Second MBBS (from October 2020) Subject: Microbiology Theory / Practical

Based on Medical Council of India, Competency based Undergraduate curriculum for the Indian Medical Graduate, 2018. (Vol. 1; page nos. 205-227)

Total Teaching hours: 190
 A. Lectures(hours): 70

B. Self-directed learning (hours):- 10

C. Clinical Postings (Hours): NA

D. Small group teachings/tutorials/Integrated teaching / Practical's (hours): 110

| Competency Nos. | Topics and Subtopics |
|-----------------|---|
| MI1.1 | Introduction to Microbiology and historical aspects. Introduction to bacteria, viruses & Bacteriophages, fungi, parasites, host parasite relationship, normal flora. |
| MI1.2 | Morphology of bacteria, microscopy, Gram staining, Z-N staining, stool examination- routine microscopy |
| MI1.3 | Types of infection,_source/ reservoir of infection, modes of transmission, pathogenicity, definition of prevalence, incidence, types of infectious diseases (endemic, epidemic, pandemic, sporadic) |
| MI1.4 | Methods of sterilization and disinfection, their application in the laboratory, clinical and surgical practice, demonstration of working of autoclave |
| MI1.5 | Choose the most appropriate method of sterilization and disinfection to be used in specific situations in the laboratory, in clinical and surgical practice |
| MI1.6 | Mechanism of drug resistance, methods of antibiotic susceptibility testing, definition of MIC, MBC, break points, interpretation of antibiotic susceptibility test report, antimicrobial audit/use, antibiotic policy, antimicrobial stewardship. |
| MI1.7 | Immunity |
| MI1.8 | Antigen, antibodies, immune response and complement, antigen antibody reactions |
| MI1.9 | Vaccines, universal vaccination program, immunoprophylaxis, immunotherapy |

| Competency Nos. | Topics and Subtopics | | | | | | |
|-----------------|--|--|--|--|--|--|--|
| MI1.10 | Hypersensitivity, autoimmune disorders and immunodeficiency states, laboratory methods used in their detection | | | | | | |
| MI1.11 | Immunological mechanisms of transplantation and tumor immunity | | | | | | |
| MI2.1 | Rheumatic Heart Disease-definition, etiological agent, pathogenesis, clinical features and laboratory diagnosis. Streptococci | | | | | | |
| MI2.2 | Infective endocarditis- classification, etiological agents, pathogenesis, clinical features and laboratory diagnosis. Streptococcus viridans, Streptococcus mutans, HACEK | | | | | | |
| MI2.3 | Blood collection for culture, throat swab collection, blood culture, ASO test, interpretation of the test | | | | | | |
| MI2.4 | Anemia-definition, etiological agents, pathogenesis, clinical features and laboratory diagnosis. Hookworm, Trichuris trichiura, | | | | | | |
| MI2.5 | Kala azar, malaria, filariasis and other common parasites prevalent in India - Schistosomes, Fasciolopsis buski, Paragonimus westermani, | | | | | | |
| MI2.6 | Peripheral smear staining for malaria, Identify the slide for filarial | | | | | | |
| MI2.7 | HIV- epidemiology, the etio- pathogenesis, evolution, complications, opportunistic infections, diagnosis, prevention and the principles of management of HIV | | | | | | |
| MI3.1 | Microbial agents causing diarrhea and dysentery- epidemiology, morphology, pathogenesis, clinical features and laboratory diagnosis of Shigella, Campylobacter. Vibrio, salmonella, E. hystolytica, Giardia, B. coli, H. nana, Taenia, Intestinal nematodes, Norwalk virus and Rota virus, Coronavirus | | | | | | |
| MI3.2 | Stool examination-routine microscopy, hanging drop preparation, | | | | | | |
| MI3.3 | Septicemia, Enteric fever and Food poisoning Salmonella -Morphology, pathogenesis, clinical features, laboratory diagnosis. | | | | | | |
| MI3.4 | Blood culture, Widal test, Stool culture, Clot culture, Interpretation of the reports | | | | | | |
| MI3.5 | Food poisoning- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Staphylococci, Cl. botulinum, Bacillus cereus | | | | | | |
| MI3.6 | Acid peptic disease (APD)- etio-pathogenesis, clinical course laboratory diagnosis and management H. pylori | | | | | | |
| MI3.7 | Viral hepatitis- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Hepatitis A, B, C, D, E, Cytomegalovirus, Epstein-Barr virus, HSV, VZV, Measles, Rubella | | | | | | |
| MI3.8 | Serological tests for the laboratory diagnosis of viral hepatitis, viral markers, interpretation of reports | | | | | | |

