

SyllabusMS - OTORHINOLARYGOLOGY

(3 Years Post Graduate Degree Course)

Notice

- 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 MS OTORHINOLARYGOLOGY(9240)

(3 Years Post Graduate degree course)

TITLE OF THE COURSE:

It shall be called Master of Surgery.

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.
- ii. Out of these, one shall be of Basic Sciences and one shall be of Recent Advances.
- iii. Each theory paper examination shall be of three hours duration.
- iv. Each theory paper shall carry maximum 100 marks.
- v. The question papers shall be set by the External Examiners.
- vi. 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.
 - Ouestion No. 3 shall be of five short notes carrying 10 marks each.
- vii. 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.
- viii. 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 MS IN OTORHINOLARYGOLOGY (9240)

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.

The purpose of MS ENT is to standardize Otorhinolaryngology teaching at Post Graduate level throughout the country so that it will benefit in achieving uniformity in undergraduate teaching as well and resultantly creating competent ENT Surgeons with appropriate expertise.

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 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

At the end of postgraduate training the student should be able to:

- 1. Practice his specialty ethically keeping in mind the requirement of the patient, community and people atlarge.
- 2. Demonstrate sufficient understanding of basic sciences related to his specialty and be able to integrate such knowledge in his Clinical practice.
- 3. Diagnose and manage majority of conditions in his specialty (clinically and with the help of relevantinvestigations)
- 4. Plan and advise measures for the promotive, preventive, curative and rehabilitative aspects of health and diseases in the specialty of ENT.
- 5. Should be able to demonstrate his cognitive skills in the field of ENT and its ancillary branches during the formative and summative evaluation processes.
- 6. Play the assigned role in the implementation of National HealthPrograms
- 7. Demonstrate competence in basic concepts of research methodology and writing thesis and researchpapers.
- 8. Develop good learning, communication and teaching skills.
- 9. Demonstrate sufficient understanding of basic sciences and the clinical applications related to the specialty to be able to integrate this knowledge into Clinical practice. Acquire in-depth knowledge in the subject including recentadvances.
- 10. Demonstrate that he is fully conversant with the latest diagnostics & therapeutics available.

SUBJECT SPECIFIC LEARNING OBJECTIVES

1. TheoreticalKnowledge:

A student should have fair knowledge of basic sciences (Anatomy, Physiology, Biochemistry, Microbiology, Pathology and Pharmacology) as applied to ENT and be able to integrate such knowledge in his clinical practice. She/He should acquire in-depth knowledge of his subject including recent advances. She/He should be fully conversant with the bedside procedures (diagnostic and therapeutic) and having knowledge of latest diagnostics and therapeutics available.

2. Clinical / Practicalskills:

A student should be adept at good history taking, physical examination, providing basic life support and advanced cardiac life support, common procedures like FNAC, Biopsy, aspiration from serous cavities, lumber puncture etc. She/he should be able to choose the required investigations to enhance the attitude, communication skills, including dealing with patient's relatives with the required empathy, adapt to changing trends in education, learning methods and evolving new diagnostic and therapeutic techniques in the subject of ENT.

3. Research:

She/He should know the basic concepts of research methodology, plan a research project, plan and write a thesis and should know how to use library facilities. Basic knowledge of statistics is also required. Knowledge about use of internet resources isrequired.

4. Teaching:

The student should learn the basic methodology of teaching and assessment and develop competence in teaching medical/paramedical students and their assessment.

SUBJECT SPECIFIC COMPETENCIES

CognitiveDomain

At the end of training, the student should be able to demonstrate ability to practically apply knowledge gained during training period. This would include the following:

• Basic Sciences related to Otolaryngology

- Physiology- Mechanism of perception of smell and taste, mechanism of breathing and voice production, lacrimation, deglutition and salivation. Functional tests of the nose and paranasal sinuses, mechanism of cough and sneezing.
- Physics of sound, theories of hearing, mechanism of perception of sound and speech production, physiology of equilibrium and cerebral function. Physiology of brain in connection with hearing, speech, smell and phonation. Audiologic tests like audiometry, impedance, evoked potentials, OAE, Speechaudiometry.
- Physiology of larynx, tracheobronchial tree and oesophagus Histology of mucous membranes, internal ear and other associated organs and structures, nose, PNS NPx, Larynx, Tracheo-Bronchial tree, Lymphoepithetical system. Mechanism of immune system/immunology andgenetics.
- Anatomy-Embryogenesis of ear, nose and throat including palate and the larynx,
 Oesophagus, trachea and lungs, tongue, salivary gland Head and Neck and skull base
- o Parapharyngeal spaces in the neck including connective tissue barriers of larynx.
- Applied anatomy of the skull bones, accessory sinuses, external, middle and inner ears, nose, PNS, nasopharynx, meninges, brain, pharynx, larynx, trachea and bronchi, lungs, pleurae, oesophagus and themediastinum.
- o Anatomy of all cranial nerves with their functions.

• Principles and Practices of Otolaryngology, Audiology and Speech Pathology

Clinical Methodology as applied to ORL HN diseases in adult and children and the accessory sinuses, diagnosis and surgical treatment of diseases of nose, throat and ear in adult and children. Prevention and treatment, infectious diseases of Otolaryngology and Head Neck region. Circulatory and nervous disturbances of the nose, throat and ear and their effects on other organs of the body. Deformities, injuries sinus infections, polyps and the tumors of the nose, and paranasalsinuses.

- Examination of the ear, deafness and allied diseases, complications of diseases of the
 ear. Injuries, tumors, nervous and circulatory neurological disturbances of the ear.
 Diagnosis and treatment of tinnitus and vertigo. Diagnosis and rehabilitation of the
 Hearing handicapped including, dispensing of hearing aid other vibrotatile aids.
 - Surgical pathology of Otolaryngology and Head Neckregion.
 - Basic knowledge of anaesthesia as related toENT.
 - Examination of diseases of children (Paediatric ORL) in connection with throat and larynx. Neurological and vascular disturbances. Congenital and neonatalstridor.
 - Pathology of various diseases of the larynx and throat, tracheo- bronchial tree and their causativeorganisms.
 - Indications and various techniques of direct laryngoscopy, nasal endoscopy. Bronchoscopy and oesophagoscopy, including microlaryngoscopic procedures.
 - Reading of radiograms, scans, audiograms, nystagmograms and tympanograms in connection with ENTdiseases/disorders.
 - Special apparatus for the diagnosis and treatment of the diseases of ear, nose and throat including audiometer, BERA, Speech analyser etc.

• Recent advances in Otolaryngology and Head Neck surgery

- Recent developments in the diagnosis, pathogenesis and treatment of the ENT diseases
- o The knowledge of the frontiers of the oto-laryngology and lateral skull base surgery
- o Rhinoplasty, endoscopic sinus surgery, and anterior cranial fossasurgery
- o Knowledge of LASERS and fibreoptics
- Other methods of managing Hearingloss
- o Implantable hearing aids cochlearimplants
- Phonosurgery
- o Etiology and Managements of sleepapnoea/snoring
- Hypophysectomy and optic nervedecompressions
- o Immunotherapy and modalities of the genetherapy
- Newer techniques for Radiotherapy including, use of gamma knife for treatment of Intracranial tumors and othermalignancy
- o Chemotherapy of cancer

• General Surgical Principles and Head-Neck Surgery

- o General Surgery, Head and Neck oncology, and Medicine as applicable to the ENT disorders/diseases. Surgery of congenital deformities of nose, ear (Pinna) and trachea/oesophagusetc.
- o Radiology, Imaging computed tomography and magnetic resonance imaging, (MRI) and intervention radiology and angiography as related to ENT
- General Pathologic aspects such as wound healing and also pathology and Pathogenesis of ENT diseases, Pharmacology, molecular biology, genetics, cytology, haematology, and immunology as applicable tootolaryngology
- o General Principles of faciomaxillary traumatology and neckinjury
- Plastic Surgery as applicable toOtolaryngology

AffectiveDomain

• The student will show integrity, accountability, respect, compassion and dedicated patient care. The student will demonstrate a commitment to excellence and continuous professional development.

