

Course Content

(Based on Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 2 ; page no.41-59)

Applicable for batch admitted in M.B.B.S Course from Academic Year 2019-20 & onwards

Subject: Community Medicine

Year: First MBBS

Competency No. CM	Topics & subtopics
	Health care of the communtiy
17.1	Health care to community
	Visit to primary/secondary health facility
	Role of physician in health care delivery- Integration with AETCOM module 1.1 What does it mean to be doctor?
17.2	Community diagnosis
17.3	Primary Health Care- Def, Principles
17.4	National Health Policies , MDGs
	SDL- Current national / stale level status of health indicators
17.5	Health Care delivery in India
	Nutrition
5.1	Common sources of various nutrients

	Demonstration: Foods we eat & their nutritive values
	Special nutritional requirements according to age, sex, activity, physiological conditions
	SDL- Foods customs in our families for special groups such as children/ pregnant/lactating women/ill persons (data collection by interviewing 5 homemakers)
5.2	Nutritional assessment at individual level- DOAP
	Nutritional assessment at family and community level -DOAP
5.3	Common nutritional deficiency diseases- Epidemiology , prevention and control
5.4	Diet planning at individual level
	Diet planning at family level
5.5	Nutritional surveillance and rehabilitation
	Visit to Nutritional rehabilitation centre
	Nutrition education
5.6	National Nutritional Policy , National Nutritional Programs
5.7	Food hygiene , food adulteration
	Demonstration of simple tests to identify food adulteration
5.8	Food fortification , food additives
	Concept of Health and Disease
1.1	Concept of Public Health
1.2	Concept , definition , determinants of health
	Determinants of health- Group discussion
1.3	Epidemiological triad , multifactorial causation of disease
	SDL-Identification of multiple causative factors of 2 common diseases(interview in wards/ family visit)

1.4	Natural history of disease
1.5	Levels of Prevention
1.6	Health education , IEC, BCC
1.7	Indicators of health
	Exercise on calculation of indicators
1.8	Demographic profile of India
	Exercise on calculation of demographic indicators , fertility rates
	SDL- Demographic trends in India
1.9	Communication skills in Health
	DOAP-Verbal/non verbal communication
	Empathy- What does it mean to be patient?
	AETCOM module 1.2
1.10	Doctor patient relationship
	SDL- Determinants of doctor patient relationship(Collection of data from patients/ relatives)
	Case discussions – Integration with AETCOM module 1.3
	Principles of health promotion and education
4.1	Methods of health education
	Demonstration of various methods of health education
	Improving communication, barriers in communication- integration with AETCOM module 1.4
4.2	Organization of health educational and counselling activities for individual & family
	Organization of counselling activity in ward/OPDs
	Organization of community based health educational activity(community/school)

4.3	Evaluation of health education & promotion program
	SDL- Preparation of tool for evaluation
	Conducting evaluation of health education & promotion program

Note:

- 1. The observations/ reflections of family / hospital visits , DOAP sessions , Self directed learning activities (SDL) , practicals should be entered in the log book immediately after the assignment.**
- 2. The observer / facilitator / teacher will provide the written brief feedback in the log book for the learner related to the competencies.**

Competency Nos.	Topics Subtopics
	primary care level for zoonotic diseases e.g Rabies, Plague, Brucellosis, Leptospirosis etc
	Epidemiological characteristics and control measures including the use of essential laboratory tests at the primary care level for Arthropod borne diseases eg Malaria, Chikungunya, Filaria, JE etc
	Epidemiological characteristics and control measures including the use of essential laboratory tests at the primary care level for Surface infections and STDs eg HIV, Syphilis, Gonorrhoea etc
	Epidemiological characteristics and control measures including the use of essential laboratory tests at the primary care level for Emerging and reemerging diseases eg Ebola virus disease, Nipah
CM8.2	Epidemiological characteristics and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases (diabetes, Hypertension, Stroke, obesity and cancer etc.)
CM8.3	Disease specific National Health Programs including their prevention and treatment of a case
CM8.4	Principles and measures to control a disease epidemic
CM 7.7	Steps in the Investigation of an epidemic of communicable disease and the principles of control measures
CM8.5	Principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease
CM8.6	Training of health workers in disease surveillance, control & treatment and health education
Disaster Management	
CM13.1	Concept of Disaster management
CM13.2	Disaster management cycle
CM13.3	Man made disasters in the world and in India
CM13.4	National Disaster management Authority
Hospital waste management	
CM14.1	Hospital waste- definition and classification
CM14.3	Laws related to hospital waste management
Essential Medicine	
CM19.1	Essential Medicine List (EML)
CM19.2	Essential medicine in primary health care
CM19.3	Counterfeit medicine and its prevention

