

ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL



MBBS Students' Hand Book 2015



Saket Nagar, Bhopal 462 020

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Dear students,

Congratulations for being selected for MBBS course at AIIMS Bhopal. We the faculty and staff of AIIMS Bhopal welcome you to the family.

Bhopal, the capital city of Madhya Pradesh, is a picturesque beautiful city of lakes and is home to various institutions and organizations of National importance. Bhopal has a moderate climate and is well connected by air, rail and road. The distance between AIIMS Bhopal and Airport is 25kms; from Bhopal railway station is 9 kms, and from Habibganj railway station is 3 kms.

The All India institute of Medical Sciences Campus is on land area of 143 acres, in the Habibganj area next to Saket Nagar on the south eastern side of the upper lake and old Bhopal city, located on N H 12 - *Hoshangabad Road*.

You should arrive here as per the dates listed in page 3 for admission. You will report to the Admission Office located in the Ground floor of Medical College building. The area will be sign-posted. You will need to make own arrangements for you and your accompanying parents / guardians 'stay in Bhopal for first few days till the time of allotment of the hostel room for you. Stay in the hostel is compulsory.

The list of original documents to be brought at the time of admission for verification is annexed to this letter. Your admission is provisional and subject to complete verification of identity and documents.

After admission you are advised to stay on for orientation to city and campus and few introductory sessions. Formal teaching is likely to begin from Monday, the 3rd August 2015 for MBBS. You are advised to bring approximately Rs.35,000 - 40,000/- for buying books, personal belongings and mess charges etc.

Hostel accommodation will be provided. The rooms are furnished with a cot, mattress, study table, chair, side table and a built-in cup-board. Bed sheets, pillow, pillow-covers and other personal and daily utility items are advised to be bought on personal basis. Anti-mosquito measures like mosquito net and repellents are strongly advised.

We wish you good luck and happy living with fruitful education at the *All India Institute of Medical Sciences, Bhopal*

Wishing you a happy arrival to AIIMS Bhopal.

Director, AIIMS Bhopal.

Clarifications and enquiries may be submitted to mbbsadmissions@aiimsbhopal.edu.in or call at +91-7773010099.

ABOUT AIIMS BHOPAL

AIIMS Bhopal is one of the apex healthcare institutes established by the Ministry of Health & Family Welfare, Government of India under the Pradhan Mantri Swasthya Suraksha Yojna (PMSSY).

The PMSSY has established six such institutes aimed at correcting regional imbalances in quality tertiary level healthcare in the country, and attaining self-sufficiency in graduate and postgraduate medical education and training in under-served areas of the country.

The institute has been established by an Act of Parliament on the lines of the original All India Institute of Medical Sciences in New Delhi. It has started imparting undergraduate medical and nursing education and is working towards postgraduate medical education in all its branches and related fields, along with paramedical training. We aim to bring together, in one place, educational facilities of the highest order for the training of personnel in all branches of health care activity.

Mission Statement

To establish a centre of excellence in medical education, training, health care and research imbued with scientific culture, compassion for the sick and commitment to serve the under served.



All India Institute of Medical Sciences Bhopal

Saket Nagar, Bhopal-462 020 Madhya Pradesh India
Website : www.aiimsbhopal.edu.in

AIIMS/Bhopal/ 2015/576.

Thursday, the 11th June 2015

OFFICE ORDER

12th June 2015

Following are the key dates in the Admission schedule of MBBS 2015 batch at AIIMS Bhopal.
The prospective candidates are hereby advised to make note of it and plan their travel accordingly.

Event	Dates of counselling at AIIMS New Delhi	AIIMS Bhopal admission process after 1 st counselling	Last date of joining AIIMS Bhopal after 1 st counselling	Last date of joining AIIMS Bhopal after 2 nd counselling	Last date of joining AIIMS Bhopal after 3 rd counselling	Date of Spot / Open counselling at AIIMS Bhopal
1 st counselling at AIIMS New Delhi	6 th -9 th July 2015 (Monday-Thursday)	Monday, 13 th July to Friday, the 17 th July 2015	Friday, the 17 th July 2015			
2 nd counselling at AIIMS New Delhi	10 th August 2015 (Monday)			Tuesday, the 18 th August 2015		
3 rd counselling at AIIMS New Delhi	7 th September 2015 (Monday)				Thursday, the 11 th September 2015	
Open counselling (If seats are vacant)	23 rd September 2015 (Wednesday)					Friday, the 25 th September 2015
Commencement of formal academic session at AIIMS Bhopal	Monday, the 3 rd August 2015 with Foundation course					

Candidates shall note that if they do not report to AIIMS Bhopal by the cut-off dates (last date of joining AIIMS Bhopal) mentioned above after respective rounds of counselling, it will be assumed that candidate is not interested in joining AIIMS Bhopal. Consequently the seat will be reported to AIIMS Delhi for inclusion in next round of counselling.

All admission related updates will be made available on AIIMS Bhopal website. Hence candidates are advised to visit www.aiimsbhopal.edu.in regularly.