| Competency Nos. | Topics and Subtopics |
|-----------------|---|
| MI4.1 | Anaerobic infections- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Spore bearing and non-spore bearing anaerobes, Clostridia |
| MI4.2 | Bone and joint infections- etio-pathogenesis, clinical features and laboratory diagnosis. Prosthetic joint infections, Staphylococci, Acinetobacter |
| MI4.3 | Skin and soft tissue infections- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Superficial, cutaneous and sub-cutaneous fungal infections, Mycetoma, Leprosy, Herpes. |
| MI5.1 | Meningitis- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Meningococci, Leisteria, H. influenzae, Cryptococcus neoformans |
| MI5.2 | Encephalitis- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Primary amoebic meningo- encephalitis, viral encephalitis, Japanese encephalitis, Rabies, Aseptic meningitis -ECHO viruses |
| MI5.3 | laboratory diagnosis of meningitis, interpretation of laboratory reports |
| MI6.1 | Upper respiratory tract infections- etiological agents, pathogenesis, clinical features and laboratory diagnosis Orthomyxo virus, Paramyxo virus, Adenovirus, Rhinovirus, Diphtheria, Bordetella and Lower respiratory tract infections-etiological agents, pathogenesis, clinical features and laboratory diagnosis Streptococcus pneumonia Mycobaterium tuberculosis, |
| MI6.2 | Gram staining- Interpretation of results |
| MI6.3 | Z-N staining and Fluorescent staining- Interpretation of results |
| MI7.1 | Genitourinary infections- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Non-gonococcal urethritis, Trichomoniasis, . Bacterial vaginosis |
| MI7.2 | Sexually transmitted infections- etiological agents, pathogenesis, clinical features and laboratory diagnosis. Syphilis, Gonorrhea, Herpes, Calymmatobacterium, HPV, Molluscum contagiosum |
| MI7.3 | Urinary tract infections- etiological agents, pathogenesis, significant bacteruria, clinical features and laboratory diagnosis. E. coli, Klebsiella, Proteus |
| MI8.1 | Zoonotic diseases- etiological agents, mode of transmission, pathogenesis, clinical features laboratory diagnosis and prevention-Brucella, Yesinia, Leptospira, Anthrax and Arbo viruses, Hydatid disease |
| MI8.2 | Opportunistic infections- etio-pathogenesis, factors contributing to the occurrence of OI, laboratory diagnosis - Toxoplasma, Pneumocystis jiroveci, Cryptospora, Isospora, |
| MI8.3 | Oncogenic viruses in the evolution of virus associated malignancy |

