Syllabus and Examination pattern for Post - Graduate Medical Courses

NOTIFICATION

Ref.:

(1) Medical Council of India Regulation on Graduate Medical Education, 1997.
(2) Amendment of the regulations on graduate medical education notified by Government of India from time to time:
   a. Gazette Notification dated 29.05.1999.

In exercise of the powers, conferred under section 26 of Krishna Institute of Medical Sciences Deemed University, the Board of Management in its meeting held on 27th June, 2006, has been pleased to approve the Bye-law pertaining to Post Graduate Medical courses as given in schedule here to Annexed.

The Bye-law as above shall be effective for the students admitted to Post Graduate Medical courses from the academic year 2006-07 onwards.

By Order
Registrar

1. This byelaw shall be called Syllabus and Examination pattern for Post-Graduate Medical Course.

Diploma In Anesthesia

At the end of two years of training as residents in anesthesia, the candidates should be fully conversant with theory and practical aspects of:

1. Human Anatomy and Physiology
   Various organ systems and cellular components in relation to Anaesthesia including muscles, neuromuscular junction, nerve plexuses, cardiovascular, respiratory, neurological, hepatobiliary, renal, endocrine and temperature homeostasis, theories of mechanism of production of anaesthesia, changes during pregnancy, various tests/investigations to evaluate the functional status of organ systems as applied to Anaesthesia Management, Intensive Care Practice and Pain Relief.

2. Pharmacology
   As applied to Anaesthesia, Intensive Care Practice and Pain Relief including General Pharmacological Principles, Pharmacokinetics and Pharmacodynamics of Anaesthetic Drugs (including Uptake and Distribution of Inhaled Anaesthesia agents and All the Adjuncts used in Anaesthesia, Drugs used for treatment of various Diseases and Drug Interaction.

3. Pathophysiology of various diseases
   Including disorders of cardiovascular, respiratory, neurological, hepatobiliary, renal, endocrine and immune systems, various tests/investigations to grade/measure the disease process of various organ systems as applied to anaesthesia management, intensive care practice and pain relief.
4. Medicine
As applied to the practice of Anaesthesia including diagnosis and management of Diabetes, Hypertension, Bronchial Asthma, Chronic Obstructive Pulmonary Diseases, Respiratory Failure, ARDS, Myocardial Ischemia / Infarction, Arrhythmia, Shock, Congestive Heart Failure, Acute / Chronic Renal Failure, Head Injury, Unconscious patients, Status Epilepticus / Asthmatic, Endocrine Disorders, Diseases related to Dysfunction of Hepatobiliary, Muscular, Connective Tissues and Immune system, Management of Perioperative Infection, Neuromuscular Disorders, Poisoning etc. and interpretation of ECG / Blood Gases / Other Biochemical Values and Function Tests.

5. Physics
As applied to Anaesthetic gases, vapours, anaesthesia machine, breathing systems, monitors, ventilators, therapeutic devises & other relevant equipment including physical principles involved in their construction and functioning.

6. Perioperative Anaesthesia Management
Including pre-operative evaluation, intra-operative management as well as post-operative care, monitoring (invasive as well as non-invasive) as applied to various surgical specialities and age groups.

7. Theory and practice of various techniques / aspects of Routine & Emergency cases of General Anaesthesia (e.g., Intravenous / Inhalational, Endotracheal / Mask / LMA / COPA, Spontaneous/Controlled mode of ventilation, induced hypotension / hypothermia etc.), Regional Blocks (Spinal, Epidural & Peripheral Nerve block) and Local Anaesthesia, including various postures required for anaesthetic/surgical procedures, their effects and Recent Advances for most minor to supra major surgeries in the field of:
- General surgery:
  Minor cases like haemorrhoidectomy to supra major cases like Liver transplant.
- Gynaecology and Obstetrics.
- ENT and Head & Neck.
- Orthopaedics.
- Ophthalmology.
- Pediatric & Neonate
  Differences between adult and pediatric Anatomy, Physiology, Pharmacology, Anaesthesia principles, pediatric/neonatal emergencies, postoperative care, fluid & ventilator management etc.
- Cardiac, Vascular & Thoracic
  Conduct of closed heart as well as open heart surgeries (Valvular, Ischemic, Congenital -Cyanotic & Acyanotic), CABG (including off pump), Pulmonary Cases (Insertion of Double Lumen Tube, one lung anaesthesia), Thymus and Vascular surgeries etc. Ability to go on Cardiopulmonary bypass and disconnect from bypass, Ability to take, manage and interpret Arterial, Central Venous and P.A. Lines, postoperative care, management of re-explorations etc.
• Neurosurgery
  Ability to monitor ICP, Management of head injuries, bleeds, tumors, etc with raised ICT. Ability to safely manage cases in sitting, prone, lateral, jack-knife positions and Anaesthetic management for neuro-radiology procedures.

