

Passed by Academic Council (Resolution No. 355/2006) dtd. 30/05/2006, subject to Uniformity in the Examination pattern.

Maharashtra University of Health Sciences

Doctor of Medicine (MD) in Hospital Administration

Rules & Regulations for the Degree of MD in Hospital Administration

1. No candidate will be admitted for the Doctor of Medicine in Hospital Administration MD (HA) unless he/she

(i) has passed MBBS degree examination of this university by or by an examination of any other statutory university recognized by this university as equivalent thereto.

(ii) has completed such period of post examination predegree compulsory houseman ship or internship which entitles him in the award of the degree of MBBS as required by and to the satisfaction of this university where applicable.

(iii) has taken the said degree and

(iv) has acquired registration as a medical practitioner according to the rules in force for full registration under the Maharashtra state medical council or any other state medical council in INDIA prior to registration with this university for the said degree course.

(v) Has worked as a Medical Suprintendent, Deputy Medical Suprintendent in civil or Military hospital for one year.

(vi) A candidate admitted to the said course shall complete the prescribed course of study for a period of not less than six academic terms after registration for the course with the University of Pune under a recognized teacher.

Syllabus for MD (HA) Course

Duration – 144 weeks

Hours available – 144 X 30 = 4320 h

BLOCK SYLLABUS

<u>S.No</u>	<u>Subject</u>	<u>Hours</u>
1.	(a) Arrival and documentation	8
	(b) Introduction to library	3
2.	General Administration and management – Paper I in hospital field	144
3.	Health Administration and Medical care - Paper II (also includes Epidemiology 27 hrs, Biostatistics 33 hrs, Research Methodology 15 hrs)	160
4.	Hospital Administration & Hospital Planning - Paper III	164
5.	Administration of clinical & non-clinical services and administrative procedures. - Paper IV	168
6.	Administrative residency & case study	2448
7.	Dissertation, Seminar & Library	900
8.	Special Administrative attachments	170
9.	Visits	
	(a) Mumbai	50
	(b) Jamkhed, Ahmednagar, Sirur	20
	(c) Delhi	70
	(d) Chandigarh	15
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		4320 hrs
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PAPER – I

General Administration and Management in Hospital Field

<u>S.No</u>	<u>Subject</u>	<u>Hours</u>
1.	General Administration	
(a)	Introduction to Management	
1.	Terminology, Definitions	1
2.	History and evolution of management thoughts.	1
3.	Management: science, theory and practice.	1
4.	Management and society.	1
5.	Principles of management and their applicability in hospital field.	2
(b)	Management as a social service.	
6.	The organization as a social system	2
7.	The community and organization	2
8.	Social responsibility of managers	2
9.	Ethics in managing	2
(c)	The Management Process.	
10.	Fundamentals of planning	
	<ul style="list-style-type: none">• Types of plans.• Steps in planning.• Planning process	1
	<ul style="list-style-type: none">• Objective setting• Strategic planning	1

- Strategic planning process.
- Premising and forecasting 1
- Modern tools for analyzing situations e.g. TOWS matrix, etc. 1
- Gantt charting 1

11. Programming and decision-making.

- Rationality in decision-making. }
- Search and evaluation of alternatives. }
- Decision under certainty, uncertainty and risk. }
- Decision support systems. }
- Creativity and innovation. 1

12. Organizing

- Nature of organizing and entrepreneurship }
- Organizational structure }
- Departmentation, matrix organisation,
- Authority, responsibility, delegation and decentralization. 1


13. Controlling

- Basic control process.
- Critical control points and standards.
- Stages of control.
- Relationship of planning and controlling.
- Global challenges in controlling.


14. Co-ordination

- Need for coordination.
- Types of coordination.
- Approaches to coordination.
- Features of coordination.

