



MAHATMA GANDHI UNIVERSITY
of
MEDICAL SCIENCES & TECHNOLOGY
JAIPUR

Syllabus

MD – PSYCHIATRY

(3 Years Post Graduate Degree Course)

Notice

1. Amendment made by the Medical Council of India in Rules/Regulations of Post Graduate Medical Courses shall automatically apply to the Rules/Regulations of the Mahatma Gandhi University of Medical Sciences & Technology (MGUMST), Jaipur.
2. The University reserves the right to make changes in the syllabus/books/guidelines, fees-structure or any other information at any time without prior notice. The decision of the University shall be binding on all.
3. The Jurisdiction of all court cases shall be Jaipur Bench of Hon'ble Rajasthan High Court only.

RULES & REGULATIONS
MD PSYCHIATRY (9030)
(3 Years Post Graduate degree course)

TITLE OF THE COURSE:

It shall be called Doctor of Medicine.

ELIGIBILITY FOR ADMISSION:

No candidate of any category (including NRI quota) shall be eligible for admission to MD/MS courses, if he or she has not qualified NEET PG (MD/MS) conducted by National Board of Examinations or any other Authority appointed by the Government of India for the purpose.

(1) General Seats

- (a) Every student, selected for admission to postgraduate medical course shall possess recognized MBBS degree or equivalent qualification and should have obtained permanent Registration with the Medical Council of India, or any of the State Medical Councils or should obtain the same within one month from the date of his/her admission, failing which the admission of the candidate shall be cancelled;
- (b) Completed satisfactorily one year's rotatory internship or would be completing the same before the date announced by the University for that specific year as per MCI rules after passing 3rd professional MBBS Part II Examination satisfactorily.
- (c) In the case of a foreign national, the Medical Council of India may, on payment of the prescribed fee for registration, grant temporary registration for the duration of the postgraduate training restricted to the medical college/institution to which he/she is admitted for the time being exclusively for postgraduate studies; however temporary registration to such foreign national shall be subject to the condition that such person is duly registered as medical practitioner in his/her own country from which he has obtained his basic medical qualification and that his degree is recognized by the corresponding Medical Council or concerned authority.

(2) NRI Seats

- (a) Students from other countries should possess passport, visa and exchange permits valid for the period of their course of study in this Institution and should also observe the regulations of both central and state governments regarding residential permits and obtain no-objection certificate from the same.
- (b) The candidate should have a provisional "Student Visa". If he comes on any other visa and is selected for admission, he will have to first obtain a student visa from his country and then only he will be allowed to join the course. Therefore it is imperative to obtain provisional student visa before coming for Counseling.
- (c) This clause is applicable to NRI/Foreign Students only.

CRITERIA FOR SELECTION FOR ADMISSION:

(1) NRI Quota

15% of the total seats are earmarked for Foreign National / PIO / OCI/ NRI / Ward of NRI/NRI sponsored candidates who would be admitted on the basis of merit obtained in NEET PG or any other criteria laid down by Central Government/MCI.

(2) Remaining Seats (Other than NRI Quota Seats)

- (a) Admissions to the remaining 85% of the seats shall be made on the basis of the merit obtained at the NEET conducted by the National Board of Examinations or any other Authority appointed by the Government of India for the purpose.
- (b) The admission policy may be changed according to the law prevailing at the time of admission.

COUNSELING/INTERVIEW:

- (1) Candidates in order of merit will be called for Counseling/Interview and for verification of original documents and identity by personal appearance.
- (2) Counseling will be performed and the placement will be done on merit-cum-choice basis by the Admission Board appointed by the Government of Rajasthan.

RESERVATION:

Reservation shall be applicable as per policy of the State Government in terms of scheduled caste, scheduled tribe, back ward class, special back ward class, women and handicapped persons.

ELIGIBILITY AND ENROLMENT:

Every candidate who is admitted to MD/MS course in Mahatma Gandhi Medical College & Hospital shall be required to get himself/herself enrolled and registered with the Mahatma Gandhi University of Medical Sciences & Technology after paying the prescribed eligibility and enrolment fees.

The candidate shall have to submit an application to the MGUMST for the enrolment/eligibility along with the following original documents with the prescribed fees (upto November 30 of the year of admission without late fees and upto December 31 of the year of admission with late fees) –

- (a) MBBS pass Marks sheet/Degree certificate issued by the University (Ist MBBS to Final MBBS)
- (b) Certificate regarding the recognition of medical college by the Medical Council of India.
- (c) Completion of the Rotatory Internship certificate from a recognized college.
- (d) Migration certificate issued by the concerned University.
- (e) Date of Birth Certificate
- (f) Certificate regarding registration with Rajasthan Medical Council / Medical Council of India / Other State Medical Council.

REGISTRATION

Every candidate who is admitted to MD/MS course in Mahatma Gandhi Medical College & Hospital shall be required to get himself/herself registered with the Mahatma Gandhi University of Medical Sciences & Technology after paying the prescribed registration fees.

The candidate shall have to submit an application to the MGUMST for registration with the prescribed fees (upto November 30 of the year of admission without late fees upto December 31 of the year of admission with late fees).

DURATION OF COURSE:

The course shall be of 3 years duration from the date of commencement of academic session.

PERIOD OF TRAINING:

- (1) The period of training for obtaining Post graduate degrees (MD/MS) shall be three completed years including the period of examination.
- (2) It shall however be two years for candidates who have obtained the recognised PG Diploma in the subject.

MIGRATION:

No application for migration to other Medical Colleges will be entertained from the students already admitted to the MD/MS course at this Institute.