| Competency Nos. | Topics and Subtopics |
|---|--|
| MI8.5 | Healthcare Associated Infections (HAI)- definition, types, factors that contribute to the development of HAI and the methods for prevention- Pseudomonas, MOTT, Antibiotic associated diarrhea |
| MI8.6 | Hand hygiene, bio medical waste management, environmental hygiene, use of equipments, respiratory hygiene and cough etiquette, PEP, spill management, vaccipation |
| MI8.7 | Infection control practices and use of Personal Protective Equipments (PPE) |
| MI8.8 | Microbiology of food, water and air |
| MI8.9 | Methods of sample collection and transport |
| MI8.10 | Collection and transport of specimens |
| MI8.11 | Respect for patient samples sent to the laboratory for performance of laboratory tests |
| MI8.12 | Confidentiality pertaining to patient identity in laboratory results |
| MI8.13 | Appropriate laboratory test in the diagnosis of the infectious disease |
| MI8.14 | Confidentiality pertaining to patient identity in laboratory results |
| MI8.15 | Interpret the results of the laboratory tests used in diagnosis of the infectious disease |
| MI8.16 | National Health Programs in the prevention of common infectious diseases- Vector borne diseases control program, Revised National Tuberculosis Control Program (RNTCP), National AIDS Control Program, National Leprosy Eradication Program, Pulse Polio Program- Poliovirus |
| Miscellaneous topics - may be covered in theory or SGT | Burkholderia, Mycoplasma, Borrelia, Actinomyses & Nocardia, Rickettsia, Bortonella, Ehrlichia, Chlamydiae, Ebola virus, Slow viruses |

| AETCOM Module no. | Topics and Subtopics | | | |
|----------------------|--|--|--|--|
| 2.5 | Bioethics-patient autonomy and decision making | | | |
| 2.6 | Bioethics-patient autonomy and decision making | | | |
| 2.7 | Bioethics-patient autonomy and decision making | | | |

Revision

Paper wise distribution of topics for Prelim & MUHS Annual Examination Year: Second MBBS Subject: MICROBIOLOGY

| Paper | Section | Topics |
|-------|---------|--|
| I | Α | MCQs on all topics of the paper I |
| | | General Microbiology and Immunity |
| | | CVS and Blood |
| | | Gastrointestinal and hepatobiliary system |
| | | AETCOM Module No- 2.5,2.6 and 2.7 |
| II | Α | MCQs on all topics of the paper II |
| | | Musculoskeletal system, skin and soft tissue infection |
| | | Central nervous system infections |
| | | Respiratory tract infections |
| | | Genitourinary and sexually transmitted infections |
| | | Zoonotic diseases and miscellaneous |

Second MBBS Internal Assessment Subject: Microbiology

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

| | IA – 1 -E | xam (After 3 mont | <mark>hs , Jan)</mark> | IA – 2 -Ex | cam (After 7 month | <mark>s, May)</mark> | Prelir | ns (July) | |
|----------------|-----------|---|------------------------|--|--------------------|-----------------------|------------------------------|-----------|----------------|
| Phase | Theory | Practical (Including 10 Theory Marks for Journal & Log Book) | | Theory (Including 10 Marks for Journal & Log Marks Total Marks Theory Including 10 Marks for Journal & Log | | Total Marks | Theory | Practical | Total Marks |
| Second MBBS | 50 | 50 | 100 | 50 | 50 | 100 | Paper 1 -100 Paper 2 -100 | 100 | 300 |

Assessment in CBME is ONGOING PRCESS,

No Preparatory leave is permitted.

- 1. There shall be 3 internal assessment examinations in Microbiology.
- 2. The suggested patterns of question paper for first two internal assessment theory examinations is given below. Pattern of the prelims examinations should be similar to the University examinations.
- **3.** Internal assessment marks for theory and practical will be converted to out of 40 (theory) + 40 (practical). Internal assessment marks, after conversion, should be submitted to university within the stipulated time as per directives from the University. **Conversion Formula for calculation of marks in internal assessment examinations.**

| Phase II | Theory | Practical | | | | | |
|----------------------|--|---|--|--|--|--|--|
| IA 1 | 50 | 50 | | | | | |
| IA 2 | 50 | 50 | | | | | |
| Prelim | 200 | 100 | | | | | |
| Total | 300 | 200 | | | | | |
| Conversion out of | 40 | 40 | | | | | |
| Conversion formula | Total marks in 3 IA theory examinations /7.5 | Total marks in 3 IA Practical examinations /5 | | | | | |
| Eligibility criteria | 16 | 16 16 | | | | | |
| after conversion | Combined theory + Practical = 40 | | | | | | |

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

| Total Internal Assessment Marks | Final rounded marks |
|---------------------------------|---------------------|
| 33.01 to 33.49 | 33 |
| 33.50 to 33.99 | 34 |

5. 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.