15. Communication

- Types of communication.
 - Elements of communication.
 - Communication process.
 - Communication barriers.
 - Improving communication in hospitals.
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(d) The Role of the Executive

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| 16. | Management functions and tools. | 1 |
| 17. | Management levels and skills. | 1 |
| 18. | Styles of management | 1 |
| 19. | Participative management | |
| 20. | Management by exception | 1 |
| 21. | Management by objectives | 1 |
| 22. | Systems approach to management. | 1 |
| 23. | Challenges to manager in the hospital field. | 1 |
| 24. | Strategic business units (SBUs) | 1 |
| 25. | Committees | 1 |
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(e) Principles of Human Resource Development (HRD)

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| 26. | The concept of Human Resource Development | |
| | • Manpower planning. | 1 |
| | • Recruitment and selection. | 1 |
| | • Training and development. | 1 |
| | • Performance appraisal. | 1 |
| 27. | The functions of HR manager. | 1 |
| 28. | Locating problem situations | 1 |
| 29. | Identifying leadership potential | 1 |
| 30. | Personnel value in administrative decisions | 1 |

31.	Relationship of management and employee organizations	1
32.	Considering the right of employees	1
33.	Collective bargaining and trade unions	2
34.	Grievance redressal	1
35.	Absenteeism	
(f)	Organizational Behavior and Administrative Styles	
36.	Basics of sociology, anthropology and psychology	1
37.	Introduction to organizational behavior	
	• Need and demands	1
	• Motives and Behavior	
	• Attitude	1
	• Acquired and learned drives	
	• Personality	
	• Perception	1
38.	Motivation	
	• Types of Motives	
	• Need hierarchy	1
	• Theories of motivation	2
39.	Group dynamics	
	• Defining and classifying groups.	2
	• Group structure and process.	
	• Group decision-making.	
	• Team building	2
40.	Leadership	
	• Leadership and management.	1
	• Theories of leadership.	2

41.	Conflict	
	• Conflict process.	1
	• Conflict resolution.	1
	• Negotiation.	1
	• Conflict in hospitals	1
42.	Organizational change and stress management	
	• Forces for change.	1
	• Planned and unplanned change.	1
	• Change agents.	2
	• Resistance to change.	2
	• Managing resistance to change.	2
	• Work stress and management of stress.	1
43.	Organizational culture and organizational development	
	• Matching people with culture.	1
	• Learning organizations	1
	• Transactional analysis	2
	• Organizational commitment	2

2. Management in Hospitals

(a)	44.	Hospital as an organization: Matrix organization	
		Systems concept	2
(b)		Problems of HRD in Hospitals	2
	45.	Manpower planning	1
	46.	Number of categories of staff	1
	47.	Job analysis and job specifications, salaries and perquisites	1
	48.	Selection, recruitment and employment	1
	49.	Training of middle level managers	2
	50.	Development of staff	2

51.	Supervisory and Executive Development programme	
52.	Welfare and morale	1
53.	Creative problem solving	1
54.	Issues in management of professionals in hospitals – Doctors, Nurses, Technical staff	1
55.	Staff Evaluation and merit rating.	1
56.	Reward system and incentives	
	• Performance linked reward system.	1
	• Incentives for blue and white collars.	1
	• Bonus and profit sharing.	1
	• Allowances and benefits.	1
	• Down sizing and voluntary retirement schemes (VRS)	1

(c) Material Management in Hospitals

57.	Introduction to principles of material management	1
58.	Inventory management	
	• Classification of Inventory	2
	• Basic Inventory model	2
	• Inventory costs.	
59.	Inventory control	
	• Selective inventory control techniques	2
	ABC analysis, VED, SDE, FSN, HML, XYZ, MUSIC-3D	
	• Economic order quantity (EOQ)	2
	• Ordering system	2
	• Lead-time, safety stock	2
	• Standardization and codification	1
	• Value analysis.	2
	• Value engineering.	2
	• Just in time inventory (JIT)	1

60.	Purchase system	
	• Materials planning.	1
	• Tendering System of purchase-supply, storage, distribution and accounting in Hospitals pertaining to Medical Stores, Surgical stores, Linen stores, General stores.	1
	• Conditioning and disposal of stores.	1
	• Role of automation in stores management.	1
	• Vendor rating	1

(d) Financial Management in hospitals

61.	General economics-per capita and National income and the effect of general economic situation on hospitals, their utilization and functioning.	1
62.	Union budgetary system.	1
63.	Basis of financial management.	2
64.	Elements of cost.	2
65.	Costing and cost accounting.	2
66.	Depreciation.	2
67.	Costing of health services.	1
68.	Hospital budget-planning, forecast, sub-allotment and and utilization.	1
69.	Accounting Records	1
70.	Internal Control and audit.	1
71.	Cost effective analysis.	2
72.	Cost benefit analysis	2
73.	Break-even analysis.	2
74.	Discounted cash flow techniques.	1
75.	Cost containment in hospitals.	1

