

ORDINANCE No. 109

M.B.B.S. EXAMINATION

That Ordinance 109 will be applicable from the admission year 1998 to the M.B.B.S. Course. Will come into force with retrospective effect.

The students admitted before 1998 shall be governed by Ordinance No. 61, however, they will be permitted not more than four chances (actual examinations provided four chances are completed with three years from the date of enrollment) subsequently they will be governed by Ordinance No. 109.

The Ordinance 109 shall be governed by the rules, regulation and recommendation made by MCI, Govt. of India and/ or Govt. of Chhattisgarh or as amended from time to time.

1. *Admission to the Medical Course - Eligibility Criteria*

No Candidate shall be allowed to be admitted to the Medical Curriculum of first Bachelor of Medicine and Bachelor of Surgery (MBBS) Course until :

- (1) He/ She has completed the age of 17 Years on or before thirty first day of July of the year commencing the prescribed academic session of the said course.
- (2) He/ She has passed qualifying examination as under :
 - (a) The Higher Secondary Examination or the Indian School Certificate Examination which is equivalent to 10+2 Higher Secondary Examination after a period of 12 years study, the last two years of study comprising of Physics, Chemistry, Biology and Mathematics or any other elective subject with English at a level not less than the core course for English as prescribed by the National Council for Educational Research and Training after the introduction of the 1+2+3 years educational structure as recommended by the National Committee on Education.

Note - Where the course content is not as prescribed for 10+2 education structure of the National committee, the candidates will have to undergo a period of one year preprofessional training before admission to the Medical Colleges :

Or

- (b) The Intermediate examination in science of an Indian University/ Board or other recognized examination body with Physics, Chemistry and Biology which shall include a practical test in these subject and also English as a compulsory subject.

Or

- (c) The pre-professional/ pre-medical examination with Physics, Chemistry and Biology, after passing either the higher secondary school examination or the pre-University or an equivalent examination. The pre-professional/ pre-medical examination shall include a practical test in Physics, Chemistry and Biology and also English as a compulsory subject.

Or

- (d) The first year of the three years degree course of a recognized university, with Physics, Chemistry and Biology including a practical test in these subjects provided the examination is "University Examination" and candidate has passed 10+2 with English at a level not less than a core course.

Or

- (e) B.Sc. examination of an India University, provided that he/ she passed the B.Sc. examination with not less than two of the following subject - Physics, Chemistry, Biology (Botany, Zoology) and further that he/ she has passed the earlier qualifying examination with the following subjects-Physics, Chemistry, Biology and English.

Or

- (f) Any other examination which, in scope and standard is found to be equivalent to the intermediate science examination of an Indian University/ Board taking Physics, Chemistry and Biology including a practical test in each of these subjects and English.

Note: The pre-medical course may be conducted either at Medical College or a Science College.

Marks obtained in Mathematics are not be considered for admission to MBBS Course.

After the 10+2 course is introduced, the integrated courses should be abolished.

2. *Selection of students*

The selection of students to medical college shall be based solely on merit of the candidate and for determination of merit, the following criteria be adopted uniformly throughout the country :

- (1) In states, having only one Medical College and one University board/ examining body conducting the qualifying examination the marks obtained at such qualifying examination may be taken into consideration.
- (2) In states, having more than one University/ board/ examining body conducting the qualifying examination (or where there is more than one medical college under the administrative control of one authority) a competitive entrance examination should be held so as to achieve a uniform evaluation as there may be variation of standard at qualifying examination conducted by different agencies :
- (3) Where there are more than one college in a state and only one University/ board conducting the qualifying examination, then a joint selection board be constituted for all the colleges :
- (4) A competitive entrance examination is absolutely necessary in the cases of Institutions of All India Character. .
- (5) To be eligible for competitive entrance examination, the candidate must have passed any of the qualifying examination, as enumerated under the head note "Eligibility Criteria"

Provided also that -

- (i) In case of admission on the basis of qualifying examination, a candidate for admission to medical course must have obtained not less than 50% marks in English and 50% marks in Physics, Chemistry and Biology taken together at the qualifying examination.
- (ii) In case of admission on the basis of a competitive entrance examination a candidate for admission to medical course must have obtained not less than 50% marks in English and 50% marks in Physics, Chemistry and Biology taken together, both at qualifying and competitive examinations.

Provided further that in respect of candidates belonging to schedule Caste/Schedule Tribes and other Backward Classes (OBC) the marks obtained be read as 40% instead of 50%.