6. Internal assessment marks will not to be added to marks of the University examinations and will be shown separately in mark list.

7. Remedial measures

A. Remedial measures for non-eligible students

- i) At the end of each internal assessment examination, students securing less than 50% marks shall be identified. Such students should be counseled at the earliest and periodically.
- ii) Extra classes for such students may be arranged. If majority of the students found to be weak in a particular area then extra classes must be scheduled for all such students. Even after these measures, if a student is failed to secure 50% marks combined in theory and practical (40% separately in theory and practical) after prelim examination, the student shall not be eligible for final examination.
- iii) Non eligible candidates are offered to reappear for repeat internal assessment examination/s, which must be conducted 2 months before next University examination. The pattern for this repeat internal assessment examination shall be similar to the final University examination. Only the marks in this examination shall be considered for deciding the eligibility criteria. Following conversion formula shall be used for converting the marks.

| | Theory | Practical | | |
|---|--|------------|--|--|
| Remedial examination (pattern as per final examination) | 200 | 100 | | |
| Conversion out of | 40 | 40 | | |
| Conversion formula | Marks in remedial theory examinations /5 | | | |
| Eligibility criteria after conversion | 16 | 16 | | |
| | Combined theory + Prac | tical = 40 | | |

B. Remedial measures for absent students:

If any of the students is absent for any of the 3 IA examinations due to any reasons, following measures shall be taken.

- i. The student is asked to apply to the academic committee of the college for reexamination, through HOD, to ascertain the genuineness of the reason for absentee.
- ii. If permitted by academic committee, an additional examination for such students is to be conducted after prelims examination. Marks for such additional examination shall be equal to the missed examination.
- iii. Even if a student has missed more than one IA examination, he/she can appear for only one additional IA examination. In such scenario, eligibility should be determined by marks obtained in internal assessment examinations for which the candidate has appeared, without changing the denominator.

Format for Internal Assessment Theory Paper IA – 1 & IA - 2

| Question No. | Type of Question | No. of Questions | Max. Marks |
|--------------|------------------|-----------------------|-------------------|
| 1. | MCQ | 10 | 10 (1 marks each) |
| 2. | SAQ | 5 (Any four out of 5) | 28 (7 marks each) |
| 3. | LAQ | 1 (Compulsory) | 12 |
| | | Total | 50 |

Second MBBS Practical Mark's Structure Internal Assessment Examinations

(Applicable w.e.f October 2020 onwards examination for batches admitted from June 2019 onwards)

| | | | | Subject : | MICROBIOLOGY | Practical | | | | |
|---------------|---------------|------------------|---------------------|-----------|--------------|-----------|----------------------------------|---------------------|------|-------|
| Seat | | | | | | IA - 2 | | | | |
| No. | Gram Stain | P.S. for M.P. | Journal/Log book | Viva | Total | Z-N stain | Stool - Routine microscopy | Journal/Log book | Viva | Total |
| Max. Marks | 10 | 10 | 10 | 20 | 50 | 10 | 10 | 10 | 20 | 50 |
| | | | | | | | | | | |

Second MBBS Practical Mark's Structure (Prelim)

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

| | | | | Subject: MICR | OBIOLOGY | | | | | |
|---------------|-----------------------|--|-----------------------------|---------------------------|----------------------|-------|--------|-----------|-------|--------------------------------|
| | | | Practical | | | | | Oral/Viva | | Total |
| Seat No. | Gram/ Z-N staining | P.S. for M.P./ Stool –routine microscopy | Use of PPE/ Hand hygiene | Interpretation of reports | Journal/ Log book | Total | Viva-I | Viva-II | Total | Practical & Oral (F + 1) |
| Max. Marks | 15 | 15 | 10 | 20 | 10 | 70 | 15 | 15 | 30 | 100 |
| | | | | | | | | | | |

