

**Government of India**

**Employee's State Insurance- Post  
Graduate Institute of Medical  
Science & Research and ESIC  
Medical College & Hospital**

Diamond Harbour Road, Joka, Kolkata – 700104

**Prospectus 2017**

Published by:

**ESIPGIMSR & ESIC MC, Joka Oversight Committee**

on behalf of

ESI Postgraduate Institute of Medical Science & Research  
Diamond Harbour Road, Kolkata - 700 104

**Contact information:**

For all relevant correspondence and to procure this document please contact:

Registrar Academics,  
Student Section, First Floor, Dean Office, Old Hospital Building,  
ESI Postgraduate Institute of Medical Science & Research  
Diamond Harbour Road, Kolkata - 700 104.  
Phone: 033-24381176

## Message from the Dean

I welcome you all to a new beginning in your life.

Stand Up

Be bold

Be strong

Take the whole responsibility on your shoulder  
and know that you are the creator of your destiny.

This is the only Undergraduate and postgraduate institute of West Bengal run by Central Govt. of India and serves not only as a referral hospital but it also imparts basic medical training to young dreamy aspirants with the aim of producing competent, confident and honest physicians responsive to needs of community and country.

This Premier Institute started its journey as PG Institute in 2011 and later from 2013 initiated UG MBBS course with an intake of 100 students.

Be proud to be student of an institution that is well known all over the country for its UG, PG and postdoctoral courses.

Our learned and dedicated faculty joined from all over the country and abundance of clinical material will always be there at your disposal to help you fulfill your dreams. In the words of Marie Curie, *'Life is not easy for any of us. But what of that? We must have perseverance and above all confidence in ourselves. We must believe that we all are gifted for something and this thing must be attained.'*

I should convey my heartfelt thanks to the Government of West Bengal, Central Govt. of India Ministry of Labour and Ministry of Health & Family Welfare, Governing Body of the Institute for their constant assistance, advice and cooperation towards progress of this institute.

I am thankful to Registrar Academics, who has shouldered the responsibility of coordinating with the Dean's section, in compiling the data and supervising the publication of the prospectus.

I humbly request all of you to bear with any shortcomings that you face.

Above all **be proud to be a doctor.**

My best wishes to all.

Dean,  
ESIPGIMR & ESIC MC, Joka

## Message from the REGISTRAR ACADEMICS

It gives me great pleasure to present to you the ESIPGIMSR & ESIC MEDICAL COLLEGE & HOSPITAL, JOKA Prospectus for 2017. Although most information these days can be obtained online over the internet, this Prospectus will serve as a handy guide for institution-specific information that may not be available elsewhere.

I express my gratitude to our Dean and Medical Superintendent and all faculty for their kind cooperation. My sincere thanks goes to HODs of all departments for shouldering the responsibility of adding all relevant information related to their respective departments and giving it the present form.

Students and their guardians must note that in accordance with the view taken by the Honorable Supreme Court, the University Grants Commission and the Medical Council of India, ragging, in any form, is STRICTLY PROHIBITED in this institution. The Anti-Ragging Committee is empowered to take prompt and strict disciplinary measures against any individual found to be engaged in ragging or abetment of ragging anywhere on the premises.

I sincerely hope that this Prospectus will meet the information needs of the MBBS as well as PG students aspiring to join our Institute.

With best wishes to all of you

Registrar Academics,  
ESIPGIMSR & ESIC MC, Joka

## Administration (ESIPGIMSR & ESIMC & Hospital)

Location: Dean Office – Administrative Block 1st Floor  
Registrar Academics -Dean Office – 1<sup>st</sup> Floor, Administrative Block,  
+91 (033)24381382, Telefax-24381176  
deanpgi-joka.wb@esic.nic.in

Office of the Medical Superintendent,  
ESI-PGIMSR, ESIC Medical College & Hospital and ODC (EZ)  
Diamond Harbour Road, Joka  
Kolkata - 700104, West Bengal, INDIA.  
+91 (033) 2467-1322, 2467-1764  
[ms-odckolkata@esic.in](mailto:ms-odckolkata@esic.in)

Website: <http://www.esi-pgimsrkolkata.org.in>

| Sl. No | Name                      | Designation               | Extension No. |
|--------|---------------------------|---------------------------|---------------|
| 1.     | Prof. Joydeb Roychowdhury | Dean                      | 354           |
| 2.     | Dr. S.K. Choudhury        | Medical Superintendent    | 301           |
| 3.     | Dr. Parimal Maji          | Dy Medical Superintendent | 302           |
| 4.     | Smt. Lali Singha Roy      | Deputy Director           | 408           |
| 5.     | Sh. K.C. Basumatri        | Deputy Director           | 304           |
| 6.     | Sh. Achintya Mandal       | Deputy Director           | 364           |
| 7.     | Sh. Amitava Dutta         | Assistant Director        | 324           |
| 8.     | Sh. Vijay Kumar           | PPS to Dean               | 361           |
| 9.     | Sh. Pradip Kumar Shaw     | Office Superintendent     | 363           |
| 10.    | Sh. Prasanta Chakraborty  | Librarian                 | 033 2438 1381 |

Casualty OPD Extension No. 333.

## The College Council

College Council comprising of the Head of departments as members and Principal/Dean as Chairperson. The Council shall meet at least four times in a year to draw up the details of curriculum and training programme, enforcement of discipline and other academic matters. The Council shall also organise interdepartmental meetings like grand rounds, statistical meetings and clinico pathological meetings including periodical research review in the Institution regularly.

| No. | Name                      | Designation                   |
|-----|---------------------------|-------------------------------|
| 1   | Prof. Joydeb Roychowdhury | Dean, Chairman                |
| 2.  | Dr. S.K.Choudhury         | Medical Superintendent        |
| 3.  | Dr. Parimal Maji          | Deputy Medical Superintendent |
| 4.  | Prof. Tapas Kumar Mondal  | HOD, Medicine                 |
| 5.  | Prof. Nalini Arora        | HOD, OBGY                     |
| 6.  | Prof. Soumya Chakraborty  | HOD, Anatomy                  |
| 7.  | Dr. Nitish Kalra          | Asst Prof, Dentistry          |
| 8.  | Prof. Rekha Dutt          | HOD, Community Medicine       |
| 9.  | Prof. Sonia Gon           | HOD, Pathology                |
| 10. | Prof. Sonali Mukherjee    | HOD, Pharmacology             |
| 11. | Prof. Ashok Kumar Samanta | HOD, Forensic Medicine        |
| 12. | Dr. Arunava Kundu         | HOD, Ophthalmology            |
| 13. | Dr. Subhabrata Sengupta   | HOD, Otolaryngology           |
| 14. | Dr. Ujjwal Bandopadhyay   | HOD, Psychiatry               |
| 15. | Dr. Md Khalid Rashid      | HOD, Microbiology             |
| 16. | Dr. Soumyendu Sengupta    | HOD, Biochemistry             |
| 17. | Dr. Tarun Kumar Das       | HOD Physiology                |
| 18. | Dr. Jyotirmay Kirtania    | HOD, Anaesthesia              |
| 19. | Dr. Sumanta Kumar Ghosh   | HOD, Surgery                  |
| 20. | Dr. Rohini Singh          | Asst. Prof., Radiology        |
| 21. | Dr. Niharika Ranjan Pal   | Asst. Prof., Dermatology      |
| 23  | Dr.Pritam Bandopadhyay    | Asst. Prof., Pediatrics       |

## ESIPGIMSR & ESIC MC & Hospital JOKA History

Employees' State Insurance Corporation (ESIC) had taken initiative in starting the Medical College and the Post Graduate Institute of Medical Sciences and Research (PGIMSR) at Joka, Kolkata.

This is the first endeavor in the field of undergraduate Medical Education by ESIC in West Bengal, which is a new dimension in the growth of ESIC.

This Institution has permission from the MCI and the Govt. of India for conducting MBBS Course (100 annual admission per year) since 2013.

This Institution has been recognized by the MCI and the Govt. of India for running MS (Obstetrics and Gynecology) with 2 annual admissions per year since 2011-12 session. Subsequently MS has been recognized and 4 more seats have been added from 2017-18 session, Resulting in 6 annual intake of postgraduates out of which 2 are recognized and 4 are permitted.

This Institute is affiliated to The West Bengal University of Health Sciences (WBUHS), Kolkata <http://www.wbuhs.ac.in>.

ESI-PGIMSR & ESIC Medical College Joka has a well equipped 470 bedded ESIC Model Hospital, which is located within the same premises.

## Courses offered at ESIC-PGIMSR JOKA

**A. MBBS (100 seats)** Under the West Bengal University of Health Sciences (WBUHS), Kolkata

**B. Medical postgraduate degree / diploma courses** Under WBUHS, Kolkata

| SN           | Code | Course                                       | Total seats | Status in July 2017 of All-India quota seats | Status in July 2017 Of State quota seats |
|--------------|------|--|-------------|--|--|
| 15           | OBYG | MS Obstetrics & Gynecology<br>Rehabilitation | 6           | Recognized 1<br>Permitted 2                  | Recognized 1<br>Permitted 2              |
| <b>TOTAL</b> |      |  | <b>4</b>    | <b>Recognized .... Permitted ....</b>        | <b>Recognized .... Permitted ....</b>    |

Senior residency positions are available in select clinical disciplines.

**Admissions Calendar**

**BACHELOR DEGREE COURSES**

| <p>Pursuant to the Notification published in the Gazette of India Extraordinary dated 21.12.2010, Medical Council of India (MCI) with the approval of the Central Government amended the regulations on Graduate Medical Education 1997 and made provision for a nationwide examination, namely, National Eligibility cum Entrance Test for Undergraduate Admission (NEET-UG) for admission to MBBS Course in each academic year.</p> <p>Central Board of Secondary Education (CBSE) has been notified as the organization to conduct NEET-UG. Accordingly CBSE has conducted the first NEET-UG for the academic session 2017-18. The responsibility of the CBSE is limited to the conduct of the entrance examination, declaration of result and providing merit list to the counseling authorities</p> <p style="text-align: center;">Admission Enquiry : November</p> |                 |                        |   |
|--|-----------------|------------------------|---|
| Course   | Stream          | Look for advertisement | Visit website for details   |
| MBBS   | Modern Medicine | Early November         | <a href="http://cbseneet.nic.in/cbseneet/welcome.aspx">http://cbseneet.nic.in/cbseneet/welcome.aspx</a> |
| <p>Note:</p>   |                 |                        |   |

1. 15% All India Quota (from NEET).
2. 33 % State Quotas (from NEET).
3. 52% ESIC Management (from NEET)

**POSTGRADUATE DEGREE / DIPLOMA COURSES**

| <p>As in case of MBBS admission, NEET-PG is the single National Eligibility cum Entrance Test for admission to various MD/MS and PG Diploma Courses of modern medicine, under ambit of Post Graduate Medical Regulations notified by MCI with approval of the Central Government. Qualifying in NEET-PG is mandatory for gaining entry to PG courses under various universities / institutions in the country, except a few select central government institutions. National Board of Examinations (NBE), Medical Enclave, Ansari Nagar, Mahatma Gandhi Marg (Ring Road), New Delhi-110029, is the organization notified for conducting NEET-PG for the 2013-14 academic session. The decision on various disputed modalities in this regard is subject to final verdict of the Honorable Supreme Court.</p> |                 |                        |  |
|--|-----------------|------------------------|--|
| Course   | Stream          | Look for advertisement | Visit website for details  |
| MD / MS  | Modern Medicine | Early December         | <a href="http://www.nbe.gov.in/neetpg">www.nbe.gov.in/neetpg</a> |
| <p>Note: 50% of MD/ MS seats in modern medicine are filled through All-India Quota.</p>  |                 |                        |  |



**Teaching Departments and their Heads**

| No. | Name                      | Designation                   |
|-----|---------------------------|-------------------------------|
| 1   | Prof. Joydeb Roychowdhury | Dean, Chairman                |
| 2.  | Dr. S.K.Choudhury         | Medical Superintendent        |
| 3.  | Dr. Parimal Maji          | Deputy Medical Superintendent |
| 4.  | Prof. Tapas Kumar Mondal  | HOD, Medicine                 |
| 5.  | Prof. Nalini Arora        | HOD, OBGY                     |
| 6.  | Prof. Soumya Chakraborty  | HOD, Anatomy                  |
| 7.  | Dr. Nitish Kalra          | Asst Prof, Dentistry          |
| 8.  | Prof. Rekha Dutt          | HOD, Community Medicine       |
| 9.  | Prof. Sonia Gon           | HOD, Pathology                |
| 10. | Prof. Sonali Mukherjee    | HOD, Pharmacology             |
| 11. | Prof. Ashok Kumar Samanta | HOD, Forensic Medicine        |
| 12. | Dr. Arunava Kundu         | HOD, Ophthalmology            |
| 13. | Dr. Subhabrata Sengupta   | HOD, Otolaryngology           |
| 14. | Dr. Ujjwal Bandopadhyay   | HOD, Psychiatry               |
| 15. | Dr. Md Khalid Rashid      | HOD, Microbiology             |
| 16. | Dr. Soumyendu Sengupta    | HOD, Biochemistry             |
| 17. | Dr. Tarun Kumar Das       | HOD Physiology                |
| 18. | Dr. Jyotirmay Kirtania    | HOD, Anaesthesia              |
| 19. | Dr. Sumanta Kumar Ghosh   | HOD, Surgery                  |
| 20. | Dr. Rohini Singh          | Asst. Prof., Radiology        |
| 21. | Dr. Niharika Ranjan Pal   | Asst. Prof., Dermatology      |
| 23  | Dr.Pritam Bandopadhyay    | Asst. Prof., Pediatrics       |

## Medical Education Unit

The Medical Education Unit is entrusted with the responsibility of organizing lectures / workshops / symposia etc. on interdisciplinary topics with the goal of improving knowledge and skills of faculty and residents with respect to the teaching-learning process, research methodology and allied subjects.

This unit currently has the following members:

| No. | Name                           | Designation                       |
|-----|--------------------------------|-----------------------------------|
| 1.  | Prof. Joydeb Roychowdhury      | Dean, Chairman                    |
| 2.  | Prof. Soumya Chakraborty       | Co-Ordinator                      |
| 3.  | Members:<br>Prof. Nalini Arora | HOD, OBGY                         |
| 4.  | Prof. Joya Ghosh               | Biochemistry                      |
| 5.  | Prof. Sonia Gon                | HOD, Pathology                    |
| 6.  | Dr. Chandan Chatterjee         | Associate Professor, Pharmacology |
| 7.  | Dr. Tapas Kumar Mandal         | HOD, Medicine                     |
| 8.  | Dr. Sumanta Kumar Ghosh        | HOD, Surgery                      |
| 9.  | Prof. Subhabrata Sengupta      | HOD ENT                           |
| 10. | Dr. Pandurang                  | Professor, Physiology             |
| 11. | Dr. S.V. Parate                | Assistant Professor, FSM          |

## Anti-Ragging & Disciplinary Committee

**Ragging is STRICTLY FORBIDDEN in the institute.** In accordance with Medical Council of India directives, the institute has a standing committee which will promptly investigate all complaints of ragging and take disciplinary action as needed. This committee will also consider instances of gender harassment and other undisciplined activities reported against any category of staff. The committee comprises of the following

Annex 4 may be consulted for details of MCI recommended procedures followed by the committee.

| SL No. | Officer Name              | Designation  | Contact No   | Email-ID                    |
|--------|---------------------------|--|--------------|-----------------------------|
|        | Prof. Joydeb Roychowdhury | Dean, Chairman                                       |              |                             |
| 1.     | Dr. S. K Choudhury        | Medical Superintendent                               | 9432649038   | ms-odckolkata@esic.nic.in   |
| 2.     | Dr. Ashok Kumar Samanta   | Chief Warden (Boys Hostel), Nodal Officer & Convener | 9831156913   | dr_ashoksamanta@yahoo.co.in |
| 3.     | Prof. Soumya Chakraborty  | HOD, Anatomy   | 9163512442   | soumtuab@gmail.com          |
| 4.     | Dr. Omkar Prasad Baidya   | Assistant Warden (Boys Hostel)                       | 808090332586 | omkarprasadbaidya@gmail.com |
| 5.     | Dr. Susmita Chowdhury     | Chief Warden (Girls Hostel)                          | 9163532251   | schaudhuri1986@gmail.com    |
| 6.     | Dr. Nita Singh            | Assistant Warden (Girls Hostel)                      | 8697010521   | drnita_singh@yahoo.co.in    |

## Gender Harassment Committee

Our institution forbids any discrimination based on gender. Men and women are expected to function in their professional and social spheres with mutual respect and cooperation. The purpose of this committee is to look into complaints related to gender based discrimination and sexual harassment with respect to students and teaching as well as non-teaching staff. The committee functions from the Office of the Dean

| No. | Name                       | Designation  | Presiding Officer or Member |
|-----|----------------------------|--|-----------------------------|
| 1.  | Dr. Soumya Chakraborty     | HOD, Anatomy   | Presiding Officer           |
| 2.  | Prof. Ashok Samanta        | HOD, Forensic Medicine                               | Member                      |
| 3.  | Dr. Parimal Maji           | Dy. Medical Superintendent                           | Member                      |
| 4.  | Mrs. Uma Chakraborty       | Dy. Nursing Superintendent                           | Member                      |
| 5.  | Dr. Pamela Bandopadhyay    | CMO, Casualty  | Member                      |
| 6.  | IMO I/c ESIC MDDC , Falta  | In relation to complaints of ESIC MDDC , Falta only  |                             |
| 7.  | IMO I/c ESIC MDDC , Haldia | In relation to complaints of ESIC MDDC , Haldia only |                             |

## Institutional Ethics Committees

Research is an essential and integral component of our institute's activities. Research may be viewed as any form of disciplined inquiry that aims to contribute to a body of knowledge. Clinical research represents a large and essential component of biomedical research. It involves human participants (or subjects) in the form of living human beings, human beings who have recently died (cadavers, human remains and body parts), embryos and fetuses, human tissue and bodily fluids, and also human data and records (not necessarily medical) in any form.

Ethics implies moral code of conduct defining right and wrong and thereby guiding behavior in civil society. Bioethics has been defined as "A systemic study of the moral dimensions including moral vision, decision, conduct and policy of the life sciences and health care, employing a variety of ethical methodologies in an interdisciplinary setting." In other words, biomedical research ethics refers to the moral principles guiding biomedical research, from its conception through to completion and publication of the results. It may also concern issues beyond publication, for example, the archiving of data and physical samples.

