

# COMMUNITY MEDICINE

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## Vision of Community Medicine:

Annexure I

The Indian Medical Graduate should be a community physician, delivering comprehensive care with compassion, utilizing research, relevant technology, and promoting community health through building community partnerships and advocacy.

## Goal:

To create an "Indian Medical Graduate" (IMG) possessing requisite knowledge, skills, attitudes, values and responsiveness, so that she or he may function appropriately and effectively as a physician of first contact of the community while being globally relevant.

## National Goals:

At the end of undergraduate program, the Indian Medical Graduate should be able to:

- (a) recognize "health for all" as a national goal and health right of all citizens and by undergoing training for medical profession fulfill his/her social obligations towards realization of this goal.
- (b) learn every aspect of National policies on health and devote herself/himself to its practical implementation.
- (c) achieve competence in practice of holistic medicine, encompassing promotive, preventive, curative and rehabilitative aspects of common diseases.
- (d) develop scientific temper, acquire educational experience for proficiency in profession and promote healthy living.
- (e) become exemplary citizen by observance of medical ethics and fulfilling social and professional obligations, so as to respond to national aspirations.

## Institutional Goals:

In consonance with the national goals, each medical institution should evolve institutional goals to define the kind of trained manpower (or professionals) they intend to produce. The Indian Medical Graduates coming out of a medical institute should:

- (a) be competent in diagnosis and management of common health problems of the individual and the community, commensurate with his/her position as a member of the health team at the primary, secondary or tertiary levels, using his/her clinical skills based on history, physical examination and relevant investigations.
- (b) be competent to practice preventive, promotive, curative and rehabilitative medicine in respect to the commonly encountered health problems.
- (c) appreciate rationale for different therapeutic modalities, be familiar with the administration of the "essential drugs" and their common side effects.
- (d) be able to appreciate the socio-psychological, cultural, economic and environmental factors affecting health and develop humane attitude towards the patients in discharging one's professional responsibilities.

## Goals for the learner:

In order to fulfil this goal, the Indian Medical Graduate must be able to function in the following roles appropriately and effectively:-

1. Clinician who understands and provides preventive, promotive, curative, palliative and holistic care with compassion.
2. Leader and member of the health care team and system with capabilities to collect, analyze, synthesize and communicate health data appropriately.
3. Communicator with patients, families, colleagues and community.
4. Lifelong learner committed to continuous improvement of skills and knowledge.
5. Professional, who is committed to excellence, is ethical, responsive and accountable to patients, community and profession

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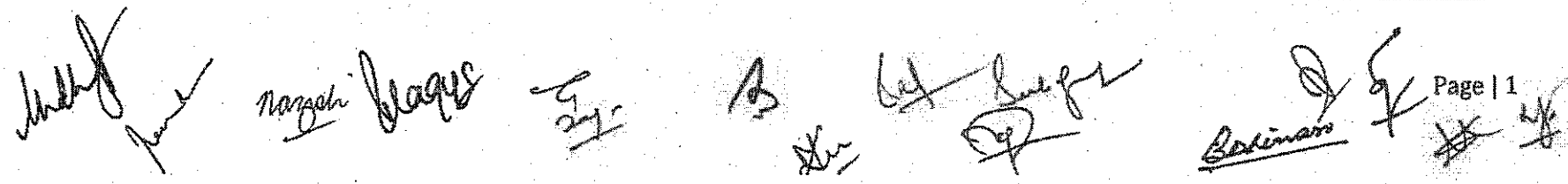
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Annexure I

**CBME – MBBS – COMMUNITY MEDICINE** (Topics, Competencies and Specific Learning Objectives)

No. (A)	Topics, Competencies and Specific Learning Objectives (B)	Domain K/S/A/C (C)	Level K/KH/SH/P (D)	Core Y/N (E)	Suggested T/L method (F)	Suggested Assessment Method (G)	Vertical Integration (H)	Horizontal Integration (I)
<b>Topic: Concept of Health and Disease</b> Number of competencies (indicated by CM here): (10) At the end of the session the student shall be able to:								
CM 1.1	Define and describe the concept of public health							
SLO 1.1.1	Explain the concept of health and disease	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.1.2	Describe the changing trends of health and disease	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.1.3	Define and describe evolution of Public health	K	K	Y	Lecture	Written/ Viva voce		
CM 1.2	Define Health, describe the concept of holistic health including concept of spiritual health and relativeness and determinants of health							
SLO 1.2.1	Know WHO definition of health and dimensions of health	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.2.2	Explain the concept and indices of well being	K	K	Y	Lecture	Written/ Viva voce		


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SLO 1.2.3	Describe spectrum of health	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.2.4	Enumerate and describe the determinants of health	K	K	Y	Lecture Small GD	Written/ Viva voce		
CM 1.3	Describe the characteristics of agent, host, environmental factors in health and disease and multifactorial etiology of disease							
SLO 1.3.1	Explain the concept of disease and illness	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.3.2	Describe epidemiological triad and web of disease causation	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.3.3	Describe the characteristics of agent, host, environment	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.3.4	Explain the role of interaction between agent, host, environment in disease causation	K	K	Y	Lecture Small GD	Written/Vi va voce		
CM 1.4	Describe and discuss the natural history of disease							
SLO 1.4.1	Describe natural history of disease in pre-pathogenesis and pathogenesis phase	K	K	Y	Lecture	Written/Vi va voce		
SLO 1.4.2	Explain the terms- risk factors and risk group	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.4.3	Explain spectrum of disease and iceberg phenomenon in disease	K	K	Y	Lecture Small GD	Written/ Viva voce		
CM 1.5	Describe the application of interventions at various levels of prevention							

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SLO 1.5.1	Describe the Levels of prevention	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.5.2	Explain the modes of intervention	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.5.3	Apply above concepts by giving suitable example	K	KH	Y	Lecture Small GD	Written/ Viva voce		
CM 1.6	<b>Describe and discuss the concepts, the principles of Health promotion and Education, IEC and Behavioral change communication (BCC)</b>							
SLO 1.6.1	Define Health education and Health Promotion	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.6.2	Discuss principles, various approaches and models of health education	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.6.3	Define and differentiate between Information Education Communication and Behaviour Change Communication	K	KH	Y	Lecture	Written/ Viva voce		
SLO 1.6.4	Discuss the role of IEC and BCC in various national programmes	K/C	KH	Y	Lecture Small GD	Written/ Viva voce		
CM 1.7	<b>Enumerate and describe health indicators</b>							
SLO 1.7.1	Enumerate and describe the commonly used health indicators	K	K	Y	Lecture	Written/Vi va voce		
SLO 1.7.2	Explain the importance of health indicators in planning and evaluating health care services	K	KH	Y	Lecture Small GD	Written/Vi va voce		
SLO	Calculate the commonly used health	S	SH/P	Y	DOAP	Written/		

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1.7.3	indicators with data provided					Viva voce Skill assessment		
<b>CM 1.8</b>	<b>Describe the demographic profile of India, and discuss its impact on health</b>							
SLO 1.8.1	Describe the health profile of India in terms of commonly used indicators	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.8.2	Explain the role of demographic profile on health	K	KH	Y	Lecture Small GD	Written/ Viva voce		
SLO 1.8.3	Interpret and compare the major health indicators of neighborhood countries (IMR/MMR/BR/DR)	K	KH	Y	Lecture Small GD	Written/ Viva voce		
<b>CM 1.9</b>	<b>Demonstrate the role of effective communication skills in health in a simulated environment</b>						AETCOM	
SLO 1.9.1	Enumerate and describe various types and methods of communication	K	K	Y	Lecture	Written/ Viva voce		
SLO 1.9.2	Describe the process and steps of communication	K	KH	Y	Lecture Role play Small GD Video	Written/ Viva voce		
SLO 1.9.3	Explain role of good communication in influencing health behaviour	K/A	KH		Lecture Case study	Written/Vi va voce		
SLO 1.9.4	Conduct IEC programme using good communication skills	K/S/A/C	K/KH/ SH/P	Y	Role play DOAP Video	Skill assessment		

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CM 1.10	Demonstrate the important aspect of doctor patient relationship in a simulated environment						AETCOM	
SLO 1.10.1	Describe the doctor patient relationship	K/A	K/KH	Y	Lecture Small GD	Written/ Viva Voce OSPE		
SLO 1.10.2	Explain the importance of communication in medical practice	K/A	K/KH	Y	Lecture Small GD	Written/ Viva Voce OSPE		
SLO 1.10.3	Demonstrate how doctor should deal with the patient	A/S/C	SH/P	Y	Role play Small GD Case study DOAP Video	Written/ Viva voce OSPE		
<b>Topic: Relationship of social and behavioural to health and disease</b> <b>Number of competencies: (5)</b>								
At the end of the session the student shall be able to:								
CM 2.1	Describe the steps and perform clinico-socio-cultural and demographic assessment of individual, family, community							
SLO 2.1.1	Explain the importance of socio-cultural and demographic assessment in health care	K	K	Y	Lecture Small GD	Written/Vi va voce		
SLO 2.1.2	Describe steps of socio-cultural and demographic assessment	K	K/KH	Y	Lecture Small GD	Written/ Viva Voce		

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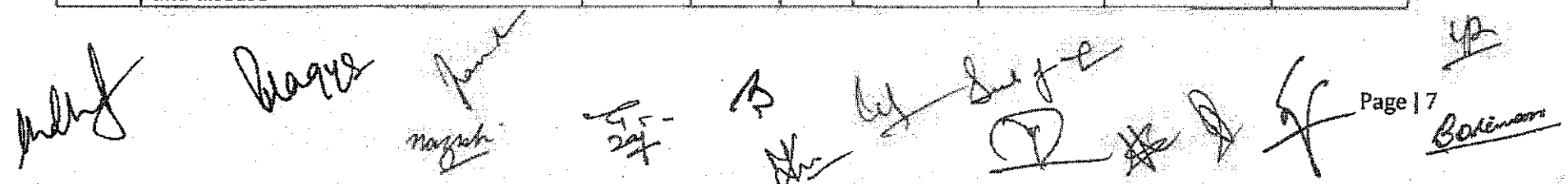
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<b>CM 2.3</b>	<b>Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior</b>							
SLO 2.3.1	Enumerate barriers to good health and health seeking behavior	K	K	Y	Lecture Small GD	Written/ Viva Voce		
SLO 2.3.2	Assess health status and health practices of individual, family and community	A/S	KH/SH	Y	Role play Small GD DOAP	Skill assessment		
SLO 2.3.3	Assess health seeking behavior of individual, family and community	A/S	KH/SH	Y	Role play Small GD DOAP	Skill assessment		
SLO 2.3.4	Identify the barriers to good health and health seeking behavior of individual, family and community	K/S	KH/SH	Y	Role play Small GD, DOAP	Skill assessment		
<b>CM 2.4</b>	<b>Describe social psychology, community behaviour and community relationship and their impact on health and diseases</b>							
SLO 2.4.1	Describe social psychology and its various aspects	K	K	Y	Lecture	Written/ Viva voce		
SLO 2.4.2	Describe community behavior and community relationships	K/A	K	Y	Lecture	Written/ Viva voce		
SLO 2.4.3	Describe impact of above two on health and diseases	K	K	Y	Lecture	Written/ Viva voce		
<b>CM 2.5</b>	<b>Describe poverty and social security measures and its relationship to health and disease</b>							


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SLO 2.5.1	Define poverty, its burden and poverty line in India	K	K	Y	Lecture	Written/ Viva voce		
SLO 2.5.2	Describe various health problems and diseases related to poverty	K	K	Y	Lecture	Written/ Viva voce		
SLO 2.5.3	Mention the government policies and programmes for social security	K	K	Y	Lecture	Written/ Viva voce		
<b>Topic: Environmental Health Problems</b>								
<b>Number of competencies: (8)</b>								
<b>At the end of the session the student shall be able to:</b>								
CM 3.1	Describe the health hazards of air, water, noise, radiation and pollution						General Medicine, ENT	
SLO 3.1.1	Describe health hazards of air pollution	K	K	Y	Lecture	Written/ Viva voce		
SLO 3.1.2	Describe health hazards water pollution	K	K	Y	Lecture	Written/ Viva voce		
SLO 3.1.3	Describe health hazards of noise pollution	K	K	Y	Lecture	Written/ Viva voce		
SLO 3.1.4	Describe health hazards of radiation	K	K	Y	Lecture	Written/ Viva voce		
CM 3.2	Describe concepts of safe and wholesome water, sanitary sources of water, water purification process, water quality standards, concepts of water conservation, and rainwater harvesting							
SLO 3.2.1	Describe safe and wholesome water	K	K	Y	Lecture Small GD	Written/ Viva voce		

