmanship of the undersigned in the office of the undersigned on 01/07/2025. The following members attended the meeting.

External Member

1. Dr Sumit Chawla (Associate Professor), Dept. of Community Medicine, Shri Atal Bihari Vajpayee Medical college, Faridabad, Haryana

Internal Members

1. Dr Sadhna Singh (Professor & Head)
2. Dr Chintu Chaudhary (Professor)
3. Dr Dheeraj Sharma (Associate Professor)
4. Dr Bhaskar Watode (Associate Professor)
5. Dr Vishwanath Ghoshal (Associate Professor)
6. Dr Shilpa Reddy Ghanta (Associate Professor)
7. Dr Ramesh J Kumar (Assistant Professor)
8. Dr Shubhangi Srivastava (Associate Professor)
9. Dr Arif Viqar (Professor & Head, Forensic Medicine)

Agenda of the meeting:

1. Implementation of NMC guidelines for MBBS 2022 and MD 2023 batch onwards
2. Planning of conduct of phase 3 part 1 University Examinations.
3. Panel of external examiners in MBBS for next session.
4. Panel of external examiners in MD for next session.
5. Any other point with permission of chair

As per the following decisions were taken:

1. There will be two internal assessments in each phase of study and one pre university examination at the end of phase 3 part 1. Each formative assessment of the students in 1st phase will be of 50 marks, in 2nd phase of 50marks and in 3rd phase of 50 marks. Two practical examinations will be done in phase 3 terminal examination of 50 marks each.
2. End posting formative assessment will be done at end of 4 weeks of posting in 2nd phase of 50 marks and end of 6 weeks of posting in 3rd phase of 60 marks.
3. The pre university will of same pattern as 3rd prof. part –I university examination. Two theory paper of 100 marks each and one practical examination of 100 marks.
4. The total internal assessment in theory will be of 510 marks and in practical will be of 310 marks.
5. The internal assessment will be proportionate into 100 marks of theory and practical separately

6. As per revised curriculum there will be two theory papers of 100 marks each in 3rd phase part – I University Examination.
7. The topic distribution for each paper is given below:

UG COMMUNITY MEDICINE

Paper – I

a. General Epidemiology
b. Epidemiology of communicable diseases
c. Epidemiology of non- communicable diseases
d. Screening for diseases
e. Occupational Health
f. Biostatistics
g. Environment and Health
h. Medical Entomology
i. Hospital Waste Management
j. Disaster management
k. Hospital Administration

Paper – II

a. Concept of Health and Diseases
b. Social Sciences and Health
c. Genetics and Health
d. Mental Health
e. Preventive Obstetrics & Pediatrics
f. Demography and family planning
g. Nutrition and Health
h. Health care delivery system
i. Health Management
j. Health Education
k. National Health Programme
l. Essential and counterfeit medicine
m. International Health

COURSE CURRICULUM IN COMMUNITY MEDICINE: MBBS-PHASE-I

As Per National Medical commission (NMC), the following is the basis of the curriculum of the teaching in **COMMUNITY MEDICINE** in **MBBS PHASE I**

Competencies:

The learner must demonstrate an understanding of:

- CM 1.1: Define and describe the concept of Public Health.
- CM 1.2: Define health; describe the concept of holistic health including concept of spiritual health and the relativeness & determinants of health.
- CM 1.3: Describe the characteristics of agent, host and environmental factors in health and disease and the multi factorial etiology of disease.
- CM 1.4: Describe and discuss the natural history of disease.
- CM 1.5: Describe the application of interventions at various levels of prevention.
- CM 1.6: Describe and discuss the concepts, the principles of Health promotion and Education, IEC and Behavioral change communication (BCC).
- CM 1.9: Demonstrate the role of effective communication skills in health in a simulated environment.
- CM 1.10: Demonstrate the important aspects of the doctor-patient relationship in a simulated environment.
- CM 2.1: Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community.
- CM 2.2: Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status.
- CM 2.3: Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior.
- CM 2.4: Describe social psychology, community behaviour and community relationship and their impact on health and disease.
- CM 2.5: Describe poverty and social security measures and its relationship to health and disease.
- CM 3.1: Describe the health hazards of air, water, noise, radiation and pollution.
- CM 3.2: Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting.
- CM 3.3: Describe the aetiology and basis of water borne diseases /jaundice/hepatitis/ diarrheal diseases.
- CM 3.5: Describe the standards of housing and the effect of housing on health.
- CM 4.1: Describe various methods of health education with their advantages and limitations.
- CM 4.2: Describe the methods of organizing health promotion and education and counselling activities at individual family and community settings.
- CM 5.1: Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions.
- CM 5.8: Describe and discuss the importance and methods of food fortification and effects of additives and adulteration.
- CM 6.2: Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data.
- CM 9.1: Define and describe the principles of Demography, Demographic cycle, Vital statistics.
- CM 9.7: Enumerate the sources of vital statistics including census, SRS, NFHS, and NSSO etc.

- CM 9.8: Enumerate and describe the causes & consequences of population explosion and population dynamics of India.
- CM 13.1: Define and describe the concept of Disaster management.
- CM 13.2: Describe disaster management cycle.
- CM 17.1: Define and describe the concept of health care to community.
- CM 17.2: Describe community diagnosis.
- CM 17.3: Describe primary health care, its components and principles.
- CM 17.5: Describe health care delivery in India.
- CM 18.1: Define and describe the concept of International health.

Broad subject specific objectives:

a. **Knowledge:** At the end of the course in the subject of Community Medicine, the student shall be able to:
   - Explain the principles of sociology including demographic population dynamics
   - Identify social factors related to health, disease and disability in the context of urban and rural societies.
   - Appreciate the impact of urbanization on health and disease.
   - Observe and interpret the dynamic of community behaviors.
   - Describe the elements of normal psychology and social psychology.

b. **Skills:** At the end of the course in the subject of Community Medicine, the student shall be able to:
   - Use the principles and practice of medicine in hospital and community settings and familiarization with elementary practices.
   - Use the Art of communication with patients including history taking and medico social work.
   - Use epidemiology as a scientific tool to make rational decisions relevant to community and individual patient intervention.
   - Organize health care services for vulnerable and disadvantages group.

Integration:

The teaching/learning programme should be integrated horizontally and vertically, as much as possible, to enable learners to make clinical correlations and to acquire an understanding of the cellular and molecular basis of health and disease.

COMMUNITY MEDICINE THEORY:

The teaching of **COMMUNITY MEDICINE** theory is as defined by the National Medical Commission (NMC) in its "Competency based Undergraduate Curriculum-Volume II."

