

VEER NARMAD SOUTH GUJARAT UNIVERSITY, SURAT.**T.Y. M.B.B.S.****COURSE OF SURGERY AND ITS ALLIED SPECIALITIES FOR
THIRD M.B.B.S.**

These guidelines are based on MCI recommendations.

Teaching has to be done keeping in mind the goals and objectives to be achieved by medical student

SURGERY and allied specialties-**(i) GOAL:**

The broad goal of the teaching of undergraduate students in Surgery is to produce graduates capable of delivering efficient first contact surgical care.

(ii) OBJECTIVES:

The departmental objectives, syllabus and skills to be developed in the department of surgery during undergraduate medical education are presented herewith. These are prepared taking into consideration of various aspects and institutional goals given below:

1. A medical student after graduation may have different avenues of his/her professional career and may work either as a first contact physician in a private, semi-private or public sector or may take up further specialization in surgery or other specialties.
2. He may have to work in different settings such as rural, semi-urban or urban which may have deficient or compromised facilities.
3. These are based on the various health services research data in our community.
4. These are also based on following institutional goals in general;

At the end of the teaching/ training the undergraduate will be able to:

- Diagnose and manage common health problems of the individual and the community appropriate to his/her position as a member of the health team at primary, secondary and tertiary levels.
- Be competent to practice curative, preventive, promotive and rehabilitative medicine and understand the concepts of primary health care.
- Understand the importance and implementation of the National Health Programmes in the context of national priorities.
- Understand the socio-psychological, cultural, economic and environmental factors affecting health and develop humane attitude required for professional responsibilities.
- Develop the ability for continued self-learning with a scientific attitude of mind and acquire further expertise in any chosen area of medicine.

A.KNOWLEDGE

At the end of the course, the student shall be able to:

1. Describe aetiology, pathophysiology, principles of diagnosis and management of common surgical problems including emergencies, in adults and children;
2. Define indications and methods for fluid and electrolyte replacement therapy including blood transfusion.
3. Define asepsis, disinfection and sterilization and recommend judicious use of antibiotics.

4. Describe common malignancies in the country and their management including prevention.
5. Enumerate different types of anaesthetic agents, their indications, mode of administration, contraindications and side effects

(b) SKILLS.

At the end of the course, the student should be able to

1. Diagnose common surgical conditions both acute and chronic, in adult and children.
2. Plan various laboratory tests for surgical conditions and interpret the results;
3. Identify and manage patients of haemorrhagic; septicaemic and other types of shock.
4. Be able to maintain patent air-way and resuscitate:
 - A A critically injured patient.
 - B Patient with cardio-respiratory failure;
 - C A drowning case.
5. Monitor patients of head, chest, spinal and abdominal injuries, both in adults and children
6. Provide primary care for a patient of burns;
7. Acquire principles of operative surgery, including pre-operative, operative and post operative care and monitoring;
8. Treat open wounds including preventive measures against tetanus and gas gangrene.
9. Diagnose neonatal and paediatric surgical emergencies and provide sound primary care before referring the patient to secondary/territory centers;
10. Identify congenital anomalies and refer them for appropriate management.

In addition to the skills referred above in items (1) to (10), he shall have observed/assisted/performed the following:

- i. Incision and drainage of abscess;
- ii. Debridement and suturing open wound;
- iii. Venesection;
- iv. Excision of simple cyst and tumours.
- v. Biopsy and surface malignancy
- vi. Catheterisation and nasogastric intubation;
- vii. Circumcision
- viii. Meatotomy;
- ix. Vasectomy;
- x. Peritoneal and pleural aspirations;
- xi. Diagnostic proctoscopy;
- xii. Hydrocoele operation;

- xiii. Endotracheal intubation
- xiv. Tracheostomy and cricothyroidotomy;
- xv. Chest tube insertion.

Human values, and Ethical practice

- ❑ Adopt ethical principles in all aspects of his clinical practice. Professional honesty and integrity are to be fostered. Surgical care is to be delivered irrespective of the social status, caste, creed or religion of the patient.
- ❑ Develop communication skills, in particular the skill to explain various options available in management
- ❑ Be humble and accept the limitations in his knowledge and skill and to ask for help from colleagues and specialist in the field when needed.
- ❑ Respect patient's rights and privileges including patient's right to information and right to seek a second opinion

(C) INTEGRATION

The undergraduate teaching in surgery shall be integrated at various stages with different pre and para and other clinical departments.

LEARNING METHODS

Lectures, Tutorials bedside clinics and lecture cum demonstrations

Distribution of Teaching hours -

- ❑ **Lectures - 160 hours**
- ❑ **Tutorials and revision - 140 hours**
- ❑ **Bedside clinics - 468 hours** **five clinical postings totalling 26 weeks including Anaesthesiology**
- ❑ **Clinical postings in General Surgery -**
 - 3rd Semester - 6 weeks
 - 5th Semester - 4 weeks
 - 7th Semester - 4 weeks
 - 8th Semester - 6 weeks
 - 9th Semester - 6 weeks