SLO 3.2.2	Enumerate the sources of safe water	K	K	Y	Lecture	Written/ Viva voce		
SLO 3.2.3	Describe the standards for safe water and health problems due to excess and deficiency of various substances in water	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 3.2.4	List the different methods of water purification at different levels	K	K	Y	Lecture Video	Written/ Viva voce		
SLO 3.2.5	Discuss the need and importance of water conservation and rainwater harvesting	K	KH	Y	Lecture Small GD Video	Written/ Viva voce		
CM 3.3	Describe the etiology and basis of water borne diseases, jaundice, hepatitis, diarrheal diseases						Microbiology, General Medicine, Pediatrics	
SLO 3.3.1	Classify water-related diseases	K	K	Y	Lecture	Written/ Viva voce		
SLO 3.3.2	Describe the burden, epidemiological determinants, clinical spectrum, management and control of water related diseases	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 3.3.3	Describe the methods of household purification of water including principle of chlorination	K	KH	Y	Lecture Small GD	Written/ Viva voce		
SLO 3.3.4	Demonstrate the steps of handwashing	S	SH/P	Y	Lecture Video DOAP	Written/ Viva Voce Skill assessme		

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<b>CM 3.4</b>	<b>Describe the concept of solid waste, human excreta and sewage disposal</b>							
SLO 3.4.1	Define solid waste, sewage, sullage and describe the methods of solid waste and sewage disposal	K	K	Y	Lecture	Written/ Viva voce		
SLO 3.4.2	Describe health hazards of improper disposal of solid waste and excreta	K	K	Y	Lecture Small GD Case study	Written/ Viva voce		
<b>CM 3.5</b>	<b>Describe the standards of housing and effects of housing on health</b>							
SLO 3.5.1	Enumerate the standards of healthful housing	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 3.5.2	Discuss the effects of housing conditions on health	K	KH	Y	Lecture Small GD Case study	Written/ Viva voce		
SLO 3.5.3	Assess the housing condition of a family	S	SH/P	Y	Lecture Family visit Video DOAP	Written/ Viva voce Skill assessment		
<b>CM 3.6</b>	<b>Describe the role of vectors in the causation of diseases</b>						Microbiology	

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SLO 3.6.1	Define medical entomology and explain the role of vectors in disease transmission	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 3.6.2	Enumerate the arthropods of medical importance, along with their related diseases	K	K	Y	Lecture	Written/ Viva voce		
CM 3.7	Identify and describe the identifying features and life cycles of vectors of Public Health importance and their control measures						Microbiology	
SLO 3.7.1	Describe the identifying features and life cycles of vectors of public health importance	K	K	Y	Lecture Small GD Practical	Written/ Viva voce		
SLO 3.7.2	Identify the vectors of public health importance	S	SH		Lecture Small GD Practical	Skill assessment		
SLO 3.7.3	Describe the principles and techniques of vector control	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 3.7.4	Discuss the control measures for specific vectors of public health importance	K	KH	Y	Lecture, Small GD	Written/ Viva voce		
SLO 3.7.5	Explain the role of community in vector control and educate community members	K/A/S	SH	Y	Lecture Field	Written/ Viva voce		

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CM 3.8	Describe the mode of action, application of commonly used insecticides and rodenticides						Pharmacology	
SLO 3.8.1	Enlist commonly used insecticides and rodenticides and describe their modes of action	K	K	Y	Lecture	Written/ Viva voce		
SLO 1. 3.8.2	Discuss the methods of using common insecticides and rodenticides	K	KH	Y	Lecture Small GD	Written/ Viva voce		
<b>Topic: Principles of health promotion and education</b>								
<b>Number of competencies: (3)</b>								
<b>At the end of the session the student shall be able to:</b>								
CM 4.1	2. Describe various methods of health education with their advantages and limitations							
SLO 4.1.1	3. Define health education and describe the principles, aims and objectives of health education	K	K	Y	Lecture	Written/ Viva voce		
SLO 4.1.2	4. Describe the advantages and limitations of different methods of health education	K	K	Y	Lecture	Written/ Viva voce		
SLO 4.1.3	5. Describe and demonstrate different methods of health education and its application in public health	K/A/S	SH	Y	Lecture Small GD Role play DOAP	Written/ Viva voce Skill assessment		

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<b>CM 6.4.2</b>	<b>Describe the methods of organizing health promotion and education and counseling activities at individual, family and community settings</b>							
SLO 4.2.1	Discuss the methods of health education used for individual, group and community approach	K	KH	Y	Lecture	Written/ Viva voce		
SLO 4.2.2	Plan and organize health education sessions at individual, family and community settings	S	SH	Y	Lecture Role play DOAP	Written/ Viva voce		
SLO 4.2.3	Demonstrate method of counseling an individual	S	SH	Y	DOAP	Skill assessment		
<b>CM 7.4.3</b>	<b>Demonstrate and describe the steps in evaluation of health promotion and education programme</b>	K	K	Y	Lecture	Written/ Viva voce		
SLO 4.3.1	Define evaluation and describe types of evaluation	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 4.3.2	Describe the steps of evaluation of a programme	K	KH		Lecture Small GD			
SLO 4.3.3	Evaluate a health promotion and education programme in simulated environment	S	SH	Y	Small GD Role play Case study DOAP	Written/ Viva voce OSPE		
<b>Topic: Nutrition</b>								
<b>Number of competencies: (08)</b>								

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At the end of the session the student shall be able to:							
CM 5.1	Describe the common sources of various nutrients and special nutrient requirement as per age, sex, activity, physiological conditions						General Medicine, Pediatrics
SLO 5.1.1	Enumerate the various types of important nutrients and mention their sources in terms of various food groups	K	K	Y	Lecture	Written/ Viva voce	
SLO 5.1.2	Describe the nutritional requirement of individuals according to activity status	K	KH	Y	Lecture Small GD	Written/ Viva voce	
SLO 5.1.3	Describe the age-related nutritional needs and needs of special groups like infants, children and adolescents and that of pregnant and lactating women	K	KH	Y	Lecture Small GD	Written/ Viva voce	
CM 5.2	Describe and demonstrate the correct method of performing nutritional assessment of individuals, families and the community by using appropriate method						General Medicine, Pediatrics
SLO 5.2.1	Describe various methods of nutritional assessment along with their advantages and disadvantages	K	K	Y	Lecture Small GD	Written/ Viva voce	
SLO 5.2.2	Explain the need for nutritional assessment of individuals, family and community	K	K	Y	Lecture Small GD	Written/ Viva voce	
SLO 5.2.3	Elicit, document and present nutritional history (24-hour recall) and perform a dietary recall method	S	SH/P	Y	DOAP Family visit	Skill Assessme nt	
SLO	Perform nutritional assessment for	S	SH/P	Y	DOAP	Skill	

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	pregnant, lactating, geriatric population				DOAP	Skill assessment		
SLO 5.4.4	Plan a diet for individuals with diabetes, hypertension and heart disease and counsel them accordingly	S/C	SH/P	Y	DOAP Role Play	Written/ Viva voce Skill assessment		
CM 5.5	Describe the methods of nutritional surveillance, principles of nutritional education and rehabilitation in the context of socio-cultural factors						General Medicine, Pediatrics	
SLO 5.5.1	Define nutritional surveillance, describe its need and describe the method of undertaking nutritional surveillance in a community	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 5.5.2	Explain and apply the principles and methods of nutritional education	S/C	SH/P	Y	DOAP Role Play	Written/ Viva voce Skill assessment		
SLO 5.5.3	Define nutritional rehabilitation and describe its application in different conditions of malnutrition	S	P	Y	Lecture Field visit Visit to paediatric dept	OSCE/Case discussion /viva		
CM 5.6	Enumerate and discuss the national nutrition policy, important national						Pediatrics	

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	<b>nutritional programmes including ICDS etc.</b>							
SLO 5.6.1	Describe the national nutrition policy with its salient features	K	K	Y	Lecture	Written/ Viva voce		
SLO 5.6.2	Explain the goals, objectives and strategies in National Nutrition Mission (POSHAN), Integrated Child Development Services (ICDS), Mid-Day Meal Programme	K	KH	Y	Lecture Small GD	Written/ Viva voce		
SLO 5.6.3	Describe the process of implementation of ICDS programme in the community	K	KH	Y	Lecture Visit to ICDS centre	Written/ Viva voce		
SLO 5.6.4	Enumerate other schemes, programs and their strategies on nutrition	K	K	Y	Lecture Small GD	Written/ Viva voce		
CM 5.7	<b>Describe food hygiene</b>							Microbiolo gy
SLO 5.7.1	Define food hygiene and differentiate healthy and unhealthy food practices	K	KH	Y	Lecture Small GD	Written/ Viva voce		
SLO 5.7.2	Assess food hygiene practices of a family	S	SH/P	Y	Lecture DOAP Family visit	Written/ Viva voce Skill assessment		
SLO 5.7.3	Describe causes and features of food poisoning, along with prevention and control of food poisoning	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 5.7.4	Outline steps for investigation of an outbreak of food poisoning and outline	K	KH	Y	Lecture Small GD	Written/ Viva voce		

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	measures for prevention and control of food poisoning							
<b>CM 5.8</b>	<b>Describe and discuss the importance and methods of food fortification and effects of additives and adulteration</b>							Pediatrics
SLO 5.8.1	Define and enlist methods of food fortification and describe its importance in health	K	K	Y	Lecture	Written/ Viva voce		
SLO 5.8.2	Define food adulteration and describe harmful effects of specific adulterants on health	K	K	Y	Lecture Small GD	Written/ Viva voce		
SLO 5.8.3	Describe the legislation related to food safety and standards	K	K	Y	Lecture	Written/ Viva voce		
<b>Topic: Basic statistics and its applications</b>								
<b>Number of competencies: (04)</b>								
<b>At the end of the session the student shall be able to:</b>								
<b>CM 6.1</b>	<b>Formulate a research question for a study</b>							General Medicine, Pediatrics
SLO 6.1.1	Identify areas of research on health problems, with lacunae in existing knowledge	K	KH	Y	Lecture	Written/ Viva voce		
SLO 6.1.2	Formulate research question for study so as to add to existing knowledge	K	KH	Y	Lecture	Written/ Viva voce		
<b>CM 6.2</b>	<b>Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data</b>							General Medicine, Pediatrics

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SLO 6.2.1	Describe the various sources of health information	K	K	Y	Lecture	Written/ Viva voce		
SLO 6.2.2	Describe the methods of population survey	K	K	Y	Lecture	Written/ Viva voce		
SLO 6.2.3	Prepare tables, charts and diagrams for presentation of data	S	SH/P	Y	Lecture DOAP	Written/ Viva voce Skill assessment		
CM 6.3	Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs						General Medicine, Pediatrics	
SLO 6.3.1	Explain sampling and non-sampling error	K	K	Y	Lecture	Written/ Viva voce		
SLO 6.3.2	Explain the concepts of null and alternative hypothesis, confidence interval	K	KH	Y	Lecture	Written/ Viva voce		
SLO 6.3.3	Enumerate common tests of significance	K	KH	Y	Lecture	Written/ Viva voce		
SLO 6.3.4	Work out standard errors of mean and proportion, chi square test	S	SH/P	Y	Lecture DOAP	Written/ Viva voce Skill assessment		
CM 6.4	Enumerate, discuss and demonstrate common sampling techniques, simple statistical methods, frequency distribution, measures of						General Medicine, Pediatrics	