Many advances in medicine have had a dark past, with research subjects being denied basic information and rights during research. The prevailing view through much of history has been that „It is not cruel to inflict on a few, criminal sufferings which may benefit multitudes of innocent people through all centuries". During the Nuremberg „Doctors" trial" following the second World War, atrocities committed on Jews and other prisoners of war by Nazi doctors, in the name of science, brought the world face-to-face with the brutality possible in biomedical research. The collective conscience of humanity culminated in the Nuremberg Code of 1947 which overturned the age-old view and sought to regulate the research process, balancing the interests of science with the interests of study participants. In 1964, the 18th World Medical Assembly held at Helsinki promulgated the Declaration of Helsinki. While reinforcing the two core principles of the need to protect research participants from harm and obtaining informed consent, it introduced new elements to facilitate the research governance process. Article 13 of this declaration introduced the concept of an Ethics Committee (EC), which must be independent of the investigator, the sponsor or any other kind of undue influence, to oversee the ethical aspects of research.

**ESIC-PGIMSR JOKA Research Oversight Committee (Institutional Ethics Committee for biomedical research involving human participants) [Registration No. ECR/743/Inst/WB/2015]**

| No.  | Name                        | Designation  | Gender | Role  |
|------|-----------------------------|--|--------|---|
| 1.   | Prof. Pradip Kumar Mitra    | Professor  | Male   | Chairman                                      |
| 2.   | Prof. Joydeb Roychowdhury   | Dean   | Male   | Member, Clinician                             |
| 3.   | Dr. S.K.Choudhury           | Medical Superintendent                             |        | Member  |
| 4.   | Prof. Soumya Chakraborty    | HOD, Anatomy,                                      | Female | Member Secretary ,<br>Basic Medical Scientist |
| 5.   | Prof Soumyendu Sengupta     | HOD, Biochemistry ,                                | Male   | Member, Basic Medical<br>Scientist            |
| 6.   | Prof. Tapas Kumar Mondal    | HOD, Medicine,                                     | MAle   | Member ,Clinician                             |
| 7.   | Prof. Nalini Arora          | HOD, OBG, Member                                   | Female | Member, Clinician                             |
| 8.   | Prof. Sonia Gon             | HOD, Pathology                                     | Female | Member, Basic Medical<br>Scientist            |
| 9.   | Prof. Rekha Dutta           | HOD, Community Medicine                            | Female | Member, Basic Medical<br>Scientist            |
| 10.  | Prof. Dr. Joya Ghosh        | Prof. Biochemistry                                 | Female | Member, Basic Medical<br>Scientist            |
| 11.  | Prof. Dr. Pandurang         | Prof. Physiology                                   | Male   | Member, Basic Medical<br>Scientist            |
| 12.  | Dr. Kaushik Mukhopadhyay    | Assistant Prof., Dept. of<br>Pharmacology          | Male   | Member, Basic Medical<br>Scientist            |
| 13.. | K.C. Basumatari             | DD (F), ESIC Hopital & ODC<br>(EZ), Joka, Kolkata, | Male   | Member, Lay person                            |
| 14.  | Prof. T. K. Chatterjee      | Panel Lawyer of ESIC<br>Kolkata,                   | Male   | Legal expert                                  |
| 15.  | Ms. Tulika Das              |  | Female | Social Scientist                              |
| 16.  | Rev.Chittaranjan Chatterjee |  | Male   | Theologian                                    |

The concerned Member Secretary may be contacted for details prior to submission of project proposals.

## Pharmacovigilance Committee

The availability of a wide range of medicines (drugs) in every conceivable therapeutic category has revolutionized the practice of therapeutics over the past few decades. Drugs are also now being widely used for diagnostic and prophylactic purposes.

Unfortunately, every medicine comes with its own hazards and it is rightfully said that „There are no safe drugs – only safe doctors“. Adverse drug reactions (ADRs) have been defined as „Response to a drug that is noxious and unintended and that occurs at doses used in humans for prophylaxis, diagnosis, or therapy of disease, or for the modification of physiologic function“. In the practice of medicine, every physician, in spite of the utmost care in the selection and dosing of medicines, is likely to encounter ADRs. Detection, analysis and reporting of ADRs, with a view to minimizing their adverse impact and generating awareness and strategies for their prevention, is pharmacovigilance.

Pharmacovigilance on a local, national and global basis can make drug therapy and new drugs safer. All ADR reports from the institute are submitted online to the National Coordinating Center for NPVP-India, which is located at the Indian Pharmacopoeia Commission, Ghaziabad. From here reports are screened and transmitted to the headquarters of the global pharmacovigilance programme being run by the World Health Organization that is located at Uppsala in Sweden (Uppsala Monitoring Center). Pharmacovigilance activities in ESIC Medical & PGIMSR are coordinated by the Department of Pharmacology and monitored by the following committee:

| No. | Name                      | Designation                             |
|-----|---------------------------|---|
| 1.  | Prof. Joydeb Roychowdhury | Dean, Chairman                          |
| 2.  | Prof. Sonali Mukherjee    | HOD, Pharmacology, Member Secretary     |
| 3.  | Prof. Tapas Kumar Mandal  | HOD, Medicine                           |
| 4.  | Prof. Sumanta Ghosh       | HOD, Surgery                            |
| 5.  | Prof. Nalini Arora        | HOD, OBGY                               |
| 6.  | Prof. Sanjoy Keskhar      | HOD, Orthopedics                        |
| 7.  | Prof. Prabal Pal          | HOD, Dentistry                          |
| 8.  | Dr. Niloy Kumar Das       | Assoc. Prof., Pediatrics                |
| 9.  | Dr. Jyotirmoy Kirtania    | Assoc. Prof., Anesthesia                |
| 10. | Dr. Chandan Chatterjee    | Assoc. Prof., Pharmacology              |
| 11. | Dr. Niharika Ranjan Lal   | Asst. prof., Dermatology- Nodal officer |

Reports on ADRs are welcome from all physicians, nurses, pharmacists personnel and students in these disciplines. The form provided in Annex 3 has to be filled in and submitted. The Department of Pharmacology may be contacted for obtaining forms (good photocopies acceptable) and submitting reports.

## Academic Council/ Research Cell

Research is an integral part of academics. To oversee the research activities in the college, the research cell is constituted, which consists of the following members.

| No. | Name                      | Designation                            |
|-----|---------------------------|--|
| 1   | Prof. Joydeb Roychowdhury | Dean, Chairman                         |
| 2.  | Prof. Nalini Arora        | HOD, OBGY, Member Secretary            |
| 3.  | Prof. S. Sengupta         | HOD, Biochemistry, Member              |
| 4.  | Prof. Sonia Gon           | HOD, Pathology, Member                 |
| 5.  | Prof. Tapas Kumar Mondal  | HOD, Medicine, Member                  |
| 6.  | Prof. Tarun Kumar Das     | HOD, Physiology, Member                |
| 7.  | Prof. Dr. Pandurang       | Prof, Physiology, Member               |
| 8.  | Prof. Dr. Rekha Dutta     | HOD, Community Medicine, Member        |
| 9.  | Prof. Sonali Mukherjee:   | HOD, Pharmacology, Member              |
| 10. | Prof. Soumya Chakraborty  | HOD, Anatomy, Member                   |
| 11. | Dr. Siladri Sengupta      | Assoc Professor, Surgery, Member       |
| 12. | Dr. Kaushik Mukhopadhyay  | Assistant Prof., Dept. of Pharmacology |

**College Website Committee**

College website is the way of reach people staying at a distance and also for many it is the first impression about the college. Hence to look after the college website, the website committee has been constituted as follows

| No | Name                     | Designation                                 |
|----|--------------------------|---|
| 1. | Dr. Jyotirmoy Kirtania   | Assoc. Prof Anesthesia                      |
| 2. | Prof. Dr. Joya Ghosh     | Prof. Biochemistry                          |
| 3. | Prof. Dr. Biswabina Ray  | Prof. Anatomy (on diversion)                |
| 4. | Dr. Kaushik Mukhopadhyay | Assistant prof, Pharmacology                |
| 5. | Dr. Mriganka Baruah      | Assistant Professor, Biochemistry           |
| 6. | Dr. Omkar Prasad Baidya  | Assistant Professor,                        |
| 7. | Dr. Nitish kalra         | Assist.Prof. dentistry                      |
| 5. | Dr Bibhash Saha Dalal    | Assistant Prof , Pathology                  |
| 6. | Dr. Sudipa Biswas        | Associate Professor, Anatomy                |
| 7. | Mr. Vijay Kumar          | Principal's Personal secretary, dean office |

**MCI Committee**

Medical Council of India is the apex body looking after the smooth running of the medical colleges. To look after appropriate enrichment of the college, the MCI committee has been constituted.

| Serial No | Name                         | Designation                         |
|-----------|------------------------------|-------------------------------------|
| 1.        | Dr. Sumanta Kumar Ghosh:     | HOD, Surgery                        |
| 2.        | Prof. Dr. Soumya Chakraborty | HOD, Anatomy                        |
| 3.        | Prof.Dr. Biswabina Ray       | Prof. Anatomy(On diversion)         |
| 4.        | Prof. Subhabrata Sengupta    | HOD, ENT                            |
| 5.        | Dr. Jyotirmoy Kirtania       | Assoc. prof. Anesthesiology         |
| 3.        | Dr. Mriganka Baruah          | Asistant Prof. Biochemistry         |
| 4.        | Dr. Omkar Prasad Baidya      | Assistant Professor, Physiology     |
| 5.        | Dr. Shamshad Ahmad           | Assistant Prof., Community Medicine |
| 6.        | Dr. Chandan Chatterjee       | Associate Professor, pharmacology   |
| 6.        | Dr. Suranjali Sharma         | Assistant Prof , Anatomy            |
| 7.        | Mr. Sudipta Das              | Stenographer, Dean Office           |
| 8.        | Mr. Rakesh Roshan Lakra      | UDC, Dean Office                    |



## ESICMC-PGIMSR, JOKA Central Library

The ESICMC-PGIMSR, JOKA Central Library is located on the 2<sup>nd</sup> floor of Medical College Building and is intended for use by the students and faculty of the Institute as well as the medical staff of ESIC Medical College building. The total number of books in its collection currently stands at approximately 6808 with 1500 titles. As of now 40 national and 20 international 20 are subscribed and approximately 7 theses in various disciplines. The wifi internet facility in the library caters to the needs of faculty and students.

### Library rules

1. The library is available as a reading room for teachers and students during the hours of 9a.m.-7 p.m.. daily on weekdays and up to 9a.m.-4p.m. on Saturdays.
2. Anyone other than students and teachers of this Institute may obtain reading privileges for a period not exceeding one year by applying to the Director of the Institute.
3. Books and Journals borrowed for use in the Reading Room must be returned 15 minutes before the closing time. No issue will be made during the last 15 minutes.
4. Lending and borrowing time for MBBS and Postgraduate students is between 9 a.m.-4 p.m. Saturday.
5. A Lending and Reading Card is generally issued to each student for use of library books. The card will remain valid for the full academic session. The card needs to be produced every time a book is borrowed.
6. The Library Cards are not transferable. In case of loss of the Card, the Librarian must be informed in writing.
7. Faculty (teaching staff) may borrow two (2) books at a time for 1 month only. Students may borrow two books at a time for 15 days only. The book may be reissued only once if there are no reservations for it in the meantime.
8. Food and beverages are not allowed inside the library.
9. Journals and Thesis volumes cannot be issued.
10. Books issued to the various departments for special use or for Departmental Libraries will remain under safe custody of the Head of the Department who will be responsible for them.
11. Any loss or damage to a book must be immediately and formally brought to the notice of the Librarian who will accept a replacement or the current cost of the book.
12. Library Clearance Certificates are issued by the Librarian against written application for the same, after verification to the satisfaction of the Librarian.

These rules are subject to changes as per the decisions of the College Council.

## Rules and Regulations for First Professional MBBS course

1. The period of study for the first Professional MBBS course will consist of two semesters, each of six months duration. The first semester will ordinarily commence in the month of August, and the second semester, in the month of February next year. The first Professional MBBS Examination will be held at the end of the 2nd semester.
2. There shall be two University examinations in a year – one regular and one supplementary first professional MBBS Examination. The regular First Professional Examination will be completed and the results published within mid-September of each year. The supplementary examination will be held ordinarily not earlier than six (6) weeks, but not later than six months, after the publication of the results of the regular examination.
3. Eligibility Criteria of the Students for appearing in the 1st Professional MBBS examination - An undergraduate medical student who has fulfilled the following conditions may be admitted to the First Professional MBBS Examination of this University.
  - (a) That he/she has completed the age of 17 years on or before 31st December of the year of his/her admission to a college of medicine affiliated to this University for conduction of MBBS course of studies.
  - (b) That he/she has passed the pre-medical / I.Sc. / 10+2 years Higher Secondary Examination, or an equivalent examination from a recognized Board/ University with Physics, Chemistry, Biological Sciences, English, and a Vernacular subject.
  - (c) That he/she has compulsorily attended a regular course of study for the prescribed period in a college of Medicine affiliated to this University. A minimum of 75% attendance in all the subjects is compulsory (including attendance in non-lecture classes like demonstration, practical, tutorial, seminar, group discussion etc.). The attendance has to be certified by the Principal/ Director of the affiliated institution. There is no provision of condonation of shortage of attendance (due to any cause whatsoever), or of appearance as non-collegiate candidate under any circumstances, whatsoever.
  - (d) Students not being allowed to sit for the regular examination due to shortage of attendance may be permitted to attend special classes to make good the shortage in attendance to enable such candidates to appear in the supplementary examination, if they already possess an attendance of 60% or above. No such proposal of making good shortage in attendance before next supplementary examination will, however, be entertained for permission to sit for the same regular examination. Candidates having attendance of less than 60% will have to start the classes afresh for the next regular examination of next batch.
  - (e) For being admitted to the regular or supplementary examination, each candidate shall send his/her application in the prescribed form to the Controller of Examination along with the fee as will be prescribed by the University from time to time. The applications forwarded by the Head of the Institution of the affiliated college shall have to reach the University at least 3 weeks before the commencement of the University examination. The examination fee of any regular/ supplementary examination shall not be refunded or carried forward in cases of failure or non-appearance of a candidate in the particular regular/ supplementary examination.
  - (f) That he has fulfilled the criteria as laid down in Para 7 below.
4.
  - (a) Candidates appearing for the regular 1<sup>st</sup> Professional MBBS examination shall appear in theory, oral and practical examination in the examination center located in his/her own college/institution. However, during supplementary examination the number of centers for supplementary examination will depend upon the number of candidates appearing for the supplementary examination and the geographical location of the institution.
  - (b) Preferably not more that 30 candidates will be examined on any day for practical and oral examination in a particular subject.
5.
  - (a) For smooth conduction of the theory, oral and practical examination, there will be one Center-in-charge for the 1<sup>st</sup> Professional MBBS examination in each of the centers. The Center-in-charge will preferably be a senior teacher not below the rank of Assoc. Prof. He/ she will not participate as an internal examiner of any subject in the 1<sup>st</sup> Professional MBBS examination. The Center-in-charge and the office of the Principal/Director of the Institution shall be responsible for smooth conduction of the examination.

- (b) For coordination of the whole examination programme there will be one Chairman-cum- internal examiner for each subject of the 1st Professional MBBS examination in each of the centers. He/she will preferably be the senior-most teacher amongst the internal examiners. He/she will make the necessary arrangements for smooth conduction of the oral and practical examination as well as for evaluation of the theory papers in that subject. The Center-in-charge, after collecting all the related documents within 2 days of completion of the oral and practical examination from the Chairpersons of different subjects, will arrange to send all the papers to the University within 4 days after completion of the 1st Professional MBBS Examination. The University will also appoint a scrutinizer for each subject in each center. He/she will usually be a junior teacher of the same department.
- (c) The Chairman shall have statutory power of last minute selection of examiners (both external and internal), in consultation with Observer/Dean/Center-in-charge, if any exigency arises.

## 6. Examiners

- i) The examiners in any subject should preferably hold at least a rank of Reader/Associate Professor and must have at least five years teaching experience in a faculty position in recognized medical colleges after having acquired the post graduate degree in the subject from a recognized University. However, in cases of exigency an Assistant Professor with at least five years teaching experience after acquiring P.G. Degree may be appointed as an examiner.
- ii) If the total number of candidates in a University examination in a subject in a center exceeds 100, the University, for smooth conduction of the examination in that subject will appoint five examiners. Otherwise, the University will appoint four examiners for each subject in a center. Two of those examiners shall preferably be from recognized Universities outside the State of West Bengal (*Externals*). In case of five examiners in a subject one will be preferably from an institution of the state, other than the institution in which the center is located. A reserve list of external and internal examiners shall be kept to meet any exigency that may crop up. Such list of examiners may include recently retired senior teachers of any recognized university.
- iii) When five examiners are appointed for a center, one of the internal examiners will be spared from checking the answer scripts of the theory papers by the Chairman of the subject.
- iv) The internal examiner in a subject shall not accept external examiner-ship for a college outside the State from which external examiner is appointed in his/her college in his/her subject.
- v) The external examiners for any particular center may remain the same maximum for a period of two consecutive years. Thereafter he/she may be reappointed after an interval of two years.
- vi) In each subject, the theory question papers will be invited from the Chairman of all the centers. In each subject, there will also be a Moderator, who will preferably be a senior faculty member of any recognized medical college from states other than West Bengal and will be selected by the Board of Studies of the University. The Moderator will moderate the question paper. In case of exigency, the University may appoint a retired Professor as available in West Bengal as moderator.
- vii) The university may appoint suitable observers/University Representatives from among the senior teachers to obtain direct knowledge about the conduction of the Theoretical, Practical and Oral Examination in each Center.

## 7. Internal Assessment

- i) It should be based on continuous evaluation (may be daily/ weekly/ fortnightly/ monthly/ bimonthly) of the students or otherwise, as well as periodical examinations. Nature of continuous assessment may be through item cards/oral/practical/short questions/multiple choice question test, problem-solving exercise etc., after completion of a system/part/item. Each test shall be objectively assessed and recorded. There shall be two periodical internal assessment examinations. Considering that the classes for the 1st Professional MBBS will start by the 1st week of August, the first Periodical Internal Assessment Examination will be held in the 1st & 2nd week of January and the second one in the 1st & 2nd week of June. All the classes will remain suspended during these weeks for holding the Periodical IA examinations. Fifty (50) percent of the marks in internal assessment, earmarked for theoretical and practical components shall be allotted for continuous

assessment based on day-to-day performance recorded properly for the purpose in item cards or otherwise. Marks secured in the two periodical assessment examinations will count for awarding rest 50% marks in each component of internal assessment. Marks awarded in theory and oral parts, and the practical parts of the continuous assessment and periodical assessment examination are to be shown separately as follows.