METHODS OF TRAINING FOR MD/MS:

Method of training for MD/MS courses shall be as laid down by the Medical Council of India.

ONLINE COURSE IN RESEARCH METHODS

- i. All postgraduate students shall complete an online course in Research Methods to be conducted by an Institute(s) that may be designated by the Medical Council of India by way of public notice, including on its website and by Circular to all Medical Colleges. The students shall have to register on the portal of the designated institution or any other institute as indicated in the public notice.
- ii. The students have to complete the course by the end of their 2nd semester.
- iii. The online certificate generated on successful completion of the course and examination thereafter, will be taken as proof of completion of this course
- iv. The successful completion of the online research methods course with proof of its completion shall be essential before the candidate is allowed to appear for the final examination of the respective postgraduate course.
- v. This requirement will be applicable for all postgraduate students admitted from the academic year 2019-20 onwards

ATTENDANCE, PROGRESS AND CONDUCT:**(1) Attendance:**

- (a) 80% attendance in each course is compulsory. Any one failing to achieve this, shall not be allowed to appear in the University examination.
- (b) A candidate pursuing MD/MS course shall reside in the campus and work in the respective department of the institution for the full period as a full time student. No candidate is permitted to run a clinic/work in clinic/laboratory/ nursing home while studying postgraduate course. No candidate shall join any other course of study or appear for any other examination conducted by this university or any other university in India or abroad during the period of registration. Each year shall be taken as a unit for the purpose of calculating attendance.
- (c) Every candidate shall attend symposia, seminars, conferences, journal review meetings, grand rounds, CPC, CCR, case presentation, clinics and lectures during each year as prescribed by the department and not absent himself / herself from work without valid reasons. Candidates should not be absent continuously as the course is a full time one.

(2) Monitoring Progress of Studies- Work diary/Log Book:

- (a) Every candidate shall maintain a work diary in which his/her participation in the entire training program conducted by the department such as reviews, seminars, etc. has to be chronologically entered.
- (b) The work scrutinized and certified by the Head of the Department and Head of the Institution is to be presented in the University practical/clinical examination.

(3) Periodic tests:

There shall be periodic tests as prescribed by the Medical Council of India and/ or the Board of Management of the University, tests shall include written papers, practical/clinical and viva voce.

(4) Records:

Records and marks obtained in tests will be maintained by the Head of the Department and will be made available to the University when called for.

THESIS:

- (1) Every candidate pursuing MD/MS degree course is required to carry out work on research project under the guidance of a recognized post graduate teacher. Then such a work shall be submitted in the form of a Thesis.
- (2) The Thesis is aimed to train a postgraduate student in research methods & techniques.
- (3) It includes identification of a problem, formulation of a hypothesis, designing of a study, getting acquainted with recent advances, review of literature, collection of data, critical analysis, comparison of results and drawing conclusions.
- (4) Every candidate shall submit to the Registrar of the University in the prescribed format a Plan of Thesis containing particulars of proposed Thesis work within six months of the date of commencement of the course on or before the dates notified by the University.
- (5) The Plan of Thesis shall be sent through proper channel.
- (6) Thesis topic and plan shall be approved by the Institutional Ethics Committee before sending the same to the University for registration.
- (7) Synopsis will be reviewed and the Thesis topic will be registered by the University.
- (8) No change in the thesis topic or guide shall be made without prior notice and permission from the University.
- (9) The Guide, Head of the Department and head of the institution shall certify the thesis. Three printed copies and one soft copy of the thesis thus prepared shall be submitted by the candidate to the Principal. While retaining the soft copy in his office, the Principal shall send the three printed copies of the thesis to the Registrar six months before MD/MS University Examinations. Examiners appointed by the University shall evaluate the thesis. Approval of Thesis at least by two examiners is an essential pre-condition for a candidate to appear in the University Examination.
- (10) Guide: The academic qualification and teaching experience required for recognition by this University as a guide for thesis work is as laid down by Medical Council of India/Mahatma Gandhi University of Medical Sciences & Technology, Jaipur.
- (11) Co-guide: A co-guide may be included provided the work requires substantial contribution from a sister department or from another institution recognized for teaching/training by Mahatma Gandhi University of Medical Sciences & Technology, Jaipur/Medical Council of India. The co-guide shall be a recognized postgraduate teacher.
- (12) Change of guide: In the event of a registered guide leaving the college for any reason or in the event of death of guide, guide may be changed with prior permission from the University.

ELIGIBILITY TO APPEAR FOR UNIVERSITY EXAMINATION:

The following requirements shall be fulfilled by every candidate to become eligible to appear for the final examination:

- (1) Attendance: Every candidate shall have fulfilled the requirement of 80% attendance prescribed by the University during each academic year of the postgraduate course. (as per MCI rules)
- (2) Progress and Conduct: Every candidate shall have participated in seminars, journal review meetings, symposia, conferences, case presentations, clinics and didactic lectures during each year as designed by the department.
- (3) Work diary and Logbook: Every candidate shall maintain a work diary for recording his/her participation in the training program conducted in the department. The work diary

and logbook shall be verified and certified by the Department Head and Head of the Institution.

- (4) Every student would be required to present one poster presentation, to read one paper at a National/State Conference and to have one research paper which should be published/accepted for publication/ sent for publication to an indexed journal during the period of his/her post graduate studies so as to make him/her eligible to appear at the Post Graduate Degree Examination.
- (5) Every student would be required to appear in and qualify the Pre-University Post graduate degree Mock examination. Post graduate students who fail to appear in or do not qualify the Pre-University Post graduate degree Mock examination shall not be permitted to appear in the final examination of the University.

