



NO. S.O. (ME) 7-7 / 2015
GOVERNMENT OF THE PUNJAB
SPECIALIZED HEALTHCARE & MEDICAL EDUCATION
DEPARTMENT

Dated Lahore, the 29th February, 2016

To

1. The Vice Chancellor
King Edward Medical University, Lahore
2. The Vice Chancellor
University of Health Sciences, Lahore
3. The Vice Chancellor
Fatima Jinnah Medical University, Lahore

SUBJECT: UNIFORM CURRICULUM OF MS/MD/MDS PROGRAMS.

I am directed to refer to the letter No. UHS/Pro-VC-16/79, dated 23-02-2016; on the subject cited above:

2. The Competent Authority has been pleased to grant approval to the MS/MD/MDS Regulations, 2014 for implementation as a joint program to be run by all three Universities functioning under the administrative control of Specialized Healthcare & Medical Education Department i.e. UHS, KEMU and FJMU. The Competent Authority has further been pleased to desire that these Regulations may be placed before the Syndicates of the Universities for formal concurrence.
3. Further necessary action may be taken accordingly.


(DR. NASIR MAHMOOD SHAKIR)
DEPUTY SECRETARY (ME)

NO & DATE EVEN

Copy of the above is forwarded for information & necessary action to the:

1. Secretary to Chief Minister, Punjab.
2. Advisor to Chief Minister, Punjab on Health.
3. President, Pakistan Medical & Dental Council, Islamabad.
4. Registrar, Higher Education Commission, Islamabad.
5. Additional Secretary (Staff) to Secretary to Government of the Punjab, Specialized Healthcare & Medical Education Department.
6. P.S. to Special Secretary to Government of the Punjab, Specialized Healthcare & Medical Education Department.
7. P.A. to Additional Secretary (Technical), Specialized Healthcare & Medical Education Department.

(DR. NASIR MAHMOOD SHAKIR)
DEPUTY SECRETARY (ME)

OFFICE OF THE PRO-VICE CHANCELLOR

University of Health Sciences, Lahore

Khayaban-e-Jamia Punjab, Lahore – 54600, Pakistan

UAN: (92-42) 111-33-33-66

Email: provc@uhs.edu.pk



Dated: 23-02-2016

UHS/Pro-VC-16/79

Subject: **MEETING REGARDING UNIFORM CURRICULUM OF MS/MD/MDS PROGRAMS**

This is with reference to the letter no.VC-UHS/HD-2016(b), dated: 16th of February 2016.

The MS/MD/MDS Regulations 2014 of King Edward Medical University, Lahore, presented by the Vice Chancellor KEMU, were approved as a joint program to be run by all three Universities (UHS, KEMU & FJMU). It is proposed that the induction into these programs should also be done jointly.

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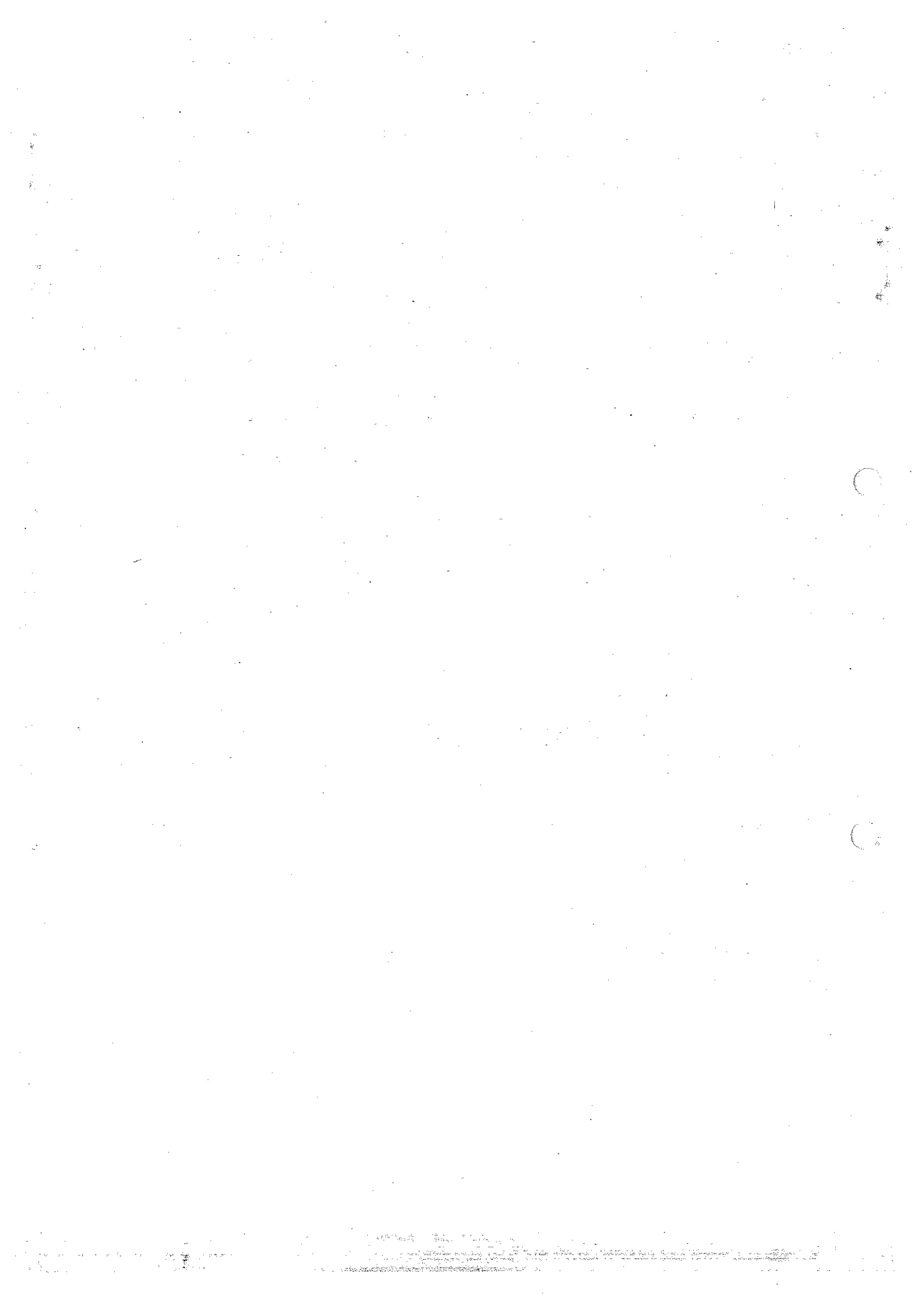
PROF. DR. FAISAL MASUD
Vice Chancellor (KEMU)

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MAJ GEN (R) PROF MUHAMMAD ASLAM
Vice Chancellor (UHS)

A handwritten signature in black ink, appearing to read "Amir Zaman Khan".

PROF. DR. AMIR ZAMAN KHAN
Pro-Vice Chancellor (FJMU)





OFFICE OF THE REGISTRAR
KING EDWARD MEDICAL UNIVERSITY,
LAHORE.

No. _____ /REG/KEMU/2014

Dated: _____ /2014

NOTIFICATION

King Edward Medical University, Lahore MD/ MS/ MDS Regulations 2014 are hereby
as approved by the Syndicate KEMU in its 25th meeting held on 10.05.2014.

REGISTRAR,
King Edward Medical University,
Lahore.

5069-5113 /REG/KEMU/2014

Dated: 16.05. /2014

A copy is forwarded for information and further necessary action to the:

- Vice Chancellor, KEMU, Lahore.
- All the Deans, KEMU, Lahore.
- All the Chairmen/ Chairpersons of the Departments, KEMU, Lahore.
- Controller of Examinations, KEMU, Lahore.
- Director TRB, KEMU, Lahore.
- All the Deputy Registrars, KEMU, Lahore.

King Edward Medical University
Deputy Registrar Academics

17 MAY 2014

Time: _____

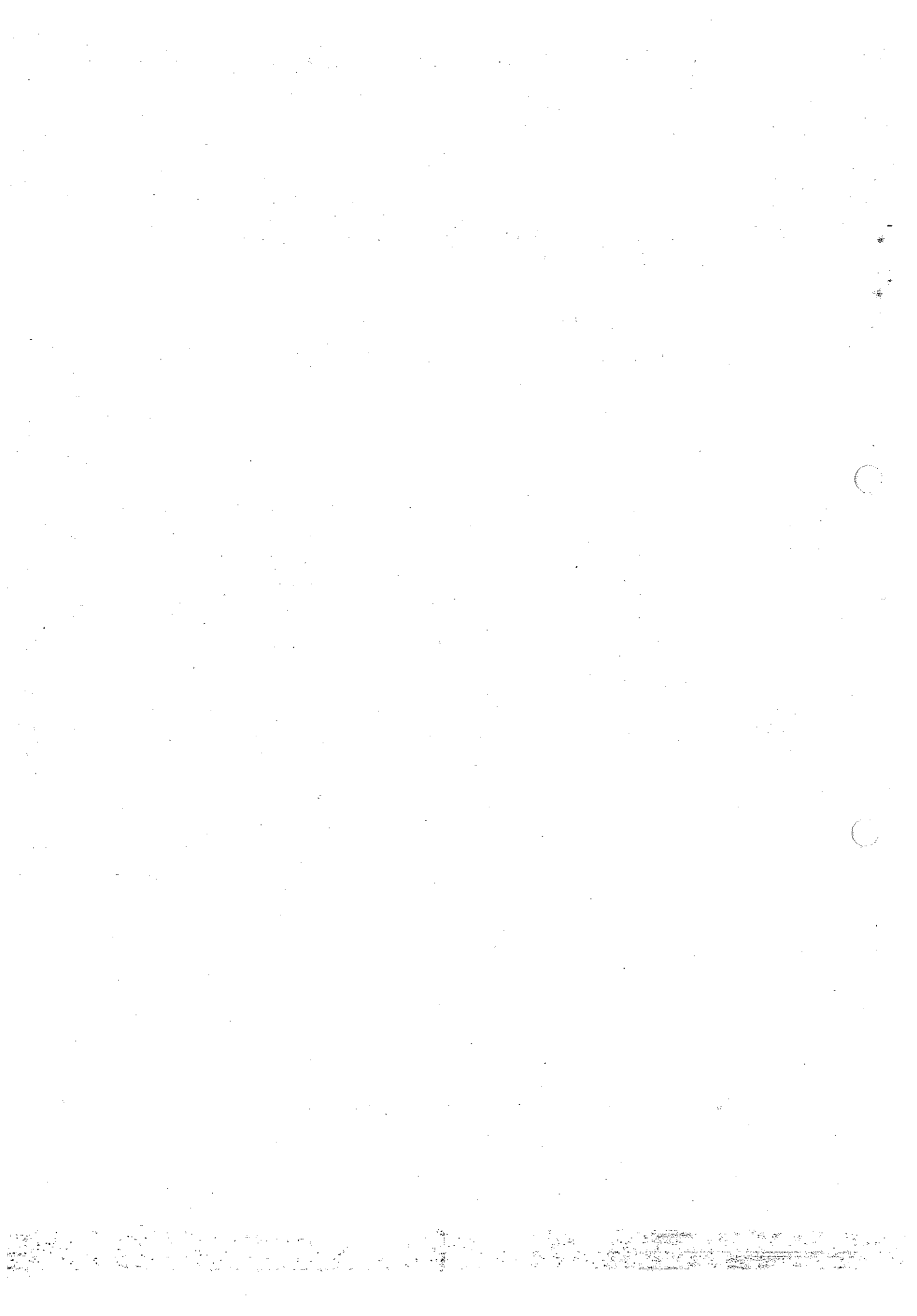
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LAHORE - PAKISTAN