A. Continuous Assessment:

| Part / Item | Oral              |                | Practical         |                |
|-------------|-------------------|----------------|-------------------|----------------|
|             | Full Marks        | Marks Obtained | Full Marks        | Marks Obtained |
|             |                   |                |                   |                |
|             |                   |                |                   |                |
| Total       |                   |                |                   |                |
|             | 25% of I.A. Marks | A              | 25% of I.A. Marks | B              |

B. Periodical Assessment:

| Periodical examination at the end of each semester | Theory            |                | Practical         |                |
|--|-------------------|----------------|-------------------|----------------|
|  | Full Marks        | Marks Obtained | Full Marks        | Marks Obtained |
| First  |                   |                |                   |                |
| Second   |                   |                |                   |                |
| Total  |                   |                |                   |                |
|  | 25% of I.A. Marks | C              | 25% of I.A. Marks | D              |

C. Computation of the Internal Assessment marks:

| Sl. No. | Name of the Candidate | WBUHS Registration No. | Theory     |                | Oral       |                | Practical  |                | Total Marks | % |
|---------|-----------------------|------------------------|------------|----------------|------------|----------------|------------|----------------|-------------|---|
|         |                       |                        | Full Marks | Marks Obtained | Full Marks | Marks Obtained | Full Marks | Marks Obtained |             |   |
|         |                       |                        |            | C              |            | A              |            | B + D          | A+B+C+D     |   |
|         |                       |                        |            |                |            |                |            |                |             |   |
|         |                       |                        |            |                |            |                |            |                |             |   |

- ii) The marks of the internal assessment so computed shall be sent to the University in duplicate by the Head of the concerned Department through the Head of the Institution at least 3 weeks before the commencement of the concerned University examination
- iii) A student, in order to be eligible to sit for the University examination, must secure at least 35% of the marks fixed for internal assessment in all the three subjects separately. Internal assessment marks of a student in one or more failed subjects in the University examination shall remain to his/her credit for consideration in the subsequent University examination in that subject. However, if a student fails to pass in both the regular and the supplementary examinations of First Prof. M.B.B.S. course, on the basis of his/her prayer, the candidate may be allowed to reappear in the periodical assessment examinations along with the next batch of students. Permission for reappearing in the periodical assessment examination will be issued by the Principal/Director of the affiliated institution. Once allowed to reappear in the periodical assessment examinations along with the next batch of students the corresponding earlier marks of the candidate will be cancelled. Marks computed on the basis of continuous assessment and the new periodical assessment examinations of the candidate shall be final for the next regular and supplementary examination of that particular professional course. If a student fails to pass in both the regular and the supplementary examinations of 1st Prof M.B.B.S. course he or she will not be allowed to join the classes of Second Professional examination until he/she passes all subjects of First Professional examination.
- iv) The Principal / Director of the concerned institution shall publish lists of successful and unsuccessful candidates in internal assessment without declaring the actual marks awarded.

- v) Students being disallowed to sit for the regular 1st professional examination due to failure in obtaining 35% marks in the internal assessment in a subject shall be permitted by the Principal/Director of the affiliated institution to attend special classes and another internal assessment examination shall be arranged before the next supplementary University examination to give them opportunity to acquire eligibility to sit for the supplementary examination.
- vi) A candidate will be allowed to appear at the regular or supplementary examination on payment of prescribed examination fee after the Principal/Director of the concerned Medical College and the Controller of Examinations are satisfied in respect of his/ her eligibility to sit for the examination.

## 8. MBBS (First Professional) Examination

- (a) Theory papers of each subject for 1st Professional MBBS examination will be prepared by a set of examiners and moderated by a Moderator. Theory question will be of short structured essay type, short notes and clinical problem-oriented. The examination will generally be completed in the shortest possible time avoiding unnecessary gaps.
- (b) Full marks in each of the three subjects (Anatomy, Physiology, and Biochemistry) of the First Professional MBBS Examination : 200. The break-up of the marks in each of the subjects is as follows:

|  |           |
|--|-----------|
| Written (50 x 2 papers)                        | 100 marks |
| Oral / Viva                                    | 20 marks  |
| Practical                                      | 40 marks  |
| Internal Assessment (Theory 20 + Practical 20) | 40 marks  |
| Total  | 200 marks |

- (c) Answer to each question should be given by the candidates in a separate answer script. To ensure maximum possible uniformity during assessment only one examiner will examine all the answer scripts of the same question in the same center.
- (d) Practical/clinical examination will be conducted in the practical room/dissection room/laboratory room/hospital wards of the concerned medical college. Objective will be to assess proficiency in skills, conduct of experiment, interpretation of data, and interpretation of common investigation data, X-rays, identification of specimens/instruments etc. and to assess proficiency to make logical conclusion.
- (e) Viva/oral will be held in two tables with minimum two examiners in each table. Instruments, equipments, chemicals, specimens, charts etc. as will be required in different subjects, will be used for taking oral/viva examinations.

## 9. Result

- i) All the examiners will be jointly responsible for the result of all parts of the examination. The decision of the Chairman after consultation with the Center-in charge will be final in the case of exigency.
- ii) The University shall publish the list of successful Pass and Honors candidates preferably within 3 weeks after the last date of the 1<sup>st</sup> Professional MBBS Examination. Each candidate shall receive a mark sheet showing the marks secured by him/her in each subject.
  - i) In order to pass a subject, a candidate must obtain separately (a) a minimum of 50% in Theory including Orals; (b) a minimum of 50% in Practicals and (c) a minimum of 50% in aggregate.  
For Example, in order to pass in Anatomy, a student will have to have minimum 60 marks out of 120 in theory including orals, 20 marks out of 40 in practicals and minimum of 100 marks out of 200 in aggregate.
- iv) Credit of passed subject(s) will be retained; i.e., an unsuccessful candidate who has passed in one or more subjects is not required to appear in that/ those subject(s).
- v) A candidate who has failed to pass in any of the subjects in the 1<sup>st</sup> Professional MBBS Examination shall be declared unsuccessful in the Examination and shall not be allowed to join the 2<sup>nd</sup> Professional Course until he/she passes in all the subjects of the 1<sup>st</sup> Professional Course.
- vi) There shall be no separate examination for Honors. A candidate securing 75% marks in aggregate in a subject shall be declared to have secured Honors in the subject(s) provided that he/she has passed in all the subjects for the 1<sup>st</sup> Professional Examination in the first attempt.

- vii) Notwithstanding anything contained anywhere in the relevant regulations it is provided that the candidate, who, in spite of obtaining 55% or above marks in the aggregate in a subject, became unsuccessful in a compartment of that subject for 5 or less marks shall be awarded up to five marks in that particular compartment after deducting the same from other compartment(s) of that subject, provided that he/ she has passed in all other subjects in the same examination.
- viii) There will be no provision for review of the answer scripts or any part of the examination in any circumstances.

### Available teaching hours (Approximate)

| Discipline         | Lecture hours          | Practical/<br>Demonstration Hours | Dissection Hours      | Total available Hours | MCI prescribed hours |
|--------------------|------------------------|-----------------------------------|-----------------------|-----------------------|----------------------|
| Anatomy            | 5 h/week x 37 = 185    | 3 h/week x 37 = 111               | 10 h/ week x 37 = 370 | 666                   | 650                  |
| Physiology         | 10.5 h/week x 37 = 389 | 3 h/week x 37 = 111               |                       | 500                   | 480                  |
| Biochemistry       | 3.5 h/week x 37 = 129  | 3 h/week x 37 = 111               |                       | 241                   | 240                  |
| Community Medicine | 2 hr/week x 37 = 74    |                                   |                       | 74                    | 60                   |

### Scheme for first Professional MBBS University Examination in Anatomy

#### A. Written Paper

**Paper I** - Superior extremity, inferior extremity, abdomen & pelvis with relevant embryology & histology, and, general embryology.

**Paper II** - Thorax, head & neck, central nervous system, bulbous oculi, with relevant embryology & histology, genetics, and, general anatomy.

*The four questions in each theory paper will preferably have the following distribution of marks.*

*Q. 1) One long essay type question (out of two) consisting of 2-4 small segments. Marks for each segment will be indicated separately. Marks may be 12*

*Q. 2) Two short essay type question (out of three), each consisting of 2-3 small segments and marks for each segment will be indicated separately. Marks may be 14 (7 x 2)*

*Q. 3) Four short notes (out of five).*

*Marks may be 12 (3 x 4)*

*Q. 4) Four short clinically oriented explanatory notes.*

*Marks may 12 (3 x 4)*

Answer to each question should be given by the candidates in a separate answer book. Only one examiner will examine all the answer scripts to the same question of the paper in that center. Each examiner will examine answers to one question of each paper.

#### B. Oral/Viva

Total marks 20

- i) For questions on Osteology with general anatomy

- 8+2 marks

*(2 bones from appendicular skeleton & 2 bones from axial skeleton)*

- ii) For questions on Viscera with Embryology

- 8+2 marks

*(4 specimens- one each from upper abdomen, Pelvis/thorax, Head & neck, Brain/ Eyeball).*

#### C. Practicals

Total marks 40

**Window dissection** 10 marks

**Identification** 12 marks

(5 structures, one each from each part of the body + one cross section from any part of the body are to be given for identifications with flag marks and they will be same for the whole batch of the same day - 1/2 mark for each identification and three questions on each item valued at 1/2 each)

**Surface marking** 6 marks (line drawing: 4 marks + point: 2 marks)

**Radiology** 3 marks

**Histology** 9 marks (5 stained slides for identification: 1 mark each + 1 special slide: 4 marks)

**D. Internal assessment**

Total marks 40

Distribution of internal assessment marks

1. Continuous Day-to-day Assessment

| Parts of the Body | ORAL       |                | PRACTICAL  |                |
|-------------------|------------|----------------|------------|----------------|
|                   | Full Marks | Marks Obtained | Full Marks | Marks Obtained |
| Sup. Extremity    | 15         |                | 15         |                |
| Inf. Extremity    | 15         |                | 15         |                |
| Abdomen           | 25         |                | 25         |                |
| Thorax            | 10         |                | 10         |                |
| Head & Neck       | 20         |                | 20         |                |
| CNS & Eyeball     | 15         |                | 15         |                |
| Total             | 100        |                | 100        |                |
| 10% of the Marks  | 10         | A              | 10         | B              |

NB: At time of completion of a part, the marks for different items should offered after considering overall performance & regularity in attendance

2. Periodical Internal Assessment Examination

|                        | WRITTEN    |                | PRACTICAL  |                |
|------------------------|------------|----------------|------------|----------------|
|                        | Full Marks | Marks Obtained | Full Marks | Marks Obtained |
| At End of 1st Semester | 50         |                | 50         |                |
| At End of 2nd Semester | 50         |                | 50         |                |
| Total                  | 100        |                | 100        |                |
| 10% of the marks       | 10         | C              | 10         | D              |

**Scheme for first Professional MBBS University Examination in Physiology**

**A. Written Paper**

**Paper I** - 1. General physiology 2. Nerve muscle physiology 3. Blood 4. Gastrointestinal system 5. Respiratory system 6. Cardiovascular system.

**Paper II** - 1. Endocrine system 2. Reproductive system 3. Excretory system 4. Nervous system 5. Special senses

*The four questions in each theory paper will preferably have the following distribution of marks.*

*Q. 1) One long essay type question (out of two) consisting of 2-4 small segments. Marks for each segment will be indicated separately. Marks may be 12*

*Q. 2) Two short essay type question (out of three), each consisting of 2-3 small segments and marks for each segment will be indicated separately. Marks may be 14 (7 x 2)*

*Q. 3) Four short notes (out of five). Marks may be 12 (3 x 4)*

*Q. 4) Four short clinically oriented explanatory notes. Marks may 12 (3 x 4)*

Answer to each question should be given by the candidates in a separate answer book. Only one examiner will examine all the answer scripts to the same question of the paper in that center. Each examiner will examine answers to one question of each paper.

**B. Oral/Viva**

Total marks 20

- i) Topics of 1st paper - 10 marks
- ii) Topics of 2nd paper - 10 marks

**C. Practicals**

Total marks 40

- Hematology** 12 marks
- Instruments** 12 marks  
(Mammalian experiment, Dale's bath, Long extension kymograph, ECG, Spirometer, BMR, Charts, BMR)
- Human physiology** 12 marks (line drawing: 4 marks + point: 2 marks)
- Amphibian experiment** 4 marks (instruments and charts)

**D. Internal assessment**

Total marks 40

## Scheme for first Professional MBBS University Examination in Biochemistry

### A. Written Paper

**Paper I** - Cell and sub cellular organelle, plasma membrane: signal transfer, chemistry of carbohydrates, lipid, protein, nucleic acid, enzymes, acid, base and buffer (including maintenance of acid base balance in the body), Biological oxidation, osmosis, Colloid immunological techniques (RIA, ELISP Separation technique, Instrumentation), Functional proteins (e.g. Hemoglobin, myoglobin, collagen, alpha keratin, fibrin and elastase).

**Paper II** – Metabolism of carbohydrates, lipids, proteins, purine, pyrimidine and minerals. Vitamins, Nucleic acid and protein biosynthesis. Regulation of gene expression, oncogenes and tumorigenesis. Recombinant DNA technology. Xenobiotics and their metabolism. Molecular endocrinology. Heme synthesis and degradation. Functional tests.

*The four questions in each theory paper will preferably have the following distribution of marks.*

*Q. 1) One long essay type question (out of two) consisting of 2-4 small segments. Marks for each segment will be indicated separately. Marks may be 12*

*Q. 2) Two short essay type question (out of three), each consisting of 2-3 small segments and marks for each segment will be indicated separately. Marks may be 14 (7 x 2)*

*Q. 3) Four short notes (out of five). Marks may be 12 (3 x 4)*

*Q. 4) Four short clinically oriented explanatory notes / analytical type questions. Marks may be 12 (3 x 4)*

Answer to each question should be given by the candidates in a separate answer book. Only one examiner will examine all the answer scripts to the same question of the paper in that center. Each examiner will examine answers to one question of each paper.

### B. Oral/Viva

Total marks 20

- |                         |            |
|-------------------------|------------|
| i) Topics of 1st paper  | – 10 marks |
| ii) Topics of 2nd paper | – 10 marks |

Distribution of viva stations

Table 1: Cell structure, cell membrane, signal transmission, mechanism of hormone action, biological oxidation, oxidative phosphorylation, enzymes – classification, mode of action, allosteric enzyme, clinical enzymes, functional proteins – hemoglobin, myoglobin, collagen

Table 2: Medical physics - isotopes, radioisotopes, radioimmunoassay, ELISA, chromatography, colorimetry, electrophoresis, acid, base, buffer, acid-base balance, pH of body fluids, colloids, osmosis, transport – active, passive, facilitated, endocytosis, Digestion and absorption of foodstuffs

Table 3: Purines, pyrimidines, proteins, vitamins, inorganic elements- their chemistry, normal and abnormal metabolism

Table 4: Molecular biology, genetics, gene expression, DNA & RNA synthesis, polymerase chain reaction, mutation, genetic disorders of metabolism

Table 5: Carbohydrates and lipids – their chemistry, normal and abnormal metabolism

Note: If there are four examiners topics of Tables 4 and 5 will be clubbed.

### C. Practicals

Total marks 40

- |                                   |            |
|-----------------------------------|------------|
| <b>Interpretation of charts</b>   | – 10 marks |
| <b>Urine analysis</b>             | – 10 marks |
| <b>Titration</b>                  | – 10 marks |
| <b>Clinical material analysis</b> | – 10 marks |

### D. Internal assessment marks

Total marks 40



## Rules and Regulations for Second Professional MBBS course

1. The period of study for the 2nd Professional MBBS course will consist of three semesters, each of six months duration. The third semester will ordinarily commence in the month of August, and the fourth semester, in the month of February next year and the fifth one in the month of August next. The 2nd Professional MBBS Examination will be held at the end of the 5th semester and should ordinarily be completed by 31st January. During this period study of para-clinical and clinical subjects shall continue concurrently.
2. There shall be two University examinations – one regular and one supplementary second professional MBBS Examination. The regular second Professional Examination will be completed and the results published within February of each year. The supplementary examination will be held ordinarily not earlier than six weeks and not later than six months, after the publication of the result of the regular examination.
3. Eligibility criteria of the students for appearing in the 2nd Professional MBBS examination – An undergraduate medical student who has fulfilled the following conditions may be eligible to sit for the Second Professional MBBS Examination of this University.
  - (a) He/she has compulsorily attended a certified regular course of study for the prescribed period in a Medical College affiliated to this University. A minimum of 75% attendance in all the subjects (including attendance in non-lecture classes like demonstration, practical, tutorial, seminar, group discussion etc.) is required for the purpose. The attendance has to be certified by the Principal/Director of the affiliated institution. There is no provision of condonation of shortage of attendance (due to any cause whatsoever), or of appearance as non-collegiate candidate under any circumstances, whatsoever.
  - (b) Students not being allowed to sit for the regular examination due to shortage of attendance may be permitted to attend special classes to make good the shortage in attendance, if they already possess an attendance of 60% or above, to enable such candidates to appear in the supplementary examination. No such proposal of making good shortage in attendance will, however, be entertained for permission to sit for the same regular examination. Candidates having attendance of less than 60% will have to start the classes afresh for the next regular examination of next batch.
  - (c) For being admitted to the regular or supplementary examination, each candidate shall send his/her application in the prescribed format to the Controller of Examinations along with the fee as may be prescribed by the University from time to time. The applications forwarded by the Head of the Institution of the affiliated college shall reach the University at least 3 weeks before the commencement of the University examination. The examination fee of any regular/supplementary examination shall not be refunded or carried forward in cases of failure or non-appearance of a candidate in the particular regular/supplementary examination.
  - (d) That he has fulfilled the criteria as laid down in Para 7 below.
4.
  - (a) Candidates appearing for the regular 2nd Professional MBBS examination shall appear in theory, oral and practical examination in the examination center located in his/her own college/institution. However, during supplementary examination the number of centers for supplementary examination will depend upon the number of unsuccessful candidates appearing for the examination and the geographical location of the institution.
  - (b) Preferably not more than 30 candidates will be examined on any day for practical and oral in a particular subject in a center.
5.
  - (a) For smooth conduction of the theory, oral and practical examination, there will be one Center-in-Charge for the 2nd Professional MBBS examination in each of the centers. The center-in-charge will preferably be a senior teacher not below the rank of Associate Professor. He / She will not participate as an internal examiner of any subject in the 2nd Professional MBBS examination. The Center-in-charge and the office of the Principal/Director of the Institution shall be responsible for smooth conduction of the examination.
  - (b) For co-ordination of the whole examination program there will be one Chairman-cum-internal examiner for each subject of the 2nd Professional MBBS examination in each of the centers. He/she will preferably be the senior-most teacher amongst the internal examiners. He/she will make the necessary arrangements for smooth conduction of the oral and practical examination as well as for evaluation of the theory papers in that subject. Compilation of the assessed marks in theory, oral and practical examination will be done by the

Chairman in respect of all the candidates in his/her center in that subject. The Center-in-charge, after collecting all the related documents within 2 days of completion of the oral and practical examination from the Chairpersons of different subjects, will arrange to send all the papers to the University within 4 days after completion of the 2nd Professional MBBS Examination. The University will also appoint a scrutinizer for each subject in each center. He/she will usually be a junior teacher of the same department.