Competency Nos.	Topics Subtopics
	Relationship of social and behavioural to health and disease
CM2.1	Clinico socio-cultural and demographic assessment of the individual, family and community
CM2.2	Socio-cultural factors, family (types), its role in health and disease & assessment of socio-economic status
CM2.3	Factors affecting health seeking behaviour and assessment of barriers for the same.
CM2.4	Social psychology, community behaviour and community relationship and their impact on health and disease
CM2.5	Indicators for assessment of poverty , social security measures and its relationship to health and disease

Second Professional - Community Medicine : Proposed List of Practicals / DOAP/ SDL Activities

Competency no.	Practical / DOAP
CM3.2	Visit to water purification plant
	Visit to Dist Public Health Laboratory
	Exercise on interpretation of water analysis report
	DOAP- water collection , estimation of chlorine demand/ residual chlorine content of drinking water , OT test
CM 3.2-3.4SDL	Preparation of Proforma/ checklist for sanitary survey of the community
3.4	Visit to sewage purification plant
3.6	Visit to office of Dist Vector borne Diseases Control Program
3.7	Demonstration: Identifying characteristics of vectors of Public Health Importance – DOAP
SDL	Preparation of Proforma/ checklist for entomological survey of the community
8.1	Visits to the Dist Offices/ Units/ clinics related to implementation of Disease Control Measures of Communicable Diseases

8.1	Visit to Public Health Microbiology / Reference laboratories
8.1	DOAP- Methods of Specimen collection and transportation of various body specimens in various communicable diseases
CM 7.7	Describe and demonstrate the steps in the Investigation of an epidemic of communicable disease and describe the principles of control measures
8.4	DOAP- Analysis & interpretation of disease outbreak data
8.4	DOAP- Preparation of epidemic curve / spot map with the help of given data and its interpretation
8.6	Visit to Dist Training Centre / Dist Disease Surveillance Unit
13.2	DOAP- Preparation of Disaster Preparedness Plan for a Primary Health Centre
13.4	Visit to Civil Defence Dept / Dist Disaster Management Office
14.1	Conducting Survey of Hospital Wastes Segregation Practices
SDL	
14.1	DOAP- Hospital waste segregation of various types of hospital wastes
19.2	Visit to hospital pharmacy

Second Professional - Proposed Activities in First Clinical Community Medicine Posting (4 weeks)

Week	Proposed Activities
First and second week	<ul style="list-style-type: none"> a. Clinico socio-cultural and demographic assessment of the individuals and allotted families, b. Sanitary survey of the allotted households c. Assessment of housing conditions in allotted families d. Entomological survey of the allotted households e. Analysis of survey findings of the allotted families and group discussion on important health related issues in the community. f. Organization of health educational activity for the allotted families and allotted community.
Third and fourth week	Epidemiological history taking of common communicable diseases admitted in hospital such as diarrhoeal diseases , jaundice , typhoid , food poisoning , measles , mumps , influenza, diphtheria , pertussis , tuberculosis, malaria, filarial , dengue fever , HIV / AIDS, STDs etc

Note:

1. The observations/ reflections of family / hospital / community visits , DOAP sessions , Self directed learning activities (SDL) , practicals should be entered in the log book immediately after the assignment.
2. The observer / facilitator / teacher will provide the written brief feedback in the log book for the learner related to the competencies.

Course Content

Third Professional Part I (from October 2020)

Subject :Community Medicine Theory / Practical

(Based on Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. Vol. 2 ; page nos. 41-59)

1. Total Teaching hours : 105

2. A. Lectures(hours): 40 B. Self directed learning (hours) :5

C. Clinical Postings(hours): 6 weeks(30 working days x 3)- 90 hours

D. Small group teachings/tutorials/Integrated teaching/Practicals(hours): 60

Competency Nos.	Topics & Subtopics
	Epidemiology
CM 7.1	Epidemiology- definition , principles, concepts and uses
CM 7.3	Sources of epidemiological data
CM 7.4	Morbidity and mortality indicators
CM 7.5	Epidemiological study designs
CM 7.6	Screening
CM 7.8	Principles of association, causation and biases in epidemiological studies
CM 7.9	Application of computers in epidemiology
	Basic statistics and its applications
CM6.1	Concepts of research problem ,Research question , research hypothesis for a study
CM6.2 SGT	Methods of collection, classification, analysis, interpretation and presentation of statistical data
CM6.3	Application of elementary statistical methods including test of significance in various study designs
CM6.4	Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion

Competency Nos.	Topics & Subtopics
	Epidemiology of non- communicable diseases
CM8.2	Epidemiological and control measures including the use of essential laboratory tests at the primary care level for Non Communicable diseases (diabetes, Hypertension, Stroke, obesity and cancer etc.)
CM8.3	National Health Programs
CM8.5	Principles of planning, implementing and evaluating control measures for disease at community level bearing in mind the public health importance of the disease
CM8.6	Education and training of health workers in disease surveillance, control & treatment and health education
CM8.7	Principles of management of information systems
	Demography and vital statistics
CM9.1	Principles of Demography, Demographic cycle, Vital statistics
CM9.2	Demographic indices including birth rate, death rate, fertility rates
CM9.3	Causes of declining sex ratio and its social and health implications
CM9.4	Causes and consequences of population explosion and population dynamics of India.
CM9.5	Methods of population control
CM9.6	National Population Policy
CM9.7	Sources of vital statistics including census, SRS, NFHS, NSSO etc
	Reproductive maternal and child health
CM10.1	Current status of Reproductive, maternal, newborn and Child Health
CM10.2	Methods of screening high risk groups and common health problems
	Population Genetics: Screening and counselling for genetic conditions
CM10.3	Local customs and practices during pregnancy, childbirth, lactation and child feeding practices
CM10.4	Reproductive, maternal, newborn & child health (RMCH); child survival and safe motherhood interventions

Competency Nos.	Topics & Subtopics
CM10.5	Universal Immunization Program; Integrated Management of Neonatal and Childhood Illness (IMNCI) and other existing Programs.
CM10.6	Family planning methods, their advantages and shortcomings
CM10.7	Basis and principles of the Family Welfare Program including the organization, technical and operational aspects
CM10.8	Physiology, clinical management and principles of adolescent health including ARSH
CM10.9	Gender issues and women empowerment
	Occupational Health
CM11.1	Occupational illnesses including diseases in agricultural workers.
CM11.2	Role, benefits and functioning of the employees state insurance scheme
CM11.3	Specific occupational health hazards, their risk factors and preventive measures Prevention & control of occupational diseases : Medical, Engineering and other legislative measures
CM11.4	Principles of ergonomics in health preservation
CM11.5	Occupational disorders of health professionals and their prevention & management and interpretation and interpretation
	Geriatric services
CM12.1	Concept of Geriatric services
CM12.2	Health problems of aged population
CM12.3	Prevention of health problems of aged population
CM12.4	Describe National program for elderly
	Mental Health
CM15.1	Concept of mental Health
CM15.1	Warning signals of mental health disorder
CM15.1	National Mental Health program
	Health planning and management
CM16.1	Concept of Health planning
CM16.2	Planning cycle
CM16.3	Health management techniques
CM16.4	Health planning in India and National policies related to health and health planning

Competency Nos.	Topics & Subtopics
	International Health
CM18.1	Concept of International health
CM18.2	Roles of various international health agencies
	Recent advances in Community Medicine
CM20.1	Important public health events of last five years
CM20.2	Various issues during outbreaks and their prevention
CM20.3	Describe any event important to Health of the Community
CM20.4	Laws pertaining to practice of medicine such as Clinical establishment Act and Human Organ Transplantation Act and its implications

Third Professional Part I - Community Medicine: List of Practicals / DOAP/ SDL Activities

Competency no.	Practicals / DOAP / SDL Activities
CM 7.4	Exercises on calculation of morbidity and mortality indicators based on given set of data and their interpretation
CM6.1	Demonstration and exercises on Formulation of a research problem , research question & research hypothesis for a study
CM 7.5	Exercise on developing appropriate epidemiological study design and method for a given public health problem.
CM 7.9	Demonstration and hands on training of application of computers in epidemiology. Demonstration and hands on exercises of application of MS- Excel , Epi Info etc.
CM6.2	Demonstration and exercises on the methods of data collection, classification, analysis, interpretation and presentation of statistical data
CM6.3	Demonstration and exercises on the application of elementary statistical methods including test of significance in various study designs and interpretation of statistical tests.
CM6.4	Demonstration and exercises on Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion
CM9.2	Calculation and interpretation of demographic indices including birth rate, death rate, fertility rates
CM9.2 SDL	A small scale survey of local customs and practices during pregnancy, childbirth, lactation and child feeding practices
CM 11.3	Visit to Industry- Assessment of occupational environment and preventive measures Exercise on occupational history taking
CM20.3 SDL	Describe any event important to Health of the Community

Third Professional Part I - Proposed Activities in Second Clinical Community Medicine Posting (6 weeks)