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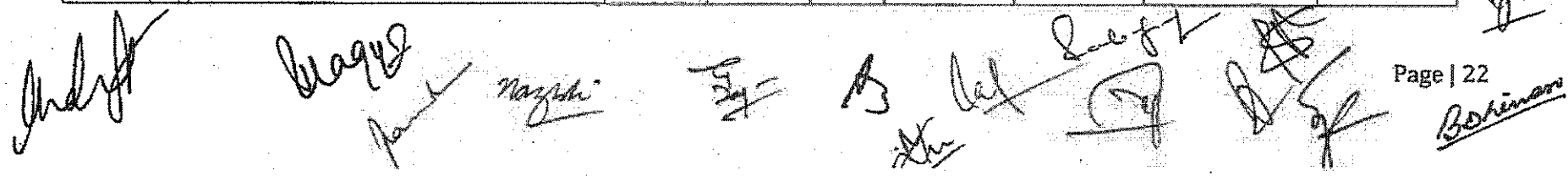
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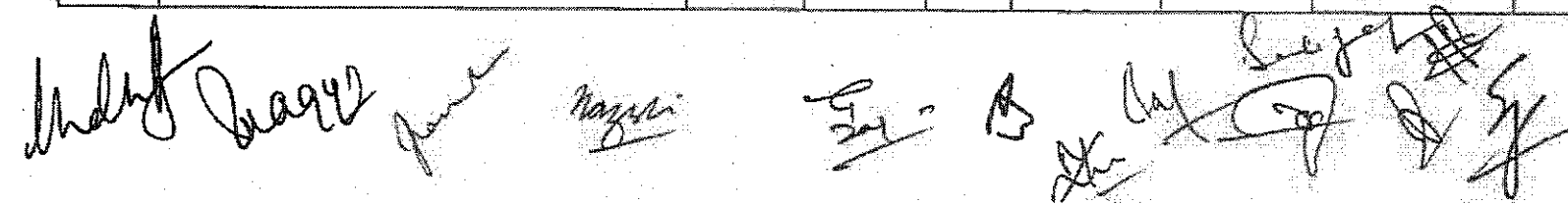
central tendency and dispersion							
SLO 6.4.1	Enumerate and describe probability and non-probability sampling techniques	K	K	Y	Lecture	Written/ Viva voce	
SLO 6.4.2	Explain the concept of normal distribution and draw a normal curve	K	SH/P	Y	Lecture	Written/ Viva voce	
SLO 6.4.3	Analyse the data in terms of location, frequency, central tendency and dispersion	S	SH/P	Y	Lecture DOAP	Written/ Viva voce Skill assessment	
<b>Topic: Epidemiology</b>							
<b>Number of competencies: (09)</b>							
<b>At the end of the session the student shall be able to:</b>							
CM 7.1	Define Epidemiology and describe and enumerate the principles, concepts and uses						General Medicine
SLO 7.1.1	Define epidemiology and explain its meaning	K	K	Y	Lecture	Written / Viva	
SLO 7.1.2	Explain the three main components of epidemiology – frequency, distribution and determinants of disease	K	K	Y	Lecture	Written / Viva Skill assessment	
SLO 7.1.3	Enumerate and explain the uses of epidemiology	K	K	Y	Lecture	Written / Viva	
CM 7.2	Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable						General Medicine



SLO 7.3.2	Enumerate and describe the various morbidity and mortality indicators in common use	K/S	KH/SH	Y	Lecture	Written / Viva		
SLO 7.3.3	Calculate the commonly used indicators from a given set of data	S	SH/P	Y	Lecture DOAP	Written / Viva Skill assessment		
<b>CM 7.5</b>	<b>Enumerate, define, describe and discuss epidemiological study designs</b>						General Medicine	
SLO 7.5.1	Enumerate the epidemiological research methods	K	K	Y	Lecture	Written / Viva		
SLO 7.5.2	Discuss the descriptive, analytical and experimental study designs in common use, with example	K	KH	Y	Lecture	Written / Viva		
SLO 7.5.3	Explain the method of analysis and measure the disease and its risk from the various study designs	S	SH	Y	Lecture	Written / Viva		
<b>CM 7.6</b>	<b>Enumerate and evaluate the need of screening tests</b>						General Medicine	
SLO 7.6.1	Enumerate the need and uses of screening tests	K	K	Y	Lecture	Written / Viva		
SLO 7.6.2	Explain the criteria to be fulfilled by the disease to be screened and test to be used, for conducting a screening programme	K	K	Y	Lecture	Written / Viva		
SLO 7.6.3	Calculate the validity and predictive accuracy of a screening test using hypothetical data	S	SH/P	Y	Lecture DOAP	Written / Viva Skill		


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						assessment		
SLO 7.6.4	Enumerate the methods used to evaluate a screening programme	K	K	Y	Lecture	Written / Viva		
CM 7.7	Describe and demonstrate the steps in the investigation of an epidemic of communicable disease and describe the principles of control measures						General Medicine	Microbiology
SLO 7.7.1	Enumerate the types of epidemics	K	K	Y	Lecture	Written / Viva		
SLO 7.7.2	Draw an epidemic curve	S	SH/P	Y	Lecture DOAP	Written / Viva		
SLO 7.7.3	Enumerate the objectives of epidemic investigation	K	KH	Y	Lecture	Written / Viva		
SLO 7.7.4	Outline and explain the steps of investigation of an epidemic or outbreak	K	KH	Y	Lecture	Written / Viva		
CM 7.8	Describe the principles of association, causation and biases in epidemiological studies						General Medicine	
SLO 7.8.1	Describe the various types of association with examples	K	K	Y	Lecture	Written / Viva		
SLO 7.8.2	Explain the criteria for establishing causal association with example	K	K	Y	Lecture	Written / Viva		
SLO 7.8.3	Explain the concept of bias and confounding	K	K	Y	Lecture	Written / Viva		
SLO 7.8.4	Describe the various types of bias commonly encountered in different study	K	K	Y	Lecture	Written / Viva		


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	designs							
<b>CM 7.9</b>	<b>Describe and demonstrate the application of computers in Epidemiology</b>							
SLO 7.9.1	Discuss the use of computer in epidemiology	K	KH	Y	Lecture	Written / Viva		
SLO 7.9.2	Use computer for data entry, data presentation and simple analysis of data	K	SH/P	Y	Lecture DOAP	Written / Viva Skill assessment		
<b>Topic: Epidemiology of communicable and non-communicable diseases</b>								
<b>Number of competencies: (07)</b>								
<b>At the end of the session the student shall be able to:</b>								
<b>CM 8.1</b>	<b>Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for communicable diseases</b>						General Medicine, Pediatrics	Microbiology, Pathology
SLO 8.1.1	Describe the measures for prevention of communicable diseases	K	KH	Y	Lecture	Written / Viva		
SLO 8.1.2	Enumerate the laboratory tests conducted at the primary health care level	K	KH	Y	Lecture	Written / Viva		
SLO 8.1.3	Discuss the management of the common disease conditions at the level of sub centre and primary health centre	K	KH	Y	Lecture	Written / Viva		
<b>CM 8.2</b>	<b>Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases</b>						General Medicine	

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	<b>(diabetes, Hypertension, Stroke, obesity and cancer etc.)</b>							
SLO 8.2.1	Describe the measures for prevention of non communicable diseases	K	KH	Y	Lecture	Written / Viva		
SLO 8.2.2	Enumerate the laboratory tests conducted at the primary health care level	K	KH	Y	Lecture	Written / Viva		
SLO 8.2.3	Discuss the management of the common disease conditions at the level of sub centre and primary health centre	K	KH	Y	Lecture	Written / Viva		
CM 8.3	Enumerate and describe disease specific National Health Programs including their prevention and treatment of a case						General Medicine, Pediatrics	
SLO 8.3.1	Enumerate the national programmes for prevention of communicable and non communicable diseases of public health importance	K	K	Y	Lecture	Written / Viva		
SLO 8.3.2	Outline the objectives, goals and strategies under each national programme	K	K	Y	Lecture	Written / Viva		
SLO 8.3.3	Describe the treatment regime followed for the common disease conditions under the respective national programmes	K	K	Y	Lecture	Written / Viva		
CM 8.4	Describe the principles and enumerate the measures to control a disease epidemic						General Medicine, Pediatrics	
SLO 8.4.1	Explain the principle for control of an epidemic	K	K	Y	Lecture	Written / Viva		
SLO	Describe the measures to be implemented	K	KH	Y	Lecture	Written /		

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						Skill assessment		
SLO 9.2.3	Interpret the results to explain their effect on population of the area	S	SH	Y	Lecture	Written / Viva		
CM 9.3	Enumerate and describe the causes of declining sex ratio and its social and health implications							
SLO 9.3.1	Define sex ratio	K	K	Y	Lecture	Written / Viva		
SLO 9.3.2	Mention the sex ratio of India and its states, with focus on states with declining sex ratio	K	K	Y	Lecture	Written / Viva		
SLO 9.3.3	Enumerate the causes of declining sex ratio	K	K	Y	Lecture	Written / Viva		
SLO 9.3.4	Explain the consequences of declining sex ratio and its social importance	K	K	Y	Lecture	Written / Viva		
CM 9.4	Enumerate and describe the causes and consequences of population explosion and population dynamics of India							
SLO 9.4.1	Describe the size and composition of population of India	K	K	Y	Lecture	Written / Viva		
SLO 9.4.2	Define population explosion	K	K	Y	Lecture	Written / Viva		
SLO 9.4.3	Enumerate the causes of population explosion	K	K	Y	Lecture	Written / Viva		

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SLO 9.4.4	Discuss the consequences of population explosion on physical, mental, social and environmental health	K	K	Y	Lecture	Written / Viva		
<b>CM 9.5</b>	<b>Describe the methods of population control</b>						Obstetrics & Gynaecology	
SLO 9.5.1	Discuss the measures that can be taken for prevention and control of population explosion	K	K	Y	Lecture	Written / Viva		
SLO 9.5.2	Enumerate the commonly used methods of contraception for spacing and limiting of births	K	K	Y	Lecture	Written / Viva		
SLO 9.5.3	Describe each method, along with adverse effects	K	KH	Y	Lecture	Written / Viva		
SLO 9.5.4	Describe the method of implementation of family welfare programme in India	K	K	Y	Lecture	Written / Viva		
<b>CM 9.6</b>	<b>Describe the National Population Policy</b>							
SLO 9.6.1	Define the objectives of National Population Policy	K	K	Y	Lecture	Written / Viva		
SLO 9.6.2	Enumerate the national socio-demographic goals	K	K	Y	Lecture	Written / Viva		
SLO 9.6.3	Describe the strategies designed for population control under the National Population Policy	K	K	Y	Lecture	Written / Viva		
<b>CM 9.7</b>	<b>Enumerate the sources of vital statistics including census, SRS, NFHS, NSSO etc.</b>							
SLO	Enumerate the sources of information on	K	K	Y	Lecture	Written /		

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9.7.1	vital statistics					Viva	
SLO 9.7.2	Describe the important sources of information	K	K	Y	Lecture	Written / Viva	
<b>Topic: Reproductive, maternal and child health</b>							
<b>Number of competencies: (09)</b>							
<b>At the end of the session the student shall be able to:</b>							
CM 10.1	Describe the current status of Reproductive, maternal, newborn and Child Health						Obstetrics & Gynaecology, Pediatrics
SLO 10.1.1	Mention the current values for important indicators related to reproductive, maternal, newborn and child health (RMNCH) in India	K	K	Y	Lecture	Written / Viva	
SLO 10.1.2	Describe the programmes implemented for RMNCH	K	K	Y	Lecture	Written / Viva	
CM 10.2	Enumerate and describe the methods of screening high risk groups and common health problems						Pediatrics, Obstetrics & Gynaecology
SLO 10.2.1	Enumerate the methods of screening high risk groups	K	K	Y	Lecture	Written / Viva	
SLO 10.2.2	Describe the method for newborn screening	K	KH	Y	Lecture	Written / Viva	
SLO 10.2.3	Describe the Rashtriya Bal Swasthya Karyakram	K	K	Y	Lecture	Written / Viva	
SLO 10.2.4	Screen children to identify presence of malnutrition	K	SH/P	Y	Lecture Health Centre	Written / Viva Skill	

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<b>CM 10.3</b>	<b>Describe local customs and practices during pregnancy, childbirth, lactation and child feeding practices</b>						Pediatrics, Obstetrics & Gynaecology	
SLO 10.3.1	Describe the local customs related to maternal and child health	K	K	Y	Lecture	Written / Viva		
SLO 10.3.2	Identify beneficial and harmful practices	K	K	Y	Lecture	Written / Viva		
<b>CM 10.4</b>	<b>Describe the reproductive, maternal, newborn &amp; child health (RMCH); child survival and safe motherhood interventions</b>						Obstetrics & Gynaecology, Pediatrics	
SLO 10.4.1	Describe the interventions during the antenatal, intranatal and postpartum periods for ensuring maternal health	K	K	Y	Lecture	Written / Viva		
SLO 10.4.2	Describe the package of services for child survival, promotion of health and prevention of diseases in children	K	K	Y	Lecture	Written / Viva		
SLO 10.4.3	Describe the services for adolescents under the programme	K	K	Y	Lecture	Written / Viva		
<b>CM 10.5</b>	<b>Describe Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs.</b>						Pediatrics	
SLO 10.5.1	Enlist the disease conditions covered under the Universal Immunisation Programme and describe the time, site and route of	K	K	Y	Lecture	Written / Viva		

