

Ordinance Governing
M. S. ENT
Curriculum 2019-20

SHRI DHARMASTHALA MANJUNATHESHWARA UNIVERSITY

(A State Private University established under the Shri Dharmasthala Manjunatheshwara University
Act No 19 of 2018 of Government of Karnataka and Notification No. ED 261 URC 2018 dated 19th December 2018)

Manjushree Nagar, Sattur, Dharwad - 580 009, Karnataka, India 6th Floor, Manjushree Block SDM Medical College Campus 0+91 836 2321127,2321126,2321125,2321124 sdmuniversity.edu.in sdmun@sdmuniversity.edu.in; registrar@sdmuniversity.edu.in

|| Om Shri Manjunathaya Namaha ||



Shree Kshethra Dharmasthala

Edition Year: 2019-20

Shri Dharmasthala Manjunatheshwara University,

Manjushree Nagar, Sattur, Dharwad - 580 009, Karnataka, India

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Published by

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THE LOGO

Poojya Dr D. Veerendra Heggade, Hon'ble Chancellor of the University, while searching for an appropriate Logo for the University, saw a photograph picked from Temple Architecture showing Wings of a Bird, sculpted in Indian style and wanted it to be incorporated in the logo for the University, as the Wings symbolize 'Spreading of Knowledge beyond Boundaries'. Further it was felt that the Central theme of the logo should be 'Rudra' (The Linga) with three wings on each side. In this way, the logo of the University was conceptualized.

Hence:

- 1. The central part represents **Rudra** who Demolishes Darkness.
- 2. The Three **horizontal lines on The Linga** stand for Samyak Darshan (Right Belief), Samyak Gyan (Right Knowledge) and Samyak Charitra (Right Conduct).
- 3. The Wings symbolize spreading of Knowledge across the boundaries.
- 4. Base line "Truth Liberates" highlights the Purpose of Education: to liberate oneself unconditionally. It shows that it is not discipline, nor knowledge nor the efforts to freedom that liberate but Truth is what liberates you from all your conditioning and ignorance.

The overall significance of Shri Dharmasthala Manjunatheshwara University's Logo is:

Darkness of ignorance is destroyed by the flow of knowledge to bring Liberty to everyone, by realizing the truth. And, it should spread globally without the boundaries as hindrance.



VISION

Shri Dharmasthala Manjunatheshwara University will set the highest standards of teaching and learning by awakening the intelligence of the students and nurturing the creativity hidden in them by creating an environment where the ancient wisdom blends with modern science, to transform them into whole human beings to face the challenges.

MISSION

- To ensure that the journey of education is inspiring, pleasant and enjoyable.
- Attract the best of teachers and students.
- Achieve high principles of trust, love and spirituality in the students.
- Create a collaborative, diverse and exclusive community.
- Transform the student of today to be a leader of tomorrow and a better human being.
- Produce passionate teachers.
- Evolve innovative teaching techniques.
- Create a peaceful environment.
- Prepare the student to face the social challenges.
- Create a University of which the Nation is proud of.
- Be an effective partner in Nation Building.
- Create an Eco-friendly University.
- Create a University based on the principles of beauty, love and justice.

||Om Shanti! Om Shanti! Om Shanti||



SHRI DHARMASTHALA MANJUNATHESHWARA UNIVERSITY

6" Floor, 'Manjushree' Building SDM Medical College Campus Sattur, Dharwad - 580009

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SDMU/Notif/28/2019

Date: 24 - 04 - 2019 NOTIFICATION

Regulations and Curricula of Medical Postgraduate Degree Courses in Clinical Subjects - 2019

- Ref: 1. Minutes of the Board of Studies · Medical PG held on 16 03 2019 (SDMU/BOS PG: 01/2019 dated 16-03-2019)
 - Minutes of the 1st Joint Faculty Meeting held on 19-03-2019 (Letter No: SDMU/JF/M-01/85/2019; Dated: 19-03-2019)
 - Minutes of the 1st Meeting of Academic Council held on 20-03-2019 (Letter No: SDMU/AC/M-01/93/2019; Dated: 21-03-2019)
 - Minutes of the 2nd Meeting of BoM held on 22-03-2019 (Letter No: SDMU/BoM/M-02/94/2019; Dated:23-03-2019)

Ordinance: In exercise of the powers conferred under Statutes 1.1 (Powers - Section xii), 1.2 (Powers and Functions - Section vii), 1.4 (Powers and Functions - Sections is & x), 1.5b (Powers and Functions - Sections b & c) of Shri Dharmasthala Manjunatheshwara University, the BoM is pleased to approve and notify the Ordinance governing Regulations and Curricula of the following Medical Postgraduate Degree/ Diploma Courses in Clinical Subjects - 2019:

SI No	Course	SI No	Course
1	M.D. (General Medicine)	7	M. D. (Hospital Administration)
2	M. D. (Pediatrics)	8	M. S. (General Surgery)
3	M. D. (Dermatology)	9	M. S. (Ophthalmology)
4	M. D. (Psychiatry)	10	M. S. (Orthopedics)
5	M. D. (Anaesthesiology)	11	M. S. (Otorhinolaryngology)
6	M. D. (Radio-Diagnosis)	12	M. S. (Obstetrics & Gynecology)
Diplom	na		
1	Diploma in Public Health		

The ordinance shall be effective for the students joining the courses during 2019-20 and onwards.



To: 1. The Principal, SDM College of Medical Sciences & Hospital.