Duration(weeks)	Proposed Activities
<u>Two weeks</u> (Posting in Urban Health Centre / ANC/ FW clinic/ Obstetric wards)	<u>Preventive and Community Obstetrics (including Family Welfare)</u> <ol style="list-style-type: none"> Clinico social assessment of antenatal , postnatal cases Assessment of high risk mothers Neonatal assessment Assessment of eligible couples for family welfare services and health education Organization of community based maternal health services and health educational activity for mothers.
<u>Two weeks</u> (Posting in Urban Health Centre / Under five clinic / Immunization clinic / Paediatric wards)	<u>Preventive and Community Paediatrics , Adolescent Health Care</u> <ol style="list-style-type: none"> Health and Nutritional assessment of underfive child Clinico social case reviews of Nutritional Deficiency Diseases in children and childhood malnutrition Clinico social case reviews of common childhood infections such as ARI , fever with rash , acute GE , malarial fever etc Childhood immunization , organization of immunization session , assessment of cold chain etc School health examination , assessment of school environment , organization of health educational activity for school children
<u>Two weeks</u> (Posting in Urban Health Centre / Medicine wards)	<u>Non communicable diseases and Preventive Geriatrics</u> Clinico social case reviews of chronic non communicable diseases such as hypertension , diabetes mellitus , CHD , Stroke , COPD, Cancer , psychiatric disorders , geriatric health problems , occupational diseases etc.

Note:

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- The observer / facilitator / teacher will provide the written brief feedback in the log book for the learner related to the competencies.**

Paper wise distribution of topics for Prelim & MUHS Annual Examination
Year: III-I MBBS Subject: Community Medicine

Paper	Section	Topics
I	A	MCQs on all topics of the paper I
		Concept of health and disease
		Epidemiology
		Screening for disease
		Communicable diseases & related NHP
		Emerging & Remerging diseases
		Sociology
		Environmental health
		Occupational Health
		Hospital waste management
		Biostatistics & Vital statistics
		AETCOM Module no. 3.1 & 3.3
II	A	MCQs on all topics of the paper II
		Demography & FP & NHP
		MCH, Geriatrics & related NHP
		Nutrition & related NHP
		Mental Health
		Health education & Communication
		Health planning & Management
		Health care delivery system
		Non communicable Diseases & related NHP
		International health
		Disaster Management

Internal Assessment
Subject: Community Medicine

Applicable w.e.f March 2020 onwards examination for batches admitted from June 2019 onwards

Phase	I-Exam (At the end of second term- March)		
	Theory	Practical (Including 10 Marks for Journal- Nutrition & Log Book)	Total Marks
First MBBS	50	50	100

Phase	I-Exam (At the end of first term)			II-Exam (At the end of second term)		
	Theory	Practical (Including 10 Marks for Journal & Log Book)	Total Marks	Theory	Practical Including 10 Marks for Journal & Log Book	Total Marks
Second MBBS	50	50	100	50	50	100

Phase	I-Exam (at the end of first term)			II-Exam Preliminary examination		
	Theory	Practical (Including 10 Marks for Journal & Log Book)	Total Marks	Theory	Practical Including 10 Marks for Journal & Log Book	Total Marks
III MBBS	50	50	100	200	100	300

1. There will be 5 internal assessment examinations in Community Medicine. The structure of the internal assessment theory examinations should be similar to the structure of University examination.
2. It is mandatory for the students to appear for all the internal assessment Examinations in the respective phases. A student who has not taken minimum required number of tests for Internal Assessment each in theory and practical will not be eligible for University examinations.
3. There will be only one additional examination for absent students (due to genuine reason) after approval by the Institutional Grievances Committee. It should be taken after preliminary examination and before submission of internal assessment marks to the University.
4. Internal assessment marks for theory and practical will be converted to out of 40. Internal assessment marks, after conversion, should be submitted to university within the stipulated time as per directives from the University.

5. Conversion Formula for calculation of marks in internal assessment examinations

	First IA I Phase	Second IA II Phase	Third IA II Phase Part -I	Fourth IA III Phase Part -I	(Prelim) III Phase Part -I	Total	Internal assessment marks: Conversion formula (out of 40)	Eligibility to appear for final University examination (after conversion out of 40) (40% separately in Theory & Practical, 50% Combined)	
Theory					0	0	$\frac{\text{Total marks obtained}}{10}$	16 (Minimum)	Total of Theory + Practical Must be 40.
Practical					0	0	$\frac{\text{Total marks obtained}}{7.5}$	16 (Minimum)	

6. While preparing Final Marks of Internal Assessment, the rounding-off marks shall done as illustrated in following table

Internal Assessment Marks	Final rounded marks
15.01 to 15.49	15
15.50 to 15.99	16

7. Students must secure at least 50% marks of the total marks (combined in theory and practical / clinical; not less than 40 % marks in theory and practical Separately) assigned for internal assessment in order to be eligible for appearing at the final University examination of that subject. Internal assessment marks Will reflect as separate head of passing at the summative examination.
8. Internal assessment marks will not to be added to marks of the University examinations and will be shown separately in mark list.