3. *Migration*

- (1) Migration from one Medical college to other is not a right of a student. However, migration of students from one medical college to another medical college in India may be considered by the Medical Council of India, only in exceptional cases on extreme compassionate ground, provided following criteria are fulfilled. Routine migration on other grounds shall be allowed.
- (2) Both the colleges, i.e. one at which the student is studying at present and one to which migration is sought, are recognised by the Medical Council of India.
- (3) The applicant candidate should have passed first professional MBBS examination.
- (4) The applicant candidate submit his application for migration complete in all respects, to all authorities concerned within a period of One month of passing (declaration of results) the first profession at Bachelor of Medicine and Bachelor of Surgery (MBBS) examinations.
- (5) The applicant candidate must submit an affidavit stating that he/ she will pursue 18 month of prescribed study before appearing at IInd professional Bachelor of Medicine and Bachelor of Surgery (MBBS) examination at the transferee medical college, which should be duly certified by the Registrar of the concerned University in which he/ she is seeking transfer. The transfer will be applicable only after receipt of the affidavit.

Note -1

- (i) Migration during clinical course of study shall not be allowed on any ground.
- (ii) Council reserves the right not to entertain any application, which is not under the prescribed compassionate grounds and also to take independent decisions where applicant has been allowed to migrate without referring the same to the Council.

Note - 2: Compassionate grounds criteria

- (i) Death of a supporting guardian
- (ii) Illness of the candidate causing disability
- (iii) Disturbed conditions as declared by Government in the Medical college area.

4. *Training Period and Time Distribution*

- (1) Every student shall undergo a period of Certified study extending over 4½ academic years divided into 9 Semesters. (i.e. of 6 months each) from the date of commencement of his study for the subjects comprising the medical curriculum to the date of completion of examination and followed by one year compulsory rotating internship. Each semester will consist of approximately 120 teaching days of 8 hrs. each college working time, including one hour of lunch.
- (2) The period of 4½ years is divided into three phases as follows :
 - (a) Phase-I (two semesters) consisting of pre-clinical subjects (Human Anatomy, Physiology including Bio-Physics, Bio-Chemistry and introduction to Community Medicine including Humanities). Besides 60 hours for introduction to Community Medicine including between Anatomy and Physiology plus Biochemistry combined (Physiology 2/3 and Biochemistry 1/3)
 - (b) Phase-II (3 semesters) - consisting of para-clinical/ clinical subjects.

During this phase teaching of para-clinical and clinical subjects shall be done concurrently.

The para-clinical subjects shall consist of Pathology, Pharmacology, Microbiology, Forensic Medicine including Toxicology and part of Community Medicine.

The clinical subjects shall consist of all those detailed below in phase III.

Out of the time for para clinical teaching approximately equal time be allotted to Pathology, Pharmacology, Microbiology and Forensic Medicine and Community Medicine combined (1/3 Forensic Medicine and 2/3 Community Medicine), Either type below or annexed.

- (c) ~~Phase-III (Continuation of study of clinical subjects for seven semesters after passing phase-I).~~

The clinical Subjects to be taught during Phase II and III are Medicine and its allied specialties, Surgery and its allied specialitions, Obstetrics and Gynecology and Community Medicine.

Besides clinical posting as per schedule mentioned herewith, rest of the teaching hours be divided for didactic lectures, demonstrations, seminars, group discussions, etc. in various subjects. The time distribution shall be as per either type below or annexed or delete.

- (i) The Medicine and its allied specialties training will include General Medicine, Pediatrics, Tuberculosis and Chest, skin and sexually Transmitted Diseases, Psychiatry, Radio diagnosis, Infectious diseases etc.
 - (ii) The Surgery and its allied specialties training will include General Surgery, Orthopedic Surgery including Physiotherapy and Rehabilitation, Ophthalmology, Otorhinelaryngology, Anaesthesia, Dentistry, Radio-therapy etc.
 - (iii) The obstetrics & Gynecology training will include family medicine, family welfare planning etc.
- (3) The first 2 semester (approximately 240 teaching days) shall be occupied in the phase I (Pre clinical) subjects and introduction to a broader understanding of the perspectives of the medical education leading to delivery of healthcare. No student shall be permitted to joint the phase II (Pre-clinical/ Clinical) group of subject until he has passed in all the phase I Pre-clinical subjects for which he will be permitted not more than four chances (actual examination), provided four chances are completed in three years from the date of enrollment.
- (4) After passing pre-clinical subjects : 1½ years (3 semesters) shall be devoted to para-clinical subjects.
- Phase II will be devoted to para-clinical and clinical subjects, along with ~~clinical posting~~. During clinical phase (Phase III) ~~pre-clinical and para-clinical~~ teaching will be integrated into the teaching of clinical subjects where relevant.

