

COMMUNITY MEDICINE

Learning Objectives:

After completion of training, the MBBS student must be:

1. Aware of the physical, social, psychological, economic, and environmental health determinants of health and disease.
2. Able to think epidemiologically, diagnose totally, treat comprehensively and be able to function as community and first contact physician.
3. Able to apply the clinical skills to recognize and manage common health problems including their physical, emotional mental and social aspects at the individual, family and community levels and deal with public health emergencies.
4. Able to identify, prioritize and manage the health problems of the community after making community diagnosis.
5. Able to perform as an effective leader of health team at primary care level, **in planning, supervising & monitoring the services of health professionals in health team.**

To achieve this, the student should:

- a. Inculcate values like compassion, empathy to poor, rational and ethical practice, to ensure quality professional practice.
- b. Understand the principles of prevention and control of communicable and non-communicable diseases.
- c. Participate actively in epidemiological studies to identify and prioritize health problems of the community. Collect data, analyze, interpret, and apply relevant statistical tests, to make a report.
- d. Participate actively in health care service for special groups like mothers, infants, under five children, school children, adolescents and elderly of rural, tribal and urban slum dwellers.
- e. Participate actively in investigation of outbreaks/epidemics of various diseases and other public health emergencies.
- f. Participate actively in implementation of National Health Programmes.
- g. Learn and practice principles of behavioural change communication, supervision, leadership, resource management, health information management, community participation and coordination, administrative functions etc.
- h. Continuously upgrade his knowledge, attitude and skills in the subject.

These objectives would be with reference to knowledge, attitude and skills.

Course Contents

I. CONCEPTS OF HEALTH AND DISEASE

Course Contents	Must Know	Desirable to know
1. Definition, concepts & evolution (history) of Public Health.	<input checked="" type="checkbox"/>	
2. Definition of health, holistic concepts of health including concept of spiritual health, <u>appreciation of health as a relative concept</u> , dimensions & determinants of health.	<input checked="" type="checkbox"/>	
3. Characteristics of agent, host and environmental factors in health and disease and the multi factorial etiology of disease.	<input checked="" type="checkbox"/>	
4. Understanding the concept of prevention & control of disease.	<input checked="" type="checkbox"/>	
5. Understanding the natural history of disease and application of interventions at various levels of prevention.	<input checked="" type="checkbox"/>	
6. Introduction to various health indicators.	<input checked="" type="checkbox"/>	
7. <u>Health profile of India- already in chapter XIV.</u>		

II. SOCIAL AND BEHAVIOURAL SCIENCES

1. Concept of Sociology & Behavioral Science , Clinico-socio-cultural and demographic evaluation of the individual, family and community.	<input checked="" type="checkbox"/>	
2. Assessment of barriers to good health and health seeking behaviour.	<input checked="" type="checkbox"/>	
3. Role of family in health and disease	<input checked="" type="checkbox"/>	
4. Socio-cultural factors related to health and disease in the context of urban and rural societies.	<input checked="" type="checkbox"/>	
5. Assessment of Socioeconomic status, effect of health & illness on socioeconomic status	<input checked="" type="checkbox"/>	
6. Doctor-patient relationship.	<input checked="" type="checkbox"/>	
7. Social psychology, Community behaviour and community relationship, Hospital Sociology <u>psychology</u>		<input checked="" type="checkbox"/>
8. Social Security		<input checked="" type="checkbox"/>
9. <u>Impact of urbanization on health and disease- will be covered in chapter XIII.</u>		

III. ENVIRONMENT AND HEALTH

1. Water: Concepts of safe and wholesome water, sanitary sources of water, waterborne diseases, water purification process. <u>water quality standards.</u>	<input checked="" type="checkbox"/>	
2. Physical, chemical & bacteriological standards of drinking water quality and tests for assessing bacteriological quality of water.	<input checked="" type="checkbox"/>	shifted
3. Health hazards of air, water, noise, radiation pollution.	<input checked="" type="checkbox"/>	
4. Concepts of water conservation, rainwater harvesting & Global warming.		<input checked="" type="checkbox"/>
5. Concepts of solid waste, human excreta and sewage disposal.	<input checked="" type="checkbox"/>	
6. Awareness of standards of housing and the effect of housing on health.	<input checked="" type="checkbox"/>	
8. Role of vectors in the causation of diseases.	<input checked="" type="checkbox"/>	
9. Identifying features of vectors and their control measures.	<input checked="" type="checkbox"/>	
10. Life cycles of vectors and advantages and limitations of various vector control measures.	<input checked="" type="checkbox"/>	shifted
11. Mode of action, application cycle of commonly used insecticides and rodenticides.		<input checked="" type="checkbox"/>