The certification of satisfactory progress by the Head of the Department/ Institution shall be based on (1), (2), (3), (4) and (5) criteria mentioned above.

ASSESSMENT:

- (1) The progress of work of the candidates shall be assessed periodically by the respective guides and report submitted to the Head of the Institution through the Head of the Department at the end of every six months. The assessment report may also be conveyed in writing to the candidate who may also be advised of his/her shortcomings, if any.
- (2) In case the report indicate that a candidate is incapable of continuing to do the work of the desired standard and complete it within the prescribed period, the Head of the Institution may recommend cancellation of his/her registration at any time to the University.
- (3) Formative Assessment:
 - (a) General Principles
 - i. The assessment is valid, objective, constructive and reliable.
 - ii. It covers cognitive, psychomotor and affective domains.
 - iii. Formative, continuing and summative (final) assessment is also conducted.
 - iv. Thesis is also assessed separately.
 - (b) Internal Assessment
 - i. The internal assessment is continuous as well as periodical. The former is based on the feedback from the senior residents and the consultants concerned. Assessment is held periodically.
 - ii. Internal assessment will not count towards pass/fail at the end of the program, but will provide feedback to the candidate.
 - iii. The performance of the Postgraduate student during the training period should be monitored throughout the course and duly recorded in the log books as evidence of the ability and daily work of the student.
 - iv. Marks should be allotted out of 100 as under
 - 1) Personal Attributes - 20 marks
 - a. Behavior and Emotional Stability: Dependable, disciplined, dedicated, stable in emergency situations, shows positive approach.
 - b. Motivation and Initiative: Takes on responsibility, innovative, enterprising, does not shirk duties or leave any work pending.
 - c. Honesty and Integrity: Truthful, admits mistakes, does not cook up information, has ethical conduct, exhibits good moral values, loyal to the institution.
 - 2) Clinical Work - 20 marks
 - a. Availability: Punctual, available continuously on duty, responds promptly on calls and takes proper permission for leave.

- b Diligence: Dedicated, hardworking, does not shirk duties, leaves no work pending, does not sit idle, competent in clinical case work up and management.
 - c Academic Ability: Intelligent, shows sound knowledge and skills, participates adequately in academic activities and performs well in oral presentation and departmental tests.
 - d Clinical Performance: Proficient in clinical presentations and case discussion during rounds and OPD work up. Preparing Documents of the case history/examination and progress notes in the file (daily notes, round discussion, investigations and management) Skill of performing bed side procedures and handling emergencies.
- 3) Academic Activities - 20 marks
Performance during presentation at Journal club/ Seminar/Case discussion/Stat meeting and other academic sessions. Proficiency in skills as mentioned in job responsibilities.
- 4) End of term theory examination - 20 marks
End of term theory examination conducted at end of 1st, 2nd year and after 2 years 9 months.
- 5) End of term practical examination - 20 marks
- a. End of term practical/oral examinations after 2 years 9 months.
 - b. Marks for personal attributes and clinical work should be given annually by all the consultants under whom the resident was posted during the year. Average of the three years should be put as the final marks out of 20.
 - c. Marks for academic activity should be given by the all consultants who have attended the session presented by the resident.
 - d. The Internal assessment should be presented to the Board of examiners for due consideration at the time of Final Examinations.
 - e. Yearly (end of 1st, 2nd & 3rd year) theory and practical examination will be conducted by internal examiners and each candidate will enter details of theory paper, cases allotted (2 long & 2 short) and viva.
 - f. Log book to be brought at the time of final practical examination.

APPOINTMENT OF EXAMINERS:

Appointment of paper setters, thesis evaluators, answer books evaluators and practical & viva voce examiners shall be made as per regulations of the Medical Council of India.

SCHEME OF EXAMINATION:

Scheme of examination in respect of all the subjects of MD/MS shall be as under :

- (1) The examination for MD/MS shall be held at the end of three Academic Years.
- (2) Examinations shall be organized on the basis of marking system.
- (3) The period of training for obtaining MD/MS degrees shall be three completed years including the period of examination.
- (4) The University shall conduct not more than two examinations in a year for any subject with an interval of not less than 4 months and not more than 6 months between the two examinations.
- (5) The examinations shall consist of:
 - (a) Thesis :
 - i. Thesis shall be submitted at least six months before the main Theory examinations.