Prof. Nitin M Nagarkar
Director

Copy to:

1. Dean, Medical Superintendent, DDA, FA, AO
2. DDA is requested to get it hosted on the website.

ANTI- RAGGING MEASURES

SUPREME COURT RULES REGARDING ANTI RAGGING

As per direction of the Hon'ble Supreme Court of India, the Government has banned ragging completely in any form inside and outside the campus and all the AIIMS Bhopal authorities are determined not to allow any form of ragging. Whosoever directly or indirectly commits, participates in, abets or instigates ragging within or outside any of the AIIMS Bhopal shall have an FIR lodged against him/her and he/she will be suspended or rusticated from the institution and shall also be liable to be fined which may extend to Rs. 10,000/. In case the applicant for admission is found to have indulged in ragging in the past or if it is noticed later that he/she has indulged in ragging, admission can be refused or he/she shall be expelled from the educational institution. The punishment may also include, suspension from attending the classes, withholding/ withdrawing fellowship/ scholarship and other financial benefits or withholding the result.

ANTI RAGGING REGISTRATION

Selected candidates shall register himself/herself in the website www.antiragging.in / www.amanmovement.org and take a print out and submit the self –attested printout to Academic Section with 7 days.

MBBS LEARNING OUTCOMES AT AIIMS BHOPAL

The overall Learning Outcomes for MBBS are set out below under each of the three essential elements of the competent and reflective practitioner.

These overall outcomes are useful in helping you appreciate the knowledge, skills and attitudes which the undergraduate medical programme is designed to achieve, based on the burden of disease in our country/ in our local area and the all-cause mortality.

The focus is on the core values and skills that needs to be acquired during MBBS for being a competent primary care physician and being able to work independently in rural areas, manage infections and chronic diseases, manage trauma and emergency, ante- natal care, normal delivery, contraception, managing a newborn, be able to do simple procedures, assist in autopsy, and be able to refer when needed.

Clinical and Communication Skills

1. Clinical Skills

i. Take history, which:

- is patient centred,
- is sensitive, structured, and thorough in approach
- recognises and takes account of the age and state of the patient, and a range of contexts including multicultural factors
- Using skilled communication

ii. Undertake physical & mental state examination of patients, which is:

- general and systems-based
- appropriate for age, gender, culture and state
- thorough, sensitive and systematic

iii. Integrate results of history, examination & common investigative tests, so as to facilitate diagnosis

iv. Make diagnosis

- by gathering and interpreting relevant clinical information
- byrecognising the patterns of presentation of core conditions

v. Record findings, such that records:

- Are accurate, legible, concise, dated and signed
- include all relevant communications with patients / relatives and colleagues / seniors

2. Practical Procedures

- i. Measure & record a range of common clinical parameters e.g. peripheral pulse rate, blood pressure, blood glucose
- ii. Be able to perform a range of tasks commonly used in medical practice e.g. BLS, suturing, IV injection, ante natal care, normal delivery, assist in autopsy, manage trauma and emergency cases

3. Patient Investigation

- i. Follow general principles, by:
 - making evidence-based choice of relevant investigations, with awareness of limitations
 - requesting relevant investigations according to national guidelines and local protocols
 - obtaining informed consent
 - preparing patients practically & with adequate information
- ii. Be able to request, justify and interpret appropriate and relevant laboratory-based investigations according to national guidelines and local protocols e.g. CBC, RFT, LFT etc.
- iii. Be able to order, package and label appropriate and relevant samples for laboratory based investigations e.g. arterial and venous blood, urine, stool
- iv. Be able to write a prescription for a range of commonly prescribed drugs e.g. antibiotics, CVS, CNS drugs
- v. Be able to interpret a range of common x-rays.

4. Outcomes for Patient Management

- i. Follow general principles, recognising:
 - the patient's safety at all times
 - effect on patient & concordance
 - age and social circumstances when determining treatment
 - requirements for informed consent
 - need for team work
 - need for appropriate referrals to right professionals
- ii. Formulate management plans:
 - Which focus on patient's needs & involve patient in decision making
 - Involving other health care professionals as appropriate
 - Recognising one's own limitations
- iii. In relation to critical care, be able to demonstrate
 - effective working in the emergency care team
- iv. In relation to acute and chronic care be able to formulate a management plan for
 - chronic diseases
 - the dying patient
 - pain control

- v. Be able to accurately write up a drug chart for a newly admitted patient according to information supplied in the patients notes
- vi. Be able to calculate drug dosages for individual patients and work out loading and delivery rates
- vii. Be able to request and justify appropriate and relevant radiological investigations according to national guidelines and local protocols
- viii. Demonstrate ability to prioritise the patient's care, including the management of tasks, events and time

5. Communication

- i. Follow general principles of good communication, including:
 - active listening
 - gathering and giving information with good record keeping and correspondence skills
 - mediating, negotiating & dealing with complaints
 - making oral presentations & writing reports
 - safeguarding confidentiality
 - recognising own limitations, extent of personal knowledge
- ii. In communicating with patients / relatives, be able to:
 - demonstrate empathy
 - elicit patient's ideas, concerns & expectations
 - achieve a shared understanding
 - build and maintain a relationship
 - answer questions & give explanations
 - deal with challenging consultations
 - make requests
 - obtain valid informed consent for appropriate procedures
- iii. In communicating with other health professionals, be able to:
 - transfer information (oral, written & electronic)
 - write a good referral letter
 - write good discharge summaries
 - refer patients appropriately