IV. HEALTH PROMOTION AND EDUCATION / COMMUNICATION FOR BEHAVIOURAL CHANGE

(INFORMATION, EDUCATION, COMMUNICATION)

a. Understand the concepts of Health promotion and Education, IEC, Behavioural change communication, Counseling.	<input checked="" type="checkbox"/>	
b. Principles & methods of health promotion and education.	<input checked="" type="checkbox"/>	
c. Barriers to effective communication and methods to overcome them.	<input checked="" type="checkbox"/>	
d. Various methods of health education with their advantages and limitations.	<input checked="" type="checkbox"/>	
e. Organizing health promotion and education activities at individual, family and community settings.	<input checked="" type="checkbox"/>	
f. Evaluation of health promotion and education programme.		<input checked="" type="checkbox"/>

V. NUTRITION

1. Common sources of various nutrients and special nutritional requirements according to age, sex, activity, physiological conditions.	<input checked="" type="checkbox"/>	
2. Nutritional assessment of individual, families and the community by using appropriate method such as: anthropometrics, clinical examination etc.	<input checked="" type="checkbox"/>	
3. Plan and recommend a suitable diet for the individuals and families as per local availability of foods and economic status, etc.	<input checked="" type="checkbox"/>	
4. Common nutrition related health disorders (like protein energy malnutrition, obesity , vitamin A deficiency, anemia, iodine deficiency, fluorosis, food toxin diseases) and their control and management.	<input checked="" type="checkbox"/>	
5. Food fortification, additives and adulteration, food hygiene	<input checked="" type="checkbox"/>	
6. Social and cultural factors in nutrition and health	<input checked="" type="checkbox"/>	
7. Important National Nutritional Programmes.	<input checked="" type="checkbox"/>	
8. National Nutrition policy		<input checked="" type="checkbox"/>
9. Nutritional surveillance, education and rehabilitation.		<input checked="" type="checkbox"/>

VI. OCCUPATIONAL HEALTH

1. Relate the history of symptoms with specific occupations including agricultural related occupation.	<input checked="" type="checkbox"/>	
2. Employees State Insurance Act. <u>scheme</u> .	<input checked="" type="checkbox"/>	
3. Specific occupational health hazards, their risk factors and its preventive measures.	<input checked="" type="checkbox"/>	
4. Concepts of ergonomics	<input checked="" type="checkbox"/>	
5. Diagnostic criteria of various occupational related diseases.	<input checked="" type="checkbox"/>	shifted
6. Other legislations related to occupational health.		<input checked="" type="checkbox"/>

VII. BIO-STATISTICS

a. Collection, classification, analysis, interpretation and presentation of statistical data.	<input checked="" type="checkbox"/>	
b. Application of statistical methods in various study designs.	<input checked="" type="checkbox"/>	

c. Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion.	<input checked="" type="checkbox"/>	
d. Applying common tests of significance in various study designs	<input checked="" type="checkbox"/>	
e. Use of life tables.	shifted	<input checked="" type="checkbox"/>