(e) Modern management techniques

76.	PERT	2
77.	CPM	2
78.	Work Study and method study	4
79.	Operation Research	
	• OR methodology.	1
	• Linear programming.	1
	• Transportation model.	1
	• Assignment model.	2
	• Dynamic programming	2
	• Queuing theory.	1
	• Network models.	1
	• Decision tree.etc	1
80.	Office Procedures	2
81.	Medical Informatics and Computer Applications	2
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PAPER – II

Health Administration and Medical Care

<u>S.No</u>	<u>Subject</u>	<u>Hours</u>
1.	Health Administration	
(a)	Development of Health services	
82.	General introduction to organization of Health services in India Central, State, Defence, Railway and other public sector undertakings and Voluntary health agencies.	6
(b)	Review of Reports on Health Care	
83.	<ul style="list-style-type: none">• Bhore Committee	2
	<ul style="list-style-type: none">• Mudaliar Committee	2
	<ul style="list-style-type: none">• Jain Committee, Chadha Committee	1
	<ul style="list-style-type: none">• Kartar Singh Committee, Srivastava Committee report	1
	<ul style="list-style-type: none">• Committee on planned projects (COPP)	2
	<ul style="list-style-type: none">• Bajaj committee, Rao committee.	1
(c)	84. Five year plans with special reference to Health Plans	4
(d)	National Health Programmes	
85.	Cancer screening and National Cancer Control Programme	2
86.	National AIDS control Programme and NACO	2
87.	National leprosy control programme.	2

88.	Universal Immunization programme.	1
89.	National anti malaria programme.	2
90.	Revised National Tuberculosis control programme. (RNTCP)	2
91.	Reproductive and child health (RCH)	2
(e)	National policies relating to health.	
92.	National health policy.	2
93.	National population policy.	2
94.	National blood policy.	2
(f)	Health Economics	2
(e)	Epidemiology	
95.	Evolution and uses of epidemiology	4
96.	Definitions and terminology	4
97.	Natural history of disease and role of hospital in various levels of Prevention	4
98.	Types of epidemiology	4
99.	Methods of epidemiological studies	4
100.	Socio-economic status and occupation as determinant in disease distribution.	4
101.	Cause and effect relationship	1
102.	Epidemiology of hospital infection	2
103.	Epidemiology of	
	• Non-Communicable diseases	1
	• Trauma and RTA	1
	• Diabetes.	1
	• Coronary Artery Disease (CAD)	1
104.	How to investigate an epidemic and role of the hospital in its control	2

105.	Common diseases in India-their epidemiology and prevention	4
106.	Screening and surveys	4
107.	Concept of health Indicators	
	• Disability adjusted life years (DALY's)	6
	• Quality adjusted life years (QALY's)	6
	• Disability adjusted life expectancy (DALE)	6
	• Physical quality of life Index (PQLI) etc.	6

(f) Biostatistics

108.	Basic concepts – Introduction, Definitions	4
109.	Basics of Medical Research	4
110.	Presentation of data	4
111.	Frequency distribution	4
112.	Measurements of central tendency Mean, Median, Mode	6
113.	Measures of disease frequency	6
114.	Measurements of dispersion-mean and standard deviation	6
115.	Sampling methods and errors in sampling.	2
116.	Normal curve and Poisson distribution.	1
117.	Testing of hypothesis	2
118.	Test of significance-Normal test, “t” test and chi-square test	4

(h) Health Statistics and health information system in India

119.	Methods of registration-fallacies/ difficulties and Sample registration schemes	2
120.	Common rates and ratios in India	4
121.	Incidence and Prevalence rate	4
122.	Morbidity Statistics-problems of measurements, sources of morbidity and morbidity surveys	2
123.	Health reports	4