(5) Didactic lectures should not exceed one third of the time schedule, tow third schedule should include practicals, clinicals or/ and group discussions. Learning process should include living experiences problem oriented approach, case studies and community health care activities.

(6) Supplementary Examination may be conducted within 6 months so that the students who pass can join the main batch and the failed students will have to appear in the subsequent year.

(7) Phase Distribution and Timing of Examinations -

6 months	6 months	6 months	
1	2		1st professional examination (during second semester)
3	4	5	IInd professional examination (during fifth semester)
6	7		IIIrd professional part I (during 7th semester)
8	9		IIIrd professional part-II (Final professional) during 9th semester

Note :

- (a) Passing in 1st professional is compulsory before proceeding to phase II training.
- (b) A student who fails in the IInd professional examination, shall not be allowed to appear in IIIrd professional Part I examination unless he passes all subjects of IInd professional examination.
- (c) Passing in IIIrd professional (Part-I) examination is not compulsory before entering for 8th and 9th semester training, however passing of IIIrd professional (Part-I) is compulsory for being eligible for IIIrd professional (Part-II) Examination.

During third to ninth semesters, clinical postings of three hours duration daily as specified in the Annexure is suggested for various departments, after Introductory Course in Clinical Methods in Medicine and Surgery of two weeks such for the whole class.

5. *EXAMINATION REGULATIONS*

Essentialities for qualifying to appear in professional examinations.

The performance in essential components of training are to be assessed, based on :

(1) *ATTENDANCE*

75% of attendance in a subject for appearing in the examination is compulsory provided he/ she has 80% attendance in non lecture teaching, i.e. seminars, group discussions, tutorials, demonstrations practical, Hospital (Tertiary, Secondary, Primary) postings and bed side clinics etc.

(2) *INTERNAL ASSESSMENT*

- (i) It shall be based on day to day assessment evaluation of student assignment, preparation for seminar, clinical case presentation etc.
- (ii) Regular periodical examinations shall be conducted through out the course. The question of number of examination is left to the institution.
- (iii) Day to day records should be given importance during internal assessment.
- (iv) Weightage for the internal assessment shall be 20% of the total marks in each subject.
- (v) Student must secure atleast 35% of the total marks fixed for internal assessment in a particular subject in order to be eligible to appear in final university examination of that subject.

Note:

Internal assessment shall relate to different ways in which students participation in learning process during semester is evaluated.

Some examples are as follow:

- (i) ~~Preparation of subject for students Seminar~~

- (ii) Preparation of a clinical case for discussion
- (iii) Clinical case study/ problem solving exercise
- (iv) Participation in Project for health care in the community (Planning stage to evaluation)
- (v) Proficiency in carrying out a practical or a skill in small research project.
- (vi) Multiple choice question (MCQ) test after completion of a system/ teaching.

Each item tested shall be objectively assessed and recorded some of the items can be assigned as Home work/ Vacation work.

(3) *UNIVERSITY EXAMINATION*

Theory papers will be prepared by the examiners as prescribed. Nature of questions will be short answer type/ objective type and marks for each part indicated separately.

Practical Clinicals will be conducted in the laboratories or hospital wards. Objective will be to assess proficiency in skills, conduct of experiment, interpretation of data and logical conclusion clinical cases should preferably include common diseases not esoteric syndromes or rare disorders. Emphasis should be on candidate's capability in eliciting physical signs and their interpretation.

Viva/ oral includes evaluation of management approach and handling of emergencies. Candidate's skill in interpretation of common investigative data, X-rays, identification of specimens ECG etc. also is to be evaluated.

The examinations are to be designed with a view to ascertain whether the candidate has acquired the necessary for knowledge minimum skills along with clear concepts of the fundamentals which are necessary for him to carry out his professional day to day work competently Evaluation will be carried out on an objectives basis.

Question paper should preferable be of short structure/ objective type.

Clinical cases/ practicals shall take into account common diseases which the students is likely to come in contact in practice. Rare cases/ obscure syndromes, long cases of neurology shall not be put for final examination.