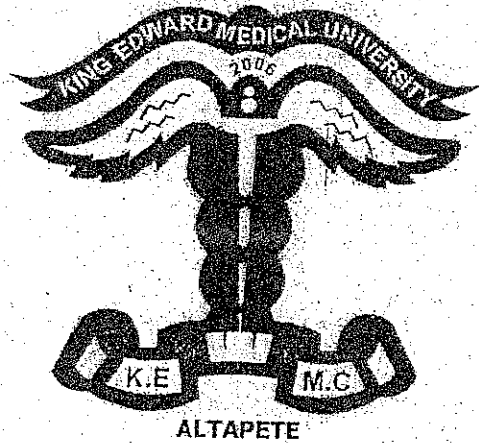
REGISTRAR,
King Edward Medical University,
Lahore.

DR. NAKHSHAB CHOUDHRY
MBBS, DCP, M.Phil, Ph.D (Biochemistry)
Deputy Registrar (Acad.)
King Edward Medical University
Lahore.

King Edward Medical University, Lahore	
Controller's Office	
Diary No. <u>5388</u>	Date & Time <u>06.11.14</u>
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Controller of Examinations	



KING EDWARD MEDICAL UNIVERSITY LAHORE



MD : DOCTOR OF MEDICINE

MS : MASTER OF SURGERY

MDS : MASTER OF DENTAL SURGERY

AMENDED REGULATIONS (2014)

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16-05-2014

9.30 AM

Vice Chancellor
King Edward Medical University
LAHORE

Approved by Syndicate KEMU's 25th meeting on 10th May 2014

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KING EDWARD MEDICAL UNIVERSITY LAHORE

No. 10715 /2014 dated 16-05-2014

NOTIFICATION

In exercise of the power conferred by Section 31 of the King Edward Medical University Act 2005, the Vice Chancellor, King Edward Medical University, Lahore on approval by the syndicate of King Edward Medical University in its 25th meeting held on 10.05.2014 is pleased to notify the following amended Regulations in suppression of all the previous regulations, namely

“THE KING EDWARD MEDICAL UNIVERSITY MD /MS / MDS AMENDED REGULATIONS 2014”

Short title, commencement and application:

- a. These regulations may be called the KEMU MD /MS/ MDS amended Regulations 2014.
- b. They shall come into force at once and shall apply to all students/ candidates who intend to do MD / MS / MDS from King Edward Medical University (KEMU), Lahore.

Definition:

In these regulations, unless the context otherwise requires, the following expression shall have the meaning hereby respectively assigned to them that is to say:

- a. **Abridged Examination** means the examination which will be conducted at completion of one year of training in relevant MD or MS or MDS programs.
- b. **Act** means King Edward Medical University Act, 2005.
- c. **Applicant** means a person who applies for admission into MD or MS or MDS program.
- d. **Assessment** means a formally defined process within the curriculum in which the candidates' progress in the training program is assessed and measured using a range of defined and validated assessment tools.
- e. **Candidate** means a person who will be selected for training in MD or MS or MDS program.

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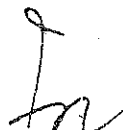
Approved by Syndicate KEMU's 25th meeting on 10th May 2014.



16-05-2014


Vice Chancellor
King Edward Medical University
LAHORE

- Candidates' Training Portfolio** means a professional development portfolio to track progress in the training program. It shall consist of a record of acquisition of knowledge, skills and attitudes.
- Continuous Internal Assessments (CIS)** mean workplace based assessments, candidate's training portfolio assessment and supervisor's annual review report on these assessments.
- Core Curriculum** means Course of study which is deemed central and usually made mandatory for all students of MD or MS or MDS.
- Curriculum** means the set of courses and its content.
- Deans Committee** will consist of all the deans and the quorum will be one third.
- Error Investigation** means medical error investigation which involves defining the problem, identifying the causes (analysis) and selecting the best solution (reduce the risk).
- Examiner** means examiner of clinical and oral examinations of MD / MS / MDS programs.
- External Examiner** mean the one who is not teaching (or has not taught during the academic year) candidates of MD / MS / MDS programs.
- Generic Competencies** means the qualities or states of being functionally adequate or having sufficient knowledge, judgment, skills or strengths which are applicable to a whole class or group.
- Government** means Government of the Punjab.
- Hippocratic Oath** means an oath historically taken by Physicians and other healthcare professionals swearing to practice medicine honestly as available at Appendix "A".
- Internal Examiner** means the one who is teaching (or has taught for at least six months within two years of commencement of the concerned examination) candidates of MD / MS / MDS programs.
- MD** means Doctor of Medicine.
- MS** means Master of Surgery
- MDS** means Master of Dental Surgery
- Paper Setter** means paper setter for written papers of MD / MS / MDS examinations
- Practice Based Learning (PBL)** means the process of learning to use scientific evidence related to patient's health problems and the ability to interpret medical literature.
- Program** means each and every component of training for King Edward Medical University's degrees of MD / MS / MDS.



- x. **Program Format** means the whole plan of training and assessment for MD / MS / MDS Degrees and this shall be referred to as Program Format.
- y. **Root cause analysis (RCA)** means a method of problem solving that tries to identify the root causes of faults or problems that cause operating events.
- z. **Specialty Specific Competency** means the qualities or states of being functionally adequate or having sufficient knowledge, judgment, skills or strengths which are applicable to the relevant specialty of training.
- aa. **Supervisor** mean supervisor for overall conduct of his own specialty in MD / MS / MDS programs.
- bb. **Supervisor's Evaluation Proforma** means Supervisor's Evaluation Proforma for Continuous Internal Assessments as given in **Appendix G**.
- c. **System based practice** means competency of a resident to understand how patient care relates to the health care system as a whole and how to use the system to improve the quality and safety of patient care.
- dd. **System Thinking** means an approach to problem solving, by viewing "problems" as parts of an overall system, rather than reacting to specific part, outcomes or events in isolation and potentially contributing to further development of unintended consequences. System thinking focus on cyclical rather than linear cause and effect.
- ee. **Thesis** means MD or MS or MDS thesis written as long essay or dissertation based on university approved research project.
- ff. **Training Program** means training of medical and dental graduates in achieving generic and specialty specific competencies of their chosen discipline, leading to postgraduate degree of MD or MS or MDS.
- gg. **University** means the King Edward Medical University.
- . **Workplace Based Assessments** mean assessment of generic and specialty specific competencies, multisource feedback evaluation and assessment of candidates' training portfolio.

OSCE


16-05-2014

PART - A

D/ MS / MDS Program Objectives will be as under (Chart of various medical/ surgical specialties is available at Appendix-"B")

- To provide training in cognitive, psychomotor and affective domains.
- To train in chosen clinical field through a competency based training system.
- To develop skills in conducting research and its application to clinical environment.
- To enable trainees to use modern techniques and technologies effectively.

ADMISSION CRITERIA

Applications for admission in MD / MS / MDS Training Programs of King Edward Medical University will be invited at the most twice a year, through advertisement in print and electronic media mentioning closing date of applications and date of Entry Examination along with admission criteria on an application format as available at Appendix-"C" along with fee as prescribed.

Eligibility: The applicant on the last date of submission of applications for admission must possess the:

Basic Medical Qualification of MBBS / BDS or equivalent medical qualification recognized by Pakistan Medical & Dental Council.

Certificate of one year's House Job experience in institutions recognized by Pakistan Medical & Dental Council is essential at the time of interview. The applicant is required to submit House Certificate from the concerned Medical Superintendent that the House Job shall be completed before the interview.

Valid certificate of permanent or provisional registration with Pakistan Medical & Dental Council.

Entry Examination

The Entry Examination for admission to MD / MS / MDS programs will be a competitive examination.

Entry Examination will be held at the most twice a year on the dates to be announced by the controller of examinations according to the decision of Deans Committee.