Subject :Community Medicine Practical – 4 th Internal assessment										
Seat No.	Spotters marks	Log book	Clinicoepidemiological case	Viva Voce	Practical Total					
	Max. Marks	10 marks	(10-marks)	20 marks	10 marks	50 marks				

Method of Clinico epidemiological Case evaluation

Sr.no.	Head	Marks allotted
01	Identifying and socio demographic information (with house landmark, facilities for health care)	05
02	Present and past illness history (with risk factors , exposures) Environmental , behavioural and family information	05
03	Demonstration of relevant clinical signs/skills	05
05	Management plan and relevant control measures at individual, family and community level	05
	Total	20

III-I MBBS Practical Mark's Structure (Prelim exam)

Applicable w.e.f October 2021 onwards examination for batches admitted from June 2019 onwards

Subject: Community Medicine						
Practical					Oral/Viva	Total
Seat No.	Spotters	Statistical Ex	Clinicoepidemiological case	Skill assessment (10 skills) *	Viva/ voce	Practical & Oral
Max. Marks	20	20	20	20	20	100

- As per MCI competency based document

Method of Clinico epidemiological Case evaluation

Sr.no.	Head	Marks allotted
	Identifying and socio demographic information (with house landmark, facilities for health care)	05
	Present and past illness history (with risk factors , exposures) Environmental , behavioural and family information	05
	Demonstration of relevant clinical signs/skills	05
	Management plan and relevant control measures at individual, family and community level	05
	Total	20

III-I MBBS Practical Mark's Structure (University exam)

Applicable w.e.f October 2022 onwards examination for batches admitted from June 2019 onwards

Subject: Community Medicine						
Practical					Oral/Viva	Total
Seat No.	Spotters	Statistical Ex	Clinicoepidemiological case	Skill assessment (10 skills) *	Viva/ voce	Practical & Oral
Max. Marks	20	20	20	20	20	100

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK
FORMAT / SKELETON OF QUESTION PAPER-1

1. Course and Year : III-I- MBBS <i>(applicable w.e.f. October 2022 & onwards examinations)</i>	2. Subject Code :
3. Subject (PSP) : Community Medicine (TT) :	
4. Paper : I	5. Total Marks : 100
6. Total Time : 3 Hrs.	7. Remu. (Rs) : Rs. 300/-
	8. Remu. (Rs) : Rs. 350/-
9. Web Pattern : []	10. Web Skeleton : []
11. Web Syllabus : []	12. Web Old QP : []

Instructions:

SECTION "A" MCQ

- 1) Put in the appropriate box below the question number once only.
- 2) Use blue ball point pen only.
- 3) Each question carries **One mark**.
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.

SECTION "A" MCQ (20 Marks)

- | | |
|--------------------------------------------------------------|--------------|
| 1. Multiple Choice Questions (Total 20 MCQ of One mark each) | (20 x1 = 20) |
| a) b) c) d) e) f) g) h) i) j) | |
| k) l) m) n) o) p) q) r) s) t) | |

SECTION "B"

Instructions:

- 1) Use **blue/black** ball point pen only.
- 2) **Do not** write anything on the **blank portion of the question paper**. If written anything, such type of act will be considered as an attempt to resort to unfair means.
- 3) **All** questions are **compulsory**.
- 4) The number to the **right** indicates **full** marks.
- 5) Draw diagrams **wherever** necessary.
- 6) *Distribution of syllabus in Question Paper is only meant to cover entire syllabus within the stipulated frame. The Question paper pattern is a mere guideline. Questions can be asked from any paper's syllabus into any question paper. Students cannot claim that the Question is out of syllabus. As It is only for the placement sake, the distribution has been done.*
- 7) Use a common answerbook for all sections.

SECTION "B"

- | | | |
|-------------------------------------|------------------------------------------------|-----------|
| 2. Short Answer Questions | (One Question AETCOM(3.1 and 3.3)(compulsory) | (7x1=07) |
| a) | | |
| 3. Short Answer Questions | (Answer Any 3 out of 4) | (7x3=21) |
| a) b) c) d) | | |
| 4. Structured Long Answer Questions | (Compulsory) | (12x1=12) |
| a) | | |
| 5. Short Answer Questions | (Answer Any 4 out of 5) | (7x4=28) |
| a) b) c) d) e) | | |
| 6. Structured Long Answer Questions | (Compulsory) | (12x1=12) |
| a) | | |