- (c) The Chairman shall have statutory power of last minute selection of examiners (both external and internal), in consultation with Observer/Dean/Center in charge, if any exigency arises.

## 6. Examiners

- i) The examiners in any subject should preferably hold a rank not below that of Reader/Associate Professor and must have at least five years teaching experience in a faculty position in a recognized Medical College after having acquired the post graduate degree on the subject from a recognized University. However, in cases of exigency, when suitable teachers as specified above are not available for appointment as examiners, an Assistant Professor with five years or more teaching experience after acquiring P.G. Degree may be appointed as an examiner.
- ii) If the total number of candidates in an University examination in a subject in a center exceed 100, the University for conduction of the examination in that subject will appoint five examiners. If the total number of candidates in the subject is 100 or less in a center, the University for conduction of the examination in that subject will appoint four examiners. Two of the examiners for a subject in a center shall preferably be invited from any recognized Medical College outside the State of West Bengal (Externals). When five examiners are appointed in a subject in any center, two of the examiners (Internals) will be from the same institution where the examination center is located, and one will be from a different institution under the West Bengal University of Health Sciences. However, the above principle may not be adhered to in exigency. A reserve list of external and internal examiners shall be kept to meet any exigency that may crop up due to failure of any examiner to turn up for conduction of the examination. The examiners to be selected from the reserve list should be such that they can be contacted within a short period. Such list of examiners may include recently retired senior teachers of any recognized university.
- iii) When five examiners are appointed for a center, one of the internal examiners will be spared from checking the answer scripts of the theory papers by the Chairman of the subject.
- iv) The internal examiner in a subject shall not accept external examiner-ship for a college outside the State from which external examiner is appointed in his/her college in his/her subject.
- v) The external examiners for any particular center may remain the same preferably for not more than two consecutive years. Thereafter he/she may be reappointed after an interval of two years.
- vi) In each subject, the theory question papers will be invited from the Chairman of all the centers. In each subject, there will also be a Moderator, who will preferably be a senior faculty member of any recognized medical college from states other than West Bengal and will be selected by the Board of Studies of the University. The Moderator will moderate the question paper. In case of exigency, the University may appoint a retired Professor as available in West Bengal as moderator.
- vii) The university may appoint suitable observers/University Representatives from among the senior teachers to obtain direct knowledge about the conduction of the Theoretical, Practical and Oral Examination in each Center.

## 7. Internal Assessment

It should be based on continuous evaluation (may be daily/weekly/fortnightly/monthly/bimonthly) of the students or otherwise, as well as periodical examinations. Nature of continuous assessment may be through item cards / oral / practical / short questions / multiple choice questions / problem-solving exercise etc., after completion of a system/part/item. Each test shall be objectively assessed and recorded. There shall be three periodical internal assessment examinations. Considering that the classes for the 2nd Professional MBBS will start by the 1st week of August, the first Periodical Internal Assessment Examination will be held in the 3rd & 4th week of January, the second one in the 3rd & 4th week of July and the third one in the 3rd & 4th week of November. All the classes will remain suspended during these weeks for holding the Periodical IA examinations. Fifty (50) percent of the marks in internal assessment, earmarked for theoretical and practical components shall be allotted for continuous assessment based on day-to-day performance recorded properly for the purpose in item cards or otherwise. Marks secured in the three periodical assessment examinations will count for awarding rest 50% marks in each component of internal

assessment. Marks awarded in theory and oral parts, and the practical parts of the continuous assessment and periodical assessment examination are to be shown separately as follows.

**A. Continuous Assessment:**

| Part / Item  | Oral              |                | Practical         |                |
|--------------|-------------------|----------------|-------------------|----------------|
|              | Full Marks        | Marks Obtained | Full Marks        | Marks Obtained |
|              |                   |                |                   |                |
|              |                   |                |                   |                |
| <b>Total</b> |                   |                |                   |                |
|              | 25% of I.A. Marks | A              | 25% of I.A. Marks | B              |

**B. Periodical Assessment:**

| Periodical examination at the end of each semester | Theory            |                | Practical         |                |
|--|-------------------|----------------|-------------------|----------------|
|  | Full Marks        | Marks Obtained | Full Marks        | Marks Obtained |
| Third  |                   |                |                   |                |
| Fourth   |                   |                |                   |                |
| Fifth  |                   |                |                   |                |
| <b>Total</b>                                       |                   |                |                   |                |
|  | 25% of I.A. Marks | C              | 25% of I.A. Marks | D              |

**C. Computation of the Internal Assessment Marks:**

| Sl. No. | Name of the Candidate | WBUHS Registration No. | Theory     |                | Oral       |                | Practical  |                | Total Marks | % |
|---------|-----------------------|------------------------|------------|----------------|------------|----------------|------------|----------------|-------------|---|
|         |                       |                        | Full Marks | Marks Obtained | Full Marks | Marks Obtained | Full Marks | Marks Obtained |             |   |
|         |                       |                        |            | C              |            | A              |            | B + D          | A+B+C+D     |   |
|         |                       |                        |            |                |            |                |            |                |             |   |
|         |                       |                        |            |                |            |                |            |                |             |   |

- i) The marks of the internal assessment so computed shall be sent to the University in duplicate by the Head of the concerned Department through the Head of the Institution at least 3 weeks before the commencement of the concerned University examination.
- ii) A student, in order to be eligible to sit for the University examination, must secure at least 35% of the marks fixed for internal assessment in all the three subjects separately. Internal assessment marks of a student in one or more failed subjects in the University examination shall remain to his/her credit for consideration in the subsequent University examination in that subject. However, if a student fails to pass in both the regular and the supplementary examinations of Second Prof. M.B.B.S. course, on the basis of his/her prayer, the candidate may be allowed to reappear in the last two periodical assessment examinations along with the next batch of students. Permission for reappearing in the periodical assessment examinations will be issued by the Principal/Director of the affiliated institution. Once allowed to reappear in the periodical assessment examinations along with the next batch of students the corresponding earlier IA marks of the last two periodical assessment examinations of the candidate will be cancelled. Marks computed on the basis of continuous assessment and the periodical assessment examinations of the candidate shall be final for the next regular and supplementary examination of that particular professional course. If a student fails to pass in both the regular and the supplementary examinations of 2nd Prof M.B.B.S. course he or she will not be allowed to appear in Third Professional Part I examination until he/she passes all subjects of Second Professional examination.
- iii) The Principal / Director of the respective Medical College shall publish the list of successful and unsuccessful candidates in internal assessment without declaring the actual marks awarded.
- iv) Students not being able to appear or not being allowed to sit for the regular 2nd professional examination due to failure to obtain 35% marks in the internal assessment shall be permitted by the Principal / Director of the affiliated institution to undertake special classes for them and another periodical internal assessment examination shall be taken before the supplementary University examination to give them opportunity to acquire eligibility to sit for the supplementary examination.

- v) A candidate will be allowed to appear at the regular or supplementary examination on payment of prescribed examination fee after the Principal/Director of the concerned Medical College and the Controller of Examinations are satisfied in respect of his/ her eligibility to sit for the examination.

## 8. Examinations

- (a) Theory papers of each subject for 2nd Professional MBBS examination will be prepared by a set of examiners and moderated by a Moderator. Theory question will be of short structured essay type, short notes and clinical problem-oriented. Full marks in the subjects of Pathology, Microbiology & Pharmacology of the Second Professional MBBS Examination will be 150, whereas it will be 100 in case of Forensic Medicine including Toxicology. The examination will generally be completed in the shortest possible time. The break-up of the marks in each of the subjects are detailed below:

| Pathology, Microbiology & Pharmacology |             | Forensic & State Medicine |             |
|--|-------------|---------------------------|-------------|
| Written Papers (40x2 papers)           | = 80 marks  | Written Paper (1 paper)   | = 40 marks  |
| Oral / Viva                            | = 15 marks  | Oral/Viva                 | = 10 marks  |
| Practical                              | = 25 marks  | Practical                 | = 30 marks  |
| Internal Assessment                    | = 30 marks  | Internal Assessment       | = 20 marks  |
| Total marks                            | = 150 marks | Total marks               | = 100 marks |

- (b) Answer to each question should be given by the candidates in a separate answer script. To ensure maximum possible uniformity during assessment only one examiner will examine all the answer scripts of the same question in the same center.
- (c) Practical/clinical examination will be conducted in the practical room/laboratory room/hospital wards of the concerned medical college. Objective will be to assess proficiency in skills, conduct of experiment, interpretation of data, and interpretation of common investigation data, X-rays, identification of specimens/instruments/weapons etc. and to assess proficiency to make logical conclusion.
- (d) Viva/oral will be held in two tables with minimum two examiners in each table. Instruments, equipments, weapons, poison & other chemicals, specimens, charts etc. as will be required in different subjects, will be used for taking oral/viva examinations.

## 9. Result

- i) All the examiners will be jointly responsible for the result of all parts of the examination. The decision of the Chairman after consultation with the Center-in charge will be final in the case of exigency.
- ii) The University shall publish the list of successful Pass and Honors candidates preferably within 3 weeks after completion of the 2nd Professional MBBS Examination. Each candidate shall receive a mark sheet showing the marks secured by him/her in each subject.
- iii) In order to pass a subject, a candidate must obtain separately (a) a minimum of 50% in Theory including Orals; (b) a minimum of 50% in Practicals and (c) a minimum of 50% in aggregate.

For Example, in order to pass in Forensic Medicine, a student will have to have minimum 25 marks out of 50 in theory including orals, 15 marks out of 30 in practicals and minimum of 50 marks out of 100 in aggregate.

- iv) Credit of passed subject(s) will be retained; i.e., an unsuccessful candidate who has passed in one or more subjects is not required to appear in that/ those subject(s).
- v) candidate who has failed in any of the subjects in the 2nd Professional MBBS Examination shall be declared failed in the Second Professional Examination and he/she will have to clear all the subjects of 2nd Professional MBBS Examination for being eligible to appear for the 3rd Professional Part - I Examinations.
- vi) There shall be no separate examination for Honors. A candidate securing 75% marks in aggregate in a subject shall be declared to have secured Honors in the subject(s) provided that he/she has passed in all the subjects for the 2nd Professional Examination in the first attempt.
- vii) Notwithstanding anything contained anywhere in the relevant regulations it is provided that the candidate who, though obtained 55% or above marks in the aggregate in a subject, had failed in a compartment of that subject in the 2nd Professional MBBS Examination for a shortage of 5 or less marks, but passed in all

other subjects in the same examination shall be awarded those five or less marks after deducting the same from other compartments of that subject.

viii) Review of the answer scripts or any part of the examination will not be allowed under any circumstances.

### Proposed break-up of 2nd Professional MBBS course

| Particulars                               | Break-up of weeks                | Total weeks |
|---|----------------------------------|-------------|
| For three internal assessment Exams       | 3 I.A. exams x 2 weeks each      | 6           |
| For preparation for 2nd MBBS Exam         | 4 weeks                          | 4           |
| For the Calendar holidays                 | 4 weeks /year x 1½ year          | 6           |
| For the local holidays                    |                                  | 2           |
| For Puja vacation                         | 1 ½ week/year x 2 year           | 3           |
| For 2nd Prof. MBBS Exam.                  | Theory 1 week + Practical 2 week | 3           |
| For publication of results                |                                  | 2           |
| No. of weeks not available for teaching   |                                  | 26          |
| Total calendar weeks                      | 52 weeks/year x 1½ year          | 78          |
| <b>Total weeks available for teaching</b> | <b>78 weeks – 26 weeks</b>       | <b>52</b>   |

### Proposed routine 2nd Professional MBBS course

| Day   | 8 – 9 am               | 9 – 11 am    | 11 – 12 noon          | 12 noon – 1 pm          | 1 – 2 pm | 2 – 4 pm                |
|-------|------------------------|--------------|-----------------------|-------------------------|----------|-------------------------|
| Mon   | Clinical Lecture       | Ward Clinics | Para-Clinical Lecture | Para-Clinical Lecture   | Recess   | Para-clinical Practical |
| Tues  | Community Med. Lecture | Ward Clinics | Para-Clinical Lecture | Para-Clinical Lecture   | Recess   | Para-clinical Practical |
| Wed   | Clinical Lecture       | Ward Clinics | Para-Clinical Lecture | Para-Clinical Lecture   | Recess   | Para-clinical Practical |
| Thurs | Community Med. Lecture | Ward Clinics | Para-Clinical Lecture | Para-Clinical Lecture   | Recess   | Para-clinical Practical |
| Fri   | Clinical Lecture       | Ward Clinics | Para-Clinical Lecture | Para-Clinical Lecture   | Recess   | Para-clinical Practical |
| Sat   | Clinical Lecture       | Ward Clinics | Para-Clinical Lecture | Para-clinical Practical |          |                         |

### Available teaching hours in the 2nd Professional MBBS course (Approximate)

| Discipline   | Lecture Hours                           | Practical/ Demonstration Hours          | Total available Hours |
|--------------|---|---|-----------------------|
| Patho        | 3 hr/wk x 52 = 156<br>1 hr/wk X 26 = 26 | 2 hr/week x 52=104<br>1hr/week x 52=52  | 338                   |
| Micro        | 3 hr/wk x 52 = 156                      | 2 hr/week x 52=104<br>1hr./week x 52=52 | 312                   |
| Pharma       | 3 hr/wk x 52 =156<br>1 hr/wk X 26 = 26  | 2 hr/week x 52=104<br>1 hr/week x 52=52 | 338                   |
| FSM          | 1 hr/wk x 52 =52                        | 1 hr/wk. X 52 = 52                      | 104                   |
| Com. Med.    | 2 hr/wk x 52 =104                       | 2 hr/wk x 52 = 104                      | 208                   |
| Clinical     | 4 hr/wk x 52 =208                       | 12 hr/wk x 52 = 624                     | 832                   |
| <b>Total</b> | <b>884</b>                              | <b>1248</b>                             | <b>2132</b>           |

**Rules and Regulations for Third Professional MBBS course**

**1. Training period and Time Distribution**

The period of study for the Third Professional MBBS course will consist of seven semesters (each of six months duration commencing ordinarily in the months of August and February of each year) after passing the 1st Professional MBBS examination from this University or from a recognized University. Along with continuation of the studies in Community Medicine the clinical subjects of the third Professional MBBS course shall be taught concurrently with the para-clinical subjects during the 3rd, 4th and 5th semesters of the MBBS course of studies.

The clinical subjects taught during the 7 semesters of the third Professional MBBS course are: Community Medicine, Otorhinolaryngology, Ophthalmology, Medicine and its allied specialties, Surgery and its allied specialties, Obstetrics & Gynecology including Family medicine & Family Welfare Planning and Pediatric Medicine.

**2. Prescribed Teaching hours**

Besides clinical postings, teaching hours shall be divided for didactic lectures, demonstrations, seminars, group discussions etc., in various subjects. Didactic lectures should not exceed one third of the time schedule and the remaining two thirds should include practical / clinical training and group discussion.

A. Training in Medicine (and its allied specialties) will include:

- 1) General Medicine and infectious diseases 300 hrs.
- 2) Tuberculosis and Chest diseases 20 hrs.
- 3) Dermatology and Sexually transmitted diseases 30 hrs.
- 4) Psychiatry 20 hrs.
- 5) Radiodiagnosis 20 Hrs

B. Training in Surgery (and its allied specialties) will include:

- 1) General Surgery 300 hrs.
- 2) Orthopedics including Physical medicine and Rehabilitation 100 hrs.
- 3) Dentistry 10 hrs.
- 4) Anesthesia 20 hrs.
- 5) Radiotherapy 10 Hrs

C. Training in Obstetrics and Gynecology including Family Welfare 300 hrs.

D. Training in Pediatric Medicine 100 hrs.

E. Training in Ophthalmology (Eye) 100 hrs.

F. Training in Otorhinolaryngology (ENT) 70 hrs.

G. Training in Community Medicine will be for a period of 250 hrs excluding 60 hrs spent during First Professional MBBS course.

**Subject-wise distribution of different Clinical Postings (in weeks)**

| Subject                            | 3rd Semester | 4th Semester | 5th Semester | 6th Semester | 7th Semester | 8th Semester | 9th Semester | Total      |
|------------------------------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|------------|
| Gen. Medicine                      | 6            |              | 4            |              | 4            | 6            | 6            | 26         |
| Pediatrics                         |              | 2            |              | 2            | 2            | 4            |              | 10         |
| TB & Chest                         |              | 2            |              |              |              |              |              | 2          |
| Skin & STD                         |              | 2            |              | 2            |              | 2            |              | 6          |
| Psychiatry                         |              |              | 2            |              |              |              |              | 2          |
| Radiology                          |              |              |              |              | 2            |              |              | 2          |
| Gen. Surgery                       | 6            |              | 4            |              | 4            | 6            | 6            | 26         |
| Orthopedics with Physioth. & Rehab |              |              | 4            | 4            |              |              | 2            | 10         |
| Eye                                |              | 4            |              | 4            | 2            |              |              | 10         |
| ENT                                |              | 4            |              | 4            |              |              |              | 8          |
| ObGy                               | 2            | 4            | 4            |              | 4            | 4            | 6            | 24         |
| Com. Medicine                      | 4            | 4            |              | 4            |              |              |              | 12         |
| Casualty                           |              |              |              | 2            |              |              |              | 2          |
| Dentistry                          |              |              |              |              | 2            |              |              | 2          |
| <b>TOTAL</b>                       | <b>18</b>    | <b>22</b>    | <b>18</b>    | <b>22</b>    | <b>20</b>    | <b>22</b>    | <b>20</b>    | <b>142</b> |

At the start of 3rd Semester, classes on clinical methods in Medicine as well as in Surgery will be arranged for a period of 2 weeks in each subject.

