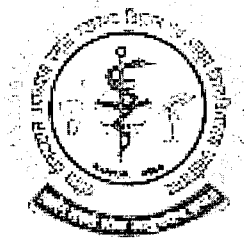


Pt.Deendayal Upadhyay Memorial Health Sciences &
Ayush University of Chhattisgarh



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 :-

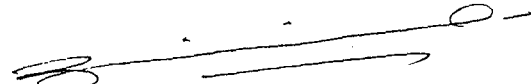
1. Mandatory 50% marks separately in theory and practical (Practical=practical+viva).
In subject that have two papers, the learner must secure at least 40% marks in each of the paper with minimum 50% of marks in aggregate (both paper together) to pass in the said subject.
2. A learner shall not be entitle 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

PAPER-Otorhinolaryngology (100 Marks)

Section-A (50 Marks)

- 1. OTOLOGY:-** Anatomy of Ear , Physiology of Auditory Vestibular system, Assessment of Hearing-Tuning for tests, Audiology and Acoustics- Pure tone Audiometry , Impedance Audiometry , Brain stem evoked response audiometry, special tests of hearing, Hearing loss- Conductive & sensory neural hearing loss , Assessment of vestibular function & Disorder of Vestibular system is vertigo , Diseases of External ear- congenital anomalies of ear Traumatic lesions of ear, Inflammatory lesion of ear wax, Furuncle, keratosis Obturans , Malignant Otitis Externa etc. Tumours of External ear, Eustachain tube and its dysfunctions , Disorders of Middle ear- Acute Suppurative otitis Media, Otitis Media with effusion acute necrotizing otitis media, Otitic Barotrauma and its management , Chronic Suppurative otitis media , cholesteatoma complications of CSOM,- Mastoiditis, Perositis, Facial Paralysis, Labyrinthitis, Otosclerosis, Facial Nerve & its disorders, Meniere's Disease, Tumours of Middle ear & mastoid including Acoustic Neuroma , The Deaf child, Rehabilitation of H.I., Hearing & Cochlear Implant, Tinnitus.
- 2. RHINOLOGY:-** Anatomy & Physiology of nose & paranasal sinuses, Diseases of External nose & nasal vestibute, Diseases of Nasal septum Deviated nasal septum , perforation, haematoma & abscess of septum, Acute & chronic rhinitis, Disorder of nasal cavity- Foreign body of nose granulomatous diseases of nose, Rhinosporidiosis, Allergic and non allergic rhinitis ie- Vasomotor rhinitis, Nasal polypi, Epistaxis causes and management, Acute & chronic sinusitis, Management & complications of sinusitis, Maxillofacial trauma , its emergency management, Neoplasms of nose and paranasal sinuses, Benign & malignant tumours & its management, Angiofibroma.
- 3. OPERATIVE SURGERY:-** Myringotomy, Mastoid surgery ,Radical mastoidectomy, Modified Radical mastoidectomy, Myringoplasty, Proof puncture, Intranasal inferior meatus antrostomy, Caldwell Luc operation, Submuous resection of nasalsejptum septoplasty, diagnostic nasal endoscopy, Endoscopy sinus surgery.

Section-B (50 Marks)

1. **LARYNGOLOGY** :- Anatomy & Physiology of Larynx & Pharynx, Acute & chronic inflammation of Larynx, Acute laryngitis, Acute laryngotracheobronchitis, Acute epiglottitis, Syphilis and leucoplakia of larynx, Congenital lesion of larynx and stridor, Laryngeal Paralysis, Benign and Malignant tumours of larynx, Laryngocoele, Respiratory Obstruction in adults and its Management, Tracheostomy and other Procedures for airway management foreign body in air passages, Adenoid & other inflammatory condition of nasopharynx, Acute & Chronic Tonsillitis, Acute & Chronic Pharyngitis, Head & Deep space neck infections, Tumours of Oropharynx, Nasopharynx & laryngopharynx, Snoring and sleep apnoea, Anatomy & common Disorders of oral cavity- Ulcerative, bullous and white lesion of oral cavity and oropharynx, Neoplasms of salivary glands, Benign & malignant tumours, Differential diagnosis and approach to management of swelling in the neck, Salivary gland diseases, Anatomy & Physiology of Oesophagus, Disorder of Oesophagus, Dysphagia, Foreign bodies passage.
2. **RECENT ADVANCES**:- Laser Surgery, Cryosurgery, Radiotherapy in head & neck cancer, Chemotherapy in Head & neck cancer, HIV infection and ENT manifestations.
3. **OPERATIVE SURGERY** :- Direct – Laryngoscopy, Bronchoscopy, Oesophagoscopy, Tonsillectomy, Adenoidectomy, Radiology in ENT.

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