2. Members of BoG, BoM & Academic Council, Shri Dharmasthala Manjunatheshwara University

Copy to: 1. The Vice-Chancellor, Shri Dharmasthala Manjunatheshwara University

2. The Controller of Examinations, Shri Dharmasthala Manjunatheshwara University

GUIDELINES FOR POSTGRADUATE TRAINING PROGRAMME FOR MS IN ENT

PG CURRICULUM

1. Goal

The goals of postgraduate training course would be to train a MBBS doctor who will:

- a) Practice efficiently and effectively, backed by scientific knowledge and skill base.
- b) Exercise empathy and a caring attitude and maintain high ethical standards.
- c) Continue to evince keen interest in continuing education in the speciality irrespective of whether he is in a teaching institution or is a practicing surgeon.
- d) Be a motivated 'teacher' defined as a specialist keen to share his knowledge and skills with a colleague or a junior or any learner.

2. Objectives

The following objectives are laid out to achieve the goals of the course. These objectives are to be achieved by the time the candidate completes the course. The Objectives may be considered under the subheadings

- a) Knowledge (Cognitive domain)
- b) Skills (Psycho motor domain)
- c) Human values, Ethical practice and Communication abilities

a. Knowledge:

- i. Describe etiology, pathophysiology, principles of diagnosis and management of common problems including emergencies, in adults and children.
- ii. Describe indications and methods for fluid and electrolyte replacement therapy including blood transfusion.
- iii. Describe common malignancies in the country and their management including prevention.
- iv. Demonstrate understanding of basic sciences relevant to this speciality.
- v. Identify social, economic, environmental and emotional determinants in a given case, and take them into account for planning therapeutic measures.

- vi. Recognize conditions that may be outside the area of his speciality/competence and to refer them to the proper specialist.
- vii. Advise regarding the operative or non-operative management of the case and to carry out this management effectively.
- viii. Update oneself by self study and by attending courses, conferences and seminars relevant to the speciality.
 - ix. Teach and guide his team, colleagues and other students.
 - x. Undertake audit, use information technology tools and carry out research, both basic and clinical, with the aim of publishing his work and presenting his work at various scientific fora.

b. Skills

- Take a proper clinical history, examine the patient, perform essential diagnostic procedures and order relevant tests and interpret them to come to a reasonable diagnosis about the surgical condition.
- ii. Perform common operative procedures in Otorhinolaryngology.
- iii. Provide basic and advanced life saving support services (BLS & ALS) in emergency situations
- iv. Undertake complete patient monitoring including the preoperative and post operative care of the patient.

c. Human values, Ethical practice and Communication abilities

- Adopt ethical principles in all aspects of his/her practice.
 Professional honesty and integrity are to be fostered. Care is to be delivered irrespective of the social status, caste, creed or religion of the patient.
- ii. Develop communication skills, in particular the skill to explain various options available in management and to obtain a true informed consent from the patient.
- iii. Provide leadership and get the best out of his team in a congenial working atmosphere.
- iv. Apply high moral and ethical standards while carrying out human or animal research.
- v. Be humble and accept the limitations in his knowledge and skill and to ask for help from colleagues when needed.

vi. Respect patient's rights and privileges including patient's right to information and right to seek a second opinion.

3. Components of the PG Curriculum

The major components of the PG curriculum shall be:

- a. Theoretical knowledge
- b. Practical/clinical Skills
- c. Training in Thesis.
- d. Attitudes, including communication.
- e. Training in research methodology.

4. Eligibility for Admission

MS Degree and Diploma Courses: A candidate affiliated to this university and who has passed final year M.B.B.S. examination after pursuing a study in a medical college recognized by the Medical Council of India, from a recognized Medical College affiliated to any other University recognized as equivalent thereto, and has completed one year compulsory rotating internship in a teaching Institution or other Institution recognized by the Medical Council of India, and has obtained permanent registration of any State Medical Council shall be eligible for admission.

5. Duration of Study

The period of training for obtaining the degree shall be three completed years including the period of examination.

Provided that in the case of students having a MCI/NMC recognised two year postgraduate diploma course in the same subject, the period of training, including the period of examination, shall be two years.

6. Method of training

The training of postgraduate for degree/diploma shall be residency pattern with graded responsibilities in the management and treatment of patients entrusted to his/her care. The participation of the students in all facets of educational process is essential. Every candidate should take part in seminars, group discussions, grand rounds, case demonstration, clinics, journal review meetings, CPC and clinical meetings. Every candidate should be required to participate in the teaching and training programme of

undergraduate students. Training should include involvement in laboratory and experimental work, and research studies. Basic medical sciences students should be posted to allied and relevant clinical departments or institutions. Similarly, clinical subjects' students should be posted to basic medical sciences and allied speciality departments or institutions.

7. Attendance, Progress and Conduct

- a. A candidate pursuing degree/diploma course should work in the concerned department of the institution for the full period as a full time student. No candidate is permitted to run a clinic/laboratory/nursing home while studying postgraduate course.
- b. Each year shall be taken as a unit for the purpose of calculating attendance.
- c. Every student shall attend symposia, seminars, conferences, journal review meetings,grand rounds, CPC, case presentation, clinics and lectures during each year as prescribed by the department and not absent himself / herself from work without valid reasons.
- d. Every candidate is required to attend a minimum of 80% of the training during each academic year of the post graduate course. Provided further, leave of any kind shall not be counted as part of academic term without prejudice to minimum 80% attendance of training period every year.
- e. Any student who fails to complete the course in the manner stated above shall not be permitted to appear for the University Examinations.

8. Monitoring Progress of Studies:

a. Work diary / Log Book - Every candidate shall maintain a work diary and record of his/her participation in the training programmes conducted by the department such as journal reviews, seminars, etc. (please see Chapter IV for model checklists and logbook specimen copy). Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate. The work diary shall be scrutinised and certified by the Head of the Department and Head of the Institution, and presented in the university practical/clinical examination.

b. Periodic tests: In case of degree courses of three years duration (MD/MS, DM, MCh.), the concerned departments may conduct three tests, two of them be annual tests, one at the end of first year and the other in the second year. The third test may be held three months before the final examination. The tests may include written papers, practicals / clinicals and viva voce. Records and marks obtained in such tests will be maintained by the Head of the Department and sent to the University, when called for.