- iv. In communicating with other agencies (e.g. police), and the media/press:
 - follow proper procedures without breaking rules of confidentiality
 - act as a patient's advocate when appropriate
 - write a death certificate
- v. Be able to communicate as a teacher and mentor

6. Data & Information Handling Skills

- i. In relation to patient records:
 - maintain high quality of recording (whether by writing or on computer)
 - write up patient notes in a legible and structured format
 - demonstrate an awareness of the different types of records and how they are stored and retrieved
 - maintain confidentiality
 - demonstrate awareness of legislation governing access to medical records and data
- ii. In accessing and manipulating data, demonstrate ability to use:
 - library and other information systems to access data
 - information from primary sources to inform evidence-based practice
 - information from secondary sources (e.g. professional guidelines)
- iii. Demonstrate C&IT skills, including use of:
 - E-mail
 - word-processing
 - on-line databases
 - spreadsheets & statistical packages
 - search engines and decision support tools
- iv. Maintain records for personal & professional development including records that are specified in the curriculum

7. Health Promotion and Disease Prevention

- i. In relation to health promotion be able to
 - assess the health, health care and health promotion needs of individual patients
- ii. Be able to take appropriate action in communicable disease control according to national guidelines and local protocols
- iii. Implement evidence-based risk reduction strategies for individual patients
 - be able to recommend appropriate vaccination regimes for individuals
- iv. Plan and implement, where appropriate, health promotion taking into account barriers to disease prevention and health promotion both in the individual & population **especially among the under privileged and in rural setting**

Knowledge and Critical Thought

8. Understanding of basic and clinical sciences and underlying principles

i. Demonstrate knowledge and understanding of:

- Normal structure and function of the major organ systems and how they interrelate
- The different stages of the life cycle and how these affect normal structure and function
- Behaviour and relationships between individuals and their family/partners, immediate social groups, and society at large
- Molecular, biochemical and cellular mechanisms important in maintaining homeostasis
- Causes of disease and the ways in which diseases affect the body
- Disease aetiology and relationships with risk factors and disease prevention
- Alteration in structure and function of the body & its major organ systems
- Pharmacological principles of treatment using drugs & efficacy of therapeutic measures in management and symptomatic relief of diseases
- Principles of disease surveillance and screening, disease prevention, health promotion, and health needs assessment
- Principles of healthcare planning, prioritisation of service and communicable disease control, including basic concepts of health economics
- Epidemiological principles of demography and biological variability
- Educational principles through which learning takes place (for patients, students and colleagues)

ii. Define public health problems at a population level or in clinical practice

- recognise the causes of disease & threats to health of individuals & populations at risk

iii. Appreciate that health promotion & disease prevention depend on team-working and collaboration with other professionals & agencies

iv. Demonstrate knowledge of the appropriate use of drugs:

- for all ages and with awareness of underlying chronic diseases
- in prescribing, calculating dosages & in methods of delivery
- their interactions & adverse effects

v. Recognise opportunities for screening, disease prevention, health education, health promotion

9. Understanding of patient investigation and management

- i. Demonstrate knowledge of the range of interventions and indications, for surgery, including the principles of pre-, peri- and post- operative care
- ii. Demonstrate knowledge of the indications for the provision of range of interventions and therapies provided by other health care professionals e.g. Occupational therapists, dieticians, complementary therapists
- iii. Demonstrate knowledge of the range of more common clinical investigations and procedures and their appropriate use e.g. echocardiography, cystoscopy, skin biopsy
- iv. In relation to acute & chronic care, demonstrate knowledge of the management of:
 - conditions not immediately life threatening but requiring early treatment
 - appreciation of impact of acute illness on chronic disease and the transition between acute and chronic conditions
 - chronic diseases
 - rehabilitation in recovery from major illness
 - impairment & disability
 - pharmacological, physical and psychological interventions in pain control
 - care of the dying
- v. Demonstrate knowledge of the circumstances in which the commoner laboratory-based investigations are indicated, and procedures required to obtain the necessary material for investigation
- vi. Demonstrate knowledge of the range of more common radiological investigations available and their appropriate use in different circumstances
- vii. In relation to critical care, demonstrate knowledge of the management of:
- viii. life threatening conditions due to trauma or disease
intensive care, indications for intervention/monitoring

10. Appropriate ethical understanding and knowledge of legal responsibilities

- i. Students should be able to demonstrate an appropriate and developing understanding of:
 - methods of ethical reasoning that inform decisions in medical practice
 - the legal and professional frameworks within which medicine is practised in India
 - the implications of the practice of medicine in a diverse multicultural society

- the importance, scope and implications of the doctor's duty of care
- the influence of values, assumptions, attitudes and emotions on their decision-making and practice

ii. Students should be able to:

- identify values of different stakeholders involved in, or affected by, decision-making, including the student's own values
- Describe and adhere to legal responsibilities, with respect to: human rights
- drug prescribing
- physical and sexual abuse of children and vulnerable adults
- patients who lack capacity
- end of life issues
- death certification
- reporting of adverse medical care/standards involving other practitioners
- the need to recognise and avoid all forms of unfair discrimination in relation to patients, colleagues and other healthcare professionals

iv. Demonstrate in practice the requirements to ensure patient safety

11. Appropriate decision making, clinical reasoning and judgement

i. Demonstrate proficiency in clinical reasoning, through ability to:

- recognise, define and prioritise problems
- analyse, interpret and prioritise information, recognising its limitations
- ii. Make diagnosis
- describe the differential diagnosis of core conditions

iii. Demonstrate ability to think critically, by

- adopting an inquisitive and questioning attitude and applying rational processes
- recognising irrationality in oneself and in others
- recognising importance of own value judgements and those of patients

iv. Demonstrate insight into research & scientific method, through the:

- appreciation of quantitative and qualitative methodology
- choosing and applying appropriate methodologies and statistical tests with some understanding of the underlying principles
- recognising the relationship between evidence based medicine, audit and the observed variation in clinical practice

v. Exhibit creativity / resourcefulness, by:

- demonstrating self-reliance, initiative and pragmatism
- demonstrating preparedness to think outwith conventional boundaries when appropriate

Professional Behaviour

12. Professional Development and Attitudes

i. Recognise and contribute to meeting patients' needs within the health care system

ii. Behave in such a way as to maintain patient safety at all times

iii. Demonstrate acceptance of the professional responsibilities and role of the doctor, through:

- commitment to the "Duties of a Doctor" as defined by the MEDICAL COUNCIL OF INDIA and local codes including clinical governance
- participation in clinical governance and valuing professional self-reflection
- contributing to and outlining the roles, contributions of and benefits from other health care professionals and the, the multi professional team
- appreciating the value of, and opportunities for medical research and its role in career progression
- participation in teaching and mentoring students, colleagues and other health care professionals
- fostering a culture of life-long learning in the health service
- appreciating the role of the doctor as manager both in one's own practice and in the health care system
- appreciating the medical profession as a voice in society and an agent of change

Hostel rules and regulations

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All India Institute of Medical Sciences Bhopal (AIIMSB) is an apex medical teaching institute of the country and presently offers MBBS and BSc Nursing courses. Currently, a total of 160 undergraduate students (100 MBBS and 60 BSc Nursing) are being given admission each year. The institute provides residential facility to the students. General rules and regulations regarding hostel administration and code of conduct are briefly outlined in this manual. There are four hostels at AIIMSB. The total accommodation to be available in these hostels is as follows:

SN	Hostel	Number of rooms
1	Undergraduate Girls	132
2	Undergraduate Boys	260
3	Postgraduate	404
4	Nursing students	202
5	Staff Nurses	310
	Total	1308

1. Hostel Management

Overall management of the hostel is by a “Hostel committee” which comprises of the following members:

a) Director AIIMSB	Chairperson
b) Honorary Chief Superintendent(s)	Member(s)
c) Honorary Associate Superintendent (s)	Member(s)
d) President ABSA	Member
e) General Secretary ABSA	Member
f) Dean (Student Welfare)	Member
g) Vice-Dean (Student Welfare)	Member
Secretary	

Hostel committee is responsible for framing of overall management of the hostel, and its functions include:

- 1.1 Overall management of the hostel, including framing rules for the hostels, hostel mess, recreational facilities, and security personal.
- 1.2 Allocation of hostels or its parts to student groups, and to frame rules regarding allocation of rooms.
- 1.3 Overall supervision of hostel mess, award of contract to the agency running these services, mechanisms to ensure quality, hygiene and appropriateness of services offered.
- 1.4 Overall management of security services and arrangements for the hostels.
- 1.5 Human resource allocation in the hostels, including that of residential wardens, Junior wardens, and workers.

All the decisions taken by the Hostel committee will be executed by the Hostel administration. Hostel committee will meet at least four times in a year. An additional meeting may be convened by the Member Secretary as and when necessary.

2. Hostel Administration

2.1 The hostel administration comprises of the following officers/staff in the order of hierarchy:

- 2.1.1 Honorary Chief Superintendent (s)
- 2.1.2 Honorary Associate Superintendent (s)
- 2.1.3 Residential Warden(s)
- 2.1.4 Junior Wardens(s)

General duties and responsibilities of the various post holders in the hostel administration are defined here. If required, the duties and responsibilities are subject to changes at any time with the approval from the Hostel committee.

2.1.1 Honorary Chief Superintendent (HCS)

- a. The Honorary Chief Superintendent (HCS) is responsible for overall administration of the hostel and is the authority in charge for all hostel related issues. HCS is responsible for implementation of decisions taken by the hostel committee, through Honorary associate Superintendent (HAS), residential wardens (RW), and Junior wardens (JW).
- b. HCS will constitute sub-committees for smooth functioning of hostel services. These committees will have one Junior /Residential Warden (JW) as a member secretary, and HCS as a chairperson. HCS will hold monthly review meetings of these committees. There will be four student representatives in each committee. These committees include:
 - i. Hostel mess sub-committee
 - ii. Hostel maintenance sub-committee
 - iii. Common Room sub-committee
 - iv. Cleanliness sub-committee
- c. HCS is responsible to enquire into any acts of indiscipline, misconduct or inappropriate behaviour brought to the notice of Wardens, and take an appropriate action in consultation with Dean (Student Welfare). Dean (Student Welfare) may consider discussing the matter with the hostel committee on a case-to-case basis.
- d. Honorary chief Superintendent shall have the administrative control over the staff assigned to the hostel to work for welfare of the students and ensure better facilities, and ambience of the hostel premises.