	124.	I.C.D 10.	4
	125.	Notifiable diseases	4
	126.	Health Information system in India	2
3.		Medical Care	
(a)	127.	Need and demand for Medical Care	4
(b)	128.	Availability and cost of medical care	4
(c)	129.	Health care delivery system in India – Primary/ secondary/tertiary care.	2
	130.	Rural Medical Care	2
	131.	Urban Medical Care-Medical care system in Metropolitan cities with particular reference to Pune	2
	132.	Study of the Administration of Health Insurance Schemes like C.G.H.S, and E.S.I. and Social Security Measures.	4
(e)		Medical Care system in other countries	
	133.	U.S.A.	4
	134.	U.K	4
	135.	Cuba, African countries and other developing countries	4
(f)	136.	Quality of Medical Care	
		• Quality concepts.	6
		• ISO Standards	6
		• Quality circles.	6
		• Quality control.	6
		• Total quality management in hospitals.	2
		• Value added Management (VAM)	2
		• Six-sigma concept	1
(g)	137.	Progressive patient care	2
(h)	138.	Medical Audit & Evaluation of health care	2

(j)	139.	Indigenous systems of medical care	2
(k)	140.	Comprehensive rural Health Projects (CRHP)	2
(l)	141.	Regionalisation – organization and functioning	2
(m)	142.	Rehabilitation	
		IEC and community participation.	
		Health education.	4
(n)	143.	International organizations related to Health Services and International health regulations.	2

4. **Research Methodology**

144.	Introduction	2
145.	Social Survey-its role and development in India	2
146.	Planning a research project and selecting a research problem	2
147.	Research protocol writing	1
148.	Bibliographical data	2
149.	Questionnaires, Interview and observations	2
150.	Case study	4
151.	The experimental technique	4
152.	Measurement and analysis of data	4
153.	Reporting and write-up	2
154.	Research in social sciences	2
155.	Errors of measurement.	2

PAPER – III

Hospital Administration & Hospital Planning

<u>S.No</u>	<u>Subject</u>	<u>Hours</u>
1.	Hospital Administration	
(a)	Introduction to the hospitals	
156.	Definitions-hospitals and medical care institutions	2
157.	History and development of Hospitals	2
158.	Types of hospitals	2
159.	Functions-Medical Care, Prevention, professional Education, and Research	2
160.	Role of hospital in Health Spectrum	2
(c)	Hospital of India today	
161.	Number; Type; Size; Distribution; Ownership; Utilization; Ratios; Trends; problems	2
(d)	Hospital Administration	
162.	Principles of administration Responsibilities Functions	2
(e)	Hospital Organisation	
163.	The Governing organisation	2
164.	The Administrator	2
165.	Clinical aspects of the hospital	2
166.	Hospital as a matrix organisation	2
167.	Channels of authority and Communication	1
(f)	The Hospital Administrator	

	168.	Qualifications, Responsibilities, Authority, Relationship, Motivation, Role, Functions.	2
	169.	Challenges of Hospital Administration	2
	170.	Nursing administration	
		• Nursing organisation structure.	2
		• Nurse doctor relation.	2
		• Nurse patient relation.	2
		• Staffing norms in various departments and hospitals.	1
		• Nursing problems in hospital.	2
		• Recent trends in nursing profession and nursing practices	1
(g)		Specialized Hospitals	
	171.	Cancer hospital	1
	172.	AYUSH hospital	1
		(Ayurveda & Yoga, Unani, Siddha and Homeopathy hospitals)	
	173.	Psychiatric hospital	1
	174.	Children's hospital	1
	175.	Maternity hospital	1
(h)	176.	Case Method Study of Hospital Problems	2
(k)	177.	Public relations in hospital	2
(m)	178.	Health education in hospital-responsibilities of the hospital to the general public, Methods of Health Education in Hospital and their importance	2
(o)	179.	Hospital Hazards and Fire safety.	2
	180.	Hospital security.	2
	181.	Health Care Facility Management	2

	182.	Risk management	
		• Ergonomics and application in hospitals.	2
		• Occupational hazards.	2
	183.	Time management	2
(p)	184.	Disaster management	4
(q)	185.	Legal issues in Hospital administration	
		• Drug and cosmetics act.	1
		• Consumer protection act.	2
		• Law of torts.	2
		• PNDT act.	1
		• Transplantation human organs act.	2
		• Prevention of food adulteration act.	1
		• Biomedical waste management and handling rules (1998)	2
	186.	Medico-legal issues in hospital	2
	187.	Laws and regulations applicable to hospitals	
		• Labor laws.	1
		• Workman compensation act.	1
		• Minimum wages act.	1
		• Nursing home registration act.	2
		• ESI act.	1
		• Essential services maintenance act (ESMA).	2
		• Court procedure and attendance in courts	1
		• Grievance redressal and Complaint handling system	2
		• Settlement of disputes	1
		• BARC Guidelines.	2
		• Emergency Services in the hospitals – Supreme Court guidelines	1