MAHARASHTRA UNIVERSITY OF HEALTH SCIENCES, NASHIK FORMAT / SKELETON OF QUESTION PAPER-2

1. Course and Year : III-I- MBBS <i>(applicable w.e.f. October 2022& onwards examinations)</i>	2. Subject Code :
3. Subject (PSP) : Community Medicine (TT) :	
4. Paper : II	5. Total Marks : 100
6. Total Time : 3 Hrs.	7. Remu. (Rs) : Rs. 300/-
	8. Remu. (Rs) : Rs. 350/-
9. Web Pattern : []	10. Web Skeleton : []
11. Web Syllabus : []	12. Web Old QP : []

Instructions:

SECTION "A" MCQ

- 1) in the appropriate box below the question number once only.
- 2) Use blue ball point pen only.
- 3) Each question carries **One mark**.
- 4) Students will not be allotted mark if he/she overwrites strikes or put white ink on the cross once marked.

SECTION "A" MCQ (20 Marks)

- | | |
|--------------------------------------------------------------|--------------|
| 1. Multiple Choice Questions (Total 20 MCQ of One mark each) | (20 x1 = 20) |
| a) b) c) d) e) f) g) h) i) j) | |
| k) l) m) n) o) p) q) r) s) t) | |

Instructions:

SECTION "B"

- 1) Use **blue/black** ball point pen only.
- 2) **Do not** write anything on the **blank portion of the question paper**. If written anything, such type of act will be considered as an attempt to resort to unfair means.
- 3) **All** questions are **compulsory**.
- 4) The number to the **right** indicates **full** marks.
- 5) Draw diagrams **wherever** necessary.
- 6) Distribution of syllabus in Question Paper is only meant to cover entire syllabus within the stipulated frame. The Question paper pattern is a mere guideline. Questions can be asked from any paper's syllabus into any question paper. Students cannot claim that the Question is out of syllabus. As It is only for the placement sake, the distribution has been done.
- 7) Use a common answerbook for all sections.

SECTION "B"

- | | | |
|---------------------------------------------------|-------------------------|-----------|
| 2. Short Answer Questions | (Answer Any 4 out of 5) | (7x4=28) |
| a) b) c) d) e) | | |
| 3. Structured Long Answer Questions | (Compulsory) | (12x1=12) |
| a) | | |
| 4. Short Answer Questions (Answer Any 4 out of 5) | | (7x4=28) |
| a) b) c) d) e) | | |
| 5. Structured Long Answer Questions | (Compulsory) | (12x1=12) |
| a) | | |

BOOKS RECOMMENDED.

1. Text book of Community Medicine, Kulkarni A.P. and Baride J.P.
2. Park "s Textbook of Preventive and Social Medicine,
3. Principles of Preventive and Social Medicine, K. Mahajan
4. Textbook of Community Medicine, B. Shridhar Rao.
5. Essentials of Community Medicine, Suresh Chandra.
6. Textbook of Biostatistics, B. K. Mahajan
7. Review in Community Medicine, V.R. Sheshu Babu.
8. Reference Book for Community Medicine: "Principles and practice of Biostatistics", Author: Dr. J.V. Dixit

FURTHER READINGS.

Epidemiology and Management for health care for all P.V. Sathe and A.P. Sathe. Essentials of Preventive Medicine O.P. Ghai and Piyush Gupta.

Maharashtra University of Health Sciences Nashik



COMMUNITY MEDICINE LOGBOOK

For

1st, 2nd & 3rd PROFESSIONAL

MBBS STUDENTS AS PER

COMPETENCY BASED CURRICULUM

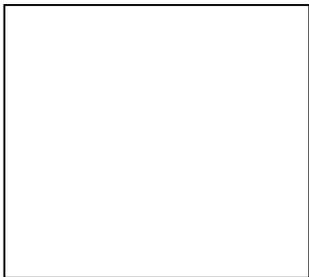
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Logo of college

Name of the College:.....

Personal details:		
		Paste recent self attested photo here
Name of the student:		
Date of admission to MBBS Course:		
College Roll No:		
Permanent Address:		
E mail ID:		
Mobile Number:		
Self:		
Parent:		

Preface

The Medical Council of India has revised the undergraduate medical education curriculum so that the Indian Medical Graduate (IMG) is able to recognize “**Health for all**” as a national goal. He/she should also be able to fulfil his/her societal obligations. The revised curriculum has specified the competencies that a student must attain and clearly defined teaching learning strategies for the same. With this goal in mind, integrated teaching, skill development, AETCOM and self-directed learning have been introduced. There would be emphasis on communication skills, basic clinical skills and professionalism. There is a paradigm shift from the traditional didactic classroom-based teaching to learning environments where there is emphasis on learning by exploring, questioning, applying, discussing, analysing, reflecting, collaborating and doing. The recognition of this need is enshrined by a greatly enhanced allocation of time to these methods and also the assessment techniques. With this view in mind the log book has been designed as per the guidelines of competency Based curriculum.