2.1.2 Honorary Associate Superintendent (HAS)

- a. To assist the Honorary Chief Superintendent in maintaining the discipline of the hostel and all other works.
- b. To give permission to the Guests for residing in the common room on the request of the students
- c. Regular visit to the hostel to solve the problems of the students.

- d. Ensure better interaction between the students, residential warden and hostel staff
- e. To supervise the work of residential warden
- f. To take decision on the requests forwarded by the residential warden.
- g. Make duty roster of the wardens and support staff and take regular feedback from the students regarding the same.
- h. Report any act of indiscipline/non-performance of the hostel staff to the Honorary Chief Superintendent for necessary action
- i. To supervise various ledgers and registers of the hostel office
- j. Communicate with the parents/guardians of the inmates.
- k. To work closely with all hostel sub-committees.

2.1.3 Residential-Warden (RW)

- a. Room allocation to the students, and to issue furniture/electrical items to each student for placement/installation in the room. The residential warden shall seek approval from the HS/HAS for the same.
- b. Forward all the applications on hostel matters from students to the HAS.
- c. To ensure proper maintenance of the hostel rooms, common room, toilets, mess and premises i.e. coordination with Electrical maintenance section, building section and sanitary department.
- d. Maintain the proper record and recovery of hostel dues.
- e. To ensure proper water supply and drinking water arrangement in the hostel.
- f. Maintain the Hostel stock register
- g. To report to the Superintendent the names of the students who are violating the mess rules and defaulters in clearing the mess dues.
- h. To maintain the leave record of the students (To keep a watch on the In and Out register)
- i. Supervise the work of hostel support staff and security guards
- j. To take a daily roll call and to maintain attendance registers.
- k. Arrange for visit of students to the library during night (Hostel No1)
- l. Regular visit to students rooms to solve the day to day problems of the students
- m. To advise and guide in the smooth running of the mess i.e. display of the menu of the week and maintaining the quality of the food
- n. Take action on the complaints noted in the complaint register
- o. To maintain leave register for workers and forward their leave application to the honorary warden
- p. To arrange for medical help (doctor/ambulance) to the students in case of any medical emergency.
- q. To arrange for transport of students (Hostel No1) to airport/railway station during odd hours of night
- r. Daily report to the Honorary Superintendent about the maintenance of the civil and electrical works, discipline of the students, guest/visitor record and any other noticeable information. A consolidated report regarding the same should be mailed to the Honorary Chief Superintendent/Associate Superintendent daily.

- s. RW will ensure that the security guards and mess supervisors perform the following tasks
 - a. Security Guards
 - 1. To maintain the entry and exit register of all hostel inmates (students and residential wardens)
 - 2. To maintain a visitor register of all hostel inmates.
 - 3. To keep a watch so that no unwanted student/person resides in the hostel without the permission of the Honorary Superintendents
 - 4. To report any untoward incident to the Honorary Superintendents
 - b. Mess supervisor
 - 1. Preparation of the menu for the week in consultation with the student mess committee. Days for special meals or non vegetarian meals should be fixed and notified to the students.
 - 2. To avoid inconvenience to vegetarians, care should be taken in using separate utensils and refrigerators for veg and non-veg items. Mess workers should be instructed to handle these separately.
 - 3. Supervise and coordinate the mess workers
 - 4. To maintain the quality of food
 - 5. Maintain the mess premises in clean and hygienic condition
 - 6. To make available the sick diet to students on request.

2.1.4 Junior Warden

- a. To assist the residential Warden in the above mentioned work
- b. To directly supervise the workers in maintaining the cleanliness of the rooms, corridors, toilets and mess.
- c. To act as a back-up for the residential warden when the residential warden is on leave.

3. Allotment of Room

- a. At the time of admission of a student into the hostel and at the beginning of every year, each resident is required to submit a duly completed **Personal Data Form**. Local Guardian's address and phone number is optional. Email of the student and parent should also be provided. Any change of address / telephone number of the parent / local guardian, at any point of time, has to be intimated to the hostel office in writing.
- b. The Hostel administration will generally provide for each occupant one cot with mattress, table, chair and almirah. On arrival a student will report to the assistant warden and will take possession of the room after signing the inventory of the furniture, electrical and other items in the room.
- c. Room once allotted to a student for an academic year will not be changed, except on special situations with the permission of Warden.

- d. The Hostel administration, in case of shortage of rooms, can allot more than the capacity of the room.
- e. If the status of any student changes during the period of stay in the hostel, he/she is required to inform the assistant warden/Superintendent immediately and should vacate the hostel. If the Hostel administration finds that any hostel resident is not eligible for hostel accommodation and is residing in the hostel without due permission from the Warden, disciplinary action will be taken against such illegal occupants.
- f. Before vacating the rooms, all the installations should be handed over intact, in addition to the furniture to the assistant warden. The student should fill up the Room Vacating Slip in duplicate and take no dues slip from assistant warden.