- The student should demonstrate a commitment to ethical principles relating to providing patient care, confidentiality of patient information and informedconsent.
- The student should show sensitivity and responsiveness to patients' culture, age, gender and disabilities.
- The student should be able to choose the required investigations to enhance the attitude, communicative skills, including dealing with patient's relatives with the required empathy, adapt to changing trends in education, learning methods and evolving new diagnostic and therapeutic techniques in the subject of ENT.

PsychomotorDomain

By the end of the training, a student should be able to demonstrate his skills in:

- Taking a good history and demonstrating good examination techniques.
- arrive at a logical working diagnosis, differential diagnosis after clinical examination and
 order appropriate investigations keeping in mind their relevance (need based) and thereby
 provide appropriate care that is ethical, compassionate, responsive and cost effective and
 in conformation with statutoryrules.
- Should be able to perform and demonstrate the practical skills in the field of ENT including the following:
 - o Examination of the ear, nose and throat oral cavityexamination
 - o Clinico-physiological examination and evaluation of the audio-vestibulo neurologicalsystem
 - Examination of the larynx and the throat including flexible endoscopy, stroboscopy, voice analysis and the clinico-physiological examination of the speech
 - o Examination of the otological and audiological system including Tuning fork testing, audiological evaluation, micro andotoendoscopy
 - o Clinical and physiological evaluation of the nose and paranasal sinuses including nasal endoscopy and olfactoryevaluation
 - Examination of the neck and itsstructures
- Should demonstrate and perform various therapeutic skills related to the speciality such as:
 - Tracheostomy
 - Anterior/ posterior nasalpacking
 - o Ear Packing and Syringing
 - o Foreign body removal from air nose andthroat
 - Airway management including basic life support skills, Cardiopulmonary resuscitation, intubation, homeostasis maintenance, IV alimentation and fluid, electrolyte maintenance and principles of blood transfusion alimentation including Nasogastric feeding, gastrostomy
 - o Wound suturing, dressings and care of thewounds
 - o Basic principles of rehabilitation
 - o Common procedures like FNAC, biopsy, aspiration from serous cavities, lumber punctureetc.
- Should understand principles of and interpret X-rays/CT/MRI, audiograms, ENG, BERA, OAE, ultrasonographic abnormalities and other diagnostic procedures in relation to thespeciality
- Should have observed/performed under supervision the various surgical procedures in relation to thespeciality

SYLLABUS

Course contents:

- 1. Anatomy and Physiology of Ear, Nose and Throat, Trachea andesophagus.
- 2. The generation and reception of speech
- 3. Radiographic anatomy of the ear, nose, throat andimaging.
- 4. Bacteriology in relation toOtorhinolaryngology
- 5. Allergy andrhinitis
- 6. Haematology in relation toOtolaryngology
- 7. Anaesthesia forOtolaryngology
- 8. Pharmacology of drugs used in ENT
- 9. Electrolyte, fluid balance/shockconditions
- 10. Use of teachingaids
- 11. Routine blood, urinetesting
- 12. Preparation of slides
- 13. Facial nerve stimulationtest
- 14. Audiometric tests like pure tone Audiometry, Impedance Audiometry, Free field Audiometry, Specialized tests of hearing including SISI, Tone decay, ABLB, Speech discrimination scoreetc.
- 15. Vestibular tests like caloric testing (Water and Air) stopping test, Fukuda'stest,
- 16. Evoked responseaudiometry.

Ear:

- 1. The physical and functional examination of theear
- 2. The functional and physical examination of the vestibular ystem.
- 3. Tinnitus
- 4. Affections of externalear
- 5. Repair of deformities of the externalear.
- 6. Congenital conditions of the middle earcleft
- 7. Traumatic conductivedeafness
- 8. Acute inflammation of the middle earcleft
- 9. Non-suppurative otitismedia
- 10. Chronic suppurative otitismedia
- 11. Management of chronic suppurative otitismedia
- 12. Complications of infections of middleear.
- 13. Tumors of the middle ear cleft and temporalbone
- 14. Diseases of the oticcapsule-otosclerosis
- 15. Diseases of the otic capsule-otherdiseases
- 16. The deafchild
- 17. Acoustic neuroma
- 18. Ototoxicity
- 19. Presbycusis
- 20. Diagnosis and management of sudden and fluctuant sensorineural hearing loss
- 21. Meniere's disease
- 22. Neurologic aspects of vertigo
- 23. Facialparalysis
- 24. Rehabilitation of adults with acquired Hearing loss-Hearingaids
- 25. The cochlearImplants
- 26. Nystagmus
- 27. Otoacoustic emissions