### 3. Eligibility Criteria

An undergraduate medical student who has fulfilled the following conditions may be admitted to the Third Professional MBBS Examination of this University.

- (a) That he / she has compulsorily attended a certified regular course of study for the prescribed period in a Medical college affiliated to this University. A minimum of 75% attendance in all the subjects is compulsory (including attendance in non-lecture classes like demonstration, practical/ clinical, tutorial, seminar, group discussion etc.). The attendance has to be certified by the Principal/Director of the affiliated institution. There is no provision of condonation of shortage of attendance (due to any cause whatsoever), or of appearance as non-collegiate candidate under any circumstances, whatsoever.
  - (b) Students not being allowed to sit for the regular examination due to shortage of attendance may be permitted to attend special classes to make good the shortage in attendance to enable such candidates to appear in the supplementary examination, if they already possess an attendance of 60% or above. No such proposal of making good shortage in attendance before next supplementary examination will, however, be entertained for permission to sit for the same regular examination. Candidates having attendance of less than 60% will have to start the classes afresh for the next regular examination of next batch.
  - (c) For being admitted to the regular or supplementary examination, each candidate shall send his/ her application in the prescribed form to the Controller of Examination along with the fee as will be prescribed by the University from time to time. The applications forwarded by the Head of the Institution of the affiliated college shall have to reach the University at least 3 weeks before the commencement of the University examination. The examination fee of any regular/ supplementary examination shall not be refunded or carried forward in cases of failure or non-appearance of a candidate in the particular regular/ supplementary examination.
  - (d) An unsuccessful candidate in any subject of the 2nd Professional MBBS examination shall not be allowed to appear in the Third Professional MBBS (Part I) examination. A Pass in the Third Professional MBBS (Part-I) Examination is mandatory for being eligible to appear in the Third Professional MBBS (Part II) Examination.
  - (e) That he/ she has fulfilled the criteria as laid down in Para 7 below.
4. (a) Candidates appearing for the regular Third Professional MBBS examination shall appear in theory, oral and practical/clinical examination in the examination centers located in his/her own college /institution. However, during supplementary examination the number of centers for supplementary examination will depend upon the number of candidates appearing for the supplementary examination and the geographical location of the institution.
    - (b) Generally not more than 30 candidates will be examined on any day for practical/clinical and oral examination in a particular subject.
  5. (a) For smooth conduction of the Theory, Oral and Practical/Clinical examination, there will be one Centre-in-charge for the Third Professional MBBS examination in each Examination Centre. The Centre-in-charge will preferably be a senior teacher not below the rank of Assoc. Prof. and will not participate as an internal examiner of any subject in the Third Professional MBBS Examination. The Centre-in-charge and the office of the Principal/Director of the institution shall be jointly responsible for smooth conduction of the examinations.
    - (b) For coordination of the whole examination programme there will be one Chairman-cum-internal examiner for each subject of the 1st Professional MBBS examination in each of the centers. He/she will preferably be the senior most teacher amongst the internal examiners. He/she will make the necessary arrangements for smooth conduction of the oral and practical examination as well as for evaluation of the theory papers in that subject. The Center-in-charge, after collecting all the related documents within 2 days of completion of the oral and practical examination from the Chairpersons of different subjects, will arrange to send all the papers to the University within 4 days after completion of the 1st Professional MBBS Examination. The University will also appoint a scrutinizer for each subject in each center. He/she will usually be a junior teacher of the same department.
    - (c) The Chairman shall have statutory power of last minute selection of examiners (both external and internal), in consultation with observer/V.C./Dean/Controller of Examination, if any exigency arises.

## 6. Examiners

- i) The examiners in any subject should preferably hold at least a rank of Reader/Associate Professor and must have at least five years teaching experience in a faculty position in recognized medical colleges after having acquired the post graduate degree in the subject from a recognized University. However, in cases of exigency an Assistant Professor with at least five years teaching experience after acquiring P.G. Degree may be appointed as an examiner.
- ii) If the total number of candidates in a University examination in a subject in a center exceeds 100, the University, for smooth conduction of the examination in that subject will appoint five examiners. Otherwise, the University will appoint four examiners for each subject in a center. Two of those examiners shall preferably be from recognized Universities outside the State of West Bengal (Externals). In case of five examiners in a subject one will be preferably from an institution of the state, other than the institution in which the center is located. A reserve list of external and internal examiners shall be kept to meet any exigency that may crop up. Such list of examiners may include recently retired senior teachers of any recognized university.
- iii) When five examiners are appointed for a center, one of the internal examiners will be spared from checking the answer scripts of the theory papers by the Chairman of the subject.
- iv) The internal examiner in a subject shall not accept external examiner-ship for a college outside the State from which external examiner is appointed in his/her college in his/her subject.
- v) The external examiners for any particular center may remain the same maximum for a period of two consecutive years. Thereafter he/she may be reappointed after an interval of two years.
- vi) In each subject, the theory question papers will be invited from the Chairman of all the centers. In each subject, there will also be a Moderator, who will preferably be a senior faculty member of any recognized medical college from states other than West Bengal and will be selected by the Board of Studies of the University. The Moderator will moderate the question paper. In case of exigency, the University may appoint a retired Professor as available in West Bengal as moderator.
- vii) The university may appoint suitable observers/University Representatives from among the senior teachers to obtain direct knowledge about the conduction of the Theoretical, Practical and Oral Examination in each Center.

## 7. Internal Assessment

Continuous assessment shall be made by:

- i) Assessment based on day to day performance recorded properly for the purpose in item cards, preparation for seminars, clinical case presentation etc. Day to day records shall be given due importance
- ii) Regular periodical examinations shall be conducted throughout the course. The questions of such periodical examinations will be set by the teachers of the concerned teaching institution. However the general guidelines will be as follows- (a) the examinations should be held at the end of the semester and should be on the learning units / lessons taught in that/ those semester(s). (b) The oral, practical/ clinical examination should be based on the item cards prepared for that subject for that/ those semester(s).

End term institutional assessment: One end term institutional assessment examination, in conformity with the final University examination, including theoretical, oral and practical/ clinical parts, should be held as follows:

- (a) for Third Professional Part 1 Examination – during the 7th semester,
- (b) for Third Professional Part II Examination – during the 9th semester.

50% of the marks in internal assessment shall be allotted for Continuous assessment. Award of rest 50% marks of internal assessment shall be by the End term institutional assessment. Again, of the marks of each of the above two compartments, 50% shall be for the Theory and /or oral components and the rest shall be for practical/ clinical component.

Marks obtained in the theoretical/oral part through continuous assessment and on the basis of end term institutional assessment examination are to be added together to compute total marks secured in the theoretical/oral component of the internal assessment. Similarly, total marks in practical/clinical part should also be calculated taking into account the marks of continuous assessment (through item card/part clearance) and marks secured in the practical/clinical part of the end term institutional assessment examination together. Marks awarded in theory and oral parts, and the practical/ clinical parts of the continuous assessment and end term institutional assessment examinations are to be shown separately.



The marks of the internal assessment so computed and rounded off to the nearest whole number shall be sent in duplicate to the Controller of Examinations in a sealed cover by the Head of the concerned Department through the Head of the affiliated institution at least 3 weeks before the commencement of the concerned University examination.

A student, in order to be eligible to sit for the university examination, must secure at least 35% of the marks fixed for internal assessment in each of the subjects of Third Professional Part I or Part II separately. Internal assessment marks of a student in one or more failed subjects in the University examination shall remain to his/her credit for consideration in the subsequent University examination in that subject. However, if a student fails to pass in both the regular and the supplementary examinations of Third Professional MBBS Part I or Part II course, on the basis of his/her prayer, the candidate may be allowed to reappear in the end term institutional assessment examination along with the next batch of students. Permission for reappearing in the internal assessment examination will be issued by the Principal/Director of the affiliated institution. Once allowed to reappear in the end term institutional assessment examination along with the next batch of students the earlier IA marks of the candidate will be cancelled. Marks computed on the basis of continuous assessment and the new end term institutional assessment examination of the candidate shall be final for the next regular and supplementary examination of that particular professional course.

The Principal/Director of the respective affiliated institution shall publish the list of successful and unsuccessful candidates in internal assessment without declaring the actual marks awarded.

Students being disallowed to sit for the regular Third professional examination (either part) due to failure in obtaining 35% marks in the internal assessment in a subject shall be permitted by the Principal/director of the affiliated institution to attend special classes and another end term institutional assessment examination shall be arranged before the next supplementary University examination to give them opportunity to acquire eligibility to sit for the supplementary examination.

Proforma for computation of the Internal Assessment marks

**A. Continuous Assessment:**

| Part / Item  | Oral              |                | Practical         |                |
|--------------|-------------------|----------------|-------------------|----------------|
|              | Full Marks        | Marks Obtained | Full Marks        | Marks Obtained |
|              |                   |                |                   |                |
|              |                   |                |                   |                |
| <b>Total</b> |                   |                |                   |                |
|              | 25% of I.A. Marks | A              | 25% of I.A. Marks | B              |

**B. End Term Institutional Assessment Examination (Third Professional MBBS Examination: Part I/ Part II):**

| Theory + Oral     |                | Practical + Clinical |                |
|-------------------|----------------|----------------------|----------------|
| Full Marks        | Marks Obtained | Full Marks           | Marks Obtained |
|                   |                |                      |                |
|                   |                |                      |                |
|                   |                |                      |                |
| 25% of I.A. Marks | C              | 25% of I.A. Marks    | D              |

**C. Computation of the Internal Assessment marks:**

| Sl. No. | Name of the Candidate | WBUHS Registration No. | Theory     |                | Oral       |                | Practical  |                | Total Marks | % |
|---------|-----------------------|------------------------|------------|----------------|------------|----------------|------------|----------------|-------------|---|
|         |                       |                        | Full Marks | Marks Obtained | Full Marks | Marks Obtained | Full Marks | Marks Obtained |             |   |
|         |                       |                        |            | C              |            | A              |            | B + D          | A+B+C+D     |   |
|         |                       |                        |            |                |            |                |            |                |             |   |
|         |                       |                        |            |                |            |                |            |                |             |   |

## 8. MBBS Third Professional Examination

There shall be two University examinations in a year – one regular and one supplementary for each of Part I and Part II of the Third Professional MBBS Examination. The regular Third Professional MBBS (Part I) Examination will ordinarily be held in the month of January at the end of 7th Semester; and the regular Third Professional MBBS (Part II) Examination will be held in the month of January at the end of 9th Semester and the results will ordinarily be published by the end of January. The supplementary examinations will be held ordinarily not earlier than 4 (Four) weeks, but not later than six months, after the publication of the results of the regular examination.

- (a) Theory Papers – Theory question papers of each subject for Third Professional MBBS examination will be prepared by a set of examiners and moderated by a Moderator. Theory questions will be of short structured essay type/ short note type/ problem-oriented type etc. Distribution of marks in different subjects of the Third Professional MBBS examination will be as follows:

| Subjects | Theory | Oral | Clinical/Practical | I.A. | Total |
|----------|--------|------|--------------------|------|-------|
|----------|--------|------|--------------------|------|-------|

### Third Professional MBBS Part I

|  |                  |    |    |       |     |
|--|------------------|----|----|-------|-----|
| 1) <b>Ophthalmology</b><br>(Theory paper should contain one question on pre-clinical and para-clinical aspects carrying 10 marks)  | 40 (1 paper)     | 10 | 30 | 10+10 | 100 |
| 2) <b>Otorhinolaryngology</b><br>(Theory paper should contain one question on pre-clinical and para-clinical aspects carrying 10 marks)  | 40 (1 paper)     | 10 | 30 | 10+10 | 100 |
| 3) <b>Community Medicine</b><br>(Theory to includes problem solving, applied aspects of management at the primary level , essential drugs, occupational diseases, rehabilitation and sociology. The practical part includes project evaluation.) | 60+60 (2 papers) | 10 | 30 | 20+20 | 200 |

### Third Professional MBBS Part II

|   |                  |    |                             |       |     |
|---|------------------|----|-----------------------------|-------|-----|
| 1) <b>Medicine</b><br>(Theory papers shall contain one question on basic sciences and allied subjects; Paper I – General Medicine, Paper II – General Medicine, Psychiatry, Dermatology & STD; Oral examination includes testing ability to interpret X-ray/ECG/ investigative data)  | 60+60 (2 papers) | 20 | 100                         | 30+30 | 300 |
| 2) <b>Surgery</b><br>(Theory papers shall contain one question on basic sciences and allied subjects; Paper-I should contain – Section 1: General Surgery and Section 2: Orthopedic Surgery; Question paper on Orthopedic Surgery shall be set and the answer-scripts shall be assessed by teachers of Orthopedics; Paper II should contain: General Surgery, Anesthesiology, Dental diseases and Radiology.) | 60+60 (2 papers) | 20 | 100                         | 30+30 | 300 |
| 3) <b>Obstetrics &amp; Gynecology</b><br>(Each theory paper shall contain one question on basic sciences and allied subjects. Paper-I will cover obstetrics including social obstetrics Paper-II will cover Gynecology. Family Welfare & Demography.)   | 40+40 (2 papers) | 30 | 50<br>[20+10 (for records)] | 20+20 | 200 |
| 4) <b>Pediatrics</b><br>(including Neonatology)<br>(The theory paper shall contain one question on basic sciences and allied subjects).   | 40 (1 paper)     | 10 | 30                          | 10+10 | 100 |

The duration of the written examinations will be 2 hours for each paper on Ophthalmology, Otorhinolaryngology, Obstetrics & Gynecology, and Pediatrics. For the others the duration will be 2½ hours.

The number of questions in each theory paper will be 4 (four). Answer to each question should be given by the candidates in a separate answer script. To ensure maximum possible uniformity during assessment only one examiner will examine all the answer scripts of the same question in that centre. Each examiner will examine answers of one question in each paper.

- (b) Practical/ Clinical - Practical/clinical examination will be conducted in the practical room/ laboratory room/hospital wards of the concerned medical college. Objective will be to assess proficiency in skills, conduct of experiment, interpretation of data, and interpretation of common investigation data, X-rays, identification of specimens/instruments etc. and to assess proficiency to make logical conclusion.
- (c) Viva/Oral – Viva/oral will be held in two tables with minimum two examiners in each table. Instruments, equipments, chemicals, specimens, charts etc. as will be required in different subjects, will be used for taking oral/viva examinations. Viva/oral will include evaluation of management approach and handling of emergencies. Evaluation should be carried out on an objective basis.

## 9. Result

- i) All the examiners will be jointly responsible for the result of all parts of the examination. The decision of the Chairman after consultation with the Center-in charge will be final in the case of exigency.
- ii) The University shall publish the list of successful Pass and Honors candidates preferably within 3 weeks after the last date of the Third Professional MBBS Examination. Each candidate shall receive a mark sheet showing the marks secured by him/her in each subject.
- iii) In order to pass a subject, a candidate must obtain separately (a) a minimum of 50% in Theory including Orals; (b) a minimum of 50% in Practicals and (c) a minimum of 50% in aggregate.  
For Example, in order to pass in the subject of Medicine, a student will have to have minimum 70 marks out of 140 in theory including orals, 50 marks out of 100 in practicals and minimum of 150 marks out of 300 in aggregate.
- iv) Credit of passed subject/subjects will be retained; i.e., an unsuccessful candidate who has passed in one or more subjects is not required to appear in that/ those subject(s).
- v) A candidate who has failed to pass in any of the subjects in the Third Professional MBBS Examination shall be declared unsuccessful in the corresponding part of the Third Professional MBBS Examination.
- vi) There shall be no separate examination for Honors. A candidate securing 75% marks in aggregate in a subject shall be declared to have secured Honors in the subject(s) provided that he/she has passed in all the subjects for the relevant part of the Third Professional Examination in the first attempt.
- vii) Notwithstanding anything contained anywhere in the relevant regulations it is provided that the candidate, who, in spite of obtaining 55% or above marks in the aggregate in a subject, became unsuccessful in a compartment of that subject for 5 or less marks shall be awarded up to five marks in that particular compartment after deducting the same from other compartment of that subject, provided that he/ she has passed in all other subjects in the same examination.
- viii) There will be no provision for review of the answer scripts or any part of the examination in any circumstances.

**The class routine for 1<sup>st</sup> Semester students of 1<sup>st</sup> Prof. MBBS Course:**

| Day              | 8 AM – 9 AM        | 9 AM – 10AM  | 10 AM – 11 AM | 11 AM -1 PM                     | 1 PM – 2 PM     | 2 PM – 4 PM (Practical) |            |              |  |
|------------------|--------------------|--------------|---------------|---------------------------------|-----------------|-------------------------|------------|--------------|--|
|                  |                    |              |               |                                 |                 | Anatomy                 | Physiology | Biochemistry |  |
| <b>Monday</b>    | Anatomy            | Physiology   | Anatomy       | Biochemistry (Tutorial)         | <b>Recess</b>   | B                       | A          | C            |  |
| <b>Tuesday</b>   | Physiology         | Biochemistry | Anatomy       | Anatomy (Tutorial)              |                 | A                       | C          | B            |  |
| <b>Wednesday</b> | Community Medicine | Biochemistry | Anatomy       | Physiology (Tutorial)           |                 | C                       | B          | A            |  |
| <b>Thursday</b>  | Physiology         | Anatomy      | Physiology    | Anatomy (Tutorial)              |                 | B                       | A          | C            |  |
| <b>Friday</b>    | Biochemistry       | Physiology   | Anatomy       | Physiology (Tutorial)           |                 | A                       | C          | B            |  |
| <b>Saturday</b>  | Community Medicine | Physiology   | Biochemistry  | <b>11 AM – 1 PM (Practical)</b> |                 |                         |            |              |  |
|                  |                    |              |               | Anatomy<br>C                    | Physiology<br>B | Biochemistry<br>A       |            |              |  |

- **Practical Classes will be decided by the respective Departments.**

The class routine for 3<sup>rd</sup> semester students of 2<sup>nd</sup> Prof MBBS course

Venue:-**Biochemistry L T**

| Day              | 8 am to 9am       | 9am to 11 am | 11 am to 12 Noon | 12 Noon to 01 pm  | 1 pm to 2 pm                           | 2pm to 4 pm<br>Practical Class |                   |                   |
|------------------|-------------------|--------------|------------------|-------------------|--|--------------------------------|-------------------|-------------------|
|                  |                   |              |                  |                   |  | Batch A                        | Batch B           | Batch C           |
| <b>Monday</b>    | Medicine          | Ward Duty    | Pathology        | Pharmacology      | <b>R<br/>E<br/>C<br/>E<br/>S<br/>S</b> | Microbiology                   | Pharmacology      | Pathology         |
| <b>Tuesday</b>   | Com. Medicine     | Ward Duty    | Pathology        | Microbiology      |  | Pharmacology                   | Pathology         | Com. Medicine     |
| <b>Wednesday</b> | Surgery           | Ward Duty    | Microbiology     | Pharmacology      |  | Pathology                      | Com. Medicine     | Forensic Medicine |
| <b>Thursday</b>  | Forensic Medicine | Ward Duty    | Pharmacology     | Pathology         |  | Com. Medicine                  | Forensic Medicine | Microbiology      |
| <b>Friday</b>    | Pathology         | Ward Duty    | Microbiology     | Com. Medicine     |  | Forensic Medicine              | Microbiology      | Pharmacology      |
| <b>Saturday</b>  | Obst. & Gynae.    | Ward Duty    | Pharmacology     | Forensic Medicine |  |                                |                   |                   |

Batch A – 1 to 33, Batch B – 34 to 66, Batch C – 67 to rest...