In case of diploma courses of two years duration, the concerned departments may conduct two tests, one of them be at the end of first year and the other in the second year three months before the final examination. The tests may include written papers, practical's / clinical and viva voce.

 Records: Records and marks obtained in tests will be maintained by the Head of the Department and will be made available to the University or MCI.

9. Dissertation

- a. Every candidate pursuing MS degree course is required to carry out work on a selected research project under the guidance of a recognized post graduate teacher. The results of such a work shall be submitted in the form of a dissertation.
- b. The dissertation is aimed to train a post graduate student in research methods and techniques. It includes identification of a problem, formulation of a hypothesis, search and review of literature, getting acquainted with recent advances, designing of a research study, collection of data, critical analysis, and comparison of results and drawing conclusions.

- c. Every candidate shall submit to the Controller of Examination of the SDM University in the prescribed proforma, a synopsis containing particulars of proposed dissertation work within six months from the date of commencement of the course on or before the dates notified by the University. The synopsis shall be sent through the proper channel.
- d. Such synopsis will be reviewed and the dissertation topic will be registered by the University. No change in the dissertation topic or guide shall be made without prior approval of the University.
- e. The dissertation should be written under the following headings:
 - i. Introduction
 - ii. Aims or Objectives of study
 - iii. Review of Literature
 - iv. Material and Methods
 - v. Results
 - vi. Discussion
 - vii. Conclusion
 - viii. Summary
 - ix. References
 - x. Tables
 - xi. Annexures
- f. The written text of dissertation shall be not less than 50 pages and shall not exceed 150 pages excluding references, tables, questionnaires and other annexures. It should be neatly typed in double line spacing on one side of paper (A4 size, 8.27" x 11.69") and bound properly. Spiral binding should be avoided. The dissertation shall be certified by the guide, head of the department and head of the Institution.
- g. Four copies of dissertation thus prepared shall be submitted to the Controller of Examination of the SDM University, six months before final examination on or before the dates notified by the University.
- h. Three Soft copies of dissertation also should be submitted (1 to the University, 1 to the library, 1 to the Department)

- i. The dissertation shall be valued by examiners appointed by the University. Approval of dissertation work is an essential precondition for a candidate to appear in the University examination.
- j. Guide: The academic qualification and teaching experience required for recognition by this University as a guide for dissertation work is as per Medical Council of India Minimum Qualifications for Teachers in Medical Institutions Regulations, 1998. Teachers in a medical college/institution having a total of eight years teaching experience out of which at least five years teaching experience as Lecturer or Assistant Professor gained after obtaining post graduate degree shall be recognized as post graduate teachers.

A Co-guide may be included provided the work requires substantial contribution from a sister department or from another medical institution recognized for teaching/training by Rajiv Gandhi University of Health Sciences/Medical Council of India. The co-guide shall be a recognized post graduate teacher of Rajiv Gandhi University of Health Sciences.

k. 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.

10. Schedule of Examination

The examination for M.S courses shall be held at the end of three academic years (six academic terms). The university shall conduct two examinations in a year at an interval of four to six months between the two examination. Not more than two examinations shall be conducted in an academic year.

11. Scheme of Examination

1. M.S. Degree

M.S. Degree examinations in any subject shall consist of dissertation, written paper (Theory), Practical/Clinical and Viva voce.

- a. **Dissertation**: Every candidate shall carryout work and submit a dissertation as indicated in SI.NO.9. Acceptance of dissertation shall be a precondition for the candidate to appear for the final examination.
- b. Written Examination (Theory): A written examination shall consist of four question papers, each of three hours duration. Each paper shall carry 100 marks. Out of the four papers, the 1st paper in clinical subjects will be on applied aspects of basic medical sciences. Recent advances may be asked in any or all the papers.
- c. Practical / Clinical Examination: In case of practical examination, it should be aimed at assessing competence and skills of techniques and procedures as well as testing students ability to make relevant and valid observations, interpretations and inference of laboratory or experimental work relating to his/her subject.
- d. In case of clinical examination, it should aim at examining clinical skills and competence of candidates for undertaking independent work as a specialist. Each candidate should examine at least one long case and two short cases.

The total marks for practical / clinical examination shall be 200.

- e. Viva Voce: Viva Voce Examination shall aim at assessing depth of knowledge, logical reasoning, confidence and oral communication skills. The total marks shall be 100 and the distribution of marks shall be as under:
 - (i) For examination of all components of syllabus 80 Marks
 - (ii) For Pedagogy/dissertation discussion 20 Marks
- f. Examiners: There shall be at least four examiners in each subject. Out of them two shall be external examiners and two shall be internal examiners. The qualification and teaching experience for appointment as an examiner shall be as laid down by the Medical Council of India.