- ii. The thesis shall be examined by a minimum of three examiners – one Internal and two External examiners who shall not be the examiners for Theory and Clinical/Practical.
 - iii. In departments where besides the two earmarked practical/clinical examiners no one else is a qualified P.G. teacher, in that case the Thesis shall be sent to the third external examiner who shall actually be in place of the internal examiner.
 - iv. Only on the acceptance of the thesis by any two examiners, the candidate shall be eligible to appear for the final examination.
 - v. A candidate whose thesis has been once approved by the examiners will not be required to submit the Thesis afresh, even if he/she fails in theory and/or practical of the examination of the same branch.
 - vi. In case the Thesis submitted by a candidate is rejected, he/she should be required to submit a fresh Thesis.
- (b) Theory papers:
- i. There shall be four theory papers as below :
 - Paper I :** Basic Sciences as related to Psychiatry
 - Paper II :** Clinical Psychiatry
 - Paper III :** Psychiatric theory and Psychiatric specialties
 - Paper IV :** Neurology and General Medicine as related to Psychiatry
 - ii. Each theory paper examination shall be of three hours duration.
 - iii. Each theory paper shall carry maximum 100 marks.
 - iv. The question papers shall be set by the External Examiners.
 - v. There will be a set pattern of question papers.
 - Every question paper shall contain three questions. All the questions shall be compulsory, having no choice.
 - Question No. 1 shall be of long answer type carrying 20 marks.
 - Question No. 2 shall have two parts of 15 marks each. Each part will be required to be answered in detail.
 - Question No. 3 shall be of five short notes carrying 10 marks each.
 - vi. The answer books of theory paper examination shall be evaluated by two External and two internal examiners. Out of the four paper setters, the two paper setters will be given answer books pertaining to their papers and the answer books of the remaining two papers will be evaluated by two Internal Examiners. It will be decided by the President as to which paper is to be assigned to which Internal Examiner for evaluation.
 - vii. A candidate will be required to pass theory and practical examinations separately in terms of the governing provisions pertaining to the scheme of examination in the post graduate regulations. The examinee should obtain minimum 40% marks in each theory paper and not less than 50% marks cumulatively in all the four papers for degree examination to be cleared as “passed” at the said Degree examination.
- (c) Clinical/ Practical & Oral examinations:
- i. Clinical/Practical and Oral Examination of 400 marks will be conducted by at least four examiners, out of which two (50%) shall be External Examiners.
 - ii. A candidate will be required to secure at least 50% (viz. 200/400) marks in the Practical including clinical and viva voce examinations.
- (6) If a candidate fails in one or more theory paper(s) or practical, he/she shall have to reappear in the whole examination i.e. in all theory papers as well as practical.

GRACE MARKS

No grace marks will be provided in MD/MS examinations.

REVALUATION / SCRUTINY:

No Revaluation shall be permitted in the MD/MS examinations. However, the student can apply for scrutiny of the answer books as per University Rules.

GUIDELINES FOR COMPETENCY BASED POSTGRADUATE TRAINING PROGRAMME FOR MD IN PSYCHIATRY (9030)

Preamble

The purpose of PG education is to create specialists who would provide high quality health care and advance the cause of science through research & training.

A postgraduate specialist having undergone the required training should be able to recognize the health needs of the community, should be competent to handle medical problems effectively and should be aware of the recent advances pertaining to his specialty. The post graduate student should acquire the basic skills in teaching of medical/para-medical students. She/he is also expected to know the principles of research methodology and modes of consulting library.

The purpose of this document is to provide teachers and learners illustrative guidelines to achieve defined outcomes through learning and assessment. This document was prepared by various subject-content specialists. The Reconciliation Board of the Academic Committee has attempted to render uniformity without compromise to purpose and content of the document. Compromise in purity of syntax has been made in order to preserve the purpose and content. This has necessitated retention of “domains of learning” under the heading “competencies”.

SUBJECT SPECIFIC LEARNING OBJECTIVES

The primary goal of the MD course in Psychiatry is to produce a post graduate clinician able to provide health care in the field of Psychiatry. A physician qualified in Psychiatry, at the end of the course, should be able to diagnose and treat psychiatric disorders, take preventive and curative steps for the disease in the community at all levels of health care and qualify as a consultant and teacher in the subject.

At the end of the MD course in Psychiatry, the student should have able to:

- Understand the relevance of mental health in relation to the health needs of the country
- Ethical considerations in the teaching and practice of Psychiatry
- Identify the social, economic, biological and emotional determinants of mental health
- Identify the environmental causes as determinants of mental health
- Institute appropriate diagnostic, therapeutic and rehabilitative procedures to the mentally ill patient
- Take detailed history, conduct appropriate ethically valid physical examination and institute appropriate evaluation procedures to make a correct clinical diagnosis
- Perform relevant investigative and therapeutic procedures for the psychiatric patient
- Recommend appropriate laboratory and imaging examinations and interpret the results correctly
- Plan and deliver comprehensive treatment of a psychiatric patient using principles of rational drug therapy
- Plan rehabilitation of psychiatric patient suffering from chronic illness
- Clinically manage psychiatric emergencies efficiently
- Demonstrate empathy and humane approach towards patients and their families and respect their sensibilities
- Demonstrate communication skills of a high order in explaining management and prognosis, providing counseling and giving health education messages to patients, families and communities

- Develop appropriate skills to practice evidence-based psychiatry
- Demonstrate competence in basic concepts of research methodology and epidemiology
- Be aware of and take appropriate steps in the implementation of national mental health programs, effectively and responsibly
- Be aware of the concept of essential drugs and rational use of drugs
- Be aware of the legal issues in the practise of Psychiatry
- Be aware of the special requirements in the practice of Child and adolescent Psychiatry and Geriatric Psychiatry
 - **Research:** The student should know the basic concepts of research methodology and plan a research project in accordance with ethical principles. S/he should also be able to interpret research findings and apply these in clinical practice. S/he should know how to access and utilize information resources and should have basic knowledge of statistics.
 - **Teaching:** S/He should learn the basic methodology of teaching and develop competence in teaching medical/paramedical students, health professionals, members of allied disciplines (e.g. behavioural sciences), law enforcement agencies, families and consumers and members of the public.