The class routine for 4<sup>th</sup> semester students of 2<sup>nd</sup> Prof MBBS course

Venue: -**Biochemistry L T**

| Day              | 8 AM to 9 AM       | 9 AM to 11 AM | 11 AM to 12 Noon | 12 Noon to 01 PM  | 1 PM to 2 PM<br><br>R<br>E<br>C<br>E<br>S<br>S | 2 PM to 4 PM<br>Practical Class |                   |                   |
|------------------|--------------------|---------------|------------------|-------------------|--|---------------------------------|-------------------|-------------------|
|                  |                    |               |                  |                   |  | Batch A                         | Batch B           | Batch C           |
| <b>Monday</b>    | Medicine /TB Chest | Ward Duty*    | Pathology        | Pharmacology      |  | Microbiology                    | Pharmacology      | Pathology         |
| <b>Tuesday</b>   | Eye                | Ward Duty*    | Pathology        | Microbiology      |  | Pharmacology                    | Pathology         | Com. Medicine     |
| <b>Wednesday</b> | Surgery            | Ward Duty     | Microbiology     | Pharmacology      |  | Pathology                       | Com. Medicine     | Forensic Medicine |
| <b>Thursday</b>  | Forensic Medicine  | Ward Duty     | Pharmacology     | Pathology         |  | Com. Medicine                   | Forensic Medicine | Microbiology      |
| <b>Friday</b>    | Pathology          | Ward Duty     | Microbiology     | Com. Medicine     |  | Forensic Medicine               | Microbiology      | Pharmacology      |
| <b>Saturday</b>  | Obst. & Gynae.     | Ward Duty     | Pharmacology     | Forensic Medicine |  |                                 |                   |                   |

Batch A – 1 to 33, Batch B – 34 to 66, Batch C – 67 to rest.

The class routine for 5<sup>th</sup> semester students of 2<sup>nd</sup> Prof MBBS course  
 Venue: - **Lecture Theatre-3 (Dept. of FSM)**

| Day              | 8 am to 9am   | 9am to 11 am     | 11 am to 12 Noon | 12 Noon to 01 pm | 1 pm to 2 pm                           | 2pm to 4 pm<br>Practical Class |                    |
|------------------|---------------|------------------|------------------|------------------|--|--------------------------------|--------------------|
|                  |               |                  |                  |                  |  | Batch A                        | Batch B            |
| <b>Monday</b>    | Medicine      | <b>Ward Duty</b> | Pathology        | Pharmacology     | <b>R<br/>E<br/>C<br/>E<br/>S<br/>S</b> | Pharmacology                   | Community Medicine |
| <b>Tuesday</b>   | Eye           |                  | Pathology        | Microbiology     |  | Pathology                      | Microbiology       |
| <b>Wednesday</b> | surgery       |                  | Microbiology     | Pharmacology     |  | Microbiology                   | Forensic Medicine  |
| <b>Thursday</b>  | Forensic Med. |                  | Community Med.   | Pathology        |  | Community Medicine             | Pathology          |
| <b>Friday</b>    | Pharmacology  |                  | Microbiology     | Pathology        |  | Forensic Medicine              | Pharmacology       |
| <b>Saturday</b>  | G&O           |                  | Community Med.   | Microbiology     |  |                                |                    |

Batch A – 1 to 50, Batch B – 51 to rest

The class time table for 6<sup>th</sup> semester students of 3<sup>rd</sup> Prof MBBS course.  
Venue: - **Lecture Theatre (Dept. Of FSM)**

| Day       | 9 AM to 10 AM                       | 10 AM to 12 Noon | 12 Noon to 01 PM                    | 1<br>PM<br>to<br>2<br>PM   | 2 PM to 4 PM Practical Class <b>** (Respective dept.)</b> |               |               |               |               |               |               |
|-----------|-------------------------------------|------------------|-------------------------------------|----------------------------|---|---------------|---------------|---------------|---------------|---------------|---------------|
|           |                                     |                  |                                     |                            | Date  | Batch A       | Batch B       | Batch C       | Batch D       | Batch E       | Batch F       |
| Monday    | Paediatrics                         | Ward Duty        | Com. Medicine                       | R<br>E<br>C<br>E<br>S<br>S | Feb   | Medicine      | Surgery       | G & O         | Comm. Med.    | Ophthalmology | ENT           |
| Tuesday   | Orthopaedics with Physioth. & Rehab | Ward Duty        | Surgery                             |                            | March   | Surgery       | G & O         | Comm. Med.    | ENT           | Medicine      | Ophthalmology |
| Wednesday | Community Medicine                  | Ward Duty        | Surgery                             |                            | April   | G & O         | Comm. Med.    | Ophthalmology | Medicine      | ENT           | Surgery       |
| Thursday  | Ophthalmology                       | Ward Duty        | Medicine                            |                            | May   | Comm. Med.    | ENT           | Medicine      | Ophthalmology | Surgery       | G & O         |
| Friday    | E.N.T.                              | Ward Duty        | Orthopaedics with Physioth. & Rehab |                            | June  | ENT           | Ophthalmology | Surgery       | G & O         | Comm. Med.    | Medicine      |
| Saturday  | Obst. & Gynae.                      | Ward Duty        | Dermatology                         |                            | July  | Ophthalmology | Medicine      | ENT           | Surgery       | G & O         | Comm. Med.    |

**\*\*Batch A – 1 to 17, Batch B – 18 to 34, Batch C – 35 to 51, Batch D- 52 to 68, Batch E- 69 to 85, Batch 86 to rest.**



The class routine for 7<sup>th</sup> semester students of 3<sup>rd</sup> Prof MBBS course

Venue: - **Lecture Theatre (Dept. Of FSM)**

| Day       | 9 AM to 10 AM                       | 10 AM to 12 Noon | 12 Noon to 01 PM                    | 1 PM to 2 PM<br>R<br>E<br>C<br>E<br>S<br>S | 2 PM to 4 PM Practical Class <b>**</b> (Respective dept.) |               |               |               |               |               |
|-----------|-------------------------------------|------------------|-------------------------------------|--|---|---------------|---------------|---------------|---------------|---------------|
|           |                                     |                  |                                     |  | Date  | Batch A       | Batch B       | Batch C       | Batch D       | Batch E       |
| Monday    | Paediatrics                         | Ward Duty        | Com. Medicine                       |  |   | Medicine      | Surgery       | Ophthalmology | Comm. Med.    | ENT           |
| Tuesday   | Orthopaedics with Physioth. & Rehab | Ward Duty        | Surgery                             |  |   | Surgery       | Ophthalmology | Comm. Med.    | ENT           | Medicine      |
| Wednesday | Community Medicine                  | Ward Duty        | Surgery                             |  |   | Ophthalmology | Comm. Med.    | ENT           | Medicine      | Surgery       |
| Thursday  | ENT                                 | Ward Duty        | Medicine                            |  |   | Comm. Med.    | ENT           | Medicine      | Surgery       | Ophthalmology |
| Friday    | Ophthalmology                       | Ward Duty        | Orthopaedics with Physioth. & Rehab |  |   | ENT           | Medicine      | Surgery       | Ophthalmology | Comm. Med.    |
| Saturday  | Obst. & Gynae.                      | Ward Duty        | Dermatology                         |  |   |               |               |               |               |               |

**\*\*Batch A – 1 to 20, Batch B – 21 to 40, Batch C – 41 to 60, Batch D- 61-80, Batch E- 81 to rest**

The class routine for 8<sup>th</sup> semester students of 3<sup>rd</sup> Prof MBBS course  
 Venue: - **Lecture Theatre (Dept. Of FSM)**

| Day       | 9 AM to 10 AM                       | 10 AM to 12 Noon | 12 Noon to 01 PM                    | 1 PM to 2 PM                           | 2 PM to 4 PM Practical Class <b>**</b> (Respective dept.) |             |       |             |       |             |       |             |       |             |             |
|-----------|-------------------------------------|------------------|-------------------------------------|--|---|-------------|-------|-------------|-------|-------------|-------|-------------|-------|-------------|-------------|
|           |                                     |                  |                                     |  | Date  | Batch A     |       | Batch B     |       | Batch C     |       | Batch D     |       | Batch E     |             |
| Monday    | Paediatrics                         | Ward Duty        | Medicine                            | <b>R<br/>E<br/>C<br/>E<br/>S<br/>S</b> |   | Medicine    |       | Surgery     |       | G & O       |       | Ortho       | Derma | Paediatrics |             |
| Tuesday   | Orthopaedics with Physioth. & Rehab | Ward Duty        | Surgery                             |  |   | Surgery     |       | G & O       |       | Ortho       | Derma | Paediatrics |       | Medicine    |             |
| Wednesday | Medicine                            | Ward Duty        | Medicine                            |  |   | G & O       |       | Ortho       | Derma | Paediatrics |       | Medicine    |       | Surgery     |             |
| Thursday  | Surgery                             | Ward Duty        | Obst. & Gynae.                      |  |   | Ortho       | Derma | Paediatrics |       | Medicine    |       | Surgery     |       | G & O       |             |
| Friday    | Dermatology                         | Ward Duty        | Orthopaedics with Physioth. & Rehab |  |   | Paediatrics |       | Medicine    |       | Surgery     |       | G & O       |       | Ortho       | Dermatology |
| Saturday  | Obst. & Gynae.                      | Ward Duty        | Paediatrics                         |  |   |             |       |             |       |             |       |             |       |             |             |

**\*\*Batch A – 1 to 20, Batch B – 21 to 40, Batch C – 41 to 60, Batch D- 61-80, Batch E- 81 to rest**

The class routine for 9<sup>th</sup> semester students of 3<sup>rd</sup> Prof MBBS course  
 Venue: - **Examination Hall**

| Day       | 9 AM to 10 AM                       | 10 AM to 12 Noon | 12 Noon to 01 PM                    | 1 PM to 2 PM R E C E S S | 2 PM to 4 PM Practical Class <b>**</b> (Respective dept.) |                  |                  |                  |                  |                  |
|-----------|-------------------------------------|------------------|-------------------------------------|--------------------------|---|------------------|------------------|------------------|------------------|------------------|
|           |                                     |                  |                                     |                          | Date  | Batch A          | Batch B          | Batch C          | Batch D          | Batch E          |
| Monday    | Paediatrics                         | Ward Duty        | Medicine                            |                          |   | General Medicine | Orthopaedics     | Paediatrics      | OBS & GYN        | Surgery          |
| Tuesday   | Orthopaedics with Physioth. & Rehab | Ward Duty        | Surgery                             |                          |   | Surgery          | General Medicine | Orthopaedics     | Paediatrics      | OBS & GYN        |
| Wednesday | Medicine                            | Ward Duty        | Medicine                            |                          |   | OBS & GYN        | Surgery          | General Medicine | Orthopaedics     | Paediatrics      |
| Thursday  | Surgery                             | Ward Duty        | Obst. & Gynae.                      |                          |   | Paediatrics      | OBS & GYN        | Surgery          | General Medicine | Orthopaedics     |
| Friday    | Surgery                             | Ward Duty        | Orthopaedics with Physioth. & Rehab |                          |   | Orthopaedics     | Paediatrics      | OBS & GYN        | Surgery          | General Medicine |
| Saturday  | Obst. & Gynae.                      | Ward Duty        | Paediatrics                         |                          |   |                  |                  |                  |                  |                  |

**\*\*Batch A – 1 to 20, Batch B – 21 to 40, Batch C – 41 to 60, Batch D- 61-80, Batch E- 81 to rest**

**Amendments of regulations for Professional MBBS Examinations**

The following rules were amended in the Academic Council meeting of the West Bengal University of Health Sciences dated 25.08.2006

| <b>Old Regulation for 1st Professional MBBS</b>  | <b>Amendment for 1st Professional MBBS</b>   |
|--|--|
| <p>1. Clause 3(c) of Rules and Regulations</p> <p>Minimum 75% attendance in all subjects is compulsory (including in non-lecture classes like demonstration, practical, tutorial, seminar, group discussion, etc.)</p>   | <p>1. Clause 3(c) of Rules and Regulations</p> <p>Minimum 75% attendance in all subjects is compulsory (including in non-lecture classes like demonstration, practical, tutorial, seminar, group discussion, etc.). A candidate may be allowed to appear in a subject where candidate has secured 75% attendance (including attendance in non-lecture teaching).</p> |
| <p>2. Clause 7 (i)</p> <p>There shall be two periodical Internal Assessment examinations – One in end of December/early January and the other in end of May/early June.</p>  | <p>2. Clause 7 (i)</p> <p>The last Internal Assessment examination should be completed within 2nd week of May. (To be inserted in place of the last line)</p>  |
| <p>3. Clause 8 (A)</p> <p>Duration of 3 hrs. for each paper having 50 marks.</p>   | <p>3. Clause 8 (A)</p> <p>Duration of each paper having 50 marks will be 2½ hrs. (The clause is replaced)</p>  |
| <p>4. Clause 11(vii) Result:</p> <p>Notwithstanding anything contained anywhere in the relevant regulations it is provided that the candidate who though obtained 55% or above marks in the aggregate in a subject but fails in a compartment of that subject in Professional MBBS examination for a shortage of 5 or less marks and also passes in all the other subjects in that same examination, shall be awarded with 5 marks or less after deducting the same from the other compartment of that failed subject.</p> | <p>4. Clause 11(vii) Result:</p> <p>The clause is abolished for all the Professional Examinations notwithstanding anything contained in any Regulations to the contrary.</p>   |

The issues in serial no. 1 and 4 are also valid in all other MBBS Professional Examinations.

## **Regulations for Post-graduate Degree/Diploma and Post-Doctoral courses in Modern Medicine**

### **1. GENERAL CONDITIONS TO BE OBSERVED BY POST-GRADUATE TEACHING INSTITUTIONS.**

- i) Postgraduate curriculum shall be competency based; a modular approach to the course curriculum is essential for achieving a systematic exposure to the various sub-specialties concerned with a discipline.
- ii) The learning in postgraduate programme shall be essentially autonomous and self-directed.
- iii) A combination of both formative and summative assessment is vital for the successful completion of the PG programme.
- iv) The training of PG students shall involve learning experience derived from the needs of the community. It shall, therefore, be necessary to expose the students to community-based activities.

### **2. GOALS TO BE OBSERVED BY POST-GRADUATE TEACHING INSTITUTIONS.**

The goal of postgraduate medical education shall be to produce competent specialists and Medical teachers,

- i) who shall recognize the health needs of the community, and carry out professional obligations ethically and in keeping with the objectives of the national health policy;
- ii) who shall have mastered most of the competencies, pertaining to the specialty, that are required to be practiced at the secondary and the tertiary levels of the health care delivery system;
- iii) who shall be aware of the contemporary advances and developments in the discipline concerned;
- iv) who shall have acquired a spirit of scientific inquiry and is oriented to the principles of research methodology and epidemiology; and
- v) who shall have acquired the basic skills in teaching of the medical and paramedical professionals.

### **3. GENERAL OBJECTIVES OF POST-GRADUATE TRAINING PROGRAMMES**

At the end of the postgraduate training in the discipline concerned the student shall be able to: -

- Recognize the importance of the concerned specialty in the context of the health needs of the community and the national priorities in the health sector.
- Practice the specialty concerned ethically and in step with the principles of primary health care.
- Demonstrate sufficient understanding of the basic sciences relevant to the concerned specialty.
- Identify social, economic, environmental, biological, and emotional determinants of health in a given case, and take them into account while planning therapeutic, rehabilitative, preventive, and promotive measures / strategies.
- Diagnose and manage majority of the conditions in the specialty concerned on the basis of clinical assessment and appropriately selected and conducted investigations.
- Plan and advise measures for the preventions and rehabilitation of patients suffering from disease and disability related to the specialty.
- Demonstrate skills in documentation of individual case details as well as morbidity and mortality data relevant to the assigned situation.
- Demonstrate empathy and humane approach towards patients and their families and exhibit interpersonal behavior in accordance with the societal norms and expectation.
- Play the assigned role in the implementation of national health programmes, effectively and responsibly.
- Organize and supervise the chosen / assigned health care services demonstrating adequate managerial skills in the clinic/hospital or the field situation.

- Develop skills as a self-directed learner; recognize continuing educational needs; select and use appropriate learning resources.
- Demonstrate competence in basic concepts of research methodology and epidemiology, and be able to critically analyze relevant published research literature.
- Develop skills in using educational methods and techniques as applicable to the teaching of medical / nursing students, general physicians and paramedical health workers.
- Function as an effective leader of a health team engaged in health care, research or training.

#### **4. STATEMENT OF THE COMPETENCIES**

Each discipline shall develop a list of specific competencies, which shall be defined and spelt out in clear terms. The statement of such competencies is to be brought to the notice of the trainees in the beginning of the programme so that they can direct their efforts towards the attainment of these competencies.

#### **5. COMPONENTS OF THE POST-GRADUATE CURRICULUM**

The major components of the postgraduate curriculum shall be:

- |   |                                   |
|---|-----------------------------------|
| A. Theoretical knowledge                    | B. Practical and clinical skills. |
| C. Attitudes including communication skills | D. Thesis skills                  |
| E. Training in research methodology         |                                   |

#### **6. NOMENCLATURE OF POSTGRADUATE COURSES**

The nomenclature of postgraduate / postdoctoral medical courses shall be as follows:

MD (DOCTOR OF MEDICINE) in:

Anesthesiology, Anatomy, Biochemistry, Community Medicine, Dermatology Venereology and Leprosy, General Medicine, Forensic Medicine, Microbiology, Pathology, Pediatrics, Pharmacology, Physical Medicine & Rehabilitation, Physiology, Psychiatry, Radio diagnosis, Radiotherapy, Tropical Medicine, and, Tuberculosis & Respiratory Medicine.