4. Code of conduct (for students)

- a. Ragging is strictly prohibited as per the relevant directives of the Hon'ble Supreme Court. Any Student found involved in ragging shall be suitably punished including FIR with the Police and expulsion from the Hostel and Institute.
- b. Every student shall maintain a high standard of discipline, have respect for the Institute and conduct himself in a dignified manner.
- c. Student shall not do any such thing which may cause disturbance in studies or may be deemed vulgar in any way.
- d. All residents are required to always carry their valid Identity Cards issued to them by the Institute.
- e. The rooms, common areas and surroundings of the hostel should be kept clean and hygienic. Notices shall not be pasted on walls and walls shall not be scribbled on.
- f. Rooms are allotted to each student on his/her personal responsibility. He/she should see to the upkeep of his/her room, hostel and its environment.
- g. Students should bring to the notice of the assistant warden any pending maintenance work (Civil, Carpentry, Electrical, Sanitation) to be carried out in rooms, corridors, toilets or other areas in hostel premises.
- h. Students should co-operate in carrying out maintenance work and vacate their rooms completely when the Hostel administration requires the rooms for this purpose. On such occasions, the management will try to provide alternate accommodation. If any maintenance work is to be carried out when the room is under occupation, it is the occupant's responsibility to make the room available for the maintenance work.
- i. The students should not carry unauthorized/illegal movies in their rooms. Any violation will be dealt as per the legal provisions of the country.
- j. Students are not permitted to keep any fire arm (even licensed).
- k. Students are not allowed to leave station without prior permission of warden.

- l. Students are required to vacate their rooms while proceeding for summer vacation and also as and when required.
- m. Warden is authorized to open any locked room in case of an emergency.
- n. The resident of a room is responsible for any damage to the property in the room during his / her occupancy of that room and will be required to replace/repair at their own cost the damage, if any.
- o. In case of damage to or loss of hostel property the cost will be recovered from the students responsible for such damage or loss, if identified, or from all the students of the wing/hostel, as decided by the appropriate authority.
- p. The resident shall not move any furniture from its proper allotted place and also not damage them in anyway. If there are any additional items other than the above belonging to the hostel in a room, the occupant of the room shall hand over them to the Assistant warden, failing which he/she will be charged a penal rent as decided by the appropriate authority.
- q. The resident shall not remove any fittings from any other room or common area and get them fitted in his/her room.
- r. In the hostel premises following are strictly prohibited –
 - a. **Smoking**
 - b. Consumption of **alcoholic drinks/drugs**.
 - c. Gambling
 - d. Intimidation or violence
 - e. Willful damage to property
 - f. Entering the hostel premises in intoxicated state.
 - g. Shouting and using abusive language in their own hostel or in other hostel premises and campus.
 - h. Employing unauthorized persons for personal work such as washing clothes, etc.
 - i. Cooking in room.
- s. Room services are strictly prohibited. However, sick diet may be served in room after taking permission from Warden.
- t. Residents should not participate in any anti-national, antisocial or undesirable activity in or outside the campus.
- u. The use of electrical appliances such as immersion heaters, electric stove /heaters are not allowed in the rooms. Such appliances, if found a fine will be imposed. The use of audio systems which may cause inconvenience to other occupants are not allowed. The students should not view objectionable videos.
- v. When the students go out of their room they should switch off all the electrical / electronic appliances, and keep it locked. Violation will attract suitable penalty and punishment as decided by authorities.
- w. In case any student has to stay out of hostel for a day or more for any reason, he/she has to inform the warden and take his permission.

- x. All residents of hostels must be back in the hostel by 9.00 PM. if late he/she has to give written explanation. Residential warden will maintain the records of such events and report such events to the honorary superintendent for further action.If a student needs to stay out of the hostel after 9.00 pm due to any reason, s/he has to apply for and take prior written permission from the Warden. Violation of this rule may lead to disciplinary action including expulsion from the hostel.
- y. Water should be conserved,any leakage should be reported to hostel authorities.
- z. In case of a medical emergency,the residential warden needs to be informed urgently.

5. Additional Rules for Girls Hostel

The Following rules in addition to the rules given above will be in force in girls' hostels:

- a. If any girl student has to go to the town for any work, she must write the purpose, place, time of leaving and time of return in the register with the security guard on duty. She must return to the hostel latest by 9:00 p.m. In case a further delay is anticipated, She must seek prior permission from the Honorary Superintendent.
- b. A girl student must enter all the columns in the register regarding participation in curricular activities and extracurricular beyond the working hours of the Institute.
- c. A girl Student must submit the names and addresses of the local guardians with their signature, if any, duly authorized by the parents (or authorized guardian as per declaration in the admission form) in the prescribed form available with the warden.
- d. For late night stay at local guardians' residence or night halt, prior written permission of the Superintendent must be obtained. In addition, the local guardian must submit a letter stating that the student had stayed with them.
- e. Prior permission of the warden must be taken by the girl student for leaving to their homes. If she has to board a train/flight at odd hours, she needs to coordinate with the residential warden to facilitate for the same.
- f. No male person will be allowed inside the Girl's Hostel. Close family relatives (family, brother) can meet their ward in the visitor's room upto 7:30 p.m
- g. Other visitors may meet the Girl student outside the gate of the girls hostel up to 7:30 PM. with the permission of the Hostel Warden
- h. Permission must be taken from the warden regarding stay of a female relative in the Girls' Hostel.
- i. For visiting library after 9:00 p.m, the students shall move in a group (not less than four students) and co-ordinate with the residential warden regarding a security guard to facilitate their movement.
- j. Modification or addition of rules may be made and communicated as and when necessary.

