

Pt.Deendayal Upadhyay Memorial Health Sciences &
Ayush University of Chhattisgarh



M.B.B.S. SYLLABUS



No./Reg./69 /D.U.H.S./2022

Dated:18/5/22

Notification

Scheme of examinations for session 2019 onwards: First professional M.B.B.S., Second professional M.B.B.S., Third professional M.B.B.S. Part-I, Third professional M.B.B.S. Part-II.

Internal assessment –

Total marks 40 (Theory 20 marks, Practical 20 marks) – 50% combined theory and practical (Not less than 40% in each) for eligibility for university examinations.

(A) Theory : 20 marks :-

1. To assess the internal marks, there shall be no less than three internal assessment in each Pre/ Para clinical subjects and no less than two examinations in each clinical subjects in professional years.
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.
3. The final internal assessment in a board 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.
4. The sessional examination preceding the university examination may be similar to pattern of university examination. The total marks obtained be reduce to out of 20 and sent to university.

(B) Practical : 20 marks :-

To assess the internal marks in practical , there will be two terminal practical examination. Average marks of two terminal practical examination and marks obtained including record be calculated and reduce to out of 20 and send to university.

The result of internal assessment should be displayed on notice board before the university examination.

University examinations –

(A) Theory -

There shall be each paper of 100 marks (Section-A 50 marks and Section-B 50 marks). The Question paper pattern for each section as follows :-

Question Serial No.	Question Type	No. of Question	Marks in each Question	Total Marks
1	Long Answer Question (Structured essays)	01	15	15
2	Short Answer Question	05	05	25
3	*Objective Type Question [(a) true/ false (b) Fill up the blanks (c) Assertion and reason (d) One word answer (e) MCQ]	10	1	10
				50 marks

* Must include 2 Question of all type of objective Question.

Framing of questions be done so as to cover the active syllabus and guideline given by NMC on competency based under graduate curriculum.

Note:- One Short notes (05 Marks) in section B of Paper should be based on AETCOM Module.

(B) Practical – Total marks 100*

Practical /clinical – 80 marks and viva voce 20 marks.

- ❖ **In subject of General Medicine, General Surgery and Obstetrics and Gynaecology marks in practical examination-200.**
(Practical/clinical-160 marks and viva voce 40 marks)

Appointment of Examiner – Minimum eligibility for examiner - **4 year** as a assistant professor after obtaining P.G. Degree.

Criteria for passing in the subject :-

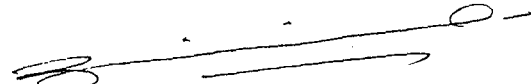
1. Mandatory 50% marks separately in theory and practical (Practical=practical+viva).
In subject that have two papers, the learner must secure at least 40% marks in each of the paper with minimum 50% of marks in aggregate (both paper together) to pass in the said subject.
2. A learner shall not be entitle to graduate later than **ten (10) years** of his/her joining the first MBBS course .
3. No more than **four attempts** shall be allowed for a candidate to pass the first professional examination. Total period for successful completion of first professional course shall not exceed **four (4) years**. Partial attendance of examination (either theory or practical) in any subject shall be counted as an attempt.
4. Passing in the first professional is compulsory before proceeding to second MBBS training. It is to inform all the students that unless the student pass successfully in the first MBBS examinations they will not be promoted to second MBBS. Moreover, if a candidate has failed to pass in the supplementary examination he/she will have to repeat the first MBBS course curriculum and appear for the University examination of first MBBS with the new batch.
5. A learner, who fails in the second professional examination, shall not be allowed to appear in third professional part I examination unless she/he passes all subjects of second professional examination.
6. Passing in third professional (Part I) examination is not compulsory before starting part II training, however passing of third professional (Part I) is compulsory for being eligible for third professional (Part II) examination.

Clinical Posting – As per NMC

Note – Second professional clinical posting shall commence **before / after** declaration of result of first phase examination and third professional part-I and Part-II clinical postings shall start no later than **two weeks** after completion of University examinations.

Annexure - Rules & regulations for other criteria of examinations is attach.