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	administration of each vaccine, and adverse effects						
SLO 10.5.2	Describe Mission Indradhanush	K	K	Y	Lecture	Written / Viva	
SLO 10.5.3	Enumerate the health problems included in IMNCI	K	K	Y	Lecture	Written / Viva	
SLO 10.5.4	Enlist the criteria for assessment and classification of the various health problems with the help of flowchart	K	K	Y	Lecture	Written / Viva	
SLO 10.5.5	Describe the management of each health problem	K	KH	Y	Lecture	Written / Viva	
SLO 10.5.6	Assess, classify and suggest management for a sick child	K	SH/P	Y	Lecture Health Centre visit	Written / Viva Skill assessment	
CM 10.6	Enumerate and describe various family planning methods, their advantages and shortcomings						
SLO 10.6.1	Enumerate and classify the temporary and terminal methods of family planning	K	K	Y	Lecture	Written / Viva	
SLO 10.6.2	Describe each method in terms of use, contraindication and adverse effects	K	KH	Y	Lecture	Written / Viva	
CM 10.7	Enumerate and describe the basis and principles of the Family Welfare Program including the organization, technical and operational aspects						

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SLO 10.7.1	Describe the family welfare services provided under the RMNCH+A Programme	K	K	Y	Lecture	Written / Viva		
SLO 10.7.2	Describe the organisational structure for implementation of the programme	K	K	Y	Lecture	Written / Viva		
CM 10.8	<b>Describe the physiology, clinical management and principles of adolescent health including ARSH</b>							
SLO 10.8.1	Enumerate common health problems of adolescents	K	K	Y	Lecture	Written / Viva		
SLO 10.8.2	Discuss management of these problems	K	K	Y	Lecture	Written / Viva		
SLO 10.8.3	Describe the adolescent reproductive and health services (ASRSH) provided under RMNCH+A programme	K	K	Y	Lecture	Written / Viva		
CM 10.9	<b>Describe and discuss gender issues and women empowerment</b>							
SLO 10.9.1	Discuss the gender issues in India	K	K	Y	Lecture	Written / Viva		
SLO 10.9.2	Discuss the reasons for gender bias and its consequences	K	K	Y	Lecture	Written / Viva		
SLO 10.9.3	Describe ways to promote women empowerment and improve position of women in society	K	K	Y	Lecture	Written / Viva		
<b>Topic: Occupational Health</b>								
<b>Number of competencies: (05)</b>								
At the end of the session the student shall be able to:								
CM	Enumerate and describe the presenting							

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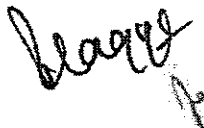


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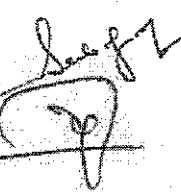
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<b>11.1</b>	<b>features of patients with occupational illness including agriculture</b>						
SLO 11.1.1	Enumerate and describe the various types of pneumoconiosis	K	K	Y	Lecture	Written/Vi va voce	
SLO 11.1.2	Enumerate and describe the various types of occupational cancers	K	K	Y	Lecture	Written/Vi va voce	
SLO 11.1.3	Enumerate and describe the health hazards of agricultural workers	K	K/KH	Y	Lecture	Written/Vi va voce	
<b>11.2</b>	<b>Describe the role, benefits and functioning of the Employees' State Insurance scheme</b>						
SLO 11.2.1	Enlist the establishments covered under the Employees' State Insurance Scheme (ESIS)	K	K	Y	Lecture	Written/Vi va voce	
SLO 11.2.2	Enumerate and describe the benefits provided under the ESI Act 1948	K	K	Y	Lecture	Written/Vi va voce	
SLO 11.2.3	Describe the administrative structure for implementing the ESI Scheme	K	K	Y	Lecture	Written/Vi va voce	
<b>11.3</b>	<b>Enumerate and describe specific occupational health hazards, their risk factors and preventive measures</b>						
SLO 11.3.1	Enlist and describe the occupational hazards	K	K	Y	Lecture Factory Visit	Written/Vi va voce	
SLO 11.3.2	Enlist the different occupational diseases due to physical, chemical and biological agents	K	K	Y	Lecture Factory Visit	Written/Vi va voce	









SLO 11.3.3	Discuss the measures for prevention of occupational diseases	K	K	Y	Lecture Factory Visit	Written/Vi va voce		
SLO 11.3.4	Describe the provisions under the Factories Act 1948, for promotion of health and prevention of diseases in factory workers	K	K	Y	Lecture	Written/Vi va voce		
11.4	<b>Describe the principles of ergonomics in health preservation</b>							
SLO 11.4.1	Define ergonomics	K	K	Y	Lecture	Written/Vi va voce		
SLO 11.4.2	Explain the role and importance of ergonomics in promotion of health of workers and prevention of occupational diseases	K	K	Y	Lecture Factory Visit	Written/Vi va voce		
11.5	<b>Describe occupational disorders of health professionals and their prevention &amp; management</b>							
SLO 11.5.1	Enlist and describe occupational hazards of health professionals	K	K/KH	Y	Lecture Case study	Written/Vi va voce		
SLO 11.5.2	Discuss prevention and management of occupational disorders of health professionals	K	K	Y	Lecture	Written/Vi va voce		
<b>Topic: Geriatric services</b>								
<b>Number of competencies: (04)</b>								
<b>At the end of the session the student shall be able to:</b>								
CM 12.1	Define and describe the concept of Geriatric services						General Medicine	

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SLO 12.1.1	Define geriatric age group	K	K	Y	Lecture	Written/Vi va voce		
SLO 12.1.2	Discuss the necessity of providing geriatric health services	K	K	Y	Lecture	Written/Vi va voce		
CM 12.2	<b>Describe health problems of aged population</b>						General Medicine	
SLO 12.2.1	Enumerate and describe the health problems occurring due to the aging process	K	K	Y	Lecture Case study Field Visit	Written/Vi va voce		
SLO 12.2.2	Enumerate and describe the long-term illnesses commonly occurring in the geriatric population	K	K	Y	Lecture Case study Field Visit	Written/Vi va voce		
SLO 12.2.3	Enumerate and describe the mental health problems likely to occur in the geriatric population	K	K	Y	Lecture Case study Field Visit	Written/Vi va voce		
CM 12.3	<b>Describe the prevention of health problems of aged population</b>						General Medicine	
SLO 12.3.1	Describe prevention of physical health problems of the elderly population	K	K	Y	Lecture	Written/Vi va voce		
SLO 12.3.2	Describe prevention mental health problems of the elderly population	K	K	Y	Lecture	Written/Vi va voce		
CM 12.4	<b>Describe National program for elderly</b>						General Medicine	
SLO 12.4.1	Mention the salient features of the National Policy for Older Persons	K	K	Y	Lecture	Written/Vi va voce		
SLO 12.4.2	State the objectives of the National Programme for Health Care of the Elderly	K	K	Y	Lecture	Written/Vi va voce		

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	(NPHCE)						
SLO 12.4.3	Describe the strategies and method of implementation of the NPHCE	K	K	Y	Lecture	Written/Vi va voce	
<b>Topic: Disaster Management</b>							
<b>Number of competencies: (04)</b>							
<b>At the end of the session the student shall be able to:</b>							
CM 13.1	Define and describe the concept of Disaster management						General Surgery, General Medicine
SLO 13.1.1	Define disaster	K	K	Y	Lecture	Written/Vi va voce	
SLO 13.1.2	Enumerate the health hazards following common types of disasters	K	K	Y	Lecture	Written/Vi va voce	
SLO 13.1.3	Discuss the concept and aspects of disaster management	K	K	Y	Lecture	Written/Vi va voce	
CM 13.2	Describe disaster management cycle						General Surgery, General Medicine
SLO 13.2.1	Enumerate the phases in the disaster management cycle	K	K	Y	Lecture	Written/Vi va voce	
SLO 13.2.2	Describe the activities undertaken in the different phases of the disaster management cycle	K	KH	Y	Lecture	Written/Vi va voce	
CM 13.3	Describe man-made disasters in the world and in India						General Surgery,

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<b>CM 14.2</b>	<b>Describe various methods of treatment of hospital waste</b>						Microbiology
SLO 14.2.1	Describe the various methods of treatment and disposal of hospital waste	K	K	Y	Lecture	Written/Viva voce	
SLO 14.2.2	Explain the advantages and disadvantages of each method	K	K	Y	Lecture	Written/Viva voce	
<b>CM 14.3</b>	<b>Describe laws related to hospital waste management</b>						Microbiology
SLO 14.3.1	Describe the categorization of various types of biomedical waste	K	K/KH/S H	Y	Lecture Hospital Visit	Written/Viva voce	
SLO 14.3.2	Mention the method of segregation of waste at source and by colour coding	KS	K/KH/S/ P	Y	Lecture Hospital Visit	Written/Viva voce	
SLO 14.3.3	Outline the treatment and disposal options of each category of biomedical waste	K	KH	Y	Lecture	Written/Viva voce	
<b>Topic: Mental Health</b>							
<b>Number of competencies: (03)</b>							
<b>At the end of the session the student shall be able to:</b>							
<b>CM 15.1</b>	<b>Define and describe the concept of mental Health</b>						Psychiatry
SLO 15.1.1	Discuss the concept of mental health	K	K	Y	Lecture	Written/Viva voce	
SLO 15.1.2	Describe the characteristics of a mentally healthy person	K	K	Y	Lecture	Written/Viva voce	
SLO	Enumerate the factors that lead to mental	K	K	Y	Lecture	Written/Viva voce	

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15.1.3	illness					va voce		
<b>CM 15.2</b>	<b>Describe warning signals of mental health disorder</b>						Psychiatry	
SLO 15.2.1	Describe warning signs of poor mental health	K	K	Y	Lecture	Written/Vi va voce		
SLO 15.2.2	Enlist mental and behavioural disorders according to International Classification of Diseases	K	K	Y	Lecture	Written/Vi va voce		
<b>CM 15.3</b>	<b>Describe National Mental Health program</b>						Psychiatry	
SLO 15.3.1	Describe the organization and implementation of National Mental Health Programme	K	K	Y	Lecture	Written/Vi va voce		
SLO 15.3.2	Describe the goals and objectives of the District Mental Health programme	K	K	Y	Lecture	Written/Vi va voce		
SLO 15.3.3	Discuss the salient features of the Mental Health Care Act	K	K	Y	Lecture	Written/Vi va voce		
<b>Topic: Health planning and management</b>								
<b>Number of competencies: (04)</b>								
<b>At the end of the session the student shall be able to:</b>								
<b>CM 16.1</b>	<b>Define and describe the concept of Health planning</b>							
SLO 16.1.1	Define health planning	K	K	Y	Lecture	Written/Vi va voce		
SLO 16.1.2	Explain the necessity of proper health planning	K	K	Y	Lecture	Written/Vi va voce		

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SLO 16.1.3	Differentiate between objectives, targets and goals and discuss the importance of clearly defining these in a health plan	K	K	Y	Lecture	Written/Viva voce		
<b>CM 16.2</b>	<b>Describe planning cycle</b>							
SLO 16.2.1	Explain the concept of cycle in health planning	K	K	Y	Lecture	Written/Viva voce		
SLO 16.2.2	Describe the steps in a planning cycle	K	K	Y	Lecture	Written/Viva voce		
SLO 16.2.3	Formulate a plan for any service to be delivered at the primary health care level	K	KH	Y	Lecture	Written/Viva voce		
<b>CM 16.3</b>	<b>Describe Health management techniques</b>							
SLO 16.3.1	Define management	K	K	Y	Lecture	Written/Viva voce		
SLO 16.3.2	Describe the various management methods and techniques commonly used in the field of health	K	K	Y	Lecture	Written/Viva voce		
<b>CM 16.4</b>	<b>Describe health planning in India and National policies related to health and health planning</b>							
SLO 16.4.1	Discuss the recommendations of the various health committees that contributed to planning the health care delivery system in India	K	K	Y	Lecture	Written/Viva voce		
SLO 16.4.2	Describe the thrust areas in health care, of the most recent five-year plan	K	K	Y	Lecture	Written/Viva voce		