VIII. BASIC EPIDEMIOLOGY

1. Epidemiology: definition, concepts, uses and its role in health and disease.	<input checked="" type="checkbox"/>	
2. Use of basic epidemiological tools to make a community diagnosis of the health situation, in orders to formulate appropriate intervention measures.	<input checked="" type="checkbox"/>	
3. Definition of the terms used in describing disease transmission and control.	<input checked="" type="checkbox"/>	
4. Modes of transmission and measures for prevention and control of communicable and non-communicable diseases.	<input checked="" type="checkbox"/>	
5. General principles of prevention and control of communicable, non communicable diseases and other health conditions of public health importance.	<input checked="" type="checkbox"/>	
6. Principal sources of epidemiological data.	<input checked="" type="checkbox"/>	
7. Definition, calculation and interpretation of morbidity and mortality indicators	<input checked="" type="checkbox"/>	
8. Screening of health related attributes & diseases. <u>Need, uses and evaluation of screening tests.</u>	<input checked="" type="checkbox"/>	
9. Investigation of an epidemic of communicable disease and to understand the principals of control measures.	<input checked="" type="checkbox"/>	
10. Epidemiological study designs & Research Methodologies.	<input checked="" type="checkbox"/>	
11. Concept of association, causation and biases.	<input checked="" type="checkbox"/>	
12. Application of computers in epidemiology.	<input checked="" type="checkbox"/>	

IX. EPIDEMIOLOGY OF SPECIFIC DISEASES: COMMUNICABLE & NON-COMMUNICABLE

Communicable and non-communicable diseases of public health importance, relevant to the region, for which National Disease Control/ Eradication Programmes have been formulated.

Communicable Diseases:

Intestinal infections: Poliomyelitis,* viral hepatitis,* Diarrhoea,* Cholera,* Helminthiasis,* Typhoid*, Amoebiasis & Giardiasis,* Food Poisoning.*

Respiratory infections: Acute Respiratory infections*, Measles*, Diphtheria*, Whooping cough*, Tuberculosis*, SARS**, Influenza**, Meningococcal Meningitis**, Mumps**.

Vector – borne infections: Malaria*, Filaria*, Kala Azar*, Dengue*, Yellow Fever**, Chickengunya fever**.

Surface Infections: Sexually Transmitted Diseases*, HIV & AIDS*, Tetanus*, Leprosy*, Scabies*, Pediculosis*.

Zoonosis: Rabies, Japanese encephalitis*, Plague*, Kyasanur Forest Disease**, Leptospirosis**, Anthrax**.

Hospital acquired infection**

Non-communicable and lifestyle diseases:

Coronary heart disease, Hypertension, Stroke, Rheumatic heart disease, Cancers, Obesity, Diabetes, Blindness, Injury and Accidents.

New emerging diseases:

(* Must Know, **Desirable to Know)

1. Extent of problem, epidemiology and natural history of disease	<input checked="" type="checkbox"/>	
2. Public health importance of particular disease in local area	<input checked="" type="checkbox"/>	
3. Influence of social, cultural and ecological factors on the epidemiology of particular disease.	<input checked="" type="checkbox"/>	
4. Diagnosing disease by clinical methods, using essential laboratory techniques at primary care level.	<input checked="" type="checkbox"/>	
5. Treatment of a case, as per National Programme guidelines, and also follow up of case.	<input checked="" type="checkbox"/>	
6. National Health Programme for particular disease.	<input checked="" type="checkbox"/>	
7. Understand the principles of measures to control a disease epidemic.	<input checked="" type="checkbox"/>	
8. Principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease.		<input checked="" type="checkbox"/>
9. Training of health workers in disease surveillance, control and treatment, health education		<input checked="" type="checkbox"/>
10. Management information system in particular disease.		<input checked="" type="checkbox"/>

11. Prevention & Control of new emerging diseases and life style related health problems	<input checked="" type="checkbox"/>	shifted
12. International Classification of Disease (ICD)		<input checked="" type="checkbox"/>

X. DEMOGRAPHY AND VITAL STATISTICS

1. Concepts of Demography, Demographic cycle, Vital statistics.	<input checked="" type="checkbox"/>	
2. Definition, calculation and interpretation of demographic indices like birth rate, death rate, fertility rates.	<input checked="" type="checkbox"/>	
3. Declining sex ratio and its social implication.	<input checked="" type="checkbox"/>	
4. Population explosion, population dynamics of India.	<input checked="" type="checkbox"/>	
5. Population control measures.	<input checked="" type="checkbox"/>	
6. National Population Policy.	<input checked="" type="checkbox"/>	
7. Sources of vital statistics like census, SRS, NFHS, NSSO etc	<input checked="" type="checkbox"/>	