SUBJECT SPECIFIC COMPETENCIES

By the end of the course, the student should have acquired knowledge (cognitive domain), professionalism (affective domain) and skills (psychomotor domain) as given below:

A. Cognitive domain

By the end of the course, the student should demonstrate knowledge in the following:

- **General topics:**
 1. The student should be able to demonstrate knowledge of basic sciences (Anatomy, Physiology, Biochemistry, Microbiology, Pathology and Pharmacology) as applied to Psychiatry.
 2. The student should be able to explain aetiology, assessment, classification and management and prognosis of various psychiatric disorders (including psychiatric sub-specialities), and Neuroanatomy, Neurophysiology, Neurochemistry, Neuroimaging, Electrophysiology, Psychoneuroendocrinology, Psychoneuroimmunology, Chronobiology and Neurogenetics.
 3. Acquire knowledge of delirium, dementia, amnesic & other cognitive disorders and mental disorders due to a general medical condition.
 4. The student should be able to explain follow-up care of person suffering from chronic relapsing psychiatric ailments.
 5. The student should acquire knowledge of emergency measures in acute crisis arising out of various psychiatric illnesses including drug detoxification and withdrawal.
 6. The student should acquire knowledge of pharmacokinetics & pharmacodynamics of drugs involved in psychiatric management of patients.
 7. The student should acquire knowledge of (a) normal child development and adolescence, mental retardation in children (b) learning & associated disorders and their management
 8. The student should acquire knowledge and be able to explain mechanisms for rehabilitation of psychiatric patients.
 9. The student should acquire knowledge of substance related disorders and their management.
 10. The student should acquire knowledge of psychotic disorders, mood disorders, and anxiety disorders and their management

11. The student should acquire knowledge of sexual and gender identity disorders and their management.
12. The student should acquire knowledge of eating disorders and sleep disorders and their management.
13. The student should be conversant with recent advances in Psychiatry.
14. The student should be conversant with routine bedside diagnostic and therapeutic procedures and acquire knowledge of latest diagnostics and therapeutics procedures available.
15. The student should be conversant with various policy related aspects of Psychiatric practice in India (e.g. Mental Health Act, National Health Mental Health Programmes etc.).
16. The student should be conversant with research methodologies.

B. Affective Domain:

1. The student should be able to function as a part of a team, develop an attitude of cooperation with colleagues, interact with the patient and the clinician or other colleagues to provide the best possible diagnosis or opinion.
2. The student should always adopt ethical principles and maintain proper etiquette in dealings with patients, relatives and other health personnel
3. The student should demonstrate respect for the rights of the patient including the right to information and second opinion.
4. The student should develop communication skills to prepare reports and professional opinion as well as to interact with patients, relatives, peers and paramedical staff, and for effective teaching.

C. Psychomotor domain

At the end of the course, the student should acquire the following clinical skills and be able to:

- Become an expert in good history taking, physical examination, mental state examination, and able to establish rapport and counsel family members and patients on scientific basis. choose the required investigations for both short and long term management.
- At the end of the course, the student should be able to:
 1. Obtain a proper relevant history, and perform a humane and thorough clinical examination including detailed mental state examinations using proper communication skills.
 2. Arrive at a logical working diagnosis and differential diagnosis after clinical examination.
 3. Order appropriate investigations keeping in mind their relevance and cost effectiveness and obtain additional relevant information from family members to help in diagnosis and management.
 4. Identify psychiatric situations calling for urgent or early intervention and refer at the optimum time to appropriate centres.
 5. Write a complete case record with all necessary details.
 6. Write a proper discharge summary with all relevant information.
 7. Obtain informed consent for any examination/procedure.
 8. Perform clinical audit.
 9. Must be able to perform modified Electroconvulsive therapy (ECT).

- The student, at the end of the course should be able to perform independently, the following:
 1. Conduct detailed Mental Status Examination (MSE)
 2. Cognitive behaviour therapy
 3. Supportive psychotherapy
 4. Modified ECT
 5. Clinical IQ assessment
 6. Management of alcohol withdrawal
 7. Alcohol intoxication management
 8. Opioid withdrawal management
 9. Delirious patients
 10. Crisis intervention
- The student must be able to demonstrate approach to patient with variety of clinical presentations including following symptoms:
 1. Auditory hallucinations
 2. Visual hallucinations
 3. Pseudo hallucination
 4. Seizures true and pseudo seizure
 5. Panic attack
 6. Manic symptoms
 7. Behavioural symptoms of schizophrenia
 8. Catatonia
 9. Delirium
 10. Malingering
- The student, at the end of the course should be able to perform under supervision, the following:
 1. Behaviour therapy
 2. Opioid intoxication management
 3. Genetic counselling
 4. Family therapy
- The student, at the end of the course should be able to assist the expert in the following:
 1. Interpersonal therapy
 2. Management of suicide attempt

Syllabus

Course Contents:

No limit can be fixed and no fixed number of topics can be prescribed as course contents. He is expected to know the subject in depth; however emphasis should be on the diseases/health problems most prevalent in that area. Knowledge of recent advances and basic sciences as applicable to his/her specialty should get high priority. Competence in managing behavioural problems commensurate with the specialty must be ensured.

The student must acquire knowledge in the following:

Theoretical concepts:

1. Functional and behavioural neuroanatomy
2. Neurophysiology and Neuro-chemistry

3. Neuro-imaging
4. Electrophysiology (including chronobiology, electroencephalogram, etc)
5. Psychoneuroendocrinology
6. Neurogenetic disorder
7. Classification In Psychiatry
8. Theory of personality and personality disorders
9. Abuse (Physical / Sexual) or Neglect Of Child /Adult
10. Adjustment Disorder
11. Anxiety Disorders (including Panic Disorder, Agoraphobia, Phobias, Obsessive-Compulsive Disorder, Posttraumatic Stress Disorder, Acute Stress Disorder, Generalized Anxiety Disorder, etc).
12. Case-Presentations (including History Taking, Neurological Examination, Mental Status Examination etc.).
13. **Child Psychiatry** (including Learning Disorders, Motor Skills Disorder, Communication Disorders, Pervasive Developmental Disorders (Autistic Disorder, Rett's Disorder, Childhood Disintegrative Disorder, Asperger's Disorder), Attention-Deficit/Hyperactivity Disorder, Conduct Disorder, Oppositional Defiant Disorder, Pica, Tic Disorders, Elimination Disorders, Separation Anxiety Disorder, Selective Mutism, Reactive Attachment Disorder of Infancy or Early Childhood, Stereotypic Movement Disorder, etc.)
14. Community psychiatry
15. Consultation-Liaison Psychiatry
16. Culture Bound Syndromes
17. Dissociative Disorders (including Dissociative Amnesia, Dissociative Fugue, Dissociative Identity Disorder, Depersonalization Disorder, etc.
18. Eating Disorders (including Anorexia Nervosa, Bulimia Nervosa, etc.)
19. Electro-Convulsive Therapy
20. Emergencies In Psychiatry
21. Emotional Intelligence
22. Ethics In Psychiatry
23. Factitious Disorders
24. Forensic and Legal Psychiatry (including Indian Lunacy Act, Mental Health Act, Persons with Disability Act, Narcotic Drugs and Psychotropic Substance Act)
25. Impulse-Control Disorders (including Intermittent Explosive Disorder, Kleptomania, Pyromania, Pathological Gambling, Trichotillomania, etc
26. Learning – Theories
27. Memory
28. Mental Retardation
29. Miscellaneous: Non-compliance, Malingering, Antisocial Behaviour, Borderline Intellectual Functioning, Age-Related Cognitive Decline, Bereavement [including Death], Academic Problems, Occupational Problems, Identity Problems, Religious or Spiritual Problems, Acculturation Problems, Phase of Life Problems, Chronic Fatigue Syndrome, etc.)
30. Mood Disorders (including Depressive Disorders, Bipolar Disorders, Cyclothymic Disorder, etc.)
31. Movement Disorders (including Medication-Induced Movement Disorders, etc)
32. Organic Psychiatry (including Amnesic Disorders, Catatonic Disorder, Cerebrovascular Disorders, Delirium, Dementia, Endocrine Epilepsy, Head Injury, Headache, HIV – AIDS, Infections, etc.

33. Neuropsychology (including Psychological Features of Cerebral Disorders, Clinical Assessment etc.)
34. Pre-Menstrual Dysphoric Disorder
35. Post-Partum Psychiatric Disorders
36. Psychodynamics
37. Psychology (Clinical)
38. Psychometry/ Psychodiagnostics
39. Psychopharmacology
40. Psychosis (including Schizophrenia, Schizophreniform Disorder, Schizoaffective Disorder, Delusional Disorder, Brief Psychotic Disorder, Shared Psychotic Disorder, etc).
41. Psychosomatic Disorders
42. Psychotherapy
43. Sexual And Gender Identity Disorders (including Sexual Desire Disorders, Sexual arousal Disorders, Orgasmic Disorders, Sexual Pain Disorders, Vaginismus, Paraphilias, etc)
44. Sleep Disorders (including Insomnia, Narcolepsy, Breathing-Related Sleep Disorders, Circadian Rhythm Sleep Disorders, Parasomnias, Nightmare Disorder, Sleep Terror Disorder, Sleepwalking Disorder, etc.)
45. Somatoform Disorders (including Somatization Disorder, Undifferentiated Somatoform Disorder, Conversion Disorder, Pain Disorder, Hypochondriasis, Body Dysmorphic Disorder, etc.)
46. Statistics/Research Methodology
47. Stress and related disorders
48. Stupor
49. Substance Related Disorders (including Alcohol-Related Disorders, Amphetamine-Related Disorders, Caffeine-Related Disorders, Cannabis-Related Disorders, Cocaine-Related Disorders, Hallucinogen-Related Disorders, Inhalant-Related Disorders, Nicotine-Related Disorders, Opioid-Related Disorders, Phencyclidine-Related Disorders, Sedative-, Hypnotic-, or Anxiolytic-Related Disorders, etc.)
50. Suicidemanagement and medico-legal aspect
51. Transcultural Psychiatry
52. Rehabilitation of psychiatric patients
53. Geriatric Psychiatry

The student may know the following:

1. Psychiatry rating scales
2. Epidemiology
3. History of Psychiatry
4. Mental Health Issues in Women
5. Mind – the evolving concepts
6. Placebo Effect
7. Psychosurgery

TEACHING AND LEARNING METHODS

Teaching methodology

1. **Lectures:** Lectures are to be kept to a minimum. They may, however, be employed for teaching certain topics. Lectures may be didactic or integrated. Didactic lectures are of least importance; small group discussion such as seminars, journal clubs, symposia, reviews and guest lecturers should get priority for theoretical knowledge. Bedside teaching, grand rounds, structured interactive group discussions and clinical demonstrations should be the hallmark of clinical/practical learning. The student should

have hands-on training in performing various procedures and ability to interpret various tests/investigations. Exposure to newer specialized diagnostic/therapeutic procedures concerning the subject should be given. Self learning tools like assignments and case base learning may be promoted.

The post graduate student should have knowledge of:

- Psycho-pharmacology and broadening the treatment options using medicines.
- Neuro-imaging techniques to understand behaviour and psychiatric illness.
- Community-Psychiatry.
- Functioning of psychiatric hospital.