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SLO 16.4.3	Describe the organisation responsible for formulating developmental plans in India	K	K	Y	Lecture	Written/Vi va voce		
<b>Topic: Health care of the community</b>								
<b>Number of competencies: (05)</b>								
<b>At the end of the session the student shall be able to:</b>								
<b>CM 17.1</b>	<b>Define and describe the concept of health care to community</b>							
SLO 17.1.1	Define community	K	K	Y	Lecture	Written/Vi va voce		
SLO 17.1.2	Explain the importance of providing health care at the community level	K	K	Y	Lecture	Written/Vi va voce		
SLO 17.1.3	Describe the method of providing health care to a community and families within a community	K	KH	Y	Lecture	Written/Vi va voce		
<b>CM 17.2</b>	<b>Describe community diagnosis</b>							
SLO 17.2.1	Explain the concept and importance of community diagnosis	K/S/A/ C	K/KH/P	Y	Lecture Field Visit Case study	Written/Vi va voce		
SLO 17.2.2	Describe aspects on which community diagnosis is made	K	K	Y	Lecture	Written/Vi va voce		
SLO 17.2.3	Discuss the method of undertaking community identification and community diagnosis	K	K	Y	Lecture	Written/Vi va voce		
SLO 17.2.4	Conduct survey of a community and make community diagnosis	K/A/S	K/KH/P	Y	Lecture Field Visit DOAP	Written/Vi va voce Skill		

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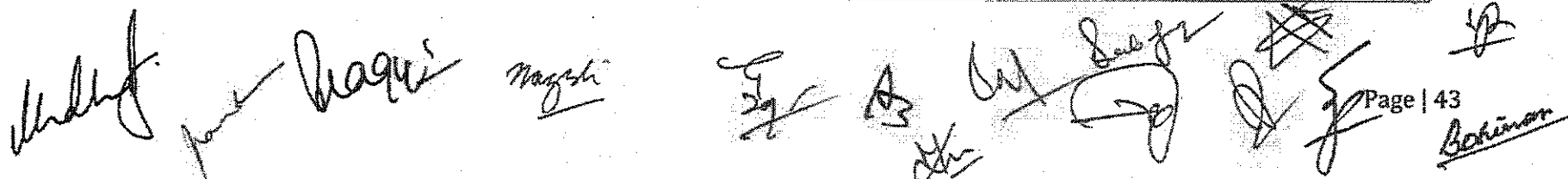
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						assessment		
<b>CM 17.3</b>	<b>Describe primary health care, its components and principles</b>							
SLO 17.3.1	Define primary health care	K	K	Y	Lecture	Written/Viva voce		
SLO 17.3.2	Explain the principles of primary health care and how these are being followed for service delivery in India	K	K	Y	Lecture	Written/Viva voce		
SLO 17.3.3	Enumerate the elements of primary health care	K	K	Y	Lecture	Written/Viva voce		
SLO 17.3.4	Describe the concept of Universal health Coverage	K	K	Y	Lecture	Written/Viva voce		
SLO 17.3.5	Discuss the implementation of Universal health Coverage in India	K	K	Y	Lecture	Written/Viva voce		
<b>CM 17.4</b>	<b>Describe National policies related to health and health planning and millennium development goals</b>							
SLO 17.4.1	Describe the goals, objectives and thrust areas under the National Health Policy	K	K	Y	Lecture	Written/Viva voce		
SLO 17.4.2	Discuss the background to formulation of Millennium Development Goals and their current status of achievement in India	K	K	Y	Lecture	Written/Viva voce		
SLO 17.4.3	Enumerate the Sustainable Development Goals	K	K	Y	Lecture	Written/Viva voce		
<b>CM 17.5</b>	<b>Describe health care delivery in India</b>							


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SLO 17.5.1	Enumerate the levels of health care	K	K	Y	Lecture	Written/Vi va voce		
SLO 17.5.2	Describe the health care delivery system at various levels in India	K	K/KH	Y	Lecture Visit	Written/Vi va voce		
SLO 17.5.3	Discuss health care provided by the private sector and voluntary organisations	K	K	Y	Lecture	Written/Vi va voce		
SLO 17.5.4	Describe the role and functions of the various community personnel providing health care at the village level viz. ASHA, AWW	K	K/KH	Y	Lecture Field Visit	Written/Vi va voce		
<b>Topic: International Health</b>								
<b>Number of competencies: (02)</b>								
<b>At the end of the session the student shall be able to:</b>								
<b>CM 18.1</b>	<b>Define and describe the concept of International health</b>							
SLO 18.1.1	Discuss the concept and importance of implementing International Health Regulations (IHR)	K	K	Y	Lecture	Written/Vi va voce		
SLO 18.1.2	Define Public Health Emergencies of International Concern (PHEIC)	K	K	Y	Lecture	Written/Vi va voce		
SLO 18.1.3	Describe the guidelines for assessment and notification of disease under the IHR	K	KH	Y	Lecture	Written/Vi va voce		
<b>CM 18.2</b>	<b>Describe roles of various international health agencies</b>							
SLO 18.2.1	Enumerate the important agencies working for promotion of international health	K	K	Y	Lecture Visit	Written/Vi va voce		
SLO	Describe the role and function of each of	K	K	Y	Lecture	Written/Vi		

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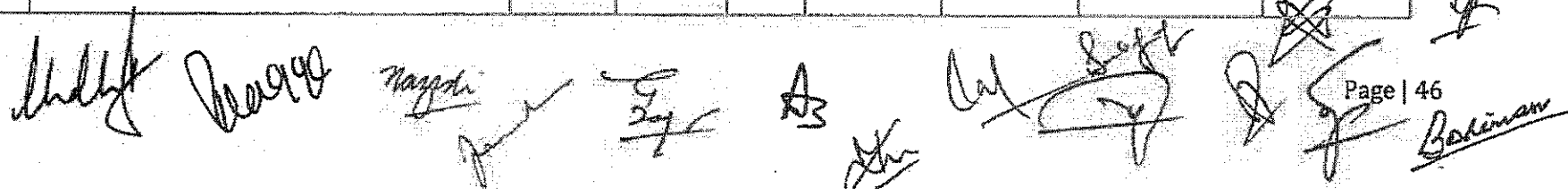
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19.3.3	counterfeiting of medicines					va voce	
<b>Topic: Recent advances in Community Medicine</b> <b>Number of competencies: (04)</b>							
<b>At the end of the session the student shall be able to:</b>							
<b>CM 20.1</b>	<b>List important public health events of last five years</b>						
SLO 20.1.1	List the important public health events that occurred in India in the last five years	K	K	Y	Lecture	Written/Vi va voce	
SLO 20.1.2	List the important public health events that occurred in the world in the last five years	K	K	Y	Lecture	Written/Vi va voce	
<b>CM 20.2</b>	<b>Describe various issues during outbreaks and their prevention</b>						
SLO 20.2.1	Describe the steps of outbreak investigation	K	KH	Y	Lecture	Written/Vi va voce	
SLO 20.2.2	Outline measures for control of outbreak	K	KH	Y	Lecture	Written/Vi va voce	
SLO 20.2.3	Outline measures for prevention of further occurrence of similar outbreak	K	KH	Y	Lecture	Written/Vi va voce	
SLO 20.2.4	Prepare a report of outbreak investigation and measures taken	K/S	KH/SH/ P	Y	Lecture Short Project Visit	Written/Vi va voce Skill Assessme nt	
<b>CM 20.3</b>	<b>Describe any event important to Health of the Community</b>						
SLO 20.3.1	Describe the important health events that can occur in a community	K	K	Y	Lecture Video	Written/Vi va voce	


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					Case Study			
SLO 20.4.2	Outline the measures for prevention and control these problems	K	KH	Y	Lecture	Written/Viva voce		
CM 20.4	Demonstrate awareness about laws pertaining to practice of medicine such as Clinical establishment Act and Human Organ Transplantation Act and its implications							
SLO 20.4.1	Describe the salient features of the Clinical establishment Act and Human Organ Transplantation Act	K	K	Y	Lecture	Written/Viva voce		
SLO 20.4.2	Discuss the role and importance of these Acts in implementing ethical practice of medicine	K	K	Y	Lecture Case study	Written/Viva voce		

CM indicates the Community Medicine Competency numbers  
 SLO indicates the Specific Learning Objectives numbers

Column C: K- Knowledge, S - Skill, A - Attitude / professionalism, C- Communication.  
 Column D: K - Knows, KH - Knows How, SH - Shows how, F- performs independently,  
 Column F: DOAP session - Demonstrate, Observe, Assess, Perform.

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					Case Study			
SLO 20.4.2	Outline the measures for prevention and control these problems	K	KH	Y	Lecture	Written/Viva voce		
CM 20.4	Demonstrate awareness about laws pertaining to practice of medicine such as Clinical establishment Act and Human Organ Transplantation Act and its implications							
SLO 20.4.1	Describe the salient features of the Clinical establishment Act and Human Organ Transplantation Act	K	K	Y	Lecture	Written/Viva voce		
SLO 20.4.2	Discuss the role and importance of these Acts in implementing ethical practice of medicine	K	K	Y	Lecture Case study	Written/Viva voce		

CM indicates the Community Medicine Competency numbers  
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Column C: K- Knowledge, S – Skill, A - Attitude / professionalism, C- Communication.  
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Annexure IV

**MBBS : COMMUNITY MEDICINE**

• **RECOMMENDED READINGS:**

1. K Park:Textbook of Preventive and Social Medicine.
2. DK Taneja's:Health Policies & Programmes in India.
3. Sunder Lal:Textbook of Community Medicine.
4. Methods in Biostatistics:BKMahajan.
5. IAPSM's Textbook of Community Medicine

• **WEBSITES:**

1. [www.nhp.gov.in](http://www.nhp.gov.in)
2. [www.mohfw.nic.in](http://www.mohfw.nic.in)
3. [www.who.int](http://www.who.int)



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*Annexure II*

Distribution of Internal Assessment Marks  
Medical Undergraduate Course (MBBS)  
Community Medicine

University of Delhi

Professional	Theory component	Practical component
1st Prof	1 <sup>st</sup> Term exam – 60 marks	---
2nd Prof	2 <sup>nd</sup> Term Exam – 40 marks	100 marks
	3 <sup>rd</sup> Term Exam - 40 marks	(80 marks [CP]+20 marks [AETCOM])
3rd Prof Part I	4 <sup>th</sup> Term Exam - 60 marks	100 marks (80 marks [CP]+20 marks [AETCOM])
	Sent up exam in the pattern of Third Professional Part I exam – 200 marks (Paper-I: 100 and Paper-II: 100)	200 marks
Total	400 marks	400 marks
Logbook	50 marks	50 marks

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Final Maximum Internal assessment marks which is to be displayed in the students' marksheet	<p style="text-align: center;"><b>100 marks</b></p> <p>(80 marks – contributed by the 400 marks of term tests and theory component of Sent Up exam AND 20 marks – contributed by the 50 marks of the logbook theory component)</p>	<p style="text-align: center;"><b>100 marks</b></p> <p>(80 marks – contributed by the 400 marks from Clinical Postings, AETCOM assessment, and Practical component of the Sent-Up exam AND 20 marks – contributed by the 50 marks of the logbook practical component)</p>
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**Note:**

1. Theory test should consist of MCQ (not more than 20% of marks), SAQ, LAQs and questions from AETCOM module
2. Practical exam should consist of Viva voce, Family presentations, Spotters, Epidemiological/Biostatistics exercises.
3. Regular record of activities throughout all the phases (i) academic activities (seminar, symposia, quizzes, etc) (ii) activities which involves skill or "shows how" component in competency table (example: participating in health education session, diet plan for a specific individual based on age, gender, physiological status, community survey and assessment on demographic indicators etc.) (iii) AETCOM skill competencies, field visit record and reflection

**Abbreviations:**

CP: Clinical Postings, MCQ: Multiple Choice Questions, SAQ: Short Question Answer, LAQ: Long Answer Question, AETCOM: Attitude, Ethics, and Communication Module

**Key references:**

A. Related excerpt from Regulations of Graduate Medical Education (Amendment) 2019 published in the Gazette of India (Extraordinary) Part III, Section 4, Page 82 and page 83. Published on Nov 6, 2019.