XI. REPRODUCTIVE AND CHILD HEALTH

1. Current status of Reproductive and Child Health.	<input checked="" type="checkbox"/>	
2. Screening of high risk groups and common health problems.	<input checked="" type="checkbox"/>	
3. Local customs and practices during pregnancy, childbirth and lactation, child feeding practices.	<input checked="" type="checkbox"/>	
4. Organization, implementation and evaluation of Reproductive child health (RCH) components, including child survival and safe motherhood (CSSM), Universal Immunization Programme (UIP), Integrated Child Development Services Scheme (ICDS), Integrated Management of Neonatal and Childhood Illness (IMNCI), Janani Suraksha Yojna (JSY) & Accredited Social Health Activist (ASHA) under National Rural Health Mission (NRHM) and other existing Programmes.	<input checked="" type="checkbox"/>	
5. Various family planning methods, their advantages and shortcomings.	<input checked="" type="checkbox"/>	
6. Medical Termination of Pregnancy and Act (MTP Act) & Pre-Natal Diagnostic Test Act (PNDT Act).	<input checked="" type="checkbox"/>	
7. Adolescent health.	<input checked="" type="checkbox"/>	
8. Handicapped child.	<input checked="" type="checkbox"/>	
9. Gender issues and Women empowerment		<input checked="" type="checkbox"/>
10. Organizations, technical and operational aspects of the National Family Welfare Programme.		<input checked="" type="checkbox"/>
11. Genetics & Health		<input checked="" type="checkbox"/>

XII. SCHOOL HEALTH

1. Objectives and components of School Health Programme.	<input checked="" type="checkbox"/>	
2. Activities of the programme :	<input checked="" type="checkbox"/>	
a. Periodic medical examination of the children and the teachers.	<input checked="" type="checkbox"/>	
b. Immunization of the children in the school.	<input checked="" type="checkbox"/>	
c. Health promotion and education.	<input checked="" type="checkbox"/>	
d. Mid-day meals.	<input checked="" type="checkbox"/>	

XIII. URBAN HEALTH

1. Common health problems (Medical, Social, Environmental, Economical, Psychological) due to urbanization. of urban slum dwellers.	<input checked="" type="checkbox"/>	
2. Organization of health services for and in urban slums.	<input checked="" type="checkbox"/>	
3. National policy on urban health		<input checked="" type="checkbox"/>

XIV. HEALTH CARE SYSTEM IN INDIA

1. Concepts of Primary Health Care and Comprehensive Health Care.	<input checked="" type="checkbox"/>	
2. Health profile of India	<input checked="" type="checkbox"/>	
3. Health care Delivery System in India and infrastructure at peripheral, primary, secondary and tertiary care level	<input checked="" type="checkbox"/>	
4. Job responsibilities of different category of workers in health system	<input checked="" type="checkbox"/>	Shifted
5. Voluntary Health agencies working in India		<input checked="" type="checkbox"/>

XV. HEALTH PLANNING, MANAGEMENT AND ADMINISTRATION

1 Concepts of Planning, Management, Public Health Administration.	<input checked="" type="checkbox"/>	
2 Components of planning a health activity.	<input checked="" type="checkbox"/>	
3 Classification and understanding of various Qualitative and Quantitative Health Management techniques.	<input checked="" type="checkbox"/>	
4 Overview of administration at village, block, district, state and central level in India	<input checked="" type="checkbox"/>	
5 Integrated Disease Surveillance Project (IDSP)	<input checked="" type="checkbox"/>	
6 Health related Millennium Development Goals	<input checked="" type="checkbox"/>	
7 National Health Policy & National Rural Health Mission (NRHM)	<input checked="" type="checkbox"/>	
8 Concepts of Health Economics in health planning and management.		<input checked="" type="checkbox"/>
9 Concepts, scope and methods of Health Audit.		<input checked="" type="checkbox"/>

10 Role of Planning Commission and five year plans in development of health sector in India	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
11 Various health committees of Government of India and their important recommendations.		<input checked="" type="checkbox"/>

XVI. DISASTER MANAGEMENT

1. Principles of disaster preparedness and application of these in disaster management	<input checked="" type="checkbox"/>	
2. Bio-terrorism		<input checked="" type="checkbox"/>