The competencies to be covered, Teaching-learning methods employed, and assessment methods will be as be as follows:

COMMUNITY MEDICINE THEORY (Competencies to be achieved by the end of MBBS PHASE I)									
Number	COMPETENCY The student should be able to	Domain K/S/A/C	Level K/KH/SH/P	Core (Y/N)	Teaching Learning method	Assessment method	Number required to certify P	Vertical integration	Horizontal Integration
CM1.1	Define and describe the concept of Public Health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.2	Define health; describe the concept of holistic health including concept of spiritual health and the relativeness & determinants of health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.3	Describe the characteristics of agent, host and environmental factors in health and disease and the multi factorial etiology of disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.4	Describe and discuss the natural history of disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.5	Describe the application of interventions at various levels of prevention	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM1.6	Describe and discuss the concepts, the principles of Health promotion and Education, IEC and Behavioral change communication (BCC)	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM2.4	Describe social psychology, community behaviour and community relationship and their impact on health and disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM2.5	Describe poverty and social security measures and its relationship to health and disease	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM3.1	Describe the health hazards of air, water, noise, radiation and pollution	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, ENT	

CM3.2	Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce			
CM3.3	Describe the aetiology and basis of water borne diseases /jaundice/hepatitis/ diarrheal diseases	K	KH	Y	Lecture, Small group discussion, DOAP session	Written / Viva voce		Microbiology General Medicine, Pediatrics	
CM3.5	Describe the standards of housing and the effect of housing on health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM4.1	Describe various methods of health education with their advantages and limitations	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM4.2	Describe the methods of organizing health promotion and education and counselling activities at individual family and community settings	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM 5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.8	Describe and discuss the importance and methods of food fortification and effects of additives and adulteration	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pediatrics	
CM6.2	Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data	S	SH	Y	Small group discussion, Lecture, DOAP sessions	Written / Viva voce/ Skill assessment		General Medicine, Pediatrics	
CM9.1	Define and describe the principles of Demography, Demographic cycle, Vital statistics	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM9.7	Enumerate the sources of vital statistics including census, SRS, NFHS, NSSO etc	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM9.8	Enumerate and describe the causes & consequences of population explosion and population dynamics of India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

CM13.1	Define and describe the concept of Disaster management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.2	Describe disaster management cycle	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM17.1	Define and describe the concept of health care to community	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM17.2	Describe community diagnosis	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM17.3	Describe primary health care, its components and principles	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM17.5	Describe health care delivery in India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM18.1	Define and describe the concept of International health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

*** K- Knowledge; S- Skill; A - Attitude / professionalism; C- Communication;**
**** K- Knows; KH- Knows How; SH- Shows how; P- performs independently;**
***** Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation**
DOAP- Demonstrate, Observe, Assess, Perform.

COMMUNITY MEDICINE PRACTICAL/CLINICAL:

The teaching of **COMMUNITY MEDICINE** practicals will be as defined by the National Medical Commission (NMC) in its "Competency based Undergraduate Curriculum-Volume II."

The competencies to be covered, Teaching-learning methods employed, and assessment methods will be as be as follows:

COMMUNITY MEDICINE PRACTICAL/CLINICAL(Competencies to be achieved by the end of MBBS PHASE I)									
Number	COMPETENCY The student should be able to	Domain* K/S/A/C	Level** K/KH/SH/P	Core (Y/N)	Teaching Learning method	Assessment method	Number required to certify***P	Vertical integration	Horizontal Integration
CM1.9	Demonstrate the role of effective communication skills in health in a simulated environment	S	SH	Y	DOAP Sessions	Skill Assessment		AETCOM	
CM1.10	Demonstrate the important aspects of the doctor-patient relationship in a simulated environment	S	SH	Y	DOAP Sessions	Skill Assessment		AETCOM	
CM2.1	Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			
CM2.2	Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			
CM2.3	Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			
CM3.5	Describe the standards of housing and the effect of housing on health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

*** K-Knowledge; S- Skill; A-Attitude/professionalism; C-Communication;**
**** K-Knows; KH-Knows How; SH-Shows how; P-performs independently;**
***** Column H: If entry is P: indicate how many procedures must be done independently for certification/graduation**
DOAP- Demonstrate, Observe, Assess, Perform.

DISTRIBUTION OF TEACHING HOURS IN COMMUNITY MEDICINE :

The Teaching &Training will be conducted in the subject of **COMMUNITY MEDICINE** for a period of 01 year (**MBBS PHASE I**). The breakup of the teaching hours shall be as follows:

Duration	Interactive Lectures (hours)	Small Group Teaching/ Tutorials/ Seminars/ Integrated learning/ Practical's (hours)	Early Clinical Exposure (ECE)	Self-Directed Learning (SDL)	Total (hours)	AETCOM
12 Months	20	SGL- 20		FAP-27 hours	67	

Teaching-learning will consist of the following:

1. Theory Lectures
2. Small Group Teaching (SGT)
   a. Small group discussions (SGD)
   b. Seminars
3. Self-directed learning (SDL)
4. Practical lab work
   a. Hands on practicals
   b. Exposure to OSPE
5. AETCOM sessions (as per modules mandated by NMC)

COURSE CURRICULUM IN COMMUNITY MEDICINE- MBBS-PHASE-II:

As Per National Medical commission (NMC), the following is the basis of the curriculum of the teaching in **COMMUNITY MEDICINE** in **MBBS PHASE II**

Competencies:

The learner must demonstrate an understanding of:

- CM 1.9: Demonstrate the role of effective communication skills in health in a simulated environment.
- CM 1.10: Demonstrate the important aspects of the doctor-patient relationship in a simulated environment.
- CM 2.1: Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community.
- CM 2.2: Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status.

- CM 2.3: Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior.
- CM 3.5: Describe the standards of housing and the effect of housing on health.
- CM 5.1: Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions.
- CM 5.3: Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management.
- CM 5.5: Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio cultural factors.
- CM 5.6: Enumerate and discuss the National Nutrition Policy, important national nutritional Programs including the Integrated Child Development Services Scheme (ICDS) etc.
- CM 5.7: Describe food hygiene.
- CM 5.8: Describe and discuss the importance and methods of food fortification and effects of additives and adulteration.
- CM 7.1: Define Epidemiology and describe and enumerate the principles, concepts and uses.
- CM 7.2: Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable and non communicable diseases.
- CM 7.3: Enumerate, describe and discuss the sources of epidemiological data.
- CM 7.5: Enumerate, define, describe and discuss epidemiological study designs.
- CM 7.8: Describe the principles of association, causation and biases in epidemiological studies.
- CM 11.1: Enumerate and describe the presenting features of patients with occupational illness including agriculture.
- CM 11.2: Describe the role, benefits and functioning of the employees state insurance scheme.
- CM 11.3: Enumerate and describe specific occupational health hazards, their risk factors and preventive measures.
- CM 11.4: Describe the principles of ergonomics in health preservation.
- CM 11.5: Describe occupational disorders of health professionals and their prevention & management.
- CM 13.1: Define and describe the concept of Disaster management.
- CM 13.2: Describe disaster management cycle.
- CM 14.1: Define and classify hospital waste.
- CM 14.2: Describe various methods of treatment of hospital waste.
- CM 14.3: Describe laws related to hospital waste management.
- CM 15.1: Define & describe the concept of Mental Health.
- CM 15.2: Describe warning signals of Mental Health disorders.
- CM 16.1: Define and describe the concept of Health Planning.
- CM 16.2: Describe Planning Cycle.
- CM 16.3: Describe Health Management techniques.
- CM 20.3: Define & describe the concept of Geriatric Health & Geriatric counseling.