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

1. Attendance requirements are 75% in theory and 80% in practical /clinical for eligibility to appear for the examinations in that subject. In subjects that are taught in more than one phase – the learner must have 75% attendance in theory and 80% in practical in each phase of instruction in that subject.
2. If an examination comprises more than one subject (for e.g., General Surgery and allied branches), the candidate must have 75% attendance in each subject and 80% attendance in each clinical posting.
3. Learners who do not have at least 75% attendance in the electives will not be eligible for the Third Professional - Part II examination.

**Internal Assessment (:** Internal assessment shall be based on day-to-day assessment. It shall relate to different ways in which learners participate in learning process including assignments, preparation for seminar, clinical case presentation, preparation of clinical case for discussion, clinical case study/problem solving exercise, participation in project for health care in the community, proficiency in carrying out a practical or a skill in small research project, a written test etc.

1. Regular periodic examinations shall be conducted throughout the course. There shall be no less than three internal assessment examinations in each Preclinical / Para-clinical subject and no less than two examinations in each clinical subject in a professional year. An end of posting clinical assessment shall be conducted for each clinical posting in each professional year.
2. When subjects are taught in more than one phase, the internal assessment must be done in each phase and must contribute proportionately to final assessment. For example, General Medicine must be assessed in second Professional, third Professional Part I and third Professional Part II, independently.
3. Day to day records and log book (including required skill certifications) should be given importance in internal assessment. Internal assessment should be based on competencies and skills.
4. The final internal assessment in a broad clinical specialty (e.g., Surgery and allied specialties etc.) shall comprise of marks from all the constituent specialties. The proportion of the marks for each constituent specialty shall be determined by the time of instruction allotted to each.
5. Learners must secure at least 50% marks of the total marks (combined in theory and practical / clinical; not less than 40 % marks in theory and practical separately) assigned for internal assessment in a particular subject in order to be eligible for appearing at the final University examination of that subject. Internal assessment marks will reflect as separate head of passing at the summative examination.
6. The results of internal assessment should be displayed on the notice board within a 1-2 weeks of the test. Universities shall guide the colleges regarding formulating policies for remedial measures for students who are either not able to score qualifying marks or have missed on some assessments due to any reason.
7. Learners must have completed the required certifiable competencies for that phase of training and completed the log book appropriate for that phase of training to be eligible for appearing at the final university examination of that subject.

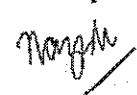
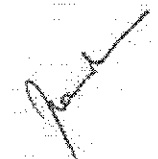
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B. Relevant excerpt from Medical Council of India. Assessment Module for Undergraduate Medical Education Training Program, 2019: pp 1-29.

*Components of IA*

- (i) Theory IA can include: Written tests, should have essay questions, short notes and creative writing experiences.
- (ii) Practical / Clinical IA can include: practical / clinical tests, Objective Structured Clinical Examination (OSCE) / Objective Structured Practical Examination (OSPE), Directly Observed Procedural Skills (DOPS), Mini Clinical Evaluation Exercise (mini-CEX), records maintenance and attitudinal assessment.
- (iii) Assessment of Log-book. Log book should record all activities like seminar, symposia, quizzes and other academic activities. Achievement of certifiable competencies should also be recorded in logbooks. It should be assessed regularly and submitted to the department. **Up To twenty per cent IA marks (Theory and Practical) should be from Logbook assessment.**
- (iv) Internal Assessment for Professional development programme (AETCOM) will include:
  - a. Written tests comprising of short notes and creative writing experiences in each subject.
  - b. OSCE based clinical scenarios and/or viva-voce. Skill competencies acquired during the Professional Development Programme must be tested during the clinical, practical and viva voce in every subject.

The internal assessment marks for each subject will be out of 100 for theory and out of 100 for practical/clinical (except in General Medicine, General Surgery and Obstetrics & Gynaecology, in which theory and clinical will be of 200 marks each). Internal assessment marks will reflect as a separate head of passing at the summative examination and will not be added to the University marks.



Anneve III

Ann. 17

**MBBS THIRD PROF. PART-1 PRACTICAL EXAMINATION IN COMMUNITY MEDICINE FOR SUMMATIVE ASSESSMENT**

Plan for Summative Assessment as per NMC recommendation, 2019

Phase of Course	Practical / Oral / Clinical Examination in Community Medicine	Pass Criteria
Third Professional Part-1	100 Skills competencies acquired during the Professional Development Program (AETCOM module) must be tested during clinical, practical and viva.	Mandatory 50% marks separately in theory and practical (practical / clinical + viva)*
Components of Practical Exam	Distribution of marks (Total Marks: 100)	Assessment to include (Cognitive, Psychomotor & communication skills)
Index Case presentation relation to family	40 marks	Assessment of Index case in relation to family to include: <ul style="list-style-type: none"> <li>Demonstration: History taking, basic clinical examination, environmental, dietary, nutritional assessment</li> <li>Interpreting the findings &amp; Recommendation: Related to family &amp; index case</li> <li>Communication skills (AETCOM): Advise pertinent to the allotted index case &amp; family specially related to lifestyle, environment, nutrition and cultural practices etc.</li> </ul>
Epidemiology / Biostatistics exercises	20 marks (10 X 2)	2 Exercises of 10 marks each

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Spots	20 marks (2 X 10)	10 Spots of 2 marks each.
Viva	20 marks	

**Reference:**

\* Board of governors in super-session of medical council of India, Amendment notification: The Gazette of India (Extraordinary), Part III - Section 4, No. 390, November 6, 2019.

**Excerpts from the above document are as follows:**

**NMC Recommendation:** Practical / Clinical Examination to be conducted in the laboratories and /or hospital wards (field practice areas)\*

**Objectives:** To assess proficiency and skills to conduct experiments, interpret data and form logical conclusions.

Clinical cases kept in the examination must be common conditions that the learner encounters as a physician of first contact in the community. Selection of rare syndromes and disorders as examination cases is to be discouraged. Emphasis should be on candidate's capability to elicit history, demonstrate physical signs, write a case record, analyze the case and develop a management plan.

Viva / Oral examination should assess approach to patient management, emergencies, attitudinal, ethical and professional values. Candidate's skill in interpretation of common investigative data, identification of specimens is to be also assessed.

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✓ ANN. III

III PROF. M.B.B.S. PART I  
COMMUNITY MEDICINE  
TEMPLATE OF THEORY EXAMINATION PAPERS

**Background**

In exercise of the powers conferred by Section 33 of the Indian Medical Council Act, 1956 (102 of 1956), the Board of Governors in super-session of Medical Council of India with the previous sanction of the Central Government, have amended the "Regulations on Graduate Medical Education, 1997", by the Regulations which may be called the "Regulations on Graduate Medical Education (Amendment), 2019". Competency based curriculum of the Indian Medical Graduate programme has been implemented for MBBS course starting from academic year 2019-20 onwards. The Regulations have come into force since their publication in the Official Gazette on 4<sup>th</sup> November 2019.

**Salient features of the sub-section on University Examinations of the Regulations on Graduate Medical Education (Amendment), 2019 regarding Theory examination**

(Reference: Gazette of India. BOARD OF GOVERNORS IN SUPER-SESSION OF MEDICAL COUNCIL OF INDIA AMENDMENT NOTIFICATION dated the 4th November, 2019. Chapter VI, sub-section 11.2)

Chapter VI of the Regulations on Graduate Medical Education (Amendment), 2019 deals with the Assessment under the Competency based curriculum, and the sub-section 11.2 deals with the University Examinations. It is mentioned that University examinations are to be designed with a view to ascertain whether the candidate has acquired the necessary knowledge, minimal level of skills, ethical and professional values with clear concepts of the fundamentals which are necessary for him/her to function effectively and appropriately as a physician of first contact. Assessment shall be carried out on an objective basis to the extent possible.

Nature of questions will include different types such as structured essays (Long Answer Questions - LAQ), Short Answers Questions (SAQ) and objective type questions (e.g. Multiple Choice Questions - MCQ). Marks for each part should be indicated separately. MCQs shall be accorded a weightage of not more than 20% of the total theory marks. In subjects that have two papers, the learner must secure at least 40% marks in each of the papers with minimum 50% of marks in aggregate (both papers together) to pass.

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There shall be one main examination in an academic year and a supplementary to be held not later than 90 days after the declaration of the results of the main exam. In Community Medicine, there will be 2 theory papers of 100 marks each – total 200 marks. At least one question in each paper of the clinical specialties should test knowledge - competencies acquired during the professional development programme (AETCOM module).

**Template for Theory examination paper**

Two theory papers with topic-wise distribution as per the syllabus approved by FMS, University of Delhi. Each paper of 100 marks to be as per the following template:

**Table: Template of each theory paper of 100 marks**

Part	Type of question	Number of questions	Marks per question	Total marks
A	MCQ	10	2	20
B	LAQ	1	16	16
	SAQ*	2	8	16
C	LAQ	1	16	16
	SAQ	1	8	8
D	LAQ	1	16	16
	SAQ	1	8	8
<b>Total marks</b>				<b>100</b>

\* The second SAQ of the Part B will be from AETCOM module

The marks distribution across the four parts of each theory paper will be as per the following template:

**Table: Marks distribution by parts in the theory paper**

Marks distribution by Part	Allotted marks
PART A	20
PART B	32
PART C	24
PART D	24
<b>Total marks</b>	<b>100</b>

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### Notes regarding the template for Theory examination paper

- Each of the two theory papers will be of 100 marks each
- Duration of paper will be 3 hours (including maximum 20 minutes for the MCQs paper)
- Part A (MCQs) is to be attempted on the provided question paper itself.
- Part B, C and D are to be answered in separate answer-sheets.
- Part A question paper is to be detached and returned back after 20 minutes of the start of the examination.
- Learner is to write his/her roll number on the top on both the MCQ question paper and the LAQ, SAQ question paper immediately on receipt.
- Only blue/black ink is to be used for attempting the paper including the MCQ section. Use of pencil is only allowed for diagram/graphs.

#### MCQs:

- Each of the 10 questions will be of single best answer type, where the learner is to indicate the single correct or best answer among the four given options.
- The MCQs can include questions on 'match-the-correct-options', 'correct sequence', clinical scenarios etc. but options to be worded as choosing single correct/best answer.
- Each question will have a stem of the question followed by four choices labelled as A, B, C and D.
- At the end of each MCQ, a square box will be provided where the learner is to indicate his/her answer by writing a single option (among A, B, C or D) within the square box.
- An option choice once indicated within the box is not allowed to be changed. Any scratching, scribbling, overwriting or change of the indicated choice within the box, will be considered as a wrong response.
- There shall be no negative marking for the MCQs, and two marks will be awarded for each correctly answered question.

#### Long Answer Questions (LAQ)

- Each LAQ is to be framed with objective smaller sub-parts, indicating clearly marks for each sub-part.
- Each LAQ to preferably be divided into 2-4 sub-parts.
- All the sub-parts within one LAQ to preferably be linked by theme or topic, they should not be unrelated to each other.

#### Short Answer Questions (SAQ)

- The SAQ can comprise of questions on writing short notes on specific topics, differences between two terms, drawing a schematic diagram etc.
- The second SAQ within part B of each of the two theory papers will be specifically from AETCOM topic.

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Annexure: Sample template of a theory paper

III PROF. M.B.B.S. PART I (ANNUAL / SUPPLE)

COMMUNITY MEDICINE

PAPER I / II

Maximum marks: 100

Duration: 3 hours (including MCQs paper – maximum 20 minutes)

Instructions for candidates:

1. Write your roll number on the top on both the MCQ question paper and the LAQ, SAQ question paper immediately on receipt.
2. All questions are to be attempted.
3. Part A is to be attempted on the provided question paper itself.
4. Part B, C and D are to be answered in separate answer-sheets.
5. Part A question paper is to be detached and returned back after 20 minutes of the start of the examination.
6. Only blue/black ink is to be used for attempting the paper including the MCQ section. Use of pencil is only allowed for diagram/graphs.

PART A 20 marks

Instructions for candidates:

There are 10 questions, each having two marks.

There is no negative marking for a wrong answer.

For each question, indicate your answer by writing the option choice (A, B, C or D) within the square box next to the question.

An option choice once indicated within the box is not allowed to be changed. Any scratching, scribbling, overwriting or change of the indicated choice within the box, will be considered as a wrong response.

MCQs 1 to 10.