XVII. PUBLIC HEALTH LEGISLATIONS

1. Birth and Death registration act, PFA , MTP, CPA, PNDT Child labor act, Human organ act	<input checked="" type="checkbox"/>	
2. Other public health legislations		<input checked="" type="checkbox"/>

XVIII INTERNATIONAL HEALTH

1. Role of various multilateral, bilateral international health organizations like WHO, UNICEF etc.	<input checked="" type="checkbox"/>	
2. Organizational structure of these organizations		<input checked="" type="checkbox"/>
3. International Health Regulation (IHR)	<input checked="" type="checkbox"/>	shifted

XIX. BIO-MEDICAL WASTE AND ITS DISPOSAL

1. Classification/ Category, sources, health hazards and treatment of Bio-Medical Waste	<input checked="" type="checkbox"/>	
2. Application of these principles in different setting of health care delivery system		<input checked="" type="checkbox"/>

XX. HEALTH CARE OF ELDERLY

1. Size of elderly population, their common health problems and justification of their special care	<input checked="" type="checkbox"/>	
2. Screening procedures for early detection of various diseases and disabilities of elderly.	<input checked="" type="checkbox"/>	shifted
3. Comprehensive health care aspects of elderly		<input checked="" type="checkbox"/>
4. National policy for care of elderly		<input checked="" type="checkbox"/>

XXI. MENTAL HEALTH

1. Importance of mental health care in primary care settings.	<input checked="" type="checkbox"/>	Shifted
2. Comprehensive mental health care at primary care settings.	<input checked="" type="checkbox"/>	shifted

SKILLS

Skills	Able to do independently	Able to perform under guidance	Assist	Observe
<p>General Skills. The student should be able to:</p> <ol style="list-style-type: none"> Elicit Clinico-social history. Describe agent, host and environmental factors determining health and disease. Identify, prioritize and manage common health problems of community. Apply elementary principles of epidemiology in carrying out simple epidemiological studies. Work as a team member in rendering health care. Carry out health promotion and education effectively in the community. 	+			
<p>Skills in relation to specific topics</p> <ol style="list-style-type: none"> Communication: <ul style="list-style-type: none"> Should be well versed with the art of interviewing techniques to elicit the desired information & with art of counseling to counsel. The student should be able to communicate effectively with family members at home, patients at clinics or at home; and community. Individuals, family or a group for health promotion and education, and also with peers. Team activity: <ul style="list-style-type: none"> Work as an effective member of the team; in planning and carrying out field work like school health, conduct health camps etc. Environmental sanitation: <ul style="list-style-type: none"> Able to assess environmental risk factors and suggest action plan. 	+		+	

<ul style="list-style-type: none"> • Able to collect water and stool samples for microbiological analysis. 	+			
<ul style="list-style-type: none"> • Able to identify insects of public health importance, able to use effective insecticides. 	+			
<p>4. Communicable and Non-communicable disease</p>				
<ul style="list-style-type: none"> • Eliciting Clinico-social history and examining the patient for diagnosis and treatment. 	+			
<ul style="list-style-type: none"> • Assessing the severity and/or classifying dehydration in diarrhea, upper respiratory tract infection, dog bite, leprosy, classify tuberculosis (Categorization) and STD. 	+			
<ul style="list-style-type: none"> • Fixing, staining and examining peripheral smear for malaria, sputum for AFB, Hemoglobin estimation, urine and stool examination. 	+			
<ul style="list-style-type: none"> • Adequate and appropriate treatment and follow up of public health diseases and of locally endemic diseases. 	+			
<ul style="list-style-type: none"> • Advice regarding prevention and prophylaxis against common and locally endemic diseases. 	+			
<ul style="list-style-type: none"> • Use of proper screening methods in early diagnosis of certain diseases, applicable at primary care level. 	+			
<ul style="list-style-type: none"> • Able to detect outbreak in early stage, spot mapping, investigation of outbreak, notification of notifiable diseases. 			+	
<ul style="list-style-type: none"> • Surveillance skills development, calculating various health indicators and their interpretations. 	+			
<p>5. Reproductive and Child Health:</p>				
<ul style="list-style-type: none"> • Antenatal- examination of women, application of at-risk approach in antenatal care. 	+	+		
<ul style="list-style-type: none"> • Intranatal care- conducting a normal delivery, referral indications. 				
<ul style="list-style-type: none"> • Postnatal- assessment of newborn and mother, promotion of breast feeding, advice on weaning and on family planning. 	+			
<ul style="list-style-type: none"> • Immunization- able to immunize the eligible using desired routes, for providing vaccines. 				
<ul style="list-style-type: none"> • Contraception- able to advice appropriate contraceptive method. 	+			
<ul style="list-style-type: none"> • Able to insert any Intra Uterine Device (IUD) 		+		
<p>6. Statistics:</p>				