Broad subject specific objectives:

c. **Knowledge:** At the end of the course in the subject of Community Medicine, the student shall be able to:
   - Observe the principles of practice of medicine in hospital and community setting.
   - Describe the Health Care delivery systems including rehabilitation of the disabled in the country.
   - Describe the National Health Programmes with particular emphasis on maternal and child health programmes, family welfare planning and population control.
   - Outline the demographic pattern of the country and appreciate the roles of the individuals, family, community and socio-cultural milieu in health and disease.

d. **Skills:** At the end of the course in the subject of Community Medicine, the student shall be able to:
   - Organize health care services in case of calamities.
   - Collect, analyze, interpret and present simple community and hospital base data.
   - Diagnose and manage common health problems (including communicable and non-communicable diseases) and emergencies at the individual, family, and community levels keeping in mind the existing health care resources and in the context of the prevailing socio-culture beliefs.
   - Diagnose and manage common nutritional problems at the individual and community level.

Integration:

The teaching/learning programme should be integrated horizontally and vertically, as much as possible, to enable learners to make clinical correlations and to acquire an understanding of the cellular and molecular basis of health and disease.

COMMUNITY MEDICINE THEORY:

The teaching of **COMMUNITY MEDICINE** theory is as defined by the National Medical Commission (NMC) in its "Competency based Undergraduate Curriculum-Volume II."
The competencies to be covered, Teaching-learning methods employed, and assessment methods will be as be as follows:

COMMUNITY MEDICINE THEORY (Competencies to be achieved by the end of MBBS PHASE II)									
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH/SH/P**	**Core (Y/N)**	**Teaching Learning method**	**Assessment method**	**Number required to certify P**	**Vertical integration**	**Horizontal Integration**
CM5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.5	Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio cultural factors.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.6	Enumerate and discuss the National Nutrition Policy, important national nutritional Programs including the Integrated Child Development Services Scheme (ICDS) etc.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pediatrics	
CM5.7	Describe food hygiene.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Microbiology
CM5.8	Describe and discuss the importance and methods of food fortification and effects of additives and adulteration.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pediatrics	
CM7.1	Define Epidemiology and describe and enumerate the principles, concepts and uses.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
CM7.2	Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable and non communicable diseases.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
CM7.3	Enumerate, describe and discuss the sources of epidemiological data.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	

CM7.5	Enumerate, define, describe and discuss epidemiological study designs.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
CM7.8	Describe the principles of association, causation and biases in epidemiological studies.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
CM11.1	Enumerate and describe the presenting features of patients with occupational illness including agriculture.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM11.2	Describe the role, benefits and functioning of the employees state insurance scheme.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM11.3	Enumerate and describe specific occupational health hazards, their risk factors and preventive measures.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM11.4	Describe the principles of ergonomics in health preservation.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM11.5	Describe occupational disorders of health professionals and their prevention & management.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM13.1	Define and describe the concept of Disaster management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.2	Describe disaster management cycle	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM15.1	Define & describe the concept of Mental Health.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	
CM15.2	Describe warning signals of Mental Health disorders.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	
CM16.1	Define and describe the concept of Health Planning.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

CM16.2	Describe Planning Cycle.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM16.3	Describe Health Management techniques.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM20.3	Define & describe the concept of Geriatric Health & Geriatric counselling.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

*** K- Knowledge; S- Skill; A - Attitude / professionalism; C- Communication;**
**** K- Knows; KH- Knows How; SH- Shows how; P- performs independently;**
***** Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation**
DOAP- Demonstrate, Observe, Assess, Perform.

COMMUNITY MEDICINE PRACTICAL/CLINICAL:

The teaching of Community Medicine practicals will be as defined by the National Medical Commission (NMC) in its "Competency based Undergraduate Curriculum-Volume II."
The competencies to be covered, Teaching-learning methods employed, and assessment methods will be as be as follows:

COMMUNITY MEDICINE PRACTICAL/CLINICAL(Competencies to be achieved by the end of MBBS PHASE II)									
Number	**COMPETENCY The student should be able to**	**Domain* K/S/A/C**	**Level** K/KH/SH/P**	**Core (Y/N)**	**Teaching Learning method**	**Assessment method**	**Number required to certify***P**	**Vertical integration**	**Horizontal Integration**
CM1.9	Demonstrate the role of effective communication skills in health in a simulated environment	S	SH	Y	DOAP Sessions	Skill Assessment		AETCOM	
CM1.10	Demonstrate the important aspects of the doctor-patient relationship in a simulated environment	S	SH	Y	DOAP Sessions	Skill Assessment		AETCOM	
CM2.1	Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			
CM2.2	Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			

CM2.3	Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			
CM3.5	Describe the standards of housing and the effect of housing on health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM14.1	Define and classify hospital waste	K	KH	Y	Lecture, Small group discussion, Visit to hospital	Written / Viva voce			Microbiology
CM14.2	Describe various methods of treatment of hospital waste	K	KH	Y	Lecture, Small group discussion, Visit to hospital	Written / Viva voce			Microbiology
CM14.3	Describe laws related to hospital waste management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Microbiology
CM5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	

*** K-Knowledge; S- Skill; A-Attitude/professionalism; C-Communication;**
**** K-Knows; KH-Knows How; SH-Shows how; P-performs independently;**
***** Column H: If entry is P: indicate how many procedures must be done independently for certification/graduation**
DOAP- Demonstrate, Observe, Assess, Perform.

DISTRIBUTION OF TEACHING HOURS IN COMMUNITY MEDICINE:

The Teaching &Training will be conducted in the subject of **COMMUNITY MEDICINE** for a period of 01 year (**MBBS PHASE II**). The breakup of the teaching hours shall be as follows:

Duration	Interactive Lectures (hours)	Small Group Teaching/ Tutorials/ Seminars/ Integrated learning/ Practical's (hours)	Early Clinical Exposure (ECE)	Self-Directed Learning (SDL)	Total (hours)	AETCOM
12 Months	15	FAP (Clinical Postings) - 30		10	55	

Teaching-learning will consist of the following:

6. Theory Lectures
7. Small Group Teaching (SGT)
   c. Small group discussions (SGD)
   d. Seminars
8. Self-directed learning (SDL)
9. Practical lab work
   c. Hands on practicals
   d. Exposure to OSPE
10. AETCOM sessions (as per modules mandated by NMC)

COURSE CURRICULUM IN COMMUNITY MEDICINE: MBBS-PHASE-III

As Per National Medical commission (NMC), the following is the basis of the curriculum of the teaching in **COMMUNITY MEDICINE** in **MBBS PHASE III**

Competencies:

The learner must demonstrate an understanding of:

- CM 1.9: Demonstrate the role of effective communication skills in health in a simulated environment.
- CM 1.10: Demonstrate the important aspects of the doctor-patient relationship in a simulated environment.
- CM 2.1: Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community.