Each question having:

Question stem

Four labelled option choices – A,B,C,D

Square box (for learner to indicate his/her choice of answer)

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III PROF. M.B.B.S. PART I (ANNUAL / SUPPLE)

COMMUNITY MEDICINE

PAPER I / II

Maximum marks: 100

Duration: 3 hours (including MCQs paper – maximum 20 minutes)

Instructions for candidates:

1. Write your roll number on the top on both the MCQ question paper and the LAQ, SAQ question paper immediately on receipt.
2. All questions are to be attempted.
3. Part A is to be attempted on the provided question paper itself.
4. Part B, C and D are to be answered in separate answer-sheets.
5. Part A question paper is to be detached and returned back after 20 minutes of the start of the examination.
6. Only blue/black ink is to be used for attempting the paper including the MCQ section. Use of pencil is only allowed for diagram/graphs.

PART B 32 marks

1. LAQ – 16 marks (marks allocation for sub-parts to be indicated)
2. SAQ – 8 marks
3. SAQ – 8 marks (AETCOM module)

PART C 24 marks

1. LAQ – 16 marks (marks allocation for sub-parts to be indicated)
2. SAQ – 8 marks

PART D 24 marks

1. LAQ – 16 marks (marks allocation for sub-parts to be indicated)
2. SAQ – 8 marks

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Division of topics for Community Medicine (Theory) Paper I and Paper II as per CBME curriculum for MBBS Phase III, part I summative assessment

Paper I- Topics 1 to 8

Paper II- Topics 9 to 20

S. no.	Topic	Number of competencies
1	Concept of Health and Disease	10
2	Relationship of social and behavioural factors to health and disease	5
3	Environmental Health Problems	8
4	Principles of health promotion and education	3
5	Nutrition	8
6	Basic statistics and its applications	4
7	Epidemiology	9
8	Epidemiology of communicable and non-communicable diseases	7
9	Demography and vital statistics	7
10	Reproductive, maternal and child health	9
11	Occupational Health	5
12	Geriatric services	4
13	Disaster Management	4
14	Hospital waste management	3
15	Mental Health	3
16	Health planning and management	4
17	Health care of the community	5
18	International Health	2
19	Essential Medicine	3
20	Recent advances in Community Medicine	4

\*There may be some overlap in certain topics among the two papers

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Annexure II

Department of Community Medicine  
University of Delhi

Logbook for MBBS students  
as per Competency Based Curriculum

Name of the student: .....

Name of the medical college: .....

University Registration number: .....

Date of joining the college: .....

Roll Number: .....

Permanent Address: .....

E mail id: .....

Mobile Number: .....

Student's  
Photograph to be  
pasted here with  
student's  
signature across  
the photograph

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Note

1. The various teaching learning components mentioned in the logbook may be taught in phases different than where it is placed in this document.
2. The visits to the Special OPD / Hospital Departments / Organizations (government or non-government) may differ across the three medical colleges under the University of Delhi.
3. The AETCOM module taught by the Community Medicine Department should be mentioned in the relevant section.
4. The Community Medicine Departments in the respective medical colleges should make necessary modifications in the logbook to adapt it to their own teaching learning program.

*leaves*

*panch*

*by*

*rozgar*

*AB*

*SK*

*AB*

*AB*



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## Abbreviation

AETCOM – Attitude, Ethics, and Communication module

AWC – Anganwadi centre

BCC – Behaviour Change Communication

CHC – Community Health Centre

CHD – Coronary Heart Disease

CSSD – Central Sterile Supply Department

IEC – Information, Education, and Communication

NMC – National Medical Combination

SDL – Self Directed Learning

SGT – Small group teaching

DOTS – Directly Observed Treatment Short Course (Tuberculosis)

ART – Anti-Retroviral Therapy (HIV)

PPTCT – Prevention of Parent to Child Transmission (HIV)

*Seagr*  
*27*  
*Par*  
*Unk*

*GA*  
*naqam*  
*ya*

## Introduction

Logbook is an essential component for Competency based MBBS curriculum, it carries 20% marks of internal assessment, theory and practical each. This logbook is a record of different activities, community visits done/made by the student. This logbook also specifies the competencies that a student must attain as per the guidelines of the revised new curriculum.

The purpose of logbook is to enable the learner to keep a track of their progress of learning certain competencies and of their achievements. The show-how components and the AETCOM components which are less documented in routine medical course should find a place in logbook.

The timely documentation of the activities done by the student is one of the important characteristics of the assessment of this logbook. Writing observations and reflections in this logbook will serve the purpose of enriching their attitudinal, ethical, professional attributes in the medical profession.

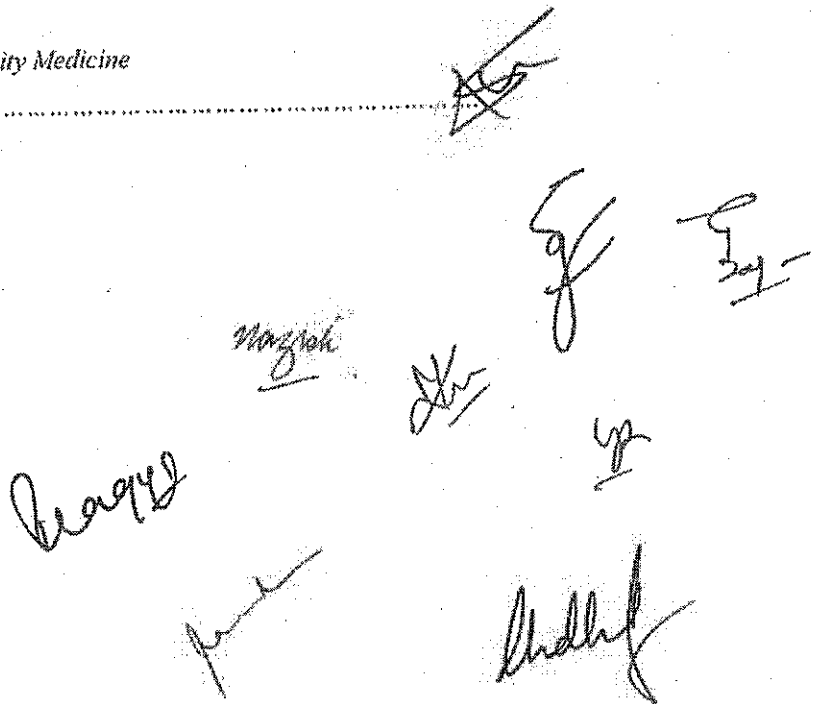
We hope that the learner will make use of the opportunity to use this logbook in a manner that supports their learning progression.

With best wishes,

Department of Community Medicine

Name of the college.....

Delhi



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## Guidelines for the students

1. It is the responsibility of the student to keep their logbook entries up-to-date and enter the activities as specified in respective pages and get it signed by supervising Faculty/ Facilitator well in time. The entries must be done, and signatures obtained from the faculty/facilitators within one month of the conduct of the learning activity.
2. Students are supposed to carry this logbook duly filled in for all the terminal and sent up examination and at any other time as instructed by the department from time to time.
3. The logbook needs to be submitted in the department in original at the time of sent up exam for final evaluation. Students need to collect the logbook before appearance in practical examination of 3<sup>rd</sup> Phase Part-I Final Prof. It is important that students do not lose this book.
4. At places where rating is being done, it must be signed by Faculty or Senior Resident. If the student has to carry out remedial/ repeat tasks, they should get it signed by the same team of Faculty/ Senior Resident who were involved in its teaching.
5. The attendance and the marks record in this logbook are intended to help the students to track their own progress.
6. The attendance component should reflect number of sessions held and NOT the number of hours.
7. The term 'Facilitator' in this document implies senior residents, and second- & third-year postgraduate students in the department of Community Medicine. Signature of the Faculty will also be applicable at places where facilitator's signature has been mentioned.
8. The term 'learner' and 'student' are used interchangeably in this document. The term classes and sessions are also used interchangeably in this document.
9. In some tables, you will see some blank slots. This is being kept there as CBME being a dynamic entity, some new elements may be introduced later in the curriculum as per the directions of NMC and/or by the department.
10. On certain pages, you won't find Faculty/ Facilitator's signature component, e.g., Attendance progress of the students; but the timely documentation of these pages will also be considered in logbook assessment.
11. The logbook assessment will be broadly based on:
  - a) Timely documentation and the
  - b) Grades obtained in specified competencies
  - c) Relevance of the entries made in the Observations/ Reflection writing

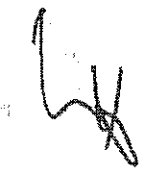




Table 1:

Record of Community Medicine classes in the Foundation course

Topic/Place of visits	Date	Attended (Yes/No)	Signature of the student
National health priorities & policies			
Field visit to PHC/CHC			
Visit to Immunization Clinic			

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 - A signature in the bottom-middle area.  
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Observation 1:

Observation: Visit to a Primary Health centre/ Community Health Centre

Date of visit

1. Write in your own words what did you like about the structure and functioning of the PHC/CHC you visited.

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2. Write in your own words, in which areas would you like to make improvements in this PHC/CHC, assuming that you are a utilizer of this PHC/CHC?

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3. How can this visit help you in the process of becoming a doctor?

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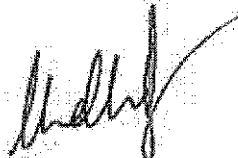
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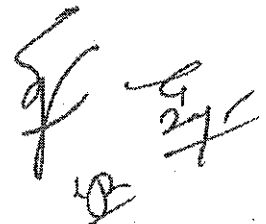
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Facilitator's sign with date



Student's sign with date



## Phase I MBBS course

Duration of Phase I MBBS: From..... To .....

### Components

1. Competencies which require documentation: Visits – Table 2
2. Activities done in the department which require writing the observations made by the student: Self Directed learning – Observation 2
3. Competencies which need to be achieved – Table 3
4. Description of learning outcomes for selected competencies: Table 4

*Scapp*

*P. T.*

*W. J.*

*A. S.*

*S. S.*

*M. J.*

*S. S.*

*M. J.*



Table 2:

Record of visits

Place of visits/Learning opportunities	Date	Signature of the student
Hospital department - 1		
Hospital department - 2		
Special OPD - 1		
Special OPD -2		
Organization (Govt/ Non-Govt) - 1		
Organization (Govt/ Non-Govt) - 2		

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Table 3:  
Selected competencies which need to be achieved and documented:  
Knowledge domain

Knowledge (Theory) Competencies							
Competency addressed	Name of Activity	Date dd-mm-yy	Attempt at Activity First or Only (F) Repeat (R) Remedial (Re)	Rating *	Decision of faculty Completed (C) Repeat (R) Remedial (Re)	Signature of Faculty/ Senior Resident with date	Feedback Receive Signature of student with date
CM1.3 Describe the characteristics of agent, host and environmental factors in health and disease and the multifactorial etiology of disease	Draw diagram for multifactorial causality for hypertension/ diabetes/ CHD/ obesity etc.						
CM1.6 Describe and discuss the concepts, the principles of Health promotion and Education, IEC and Behavioral change communication (BCC)	Draw quarter page newspaper Advt.(IEC material) for General Public on any issue of Public Health Importance on a sheet of paper						

\*Rating will be done in a scale of A to E, where A is the best performance and those scoring D or E to be given feedback by the Facilitator and repeat. The student must complete the remedial or repeat measures to achieve the respective competencies within one month of the day on which it is first assessed. The remedial/ repeat attempt must be mentioned in the same rows.

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Nazim

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24/11

Table 4:

Description of learning outcomes for selected competencies

Competency number and description	Date on which session/s were held	Format of this session: lecture/ SGT/ seminar	Describe what did you learn from this session.
CM3.5 Describe the standards of housing and the effect of housing on health		Activity: Students to develop checklists for survey as mentioned by the Facilitator	

*Seager*  
*Parsons*

*Lyx* ~~*[Signature]*~~  
*Magson* *[Signature]*  
*[Signature]* *[Signature]*

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## Phase II MBBS course

Duration of 2<sup>nd</sup> Phase MBBS: From..... To.....

### Components

1. Competencies which require documentation: Visits: Table 5
2. Activities done in the department which require writing the observations made by the student:
  - i) Family Visits: Observation 3
  - ii) Visit to Anganwadi Centre: Observation 4
3. Competencies which need to be achieved: Table 6
4. Description of learning outcomes for selected competencies: Table 7

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Table 5:

Record of Visits

Learning Opportunities	Learning objectives (to be filled by the student)	Date	Signature of the Student
Family visit 1			
Family visit 2			
Family visit 3			
Family visit 4			
Family visit 5			
Hospital department - 1			
Hospital department - 2			
Special OPD - 1			
Special OPD - 2			
Organization (Govt/ Non-Govt) - 1			
Organization (Govt/ Non-Govt) - 2			

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Observation 3

Observation: Family Visits

Days of posting: From ..... To .....