All other criteria of assessment as per Gazette notification of NMC dated 06 november 2019.

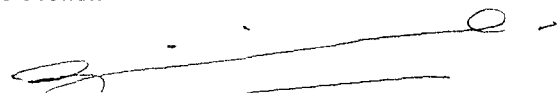

Controller of Examination

Dated: 18/5/22

No./ **70-72** /D.U.H.S./2022

Copy to :-

1. Secretary to Honorable V.C. , Pt.D.D.U.M.H.S. & Ayush University, Raipur.
2. Dean of All Medical Colleges affiliated to this University.
3. Section In charge of Exam/Confidential/Academic Section.


Controller of Examination

Ophthalmology

PAPER- 100 Marks

Section-A (50 Marks)

Anatomy, physiology, Congenital anomalies and detailed study of the diseases of:-

- 1.LIDS:-** Blepharitis, Hordeolum externum, Hordeolum internum, Chalazion, Trichiasis, Entropion, Ectropion, Ptosis, Tumours .
- 2.ORBIT:-** Proptosis, Orbital cellulitis, Cavernous sinus thrombosis.
- 3.LACRIMAL APPARATUS:-** Dry eye, Epiphora, Dacrocystitis.
- 4.CONJUNCTIVA :-** Conjunctivitis, Bacterial Conjunctivitis , Chlamydia Conjunctivitis (Trachoma). Allergic Conjunctivitis, Vernal Keratoconjunctivitis , Phlyctenular Keratoconjunctivitis , Ophthalmia Neonatorum , Degenerative Conditions , Pinguecula, Ptelyghm , Xerosis of Conjunctiva, D/d of the nodules at the limbus.
- 5. SCLERA:-** Episclerities, Scleritis, Staphylomas.
- 6. UVEAL TRACT:-** Congenital Anomalies, Anterior Uveitis, Iridocyclitis, Sympathetic Ophthalmitis, D/d of Red eye.

Section-B (50 Marks)

Anatomy, physiology, Congenital anomalies and detailed study of the diseases of:-

- 1. LENS:-** Cataract , Congenital Cataract, Developmental Cataract, Acquired Cataract, Senile Cataract, Metabolic Cataract, Complicated Cataract, Toxic Cataract, Radiation Cataract, Traumatic Cataract .
Investigations Operative Procedures and Complications of Cataract Aphakia its handicaps and management.
- 2. GLAUCOMA:-** Congenital Glaucoma, Primary Open Angle Glaucoma, Secondary Glaucoma.
- 3. ERRORS OF REFRACTION:-** Causes of eye strain, Hypermetropia , Myopia, Astigmatism.
- 4. CORNEA:-** Corneal Ulcer, Bacterial , Fungal, Viral, Herpes Zoster Ophthalmicus, Trophic Cornea Ulcer, Neuroparalytic Keratitis. Exposure Keratitis, Mooren's Keratitis, Superficial Punctate Keratitis, Photo-Ophthalmia, Interstitial Keratitis, Corneal Degenerations , Arcus Senilis , Band Keratopathy , Corneal Dystrophies , Keratoconus, Keratoglobus , Corneal Opacities, Vascularization of Cornea, Effects of Corneal perforation, Keratoplasty, Types , Indications , Methods of Corneal Preservation , Astigmatism, Accommodation and Anomalies.
- 5. MUSCULAR ANOMALIES:-** Heterophoria, Esotropia, Exotropia, Paralytic Squint.
- 6. RETINA AND OPTIC NERVE :-** Hypertensive Retinopathy, Diabetic Retinopathy, Retinal Detachment , Retinoblastoma, Papilloedema, Optic Neuritis, Optic atrophy.
- 7. MISCELLANEOUS:-** Injuries of eye and orbit , Mechanical injuries, Penetrating injuries , Penetrating injuries with retained , Intraocular foreign bodies , Blunt Trauma, Chemical injuries , Acid Alkaline burns , Blindness-causes , Blindness NPCB , Community Ophthalmology , Eye Banking.

Note:- One Short notes(05 Marks) in section B of Paper should be based on AETCOM Module.