- CM 2.2: Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status.
- CM 2.3: Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior.
- CM 3.2: Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting.
- CM 3.5: Describe the standards of housing and the effect of housing on health.
- CM 3.6: Describe the role of vectors in the causation of diseases. Also discuss National Vector Borne disease Control Program.
- CM 3.7: Identify and describe the identifying features and life cycles of vectors of Public Health importance and their control measures.
- CM 3.8: Describe the mode of action, application cycle of commonly used insecticides and rodenticides.
- CM 5.1: Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions.
- CM 5.3: Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management.
- CM 5.6: Enumerate and discuss the National Nutrition Policy, important national nutritional Programs including the Integrated Child Development Services Scheme (ICDS) etc.
- CM 6.2: Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data.
- CM 6.3: Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs.
- CM 6.4: Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion.
- CM 7.4: Define, calculate and interpret morbidity and mortality indicators based on given set of data.
- CM 7.6: Enumerate and evaluate the need of screening tests.
- CM 8.1: Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases.
- CM 8.2: Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases (diabetes, Hypertension, Stroke, obesity and cancer etc.)
- CM 8.3: Enumerate and describe disease specific National Health Programs including their prevention and treatment of a case.
- CM 8.4: Describe the principles and enumerate the measures to control a disease epidemic.
- CM 8.5: Describe and discuss the principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease.
- CM 8.7: Describe the principles of management of information systems.
- CM 9.1: Define and describe the principles of Demography, Demographic cycle, Vital statistics.
- CM 9.2: Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates.
- CM 10.1: Describe the current status of Reproductive, maternal, newborn and Child Health.

- CM 10.2: Enumerate and describe the methods of screening high risk groups and common health problems.
- CM 10.3: Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices.
- CM 10.4: Describe the reproductive, maternal, newborn & child health (RMCH); child survival and safe motherhood interventions.
- CM 10.5: Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs.
- CM 10.6: Enumerate and describe various family planning methods, their advantages and shortcomings.
- CM 10.7: Enumerate and describe the basis and principles of the Family Welfare Program including the organization, technical and operational aspects.
- CM 10.8: Describe the physiology, clinical management and principles of adolescent health including ARSH.
- CM 10.9: Describe and discuss gender issues and women empowerment.
- CM 11.1: Enumerate and describe the presenting features of patients with occupational illness including agriculture.
- CM 11.2: Describe the role, benefits and functioning of the employees state insurance scheme.
- CM 11.3: Enumerate and describe specific occupational health hazards, their risk factors and preventive measures.
- CM 11.4: Describe the principles of ergonomics in health preservation.
- CM 11.5: Describe occupational disorders of health professionals and their prevention & management.
- CM 12.1: Define and describe the concept of Geriatric services.
- CM 12.2: Describe health problems of aged population.
- CM 12.3: Describe the prevention of health problems of aged population.
- CM 12.4: Describe National program for elderly.
- CM 13.1: Define and describe the concept of Disaster management.
- CM 13.2: Describe disaster management cycle.
- CM 13.3: Describe manmade disasters in the world and in India.
- CM 13.4: Describe the details of the National Disaster management Authority.
- CM 14.1: Define and classify hospital waste.
- CM 14.2: Describe various methods of treatment of hospital waste.
- CM 14.3: Describe laws related to hospital waste management.
- CM 15.1: Define & describe the concept of Mental Health.
- CM 15.2: Describe warning signals of Mental Health disorders.
- CM 15.3: Describe National Mental Health program.
- CM 18.1: Define and describe the concept of International Health.
- CM 18.2: Describe roles of various international Health agencies.
- CM 20.2: Describe various issues during outbreaks and their prevention.

Broad subject specific objectives:

e. **Knowledge:** At the end of the course in the subject of Community Medicine, the student shall be able to:

- Describe the Health information system.
- Acquire, understand, integrate, apply and manage information in context to health care problems and health care delivery system in various communities, health care settings and hospitals.
- Describe the principles and components of primary health care, National Rural Health Mission and national health policies to achieve the goal of "Health for all" with regards to identify the environmental, bio-waste and occupational hazards and their control.
- Describe the importance of water and sanitation in human health.
- Describe the principles of health economics, health administration, and health education in relation to community.
- Critically analyze the problem (s) and apply his/her knowledge to solve the problem in holistic manner.
- Describe and apply principles of prevention, promotion and maintenance of health.

f. **Skills:** At the end of the course in the subject of Community Medicine, the student shall be able to:

- Plan, implement and evaluate a health education Programme with skill to use simple audio-visual aids.
- Interact with other members of health care team and participate in the organization of health care services, health advocacy and implementation of national health programmes.
- Perform Administrative functions at health centers.
- Observe the principles of medical ethics in the practice of his profession.

Integration:

The teaching/learning programme should be integrated horizontally and vertically, as much as possible, to enable learners to make clinical correlations and to acquire an understanding of the cellular and molecular basis of health and disease.

COMMUNITY MEDICINE THEORY:

The teaching of **COMMUNITY MEDICINE** theory is as defined by the National Medical Commission (NMC) in its "Competency based Undergraduate Curriculum-Volume II."
The competencies to be covered, Teaching-learning methods employed, and assessment methods will be as be as follows:

COMMUNITY MEDICINE THEORY (Competencies to be achieved by the end of MBBS PHASE III)									
Number	**COMPETENCY The student should be able to**	**Domain K/S/A/C**	**Level K/KH/SH/P**	**Core (Y/N)**	**Teaching Learning method**	**Assessment method**	**Number required to certify P**	**Vertical integration**	**Horizontal Integration**
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases.	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM8.2	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases (diabetes, Hypertension, Stroke, obesity and cancer etc.)	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine	
CM8.3	Enumerate and describe disease specific National Health Programs including their prevention and treatment of a case	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM8.4	Describe the principles and enumerate the measures to control a disease epidemic	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM8.5	Describe and discuss the principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		General Medicine, Pediatrics	
CM8.7	Describe the principles of management of information systems	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM10.1	Describe the current status of Reproductive, maternal, newborn and Child Health	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.2	Enumerate and describe the methods of screening high risk groups and common health problems	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Pediatrics, Obstetrics & Gynaecology	
CM10.3	Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Pediatrics, Obstetrics & Gynaecology	