MS (MASTER OF SURGERY) in:

Otorhinolaryngology, General Surgery, Ophthalmology, Orthopedics, Obstetrics & Gynecology

## **7. PROFESSIONAL REGISTRATION**

Every student, selected for admission to a postgraduate / post-doctoral medical course shall possess recognized MBBS degree or equivalent qualification as specified by the Medical Council of India (MCI). He / She should have either already obtained permanent registration with MCI / West Bengal Medical Council (WBMC), or should obtain the same within one month from the date of his/her admission, failing which the admission of the candidate shall be cancelled.

Provided that in the case of a foreign national, temporary registration for the duration of the postgraduate training, restricted to the medical college / institution to which he/she is admitted for the postgraduate studies, as granted by the MCI / WBMC, shall serve the purpose.

## **8. SELECTION OF POSTGRADUATE STUDENTS**

Students for postgraduate courses shall be selected strictly on the basis of their merit, as determined by a competitive test conducted by the WBUHS and / or on the basis of merit as determined by a centralized competitive test held at the national level.

It is provided that a certain number of seats, in different courses in different disciplines, as specified from time to time by the Government, shall be kept reserved for candidates belonging to the Scheduled Caste/ Scheduled Tribe community, physically handicapped persons and also for persons sponsored by the Department of Health & Family Welfare, Government of West Bengal.

It is further provided that a candidate already in possession of a Postgraduate Medical Degree from any Indian university or recognized institute shall not be permitted to undertake a Postgraduate Diploma course in the same discipline.

## **9. PERIOD OF TRAINING**

The academic year for the post-graduate degree / diploma courses shall commence on the first working day in the first week of May; and for the post-doctoral super-specialty courses on the first working day in the first week of August every year.

The period of training for the award of various Post-graduate Degree shall be as follows:

C) Doctors of Medicine (MD) / Master of Surgery (MS)

The period of training for obtaining these degrees shall be three completed years including the period of examination.

Provided that in the case of students having a recognized two years postgraduate diploma course in the same subject, the period of training, including the period of examination, shall be two years.

D) Diploma

The period of training for obtaining a postgraduate diploma shall be two completed years including the examination period.

## **10. MIGRATION / TRANSFER OF STUDENTS FROM ONE INSTITUTION TO ANOTHER**

Migration / transfer of students undergoing any Postgraduate Degree course shall not be permitted by any authority.

## **11. TRAINING FACILITIES**

### 11.1. Staff – Faculty

A clinical department or its unit training candidates for broad or super-specialties, shall have a minimum of three full time faculty members belonging to the concerned disciplines of whom one shall be a Professor, one Associate Professor, and one Assistant Professor, possessing the qualification and experience as prescribed by the MCI.

Provided that the second or subsequent additional unit may be headed by an Associate professor.

Of these faculty members only those who possess a total of eight years teaching experience, out of which at least five years teaching experience as Assistant Professor / Lecturer gained after obtaining postgraduate degree shall be recognized as postgraduate teachers.

In each department, training candidates for super-specialties, there shall be a minimum of three faculty members with requisite postgraduate qualification and experience - One Professor, One Associate Professor and one Assistant Professor, at least two of them holding the degree of D.M./ M.Ch. in the concerned discipline.

### 11.2. Bed strength in clinical departments:

A department to be recognized for training of Post-graduate students, shall have not less than 60 (Sixty) beds each of General Medicine, General Surgery, Obstetrics and Gynecology and 30 (thirty) beds each for other disciplines for MD / MS courses [An unit shall consist of 30 beds for MD/MS]

### 11.3. Out patients’ departments:

There shall be adequate space and sufficient number of examination cubicles available in the OPD. Besides the general outpatient services, specialty clinics shall also be available for the training of post-graduate students in the relevant broad and superspecialties;

### 11.4. Laboratory Facilities and Equipments-

The institution shall have adequate laboratory facilities for the training of the postgraduate students, and such laboratories shall provide reasonable investigative facilities required and shall be regularly updated keeping in view the advancement of knowledge and technology and research requirements. The concerned department shall have adequate number of all equipments including the latest ones necessary for training, and in conformity to the laid down prescriptions of the MCI for each specialty.



## 12. NUMBER OF POSTGRADUATE STUDENTS TO BE ADMITTED

- i) The ratio of recognized postgraduate teacher to number of students to be admitted for the degree and diploma courses shall be 1:1 each for degree and diploma courses in each unit per year, to the extent that in no circumstances more than two students for degree, and one for Diploma, shall be registered in a unit in one academic year.
- ii) In case the institution is having only postgraduate diploma courses in any subject then it shall have a unit of 30 beds with two full time teachers. The ratio of number of students and recognized postgraduate teachers shall be 1:1 and in no circumstances more than three students can be admitted in a unit per year.
- iii) The requirement of units and beds as prescribed by the MCI shall not apply in the case of Postgraduate degree or diploma courses in Basic and Para-clinical departments. The ratio of recognized postgraduate teacher to students shall, however be maintained at 1:1 both at degree as well as diploma level.
- iv) The number of students to be admitted in case of postgraduate Super-specialty degree courses shall be one student per year per recognized postgraduate teacher in a department having a minimum of three faculty members (one Professor, one Associate Professor & one Assistant Professor and twenty beds. If the number of Postgraduate teachers in the unit is more than one then the number of students may be increased proportionately but not more than two in a unit per year in any circumstances. For this purpose one student should associate with one postgraduate teacher.
- v) There is no scope for admitting students midstream, even if seats are left unfilled in an academic year. No telescoping of unfilled seats of one academic year with permitted seats of the subsequent year is permitted. No variation of the schedule of the duration of the course, date of commencement of the course, and last date of admission to the course is permitted.

## 13. TRAINING PROGRAMME

- 13.1. In the courses where there are clear-cut allied disciplines, the candidates will be required to spend specified period in each such disciplines as stipulated by the University.
- 13.2. All candidates joining the postgraduate training programme shall work as full time residents during the period of training, attending not less than 80% (Eighty percent) of the training during each calendar year, and given full time responsibility, assignments and participation in all facets of the educational process. Each PGT should regularly sign the Attendance Registrar kept in the respective department.
- 13.3. No private practice of any kind by the PGTs or any other attachment to any other organization by them is allowed, even if it is honorary.
- 13.4. Each PG Trainee will be allowed leave for 15 days in each academic term.  
The academic term shall mean six months" training period. But such leave cannot be enjoyed for more than ten days in a single spell and such leave cannot be carried forward to the next academic term. However, trainees may be allowed a continuous leave up to a maximum of 3 months on maternity ground subject to the condition that she has an equal amount of accumulated leave not enjoyed earlier at her credit. Unauthorized absence from duties will be considered as an act of gross indiscipline and will be seriously dealt with since leave cannot be considered as a matter of right.
- 13.5. Every institution undertaking postgraduate training programme shall set up an Academic Committee, under the chairmanship of a senior faculty member, which shall work out the details of the training programme in each specialty in consultation with other teachers of the department and also coordinate and monitor the implementation of these training programmes.
- 13.6. All the training institutions shall prepare a planned and written up programme for each course and shall make the document available for inspection and scrutiny during visit of the University

officials and also to the external examiners to enable them to determine the training undergone by the students. The training programmes shall be updated as and when required. The structured training programme shall be strictly followed.

13.7. ~~Postgraduate students shall maintain a authorized record (log) book of the work carried out by them, and the training programme undergone during the period of training; details of surgical operations, therapeutic / investigative procedures assisted or done independently by the candidate are to be recorded regularly. The record books shall be checked and assessed by the faculty members imparting the training.~~

13.8. The colleges will arrange for proper training in basic medical sciences related to the Post-graduate and Post-doctoral courses in clinical disciplines. Thus, service of the PGT may be utilized in all the units/branches of the concerned department or in any other allied department, as will be determined by the Head of the Department/Institution.

The colleges will arrange for proper training in applied clinical disciplines related to the Post-graduate and Post-doctoral courses in basic medical sciences. Thus, service of the PGT may be utilized in all the units/branches of the concerned department or in any other allied department, as will be determined by the Head of the Department/Institution.

In all postgraduate training programmes, both clinical and basic medical sciences, emphasis is to be laid on preventive and social aspects and emergency care services, autopsies, biopsies, cytopsies, endoscopy and imaging etc. shall have to be made available for training purposes by the colleges.

13.9. Besides attending the Seminars / Journal Club / Clinico-Pathological meetings / Group Discussions or any other teaching programme arranged by the Department, all Clinical PGTs should undertake the morning and evening rounds in the indoor regularly and they must also accompany the teacher-in-charge of the unit and the RMO. They should meticulously record case history, regular progress report with clinical assessment, operative notes etc. and present the report during the unit-round.

13.10. Each clinical PGT will have to work in the Emergency Department as per roster provided to them by the appropriate authority.

13.11. The postgraduate students shall be required to regularly participate in the teaching and training programme of undergraduate students and interns of his / her own and allied disciplines.

13.12. Training in Medical Audit, Management, Health Economics, Health Information System, Basic Medical Statistics, evaluation of published research papers, human behavior studies, basic pharmacoeconomics and non-linear mathematics may be imparted to the postgraduate students.

13.13. Thesis / Dissertation shall be a part of the examination in the Degree course as a part of training in research methodology.

13.14. Implementation of the training programmes for the award of various postgraduate courses shall include the followings: -

a) For Doctor of Medicine (MD) / Master of surgery (MS) courses

In Basic Medical Sciences:

Lectures, Seminars, Journal Clubs, Group Discussions, Participation in laboratory and experimental work, Involvement in research studies in the concerned specialty and exposure to the applied aspects of the subject in clinical specialties shall constitute the training programme.

In Clinical disciplines the students will be given graded responsibility in the management and treatment of patients; Clinical Meetings, Grand rounds, research activities, teaching of under-

graduate students, Clinico-Pathological Conferences; practical training in Diagnostic procedures etc. shall constitute the training programme.

## 14. EXAMINATIONS

The examinations shall be organized on the basis of marking system to evaluate and certify candidates' level of knowledge, skill and competence at the end of the training. A candidate shall have to secure a minimum of 50% marks in each head of passing i.e.,

- i) Theory
- ii) Viva voce examination; and
- iii) Practical / clinical examination separately shall be mandatory for passing the whole examination.

The examination for MS, MD, shall be held at the end of 3 academic years (six academic terms), and for diploma courses at the end of 2 academic years (four academic terms), unless otherwise specified in the rules. For being eligible to appear in the final examination of all Post -graduate/ Post-doctoral courses a candidate has to attend 80% classes and, wherever applicable, his Thesis must be accepted. The students who are not allowed to sit for the examination may be permitted to make good the shortage of attendance and/ or to get his Thesis accepted by making necessary modifications/ additions.

### Number of candidates

The maximum number of candidates to be examined in Clinical / practical and Oral on any day shall not exceed eight for M.D./M.S degree examinations.

### Number of examinations

The university shall conduct not more than two examinations in a year, for any course/ subject, with an interval of not less than 6 weeks, but not more than 6 months.

### Examiners

- (a) All the postgraduate Examiners shall be recognized Postgraduate Teachers
- (b) For all Postgraduate Examinations, the minimum number of Examiners shall be four, out of which at least two (50%) shall be External Examiners, who shall be invited from recognized universities from other states. Two sets of internal examiners may be appointed- one for M.D./M.S. and one for diploma in the same subject.
- (c) Under exceptional circumstances, examinations may be held with 3 (three) examiners provided two of them are external, and MCI is intimated the justification of such action prior to publication of result for approval.
- (d) In the event of there being more than one centre in Kolkata, the external examiners at all the centers in the city shall be the same. Where there is more than one centre of examination, the University shall appoint a Supervisor to coordinate the examination on its behalf.
- (e) The guidelines regarding appointment of examiners shall be as follows:

No person shall be appointed as an examiner in any subject unless he fulfills the minimum requirements for recognition as a Postgraduate teacher as laid down by the Medical Council of India and has teaching experience of 8 (Eight) years as a Lecturer / Assistant Professor out of which he has not less than 5 (Five) years teaching experience after obtaining Postgraduate degree. For external examiners, he should have minimum three years experience of examiner-ship for postgraduate diploma in the concerned subject. Out of internal examiners, one examiner shall be a professor and Head of Department or Head of Department.

- There shall be at least four examiners in each subject at an examination out of which at least 50% (Fifty percent) shall be external examiners. The external examiner who fulfils the condition laid down in clause – 1 above shall ordinarily be invited from another recognized university from outside the State: provided that in exceptional circumstances examinations may be held with 3 (three) examiners if two of them are external and Medical Council of India is intimated with the justification of such examination and the result shall be published in such a case with the approval of Medical council of India.
- An external examiner may be ordinarily been appointed for not more than three years consecutively. Thereafter he may be reappointed after an interval of two years.
- The internal examiner in a subject shall not accept external examiner ship for a college from which external examiner is appointed in his subject.
- The same set of examiners shall ordinarily be responsible for the written, practical and oral parts of examination.
- In the event of there being more than one centers in one city, the external examiners at all the centers in the city shall be the same.
- There shall be a Chairman of the Board of paper – setters who shall be an external examiner and shall moderate the question papers.
- Where there is more than one centre of examination, there shall be a coordinator appointed by the University who shall supervise and Co-ordinate the examination on behalf of the University with independent authority.
- The Head of the Department of the institution concerned shall ordinarily be one of the internal examiners and the second internal examiner shall rotate after every two years.

## **Scheme of examination for Doctor of Medicine (MD) / Master of Surgery (MS) courses**

MD / MS examination, in any subject, shall consist of Thesis, Theory Papers, and Clinical / Practical and Oral examinations.

### Thesis / Dissertation

- (i) Thesis is compulsory for all the candidates admitted to M.D./ M.S. courses. Thesis will be an original work and/ or critical study analysis and comments or a suitable number of cases or materials that a candidate has personally attended to and/ or studies during the Post-graduate courses under the guidance of approved post-graduate teachers. Work for writing the Thesis is aimed at contributing to the development of a spirit of enquiry, besides exposing the candidate to the techniques of research, critical analysis, acquaintance with the latest advances in medical science and the manner of identifying and consulting available literature.
- (ii) He/ she shall have to submit 4 copies of a protocol of his/ her proposed research work in the proforma designed by the university through proper channel to the university along with a fee of Rs. 200/- within nine months, three months or 36 months of starting of the 3 years MD/ MS, 2 years MD/ MS course.
- (iii) Four copies of the Thesis, type-written or printed along with a fee of Rs. 1000/- shall have to be submitted to the University at least 6 months before the date scheduled for holding the final examination.
- (iv) The thesis shall be examined by a minimum of three examiners, appointed by the University; A candidate shall be allowed to appear for the final examination only after the acceptance of the thesis/ dissertation by at least two of the examiners.

## Theory

- (i) The theory examinations shall be held sufficiently earlier than the Clinical and Practical examination, so that the answer books can be assessed and evaluated before the start of the Clinical / Practical and Oral examination.
- (ii) A student must be eligible for appearing in the final examination, along with 80% attendance in classes (which shall include theory classes, practical / clinical classes, clinical rounds, seminars, case presentations, journal clubs, clinical meetings, clinico-pathological conferences and others).

## Clinical / Practical and Oral

- (i) Clinical examination for the subjects in Clinical Science shall be conducted to test the knowledge and competence of the candidates for undertaking independent work as a specialist / Teacher, for which candidates shall examine a minimum one long case and two short cases.
- (ii) Practical examination for the subjects in Basic Medical Sciences shall be conducted to test the knowledge and competence of the candidates for making valid and relevant observations based on the experimental / Laboratory studies and his ability to perform such studies as are relevant to his subject.
- (iii) The Oral examination shall be thorough and shall aim at assessing the candidate's knowledge and competence about the subject, investigative procedures, therapeutic technique and other aspects of the specialty, which form a part of the examination.

## Marks distribution

| <b>Theoretical examination</b> |   |                   |                   |
|--------------------------------|---|-------------------|-------------------|
|                                |   | <b>Full Marks</b> | <b>Pass Marks</b> |
| Paper I                        | Applied aspects of Basic Medical Sciences                       | 100               | 50                |
| Paper II                       | Questions in the concerned subject                              | 100               | 40                |
| Paper III                      | Questions in the concerned subject                              | 100               | 40                |
| Paper VI                       | Questions on recent advances with emphasis on concerned subject | 100               | 40                |
|                                | <b>Total for Theory</b>   | <b>400</b>        | <b>200</b>        |
|                                | <b>Viva voce (including thesis defense)</b>                     | <b>200</b>        | <b>100</b>        |
|                                | <b>Practical and/or Clinical examination</b>                    | <b>400</b>        | <b>200</b>        |
|                                | <b>Grand Total</b>  | <b>1000</b>       | <b>500</b>        |

## The West Bengal University of Health Sciences

'THE WEST BENGAL UNIVERSITY OF HEALTH SCIENCES ACT - 2002' was passed by the West Bengal Legislature and the West Bengal University of Health Sciences (WBUHS) came into existence on 1st January, 2003 at DD-36, Sector-1, Salt Lake, Kolkata – 700 064. The University has been established for the purposes of teaching, affiliation of institutes, and ensuring quality standards in instruction, training and research in Modern System of Medicine, Dental Sciences, Homoeopathic System of Medicine, Ayurvedic System of Medicine, Unani System of Medicine, Nursing, Pharmacy, and various paramedical courses like Laboratory Technology, Physiotherapy, Speech Therapy and others.

From 2003 the University took up the responsibility of undergraduate, postgraduate and postdoctoral courses in the streams mentioned above along with Ph.D. programme in these disciplines. The University has inspected and affiliated a number of new colleges throughout the state and as a result, the number of seats in MBBS, BDS, BAMS, BPT, B.Sc. (Hons.) in Nursing, M.Sc. (Nursing) and B. Pharm. courses have increased considerably. Some MD/MS seats in different subjects of Modern Medicine and Homoeopathy have also been added. New courses like Post -doctoral Certificate Course in Neuroanesthesia, Master of Physiotherapy and Master of Audiology and Speech Language Pathology have been introduced. Still others are in the pipeline.

The university has been duly recognized by the University Grants Commission, New Delhi. Its mission is to foster and develop an intellectual climate conducive to the pursuit of scholarship and excellence, either independently or jointly with other centers of excellence of higher learning.

The university's website is at < <http://www.wbuhs.ac.in>>. Administrators, faculty and students are advised to checkout this website regularly to obtain up-to-date information regarding institute affiliations, registration, fees, examinations and other matters that concern the University.

The academic calendar recommended by the University as of June 2012 is provided as an Annex.