Community Psychiatry should go beyond familiarization with the National Mental Health Programme. The post graduate student should have hands on experience with:

- G.P. Training Programme
- Organizing Mental Health Camps
- Carrying out Health Education Activities
- Forensic /Legal Psychiatry
- Integration of Mental Health Care with General Health Care

2. **Thesis writing:** Thesis writing is compulsory.
3. **Research Methodology:** The student should know the basic concepts of research methodology and biostatistics, plan a research project, be able to retrieve information from the library.
4. **Teaching skills:** The post graduate students shall be required to participate in the teaching and training programme of undergraduate students and interns.
5. **Continuing Medical Education Programmes (CME):** Each student should attend at least two CME programmes, in 3 years.
6. **Conferences:** The student should attend courses, conferences and seminars relevant to the specialty.
7. A post graduate student of a postgraduate degree course in broad specialties/super specialties would be required to present one poster presentation, to read one paper at a national/state conference and to present one research paper which should be published/accepted for publication/sent for publication during the period of his postgraduate studies so as to make him eligible to appear at the postgraduate degree examination.
8. **Seminars:** There should be a weekly seminar in which the PG students present material on assigned topics in rotation. It should be followed by discussion in which all trainees are supposed to participate. Generally the topics covered should be those that supplement the formal teaching programme.
9. **Case Conference:** A case conference should be held every week where a PG student prepares and presents a case of academic interest by rotation and it is attended by all the members of the Department.
10. **Psychosomatic Rounds:** This is a presentation of a case of psychosomatic illness, or a medical illness with pronounced psychiatric problems. It should be held weekly in collaboration with various departments and attended by the faculty and the PG students of psychiatry and the concerned Department.
11. **Research Forum:** There should be a monthly meeting of one hour each in which the PG students present their plan of research as well as the report of the completed work of their projects. The other research scholars/staff in the department also may participate in it. The faculty, PG students and the non-medical professionals should make critical comments and suggestions.

12. **Journal Club:** A monthly meeting of Journal club should be held in which a senior PG student presents a critical evaluation of a research paper from a journal. All PG students are expected to attend.
13. **Case presentations:** All new in-patients and outpatients cases should be routinely reviewed with one of the Consultants. In addition, the PG student is required to present case material at routine rounds and other case conferences. Senior PG students will conduct evening classes on clinical topics.
14. **Extra-mural activities:** The post graduate students are encouraged to attend certain academic activities in allied subjects held outside parent department e.g. seminars/lectures held at Departments of Sociology, Psychology, Neurology etc.
15. **Psychotherapy tutorials:** These should be held in small groups supervised by a consultant, in which a case is presented by a PG student and psychotherapeutic management discussed.
16. **Rotation:**

Clinical Postings

- A major tenure of posting should be in General Psychiatry. It should include care of in-patients, out-patients, special clinics and maintenance of case records for both in and out patients.
- Exposure to the following areas should be given :-
- Schedule of clinical postings for M.D Psychiatry **(36 months)***

Area/ Specialty

Ward and OPD (Concurrent)	18 months ongoing
Neurology	2 months
Emergency Medicine/ Internal Medicine	1 month
Consultation Liaison Psychiatry	3 months
Psychiatric hospital and Forensic Psychiatry	1 month
Clinical Psychology	1 month
Addiction Psychiatry	3 months ongoing
Child and Adolescent Psychiatry	3 months ongoing
Community psychiatry	2 months ongoing#
Elective posting	2 months (as per choice in the same Institute)

**The stated duration can be subjected to minor modifications depending on available resources*

#Exposure to community based services should be integral to various postings.

Applicable only for trainees in General Hospital Psychiatric units:

- Facilities for these need to be arranged.
- The post graduate student in Psychiatric hospitals would have extended period of exposure to consultation - liaison psychiatry and other medical specialties. Exposure to community based services should be integral part of various postings. The post graduate student shall be given full responsibility for patient care and record keeping under the supervision of the senior PG students and consultants. The post graduate student shall also take patients for psychological interventions in an individual as well as group setting. She/he must complete a minimum of 100 hours of supervised psychological interventions.

Inter-Unit Rotation of posting

- Inter-unit rotation in the department should be done for a period of up to one year (divided during the first year and third year while the post graduate student stays in the parent unit throughout the duration of his thesis work).

17. Clinical meetings:

There should be intra - and inter - departmental meetings for discussing the uncommon / interesting medical problems.

18. Log book:

Each student must be asked to present a specified number of cases for clinical discussion, perform procedures/present seminars/review articles from various journals in inter-unit/interdepartmental teaching sessions. They should be entered in a Log Book and signed by the authorized teacher and Head of Department.

19. The Department should encourage e-learning activities.

During the training programme, patient safety is of paramount importance, therefore, skills are to be learnt initially on the models, later to be performed under supervision followed by performing independently. For this purpose, provision of clinical skills laboratories in medical colleges is mandatory.

ASSESSMENT

FORMATIVE ASSESSMENT, ie., assessment during the training

Formative assessment should be continual and should assess medical knowledge, patient care, procedural & academic skills, interpersonal skills, professionalism, self directed learning and ability to practice in the system.

Quarterly assessment during the MD training should be based on:

1. Journal based / recent advances learning
2. Patient based /Laboratory or Skill based learning
3. Self directed learning and teaching
4. Departmental and interdepartmental learning activity
5. External and Outreach Activities / CMEs

The student to be assessed periodically as per categories listed in postgraduate student appraisal form (Annexure I).

SUMMATIVE ASSESSMENT, ie., at the end of training

The summative examination would be carried out as per the Rules given in POSTGRADUATE MEDICAL EDUCATION REGULATIONS, 2000.

The examination shall be in three parts:

1. Thesis

Every post graduate student shall carry out work on an assigned research project under the guidance of a recognised Post Graduate Teacher, the result of which shall be written up and submitted in the form of a Thesis. Work for writing the Thesis is aimed at contributing to the development of a spirit of enquiry, besides exposing the post graduate student to the techniques of research, critical analysis, acquaintance with the latest advances in medical science and the manner of identifying and consulting available literature.