CM10.4	Describe the reproductive, maternal, newborn & child health (RMCH); child survival and safe motherhood interventions	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Obstetrics & Gynaecology, Pediatrics	
CM10.5	Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs.	K	KH	Y	Small group discussion, Lecture	Written / Viva voce		Pediatrics	
CM10.6	Enumerate and describe various family planning methods, their advantages and shortcomings	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM10.7	Enumerate and describe the basis and principles of the Family Welfare Program including the organization, technical and operational aspects	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM10.8	Describe the physiology, clinical management and principles of adolescent health including ARSH	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM10.9	Describe and discuss gender issues and women empowerment	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.1	Enumerate and describe the presenting features of patients with occupational illness including agriculture	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.2	Describe the role, benefits and functioning of the employees state insurance scheme	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.3	Enumerate and describe specific occupational health hazards, their risk factors and preventive measures	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.4	Describe the principles of ergonomics in health preservation	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM11.5	Describe occupational disorders of health professionals and their prevention & management	K	KH	Y	Small group discussion, Lecture	Written / Viva voce			
CM12.1	Define and describe the concept of Geriatric services	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine	
CM12.3	Describe the prevention of health problems of aged population	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM13.1	Define and describe the concept of Disaster management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	

CM13.2	Describe disaster management cycle	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.3	Describe manmade disasters in the world and in India	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM13.4	Describe the details of the National Disaster management Authority	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Surgery, General Medicine	
CM14.1	Define and classify hospital waste	K	KH	Y	Lecture, Small group discussion, visit to hospital	Written / Viva voce			Microbiology
CM14.2	Describe various methods of treatment of hospital waste	K	KH	Y	Lecture, Small group discussion, visit to hospital	Written / Viva voce			Microbiology
CM14.3	Describe laws related to hospital waste management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Microbiology
CM15.1	Define and describe the concept of mental Health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	
CM15.2	Describe warning signals of mental health disorder	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	
CM15.3	Describe National Mental Health program	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Psychiatry	

CM18.1	Define and describe the concept of International health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM18.2	Describe roles of various international health agencies	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			

*** K- Knowledge; S- Skill; A - Attitude / professionalism; C- Communication;**
**** K- Knows; KH- Knows How; SH- Shows how; P- performs independently;**
***** Column H: If entry is P: indicate how many procedures must be done independently for certification/ graduation**
DOAP- Demonstrate, Observe, Assess, Perform.

COMMUNITY MEDICINE PRACTICAL/CLINICAL:

The teaching of **COMMUNITY MEDICINE** practicals will be as defined by the National Medical Commission (NMC) in its "Competency based Undergraduate Curriculum-Volume II."
The competencies to be covered, Teaching-learning methods employed, and assessment methods will be as be as follows:

COMMUNITY MEDICINE PRACTICAL/CLINICAL(Competencies to be achieved by the end of MBBS PHASE III)									
Number	**COMPETENCY The student should be able to**	**Domain* K/S/A/C**	**Level** K/KH/SH/P**	**Core (Y/N)**	**Teaching Learning method**	**Assessment method**	**Number required to certify***P**	**Vertical integration**	**Horizontal Integration**
CM1.9	Demonstrate the role of effective communication skills in health in a simulated environment	S	SH	Y	DOAP Sessions	Skill Assessment		AETCOM	
CM1.10	Demonstrate the important aspects of the doctor-patient relationship in a simulated environment	S	SH	Y	DOAP Sessions	Skill Assessment		AETCOM	
CM2.1	Describe the steps and perform clinico socio-cultural and demographic assessment of the individual, family and community	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			
CM2.2	Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment			
CM2.3	Describe and demonstrate in a simulated environment the assessment of barriers to good health and health	S	SH	Y	Lecture, Small group	Written / Viva voce , Skill			

	seeking behavior				discussion, DOAP Sessions	Assessment			
CM3.5	Describe the standards of housing and the effect of housing on health	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM14.1	Define and classify hospital waste	K	KH	Y	Lecture, Small group discussion, Visit to hospital	Written / Viva voce			Microbiology
CM14.2	Describe various methods of treatment of hospital waste	K	KH	Y	Lecture, Small group discussion, Visit to hospital	Written / Viva voce			Microbiology
CM14.3	Describe laws related to hospital waste management	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			Microbiology
CM5.1	Describe the common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM5.3	Define and describe common nutrition related health disorders (including macro-PEM, Micro-iron, Zn, iodine, Vit. A), their control and management.	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	
CM3.6	Describe the role of vectors in the causation of diseases. Also discuss National Vector Borne disease Control Program	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Microbiology	
CM3.7	Identify and describe the identifying features and life cycles of vectors of Public Health importance and their control measures	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment		Microbiology	
CM3.8	Describe the mode of action, application cycle of commonly used insecticides and rodenticides	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pharmacology	
CM5.6	Enumerate and discuss the National Nutrition Policy, important national nutritional Programs including the Integrated Child Development Services Scheme (ICDS) etc	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		Pediatrics	

CM3.2	Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting	K	KH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce			
CM9.1	Define and describe the principles of Demography, Demographic cycle, Vital statistics	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment		Obstetrics & Gynaecology, Pediatrics	
CM6.2	Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment		General Medicine, Pediatrics	
CM6.3	Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment		General Medicine, Pediatrics	
CM7.4	Define, calculate and interpret morbidity and mortality indicators based on given set of data	S	SH	Y	Small group discussion, DOAP Sessions	Written / Skill Assessment		General Medicine	
CM6.4	Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion	S	SH	Y	Lecture, Small group discussion, DOAP Sessions	Written / Viva voce , Skill Assessment		General Medicine, Pediatrics	
CM7.6	Enumerate and evaluate the need of screening tests	S	SH	Y	Small group discussion, DOAP Sessions	Written / Skill Assessment		General Medicine	
CM20.2	Describe various issues during outbreaks and their prevention	K	KH	Y	Lecture, Small group discussion	Written / Viva voce			
CM8.1	Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases	K	KH	Y	Lecture, Small group discussion	Written / Viva voce		General Medicine, Pediatrics	Microbiology, Pathology

* K-Knowledge; S- Skill; A-Attitude/professionalism; C-Communication; ** K-Knows; KH-Knows How; SH-Shows how; P-performs independently; *** Column H: If entry is P: indicate how many procedures must be done independently for certification/graduation DOAP- Demonstrate, Observe, Assess, Perform.