6. Code of conduct for Residential Wardens

- a. The residential wardens are expected to observe highest standards of moral and ethical values as deemed appropriate by the society.
- b. They shall refrain from indulging into such activities like partying, playing loud music etc which may disturb the inmates of the hostel.
- c. Residential Wardens are expected to be on duty 24X7.
- d. Residential Warden shall be available in their office from 9:00 A.M to 5:00 P.M.
- e. Smoking, gambling, consumption of alcoholic drinks/drugs are strictly prohibited in the rooms of residential wardens.

- f. The residential wardens shall seek prior permission from the Honorary Chief Superintendents before proceeding on leave; they shall make suitable arrangement for their duties (via back-up wardens) in lieu of same.
- g. Under no circumstances, the residential warden (hostel no 1) can leave the hostel premises at night (9:00 p.m-6:00 am) without seeking prior written permission from the honorary chief Superintendent.
- h. Immediate family members (parents, siblings and their spouses) can visit the residential warden(hostel no 1) in her room, however prior written approval from the chief Superintendent is required in case an immediate family member/female friend wants to stay in her room.
- i. Other male visitors are not allowed in the room of residential Warden. They can meet her in the visitor's room after making entry in the visitor's register till 7:30 p.m.

7. Guests and Vistors

- a. Subject to availability of proper accommodation facility, the guest of a resident may be permitted, with the prior written approval by the Superintendent to stay in hostel for not more than two days on payment of the necessary charges, as fixed by the Hostel administration from time to time.
- b. No overnight guests are allowed in a student's room without permission of the Warden.
- c. In boys' hostels, the parents of students and other male guests may visit the student in his room after due permission from senior warden/warden and after making proper entry at the hostel gate.
- d. Male students/visitors are not allowed inside the girls' hostel, Immediate male family members can meet the female students in the visitor's room after seeking warden's permission and making proper entry at the hostel gate.
- e. Female visitors are not allowed in boys' hostels, however, lady family members may be allowed to visit a student in the visitors' room in the hostel between 9.00 a.m. to 7.00 p.m. with prior permission from the Warden.
- f. Violation of any of the above rules regarding stay in the hostels will lead to disciplinary action including expulsion from the hostel.

8. Disciplinary Measures

Any breach of the conduct rules or any act of indiscipline will invite an enquiry that will be conducted by the Hostel Administration. If the student is found guilty, then the Hostel Administration will take disciplinary action that it deems fit. Depending on the case, the administration reserves the right to take direct disciplinary action, amounting to even expulsion at short notice from the hostel/rustication from the institute.

9. Mess Rules

- a. Students should sign the Mess Joining Register kept in the messes at the time of their joining the mess.
- b. Students should sign the Mess Leaving Register kept in the mess whenever they leave the mess. Otherwise they will be deemed to be present and charged accordingly.
- c. Students are not permitted to dine in the mess without signing the Joining Register or after signing the Leaving Register.
- d. Lunch/Dinner will be served on buffet basis.
- e. The quantity of food will be unlimited except in the case of special items.
- f. Non-vegetarian items will be served as extra on specified days of the week.
- g. Mess rebate is admissible to the residents of Hostels on the following grounds:
 - a. Approved Study Holidays and Semester Vacation declared by the Institute.
 - b. Periods duly recommended by the Head of the Department and availed by the students for purposes such as participation in sports, competitions, seminars, educational tours, etc.
 - c. Period of absence due to serious illness requiring hospitalization, subject to the production of medical certificate, in genuine cases.
 - d. Any other valid reason with prior permission of Honorary Supdt
- h. Application for mess rebate should be made in the prescribed form and it should be submitted three days in advance. The application should be forwarded by the Warden. An acknowledgement may be obtained from the Mess Supervisor for having applied for mess rebate.
- i. In addition, students applying for mess rebate should also sign the Mess Leaving Register kept in the messes at the time of their leaving the mess.
- j. Minimum fixed charges will be applicable to the students applying for mess rebate. Such permission should be obtained from the senior warden and the Mess Supervisor be intimated well in advance of the absence.
- k. Students proceeding on medical Leave from the campus should produce the Medical Certificate issued by the concerned specialist at the time of their leaving.
- l. In case of sudden illness, information on leaving the mess should be made available to the Hostel Office immediately and the application for mess rebate should be submitted within the next 3 days.
- m. No student can claim mess rebate unless he/ she had intimated his / her absence in advance by applying for mess rebate in the prescribed form and signed the Mess Leaving Register at the time of his/ her leaving the mess.
- n. At the time of joining the mess after availing mess rebate, the students should sign the Joining Register kept in the mess.

