



# ACADEMY OF CLINICAL MICROBIOLOGISTS

Regd. No. 068/1996

St. John's Medical College, Bangalore-560 034

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## Comments on the draft PGMER by NMC

1. Please see the two paras of the PGMER:

12. *"PERIOD OF TRAINING- The Postgraduate students shall be called **Junior Residents** in all broad specialties and as Senior Residents in Super Specialties."*

and

14.1 (c) *"Departments of Pathology, Microbiology, Anesthesiology, and Radio diagnosis: To add 1 Professor/Associate Professor, 1 Assistant Professor and 1 **Senior Resident** in addition to the faculty/Resident prescribed for their annual sanctioned MBBS intake"*

**Comment** - SR is now a candidate who works after finishing MD. If the super specialty student is also called SR, there will be confusion. If remuneration is different for the same designation, that also may be an anomaly.

**Suggestion:** Junior Resident for MD or MS students, SR for superspecialty students.

A designation suggested for post MD or MS or post superspecialty (if they join in that superspecialty) is "Senior Lecturer", as opposed to Lecturer who joins after MBBS in many states. This post should be considered as teaching experience also for Asst Professorship. The designations must be unified all over India, with Senior Lecturer being after PG or superspecialty degree and Assistant Professor after 3 yrs teaching experience as Senior Lecturer.

2. Training and Responsibilities

a) *17.11 During the training for award of Degree / Super-specialty/Diploma in clinical disciplines, there shall be proper training in Basic medical sciences related to the disciplines concerned; so also in the applied aspects of the subject; and allied subjects related to the disciplines concerned. In the Post Graduate training programmes including both Clinical and Basic medical sciences, emphasis has to be laid on Preventive and Social aspects. Emergency care, facilities for Autopsies, Biopsies, Cytopsies, Endoscopy and Imaging etc. shall also be made available for training purposes.*

**Comment** - Just as for clinical specialties, for basic sciences also, keeping in touch with the clinical application of basic science is important. For Microbiology, **Infectious disease, Hospital infection control and public health will be good peripheral postings.** Appropriate



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peripheral postings for other paramedical subjects may be included. These postings should be given in the second year of the course, so that a thesis that is related to clinical application can also be thought of.

*b) 17.15 6(b)- Pre-Clinical and Para-Clinical Specialities:*

*Postgraduate students of pre/para clinical disciplines (namely, Anatomy; Biochemistry; Community Medicine; Forensic Medicine; Microbiology; Pathology; Physiology; and Pharmacology) will be trained by the District Hospital and Health System teams within the available avenues in coordination with the District Health Officer/Chief Medical Officer.*

**Comments:**

For Microbiology, Biochemistry and Pathology, this would be useful. Its use for Anatomy and physiology is debatable. Pharmacology PG can help in the pharmacy of the DH. In case of Microbiology, Pathology and Biochemistry, **it is suggested that posting may be to the Public Health Lab of each district with development of Microbiology facility.** States should be asked to equip PHLs by recruiting specialist clinical microbiologists for the PHL. This will improve lab services at the periphery.

3. *18.Examinations: Obtaining a minimum of 40% marks in each theory paper and not less than 50% cumulatively in all the four papers for degree examination and three papers in diploma examination shall be mandatory. Obtaining of 50% marks in Practical examination shall be mandatory for passing the examination as a whole in the said degree/diploma examination as the case may be.*

**Comment:** In all theory papers pass mark should be 50%

Since the 3 years of PG training is working in a Medical College and comprises acquiring of multiple skills, assessment may not be limited to one terminal exam, instead continuous assessment of quality of work done throughout the three years is essential. A log book alone may not be enough. **Presenting in journal club,/ topic presentation, doing a PCR(in microbiology), interpretation of antibiotic sensitivity, identifying a fungus or even reporting on an outbreak should all be given marks during the course.** A good programme can be made for each specialty in the curriculum.



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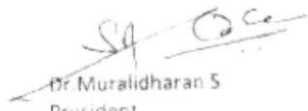
4. 20.2. The period of training for Ph.D. shall be two years for candidates who possess MD/MS and three years for MSc. (Medical subjects).

**Comment:** "and three years for MSc. (Medical subjects)" may kindly be deleted, as this document deals with MD course only.

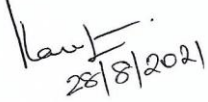
These comments and suggestions are part of the commitment of ACM to promote quality in Medical Education in the UG and PG teaching of Clinical Microbiology in India.

(Scanned signatures of President, Vice-President -1 and 2 affixed)

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