• Urology
  Management of endoscopic surgeries like TURP/TURBT etc, Problems related to TURP, extracorporeal shock wave lithotripsy, percutaneous placement of nephrostomy etc., anaesthetic management of patients with acute and chronic renal failure, anaesthetic management of renal transplant cases of donor as well as recipient.

• Plastic
  Management of burns contractures, congenital faciomaxillary abnormalities like cleft lip and palate, faciomaxillary injuries like fracture mandible, maxilla, zygoma, panfacial fractures, difficult intubations, microvascular surgeries, reconstructive surgeries, aesthetic surgeries etc.

• Dental
  Monitored Anaesthesia Care, Anaesthetic management of pedodontia patients, maxillofacial surgeries including TMJ Ankylosis, Awake, Retrograde & Fibreoptic intubations.

• Endoscopies / laparoscopies
  Anaesthetic management, specific requirement and complications of various endoscopies like cystoscopy, ureteroscopy, PCNL, hysteroscopy, thoracoscopy, mediastinoscopy etc. and Lap. assisted/laparoscopic surgery like hysterectomy, tube ligation, appendicectomy, cholecystectomy etc.

• Anaesthesia for various diagnostic, therapeutic and specialized procedures.

• Anaesthesia for Geriatric patients.

• Anaesthesia for surgery using LASER.

• Anaesthesia / Sedation techniques out side operating room
  Electroconvulsive shock therapy (ECT), Electrophysiologic tests, Radiofrequency ablation, Cardioversion, Cardiac catheterization, Special anaesthetic considerations in radiology and interventional radiology related to Dye allergies, Embolization, Monitoring / Equipment options in the MRI suite.

8. History of Anaesthesia.

9. Airway Management
  Assessment of difficult airway, Awake, Retrograde, Use of intubating LMA’s, Intubating Styles, Various laryngoscopes designated for difficult airway, Insertion of Combitube, Ability to perform Cricothyrotomy and use of Venturi, Minitrach & Fibreoptic intubations etc.

    For all age group of patients under different situations e.g., neonates, pregnant females, poisoning cases, trauma victims etc.
11. Acid Base & Fluid Management.
   Including use of Crystalloids, Colloids, blood & blood products.

12. Arterial, Central Venous and P.A. Lines
   Establishment, management and interpretation.

13. Anaesthetic drugs used in perioperative care.

14. Equipments (Minor to advanced monitoring)
   Their use, maintenance, sterilization and care.

15. Medical gases
   Knowledge of Manufacturing, Storage and Central pipeline Systems.

16. Day Care / Outpatient Anaesthesia.

17. Remote Location Anaesthesia.
   Anaesthetic practice during disasters and for large turnover surgeries in camps / mass casualties.

18. Emergency Anaesthesia

19. Monitored Anaesthesia Care

20. Labour Analgesia

21. Pain relief - Acute & Chronic

22. Critical care practice
   Including oxygen therapy, respiratory therapy, ventilatory support, haemodynamic monitoring, prevention and management of multi organ failure, and care of patients with brain damage or brain dead patients For organ Transplant.

23. Advanced Trauma Life Support (ATLS)

24. Occupational Hazards

25. Safety in Anaesthesia


27. Record keeping in Anaesthesia

28. Medical Audit

29. Quality Assurance

30. Anaesthesia standards e.g., Minimum monitoring standard.

31. Medicolegal aspects in Anaesthesia.

32. Ethics in Anaesthesia

33. Principles of Evidence Based Medicine.

34. Basic Research Methodology and Clinical Trials.

36. Computers

Utility, computer assisted learning and data storage, Computerised anaesthesia records.

37. Skills

For planning of Operation Theater, pain clinic, recovery room, intensive care etc. including selection and purchase of equipments.