Nose:

- 1. Examination of thenose
- 2. Conditions of the externalnose
- 3. Injuries of the facialskeleton
- 4. Congenital diseases of thenose
- 5. The nasalseptum
- 6. Foreign bodies in the nose, rhinolith
- 7. Epistaxis
- 8. Acute chronic inflammations of the nasalcavities
- 9. Vasomotor rhinitis-allergic andnon-allergic
- 10. Nasalpolyposis
- 11. Abnormalities of smell
- 12. Acute sinusitis
- 13. Chronic sinusitis
- 14. Nasal Allergy/Fungal allergicsinusitis
- 15. Complications of acute and chronicsinusitis
- 16. Tumors of nose and sinuses
- 17. Facialpains
- 18. Trans-ethmoidalhypophysectomy
- 19. Functional endoscopic sinus surgery(FESS)

Throat:

- 1. Methods of examination of the mouth andpharynx
- 2. Diseases of themouth
- 3. Diseases of the salivaryglands
- 4. Pharyngeal lesions associated with generaldiseases
- 5. Diseases of the tonsils and adenoids (excludingneoplasms)
- 6. Tumors of thepharynx
- 7. Hypopharyngeal diverticulum (PharyngealPouch)
- 8. Methods of examining and larynx and tracheobronchialtree
- 9. Congenital diseases of thelarynx
- 10. Laryngeal disorders in singers and other voiceusers
- 11. Neurological affections of larynx andpharynx
- 12. Intubation of the larynx, laryngotomy andtracheostomy
- 13. Cervical nodedissection
- 14. Skin grafts in Otolaryngology and reconstructive methods including regional and distant flaps for repair of defects after excision of tumors ortrauma.
- 15. Micro laryngealsurgery/thyroplasty

Miscellaneous and head and neck:

- 1. Cranialnerves
- 2. Raised intracranialtension-causes, diagnosis, management with particular reference to otitishydrocephalus
- 3. Head injuries and I.C.Haemorrhage
- 4. Pituitary gland, anatomy, physiology hypo and hyper pituitarism, newgrowths.
- 5. Intracranial venous sinuses and their affections
- 5. Osteology: skull, mandible cervical and thoracic vertebralsternum
- 6. Cervical fascia, facial spaces in neck, retro-pharyngeal and parapharyngeal Abscesses

- 7. Anatomy and physiology of thyroid gland, goitre, diseases of the thyroid and carcinoma ofthyroid
- 8. Large blood vessels in neck, thoracic duck development of major cervical and thoracic bloodvessels.
- 9. Head and neck reconstructive surgery

Drugs used in ENT:

- 1. AntibioticsAntihistaminic
- 2. Nasalvasoconstrictors
- 3. Localanaesthetics
- 4. Corticosteroids
- 5. Cyto-toxic agents
- 6. Antibiotics
- 7. Radioactiveisotopes
- 8. Antifungalagents
- 9. Vasopressive and other agents used in shock likestates.

General:

- 1. Physiology of circulation, regulation of blood pressure, reactions of body to haemorrhage, patho-physiology of shock, fluid balance, blood transfusion and its hazards, fluid replacement therapy,burns
- 2. Agents used in shock likestates

Desirable

- 1. The ears and nasal sinuses in the aerospaceenvironment
- 2. Physiological consideration of pressure effects on the ear and sinuses in deep waterdiving
- 3. The principles of cancer immunology with particular reference to head and neck cancer
- 4. Principles of chemotherapy in head and neckcancer
- 5. Recording of nystagmus by ENG and its interpretation

Ear:

- 1. Traumatic lesions of the innerear
- 2. Inflammatory lesions of the vestibular and auditorynerve
- 3. Vascular lesions of the innerear
- 4. Electronystagmography
- 5. Skull base/Neurologicsurgery

Nose:

- 1. Cosmetic surgery of thenose
- 2. Non-healing granuloma of thenose
- 3. Surgery of the pterygopalatinefossa
- 4. LASERSurgery

Throat:

- 1. Oesophageal conditions in the practice of ear, nose and throatsurgery
- 2. Disorders of speech
- 3. Lower respiratory conditions in Otolaryngology

Miscellaneous and head and neck

- 1. Functional Anatomy of cerebellum andbrainstem
- 2. Anatomy of mediastinum

- 3. Pleura, plural cavity, broncho-pulmonary segments and their clinicalimportance
- 4. Facial plastic surgery

TEACHING AND LEARNING METHODS

Teaching methodology

Didactic lectures are of least importance; small group discussion such as seminars, journal clubs, symposia, reviews and guest lectures 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 with appropriate emphasis on e-learning. Student should have hand-on training in performing various procedures and ability to interpret various tests/investigations. Exposure to newer specialized diagnostic/therapeutic procedures concerning her/his subject should be given. Self-learning tools like assignments and case-based learning may be promoted. Exposure to newer specialized diagnostic/therapeutic procedures concerning ENT should begiven.

Rotations:

- A major portion of posting should be in ENT Department. It should include inpatients, out-patients, ICU, trauma, emergency room, specialty clinics including Vertigo Clinic, Rhinology Clinic, Otology Clinic, Cancer Clinic, Cadaveric dissection Lab, Audiology and speechtherapy.
- o Inter-unit rotation in the department should be done for a period of up to oneyear.
- Rotation in appropriate related subspecialties for a total period not exceeding 06months.

• Clinicalmeetings:

There should be intra- and inter- departmental meetings for discussing the uncommon/interesting cases involving multiple departments.

• Log book: Each student must be asked to present a specified number of cases for clinical discussion, perform procedures/tests/operations/present seminars/review articles from various journals in inter-unit/interdepartmental teaching sessions. They should be entered in a Log Book. The Log books shall be checked and assessed periodically by the faculty members imparting thetraining.

• Thesis writing andresearch:

Thesis writing is compulsory.

- 1. The postgraduate students shall be required to participate in the teaching and training programme of undergraduate students and interns.
- 2. A postgraduate student of a postgraduate degree course in broad specialities/super specialities wouldbe 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.
- 3. The student should know the basic concepts of research methodology, plan a research project, be able to retrieve information from the library. The student should have a basic knowledge of statistics.
- 4. 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 surgical skills laboratories in the medical colleges is mandatory.

ASSESSMENT

Assessment should be comprehensive & objective. It should address the stated competencies of the course. The assessment needs to be spread over the duration of the course.

FORMATIVE ASSESSMENT, i.e., assessment during the training would include: 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.

General Principles

Internal Assessment should be frequent, cover all domains of learning and used to provide feedback to improve learning; it should also cover professionalism and communication skills. The Internal Assessment should be conducted in theory and clinical examination.

Quarterly assessment during the MS training should be based on following educational activities:

- 1. Journal based / recent advanceslearning
- 2. Patient based /Laboratory or Skill based learning
- 3. Self directed learning andteaching
- 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 the training

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

The examination will 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 candidate 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

The examinations shall be organised on the basis of 'Grading'or 'Marking system' to evaluate and to certify candidate's level of knowledge, skill and competence at the end of the training. The examination for MS shall be held at the end of 3rd academic year. An academic term shall mean six month's training period.

Theory shall consist of four papers of 3 hours each.

PaperI: Basic Sciences and its Applied Aspects Related to Ear, Nose and Throat

Diseases.

PaperII: Otology

PaperIII: Rhinology, Laryngology and Head-Neck

PaperIV: Recent Advances in EAR, Nose and Throat Diseases.

3. Clinical / Practical and viva voceExamination

Clinical examination shall be conducted to test the knowledge, skills, attitude and competence of the post graduate students for undertaking independent work as a specialist/teacher, for which post graduate students shall examine a minimum one long case and two shortcases.

The Oral examination shall be thorough and shall aim at assessing the post graduate student's knowledge and competence about the subject, investigative procedures, therapeutic technique and other aspects of the specialty, which form a part of the examination.