Instructions

- 1) This logbook is prepared as per the guidelines of MCI for implementation of Competency based curriculum for 1st, 2nd & 3rd Professional MBBS students in the subject of Community Medicine.
- 2) Students are instructed to keep their logbook entries up to date.
- 3) Students are expected to write their reflections on all activities of Self-Directed Learning (SDL) and Visits.
- 4) Students also have to write reflections on AETCOM Module **3.1 and 3.3**
- 5) Reflections should be structured using the following guiding questions:
 - What happened? (What did you learn from this experience)
 - So what? (What are the applications of this learning)
 - What next? (What knowledge or skills do you need to develop so that you can handle this type of situation?)
- 6) The logbook assessment will be based on multiple factors like
 - Attendance
 - Active participation in the sessions,
 - Timely completions
 - Quality of write up of reflections
 - Overall presentation

INDEX

Sr. No	Description	Page No.	Status	Signature of Teacher
			Complete/ Incomplete	
1.	1st Professional			
	a. Competencies			
	b. Self-Directed Learning (Seminars, Projects, Quizzes)			
	c. Certificate			
2.	2nd Professional			
a.	Term I: a. Competencies b. Self-Directed Learning c. Clinical posting - Cases d. Visit e. Certificate			
b.	Term II: a. Competencies b. Self-Directed Learning c. Clinical posting - Cases d. Visit e. Certificate			
3.	3rd Professional			
	a. Competency b. Self-Directed Learning c. Clinical posting - Cases d. Visit e. Certificate			
4.	AETCOM module 3.1 and 3.3			
5.	Attendance Record			
6.	Final certificate			
7.	Records of Internal Assessment			

- AETCOM – Competencies for IMG, 2018, Medical Council of India.

FIRST PROFESSIONAL

List of Competencies

Competency No	COMPETENCY - The student should be able to
CM1.9	Demonstrate the role of effective Communication skills in health in a simulated environment
CM 1.10	Demonstrate the important aspects of the doctor patient relationship in a simulated environment
CM4.3	Demonstrate and describe the steps in evaluation of health promotion and education program
CM5.2	Describe and demonstrate the correct method of performing a nutritional assessment of individuals, families and the community by using the appropriate method
CM5.4	Plan and recommend a suitable diet for the individuals and families based on local availability of foods and economic status, etc in a simulated environment
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

College Name:

CERTIFICATE

This is to certify that,

Mr/Ms. _____

Roll No. _____ has satisfactorily attended/completed all assignments mentioned in this logbook as per the guidelines prescribed by Medical Council of India, for First Professional MBBS Competency Based Curriculum in the subject of Community Medicine.

Teacher- Incharge

**Professor and Head
Department of Community Medicine**

Date: _____/_____/_____

Place: _____

SECOND PROFESSIONAL

TERM- I



List of Competencies

Competency No	COMPETENCY The student should be able to
CM2.1	Describe the steps and perform clinico-socio-cultural and demographic assessment of the individual, family and community
CM2.2	Describe the socio-cultural factors, family (types), its role in health and disease & demonstrate in a simulated environment the correct assessment of socio-economic status
CM2.3	Describe and demonstrate in a simulated environment the assessment of barriers to good health and health seeking behavior

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

CLINICAL POSTING:
from.....to.....

S.NO.	DATE	FAMILY VISIT/ CLINICAL DIAGNOSIS	TEACHER'S SIGN

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

VISIT:

COMPETENCY No.	VISIT	DATE	TEACHER'S SIGN.
3.2	Visit to water purification plant		
	Visit to Dist Public Health Laboratory		
	Exercise on interpretation of water analysis report		
3.4	Visit to sewage purification plant		

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

College name:

CERTIFICATE

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Mr /Ms. _____

Roll No. _____ has satisfactorily attended/completed all assignments mentioned in this logbook as per the guidelines prescribed by Medical Council of India, for Second Professional first term Competency Based Curriculum in the subject of Community Medicine.

Teacher- Incharge

**Professor and Head
Department of Community Medicine**

Date: ____/____/____

Place: _____

SECOND PROFESSIONAL

TERM- II



List of competencies

Competency No	COMPETENCY The student should be able to
CM3.7	Identify and describe the identifying features and life cycles of vectors of Public Health importance and their control measures
CM8.6	Educate and train health workers in disease surveillance, control & treatment and health education

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Self-directed learning Experience

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

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Reflections

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Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

VISIT:

COMPETENCY No.	VISIT	DATE	TEACHER'S SIGN.
3.6	Visit to office of Dist Vector borne Diseases Control Program		
8.1	Visits to the Dist Offices/ Units/ clinics related to implementation of Disease Control Measures of Communicable Diseases		
8.1	Visit to Public Health Microbiology / Reference laboratories		
8.6	Visit to Dist Training Centre / Dist Disease Surveillance Unit		
13.4	Visit to Civil Defence Dept / Dist Disaster Management Office		
19.2	Visit to hospital pharmacy		

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

College Name:

CERTIFICATE

This is to certify that,

Mr/Ms. _____

RollNo. _____ has satisfactorily attended/completed all assignments mentioned in this logbook as per the guidelines prescribed by Medical Council of India, for Second Professional second term Competency Based Curriculum in the subject of Community Medicine.