	188.	Industrial relations and laws	
		• Industrial disputes act.	1
		• Trade unions.	1
		• Industrial relations in health services.	2
	189.	Permits and licenses in hospitals	2
	190.	Medical ethics and ethical issues in end of life decisions.	1
	191.	Accreditation of hospitals	2
	192.	Enquiries and disciplinary actions.	2
(r)	193.	Administration of a teaching hospital; Special issues	2
(s)	194.	Administration of private hospital	2
(t)	195.	Administration of a General Hospital, District Hospital, Taluka Hospital and Municipal Hospital	2
(u)	196.	Recent trends in Hospital Administration.	
		• Re-engineering.	2
		• Telemedicine.	2
		• Artificial intelligence.	1
		• Managerial issues in Nuclear, Biological and Chemical (NBC) warfare casualties.	2
		• Medical tourism.	1
		• Euthanasia.	1
		• Outsourcing etc.	1
(v)	197.	Hospital utilization and its evaluation	2
(w)	198.	Medical Insurance/TPA	1
(x)	199.	Administrative & Bio-social Researches in hospitals	1
(y)	200.	Hospital Management Information System	2
(z)	201.	Hospital statistics	2
(aa)	202.	Evaluation of hospital care and methods of evaluation	1

2. Hospital Planning

(b) Planning of the hospital

	203. Macro planning of hospitals.	2
	204. Feasibility studies.	2
	205. Hospital space module.	2
	206. Hospital engineering grid	2
(c)	Role of the Architect	
	207. In the planning stages; preliminary sketches; final plans, Working drawings; specifications, cost estimates; Construction problems and contract modifications	4
(d)	Site Surveys	
	208. Physical environment, possibility for expansion; utilities- Water, electricity, sewer lines, telephone, transportation and others.	2
(f)	Hospital Building	
	209. External architect aspects	1
	210. Internal arrangements	1
	211. External Services	1
	212. Residential accommodation	1
	213. Hospital Infection control – importance thereof	2
	214. Hospital lighting	1
	215. Ventilation	2
(f)	216. Planning of individual services and departments.	3
	217. Planning a ward/nursing unit.	2
(g)	218. Land scaping in hospitals	2
(h)	219. Project Management	3
(k)	Planning of specific hospitals	
	220. Tertiary care and Teaching Hospital	2
	221. Tertiary care Hospital	2

	222.	District Hospital	2
	223.	Rural Hospital	1
	224.	Primary Health Center	1
(l)	225	Taking over and commissioning a new hospital.	1
(m)	226.	Alteration and additions in an existing hospital	1
(n)	Planning the Hospital Engineering services		
	227.	Engineer's Office	1
	228.	Workshop of various types	1
	229.	Repair and maintenance schedule	1
(o)	Eqpt planning for a new hospital		2
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PAPER – IV

Administration of Clinical and Non Clinical Services and Administrative Procedures

<u>S.No</u>	<u>Subject</u>	<u>Hours</u>
Clinical Services		
230.	Outpatient services	2
231.	Surgical Services (Orthopedics; reconstructive, Urology, Cardiothoracic, Eye and ENT	8
232.	Operating department	8
233.	Paediatric Services	2
234.	Dental Services & Maxillo-facial Surgery	2
235.	Psychiatric Services	2

236.	Radio Imaging and Radiotherapy services	4
237.	Accident and Emergency Services	4
238.	Hospital Laboratory Services	2
239.	Obstetric and Gynecology Services	2
240.	Neuro –Surgery Services	2
241.	Neurology Services	2
242.	Paediatric-Surgery Services	2
243.	Intensive care unit	4
244.	Coronary care unit	2
245.	Dialysis Unit	2
246.	Day care units	2
247.	Bone marrow transplant unit (BMT)	3
248.	Gastro-enterology Services	2
249.	Endocrinology	2
250.	Nuclear medicine	2
251.	Lithotripsy centre	2
252.	Physiotherapy centre	2
253.	Burns, Paraplegic & Malignant Diseases Treatment Centres.	6
254.	Trauma centre	2
255.	Geriatric services	2