Second MBBS Practical Mark's Structure (M.U.H.S Examination)

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

| | | | | Subject: MICR | OBIOLOGY | | 1 | | | 1 |
|---------------|--------------|------------------------------|--------------|----------------|--------------|-------|--------|-----------|-------|---------------------|
| | | | Practical | | | | | Oral/Viva | | Total |
| Seat | Gram/ | P.S. for M.P./ | Use of PPE/ | Interpretation | Journal/ Log | | | | | Practical & Oral |
| No. | Z-N staining | Stool –routine microscopy | Hand hygiene | of reports | book | Total | Viva-I | Viva-II | Total | (F + I) |
| | Α | В | С | D | E | F | G | Н | I | J |
| Max. Marks | 15 | 15 | 10 | 20 | 10 | 70 | 15 | 15 | 30 | 100 |
| | | | | | | | | | | |

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

| Instr | 1) Put in the approp 2) Use blue ball point per 3) Each question carries | | |
|-------|---|---|--|
| 1.20 | 4) Students will not be all MCQ(1 marks each) a) b) c) d) e) f) g) | lotted mark if he/she overwrites strikes or put white ink h) i) j) | on the cross once marked. (20x1) 20 |
| | (k) (l) (m) (n) (o) (p) (r) | s) $t)$ $u)$ | |
| | | SECTION "B" | |
| Instr | an attempt to resort to unfai 3) All questions are compulsor 4) The number to the right indu 5) Draw diagrams wherever no 6) Distribution of syllabus in yaper pattern is a mere gu | the blank portion of the question paper. If written anyth ir means. ry. dicates full marks. decessary. Question Paper is only meant to cover entire syllabus wideline. Questions can be asked from any paper's sytion is out of syllabus. As It is only for the placement sak | within the stipulated frame. The Question ollabus into any question paper. Students |
| | | SECTION "B" (40 Marks) | |
| 2. | Short Answer Questions a) | (AETCOM 2.5, 2.6, 2.7) (compulsory) | (7x1=07) |
| 3. | Short Answer Questions a) b) c) d) | (Answer Any 3 out of 4) | (7x3=21) |
| 4. | Structured Long Answer Questions a) | (Compulsory) | (12x1=12) |
| 5. | Short Answer Questions a) b) c) d) e) | (Answer Any 4 out of 5) | (7x4=28) |
| | a, o, o, a, o, | | (12x1=12) |
| 6. | Structured Long Answer Questions a) | (Compulsory) | |

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

| Instru | uctions: | 2) Use blue ball point p3) Each question carrie | es One mark. | er once only. rikes or put white ink on the cross once marked. |
|--------|---------------------|---|--|--|
| | SECTION ' | "A" MCQ (20 Marks) | | |
| | | Multiple Choice Questions (T mark each) c) d) e) f) g) m) n) o) p) r) | fotal 20 MCQ of One $ \begin{array}{ccc} h) & i) & j) \\ s) & t) & u) \end{array} $ | (20 x1 = 20) |
| | | SEC | TION "B" | |
| Instru | | considered as an attempt 3) All questions are comput 4) The number to the right 5) Draw diagrams whereve 6) Distribution of syllabus Question paper pattern | a the blank portion of the question p to resort to unfair means. Isory. indicates full marks. r necessary. in Question Paper is only meant is a mere guideline. Questions can b at the Question is out of syllabus. A | aper. If written anything, such type of act will be to cover entire syllabus within the stipulated frame. The be asked from any paper's syllabus into any question paper. s It is only for the placement sake, the distribution has been |
| | Short Answe a) b) c | r Questions c) d) e) | SECTION "B" (Answer Any 4 out of 5) | (7x4=28) |
| 3. | Structured I | Long Answer Questions | (Compulsory) | (12x1=12) |
| | Short Answe a) b) | r Questions c) d) e) | (Answer Any 4 out of 5) | (7x4=28) |
| | Structured L | ong Answer Questions | (Compulsory) | .(12x1=12) |