Teacher- Incharge

**Professor and Head
Department of Community Medicine**

Date: ____/____/____

Place: _____

THIRD PROFESSIONAL



List of competencies

Competency No	COMPETENCY The student should be able to
CM6.2	Describe and discuss the principles and demonstrate the methods of collection, classification, analysis, interpretation and presentation of statistical data
CM6.3	Describe, discuss and demonstrate the application of elementary statistical methods including test of significance in various study designs
CM6.4	Enumerate, discuss and demonstrate Common sampling techniques, simple statistical methods, frequency distribution, measures of central tendency and dispersion
CM7.4	Define, calculate and interpret morbidity and mortality indicators based on given set of data
CM7.6	Enumerate and evaluate the need of screening tests
CM7.7	Describe and demonstrate the steps in the Investigation of an epidemic of communicable disease and describe the principles of control measures
CM9.2	Define, calculate and interpret demographic indices including birth rate, death rate, fertility rates

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

Topic:

Date:

Signature of Teacher-in- charge

Reflection on Competencies

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Reflections

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Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

Reflections

Topic:

Date:

Signature of Teacher-in- charge

VISIT:

COMPETENCY No.	VISIT	DATE	TEACHER'S SIGN.
CM 9.2	A small scale survey of local customs and practices during pregnancy, childbirth, lactation and child feeding practices		
CM 11.3	Visit to Industry- Assessment of occupational environment and preventive measures Exercise on occupational history taking		
CM 8.1	Visit to Public Health Microbiology / Reference laboratories		
CM 8.6	Visit to Dist Training Centre / Dist Disease Surveillance Unit		
CM 13.4	Visit to Civil Defence Dept / Dist Disaster Management Office		
CM 19.2	Visit to hospital pharmacy		

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

Reflection on visit:

Topic:

Date:

Signature of Teacher-in- charge

College Name:

CERTIFICATE

This is to certify that,

Mr/Ms. _____

Roll No. _____ has satisfactorily attended/completed all assignments mentioned in this logbook as per the guidelines prescribed by Medical Council of India, for Third Professional Competency Based Curriculum in the subject of Community Medicine.

Teacher- Incharge

**Professor and Head
Department of Community Medicine**

Date: ____ / ____ / ____

Place: _____

4. AETCOM Module

Module 3.1: Clinician who understands and provides preventive, promotive, palliative and holistic care with compassion.

List of competencies

S. No	The student should be able to
1.	Demonstrate ability to communicate to patients in a patient, respectful, nonthreatening, non-judgmental and empathetic manner

Module 3.3: Communicator with patients, family, colleagues and community.

List of competencies

S. No	The student should be able to
1.	Administer informed consent and appropriately address patient queries to a patient undergoing a surgical procedure in a simulated environment

Reflection on AETCOM MODULE

Topic:

Date:

Signature of Teacher-in- charge

Reflection on AETCOM MODULE

Topic:

Date

Signature of Teacher-in- charge

Section 5: Attendance Record of the Student

S. No	Term	Theory (%)	Clinical Posting (%)	Signature of student	Signature of Teacher
A	I Professional				
B	II Professional Term – I				
	Term- II				
C	III Professional				
D	Overall attendance				

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.

College Name:

FINAL CERTIFICATE (before prelims)

This is to certify that,

Mr/Ms. _____

Roll No. _____ has satisfactorily attended/completed all assignments mentioned in this logbook as per the guidelines prescribed by Medical Council of India, for First, Second and Third Professional MBBS Competency Based Curriculum in the subject of Community Medicine.

Teacher- In charge

**Professor and Head
Department of Community Medicine**

Date: ____ / ____ / ____ Place: _____

7. Record of Internal Assessment Examinations

Sr. No	Exam no	Theory	Practical including Viva	Signature of student	Signature of Teacher
1	I Internal Assessment	/50	/50		
2	II Internal Assessment	/50	/50		
3	III Internal Assessment	/50	/50		
4	IV Internal Assessment	/50	/50		
5	PRELIMS	/200	/100		
6	Betterment exam (If Any)	/50	/50		

Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.