During evaluation (both internal and External) it shall be ascertained if the candidate has acquired the skills as detailed in print a annex.

There shall be one main examination in a year and a supplementary to be held not later than 6 months after the publication of its results. University Examinations shall be held as under:

First Professional - In the second semester of Phase-I training, in the subjects of Anatomy, Physiology and Bio-Chemistry.

Second Professional - In the fifth semester of Phase-II training, in the subjects of Pathology, Microbiology, Pharmacology and Forensic Medicine.

Third Professional - Part I Final Professional in the Seventh semester of Phase III in the subjects of ophthalmology, oto-rhyno-laryngology and Community Medicine.

Third Professional (Part II Final Professional) - The end of Phase III training in the subject of Medicine, Surgery, Obstetrics & Gynecology and Pediatrics.

- (i) A candidate in order to pass in each subject must obtain 50% in aggregate with a minimum 50% marks in theory including orals, and minimum of 50% in practicals clinicals.
- (ii) Students must secure atleast 35% marks of total marks fixed for internal assessment in particular subject in order to be eligible to appear in final University Examinations.

Remark : Above condition shall be common for all the students i.e. from 5% MBBS. to MBBS.final

- (iii) A candidate securing 75% or more marks in a subject shall be deemed to have obtained distinction, 70% or more but less than 75% marks in a subject, shall be deemed to have obtained Certificate of Merit in that subject, provided he passes all subjects in the examination without any failure and in the minimum prescribed period.

- (iv) ~~A candidate who has passed in any subject of a professional examination need not appear in that subject again in any subsequent examination.~~

Note :

Results of all university examinations shall be declared before the start of teaching for next semester:

APPOINTMENT OF EXAMINERS:

- (1) No person shall be appointed as an examiner in any of the subjects of the Professional examination leading to and including the final Professional examinations for the award of the MBBS degree unless he has taken atleast five years previously, a doctorate degree of a recognized university or an equivalent qualification in the particular subject as per recommendation of the Council on teacher's eligibility qualifications and has had atleast five years of total teaching experience in the subject concerned in a college affiliated to a recognized university at a faculty position.
- (2) There shall be atleast four examiners for 100 students, out of whom not less than 50% must be external examiners of the four examiners, the senior most internal examiner will act as the Chairman and co-ordinator of the whole examination programme so that uniformity in the matter of assessment of candidates is maintained.(where candidates appearing are more than 100, one additional examiner, for every additional 50 or part thereof candidates appearing be appointed)
- (3) Non medical scientists engaged in the teaching of medical students as whole time teachers, may be appointed examiners in their concerned subjects provided they possess requisite doctorate qualifications and five year experience of teaching of the medical students after obtaining their postgraduate qualifications. Provided further that the 50% of the examiners (internal & external) are from the medical qualification stream.
- (4) External examiners shall not be from the same University and preferably be from outside the state.

- (5) The internal examiner in a subject shall not accept external examinership for a college from which external examiner is appointed in his subject.
- (6) A University having more than one college shall have separate set of examiners for each college, with internal examiners/from the concerned college.
- (7) External examiners shall rotate at an interval of 2 years.
- (8) There shall be a Chairman of the Board of paper-setters who shall be an internal examiner and shall moderate the questions.
- (9) Except Head of the department of subject concerned in a college/ institution, all others with the rank of Reader or equivalent and above with requisite qualifications and experience shall be appointed internal examiners by rotation in their subjects, provided that where there are no posts of Readers, than an Assistant Professor of 5 years standing as Assistant Professor may be considered for appointment as examiner.

INTERNSHIP

(1) GENERAL

Internship is a phase of training wherein a graduate is expected to conduct actual practice of medical and health care and acquire skills under supervision so that he/ she may become capable of functioning independently.

(2) SPECIFIC OBJECTIVES

At the end of the internship training, the students shall be able to

- (i) Diagnose clinically common disease conditions encountered in practice and make timely decision for referral to higher level.
- (ii) Use discreetly the essential drugs, infusions, blood or its substitutes and laboratory services.
- (iii) Manage all type of emergencies-medical, surgical, obstetric, neonatal and pediatric by rendering first level care.