DISTRIBUTION OF TEACHING HOURS IN COMMUNITY MEDICINE

The Teaching &Training will be conducted in the subject of **COMMUNITY MEDICINE** for a period of 01 year (**MBBS PHASE III**). The breakup of the teaching hours shall be as follows:

Duration [12 Months]	**Interactive Lectures (hours)**	**Small Group Teaching/ Tutorials/ Seminars/ Integrated learning/ Practical's (hours)**	**Early Clinical Exposure (ECE)**	**Self-Directed Learning (SDL)**	**Total (hours)**	**AETCOM**
	55	SGL-70		20	145	
Pandemic	18				18	
FAP(Visits + logbook submission)		SGL-21		10	31	

Teaching-learning will consist of the following:

11. Theory Lectures
12. Small Group Teaching (SGT)
    e. Small group discussions (SGD)
    f. Seminars
13. Self-directed learning (SDL)
14. Practical lab work
    e. Hands on practicals
    f. Exposure to OSPE
15. AETCOM sessions (as per modules mandated by NMC)

LOGBOOK

The log book, as recommended by the department of Community Medicine, GBCM, shall be maintained by the MBBS student. The logbook is an integral part of the formative / continuous assessment. It is a verified record of the academic / co-curricular activities of the MBBS student, who would be responsible for mandatorily maintaining and updating his/her logbook during the period of training. In the logbook, the student would document a record of various activities performed by him/her. The logbook should also contain entries for AETCOM modules. It must be checked, assessed periodically, and signed by the faculty regularly. Regular feedback will be given to the students and will be appropriately documented in the same. The HOD will cross-verify and countersign this logbook. at the end of the MBBS Phase of study. Weightage to maintenance of the Log Book will also be given in the Internal Assessment. The Log Book will be submitted before the examination and will be available for University Examiners to review.
The logbook contains:

- Record of completion of pre-determined activities.
- Acquisition of selected competencies
- Overall participation in sessions& performance
- Attendance

PATTERN OF EVALUATION/ ASSESSMENT (SUMMATIVE; FORMATIVE, ETC),

The assessment in is broadly divided into:

- **Formative assessment (Internal assessment)**
  Internal assessment marks shall not be added to marks of the University examinations and shall be shown separately in the mark sheet

- **Summative assessment (University examinations)**
  The summative assessment e.g. University examinations held at the end of each MBBS Phases, shall be used for pass or fail decision.

A. INTERNAL ASSESSMENT (i.e. FORMATIVE ASSESSMENT)

The components of Internal assessment (IA) are as follows:

- **Theory Internal Assessment(Total marks=100)**
  - Assessment in Class tests (theory), Vivas, Seminars, Performance in AETCOM module – 30%
  - Assessment of Logbook, Discipline& Regularity in theory classes– 20%
  - Assessment in 1st& 2nd Terminal theory examinations – 20%
  - Pre-University theory examinations – 30%

UNIVERSITY PRACTICAL/CLINICALEXAMINATION STRUCTURE:

Practical &Viva-voce Examination (100 marks)

S. No.	Topic	Marks
1	Family Study	20 Marks
2	Epidemiology Exercises	20 Marks
3	Biostatistics Exercises	20 Marks
4	Spotting	10 Marks
7	Grand Viva	30 Marks
Total Marks		**100 Marks**

RECOMMENDED TEXT/ REFERENCE/ PRACTICAL BOOKS, SUPPLEMENTARY READING & OTHER STUDY MATERIALS:

Recommended Text Books

1. Park's Textbook of Preventive and Social Medicine: K. Park (26th Ed)
2. Community Medicine with Recent Advances: A.H Suryakantha (7th Ed)
3. IAPSM's Textbook of Community Medicine: AM Kadri (3rd Ed)

Reference Books

1. Textbook of Community Medicine: Rajvir Bhalwar, Puja Dudeja (5th Ed)
2. Textbook of Community Medicine Preventive and Social Medicine: Sunder Lal (8th Ed)
3. Methods In Biostatistics: B.K Mahajan (10th Ed)
4. Basic Epidemiology: R Beaglehole, R Bonita and T Kjellstrom (2nd Ed)
5. Public Health and Preventive Medicine - "The RED BOOK" by AFMC

Practical Books/Other Study material

1. Practical Manual of the Department of Community Medicine, GBCM
2. Logbook of the Department of Community Medicine, GBCM
3. Essentials of Community Medicine: DK Mahabalaraju (4th Ed)

GUIDELINES FOR COMPETENCY BASED POSTGRADUATE TRAINING PROGRAMME FOR MD IN COMMUNITY MEDICINE

SUBJECT SPECIFIC OBJECTIVES

1. To create a skilled cadre of medical professionals having expertise in application of principles of Public Health, Community Medicine and applied epidemiology, contributing meaningfully in formulating National Health Policies &Programmes with a systems approach for overall human development.

2. To standardize the teaching & training approaches at post- graduate level, for Community Medicine

3. Research: To formulate research questions, do literature search, conduct study with an appropriate study design and study tool; conduct data collection and management, data analysis and report.

SUBJECT SPECIFIC COMPETENCIES

At the end of the course the student should be able to acquire the following competencies under the three domains, Cognitive, Affective and Psychomotor:

A. Cognitive domain (The student should be able to:)

1. Describe conceptual (and applied) understanding of Public Health, Community Medicine, clinical and disease-oriented approach, preventive approach & health promotion, disease control & promotion.

2. Have knowledge about communicable and non-communicable diseases, emerging and reemerging diseases, their epidemiology, control and prevention.

3. Apply the principles of epidemiology, health research and Bio-statistics, application of qualitative research methods

4. Calculate Odds Ratio, Relative Risk, Attributable risk and other relevant health and morbidity indicators.

5. To describe nutritional problems of the country, role of nutrition in health and disease and to describe common nutritional disorders

6. Develop nutrition plan for an individual based on his requirements and with concerns to special

situations if applicable

7. Plan comprehensive programme to address issue of malnutrition in a given area for a specific

group

8. To describe the concept of Environmental Health and its various determinants.

9. Identify environmental health issues in a given area/community

10. Assess impact of adverse environmental conditions on health of human beings

11. Plan awareness programmes at various levels on environmental issues and mobilize community

resources and participation to safeguard from local adverse environmental conditions

12. Should be able to provide technical advice for water purification, chlorination, installing gobar-gas plant, construction of soakage pits etc.

13. Be a technical expert to advice on protection measures from adverse environmental exposure

14. To describe the working of Primary Health Care system, Panchayat Raj system, National Health

Programmes, urban/rural differences, RCH, Demography and Family Welfare.

15. Do orientation of the inter-linkage of health sector and non-health sector for promotion of

Health & control and prevention of diseases.

16. Have familiarity with administrative procedures and protocols

17. Have knowledge about role of media and its use in health.

18. Have knowledge of Health Care Administration, Health Management and Public Health

Leadership

19. To describe Health Policy planning, Medical Education technology, Information Technology

and integration of alternative Health system including AYUSH.

20. To describe the intricacies of Social & Behavioral sciences and their applications.

21. To describe Public Health Legislations

22. To understand and describe International Health & Global Diseases surveillance.

23. To relate the history of symptoms with specific occupation, diagnostic criteria, preventive

measures, identification of various hazards in a specific occupational environment and

legislations.