The total marks of the Entry Examination will be 350 and to be divided as follows

- | | |
|---|-------------------|
| a. Written Paper | Total Marks = 300 |
| b. Video-Projected Clinical Examination | Total Marks = 30 |
| c. Interview | Total Marks = 20 |

iv. The Entry Examination will consist of the following components

a) Written paper

i) The written examination will consist of 150 Multiple Choice Questions with single best answer. The MCQ's will be derived from different subjects as follows:

i. Basic Sciences	≈50 Questions
Anatomy	≈15 Questions
Physiology & Biochemistry	≈15 Questions
Pathology	≈10 Questions
Pharmacology	≈10 Questions
ii. General Medicine	≈35 Questions
iii. General Surgery	≈35 Questions
iv. Specialty Specific	≈30 Questions

ii) For MD Programs, the questions would include those from Basic Sciences, General Medicine and Medical related specialties.

iii) For MS / MDS Programs, the questions would include those from Basic Sciences, General Surgery and Surgical related specialties.

iv) The proportional weightage of Basic & Clinical Sciences questions for each program will be ensured by the final paper setter (or through computer based system if possible).

v) The question papers in duplicate and their key i.e correct response will be signed by the final paper setter or by the computer based system for the Examination Department.

vi) The Examination Department will receive sealed envelopes with signatures of the paper setter on the seam overlap of the envelop and then covered with a suitable tape. One of the envelopes will be kept under lock and key in the examination department whereas the second envelop will be submitted to Controller of Examinations except for computer based paper generation.

vii) Each correct answer will carry 02 marks but an incorrect response will result in deduction of 0.5 mark.

viii) The applicant scoring 50 % of marks will pass the written paper.

b) Video – Projected Clinical Examination (VPCE)

i. The Video – Projected Clinical Examination will consist of 15 video / slides.

ii. These video / slides will consist of data and images based on the subjects of General Medicine, General Surgery and others.

iii. Each correct answer will carry 2 marks and an incorrect response will result in deduction of 0.5 mark.

iv. The applicant scoring 50 % of marks will pass the Video-Projected Clinical Examination.

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Approved by Syndicate KEMU's 25th meeting on 10th May 2014

16-05-2014

Vice Chancellor
King Edward Medical University
LAHORE

Interview

- i) Only those applicants, who pass the written paper and video-projected clinical examination scoring 50 % marks in each of these components, will be called for interview.
- ii) All applicants shall be required to present all their original academic credentials at the time of interview including certificate of completion of House Job by the Medical Superintendent and good conduct from the Head of Department otherwise they shall not be eligible for appearance in the interview.
- iii) The interview will be conducted by a Committee constituted by the Vice Chancellor.
- iv) There will be separate interviews for applicants of MD and Allied or MS/ MDS and Allied programs.

Declaration Of Result Of Entry Examination

- i) The candidate must have passed all components of Entry Examination securing at least 50% marks in each component of the examination and 60 % in total to be declared to have passed the examination. Cumulative score of 60 % marks to be calculated by adding up secured marks of each component of the examination and then calculating its percentage.
- ii) Entry examination shall be valid for that particular batch or admission and shall not be valid for subsequent admissions.
- iii) Passing in Entry Examination shall not automatically guarantee admission to training program which will be dependent on available slots.

Admission Process

- i) All seats will be filled by open merit. However, graduates of KEMU will be given 10% weightage while assigning merit.
- ii) The candidates selected as per admission criteria, will be notified and offered admission in to either MD or MS or MDS training program.
- iii) The slots available for each program will be decided by the university. (see General Clause 18. iv)
- iv) The candidate will be allocated a specialty of training within the MD or MS programs according to the merit and available slots. The training slots in any specialty will be dependent upon the available human resource, infrastructure, curriculum, track record of the program and other parameters as decided by the university. The ultimate decision for allocation of slots / continuation in MD / MS / MDS program in a particular specialty will depend on financial feasibility to be provided by the Treasurer in the month of November on yearly basis.

The failure of a program as result of poor track record will be referred to the appropriate forum for remediation / discontinuation of the program.

The acceptance of offer of admission by the candidate is to be submitted to the Registrar within 07 days after which it will automatically stand invalid.

On receipt of acceptance from the Registrar's office, it shall be transmitted to the Human Resource Department (HRD). The candidate will be responsible to provide all necessary documents to the HRD. After codal formalities, the Registrar of the University will allocate a registration number to each candidate within 15 days. Failure on the part of candidate to provide all documents within stipulated time will disqualify the candidate and the seat will be declared vacant.

After registration, the candidate will submit certificate of acceptance from the supervisor of the concerned department as allocated on merit and as directed by the Registrar's Office. Failure to do so within stipulated time will disqualify the candidate and the seat will be declared vacant.

The candidate shall have to get the joining report proforma signed by the Supervisor and failure to do so within 07 days will result in declaration of seat being vacant. This may be filled in by the next available candidate on merit.

In case of any grievances, appeal can be filed within 15 days before the Vice Chancellor whose decision shall be final.

The Registrar shall maintain a record of registration of all candidates.

The University will charge the fee (non refundable) for the following components at the time of admission. The exact quantum of fee may be decided and adjusted from time to time by the university.


- a) Registration Fee
- b) Four Mandatory Workshops fee
- c) Yearly tuition fee to be deposited according to a schedule (SOP's to be developed by the academic council in consultation with Director Finance from time to time).
- d) Hostel fee if university accommodation is availed
- e) Utility Charges (Electricity, Gas and Water) if hostel accommodation is availed.
- f) After a default of more than 30 days duration for the payment of any of the dues, the candidate will be expelled from the program except in special circumstances where it will be endorsed by the Deans Committee.

xiii. The candidate will be allowed one time change of course after admission but this will be within the domain of previously selected MD or MS programs, subject to availability of seats and no objection certificate from the training unit.

xiv. The change of specialty of training shall be permissible within 06 months from the date of admission and the candidate will pay a non refundable transfer fee of Rs. 25,000/-



- 17. If change of specialty allowed, it will be considered a new admission and would start training from the next induction date of MD / MS / MDS program.
- 18. In case of change of specialty the candidate will prepare new synopsis but the credit of attended mandatory workshops will be transferrable.



16-05-2014

PART - B**THE PROGRAM FORMAT**

The candidate after grant of admission in to MD / MS / MDS program will be trained according to the Program Format as listed (**Chart of program format available at Appendix D**) ?

The candidate will spend the first six months of induction period in the chosen specialty. During this period the candidate shall learn orientation within the discipline and introduction to fundamental concepts including basic sciences relevant to the specialty and Physics in the specialty of Radiology.

The candidate will attend four mandatory workshops as given in **Appendix E**. The workshops should be completed preferably within 06 months but no later than the date of submission of application to appear in the Intermediate Examination / Abridged Examination. ?

The candidate will submit synopsis for approval within the first 06 months period according to the prescribed framework under the prevailing institutional regulatory requirements for submission of synopsis.

In case of failure to submit the synopsis for approval within the first 06 months, after induction in the program, an additional grace period of 07 days may be granted by the Vice Chancellor.

Any difficulty faced by the candidate to submit the synopsis should be brought to the notice of the Registrar for remediation before completion of 05 months from the time of induction. The Registrar would issue 02 fortnightly reminders to the appropriate person / forum and in case of failure, shall bring it to the notice of VC and submit its report to the Academic Council.

In case of non submission of synopsis within this period, the candidate will not be allowed to continue in the training program. The stipend/scholarship if any will be stopped and the post shall fall vacant. ?


The candidate will submit certificate of successful completion of mandatory workshops and certificate of submission of synopsis to the registrar according to the schedule. ?

After each rotation and at 3 monthly intervals during training the candidate would apply to his supervisor for completion of supervisor's evaluation proforma as given in **Appendix G** and send a copy of this application to the registrar. The supervisor would submit this proforma to the Registrar's office within fifteen days who would recruit him for the next phase of rotation program/training while completing the codal formalities.

In case of non-submission of proforma the candidate would prompt his supervisor to submit the evaluation proforma and also intimate the Registrar about this fact.

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Approved by Syndicate KEMU's 25th meeting on 10th May 2014


16-05-2014
Vice Chancellor
King Edward Medical University
LAHORE

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of non submission of supervisor's evaluation proforma, the Registrar would fortnightly reminders and if the proforma is still not submitted, it will be brought to the next Academic Council.

The candidates in MD program as given in "Appendix B" will be trained in General Medicine for eighteen months except those who will be in MD programs in the specialty of Paediatrics, Psychiatry and Radiology. The Intermediate Examination will be held on completion of two years of training of MD program except in paediatrics, psychiatry and radiology.

The candidate in paediatrics will be trained in any specialty of paediatrics for a period of 06 months after they have completed their first 06 months of induction period in paediatrics. The Abridged Examination will be held on completion of first year of training.

The candidate in Psychiatry will be trained for six months in General Medicine after they have completed their first 06 months of induction period in psychiatry. The Abridged Examination will be held on completion of first year of training.

The candidate in Radiology will be trained for 03 months in General Medicine and for another 03 months in General surgery after they have completed their first 06 months of induction period in radiology. The Abridged Examination will be held on completion of first year of training.

All the candidates in MS programs as given in "Appendix B" will be trained in general surgery for eighteen months except those who will be in MS programs in the specialty of Ophthalmology, Otorhinolaryngology, Obstetrics & Gynaecology, Anesthesiology and MDS program in Oral & Maxillofacial Surgery. The Intermediate Examination will be held on completion of two years of training of MS program except in ophthalmology, otorhinolaryngology, obstetrics & gynaecology, and oral & maxillofacial surgery of MDS program in where Abridged Examination will be held on completion of first year of training.

- a) The candidate in Ophthalmology will be trained for 06 months in general surgery after they have completed their first 06 months of induction period in ophthalmology. The Abridged Examination will held on completion of first year of training.
- b) The candidate in Otorhinolaryngology will be trained for 06 months in general surgery after they have completed their first 06 months of induction period in Otorhinolaryngology. The Abridged Examination will held on completion of first year of training.
- c) The candidate in Obstetrics & Gynaecology will be trained in general surgery for 06 months after they have completed their first 06 months of induction period in Obstetrics & Gynaecology. The Abridged Examination will held on completion of first year of training.
- d) The candidate in Oral & Maxillofacial Surgery will be trained in General Surgery for 06 months after they have completed their first 06 months of induction period in Oral & Maxillofacial Surgery. The Abridged Examination will held on completion of first year of training.