Competency Based Medical Education

Year: Second MBBS
Subject: Microbiology
Learning Resource Material

Books recommended:

- 1. Textbook of Microbiology R. Ananthanarayan C. K. Jayaram Panikar
- 2. A Textbook of Microbiology P. Chakraborty
- 3. Textbook of Medical Microbiology Rajesh Bhatia & Itchpujani
- 4. Textbook of Medical Microbiology Arora and Arora
- 5. Textbook of Medical Parasitology C. K. Jayaram Panikar
- 6. Textbook of Medical Parasitology Arora and Arora
- 7. Textbook of Medical Parasitology S.C.Parija
- 8. Microbiology in clinical practice D. C. Shanson
- 9. A Textbook of Parasitology Dr. R.P. Karyakarte and Dr. A.S. Damle
- 10. Essentials of Medical Microbiology Apurba shashtry

Reference books:

- 1. Mackie McCartney practical Medical Microbiology- Colle JG, Fraser AG
- 2. Principles of Bacteriology, Virology & Immunology vol. 1, 2, 3, 4, 5-Topley Wilsons
- 3. Medical Mycology (Emmons)- Kwon Chung
- 4. Review of Medical Microbiology (Lange)- Jawetz
- 5. Immunology-Weir DM
- 6. Medical Microbiology- David Greenwood, Richard Stack, John Pentherer
- 7. Parasitology- KD Chatterjee
- 8. Medical virology- Timbury MC
- 9. Mackie McCartney Medical, Microbiology vol.1- Duguid JP
- 10. Microbial infections- Marmion BP, Swain RHA
- 11. Bailey & Scott's Diagnostic Microbiology
- 12. Textbook of Mycology Jagdish Chander

Maharashtra University of Health Sciences Nashik



MICROBIOLOGY LOGBOOK

For
PHASE II MBBS STUDENTS
AS PER
COMPETENCY BASED CURRICULUM

First Edition: 2020

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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, early clinical exposure, 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.

Name of the College

| Admission Year : |
|---|
| <u>CERTIFICATE</u> |
| 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 Phase II MBBS Competency Based Curriculum in the subject of Microbiology. |
| Date:/ Place: |
| Professor and Head Teacher-in-Charge Department of Microbiology |

Instructions

- This logbook is prepared as per the guidelines of MCI for implementation of Competency based curriculum for Phase II MBBS students in the subject of Microbiology.
- 2) Students are instructed to keep their logbook entries up to date.
- 3) Students are expected to write minimum 1 reflections on Self-Directed Learning (SDL).
- 4) Students also have to write reflections on AETCOM Modules 2.5, 2.6 and 2.7.
- 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's | Status Complete/ Incomplete | Signature of Teacher |
|-----------|--|--------------|------------------------------|-------------------------|
| | Self-Directed Learning, skill assessment, participation in Group discussions | | • | |
| 2 | *AETCOM Module No. 2.5, 2.6, 2.7 | | | |
| 3 | Attendance Records | | | |
| 4 | Records of Internal Assessment | | | |

^{*}AETCOM – Competencies for IMG, 2018, Medical Council of India.

Section 1. Self-Directed Learning, skill assessment, participation in Group discussions

| Sr. No | Self-Directed Learning, skill assessment, participation in Group discussions | Date | Signature of Teacher |
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| | Reflection on Self-directed lear | ning Experience | |
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| | Reflection on Self-directed learning Experience | |
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| Topic: | | Date: |
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Section 2 Reflection on AETCOM Module - 2.5

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Signature of Teacher-in-charge

Reflection on AETCOM Module - 2.6

| Topic: | Date: |
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Reflection on AETCOM Module - 2.7

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| | Signature of Teacher-in- charge |
| | Signature of Teacher-III- Charge |
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SECTION 3B: Details of attending extra classes [For poor attendance (if any)]

| Date | Period | Total hours | Signature of Student | Signature of Teacher |
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Note: Above information is for the benefit of students and parents. In case of any discrepancy departmental record will be treated as final.