2. Theory Examination:

There shall be four papers each of three hours duration.

Paper I : Basic Sciences as related to Psychiatry

Paper II : Clinical Psychiatry

Paper III: Psychiatric theory and Psychiatric specialties

Paper IV: Neurology and General Medicine as related to Psychiatry

3. **Clinical/Practical and Oral/viva voce examination should consist of:**

- Presentation of long case of Psychiatry
- Neurology short case
- A short case Psychiatry
- Viva –voce

Due importance should be given to Log Book Records and day-to-day observation during the training.

Recommended Reading

Books (latest edition)

- Kaplan and Saddock's Comprehensive Text Book of Psychiatry
- 2 .Kaplan and Saddock 's Synopsis of Psychiatry
- Fish Clinical Psychopathology
- Lishman's Organic Psychiatry, The Psychological consequences of cerebral disorder
- Clinical practice guidelines of Psychiatric disorders in India
- Stahl Psychopharmacology
- Oxford text book of Psychiatry
- Mental Health Act, Person with Disability Act (India)
- Lowinson et al -Substance Abuse-A Comprehensive Textbook
- Galanter and Klebert-Textbook of Substance Use Treatment

Journals

03-05 international Journals and 02 national (all indexed) Journals

Postgraduate Students Appraisal Form

Pre / Para /Clinical Disciplines

Name of the Department/Unit :

Name of the PG Student :

Period of Training: **FROM.....TO.....**

Sr. No.	Particulars	Not satisfactory	Satisfactory	More Than Satisfactory	Remarks
		1 2 3	4 5 6	7 8 9	
1.	Journal based/recent advances learning				
2.	Patient based/Laboratory or Skill based learning				
3.	Self directed learning and teaching				
4.	Departmental and interdepartmental learning activity				
5.	External and Outreach Activities/CMEs				
6.	Thesis/Research work				
7.	Log Book Maintenance				

Publications

Yes/ No

Remarks* _____

***REMARKS:** Any significant positive or negative attributes of a postgraduate student to be mentioned. For score less than 4 in any category, remediation must be suggested. Individual feedback to postgraduate student is strongly recommended.

SIGNATURE OF
ASSEESSEE

SIGNATURE OF
CONSULTANT

SIGNATURE OF HOD

MODEL PAPER

MD-9031

Psych.-I

**MD Examination Month, Year
PSYCHIATRY**

**Paper – I
Basic Sciences as related to Psychiatry**

**Time: Three Hours
Maximum Marks: 100**

Attempt all questions
All the parts of one question should be answered at one place in sequential order.
Draw diagrams wherever necessary

- Q .1 Discuss functional and behavioural neuroanatomy of Frontal Lobe in detail? 20
- Q.2 Write in detail: 2 x 15 = 30
- a) Theories of Personality
 - b) Theories of Emotion
- Q.3 Write in short on following: 5 x 10 = 50
- a) Operant Conditioning
 - b) Attachment Theory
 - c) Psychosexual stages by Sigmund Freud
 - d) Jean Piaget
 - e) Abraham Maslow

MODEL PAPER

MD-9032

Psych.-II

**MD Examination Month, Year
PSYCHIATRY**

Paper – II
Clinical Psychiatry

Time: Three Hours
Maximum Marks: 100

Attempt all questions
All the parts of one question should be answered at one place in sequential order.
Draw diagrams wherever necessary

- Q.1 Critically evaluate the indications and adverse effects of atypical anti-psychotics. 20
- Q.2 Write in detail: 2 x 15 = 30
- a) Psychiatric manifestation of Epilepsy.
 - b) Etiology, symptoms and management of Mood Disorder.
- Q.3 Write in short on following: 5 x 10 = 50
- a) Treatment Resistant Schizophrenia
 - b) Management of Dissociative Disorder
 - c) Management of Alcohol Disorder
 - d) Obsessive Compulsive Disorder
 - e) Erectile Dysfunction

MODEL PAPER

MD-9033

Psych.-III

**MD Examination Month, Year
PSYCHIATRY**

**Paper – III
Psychiatric theory and Psychiatric specialties**

Time: Three Hours
Maximum Marks: 100

Attempt all questions
All the parts of one question should be answered at one place in sequential order.
Draw diagrams wherever necessary

- Q.1 Describe clinical symptoms, differential diagnosis and management of Attention Deficit Hyperactivity disorder? 20
- Q.2 Write in detail: 2 x 15 = 30
- a) Autism Spectrum Disorder
 - b) Sleep Disorders
- Q.3 Write in short on following: 5 x 10 = 50
- a) Homosexuality
 - b) Anorexia Nervosa
 - c) Transcultural Psychiatry
 - d) Trichotillomania
 - e) Malingering

MODEL PAPER

MD-9034

Psych.-IV

**MD Examination Month, Year
PSYCHIATRY**

Paper – IV

Neurology and General Medicine as related to Psychiatry

Time: Three Hours
Maximum Marks: 100

Attempt all questions

All the parts of one question should be answered at one place in sequential order.

Draw diagrams wherever necessary

- Q.1 Write an essay on Computational Psychiatry. 20
- Q.2 Write in detail: 2 x 15 = 30
- a) Intellectual Disability
 - b) Psycho-Onchology
- Q.3 Write in short on following: 5 x 10 = 50
- a) Neuropsychiatric manifestation of A.I.D.S
 - b) Delirium
 - c) Dapoxetine
 - d) Recent advances in Treatment of Schizophrenia
 - e) Third wave Behavior Therapy