16-05-2014

Vice Chancellor
King Edward Medical University
LAHORE

e) The candidate in Anesthesiology will be trained in anesthesiology for 06 months, general surgery for 06 months and General medicine for 06 months. After that the candidate will complete an additional 06 months of training in Anesthesiology. The Intermediate Examination will be held on completion of two years of training.

It is the responsibility of the candidate through his / her supervisor to get his synopsis approved from AS & RB within 02 years from the date of admission in to training program. In case of failure in getting the synopsis approved within this time period an additional grace period of 30 days may be granted at the discretion of the VC. If the candidate still fails to get his synopsis approved he/she would stand ineligible to appear in the Intermediate Examination and will be excluded from the training in the chosen program. His stipend/scholarship if any will be stopped and the post shall fall vacant. **Any difficulty faced by the candidate for completed submission of synopsis must be brought to the notice of the Registrar for remediation before completion of 18 months from the time of induction.** The Registrar would issue 02 fortnightly reminders to the appropriate person / forum and in case of failure, shall submit its report to the Academic Council.

The Intermediate Examination for General Medicine, General Surgery, and Community Medicine shall be conducted at completion of two years of training.

The Abridged Examination for Ophthalmology, Otorhinolaryngology, Obstetrics & Gynecology, Radiology, Pediatrics, Psychiatry and Oral & maxillofacial Surgery will be conducted at the completion of first year of training.

For the candidates, who have Abridged Examination as a part of their program instead of intermediate examination as given in " **Appendix D** ", it is the responsibility of the candidate through his / her supervisor to get his synopsis approved from AS & RB within 02 years from the date of admission in to training program. In case of failure in getting the synopsis approved within this time period an additional grace period of 30 days may be granted at the discretion of the VC. If the candidate still fails to get his synopsis approved he/she would stand ineligible to continue his further training and will be excluded from the training in the chosen program. His stipend if any will be stopped and the post shall fall vacant. **Any difficulty faced by the candidate for completed submission of synopsis must be brought to the notice of the Registrar for remediation before completion of 18 months from the time of induction.** The Registrar would issue 02 fortnightly reminders to the appropriate person / forum and in case of failure, shall submit its report to the Academic Council.

After the Intermediate Examination, the candidates of five year programs will initiate research project at the beginning of 3rd year of training.

After the relevant Abridged or Intermediate Examination, the candidates of all programs will initiate research project immediately after approval of synopsis.

16-05-2014

Vice Chancellor
King Edward Medical University

The rotational placements for MD / MS / MDS training programs will be according to the schedule of rotations for each program as prescribed by the respective Board of Studies.

For all four year programs as given in **Appendix " B "**, the candidate will rotate to subspecialties during the third year of training. There will be minimum of two rotational placements in the relevant fields as specified by the respective Board of Studies, each of 03 months duration except the following programs.

- a. For candidates in Paediatrics, there will be 03 rotational placements of 03 months each in any 03 of the sub-specialty amongst Neonatology & Perinatology, Infectious Diseases, Dermatology and Child Psychiatry.
- b. For candidates in Psychiatry, there will be 01 rotational placement of 06 months duration in Neurology. Within the department, at least three modules for training in Adult Psychiatry, Clinical Psychology, Child / Adolescent Psychiatry, Addiction Psychiatry and others (if needed) may be ensured.
- c. For candidates in Ophthalmology, there will be 05 rotational placements with 06 weeks in Neurology, 06 weeks in Pathology, 02 weeks in Plastic Surgery, 02 weeks in Radiology and 02 weeks in Dermatology (Total duration of rotations =18 weeks)
- d. For candidates in Otorhinolaryngology, there will be 02 Rotational placements of 03 months each in to Plastic Surgery and Neurosurgery.
- e. For Candidates in Oral & Maxillofacial Surgery, there will be 02 rotational placements of 03 months each to be chosen amongst Plastic Surgery, Neurosurgery and Otorhinolaryngology.
- f. For candidates in Radiology there will be at least 02 rotations in second year and 02 rotations in third year of minimum two months each in the sub-specialties of Radiology like Isotope Imaging, MRI, Interventional Radiology and Neuroradiology etc.
- g. All rotational placements as mentioned in clauses "a to f" must be completed at least 06 months prior to completion of training.

For all five year programs as given in "**Appendix B**" all candidates except those in Anesthesiology, Dermatology and Plastic Surgery will rotate to subspecialties during the 4th & 5th Year of training, with minimum of two rotational placements in the relevant fields as specified by the respective Board of Studies, each of 03 months duration. For the candidates in Anesthesiology, there will be 03 years of rotations within the subspecialties of Anesthesiology. For the candidate in Dermatology there would be three rotational placements of (total of three months duration) in the discipline of Dermatopathology (one month), Plastic Surgery (One month) and Lasers and Leprosy (one month). For the candidate in Plastic Surgery there will be two rotations of 3 months each in the disciplines of Ophthalmology or Otorhinolaryngology or Oral & Maxillofacial Surgery. These rotational placements must be completed at least 06 months prior to completion of training.

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The training shall be competency based. There will be generic and specialty specific competencies for all programs and will be assessed with Continuous Internal Assessments

- a. All residents will be trained in the following 05 generic competencies (See Appendix A and F)
 - i. Patient care
 - ii. Medical knowledge and Research
 - iii. Practice & System Based Learning
 - iv. Communication skills
 - v. Affective domain and Professionalism as per Hippocratic Oath.
- b. The core curriculum must incorporate all five generic competencies.
- c. The specialty specific competencies for training, as explained in Appendix F, will be identified by the respective Board of Studies and incorporated in to their curriculum.
- d. There will be Continuous Internal Assessments (CIS) of each candidate during the training period. These Continuous Internal Assessments will include Workplace Based Assessments, Assessment of Candidate's Training Portfolio and Supervisor's 03 monthly Review Report as per proforma for Continuous Internal Assessments given in Appendix G.
- e. The candidate would ask his supervisor for Continuous Internal Assessment (CIS) proforma report to be communicated to the Registrar as early as possible.
- f. The candidate would prompt his supervisor and also inform the Registrar about the delay in CIS proforma submission.
- g. In case of failure of submission of CIS proforma report, the Registrar would issue 02 reminders at 15 days interval and if the completed assessment proforma is not delivered, the matter will be placed in the next meeting of Academic Council.


PART - C

INTERMEDIATE EXAMINATION

Intermediate examination would be conducted for the candidates getting training in the disciplines of General Medicine, Community Medicine, Cardiology, Dermatology, Gastroenterology, Neurology, Pulmonology, Anaesthesiology, Cardiac Surgery, Neurosurgery, Orthopaedic Surgery, Paediatric Surgery, Plastic Surgery, Thoracic Surgery, Urology and General Surgery & others unless specified.

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Approved by Syndicate KEMU's 25th meeting on 10th May 2014


16-05-2014
Vice Chancellor
King Edward Medical University
L AHORE

Intermediate Examination will consist of the following components

- Written Examination Total Marks = 300
- Clinical & Oral Examination Total Marks = 200

Eligibility Criteria: To appear in Intermediate Examination, a candidate shall be

- To have submitted certificate of completion of mandatory workshops.
- To have submitted certificate/certificates of completion of first two years of training from the supervisor/supervisors during rotation (see Appendix H).
- To have submitted CIS assessment proforma (see Appendix G) from his own supervisor on 03 monthly basis and also from his supervisors during rotation, achieving a cumulative score of 75%.
- To have submitted certificate of approval of synopsis or undertaking/ affidavit that if synopsis not approved within 30 days of submission of application for the Intermediate Examination, the candidate will not be allowed to take the examinations and shall be removed from the training program.
- To have submitted evidence of payment of examination fee.

Intermediate Examination Schedule and Fee

- Intermediate Examination at completion of two years of training, will be held twice a year
- There will be a minimum period of 30 days between submission of application for the examination and the conduction of examination
- Examination fee will be determined periodically by the university
- The examination fee once deposited can not be refunded / carried over to the next examination under any circumstances.
- The Controller of Examination will issue Roll Number Slips on receipt of prescribed application form, documents satisfying eligibility criteria and evidence of payment of examination fee.

c. Written Part of Intermediate Examination

- i. The candidates of MD programs will appear in the subject of Principles of General Medicine. The candidates of MS / MDS programs will appear in the subject of Principles of General surgery. The candidates of Anesthesiology will appear in the paper with 50% questions from the subject of Principles of General Medicine and 50% from the subject of Principles of General Surgery.

The written examination will consist of 100 single best answer type Multiple Choice Questions and 10 Short Essay Questions. Each correct answer in the Multiple Choice Question paper will carry 02 marks but an incorrect response will result in deduction of 0.5 mark. The Short Essay Questions Examination will be clinical scenario or practice based, and each question will carry 10 marks.

- The Total Marks of the Written Examination will be 300 and to be divided as follows:

Multiple Choice Question paper	Total Marks = 200
Short Essay Question paper	Total Marks = 100

- The Multiple Choice Questions will be derived from different subjects as follows

- For the Intermediate Examination in Medicine and Allied Specialties

Principles of General Medicine	≈70 Questions
Specialty Specific (Medical Allied Specialties)	≈10 Questions
Basic Sciences (Physiology, Pharmacology, Pathology)	≈20 Questions
- For the Examination in Surgery and Allied Specialties

Principals of General Surgery	≈70 Questions
Specialty Specific (Surgical Allied Specialties)	≈10 Questions
Basic Sciences (Anatomy, Pharmacology, Pathology)	≈20 Questions

The candidates scoring 50 % marks in multiple choice question paper and 50 % marks in short essay question paper will pass the written examination and will then be eligible to appear in the clinical and oral examination.

Clinical & Oral Part of Intermediate Examination

The clinical examination will evaluate patient care competencies in detail.

A panel of four examiners will be appointed by the Vice Chancellor and of these two will be from KEMU whilst two will be the external examiners. In case of difficulty in finding an internal examiner in a given subject, the Vice Chancellor would, in consultation with the concerned Deans will appoint any relevant person inside / outside the University as an examiner.