- g. Criteria for declaring as pass in University Examination: A candidate shall secure not less than 50% marks in each head of passing which shall include (1) Theory, (2) Practical including clinical and viva voce examination.
 - A candidate securing less than 50% of marks as described above shall be declared to have failed in the examination. Failed candidate may appear in any subsequent examination upon payment of fresh fee to the Registrar (Evaluation).
- h. Declaration of distinction: A successful candidate passing the University examination in first attempt will be declared to have passed the examination with distinction, if the grand total aggregate marks is 75 percent and above. Distinction will not be awarded for candidates passing the examination in more than one attempt.
- **12. Number of Candidates per day.** The maximum number of candidates for practical/clinical and viva-voce examination shall be as under:

MS Course: Maximum of 6 per day

Course Contents

A. Theory

1. Basic Sciences

- a. Anatomy of the ear
- b. Physiology of hearing and equilibrium
- c. Anatomy of nose and paranasal sinuses
- d. Anatomy of pharynx oesophagus /
- e. Deglutition
- f. Anatomy of larynx and tracheobronchial tree
- g. Physiology of respiration
- h. Physiology of generation and reception of speech.
- i. Surgical anatomy of skull base
- j. Cranial nerves
- k. Imaging and Radiology pertaining to ear, nose and throat (ENT)
- I. Knowledge of Immunology and Microbiology as regarding ENT
- m. Radiotherapy and Chemotherapy in Head & Neck Cancers
- n. Wound healing / Principles of Laser Surgery
- o. Basics of anaesthesia and Intensive Care in relation to ENT
- p. A thorough knowledge of anatomy of head and neck region including thyroid, neck spaces and salivary glands
- q. Physiology of smell

2. Audiology

(A)	(B)	(C)		
a) Brief knowledge of	1)Epidemiology/	1)Diagnostic audiometry		
acoustics	Prevention/			
	rehabilitation of balance			
	& hearing disorders			
b) Use of computers in	2) Hearing aids	2) Diagnostic testing of		
audiological and		vestibular system		
vestibular testing and				
rehabilitation				
	3) Cochlear implant			

3. Otology

- a. Diseases of ext. Auditory canal and middle ear
- b. Acute suppurative Otitis Media
- c. CSOM.
- d. Complications of CSOM
- e. Plastic Surgery of ear
- f. Otosclerosis -
- g. SN Loss in adults and children
- h. Vertigo
- i. Meniere's disease
- j. Ototoxicity
- k. Vestibular Schwannoma
- I. Tumours of middle ear cleft
- m. Glomus jugulare
- n. Disorders of facial nerve
- o. Cochlear implants.

4. Laryngology

- a. Acute & Chronic infections of oral cavity, pharynx, tonsils and larynx.
- b. Trauma & stenosis of larynx
- c. Management of obstructed airway and tracheostomy
- d. Disorders of voice
- e. Neurological affections of pharynx and larynx
- f. Pharyngeal pouch
- g. Tumours of larynx
- h. Angiofibroma and nasopharyngeal lesions
- i. Tumours of oropharynx and lymphoma head and neck
- j. Tumours of hypopharynx
- k. Benign diseases of the neck
- I. The thyroid gland and disorders
- m. Diseases of salivary gland neoplastic & non-neoplastic
- n. Tumour of infra temporal fossa and parapharyngeal space. Cysts, granulomas and tumours of jaw, nose and sinuses.
- o. The oesophagus in Otolaryngology, Facial Plastic Surgery and reconstructive surgery of head and neck
- p. Terminal care of head and neck cancer

5. Rhinology

- a) Radiology of Nose and Para nasal sinuses
- b) Congenital anomalies of the nose
- c) Conditions of external nose
- d) Abnormalities of smell
- e) Allergic rhinitis
- f) Intrinsic rhinitis and nasal polypi
- g) Infective rhinosinusitis / Complication and surgical management
- h) Disorders and trauma of facial skeleton
- i) Disorders of nasal septum
- j) CSF rhinorrhoea
- k) Epistaxis
- I) Snoring and sleep apnea
- m) Chronic granuloma's of nose and PNS
- n) The orbit in relation to ENT
- o) Transphenoidal hypophysectomy
- p) Overview of facial pain and headache

B. Practical / Clinical

Mandatory:

- 1) Cadaveric Dissection of Head & Neck
- Temporal bone dissection demonstrating the following procedures: (preferably a single MS candidate is expected to dissect 5 temporal bones)
 - a) Cortical mastoidectomy
 - b) MRM & Radical mastoidectomy
 - c) Facial nerve decompression
 - d) Post tympanotomy
 - e) Stapedectomy and insertion of piston
 - f) Myringotomy
- 3) Cadaveric endoscopic dissection of Nose and PNS demonstrating the following procedures:(preferably a single MS candidate is expected to dissect 3 cadavers)

- a) Uncinectomy
- b) Middle meatal antrostomy
- c) Anterior ethmoidectomy
- d) Posterior ethmoidectomy
- e) Sphenoidotomy
- f) Frontal recess widening
- g) Endoscopic septoplasty
- h) Endonasal DCR
- i) Endoscopic Medial Maxilectomy
- j) Endonasal Endoscopic approach to Orbit
- k) Canine fossa puncture / approach.
- I) Antral Puncture
- m) Intranasal antrostomy.
- n) Frontal Sinus mini trephine

C. Essential list of Surgical Procedures

Following procedures are classified as: a) to be done independently (PI)

- c) to assist a senior specialist /consultant (PA)
- d) To wash and observe the procedure (0)

Otology		0		PA			PI		
	1 ST	2 ND	3 RD	1 ST	2 ND	3 RD	1 ST	2 ND	3 RD
1. Aural Syringing	5	-	-	10	-	-	50	-	-
2. Ear Lobe Repair	5	-	-	5		-	8	5	-
3. Suturing of Pinna	4	-	-	3	-	-	8	5	-
Dermoid/ Sebacious cyst excision	3	-	-	2	-	-	0	5	-
5. Keloid excision	3	-	-	2	-	-	5	5	-
6. Temporalis Fascia Graft Harvesting	10	-	-		10	-		10	20
7. Dissection of temporal bone	5	-	-	5	-	-	2	4	4
8. Cortical mastoidectomy	10	-	-	2	8	-	-	2	4
9. Myringotomy	5	-	-	2	-	-	0	3	5
10. Grommet insertion	5	5	-	2	-	-	0	3	5
11. Myringoplasty	20	-	-	1	5	10		0	3
12. Modified Radical	10	20	20	-	5	10	-	-	-

	mastoidectomy									
13.	Radical mastoidectomy	-	1	1	-	-	1	-	-	-
14.	Ossiculoplasty	-	5	20	-	-	3	-	-	2
15.	Stapedectomy /	-	5	10	-	-	3	-	-	-
	Stapedotomy									
16.	Facial N	-	2	3	-	-	1	-	-	-
	Decompression									