<ul style="list-style-type: none"> • Able to draw sample using simple sampling techniques. • Apply appropriate test of significance. • Calculation of various health indicators and presentation of data. 	+	+		
<p>7. Nutrition:</p> <ul style="list-style-type: none"> • Conduct complete nutritional assessment of individual using clinical, anthropometric and diet survey tools. • Ability to use and interpret road to health card. • Advice appropriate balance diet and suggest any dietary modification • Nutritional promotion and education to specific groups and related to specific nutritional diseases. 	+			
<p>8. Occupation Health:</p> <ul style="list-style-type: none"> • Screening of workers fro any occupation related health problem. 			+	
<p>9. Managerial skills:</p> <ul style="list-style-type: none"> • Able to make community diagnosis and take remedial measure for improving health of community. • Organize antenatal, under five clinics, health education camps. • Ability to manage Health Management Information System, including maintenance of health records at primary care level. • Able to show effective leadership, supervision skill not only at primary care level but also in inter-sectoral coordination. • Ability to manage money, material and manpower at primary care level. • Ability to do cost benefit and cost effective analysis as per primary care needs. • Community participation and cooperation skills 	+	+		
<p>10. Basic Laboratory investigation at primary care level</p> <ul style="list-style-type: none"> • Hemoglobin estimation • Urine examination for normal and abnormal constituents. • Thick and thin blood smear for malaria parasite examination • Peripheral smear for type of anemia • Acid fast staining • Hanging drop examination of stool sample. • Estimation of Chlorine demand and Residual chlorine. 	+			

<ul style="list-style-type: none"> • Identification of life cycle stages of various insects of public health importance 	+			
11. Minor surgical procedures at primary care level				
<ul style="list-style-type: none"> • All types of injection techniques 	+			
<ul style="list-style-type: none"> • Common wound dressings 	+			
<ul style="list-style-type: none"> • Incision and drainage of abscess under local anesthesia 	+			
<ul style="list-style-type: none"> • Stitching of clean lacerated wounds 	+			
12. First Aid, initiation of emergency care, Triage and referral	+			
13. Transportation of injured and seriously ill patient from site of first contact. community.	+			

Field Visits for Undergraduate medical students:

1. Family Health Advisory Services*
2. Clinico-Social case review*
3. Sub centre, Primary Health Center and Community Health Center/ District Hospital
4. Anganwadi Centre
5. Water, sewage treatment & waste management plant
6. Industry visit
7. Infectious Disease Hospital
8. DOTS Center
9. Malaria Clinic
10. School Health.
11. Milk/ Dairy board,
12. Voluntary Counseling & Testing Center (VCTC)
13. Old Age Home,
14. Rehabilitation Center

*Both these visits are part of community/family orientation posting, as a compulsory community medicine posting. Family and hospital visits are for development of various skills in community and hospital settings

METHOD OF ASSESSMENT:

- Modified essay question,
- Short answer questions
- MCQs
- Problem solving exercises
- OSCE, OSPE, OSLER
- Epidemiological Exercise,
- Records Review.
- Checklist,
- Research Project reports &
- Oral Viva Voce

TEACHING LEARNING METHODS:

- Structured interactive sessions
- Small group discussion
- Focused group discussion (FGD)

- Participatory learning appraisal (PLA)
- Family and community visits
- Institutional visits
- Practical including demonstrations
- Problem based exercises
- Video clips
- Written case scenario
- Self learning tools
- Interactive learning
- e-modules

TIME OF EVALUATION:

Examination of Community Medicine should be at the end of 7th 9th semester and formative and summative assessment during internship so that we have a basic doctor competent to provide primary care.