Non-Clinical services and Administrative procedure

256.	Enquiry & registration	2
257.	Admission office	2
258.	Transfer to other hospitals.	1
259.	Administration of service Hospitals	
	• Reports and returns	2
	• Medical Boards	4
	• Entitlement of treatment	2
	• Filing and book Keeping.	2
	• Inspection, Medical Superintendent's rounds	2
260.	Hospital Standing Orders	2
261.	Hospital Welfare Services	2

262.	Indian Red Cross society and hospitals	2
263.	Nursing services	1
264.	Ward management incl welfare and recreational facilities	2
265.	House-keeping incl Pest control	2
266.	Medical stores and Pharmacy services	4
267.	Blood bank and Transfusion-services	4
268.	Central Sterile Supply Department (CSSD)	4
269.	Dietary service	2
270.	Linen and laundry services	2
271.	Medical Records	2
272.	Hospital engineering services.	3
273.	Fire Fighting services	2
274.	Ambulance services	2
275.	Death in Hospital, brought in dead	2
276.	Fatal documents	2
277.	Mortuary	2
278.	Equipment management	
	• Strategic planning and selection of hospital equipment.	2
	• Purchase procedure.	2
	• Installing and commissioning.	2
	• Equipment utilization.	1
	• Repair and maintenance.	2
	• Calibration of medical equipment.	2
279.	Transportation in hospitals-	3
	• Intramural	
	• Extramural	
	• Staff, Patient Visitors, Vendors.	
280.	Hospital Information system (HIS)	2
281.	Hospital acquired infections.	2
282.	Structural requirement for infection control in hospitals.	2

283.	Hospital formulary.	2
284.	Essential drugs list (EDL)	2
285.	Exit interview & Discharge procedure	2
286.	Enterprise Resource Planning (ERP)	2
287.	Marketing of hospitals	
	• Concept of marketing.	2
	• Marketing strategies.	2
	• Social aspects of marketing.	2
	• Customer relationship management (CRM)	2
	• Influencing skills	2
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Administrative residency, Case study, Dissertation,

Seminar and Library work.

Hours available: Administrative residency and case study = 2448 hours

Dissertation, seminar, library = 900 hours

1. In these studies the residents will invariably be attached in rotation to the different departments/services of the affiliated hospital. The programme of didactic lectures will be so arranged that they are able to spend 18 hours per week (3 hours daily on all days) except for the first 12 weeks. They may have to spend more time outside the scheduled working hours.

2. Each resident will study the allotted department as comprehensively as possible. They will correlate the theoretical and practical aspects of the Hospital Administration and will be involved in problem identification, decision-making and implementation of concrete situations as prevalent in these departments. They will also accompany the CO/Medical Superintendent on his weekly rounds of the hospital and also attend his conferences. The residents will also be available to carry out detailed study of any emergent problem in the hospital.

3. The residents will write out three case studies of approximately 3000 words each, which will be taken up in consultation with the faculty. This will inculcate analytical thinking and problem solving approach in the residents. These case studies can be pertaining to any of the following areas:

- (a) Outpatient department including emergency services.
- (b) Medical Superintendent/ Registrar's office
- (c) Stores- General including furniture
- (d) Medical stores and pharmacy.
- (e) Dietary services
- (f) Linen and laundry services
- (g) Nursing services and ward management.
- (h) OT, ICU, specialized services
- (i) Personnel management etc.

4. These case studies will be critically evaluated by the faculty and awarded marks for internal assessment.

5. After completion of the study, each student will be asked to present his case study to the rest of the group and members of the faculty and the students will discuss the subject. Concerned officers from the affiliated hospitals will also be invited to these discussions. Such discussions will be held once a week. The presenting resident will be required to read all the relevant literature on the subject from the library.

6. Every resident will choose a topic in consultation with his guide (recognized teacher) within 3 months of his joining the course; will pursue the research methodology and write a dissertation for submission as per the requirements of the University of Pune.

Special Administrative attachments

Hours available: 170 Hours

1. The aim of this attachment is to familiarize the residents with the special features and functioning of the various types of medical Institutions and medical administrative offices, both civil and Military, located in and around Pune. One, two or three days have been tentatively allotted depending upon the size and importance of the place.

2. Medical Institutions to be visited will be contacted in advance and purpose of the visit/attachment explained so that a responsible person conducts these residents and explains things adequately.