Rhin	Rhinology		0		PA			PI		
		1 ST	2 ND	3 RD	1 ST	2 ND	3 RD	1 ST	2 ND	3 RD
1.	Foreign Body Nose Removal									
2.	Removal of Impacted Nasal stud									
3.	Maggots Removal									
4.	Diagnostic nasal endoscopy									
5.	Reduction of fracture nasal bones									
6.	Inferior Turbinoplasty									
7.	Septoplasty									
8.	FESS									
a)	Uncinectomy									
b)	Anterioethmoidal cell clearance									
c)	Middle meatal antrostomy									
d)	Posterior Ethmoidectomy& Sphenoidotomy									
e)	Frontal recess widening									
f)	Polypectomy	5	10	20	-	3	10	-	-	2
9.	Caldwel Luc	2	2	2	-	1	2	-	-	1
10.	Antral lavage	2	2	2	2	2	2	0	2	2
11.	Intranasal antrostomy	-	2	3	-	-	2	-	-	1
12.	Maxillo facial surgeries	-	1	3	-	-	1	-	-	-

13.	External operations of	-	-	1	-	-	1	-	-	-
	frontoethmoid sinus									
14.	Maxillectomy	-	-	2	-	-	1	-	-	-
15.	Endonasal DCR	5	-	-	-	10	3	-	-	3
16.	Endoscopic SPA	2	-	-	-	2	2	-	-	•
	ligation									
17.	Endonasal Excision of	-	5	-	-	-	5	-		0
	Benign Nasal Masses									
	of Nose & PNS									
18.	Rhinoplasty	2	-	-	-	5	6	-	-	-
19.	Young's Procedure		-	-	-	1	1	-	-	-

Lamma	Laryngology Head and Neck		0		PA			PI		
Laryng	Lai yiigology Heau aliu Neck		2 ND	3 RD	1 ST	2 ND	3 RD	1 ST	2 ND	3 RD
1.	Video Laryngoscopy	10	5	-	2	10	10	0	5	10
2.	Flexible Laryngo + Broncoscopy	10	5	-	5	5	5	0	2	5
3.	Tongue Tie Release	4	2	5	1	2	2	3	5	5
4.	Excision of Cysts /Small Swellings in the Oral Cavity	2	2	10	1	2	2	3	2	3
5.	Cervical Lymph Node excision	3	3	3	5	4	5	-	3	2
6.	Adenoidectomy	10	5	0	5	5	-	10	15	5
7.	Tonsillectomy	10	20	0	5	10	5	10	15	5
8.	Tracheostomy	10	15	15	3	10	15	-	5	10
9.	Direct Laryngoscopy	5	10	10	-	3	5	-	-	3
10.	Rigid Oesophagoscopy	-	5	5	-	3	5	-	-	1
11.	Rigid Oesophagoscopy& foreign body removal	-	2	3	-	-	3		-	-
12.	Bronchoscopy	-	3	5	-	-	1	-	-	-
13.	Microlaryngeal surgery	-	3	5	-	4	5	-	-	5
14.	Thyroid surgery	-	3	5	-	5	3	-	-	-
15.	Salivary gland surgery	-	3	5	-	5	3	-	-	-
16.	Laryngectomy	-	-	3	-	-	1	-	-	-

17.	Neck dissection	-	-	3	-	-	1	-	-	-
18.	Cysts and Sinus of	3	3	-	0	3	5	-	-	0
	Head & Neck									
19.	Sistrunk's Operations	3	3	-	0	3	5	-	-	0

Teaching and Learning Activities

A candidate pursuing the course should work in the institution as a full time student. No candidate should be permitted to run a clinic/laboratory/nursing home while studying postgraduate course. Each year should be taken as a unit for the purpose of calculating attendance.

Every student shall attend teaching and learning activities during each year as prescribed by the department and not absent himself / herself from work without valid reasons.

A list of teaching and learning activities designed to facilitate students acquire essential knowledge and skills outlined is given below.

- Lectures: Lectures are to be kept to a minimum. They may, however, be employed for teaching certain topics. Lectures may be didactic or integrated.
 - i. Didactic Lectures: Recommended for selected common topics for post graduate students of all specialties. Few topics are suggested as examples:
 - ii. Bio-statistics
 - iii. Use of library
 - iv. Research Methods
 - v. Medical code of Conduct and Medical Ethics
 - vi. National Health and Disease Control Programmes
 - vii. Communication Skills etc.

These topics may preferably take up in the first few weeks of the 1st year.

a) Integrated Lectures: These are recommended to be taken by multidisciplinary teams for selected topics, Ex:-. Jaundice, Diabetes mellitus, Thyroid etc.