24. To keep abreast of recent advances in Public Health & formulate feasible, optimal, sustainable,

cost effective strategies in response to the advances in public health & development.

25. To describe the principles of Health Economics and apply it in various public health settings.

26. To explain and correlate common health problems (medical, social, environmental, economic,

psychological) of urban slum dwellers, organization of health services in urban slum areas

27. Develop workable interventions for control and prevention of emerging and re-emerging

diseases at local, national and global level.

28. Identify behavior pattern of individual or group of individuals detrimental or adversely affecting

their health

29. Define and identify vulnerable, under-privileged high risk communities and their special needs

30. To create awareness about various public health laws

31. Evaluate cost effectiveness and cost benefits of a Health Program

32. Understand and express implications of 'Poverty Line', 'Social Inclusion', 'Equity', 'taxations',

'Insurance' on Health care management.

33. To categorize hospital waste and be able to guide for proper disposal.

34. To provide a comprehensive plan for disaster management and mitigation of sufferings.

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 adopt 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 for effective teaching.

C. Psychomotor domain: ((The student should be able to:)

The student should be able to perform independently the following :

- Conduct community surveys for assessment of health & morbidity profile, epidemiological determinants, assessment of health needs, disease surveillance, evaluation of health programmes and community diagnosis
- Conduct epidemic investigations, spot maps, predict disease trends, preparation of reports, planning and implementation of control measures
- Demonstrate clinical skills of preparing case history, examination, provisional diagnosis, treatment and clinical case management and interpretation of laboratory findings. Conduct common procedures such as incision, drainage, dressings & injections.
- Do data collection, compilation, tabular and graphical presentation, analysis and interpretation, applying appropriate statistical tests, using computer-based software application for validation of findings
- Conduct epidemiological research studies to establish cause-effect relationships in elaborating the epidemiology of diseases and health events
- Develop appropriate IEC Material, assessment of community communication needs, training skills, counseling skills, conduct Health Education Programmes in urban and rural settings
- Conduct dietary surveys, assessment of nutritional status, nutritive values of common food menus, detection of food adulterants, use of lactometer, recording and interpretation of growth and development charts.
- Use and apply various instruments and processes concerned with environmental health and biological waste management eg. waste collection, segregation and disposal as per protocols, needle-disposers, disinfection procedures. Also use of Dosi-meters, Kata / Globe Thermometer, Slings Psychrometer, Gobar Gas Plant, Soakage pit, Solar Energy, functioning of ILRs, Deep Freezers, Cold Boxes, Vaccine Carriers.

□ identify different types of mosquitoes, detect vector breeding places and orientation of the methods of elimination of breeding places and placement of a mosquito-proof water tank.

□ Conduct clinical screening of various diseases and organize community health camps involving community participation in urban and rural settings. Use of Snellen charts for vision, Ischiara's chart for colour blindness, tourniquet tests for dengue diagnosis in fever, BMI and other physical measurements of infants, children and adults etc., copper-T insertions and preparation of pap smear.

□ Conduct tests for assessment of chlorine demand of water (Horrock's Apparatus), procedure of well-water and urban water-tank chlorination, assessment of chlorination levels, physical examination of water, methods domestic water purification, oriented in use of water filters.

□ Prepare health project proposals with budgeting based on the project objectives.

Miscellaneous skills: (The student should be able to)

1. Devise appropriate health education messages for public health awareness using various health communications strategies.

2. Identify family level and community level interventions and facilitate the implementation of the same e.g. food hygiene, food storage, cooking demonstrations, community kitchen, kitchen garden, empowerment of women for promoting nutritional health etc.
3. Demonstrate counselling skills for family planning services.
4. Plan and execute BCC strategy for individuals.
5. Conduct measurement of occupational exposure to harmful influences.
6. Diagnose occupational hazards and undertake surveys to identify occupational exposures as and when necessary.
7. Elicit appropriate response at individual and community level to prevent occupational hazards including IEC activities at different levels.
8. Use modern IT applications especially internet & internet-based applications.

TEACHING AND LEARNING METHODS

Teaching methodology

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

□ Journal Club : Critical appreciation and discussion of research articles in indexed journals

□ Seminar

□ Lecture/Discussion : Lectures on newer topics by faculty

□ Case presentation : Communicable disease case presentation (focus on epidemiology, control, prevention) or Family case (focus on health needs assessment, SWOT analysis of family, social determinants and social empowerment, community management, role of primary health care and mobilizing resources for empowerment of the family). PG students will present the cases in presence faculty and discuss various modalities of management.

□ Public Health Management training in Immunization clinics, Disease Surveillance Units, General Preventive OPD, hands-on training in management of national health programs at urban health centre and rural health centre along with orientation in health administrative system.

□ The PG student shall be required to participate in the teaching and training programme of Undergraduate students and interns.

□ The PG student must have attended Mandatory training in Research Methodology during his tenure.

□ A postgraduate student of a postgraduate degree course in broad specialities/super specialities 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.

□ Special Seminars / Workshops: conducted by External Faculty on cross-cutting subjects directly

or indirectly concerned with Health. eg. Critical appreciation of National Developmental Budget, delivered by prominent Economist.

□ Log Book: Postgraduate students shall maintain a log book of the work carried out by them and

the training programme undergone during the period of training including details of work experience during their postings, including programs implemented under supervision and those performed independently. The log book shall be checked and assessed periodically by the faculty members imparting the training.

□ Department should encourage e-learning activities.

□ Postings in RHTC/UHTC,DRP,Specialities postings in Medicine,Paeditrics and Obstetrics and Gynaecology.

MD COMMUNITY MEDICINE

There shall be four theory papers as follows:

Paper I : Conceptual (and applied) understanding of Public Health, Community Medicine, Communicable and Non- Communicable diseases, emerging and re-emerging diseases, Applied Epidemiology, Health research, Bio-statistics.

Paper II: Nutrition, Environmental Health, Primary Health Care system, Panchayat Raj system, National health Programs, RCH, Demography and Family Welfare, Health Care Administration, Health Management and Public Health Leadership.

Paper III: Social & Behavioral sciences- applied aspects, Scientific communications & Medical writing, Research Methodology, Public Health Legislations, International Health & Global Diseases surveillance.

Paper IV: Health Policy planning, Medical Education technology, Information Technology, Integration of alternative Health system including AYUSH, Occupational Health, Recent advances in Public Health & Miscellaneous issues, Health Economics.

MD COMMUNITY MEDICINE

There shall be four theory papers as follows:

Paper I : Conceptual (and applied) understanding of Public Health, Community Medicine, Communicable and Non- Communicable diseases, emerging and re-emerging diseases, Applied Epidemiology, Health research, Bio-statistics.

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Paper III: Social & Behavioral sciences- applied aspects, Scientific communications & Medical writing, Research Methodology, Public Health Legislations, International Health & Global Diseases surveillance.