The examination will be of 200 total marks consisting of the following components

- | | |
|---------------------|-------------------|
| a) Four Short cases | Total Marks = 100 |
| b) One Long Case | Total Marks = 50 |
| c) Oral examination | Total Marks = 50 |

- v. Each short case will be of 07 minutes duration. 05 minutes will be for examining the patient and 02 minutes for discussion
- v. The long case and oral examination will each be of 15 minutes duration.
- vi. The candidates scoring 50 % marks in each component of the Clinical & Oral Examination will pass this part of the Intermediate Examination:

Declaration Of Result

The candidate will have to score 50 % marks in written and 50 % marks in the clinical and oral examination with a cumulative score of 60%, to be declared successful in the Intermediate Examination. Cumulative score of 60 % marks to be calculated by adding up secured marks of each component of the examination and then calculating its percentage.

A maximum total of four consecutive attempts (availed or unavailed) will be allowed in the Intermediate Examination during which the candidate will be allowed to continue his training program. If the candidate fails to pass his intermediate examination within the above mentioned limit of four consecutive attempts, the candidate shall be removed from the training program, and the seat would fall vacant, stipend/scholarship if any would be stopped.

PART- D

ABRIDGED EXAMINATION

Abridged Examination would be conducted for the candidates getting training in the disciplines of Ophthalmology, Otorhinolaryngology, Obstetrics & Gynecology, Radiology, Pediatrics, Psychiatry and Oral & Maxillofacial Surgery.

The Abridged Examination will consist of two parts

- | | |
|--|-------------------|
| i. Multiple Choice Question Examination | Total Marks = 300 |
| ii. Video – Projected Clinical Examination | Total Marks = 50 |

Eligibility Criteria: To appear in Abridged Examination, a candidate shall be

- To have submitted certificate of completion of mandatory workshops.
- To have submitted certificate of completion of one year of training from the supervisor. (see **Appendix H**)
- To have submitted assessment proforma (see **Appendix G**) from the supervisor on 03 monthly basis achieving a cumulative score of 75%.
- To have submitted certificate of submission of synopsis.
- To have submitted evidence of payment of examination fee.

Abridged Examination Schedule and Fee

Abridged Examination at completion of one year of training, will be held twice a year.

There will be a minimum period of 30 days between submission of application for the examination and the conduction of examination.

Examination fee will be determined periodically by the university

The examination fee once deposited can not be refunded / carried over to the next examination under any circumstances.

The Controller of Examination will issue Roll Number Slips on receipt of prescribed application form, documents satisfying eligibility criteria and evidence of payment of examination fee.

Multiple Choice Questions Paper of Abridged Examination

There will be 150 single best answer type Multiple Choice Questions with total marks of 300.

The Multiple Choice Questions will be derived from different subjects as follows

- a. For the Abridged Examination in MD Paediatrics
 - Principles of General Paediatrics ≈100 Questions
 - Basic Sciences ≈50 Questions
 - (Physiology, Pharmacology, Pathology)
- b. For the Abridged Examination in MD Psychiatry
 - Principles of General Medicine ≈100 Questions
 - Basic Sciences ≈50 Questions
 - (Physiology, Pharmacology, Pathology)
- c. For the Abridged Examination in MD Radiology
 - Principles of General Medicine ≈50 Questions
 - Principles of General Surgery ≈50 Questions
 - Physics applied to Radiology ≈50 Questions

- d. For the Abridged Examination in MS of Ophthalmology,
Otorhinolaryngology, Gynaecology / Obstetrics
and MDS in Oral & Maxillofacial Surgery

Principles of General Surgery

≈ 100 Questions

Basic Sciences

≈ 50 Questions

(Anatomy, Physiology, Pharmacology, Pathology)

Each correct answer to MCQ will carry 02 marks but an incorrect response will result in deduction of 0.5 mark. The duration for this examination will be 150 minutes or as decided periodically by the Academic Council.

The candidates scoring 50 % marks will pass the written examination and will then be eligible to appear in the Video-Projected Clinical Examination.

Four attempts (availed or unavailed) will be allowed to pass the written examination on three consecutive subsequent occasions.

Video – Projected Clinical Part of Abridged Examination (VPCE)

The VPCE will consist of 25 video / slides of clinical material and scenarios.

These video / slides will consist of data and images derived from different subjects as follows

- a. For MD Pediatrics it will consist of
VPCE from Pediatrics
VPCE from sub-specialties of Pediatrics
- b. For MD Radiology it will consist of
VPCE from General Medicine
VPCE from General Surgery
VPCE from Radiology
- c. For MD Psychiatry it will consist of
VPCE from General Medicine
VPCE from Psychiatry
- d. For MS of Ophthalmology, Otorhinolaryngology, Gynaecology / Obstetrics
and MDS in Oral & Maxillofacial Surgery, it will consist of
VPCE from General Surgery
VPCE from the subject of relevant specialty

Each video / slide will have one question and a correct response will carry 02 marks but an incorrect response will result in deduction of 0.5 mark.

The total marks for this component of examination will be 50.

The candidates scoring 50 % marks in Video-Projected Clinical Examination will pass this part of the Abridged Examination.



16-05-2014

Vice Chancellor
King Edward Medical University
LAIHORE

Vice Chancellor

Declaration Of Result

- i. The candidate will have to score 50 % marks in written and video-projected clinical components and a cumulative score of 60%, to be declared successful in the Abridged Examination. Cumulative score of 60 % marks to be calculated by adding up secured marks of each component of the examination and then calculating its percentage.
- ii. A maximum total of four consecutive attempts (availed or unavailed) will be allowed in the Abridged Examination during which the candidate will be allowed to continue his training program. If the candidate fails to pass his Abridged Examination within the above mentioned limit of four attempts, the candidate shall be removed from the training program, and the seat would fall vacant, stipend/scholarship if any would be stopped.

*J
M*

16-05-2014

Vice Chancellor
King Edward Medical University
LAHORE

PART - E

REGISTRATION FOR POST ABRIDGED & INTERMEDIATE EXAMINATION TRAINING

The candidate will register for this second phase of residency training

The candidate will submit an application and the result of passing Intermediate Examination/Abridged Examination to the registrar's office as soon as possible but

later than 90 days after the declaration of intermediate/abridged examination results.

Declaration of research will be intimated by the candidate to the Registrar

The fee structure for this phase of training will be as follows and will be governed by clause 8, xii.

Tuition Fee will be deposited in advance on yearly basis.

i) Hostel Fee if university accommodation availed

ii) Utilities charges (Electricity, Gas and Water) if hostel accommodation is availed

Failure to deposit fee will result in termination of training. However a grace period of 30 days may be granted in exceptional circumstances.

16-05-2014

PART - F

TRAINING

Training will be competency based as detailed in **Appendix F** and these competencies will be assessed in Continuous internal assessments.

CONTINUOUS INTERNAL ASSESSMENTS (CIS)

Continuous Internal Assessments would be submitted by the supervisor considering the following

- a) Workplace Based Assessments
These assessments will include the following
Generic and Specialty Specific Competency Assessments
Multisource Feedback Evaluation
- b) Assessment of Candidates' Training Portfolio

The details of above assessments are available at **Appendix F**.

The assessment proforma is available on **Appendix G**.

The 03 monthly Continuous Internal Assessment proformas (see Appendix G) will be submitted by the supervisor in sealed envelop / computer based proformas to the Registrar's Office for appropriate action. The same CIS proforma will be submitted by the appropriate supervisor after completion of rotation of any duration.

The Registrar's Office will be responsible for collection of data on three monthly basis and compile yearly performance report by averaging the submitted reports.

The candidate would prompt his / her supervisor to submit his / her completed assessment proforma every 03 months or on completion of rotation of any duration.

The candidate would inform the Registrar in case of any delay/difficulty in CIS proforma submission as soon as possible.

Failure of the supervisor to submit CIS proforma after 02 reminders fortnight apart by the Registrar, would be reported to the Academic Council by the Registrar.

A cumulative score of 75% shall be required to pass the yearly Continuous Internal Assessments to be allowed to continue in the training program.

A candidate, who fails to achieve a cumulative score of 75% on yearly assessments, will be presented to an appropriate forum / Deans Committee to be considered for

mediation / elimination from the program and standard operating procedure will be developed for this purpose.

Registrar's office shall keep the record of all the CIS of every candidate in the candidate's file and transmit the cumulative annual CIS of every candidate at yearly interval. The examination department shall add the marks of Continuous Internal Assessment to the final examination.

The cumulative score of all training years will be added together to provide a final cumulative score of Continuous Internal Assessments by the examination department.

On the basis of formula of 10 % weightage for Continuous Internal Assessment, 100 marks in the final examination would come from cumulative Continuous Internal Assessments i.e Final examination of 1000 marks and Continuous Internal Assessment Weightage of 100, giving a total of 1100 marks to the Final Examination. 400 Marks for thesis evaluation are in addition to these marks.

PART - G

EVALUATION & ACCEPTANCE OF THESIS

The candidate will submit his thesis at least 06 month prior to completion of training.

The Thesis along with a certificate of approval from the supervisor will be submitted to the Registrar's office who would record the date / time etc and get it received from the Controller of Examination within 05 working days of receiving.

The Controller of Examination will ensure that Thesis is complete in every respect.

The Controller of Examination will submit a panel of eight examiners within 07 days for selection of four examiners by the Vice Chancellor. The Vice Chancellor shall return the final panel within 05 working days to the controller of examination for processing and assessment. In case of any delay the controller of examination would bring the case personally to the Vice Chancellor.

The supervisor shall not act as an examiner of the candidate and will not take part in evaluation of thesis.

The Controller of Examination will make sure that the Thesis is submitted to examiners in appropriate fashion and a reminder is sent after every ten days.

The thesis will be evaluated by the examiners within a period of 06 weeks.