- 2. Journal Club: Recommended to be held once a week. All the PG students are expected to attend and actively participate in discussion and enter in the Log book relevant details. Further, every candidate must make a presentation from the allotted journal(s), selected articles at least four times a year and a total of 12 presentations in three years. The presentations would be evaluated using check lists and would carry weightage for internal assessment. A time table with names of the student and the moderator should be announced in advance.
- 3. Subject Seminar: Recommended to be held once a week. All the PG students are expected to attend and actively participate in discussion and enter in the Log Book relevant details further, every candidate must present on selected topics as least four times a year and a total of 12 seminar presentations in three years. The presentations would be evaluated using check lists and would carry weightage for internal assessment (See Checklist in Chapter IV). A timetable for the subject with names of the student and the moderator should be announced in advance.
- 4. Ward Rounds: Ward rounds may be service or teaching rounds.
 - Service Rounds: Postgraduate and Interns should do every day for the care of the patients. Newly admitted patients should be worked up by the PGs and presented to the seniors the following day.
 - b) Teaching Rounds: Every unit should have 'grand rounds' for teaching purpose. A diary should be maintained for day to day activities by the students.
 - Entries (a) and (b) should be made in the Log book.
- Clinico-pathological Conference: Recommended at least once in three
 months for all post graduate Students. Presentation be done by rotation. If
 cases are not available due to lack of clinical postmortems, it could be
 supplemented by published CPCs.

- 6. **Clinical cases** (minimum of 20 cases) to be presented and discussed in detail .each presentation will be assessed by the teachers.
- 7. Inter Departmental Meetings: With departments of Pathology and Radio-Diagnosis at least once a month. Radio-diagnosis: Interesting cases and the imaging modalities should be discussed. These meetings should be attended by post graduate students and relevant entries must be made in the Log Book.
- 8. Teaching Skills: Post graduate students must teach under graduate students (Eg. Medical, nursing) by taking demonstrations, bed side clinics, tutorials, lectures etc. Assessment is made using a checklist by surgery faculty as well students. Record of their participation be kept in Log book. Training of post graduate students in Educational Science and Technology is recommended.
- Continuing Medical Education Programmes (CME): Recommended that at least
 - 2 state level CME programmes should be attended by each student in 3Years.
- 10. **Conferences:** Each PG student have to attend atleast one state or national or international conferences and present a paper.

Dissertation

- 1. Every candidate pursuing MS degree course is required to carry out work on a selected research project under the guidance of a recognized post graduate teacher. The results of such a work shall be submitted in the form of a dissertation.
- The dissertation is aimed to train a post graduate student in research methods and techniques. It includes identification of a problem, formulation of a hypothesis, search and review of literature, getting acquainted with recent advances, designing of a research study, collection of data, critical analysis, and comparison of results and drawing conclusions.

- 3. Every candidate shall submit to the Controller of Examination of the SDM University in the prescribed proforma, a synopsis containing particulars of proposed dissertation work six months from the date of commencement of the course on or before the dates notified by the University. The synopsis shall be sent through the proper channel.
- 4. Such synopsis will be reviewed and the dissertation topic will be registered by the University. No change in the dissertation topic or guide shall be made without prior approval of the University.
- 5. The dissertation should be written under the following headings:
 - i. Introduction
 - ii. Aims or Objectives of study
 - iii. Review of Literature
 - iv. Material and Methods
 - v. Results
 - vi. Discussion
 - vii. Conclusion
 - viii. Summary
 - ix. References (Vancouver style)
 - x. Tables
 - xi. Annexures
- 6. The written text of dissertation shall be not less than 50 pages and shall not exceed 150 pages excluding references, tables, questionnaires and other annexures. It should be neatly typed in double line spacing on one side of paper (A4 size, 8.27" x 11.69") and bound properly. Spiral binding should be avoided. The dissertation shall be certified by the guide, head of the department and head of the Institution.
- 7. Four copies of dissertation thus prepared shall be submitted to the Controller of Examination of the SDM University ,six months before final examination on or before the dates notified by the University.

8) The dissertation shall be valued by examiners appointed by the University. Approval of dissertation work is an essential precondition for a candidate to appear in the University examination.

Rotation posting in other Departments

Neurosurgery	2 weeks
Plastic Surgery	2 weeks
Head & Neck Oncology	4 weeks
Speech & Hearing*	2 weeks

Monitoring Learning Progress

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only also helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects

The learning out comes to be assessed should included: (i) Personal Attitudes, (ii) Acquisition of Knowledge, (iii) Clinical and operative skills, (iv) Teaching skills and (v) Dissertation.

i) **Personal Attitudes.** The essential items are:

- Caring attitudes
- Initiative
- Organizational ability
- Potential to cope with stressful situations and undertake responsibility
- Trust worthiness and reliability
- To understand and communicate intelligibly with patients and others
- To behave in a manner which establishes professional relationships with patients and colleagues
- Ability to work in team
- A critical enquiring approach to the acquisition of knowledge

The methods used mainly consist of observation. It is appreciated that these items require a degree of subjective assessment by the guide, supervisors and peers.

ii) **Acquisition of Knowledge**: The methods used comprise of `Log Book' which records participation in various teaching / learning activities by the students. The number of activities attended and the number in which presentations are made are to be recorded. The log book should periodically be validated by the supervisors. Some of the activities are listed. The list is not complete. Institutions may include additional activities, if so, desired.

Journal Review Meeting (Journal Club): The ability to do literature search, in depth study, presentation skills, and use of audio- visual aids are to be assessed. The assessment is made by faculty members and peers attending the meeting using a checklist

Seminars / Symposia: The topics should be assigned to the student well in advance to facilitate in depth study. The ability to do literature search, in depth study, presentation skills and use of audio- visual aids are to be assessed using a checklist

Clinico-pathological conferences: This should be a multidisciplinary case study of an interesting case to train the candidate to solve diagnostic and therapeutic problems by using an analytical approach. The presenter(s) are to be assessed using a check list similar to that used for seminar.

iii) Clinical skills

 Day to Day work: Skills in outpatient and ward work should be assessed periodically. The assessment should include the candidates' sincerity and punctuality, analytical ability and communication skills.