LEARNING RESOURCE MATERIALS

- Text books
- Reference books
- Practical note books
- Internet resources
- Video films etc.

SUGGESTED TOPICS FOR LEARNING THROUGH e-MODULES

1. History of Medicine and Public Health
2. Environmental health
3. Nutrition (Except public health nutritional program)
4. Epidemiological methods
5. Screening
6. Planning cycle
7. Health Management techniques
8. Entomology
9. Biostatistics
10. Demography
11. Disaster management
12. Bio-medical waste management
13. International health
14. National health organizations

TOPICS FOR INTEGRATED TEACHING WITH DEPARTMENT OF COMMUNITY MEDICINE AS PARTICIPANT

1. Nutrition
2. Iron deficiency anemia
3. Communicable diseases with National Health programme like
 - a. HIV/AIDS
 - b. Tuberculosis
 - c. Malaria

- d. Polio
- e. Diarrhoeal diseases
- f. Leprosy
- g. Zoonotic diseases
- 4. Lifestyle related diseases with preventive aspects like
 - a. Diabetes
 - b. Hypertension
 - c. Stroke
 - d. Obesity
 - e. Cancers
- 5. Jaundice
- 6. Alcoholism
- 7. Death and Dying
- 8. Geriatric medicine
- 9. Adolescent Health
- 10. Rational drug use
- 11. Contraception
- 12. Industrial health
- 13. Ethical issues

TOPICWISE MARKS DISTRIBUTION IN COMMUNITY MEDICINE

TOPIC	PAPER-I	MARKS ALLOTTED
Concept of Community Medicine		5
Sociology		5
Environment including entomology		10
Biomedical waste		
Occupational Health		
Nutrition		10
Basic Epidemiology		10
Health Promotion and Education		10
Demography and Biostatistics		10
TOTAL		60

PAPER-II

Communicable and non communicable disease epidemiology	25
RCH & NRHM	10
Health planning, Management, Financing	5
Health care delivery system, Urban Health	10

Disaster management	10
Health legislation	
Care of elderly	
Mental Health	
International Health	
TOTAL	60

EACH PAPER SHOULD HAVE:

- A. Structured essay one question 10 marks
- B. Remaining structured short essay question 50 divided marks
- C. Around 50% problem based competency testing (cognitive domain) in theory question paper
- D. Each paper shall be of 90 minutes duration

DISTRIBUTION OF MARKS

TOTAL MARKS: 300

THEORY 150

Two papers (60 x 2)	120
Internal assessment (20%)	30

PRACTICAL 150

Internal assessment (20%)	30
Viva	20
OSCE (10 X 5)	50
OSPE (5X5)	25
Exercise	15
Family folder/ Project	10

Recommended Books In Community Medicine:

1. Textbook of Preventive and Social Medicine by K Park 19th edition
2. Textbook of Preventive and Social Medicine by Gupta & Ghai
3. Textbook of Preventive and Social Medicine by Gupta & Mahajan
4. Essentials of Community Medicine by Suresh Chandra
5. Introduction to Biostatistics by Sathya Swaroop
6. National Health Programme by Jugal Kishore
7. National Health Programme by D K Taneja
8. Textbook of Preventive & Social Medicine by Sunder Lal, Adarsh, Pankaj.
9. Textbook of Preventive & Social Medicine by T. Bhaskar Rao.
10. Public Health & Preventive Medicine By J. M. Last.
11. Biostatics by A. Indrayan
12. Methods in Biostatics by B.K.Mahajan

EVALUATION:

1. MANY COLLEGES SUGGESTED EVALUATION IN COMMUNITY MEDICINE TO BE DONE AT THE END OF 9TH SEMESTER, WITH OTHER MAJOR CLINICAL SUBJECTS.

2. **SUGGESTION RECEIVED FOR TWO PAPERS, AS WAS EARLIER, KEEPING IN MIND VASTENESS & NEED OF THIS SUBJECT.**
3. **TOTAL MARKS SUGGESTED VARIED FROM 200 TO 400, WITH ALMOST EQUAL DISTRIBUTION OF THEORY & PRACTICAL.**