The following application forms may be downloaded from the University website

- APPLICATION FORM FOR REGISTRATION
- APPLICATION FORM FOR MIGRATION
- APPLICATION FORM TO APPEAR IN UNIVERSITY EXAMINATION FOR UG COURSES
- APPLICATION FORM TO APPEAR IN UNIVERSITY EXAMINATION FOR PG COURSES
- APPLICATION FORM FOR RESEARCH PROPOSAL / THESIS SUBMISSION
- APPLICATION FOR REGISTRATION FOR PhD PROGRAMME

Suggested format for submission of proposals for research work leading to degree in postgraduate / superspecialty courses can also be downloaded.

The syllabus for various disciplines in the MBBS course and BPT course are available from this website. Students are advised to go through relevant information available online at this website as well as corresponding documents available on the Medical Council of India website to familiarize themselves with curricular objectives and goals.

To decide upon academic issues in various disciplines in modern medicine, the University has Board of Studies (BOS) in different disciplines (UG & PG) which have been reconstituted in accordance with the resolutions adopted in the Academic Council meeting held on 27th July, 2009. There is a single BOS for both UG and PG course of studies in all subjects. The members of BOS are included as „Heads of the Departments“ of the concerned subject of different affiliated institutions and not as an individual. Whenever there is any change in headship of a department, the new head will automatically become a member of the BOS. The Principal / Director of different affiliated institutions is also a member of the BOS of the discipline to which he / she belongs. Academic matters can be brought to the notice of the BOS of the concerned discipline by any faculty / student in writing.

# **Annexes**

**Annex 1 : Academic calendar proposed by West Bengal University of Health Sciences for MBBS and Postgraduate MD / MS / Diploma course**

| Course              | Aug                      | Sep | Oct                      | Nov                        | Dec                    | Jan | Feb              | Mar | Apr                            | May                   | Jun | Jul             |
|---------------------|--------------------------|-----|--------------------------|----------------------------|------------------------|-----|------------------|-----|--------------------------------|-----------------------|-----|-----------------|
| <b>MBBS Year 1</b>  | Course start (1st. Sem.) |     |                          |                            |                        |     | (2nd. Sem.)      |     |                                | 1st. Prof. I.A. Exam. |     | 1st Prof. Exam. |
| <b>MBBS Year 2</b>  | (3rd. Sem.)              |     | 1st. Prof. Supple. Exam. |                            |                        |     | (4th. Sem.)      |     |                                |                       |     |                 |
| <b>MBBS Year 3</b>  | (5th. Sem.)              |     |                          | 2nd. Prof. I.A. Exam       | 2nd. Prof. Exam.       |     | (6th. Sem.)      |     | 2nd. Prof. Supple. Exam.       |                       |     |                 |
| <b>MBBS Year 4</b>  | (7th. Sem.)              |     |                          | 3rd. Prof. Pt-I I.A. Exam  | 3rd. Prof. Pt-I Exam.  |     | (8th. Sem.)      |     | 3rd. Prof. Pt-I Supple. Exam.  |                       |     |                 |
| <b>MBBS Year 4½</b> | (9th. Sem.)              |     |                          | 3rd. Prof. Pt-II I.A. Exam | 3rd. Prof. Pt-II Exam. |     | Internship start |     | 3rd. Prof. Pt-II Supple. Exam. |                       |     |                 |

| Course                   | Jan                 | Feb  | Mar | Apr                    | May                              | Jun                   | Jul | Aug | Sep.                   | Oct                     | Nov                 | Dec |
|--------------------------|---------------------|--|-----|------------------------|----------------------------------|-----------------------|-----|-----|------------------------|-------------------------|---------------------|-----|
| <b>MD / MS / Diploma</b> | PG entrance         |  |     | Counseling             |                                  |                       |     |     |                        |                         |                     |     |
|                          |                     |  |     | PG admission           |                                  |                       |     |     |                        |                         |                     |     |
|                          |                     |  |     |                        | Course start<br>2nd May (Year-1) |                       |     |     |                        |                         |                     |     |
|                          | Protocol submission | Protocol evaluation<br>(By Board of Studies) |     |                        | (Year-2)                         |                       |     |     |                        |                         |                     |     |
|                          |                     |  |     | PG Diploma Final Exam. |                                  | (Year-3)              |     |     | Supple Exam. (Diploma) | Thesis final submission | Thesis adjudication |     |
|                          | Thesis adjudication | Thesis final report                          |     | PG Degree Final Exam.  |                                  | PG result publication |     |     | Supple Exam. (Degree)  |                         |                     |     |

| Course  | Jan                      | Feb | Mar | Apr                   | May                      | Jun                   | Jul | Aug | Sep.         | Oct                 | Nov                 | Dec                     |
|---|--------------------------|-----|-----|-----------------------|--------------------------|-----------------------|-----|-----|--------------|---------------------|---------------------|-------------------------|
| <b>2-year Degree course<br/>(Exempted category for those with diploma in same discipline)</b> |                          |     |     |                       |                          |                       |     |     |              |                     |                     |                         |
|   |                          |     |     |                       | Course start<br>(Year-1) |                       |     |     |              | Protocol submission | Protocol evaluation |                         |
|   | Thesis work<br>(Jan-Dec) |     |     |                       | (year-2)                 |                       |     |     |              |                     |                     | Thesis final submission |
|   |                          |     |     | PG Degree Final Exam. |                          | PG result publication |     |     | Supple Exam. |                     |                     |                         |



## Annex 2 : MBBS class routine for new entrants

### MBBS course: Proposed Class Routine for Semesters 1 and 2

| Day              | 8 AM – 9 AM        | 9 AM – 10AM  | 10 AM – 11 AM | 11 AM -1 PM                     | 1 PM – 2 PM     | 2 PM – 4 PM (Practical) |            |              |  |
|------------------|--------------------|--------------|---------------|---------------------------------|-----------------|-------------------------|------------|--------------|--|
|                  |                    |              |               |                                 |                 | Anatomy                 | Physiology | Biochemistry |  |
| <b>Monday</b>    | Anatomy            | Physiology   | Anatomy       | Biochemistry (Tutorial)         | <b>Recess</b>   | B                       | A          | C            |  |
| <b>Tuesday</b>   | Physiology         | Biochemistry | Anatomy       | Anatomy (Tutorial)              |                 | A                       | C          | B            |  |
| <b>Wednesday</b> | Community Medicine | Biochemistry | Anatomy       | Physiology (Tutorial)           |                 | C                       | B          | A            |  |
| <b>Thursday</b>  | Physiology         | Anatomy      | Physiology    | Anatomy (Tutorial)              |                 | B                       | A          | C            |  |
| <b>Friday</b>    | Biochemistry       | Physiology   | Anatomy       | Physiology (Tutorial)           |                 | A                       | C          | B            |  |
| <b>Saturday</b>  | Community Medicine | Physiology   | Biochemistry  | <b>11 AM – 1 PM (Practical)</b> |                 |                         |            |              |  |
|                  |                    |              |               | Anatomy<br>C                    | Physiology<br>B | Biochemistry<br>A       |            |              |  |

N.B. Seminars, group discussions, field visits and tutorials will be arranged by the respective heads of the departments according to departmental convenience.

## Annex 3 : Medical Council of India directive concerning ragging

Decision taken in the meeting of Dr. R. K. Raghvan Committee appointed by the Hon'ble Supreme Court to supervise the measures being implemented to prevent the menace of ragging. The Medical Council of India has prepared the regulations to curb the menace of ragging in medical colleges in form of Regulations called as the Medical Council of India (Presentation and Prohibition of Ragging in Medical Colleges/Institutions) Regulations, 2009. The said Regulations have been notified in the Para 111 Section 4 of the Gazette of India on 03.08.2009. These Regulations were circulated to the medical colleges vide this office circular No. 34(l)/2009-Med./31046 dated 21.08.2009 and also available on the MCI website i.e. [www.mciindia.org](http://www.mciindia.org).

Ragging in any form is banned inside and outside the campus. According to 3<sup>rd</sup> Amendment in UGC Regulation on 29<sup>th</sup> June, 2016 ragging is defined as any act of physical or mental abuse (including bullying and exclusion) targeted at another student (fresher or otherwise) on the ground of colour, race, religion, caste, ethnicity, gender (including transgender), sexual orientation, appearance, nationality, regional origins, linguistic identity, place of birth, place of residence or economic background.

As per guidelines provided by [http://www.antiragging.in/upload/Infopack/what\\_constitutes\\_ragging.pdf](http://www.antiragging.in/upload/Infopack/what_constitutes_ragging.pdf) Ragging constitutes one or more of any of the following acts:

- a) Any conduct by any student or students whether by words spoken or written or by an act which has the effect of teasing, treating or handling with rudeness a fresher or any other student.
- b) Indulging in rowdy or undisciplined activities by any student or students which causes or is likely to cause annoyance, hardship, physical or psychological harm or to raise fear or apprehension thereof in any fresher or any other student.
- c) Asking any student to do any act which such student will not in the ordinary course do and which has the effect of causing or generating a sense of shame, or torment or embarrassment so as to adversely affect the physique or psyche of such fresher or any other student.
- d) Any act by a senior student that prevents, disrupts or disturbs the regular academic activity of any other student or a fresher.
- e) Exploiting the services of a fresher or any other student for completing the academic tasks assigned to an individual or a group of students.
- f) Any act of financial extortion or forceful expenditure burden put on a fresher or any other student by students
- g) Any act of physical abuse including all variants of it: sexual abuse, homosexual assaults, stripping, forcing obscene and lewd acts, gestures, causing bodily harm or any other danger to health or person;
- h) Any act or abuse by spoken words, emails, post, public insults which would also include deriving perverted pleasure, vicarious or sadistic thrill from actively or passively participating in the discomfiture to fresher or any other student.
- i) Any act that affects the mental health and self-confidence of a fresher or any other student with or without an intent to derive a sadistic pleasure or showing off power, authority or superiority by a student over any fresher

### **Punishable ingredients of Ragging:-**

- Abetment to ragging;
- Criminal conspiracy to rag;
- Unlawful assembly and rioting while ragging;
- Public nuisance created during ragging;
- Violation of decency and morals through ragging;
- Injury to body, causing hurt or grievous hurt;
- Wrongful restraint;

- Wrongful confinement;
- Use of criminal force;
- Assault as well as sexual offences or even unnatural offences;
- Extortion;
- Criminal trespass;
- Offences against property;
- Criminal intimidation;
- Attempts to commit any or all of the above mentioned offences against the victim(s);
- Physical or psychological humiliation.
- All other offences following from the definition of "Ragging".

### **DIRECTIVES OF THE HONOURABLE SUPREME COURT ON THE MENACE OF RAGGING**

Last Updated On : 15 Oct 2014

In view of the increasing incidents of ragging in colleges and elsewhere that reached proportions unbecoming of a civilised society the Hon'ble Supreme court admitted and heard the SLP No (s) 24295 of 2006 University of Kerala Vs Council, Principals', Colleges, Kerala & Ors (with SLP(C) No.24296-99/2004 & W.P. (CrI) No. 173/2006 and SLP(C) No.14356/2005).

Pursuant to an order of Hon'ble Supreme Court of India dated November 27, 2006, the Ministry of Human Resource Development has constituted a Committee under the Chairmanship of Shri R.K. Raghavan (former Director, CBI) to look into the issue of ragging and suggest means of prevention of ragging in educational institutions.

The Committee primarily examined the following broad aspects of ragging:

#### **Means and methods of prevention of ragging.**

Possible action that can be taken against persons indulging in ragging.

Possible action that can be taken against college/university authorities in the event of ragging.

The Committee had carried out a very detailed study with the help of voluntary organizations including CURE (Coalition for Uprooting Ragging from Education) and SPACE (Society for Peoples Action Change and Enforcement) and collected voluminous public opinion on the various factors contributing for ragging. Noted psychologists and educationists assisted the committee. The National Informatics Centre at the Ministry of Human Resources hosted a guest book in their website. Nearly eleven press releases were made during this period of evaluation and committee visited several cities in the country. A subcommittee of the Medical Council of India was also constituted for this purpose. A questionnaire was prepared that elicited over 12500 responses. In short a wide cross-section of the society provided the necessary background information, data and suggestions on tackling ragging in the country for consideration by the esteemed committee.

Subsequently the committee submitted a detailed report with suitable recommendations and measures required to effectively curb the menace. The recommendations of the Committee were duly accepted and the following directives have been issued to all the educational institutions for necessary implementation by the Hon'ble Supreme Court on 16 May 2007.

The following factors need to be focused to tackle with the problem:

Primary responsibility for curbing ragging rests with academic institutions themselves.

Ragging adversely impacts the standards of higher education.

Incentives should be available to institutions for curbing the menace and there should be disincentives for failure to do so.

Enrolment in academic pursuits or a campus life should not immunize any adult citizen from penal provisions of the laws of the land.

Ragging needs to be perceived as failure to inculcate human values from the schooling stage. Behavioural patterns among students, particularly potential 'raggers', need to be identified. Measures against ragging must deter its recurrence. Concerted action is required at the level of the school, higher educational institution, district administration, university, State and Central Governments to make any curb effective. Media and the Civil Society should be involved in this exercise. The Committee has made several recommendations. For the present, the apex court felt that the following recommendations should be implemented without any further lapse of time. The punishment to be meted out has to be exemplary and justifiably harsh to act as a deterrent against recurrence of such incidents. Every single incident of ragging where the victim or his parent/guardian or the Head of institution is not satisfied with the institutional arrangement for action, a First Information Report (FIR) must be filed without exception by the institutional authorities with the local police authorities. Any failure on the part of the institutional authority or negligence or deliberate delay in lodging the FIR with the local police shall be construed to be an act of culpable negligence on the part of the institutional authority. If any victim or his parent/guardian intends to file FIR directly with the police, that will not absolve the institutional authority from the requirement of filing the FIR. Courts should make an effort to ensure that cases involving ragging are taken up on a priority basis to send the correct message that ragging is not only to be discouraged but also to be dealt with sternness. In addition, the court directed the possibility of introducing in the educational curriculum a subject relating to ragging shall be explored by the National Council of Educational Research and Training (NCERT) and the respective State Council of Educational Research and Training (SCERT). This aspect can be included in the teaching of the subjects "Human Rights". In the prospectus to be issued for admission by educational institutions, it shall be clearly stipulated that in case the applicant for admission is found to have indulged in ragging in the past or if it is noticed later that he has indulged in ragging, admission may be refused or he shall be expelled from the educational institution. The Central Government and the State Governments shall launch a programme giving wide publicity to the menace of ragging and the consequences which follow in case any student is detected to have been involved in ragging. It shall be the collective responsibility of the authorities and functionaries of the concerned institution and their role shall also be open to scrutiny for the purpose of finding out whether they have taken effective steps for preventing ragging and in case of their failure, action can be taken; for example, denial of any grant-in-aid or assistance from the State Governments. Anti-ragging committees and squads shall be forthwith formed by the institutions and it shall be the job of the committee or the squad, as the case may be, to see that the Committee's recommendations, particularly those noted above, are observed without exception and if it is noticed that there is any deviation, the same shall be forthwith brought to the notice of this Court. The Committee constituted pursuant to the order of this Court shall continue to monitor the functioning of the anti-ragging committees and the squads to be formed. They shall also monitor the implementation of the recommendations to which reference has been made above. The All India Institute of Medical Sciences requests all students, parents and guardians to go through these directives and co-operate in the implementation of the directives of the Honourable Supreme Court of India. It is hoped that this will signal an end to the menace of ragging. Strict action shall be taken in accordance with the directives in case any student is found to indulge in ragging.

### **Punishments against ragging**

Depending upon the nature and gravity of the offence as established by the Anti-ragging Committee of the institution, the possible punishments for those found guilty of ragging at the institution level shall be any one or any combination of the following :

- Suspension from attending classes and academic privileges
- Withholding / withdrawing scholarship / fellowship and other benefits
- Forfeiting campus placement opportunities / recommendations
- Debarring from appearing in any test/examination or other evaluation process
- Withholding of results

- Debarring from representing the institution in any regional, national or international meet, tournament, youth festival, etc.
- Suspension/ expulsion from the hostel
- Cancellation of admission
- Rustication from the institution for a period, ranging from 1 to 4 semesters
- Expulsion from the institution and consequent debarring from admission to any other institution for a specific period
- Fine to be paid
- Collective punishment: When the persons committing or abetting the crime of ragging are not identified, the institution shall resort to collective punishment as a deterrent to ensure community pressure on the potential raggers.

In addition, in case of every single incident of ragging, a First Information Report (FIR) will be filed with the local police authorities. The possible punishment includes rigorous imprisonment (in compliance with the order of Supreme Court of India)

Students in distress due to ragging can call the National Anti-ragging helpline vide infra or email the anti-ragging helpline at [helpline@antiragging.in](mailto:helpline@antiragging.in). For any other information regarding ragging , please visit the UGC website, i.e. [www.ugc.ac.in](http://www.ugc.ac.in) & [www.antiragging.in](http://www.antiragging.in) and contact UGC monitoring agency i.e. AmanSatyaKacoo Trust on the following No.09871170303, 09818400116 ( only in case of emergency) or [www.amanmovement.org](http://www.amanmovement.org).

**National Anti-Ragging  
HELPLINE  
Government of India  
18001805522  
Toll free**

Antiragging committee of ESICMC-PGIMSR, Joka is comprised of the following members

| <b>SL No.</b> | <b>Officer Name</b>       | <b>Designation</b>                                   | <b>Contact No</b> | <b>Email-ID</b>             |
|---------------|---------------------------|--|-------------------|-----------------------------|
|               | Prof. Joydeb Roychowdhury | Dean, Chairman                                       |                   |                             |
| 1.            | Dr. S. K Choudhury        | Medical Superintendent                               | 9432649038        | ms-odckolkata@esic.nic.in   |
| 2.            | Dr. Ashok Kumar Samanta   | Chief Warden (Boys Hostel), Nodal Officer & Convener | 9831156913        | dr_ashoksamanta@yahoo.co.in |
| 3.            | Prof. Soumya Chakraborty  | HOD, Anatomy   | 9163512442        | soumtuab@gmail.com          |
| 4.            | Dr. Omkar Prasad Baidya   | Assistant Warden (Boys Hostel)                       | 808090332586      | omkarprasadbaidya@gmail.com |
| 5.            | Dr. Susmita Chowdhury     | Chief Warden (Girls Hostel)                          | 9163532251        | schaudhuri1986@gmail.com    |
| 6.            | Dr. Nita Singh            | Assistant Warden (Girls Hostel)                      | 8697010521        | drnita_singh@yahoo.co.in    |