- Clinical meetings: Candidates should periodically present cases to his peers and faculty members. This should be assessed using a check list.
- Clinical and Procedural skills: The candidate should be given graded responsibility to enable learning by apprenticeship. The performance is assessed by the guide by direct observation. Particulars are recorded by the student in the log book.
- (iv) Teaching skills: Candidates should be encouraged to teach undergraduate medical students and paramedical students, if any. This performance should be based on assessment by the faculty members of the department and from feedback from the undergraduate students.
- (v) Dissertation in the Department: Periodic presentations are to be made in the department. Initially the topic selected is to be presented before submission to the University for registration, again before finalization for critical evaluation and another before final submission of the completed work
- (vi) Work diary / Log Book Every candidate shall maintain a work diary and record his/her participation in the training programmes conducted by the department such as journal reviews, seminars, etc. Special mention may be made of the presentations by the candidate as well as details of clinical or laboratory procedures, if any conducted by the candidate. The work diary shall be scrutinised and certified by the Head of the Department and Head of the Institution, and presented in the university practical/clinical examination.
- (vii) Periodic tests: The departments may conduct three tests, two of them be annual tests, one at the end of first year and the other in the second year. The third test may be held three months before the final examination. The tests may include written papers, practicals / clinicals and viva voce.

(viii) **Records:** Records, log books and marks obtained in tests will be maintained by the Head of the Department and will be made available to the University or MCI.

Log book

The log book is a record of the important activities of the candidates during his training, Internal assessment should be based on the evaluation of the log book. Collectively, log books are a tool for the evaluation of the training programme of the institution by external agencies. The record includes academic activities as well as the presentations and procedures carried out by the candidate.

Procedure for defaulters: Every department should have a committee to review such situations. The defaulting candidate is counseled by the guide and head of the department. In extreme cases of default the departmental committee may recommend that defaulting candidate be withheld from appearing the examination, if she/he fails to fulfill the requirements in spite of being given adequate chances to set himself or herself right.

Scheme of Examination

i) Theory

There shall be four question papers, each of three hours duration. Each paper shall consist of 10 short essay questions each carrying 10 marks. Total marks for each paper will be 100. Questions on recent advances may be asked in any or all the papers. Details of distribution of topics for each paper will be as follows:

Paper	Subject	Marks
Paper I:	Basic Sciences -	100
	1. Anatomy	
	2. Physiology	
	3. Other basic science topics covered in	
	syllabus	

Paper II:	Paper II: Rhinology including recent advances	
Paper III:	Otology including recent advances	100
Paper IV:	Laryngology and pharyngolaryngology &	100
	Broncho-oesophagology	

Note: The distribution of chapters / topics shown against the papers are suggestive only.

ii) Clinical 200 marks

There shall be one long case and three short cases to be examined and presented by each candidate.

Type of cases	Number of cases	Marks		
Long case	1	80		
Short cases	2	120 (60X 2)		

iii) Viva voce 100 marks

1) Viva-voce Examination: (80 marks)

All examiners will conduct viva-voce conjointly on candidate's comprehension, analytical approach, expression and interpretation of data. It includes all components of course contents. In addition candidates may be also be given case reports, charts, gross specimens, Histo pathology slides, X-rays, ultrasound, CT scan images, Temporal bone dissection, etc., for interpretation. Questions on operative surgery and use of instruments will be asked. It includes discussion on dissertation also.

2) Pedagogy Exercise: (20 marks) A topic be given to each candidate in the beginning of clinical examination. He/she is asked to make a presentation on the topic for 8-10 minutes

Maximum marks for	Theory	Practical	Viva	Grand Total
M.S	400	200	100	700
Diploma	300	150	50	500

SI.No	Name of the Book	Edition	Publisher
1.	Scott Broun	8 th Edition	Buterorth & Co Ltd.
2.	Cummins Otolaryngology	7 th Edition	Mosby
	H&N Surgery		
3.	Rob & Smith	5 th Edition	
	Operations surgery		
4.	Paperalla	1 st Edition	W.B. Saunder's
	Otolaryngology (4 Vol set)		Company
5.	Logan & Turner	11 th Edition	Wright / Varghese
6.	Lore	4 th Edition	W.B. Saunder's
	Atlas of H&N Surgery		Company
7.	Shambagh / Glasscock	7 th Edition	W.B. Saunder's
	Surgery of the Ear		Company
8.	Ballenger Snow Jr.	18 th Edition	Williams & Wilkins
9.	Sataloff's comprehensive	6 th Edition	
	textbook of Otolaryngology		
	and Head and Neck		
	Surgery		
10.	Paediatric Otolaryngology	4 th Edition	Bluestone
11.	Stell & Maron Textbook of	5 th Edition	
	Head and Neck Surgery &		
	Oncology		
12.	Handbook of clinical		
	audiology		
13.	Anirban Biswas		
14.	Kennedy Rhinology		

15.	Bluestone Paed .ENT	
16.	Recent advances in ORL	MOSBY

Journals

- 1) The Laryngoscope loppincott williams & william
- 2) Otolaryngology Head & Neck surgery MOSBY
- 3) Indian Journal of Otolaryngology AOI.
- 4) Annals of Otology / Rhinology / Iaringology Annals Publishing Co.
- 5) Archives of Otorhinolaryngology
- 6) British Journal of Otolaryngology
- 7) Indian Journal of Otology.
- 8) The Otolaryngology Clinics of North America WB Saunders Company

Format of Model Check Lists

Check List -I. MODEL CHECK-LIST FOR EVALUATION OF JOURNAL REVIEW PRESENTATIONS

Name of the Student:	Name of the Faculty/Observer

Date:

SI.	Items for observation during	Poor	Below	Average	Good	Very
No.	presentation		Average			Good
		0	1	2	3	4
1.	Article chosen was					
2.	Extent of understanding of					
	scope & objectives of the paper					
	by the candidate					
3.	Whether cross references have					
	been consulted					
4.	Whether other relevant					
	publications consulted					
5.	Ability to respond to questions					
	on the paper / subject					
6.	Audio-Visual aids used					
7.	Ability to defend the paper					
8.	Clarity of presentation					
9.	Any other observation					
	Total Score					

Check List - II. MODEL CHECK-LIST FOR EVALUATION OF SEMINAR PRESENTATIONS

Name of the Student:	Name of the Faculty/Observer:
Date:	

SI. No.	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Whether other relevant publications consulted					
2.	Whether cross references have been consulted\					
3.	Completeness of Preparation					
4.	Clarity of Presentation					
5.	Understanding of subject					
6.	Ability to answer questions					
7.	Time scheduling					
8.	Appropriate use of Audio- Visual aids					
9.	Overall Performance					
10.	Any other observation					
	Total Score					

Check List - III

$\begin{array}{c} \textbf{MODEL CHECK LIST FOR EVALUATION OF CLINICAL WORK IN WARD } \\ \textbf{OPD} \end{array}$

(To be completed once a month by respective Unit Heads including posting in other departments)

Name of the Student:	Name of the Unit Head:
Date:	

SI.	Points to be considered:	d: Poor Below Average		Average	Good	Very Good
No.		0	1	2	3	4
1.	Regularity of attendance					
2.	Punctuality					
3.	Interaction with colleagues and supportive staff					
4.	Maintenance of case records					
5.	Presentation of cases during rounds					
6.	Investigations work up					
7.	Bedside manners					
8.	Rapport with patients					
9.	Counseling patient's relatives for blood donation or Postmortem and Case follow up.					
10.	Over all quality of Ward work					
	Total Score					

Check List - IV EVALUATION FORM FOR CLINICAL PRESENTATION

Name of the Student: Name of the Faculty:

Date:

SI.	Points to be considered	Poor	Below Average	Average	Above Average	Very Good
		0	1	2	3	4
1.	Completeness of history					
2.	Whether all relevant points elicited					
3.	Clarity of Presentation					
4.	Logical order					
5.	Mentioned all positive and negative points of importance					
6.	Accuracy of general physical examination					
7.	Whether all physical signs elicited correctly					
8.	Whether any major signs missed or misinterpreted					
9.	Diagnosis: Whether it follows follows logically from history and findings					
	Investigations required Complete list					
10	 Relevant order 					
	Interpretation of investigations					
11.	Ability to react to questioning Whether it follows logically from history and findings					
12.	Ability to defend diagnosis					
13.	Ability to justify differential diagnosis					
14.	Others					
	Grand Total			•	·	

Check List - V MODEL CHECK LIST FOR EVALUATION OF TEACHING SKILL PRACTICE

SI. No		Strong Point	Weak Point
1.	Communication of the purpose of the talk		
2.	Evokes audience interest in the subject		
3.	The introduction		
4.	The sequence of ideas		
5.	The use of practical examples and/or illustrations		
6.	Speaking style (enjoyable, monotonous, etc., specify)		
7.	Attempts audience participation		
8.	Summary of the main points at the end		
9.	Asks questions		
10.	Answers questions asked by the audience		
11.	Rapport of speaker with his audience		
12.	Effectiveness of the talk		
13.	Uses AV aids appropriately		

Check list VI

MODEL CHECK LIST FOR DISSERTATION PRESENTATION

Name:	Faculty/observer:
Date:	

SI. No	Points to be considered divine	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Interest shown in selecting a topic					
2.	Appropriate review of literature					
3.	Discussion with guide & other faculty					
4.	Quality of protocol					
5.	Preparation of proforma					

Checklist-VII

CONTINUOUS EVALUATION OF DISSERTATION WORK BY GUIDE / CO-GUIDE

Name of the Student: Name of the Faculty/	/Observer:
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Date:

SI. No	Items for observation during presentation	Poor 0	Below Average 1	Average 2	Good 3	Very Good 4
1.	Periodic consultation with guide/co-guide					
2.	Regular collection of case material					
3.	Depth of analysis / discussion					
4.	Departmental presentation of findings					
5.	Quality of final output					
6.	Others					
	Total Score					

LOG BOOK

Table 1: Academic activities attended

Name:	Admission Year:
College:	

Date	Type of Activity Specify Seminar, Journal Club, Presentation, UG teaching	Particulars

LOG BOOK

Table 2: Academic presentations made by the student

Name:		Admission Year:
College:		
Date	Topic	Type of Presentation Specify Seminar, Journal Club, Presentation, UG teaching etc.

	Presentation, UG teaching etc.

LOG BOOK

Table 3: Diagnostic and Operative procedures performed

Name:	Admission Year:
College:	

Date	Name	ID No.	Procedure	Category O, A, PA, PI*

* Key: 0 - Washed up and observed

A - Assisted a more senior Surgeon

PA - Performed procedure under the direct supervision of a senior surgeon

PI - performed independently

Model Overall Assessment Sheet

Name of the College:

Academic Year:

SI. No	Faculty Member &	ı	Name	me of Student and Mean Score							
	Others	A	В	С	D	E	F	G	Н	_	J
1											
2											
3											
4											
5											
	Total Score										

Note: Use separate sheet for each year.



SDM College of Medical Sciences & Hospital



SDM College of Dental Sciences & Hospital



SDM College of Physiotherapy & SDM Institute of Nursing Sciences



Shri Dharmasthala Manjunatheshwara University



SDM Research Institute for Biomedical Sciences



Panoramic View of Campus