Paper IV: Health Policy planning, Medical Education technology, Information Technology, Integration of alternative Health system including AYUSH, Occupational Health, Recent advances in Public Health & Miscellaneous issues, Health Economics.

The above distribution is suggestive only

1. Each university theory paper will have 15 marks of MCQ/true-false types of question.
2. The remaining 85 marks in each paper will be distributed across 6 questions.
   a. There will be 3 long essay questions of 15 marks each.
   b. There will be one long essay question of 10 marks.
3. Each long question must be structured with marks defined for each aspect of the question.
4. There will be one question with write in brief for 15 marks. There will be three different topics under this question.
5. There will be one question with short notes for 15 marks. This will have five different questions. The questions to be framed on a particular aspect of the topic.
6. In practical examination there will be one case presentation along with viva voice of 50 marks. The student will take history and present the case in front of the examiners. The family will be allotted by random selection.
7. The spotting examination will cover aspects of medical entomology, vaccines, nutrition, environment sanitation, maternal care, drugs under various national health programmes, documentation charts etc. Each spot will have two questions of one mark each. There will be a total of 10 spots and entire exercise will be of 20 marks.
8. The epidemiological and statistical problem solving exercise will be of 15 marks each. The entire exercise will be of 30 marks.
9. The panel of external examiner was prepared (Annexure-I).

The meeting ended with vote of thanks.

Regards

Sadhna

Dr Sadhna Singh
Prof. & Head
Community Medicine

DEPARTMENT OF COMMUNITY MEDICINE

Teerthanker Mahaveer Medical College & Research Centre

Delhi Road, Moradabad - 244001

Ref.No.CM/07/25/ **Date: 01/07/2025**

Panel of external examiners for MBBS Practical Examination.

S.No.	Name, Designation & Address of External Examiner	Mobile No.	Email -ID
1	**Dr Shaili Vyas** Professor, Community Medicine, HIMS, jolly Grant, Dehradun, UK	09759135362	SHAILIVYAS7@GMAIL.COM
2	**Dr Sachin Singh Yadav** Professor, Community Medicine, Government Medical College, Datiya, MP	08059491821	DR.SACHIN2013@GMAIL.COM
3	**Dr Puneet Ohri,** Professor & Head, Community Medicine, Shri Guru Ram Rai Medical College, Dehradun, Uttrakhand	09548071441	OHRI7PUNEET@REDIFFMAIL.COM
4	**Dr Rashmi katiyal,** Professor & Head, Community Medicine, Rohilkhand Medical College & Hospital, Bareilly Uttar Pradesh	09897373850	RASMIKATYAL@GMAIL.COM
5	**Dr Sunil Kumar Garg,** Professor, Community Medicine, NCRIMS, Meerut UP	09412837112	DRGARGFAM@REDIFFMAIL.COM
6	**Dr Rambha Pathak,** Professor, Community Medicine, GIMS, Greater Noida, UP	08826843180	RAMBHA_P@YAHOO.COM
7	**Dr Sumit Chawla,** Associate Professor, Community Medicine, Shri Atal Bihari Vajpayee Medical College, Faridabad, Haryana	09501372175	DRSCHAWLA86@GMAIL.COM
8	**Dr Mamta Sharma,** Professor, Community Medicine, AFSMS & RC, Faridabad, Haryana	08118840140	SHARMAMAMTRMT2000@GMAIL. COM
9	**Dr Huma Khan** Professor & Head, Community Medicine, SRMS, Bareilly, UP	09758169897	HUMAKGUPTA@GMAIL.COM
10	**Dr A.K. Srivastava** Professor, Community Medicine, HIMS, jolly Grant, Dehradun, UK	09837338696	AKSRIVASTAVA@SRHU.EDU.IN
11	**Dr Bhawna Pant** Professor & Head, Community Medicine, NCR Medical College, Merrut	08057618841	DRBPANT2007@GMAIL.COM

Internal Examiners for UG Practical Examination			
1	**Dr Sadhna Singh,** Professor, Community Medicine, TMMC & RC	09411339979	DR.SADHNA@GMAIL.COM
2	**Dr Chintu Chaudhary,** Professor, Community Medicine, TMMC & RC	09643099272	CHAUDHARYCHINTU@GMAI.COM
3	**Dr Bhaskar Watode,** Associate Professor, Community Medicine, TMMC & RC	09015466699	BHASKARWATODE@GMAIL.COM

Dr Sadhna Singh
Professor & Head
Dept. of Community Medicine

DEPARTMENT OF COMMUNITY MEDICINE

Teerthanker Mahaveer Medical College & Research Center

Delhi Road, Moradabad - 244001

Ref. No. CM/06/25/ **Date: 01/07/2025**

To,
The Principal,
TMMC &RC,
Moradabad.

Subject: Panel of external examiners for M.D. (Community Medicine)Practical Examination.

Sir,

Please find attached herewith Panel of external examiners for MD University Practical Examination.

S.No	Name, Designation & Address of External Examiner	Mobile No.	Email -ID
1	**Dr Bhawna Pant** Professor & Head, Community Medicine, NCR Medical College, Merrut	08057618841	DRBPANT2007@GMAIL.COM
2	**Dr Nirankar Singh** Professor & Head, Community Medicine, Muzaffarnagar Medical College, opp. Beghrajpur Industrial Area, Ghasipura, Muzaffanagar, UP	08650010004	DRNIRNKAR74@REDIFFMAIL.COM
3	**Dr Shaili Vyas** Professor, Community Medicine, HIMS, jolly Grant, Dehradun, UK	09759135362	SHAILIVYAS7@GMAIL.COM
4	**Dr Deepshikha** Professor, Community Medicine, HIMS, jolly Grant, Dehradun, UK	09837006962	DRD.SHIKHA@YAHOO.CO.IN
5	**Dr Puneet Ohri,** Professor & Head, Community Medicine, Shri Guru Ram Rai Medical College, Dehradun, Uttrakhand	09548071441	OHRI7PUNEET@REDIFFMAIL.COM
6	**Dr Rambha Pathak,** Professor, Community Medicine, GIMS, Greater Noida, UP	08826843180	RAMBHA_P@YAHOO.COM
7	**Dr Rashmi katiyal,** Professor & Head, Community Medicine, Rohilkhand Medical College & Hospital, Bareilly Uttar Pradesh	09897373850	RASMIKATYAL@GMAIL.COM
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	Internal Examiners for M.D. Practical Examination		
1	**Dr Sadhna Singh,** Professor & Head, Community Medicine, TMMC & RC	09411339979	Sadhna.s@gamil.com
2	**Dr Chintu Chaudhary,** Professor, Community Medicine, TMMC & RC	09643099272	chaudharychintu@gmail.com

Sadhna

Dr Sadhna Singh
Professor & Head
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