In case the examiners fail to complete the task within 06 weeks with 02 fortnightly reminders by the Controller of Examinations, the Controller of Examinations will bring it to the notice of Vice Chancellor in person.

In case of difficulty in finding an internal examiner for thesis evaluation, the Vice Chancellor would, in consultation with the concerned Deans, appoint any relevant person as examiner in suppression of Clause 177 of King Edward Medical University's Regulations.

There will be two internal and two external examiners. In case of difficulty in finding examiners, the Vice Chancellor would, in consultation with the concerned Deans, appoint minimum of three, one internal and two external examiners.

The total marks of thesis evaluation will be 400 and 60% marks will be required to pass the evaluation

The thesis will be considered accepted if the cumulative score of all the examiners is 60 %.

The clinical training will end at completion of stipulated training period but the candidate will become eligible to appear in the Final Examination at completion of clinical training and after acceptance of thesis. In case clinical training ends earlier, the slot will fall vacant after stipulated training period.

PART - H

FINAL EXAMINATION

Eligibility Criteria: To appear in the Final Examination the candidate shall be required

- i. To have submitted the result card of passing Intermediate Examination.
- ii. To have submitted the certificate of completion of training issued by the supervisor will be mandatory. **(Appendix H)**
- iii. To have achieved a cumulative score of 75% in Continuous Internal assessments of all training years. **(Appendix G)**
- iv. To have got the thesis accepted and will then be eligible to appear in Final Examination.
- v. To have submitted no dues certificate from all relevant departments including library, hostel, cashier etc.
- vi. To have submitted evidence of submission of examination fee.

16-05-2014

Vice Chancellor
King Edward Medical University
LAHORE

Final Examination Schedule and Fee

Final examination will be held twice a year

The candidates have to satisfy eligibility criteria before permission is granted to take the examination.

Examination fee will be determined and varied at periodic intervals by the university.

The examination fee once deposited can not be refunded / carried over to the next examination under any circumstances.

The Controller of Examination will issue an Admittance Card with a photograph of the candidate on receipt of prescribed application form, documents satisfying eligibility criteria and evidence of payment of examination fee. This card will also show the Roll Number, date / time and venue of examination.

Components of Final Examination

Written Part of Final Examination	Total marks 500 ✓
Clinical & Oral Part of Final Examination	Total marks 500 ✓
Contribution of CIS to the Final Examination	Total marks 100 ✓
Thesis Evaluation	Total marks 400 ✓

Written Part of Final Examination

There will be two written papers which will cover the whole syllabus of the specialty of training with total marks of 500.

The written examination will consist of 200 single best answer type Multiple Choice Questions and 10 Short Essay Questions. Each correct answer in the Multiple Choice Question paper will carry 02 marks but an incorrect response will result in deduction of 0.5 mark. Each Short Essay Question will carry 10 marks.

The Total Marks of the Written Examination will be 500 and to be divided as follows:

Multiple Choice Question paper	Total Marks = 400 ✓
Short Essay Question paper	Total Marks = 100 ✓

d) The candidates scoring a score of 50 % marks in multiple choice question paper and short essay question paper will pass the written part of the final examination and will become eligible to appear in the clinical and oral examination.

e) The written part result will be valid for three consecutive attempts for appearing in the Clinical and Oral Part of the Final Examination. After that the candidate will have to re-sit the written part of the Final Examination.

16-05-2014

Clinical and Oral Part of Final Examination:

a) The Clinical and Oral Examination will consist of 04 short cases, 01 long case and Oral Examination with 01 station for a pair of Internal and External Examiner. Each short case will be of 07 minutes duration, 05 minutes will be for examining the patient and 02 minutes for discussion. (The short cases in the Radiology Examination will be rapid reporting sessions each of one minute duration. Each long case will be of 15 minutes duration. The long cases in the Radiology Examination will mean the long reporting sessions each of 10 minutes duration.) The Oral Examination will consist of laboratory data assessment, interpretation of Radiology images, ECG and others.

b) The Total Marks of Clinical & Oral Examination will be 500 and to be divided as follows:

Short Cases	Total Marks = 300
Long Case	Total Marks = 120
Oral Examination	Total Marks = 80

c) A panel of four examiners will be appointed by the Vice Chancellor and of these two will be from KEMU whilst the other two will be the external examiners. Internal examiner will act as a coordinator. In case of difficulty in finding an internal examiner in a given subject, the Vice Chancellor would, in consultation with the concerned Deans, appoint any relevant person with appropriate qualification and experience, outside the University as an examiner.

d) The internal examiners will not examine the candidates for whom they have acted as supervisor and will be substituted by other internal examiner.

e) The candidates scoring 50 % marks in each component of the Clinical & Oral Examination will pass this part of the Final Examination.

f) The candidates who fail in clinical and oral examination will have to re-appear in both the written as well as clinical & oral examination.

g) The candidates will have two attempts to pass the final examination with normal fee. A special administration fee of Rs 10,000 in addition to normal fee of the amount determined by the university from time to time shall be charged for further attempts.

Continuous Internal Assessment (CIS)

Continuous Internal Assessment will be a stand-alone component. The marks for Continuous Internal Assessment as per 10% weightage formula will be 100 and will be added to the marks of other components of the final examination and of those of Thesis Evaluation as follows

Thesis Evaluation:

According to the protocols defined by the university and would carry 400 marks.

DECLARATION OF RESULT

For the declaration of result

- i. The candidate must get his Thesis accepted.
- ii. The candidate must have passed the final written examination with 50 % marks and the clinical & oral examination securing 50 % marks. The cumulative passing score from the written and clinical / oral examination shall be 60 %. Cumulative score of 60 % marks to be calculated by adding up secured marks of each component of the examination i.e written and clinical / oral and then calculating its percentage.
- iii. The MD / MS / MDS degree shall be awarded after acceptance of thesis and success in the final examination.
- iv. On completion of stipulated training period, irrespective of the result (pass or fail) the training slot of the candidate shall be declared vacant.

PART - I

7. DISCIPLINARY ACTION

- i. For all such offences that occur in the institution, attached hospitals and hostel premises, the Vice Chancellor may at his discretion refer the case to the Disciplinary Committee of the institution, which shall be appointed by the Vice Chancellor approved by the Academic Council from time to time. This Disciplinary Committee shall have the power to hear any student or students or any member of the staff or any member of public and is empowered to send its recommendations to the Vice Chancellor who may or may not seek the ratification of these recommendations by the Academic Council.
- ii. The Disciplinary Committee will consist of at least three professors / senior associate professors.

- ii. After considering the recommendations of the Disciplinary Committee, disciplinary action by the Vice Chancellor against the students committing an offence might take one or more of the following forms depending upon severity of the offence:
- a. The student may be asked to tender and apology, verbal or written. This shall be placed on the student's record.
 - b. A student may be placed on probation with monthly report from the supervisor securing 70 % score for a period of upto one year. If during the period of probation he / she fails to improve his / her conduct, he / she may be expelled from the institution.
 - c. A student may be fined upto Rs. 10,000/- or an amount which may be decided and adjusted from time to time by the University.
 - d. Stipend/scholarship if any may be suspended or stopped.
 - e. A student may be suspended from the roll of the institution for a period determined by the Vice Chancellor on recommendation of disciplinary committee.
 - f. The student may be expelled from the institution by the Vice Chancellor on the recommendation of the Disciplinary Committee.

Regulations related to expulsion.

a. Expulsion whenever imposed on a student shall mean the loss of a specific duration of studies and training as determined by the Vice Chancellor and will mean his / her being debarred from the University Examination during the period of his / her expulsion without refund of fee.

b. A student expelled from an institution shall not be readmitted before the expiry of the period of his / her expulsion.

c. Cases of expulsion shall be reported to the Pakistan Medical and Dental Council by the Vice Chancellor for registration and notification.

d. A student shall continue to be under the disciplinary jurisdiction of the Vice Chancellor till the declaration of the result of final examination of the program.

e. A student shall not keep in their possession firearms, other weapons of offence and narcotics, involvement in sectarian or anti Pakistan activities in the premises of the institution, attached hospitals and hostels. Appropriate disciplinary action shall be taken against the students found guilty of contravening this rule.

f. The Vice Chancellor is competent to impose and remit fines.

g. The Vice Chancellor is competent to impose punishment as deemed necessary.

35-2014

The decision of the Vice Chancellor in all cases shall be considered as final and will not be challengeable in any court of law.

The above disciplinary rules may be amended by the Vice Chancellor on recommendation of the Academic Council.

GENERAL CLAUSES

Fee for application form, prospectus and processing charges and can be revised periodically by the university.

The Entry Examination as prescribed can be revised from time to time by the university.

Cumulative score of 60 % shall mean 60 % marks to be calculated by adding up secured marks of each component of the examination.

The number of seats for each MD / MS / MDS training program will be allocated according to the number of available training slots, trainers / supervisors and the availability of relevant equipment as well as infrastructure and others within the training units of this institution. These parameters will be subject to annual audit and review by the University.

In all university examinations, the candidate has to pass the theory examination before appearing in the clinical, oral or practical examinations.

MS/MS/MDS candidate may freeze his training for a length of period not exceeding one year in total at a stretch or in parts. VC may grant a maximum extension of 30 days in exceptional circumstances over and above this one year limit. This period may be modified on recommendation of the Academic Council from time to time. No further extension will be permissible and the training in the allocated program will be terminated.

The leave rules will be adopted as per directives of the Government for postgraduate trainees or as issued by competent authority would be applicable to the trainees.

The supervisor can only be appointed for a program if he / she holds qualification equivalent or greater than the qualification being offered in the program.

The examiner can only be appointed for an examination if he / she holds qualification equivalent or greater than the qualification being offered in the program.

05-2014

In case of any ambiguity or difficulty in interpretation of these regulations, the Vice Chancellor will use his / her authority to decide the issue.

In case of difficulty in interpretation of the rules the candidates may appeal to the Academic Council and subsequently to the Vice Chancellor. The decision of the Vice Chancellor will be final and could not be challenged in any court of law.


All the previous MD / MS / MDS regulations 2008 hereby stand repealed.