1. What did you observe during the family visits with respect to the health status and determinants of health?

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2. What information related to cultural practices did you find related to birth, death and marriage and food habits?

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3. How these family visits, visiting a person/a patient in his/her residence and surrounding help you to understand the concept of facilitators and barriers to health?

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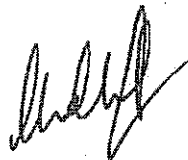
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Student's sign with date



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Observation 4

Observation: Visit to Anganwadi Centre

Date of posting:

1. What did you observe during your visit to AWC?

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2. Based on your observations and talking to the health care workers concerned, what are the challenges to reducing child malnutrition in the community?

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Student's sign with date

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Table 6:

Selected competencies which need to be achieved and documented:  
Skill domain

Skill (Practical) Competencies							
Competency # addressed	Name of Activity	Date dd-mm-yy	Attempt at Activity first (F) Repeat (R) Remedial (Re)	Rating *	Decision of faculty Completed (C) Repeat (R) Remedial	Initial Of Faculty/Senior Resident And date	Feedback Received Initial of Learner
CM2.2 Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status	Family posting: End posting assessment						
CM5:2 Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method							
CM9.2 Define, calculate and interpret demographic indices including birth rate, death rate, fertility rate  CM 10.1 Describe the current status of Reproductive, maternal, newborn and Child Health	Demography exercise						
CM1.9 Demonstrate the role of effective Communication skills in health in a simulated environment (AETCOM)	Assessment in the field						

\*Rating will be done in a scale of A to E, where A is the best performance and those scoring D or E to be given feedback by the Facilitator and repeat. The student must complete the remedial or repeat measures to achieve the respective competencies within one month of the day on which it is first assessed. The remedial/ repeat attempt must be mentioned in the same rows.

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Table 7:

Description of learning outcomes for selected competencies

Competency Number and description	Date on which session/s were held	Format of this session: lecture/ SGT/ seminar	What did you learn from this session
CMI1.5 Describe occupational disorders of health professionals and their prevention & management			
AETCOM Module* Name and number of the module: ..... ..... .....			

\*The AETCOM Module number and title must be put by the student as it may differ from college to college and year to year.

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 - Signature: *pu*  
 - Signature: *Shady*  
 - Signature: *mayen*  
 - Initials: *AS*  
 - Initials: *LY*  
 - Initials: *JK*  
 - Initials: *WE*

Phase III Part 1 MBBS course

Duration of Phase I MBBS: From..... To .....

Components

1. List of Competencies which require documentation:
  - i. Record of Visits – Table 8
  - ii. Record of Seminars – Table 9
2. Description of learning outcomes for selected competencies: Table 10
3. Activities done in the department which require writing reflections or observations made by the student
  - i. Family visits and index case workup: Observation 5
  - ii. Visit to Special OPD or Organizations: Observation 6
  - iii. AETCOM Module: Reflective writing
4. Competencies which need to be achieved – Skill domain: Table 11
5. Competencies which need to be achieved – Knowledge domain: Table 12
6. Record of other activities related to research and academics: Table 13

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*panch*

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*nagari*

*[Signature]*

*[Signature]*

*[Signature]*

*[Signature]*

Table 8

Record of Visits

Learning Opportunities	Learning objectives (to be filled by the student)	Date	Signature of the Student
Family visit 1			
Family visit 2			
Family visit 3			
Family visit 4			
Family visit 5			
Hospital department - 1			
Hospital department - 2			
Special OPD - 1			
Special OPD - 2			
Organization (Govt/ Non-Govt) - 1			
Organization (Govt/ Non-Govt) - 2			

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Table 9:

Record of Seminars

Learning Opportunities	Title of the seminar and Learning objectives (to be filled by the student)	Attended or Presented	Date	Signature of the Student
Seminar 1				
Seminar 2				
Seminar 3				
Seminar 4				

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*[Signature]*

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Table 10

Description of learning outcomes for selected competencies

Competency Number and description	Activity (index case work-up)	Date	Presented/ Attended – Those held in the posting for your batch should be filled here	What did you learn by participating in this activity
CM 10.2 Enumerate and describe the methods of screening high risk groups and common health problems	1. Assessment of antenatal woman			
	2. Assessment of postnatal woman			
	3. Assessment of newborn child			
	4. Assessment of under-five child			
	5. Assessment of an adolescent			
CM12.2 - Describe health problems of aged population CM12.3 - Describe the prevention of health problems of aged population	6. Assessment of a Geriatric person			
CM7.2 Enumerate, describe and discuss the modes of transmission and measures for prevention and control of communicable and noncommunicable diseases	7. Assessment of a case with a health problem ..... ..... (physically or mentally disabled, chronically ill, bed ridden, cancers etc.)			

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<p>CM 8.2 Describe and discuss the epidemiological and control measures including the use of essential laboratory tests at the primary care level for NCD (Diabetes, Hypertension, Stroke, Obesity and Cancer, etc</p>	<p>8.Assessment of a case of hypertension/T2DM/Obesity</p>			
<p>CM 8.2 Significance of Non-Modifiable Risk Factors</p>				

\*Rating will be done in a scale of A to E, where A is the best performance and those scoring D or E to be given feedback by the Facilitator and repeat. The student must complete the remedial or repeat measures to achieve the respective competencies within one month of the day on which it is first assessed. The remedial/ repeat attempt must be mentioned in the same rows.

*Beaque*  
*Margot*  
*20/1*  
*SB*  
*EF*





Observation 6

Observation: Visit to special OPD or organizations

(Any one visit to be described here)

Date of the visit being described below:.....

What did you observe?

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Based on your discussion with the patients and healthcare staff during the visit to the clinic, comment on the problems/challenges faced by the patients/caregivers?

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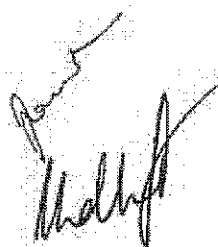
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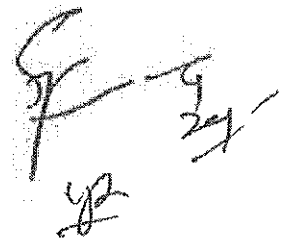
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Signature of the Facilitator



Signature of the student



Reflective writing

Reflection: AETCOM Module

Name and number of the AETCOM Module: .....

Dates of AETCOM teaching: .....

What happened during the sessions?

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What did you learn?

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How will this help you in future?

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Signature of the Facilitator

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Signature of the student

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Table 11:

Selected competencies which need to be achieved and documented:  
Skill domain

Skill (Practical) Competencies							
Competency # addressed	Name of Activity	Date dd-mm-yy	Attempt at Activity First(F) Repeat (R) Remedial (Re)	Rating *	Decision of faculty Completed (C) Repeat (R) Remedial	Initial Of Faculty/ Senior Resident and date	Feedback Received Initial of Learner
CM2.3 Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behaviour	Family posting: End posting assessment						
CM5.4 Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment	Family posting: End posting assessment						
CM7.4 Define, calculate, and interpret morbidity and mortality indicators based on given set of data	Calculate the indicators from a given data set						
CM1.10 Demonstrate the important aspects of the doctor patient relationship in a simulated environment (AETCOM)	Assessment in the field						
Research competencies CM6.4 - Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution.	Assessment at the end of research methodology teaching						

[Signature] [Signature] [Signature] [Signature] [Signature] [Signature]

measures of central tendency and dispersion							

\*Rating will be done in a scale of A to E, where A is the best performance and those scoring D or E to be given feedback by the Facilitator and repeat. The student must complete the remedial or repeat measures to achieve the respective competencies within one month of the day on which it is first assessed. The remedial/ repeat attempt must be mentioned in the same rows.

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 Gf  
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Table 12:  
Selected competencies which need to be achieved and documented:  
Knowledge domain

Knowledge (Theory) Competencies							
Competency # addressed	Name of Activity	Date dd-mm-yy	Attempt at Activity First(F) Repeat (R) Remedial (Re)	Rat in g *	Decision of faculty Completed (C) Repeat (R) Remedial	Initial Of faculty / Senior Resident And date	Feedba ck Receive d Initial of Learne r
CM3.2 Describe concepts of safe and wholesome water, sanitary sources of water, water purification processes, water quality standards, concepts of water conservation and rainwater harvesting	Students will prepare a checklist based on their observation during family visit and submit to the Facilitator. This will be assessed in end of posting family discussion.						
CM 16.2 Describing planning cycle	Seminar as decided by Facilitator						
CM 17.3 Describing Primary health care	Seminar/Visit (as decided by the Facilitator)						
CM7.7 Describe and demonstrate the steps in the investigation of an epidemic of communicable disease and describe the principles of control measures.	An exercise to be given, where an epidemic scenario is described, and students are asked to prepare epidemic						

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9/31

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		investigation step by step						
CM5.7	Food hygiene	Checklist to be developed by the student and assessed in end of posting						

\*Rating will be done in a scale of A to E, where A is the best performance and those scoring D or E to be given feedback by the Facilitator and repeat. The student must complete the remedial or repeat measures to achieve the respective competencies within one month of the day on which it is first assessed. The remedial/ repeat attempt must be mentioned in the same rows.

*Leaves*  
*James*  
*Indy*  
*Nazim*  
*John*  
*SA*  
*SA*  
*SA*  
~~SA~~

Table 13

Record of other activities related to research and academics

Activity	Details	Remarks of the student
Participation in health education activities		
Participation in any other academic activities (eg quiz, poster making etc) related to Community Medicine at college level or higher		
Research activity Related to Community Medicine (eg STS project)		
Attended or presented in conference/ workshops etc.		

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 - Top middle: *201*  
 - Top right: *AR*  
 - Middle left: *Prave*  
 - Middle center: *Shahid*  
 - Middle right: *Magdi*  
 - Far right: *GF*  
 - Bottom right: *Other* and *Q*

Annexure A – Attendance and marks recorded by the students so that they can track their own progress. Note that these entries are NOT VERIFIED by the department/institution.

Table 1:

Attendance for the sessions held by Department of Community Medicine

(This is being recorded in logbook so that the student can track their own progress. In case of any discrepancy, records available with the department will be considered as final. Note that these entries are NOT VERIFIED by the department/institution.)

Phase	Total classes Held	Attended	Sig of student
Foundation Course			
Lecture			
Visits			
1 <sup>st</sup> Phase			
Lecture			
Visits			
2 <sup>nd</sup> phase			
Lecture			
Clinical/Family Posting			
AETCOM			
3 <sup>rd</sup> Phase			
Lecture			
Clinical/Family Posting			
AETCOM			

[Handwritten signatures and initials, including 'Nazook' and '34']



Table 2:

Marks Obtained in the various postings in Community Medicine:

(This is being recorded in logbook so that the student can track their own progress. In case of any discrepancy, records available with the department will be considered as final. Note that these entries are NOT VERIFIED by the department/institution.)

	Maximum marks	Marks Obtained	Sign of the student	Feedback received* (Yes/No) date (dd-mm-yy)	Sign of the Faculty/ Facilitator#
2 <sup>nd</sup> Phase					
Clinical/Family Posting					
AETCOM					
3 <sup>rd</sup> Phase					
Clinical/Family Posting					
AETCOM					

\*Only for the students who have scored <35% in a given assessment

#Faculty/ Facilitator's signature indicates that the Faculty/ Facilitator has given feedback to the students, and it is required only for the assigned students with a score <35%. However, the students' signature will be there in each cell of the assigned column.

Table 3:

Marks Obtained: Terminal and Sent-Up Examination

*(This is being recorded in logbook so that the student can track their own progress. In case of any discrepancy, records available with the department will be considered as final. Note that these entries are NOT VERIFIED by the department/institution.)*

	Theory (Maximum marks)	Marks Obtained
Phase I	60	
Phase II	40	
	40	
Phase III	60	
	Sent Up Paper-I: 100	
	Sent Up Paper-II: 100	

*Handwritten signature*

*Handwritten signature*

*Handwritten signature*

*Handwritten signature*

*Handwritten signature*

*Handwritten signature*

*Handwritten signature*

*Handwritten signature*

*Handwritten signature*