<u>S.No</u>	<u>Place of visit/attachment</u>	<u>Hours</u>
1.	Hospital for chest diseases	5
2.	Mental hospital	5
3.	Infectious disease hospital	5
4.	Orthopedic centre, Kirkee	5
5.	Artificial limb centre	5
6.	AFMSD, Pune	10
7.	College of Nursing	5
8.	Two district hospitals	10
9.	A Taluq hospital	5
10.	Rural health centre	5
11.	Urban health centre	5
12.	Maternity and child welfare centre	5
13.	Office of civil surgeon	5
14.	Office of Jt director public health/ office of DDMS	30
15.	Leprosy hospital	5
16.	Red cross organisations including blood transfusion centres	5
17.	Office of food and drug adulteration	5
18.	Bureau of Indian standards, Pune	5
19.	Ayurvedic hospital/AYUSH	5
20.	Paraplegic home, Pune	5
21.	Regional hospitals	20

22.	MH (Cardio thoracic centre)	10
21.	Other Institutions	10
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		170
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Note: - Five hours means one full day.

Visit to Mumbai

Hours available: 50 (10 days excluding travelling)

1. The aim of this visit is to acquaint the students with medical institutions/administrative offices, which are not available locally and are important from instructional point of view.
2. The officers will be attached to the office of DDMS, M & G area whose help will be necessary in arranging these visits. A total of 10 days have been allotted excluding travelling time for this visit.
3. The following Institutions may be visited:
 - (a) Jaslok hospital, 15 Deshmukh marg, Mumbai-26
 - (b) KEM Hospital, Parel Mumbai –12
 - (c) Tata Memorial Hospital, Parel, Mumbai-12
 - (d) INHS Asvini, Colaba, Mumbai –5
 - (e) Breach Candy Hospital, Mumbai –26
 - (f) BARC, Trombay, Mumbai –26
 - (g) Sion Hospital, Mumbai
 - (h) PD Hinduja Hospital, Mumbai
 - (j) Asian heart Hospital, Bandra Kurla complex, Mumbai
 - (k) Sir HN Das Hospital, Mumbai
 - (l) Regional office, ESI Corpn, FSIC Bhavan, NM Joshi Road, Parel Mumbai-13
 - (m) Office of the Airport health officer, Mumbai airport, Santa cruz, Mumbai-57.
 - (n) JJ Hospital, JJ Hospital compound, Mumbai-8.
 - (o) Taj hotel Apollo Bunder, Mumbai-1

Visit to Jamkhed, Ahmednagar, Sirur

Hours available: 20 (4 days excluding travelling)

1. The following Institutions may be visited:
 - (a) Comprehensive rural health project (CRHP), Jamkhed

- (b) District Hospital, Ahmednagar
- (c) Rural Hospital, Sirur
- (d) Primary health centre, Sirur

Visit to Chandigarh & Delhi

Hours available: 85 (17 days excluding travelling)

1. The aim of this visit is to acquaint the students with medical institutions/administrative offices, which are not available locally and are important from instructional point of view.
2. The officers will be attached to Command Hospital (WC) Chandimandir and Office of DGAFMS during their visit to Chandigarh and Delhi respectively. A total of 17 days have been allotted excluding travelling time for this visit.
3. The following Institutions may be visited:
 - (a) Command Hospital (WC) Chandimandir.
 - (b) Post Graduate Institute (PGI), Chandigarh.
 - (c) Fortis Heart Institute, Chandigarh
 - (d) Office of DGAFMS & DGMS (Army), New Delhi
 - (e) Army Hospital (R&R), New Delhi.
 - (f) Armed Forces Transfusion Centre (AFTC), New Delhi
 - (g) Armed Forces Medical Stores Depot (AFMSD), New Delhi
 - (h) All India Institute of Medical Sciences (AIIMS), New Delhi
 - (i) Safdurjung Hospital, New Delhi
 - (j) Rajiv Gandhi Cancer Institute, New Delhi.
 - (k) National Institute of health and family welfare (NIHFW), New Delhi
 - (l) Escorts Heart Institute, New Delhi.
 - (m) Apollo Hospital, New Delhi
 - (n) Ram Manohar Lohia Hospital, New Delhi
 - (o) Sir Ganga Ram Hospital, New Delhi
 - (p) Office of World Health Organisation (WHO), New Delhi

Examination pattern (Theory & Practical).

It will be same as previous one._