APPENDIX "B"

(See Regulation 4, 9 xii, 9 xiii, 9 xxi, 9 xxii)

LIST & DURATION OF PROGRAMS

Title of Program	Four Year Duration	Five Year Duration
MD	Community Medicine & Public Health	Cardiology
	General Medicine	Dermatology
	Paediatrics	Gastroenterology
	Radiology	Neurology
	Psychiatry	Pulmonology
ANY OTHER SPECIALTY IN THE MD PROGRAM AS PROPOSED BY THE ACADEMIC COUNCIL		
MS	General Surgery	Anaesthesiology
	Ophthalmology	Cardiac Surgery
	Otorhinolaryngology	Neurosurgery
	Obstetrics & Gynaecology	Orthopaedic Surgery
		Paediatric Surgery
		Plastic Surgery
		Thoracic Surgery
MDS	Oral & Maxillofacial Surgery	Urology
	ANY OTHER SPECIALTY IN THE MS PROGRAM AS PROPOSED BY THE ACADEMIC COUNCIL	


 Vice Chancellor
 King Edward Medical University
 LAHORE
 16-05-2014

APPENDIX "C"
(See Regulation 5-a)

FORM - I

Diary No. _____

APPLICATION FORM FOR ADMISSION INTO MD PROGRAMS SESSION
KING EDWARD MEDICAL UNIVERSITY, LAHORE

PROGRAMS	CHOICE OF PREFERENCE	PROGRAMS	CHOICE OF PREFERENCE
Radiology		6. Neurology	
Community Medicine		7. Paediatrics	
Public Health		8. Psychiatry	
Pathology		9. Pulmonology	
Gastroenterology		10. Radiology	
General Medicine			

ALLOCATION OF SEATS WILL BE ON MERIT AND BASIS OF FIRST SERVE BASIS.

1. Name of Applicant: _____
 2. Father's Name: _____
 3. Date of Birth: _____
 4. CNIC No. _____
 5. Present Address _____

 Tel: _____ Mob: _____ Email: _____


Paste Recent
passport size
photograph

Permanent Address _____

 Tel: _____ Mob: _____

③ Domicile ?

Approved by Syndicate KEMU's 25th meeting on 10th May 2014


 Vice Chancellor
 King Edward Medical University
 LAHORE
 16-05-2014

CONTACT NUMBER OF CLOSE RELATIVE/NEXT OF KIN (Tel/Mob) _____

For Overseas Applicants

Permanent Address _____ ^{④ Visa type} — student / tourist / other

Country of Origin _____ Passport No & Expiry Date _____

Nationality _____ Tel: _____ Cell: _____

E-Mail _____

MBBS / Equivalent Degree recognized by PMDC:

Year Obtained _____ Institution Where Studied _____

Degree Awarding University _____

(Please enclose a certified copy of degree)

PMDC Registration Certificate:

Registration No. _____ Date of Expiry: _____

(Please enclose a certified copy of valid certificate of Registration)

11. Employment:

Government _____ Private _____ Self Employed _____

12. Fee deposit details

^{⑤ Details:} _____

Amount Rs _____ Bank Challan No./ Pay order No. _____

Date _____ Branch _____

13. Two Training Programs of the University or CPSP of the same or different Specialties are not permissible

4. DOCUMENTS TO ATTACHED (ATTESTED PHOTOCOPIES)

1. Three Photographs Passport Size ✓
2. Matric Certificate ✓
3. F.Sc Certificate ✓
4. MBBS Degree / Relevant Graduate degree ✓
5. Result Cards (All Professionals) ✓
6. Attempt Certificate for all Professionals ✓
7. PM&DC (Valid Date) ✓
8. One year House Job Certificate ✓
9. CNIC ✓
10. Domicile Certificate ✓
11. Bank Receipts Rs: 2500/- (Original) ✓

⑥ Reference
 ⑦ declaration/undertaking?
 ⑧ Admit card
 ⑨ Address details (to be filled by student)
 Letter of recommendation?

Signature of the applicant: _____

[Signature]
 Vice Chancellor
 King Edward Medical University
 LAHORE
 16-05-2014

FORM - II

Diary No. _____

**APPLICATION FORM FOR ADMISSION INTO MS PROGRAMS SESSION
KING EDWARD MEDICAL UNIVERSITY, LAHORE**

PROGRAMS	CHOICE OF PREFERENCE	PROGRAMS	CHOICE OF PREFERENCE
Anaesthesiology		8. Oral and Maxillofacial Surgery	
Cardiac Surgery		9. Otorhinolaryngology	
General Surgery		10. Paediatric Surgery	
Neurosurgery		11. Plastic Surgery	
Obstetrics & Gynaecology		12. Thoracic Surgery	
Ophthalmology		13. Urology	
Orthopaedic Surgery			

THE ALLOCATION OF SEATS WILL BE ON MERIT AND YOU MUST COME FIRST SERVE BASIS.

- Name of Applicant: _____
- Father's Name: _____
- Date of Birth: _____
- CNIC No. _____
- Present Address _____
City _____

Paste Recent
passport size
photograph

Tel: _____ Mob: _____ Email: _____

- Permanent Address _____

- Tel: _____ Mob: _____

7. CONTACT NUMBER OF CLOSE RELATIVE/NEXT OF KIN (Tel/Mob) _____

[Signature]
16-05-2014
Vice Chancellor
King Edward Medical University
LAHORE

For Overseas Applicants

Permanent Address _____

Country of Origin _____ Passport No & Expiry Date _____

Nationality _____ Tel: _____ Cell: _____

E-Mail _____

MBBS / Equivalent Degree recognized by PMDC:

Year Obtained _____ Institution Where Studied _____

Degree Awarding University _____

(Please enclose a certified copy of degree)

PMDC Registration Certificate:

Registration No. _____ Date of Expiry: _____

(Please enclose a certified copy of valid certificate of Registration)

Employment:

Government _____ Private _____ Self Employed _____

Fee deposit details

Amount Rs _____ Bank Challan No./ Pay order No. _____

Date _____ Branch _____

Two Training Programs of the University or CPSP of the same or different Specialties are not permissible**14. DOCUMENTS TO ATTACHED (ATTESTED PHOTOCOPIES)**

1. Three Photographs Passport Size
2. Matric Certificate
3. F.Sc Certificate
4. MBBS Degree / Relevant Graduate degree
5. Result Cards (All Professionals)
6. Attempt Certificate for all Professionals
7. PM&DC (Valid Date)
8. One year House Job Certificate.
9. CNIC
10. Domicile Certificate
11. Bank Receipts Rs: 2500/- (Original)

Signature of the applicant: _____

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Approved by Syndicate KEMU's 25th meeting on 10th May 2014


16-05-2014
 Vice Chancellor
 King Edward Medical University
 LAHORE

Specialty: _____

Office Use

ADMIT CARD
University Based Subject Test
POSTGRADUATE ADMISSION TEST

(Entry Test Centre)

King Edward Medical University
(Library Hall) Patiala Block,
Lahore.

MD MS MDS

Dated _____ Time: 09:00 AM

This admit card is essential to sit for the Entry Test.
Please complete it. This will be signed, stamped and
returned to the applicant.

Name: Mr. / Miss / Mrs.: _____

Father's Name: _____

Roll No: _____

Phone No: _____

Address No: _____

Past Recent
Photograph

(ID Card size)

Admit Card No. Please
leave Blank

Signature of Controller of Examinations

Please follow instructions overleaf

Signature of the Candidate

Specialty: _____

Office Use

ADMIT CARD
University Based Subject Test
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Roll No: _____

Phone No: _____

Address No: _____

Past Recent
Photograph

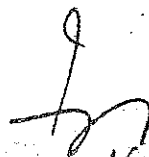
(ID Card size)