- (iv) Demonstrate skills in monitoring of the National Health Programmes and schemes oriented to provide preventive and primitive health care services to the community.
 - (v) Develop leadership qualities to function effectively as a leader of the health team organised to deliver the health and family welfare service in existing socioeconomic, political and cultural Environment.
 - (vi) Render services to chronically sick and disabled (both Physical and mental) and to communicate effectively with patient and the community.
- (3) Time allocation to each discipline is approximate and shall be guided more specifically by the actual experience obtained. Thus a student serving in a district or taluk hospital emergency room, may well accumulate skills in surgery, orthopedics, medicine, Obstetrics and Gynecology and Paediatrics during even a single night on duty. Responsible authorities from the medical college shall adjust the intern experience to maximize intern's opportunities to practice skills in patient care in rough approximation of the time allocation suggested.

(4) INTERNSHIP - THE DISTRIBUTION

Compulsory	12 months
Community Medicine	3 months
Medicine	2 months
Surgery including Orthopaedics	2 months
Obst./Gyane, including Family	2 months
Welfare Planning Paediatrics	15 days
Ophthalmology	15 days
Otorhinolaryngology	15 days
Casualty	15 days
Elective Postings	One month
Elective subjects	

Elective posting will include two of the following for 15 days in each subject.

- (i) Dermatology and Sexually Transmitted Diseases
- (ii) Psychiatry
- (iii) Tuberculosis and Respiratory Diseases

- (iv) Anaesthesia
- (v) Radio-diagnosis
- (vi) Physical Medicine and Rehabilitation
- (vii) Forensic Medicine and Toxicology
- (viii) Blood Bank of Transfusion Department

(5) OTHER DETAILS

- (i) All parts of the internship shall be done as far as possible in institution of India. In case of any difficulties, the matter may be referred to the Medical Council of India to be considered on individual merit.
- (ii) Every candidate will be required after passing the final MBBS Examination to undergo compulsory rotation internship to the satisfaction of the College authorities and University concerned for a period of 12 months so as to be eligible for the award of the degree of Bachelor of Medicine and Bachelor of Surgery (MBBS) and full registration.
- (iii) The University shall issue a provisional MBBS Pass Certificate on passing the final examination.
- (iv) The state Medical Council will grant provisional registration to the candidate on production of the provisional MBBS pass certificate. The provisional registration will be for a period of one year. In the event of shortage or unsatisfactory work, the period of provisional registration and the compulsory rotating internship may be suitably extended by the appropriate authorities.
- (v) The intern shall be entrusted with clinical responsibilities under direct supervision of senior medical officer. They shall not be working independently.
- (vi) Interns will not issue a medical certificate or a death certificate or a medico legal document under their signature.
- (vii) In recognition of the importance of hands - on experience, full responsibility for patient care and skill acquisition, internship should be increasingly scheduled to utilize clinical facilities available in District Hospital, Taluka Hospital, Community Health Centre and Primary Health Centre, in addition to Teaching Hospital. A critical element of internship will be the acquisition of ~~specific experiences and skills as listed in major areas.~~

Provided that where an intern is posted to District/ Sub division at Hospital for training there shall be a committee consisting of representatives of the college/ University, the State Government and the District administration, who shall regulate the training of such trainee.

Provided further that for such trainee a certificate of satisfactory completion of training shall be obtained from the relevant administrative authorities which shall be countersigned by the Principal/ Dean of college.

- (viii) Adjustment to enable a candidate to obtain training in elective clinical subjects may be made.
- (ix) Each medical college shall establish links with one entire district extending out reach activities. Similarly. Re-orientation and Medical Education (ROME) scheme may be suitably modified to assure teaching activities at each level of District health system which will be coordinated by Dean of the medical college.
- (x) Out of one year, 6 months shall be devoted to learning tertiary care being rendered in teaching hospital/ district hospital suitably staffed with well qualified staff, 3 months of secondary care in a small District or Taluka Hospital/ Community Health Centre and 3 months in Primary Health care out of which 2 months should be in Primary Health Centre with full attention to the implementation of National Health programme at the community level. One month of Primary care training may be in the form of preceptorship with a practicing family physician or voluntary agency or other primary health care provider.
- (xi) One year,s approved service in the Armed Forces Medical services, after passing the final MBBS examination shall be considered as equivalent to the pre-registration training detailed above, such training shall as far as possible, be at the Base/ general Hospital.

(6) ASSESSMENT OF INTERNSHIP

- (i) The Intern shall maintain a "record of work" which is to be verified and certified by the medical officer under whom he works. Apart from scrutiny of ~~the record of work, assessment and evaluation of training shall be undertaken by an objective approach using situation tests in knowledge, skills and attitude~~