Assessment may include Objective Structured Clinical Examination(OSCE).

Oral/Viva-voce examination needs to assess knowledge on X-rays, instrumentation, operative procedures. Due weightage should be given to Log Book Records and day-to-day observation during the training.

Recommended Reading: Books (latest edition)

- Scott-Brown's Otorhinolaryngology and Head and NeckSurgery
- Cummings Otolaryngology Head and NeckSurgery
- Otolaryngology, Otology &Neurotalogy byPaprella&Micheal
- Glasscock-Shambaugh's Surgery of the Ear
- Essentials of Functional Sinus Surgery by Heinz StammbergerMD
- Color Atlas of Head & Neck Surgery by Jatin PShah
- Handbook of Clinical Audiologyby JackKatz
- Stell& Maran's Textbook of Head and Neck Surgery and Oncology

Journals

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

Postgraduate Students Appraisal Form Pre / Para /Clinical Disciplines

Name of the Department/Unit:						
Nam	e of the PG Student :					
Peri	od of Training:		FROMTO			
Sr. No.	Particulars	Not satisfactory	Satisfactory	More Than Satisfactory	Remarks	
		1 2 3	456	789		
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		
Rem	arks*					
ment	MARKS: Any significant positioned. For score less than 4 in back to postgraduate student is	any category,	remediation m			
SIGNATURE OF ASSESSEE		SIGNATURE OF CONSULTANT		SIGNATURE OF HOD		

MS-9241 Otorhino.-I

MS Examination Month, Year OTORHINOLARYNGOLOGY

Paper-I

Basic Sciences and its Applied Aspects Related to Ear, Nose and Throat Diseases

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 physiology of balance.

20

Q.2 Write in detail:

2x15=30

- a) Investing layer of deep cervical fascia
- b) Interferon
- Q.3 Write briefly:

5x10=50

- a) Osteomeatal unit
- b) Cell cycle
- c) Pharmacotherapy of allergic rhinitis
- d) Apoptosis
- e) Second phase of deglutition

MS-9242 Otorhino.-II

MS Examination Month, Year OTORHINOLARYNGOLOGY

Paper-II **Otology**

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 Enumerate various causes of vertigo and write pathophysiology and management of meniere's disease?
- Q.2 Describe in brief 2x15=30
 - a) Various causes of conducive hearing loss
 - b) Acoustic Neuroma
- Q.3 Write short notes on 5x10=50
 - a) Stapedial Reflex
 - b) Adhesive otitis Media
 - c) Butterfly inlay-Tympanoplasty
 - d) Gradenigo's syndrome
 - e) Glomus Tympanicum

MS-9243 Otorhino.-III

MS Examination Month, Year OTORHINOLARYNGOLOGY

Paper-III Rhinology, Laryngology and Head-Neck

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 the etiology, clinical features and TNM classification of carcinoma larynx. Write the management of a case of squamous cell carcinoma Glottic larynx (T3 N0 M0).
- Q.2 Write in detail 2x15=30
 - a) Diagnostic evaluation of a patient of sleep disordered breathing
 - b) Paediatric subglottic stenosis- diagnosis classification and management
- Q.3 Write short notes on

5x10=50

- a) Spasmodic dysphonia
- b) Management of CSF rhinorrhea
- c) Per-cutaneous tracheostomy
- d) Role of CT scan in evaluation of PNS disorders
- e) Atrophic rhinitis

MS-9244 Otorhino.-IV

MS Examination Month, Year OTORHINOLARYNGOLOGY

Paper-IV Recent Advances in Ear, Nose and Throat Diseases

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 the evidence of role of gastroesophageal reflux in ear, nose and throat disorders.
- Q.2 Write in detail 2x15=30
 - a) Role of sialendoscopy in management of Sialolithiasis
 - b) Advanced applications of nasal endoscopes in management of orbital disease
- Q.3 Write short notes on

5x10=50

- a) Immunotherapy in allergic rhinitis
- b) Role of biofilms in nasal diseases
- c) Use of coblation in ENT surgeries
- d) Cartilage Tympanoplasty
- e) Recent surgical techniques in management of inferior turbinate hyperthrophy