Admit Card No. Please leave
Blank

Signature of Controller of Examinations

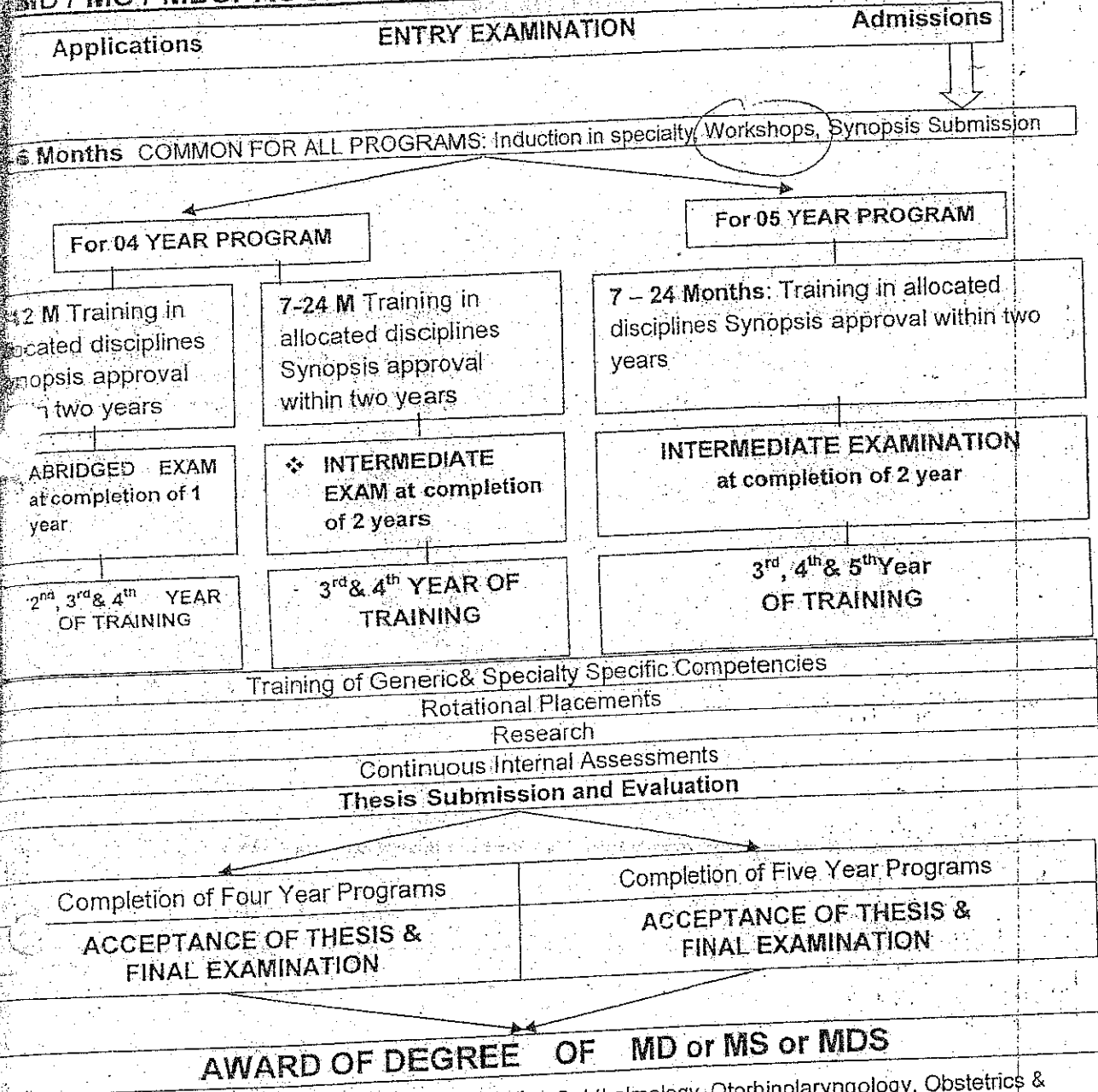
Please follow instructions overleaf

Signature of the Candidate


Vice Chancellor
King Edward Medical University
LAHORE
16-05-2014

APPENDIX "D"
(See Regulation 9)

MD / MS / MDS PROGRAM FORMAT OF K. E. MEDICAL UNIVERSITY



Abridged Examination for 04 years program in: Ophthalmology, Otorhinolaryngology, Obstetrics & Gynecology, Radiology, Pediatrics, Psychiatry, Oral & Maxillofacial Surgery

Intermediate Examination for 04 years program in: General Medicine, General Surgery, Community Medicine

Intermediate Examination for 05 years program in: Cardiology, Dermatology, Gastroenterology, Neurology, Pulmonology, Anaesthesiology, Cardiac Surgery, Neurosurgery, Orthopaedic Surgery, Paediatric Surgery, Plastic Surgery, Thoracic Surgery, Urology

Approved by Syndicate KEMU's 25th meeting on 15/05/2014

[Signature]
16-05-2014
Vice Chancellor
King Edward Medical University
LAWOFF

APPENDIX "E"
(See Regulation 9-iii)

MANDATORY WORKSHOPS

1. Each candidate of MD/MS/MDS program would attend the 04 mandatory workshops and any other workshop as required by the university.
2. The four mandatory workshops will include the following
 - a. Research Methodology and Biostatistics] 3 months
 - b. Synopsis Writing
 - c. Communication Skills
 - d. Introduction to Computer / Information Technology and Software programs] 3 months
3. The workshops will be held on 03 monthly basis.
4. An appropriate fee for each workshop will be charged.
5. Each workshop will be of 02 - 05 days duration.
6. Certificates of attendance will be issued upon satisfactory completion of workshops.



- d. The acquisition of research skill will be assessed as per regulations governing thesis evaluation and its acceptance.

iii. Practice and System Based Learning

- a. This competency will be learnt from journal clubs, review of literature, policies and guidelines, audit projects, medical error investigation, root cause analysis and awareness of healthcare facilities.
- b. The assessment methods will include case studies, presentation in morbidity and mortality review meetings and presentation of audit projects if any.
- c. These methods of assessment shall have equal weight-age.

iv. Communication Skills

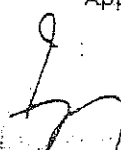
- a. These will be learnt from role models, supervisor and workshops.
- b. They will be assessed by direct observation of the candidate whilst interacting with the patients, relatives, colleagues and with multisource feedback evaluation.

v. Professionalism as per Hippocratic Oath

- a. This competency is learnt from supervisor acting as a role model, ethical case conferences and lectures on ethical issues such as confidentiality, informed consent, end of life decisions, conflict of interest, harassment and use of human subjects in research.
- b. The assessment of residents will be through multisource feedback evaluation according to proformas of evaluation and its' scoring method.

Specialty Specific Competencies

- i. The candidates will be trained in operative and procedural skills according to a quarterly based schedule.
- ii. The level of procedural competence to be achieved at various levels of training will be according to a competency table to be developed by each specialty.

 16-05-2014

Multisource Feedback Evaluation

- i. The supervisor would ensure a multisource feedback to collect peer assessments in medical knowledge, clinical skills, communication skills, professionalism, integrity, and responsibility.
- ii. Satisfactory annual reports will be required to become eligible for the final examination

b) Completion Of Candidate's Training Portfolio

- i. The Candidate's Training Portfolio (CTP) will be published (or computer based portfolio downloadable) by the university.
- ii. The candidates would either purchase the CTP or download it from the KEMU web site.
- iii. The portfolio will consist of the following components
 - a) Enrollment details.
 - b) Candidate's credentials as submitted on the application for admission form.
 - c) Timeline of scheduled activities e.g dates of commencement and completion of training, submission of synopsis and thesis, assessments and examination dates etc (**Appendix H**)
 - d) Log Book of case presentations, operations and procedures recorded in an appropriate format and validated by the supervisor.
 - e) Record of participation and presentations in academic activities e.g lectures, workshops, journal clubs, clinical audit projects, morbidity & mortality review meetings, presentation in house as well as national and international meetings.
 - f) Record of Publications if any.
 - g) Record of results of assessments and examinations if any
 - h) Synopsis submission proforma and IRB proforma and AS&RB approval Letter
 - i) Copy of Synopsis as approved by AS&RB
- iv. Candidates Training Portfolio shall be assessed as per proforma given in "**Appendix-G**".

Supervisor's Annual Review Report.

This report will consist of the following components:-

- i. Verification and validation of Log Book of operations & procedures according to the expected number of operations and procedures performed (as per levels of competence) determined by relevant board of studies.
- ii. A 90 % attendance in academic activities is expected. The academic activities will include: Lectures, Workshops other than mandatory workshops, Journal Clubs, Morbidity & Mortality Review Meetings and Other presentations.
- iii. Assessment report of presentations and lectures
- iv. Compliance Report to meet timeline for completion of research project.
- v. Compliance Report on Personal Development Plan.
- vi. Multisource Feedback Report, on relationship with colleagues, patients.
- vii. Supervisor will produce an annual report based on assessments as per proforma in appendix-G and submit it to the Examination Department.
- viii. 75 % score will be required to pass the Continuous Internal Assessment on annual review.


16-05-2014
Vice Chancellor

APPENDIX " G "

(See Regulation 9ix, 9xxiii-d, 10, 11, 14 & 16)

Supervisor's Evaluation**PROFORMA FOR CONTINUOUS INTERNAL ASSESSMENTS**

1. Generic Competencies		
(Please score from 1 – 100. 75% shall be the pass marks)	Component Score	Score achieved
i. Patient Care	20	
ii. Medical Knowledge and Research	20	
iii. Practice and System Based Learning		
• Journal Clubs	04	
• Audit Projects	04	
• Medical Error Investigation and Root Cause Analysis	04	
• Morbidity / Mortality / Review meetings	04	
• Awareness of Health Care Facilities	04	
iv. Communication Skills		
• Informed Consent	10	
• End of life decisions	10	
v. Professionalism		
• Punctuality and time keeping	04	
• Patient doctor relationship	04	
• Relationship with colleagues	04	
• Awareness of ethical issues	04	
• Honesty and integrity	04	
2. Specialty specific competencies		
Please score from 1 – 100. 75% shall be the pass marks		Score achieved
Operative Skills / Procedural Skills		
Multisource Feedback Evaluation (Please score from 1 – 100. 75% shall be the pass marks)		
4. Candidates Training Portfolio (Please score from 1 – 100.75% shall be the pass marks)		
(Please score from 1 – 100. 75% shall be the pass marks)	Component Score	Score achieved
i. Log book of operations and procedures	25	
ii. Record of participation and presentation in academic activities	25	
iii. Record of publications	25	
iv. Record of results of assessments and examinations	25	

APPENDIX " H "

(See Regulation 10, 11 & 16)

CERTIFICATE OF COMPLETION OF TRAINING BY THE SUPERVISOR

Name of the Candidate	<input type="text"/>	Fathers Name	<input type="text"/>
University Reg. No.	<input type="text"/>	CNIC No.	<input type="text"/>
Date of Admission	<input type="text"/>	Year of completion of training	<input type="text"/>
Program of Training	<input type="text"/>	Name of the Supervisor	<input type="text"/>

Phase	Components of Training	Completed	Not Completed	Comments	Signature
Phase 1 6 months for four programs in Abridged program scheme	• Induction in to the specialty				
	• Completion of workshops				
	• Synopsis submission				
Move to the next segment only on completion of above mentioned phase.					
Phase 2 12 months for four programs in Intermediate program scheme	• Training in allocated disciplines as per program format				
	• Approval of synopsis				
Move to the next segment only on completion of above mentioned phase.					
Phase 3 18 months for four programs in Intermediate program scheme	• Training of competencies				
	• Rotational placements				
	• Research				
	• Thesis submission				
Phase 4 24 months for four programs in Intermediate program scheme	• Training of competencies				
	• Rotational placements				
	• Research				
	• Thesis submission				
Phase 5 30 months for four programs in Intermediate program scheme	• Training of competencies				
	• Rotational placements				
	• Research				
Phase 6 36 months for four programs in Intermediate program scheme	• Thesis submission				
	• Rotational placements				
	• Research				

[Signature]
 16-05-2014
 Vice Chancellor
 King Edward Medical University

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