Training Programme

A. Administration Of Anaesthesia & Preoperative Patient Care

I Year Residents-

Assisting during minor & major anaesthesia procedures and managing patients in recovery or intensive care areas (all Under Supervision)-

The first month of the first year will be spent in orientation in the operating rooms and attending lectures covering the basics of the discipline. After that the first year of training will be spent in learning the fundamentals of anesthesiology with emphasis on checking of anaesthesia equipment including anaesthesia machine, airway equipment and appropriate monitors, preparation of appropriate dosages of various drugs required at specific point of time, mastering clinical skills regarding selection and implementation of an appropriate anesthesia plan, placement of lines, induction of anaesthesia, intubation, maintenance of anaesthesia, and the successful reversal of anesthetic agents. Emphasis will also be placed on learning regional anaesthesia and Cardiopulmonary resuscitation. To start with the first year residents will observe and then slowly become independent in giving general anaesthesia and Regional anaesthesia to patients belonging to ASA grade I & II for minor and major surgery, under graded supervision. They will be posted in rotation to the following specialties during the first year: Preoperative assessment area, General Surgery, Gynecology, Obstetrics, Orthopedic, ENT, and Recovery Room. They will be assigned to cases in the Operating Room at the hospitals attached to medical teaching institutes affiliated to the University under which they have registered and will gain experience under the direction and supervision of respective academic faculty.

II Year Residents-

Assisting during minor & major procedures under anaesthesia, managing patients in recovery or intensive care areas and Independently conducting minor procedures under anaesthesia (GA/RA) for ASA grade I or II patients (excluding expected difficult airway cases and cases with expected major body fluid shift)

The second year of training will be devoted to the subspecialties/superspecialities of anesthesia at the hospitals affiliated to medical teaching institute and the university under the supervision of a faculty member with an aim to concentrate on mastering the knowledge and technical skills associated with providing anesthesia to subspecialty/superspeciality patients. Residents will be rotated in Pediatric anesthesia, Neuro-anesthesia, Cardiovascular and Thoracic anesthesia, Ambulatory anesthesia, Obstetrics, Dental Surgery, Ophthalmology, Pain Clinic / Pain Management, Peripheral
Theatres, Anaesthesia Outside Operating Rooms, Trauma care, Transplant Surgeries etc. They will be taught to give general anaesthesia and regional anesthesia (Extradural Block - EDB, Spinal Block, and Peripheral Nerve Blocks) to ASA grade I, II, III & IV patients under supervision for superspeciality theaters. They should be able to give GA/RA to other ASA grade II patients & I independently. Rotations in critical care areas e.g., Trauma Ward, Post Anaesthesia Care Unit / ICU / Emergency Medical Service will also be part of the second year training curriculum. They should learn pediatric and trauma life support and maintain skills for basic and advanced cardiac life support. The student should be able to analyze and present scientific data.

B. Academic Activities -
Participation by way of attendance / presentation in Didactic lectures, Symposia, Seminars, Group discussions, Workshops, Morbidity & Mortality meet, Panel Discussion etc. Each Student should have actively participated in at least 6 academic sessions per year during the total training period of two years (total 12).

At the end of II year
Final Assessment (By University)

A. Theory
   Paper I -
      Basic Sciences related to Anaesthesia (History, Anatomy, Physiology, Pharmacology, Pathology, Physics, Instrument & Equipments, etc)
   Paper II -
      Theory & Practice of Anaesthesia.
   Paper III -
      Clinical sciences like Medicine & Surgery related to Anaesthesia.

B. Practical
   Clinical cases as per University Protocol
   Viva Voce on equipments, drugs, investigations, laboratory findings etc.

Recommended Reading
I. Books
   4. Yao and Artusio’s Anesthesiology- Fun-Sun F.Yao- 2003 5th Lippincott Williams & Wilkins.
9. Anatomy for Anaesthetists-
   *Harold Ellis 2005 8th Blackwell Publishing.*
10. Pharmacology & Physiology in Anaesthetic Practice-
    *Robert K Stoelting 3rd Lippincott-Raven.*
11. Shnider and Livinson’s Anesthesia for Obstetrics-
    *Hughes 2001 4th Lippincott Williams & Wilkins.*
12. Understanding Paediatric Anaesthesia-
    *Jaccob 2006 4th Elsevier.*
13. Cardiac Anaesthesia-
    *Kaplan 2005 4th W. B. Saunders & Co.*
14. Clinical Application of Mechanical Ventilation-
    *David W. Chang 2001, 2nd Delmar-Thomas Learning.*

II Journals

1. Indian Journal of Anaesthesia
2. Journal of Anesthesiology and Clinical Pharmacology
3. Indian Journal of Critical Care Medicine
4. Anesthesiology Clinics of North America
5. Anaesthesia
6. British Journal of Anaesthesia
7. Anesthesia & Analgesia
8. Anesthesiology