- o. Students other than the Mess Committee Members are not permitted to enter the kitchen or store room of the mess on any account.
 - p. Students are not permitted to cook any food on their own accord in the mess or in their rooms.
 - q. Students on no account whatsoever will be permitted to take food outside the mess unless arranged by appropriate authority. Nor can they take mess utensils such as plate, spoon, tumblers, etc, to their rooms.
 - r. No food will be served in the rooms of the hostel for any student unless a permission from the assistant warden to the effect that the students' condition requires the food to be served in their rooms.
 - s. No diner shall waste food. Paying mess bill does not entitle a diner to waste food.
 - t. Assist in maintaining the mess and surroundings neat and clean. No notices shall be pasted on walls. Notices put up on the notice boards should not be removed by the diners. A separate bill board would be available for the residents to stick their bills.
 - u. All diners shall interact with the mess staff in the dining hall in a courteous manner.
 - a. After eating food, diners shall leave the cup, plate, waste food etc. in the designated bins.
 - b. If any diner is medically ill and requires a special diet (eg. Oil-less food) he / she can request the assistant warden/mess supervisor to arrange for the same at the mess.
 - c. The guest rates for the hostel mess will be decided by the Mess sub-committee and are subject to revision from time to time.
 - d. Mess Timings
 - 1. The mess timings are as follows and the students should adhere to these timings:
 - Breakfast : 7:00 AM to 8:00 AM
 - Lunch : 12:30 PM to 2:00 PM
 - Tea time : 5:00 PM to 6:00 PM
 - Dinner : 8:00 PM to 9:30 PM
- Subject to variations, if timing of classes change due to any reason.

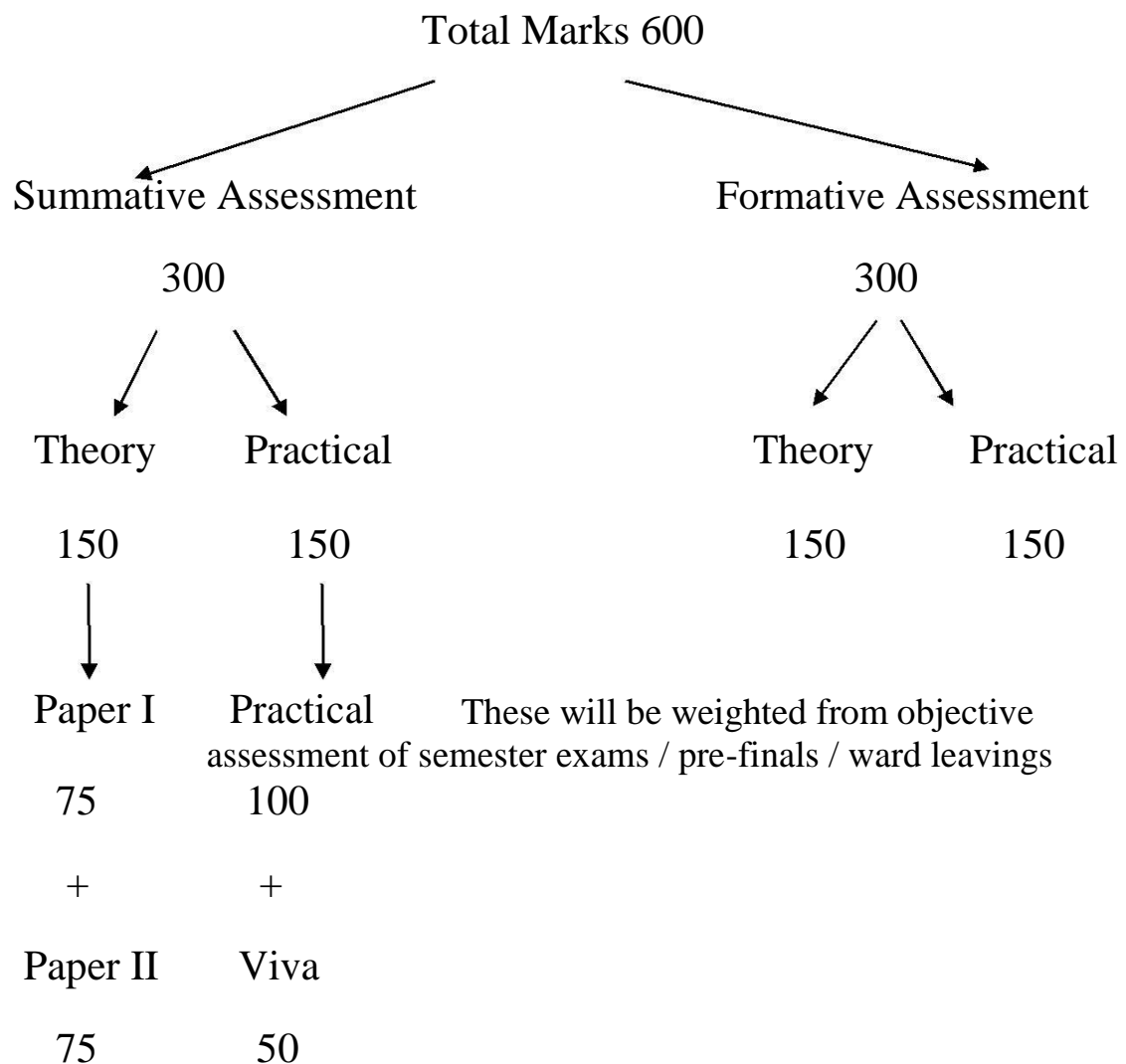
ACADEMICS

Marks Distribution in various subjects

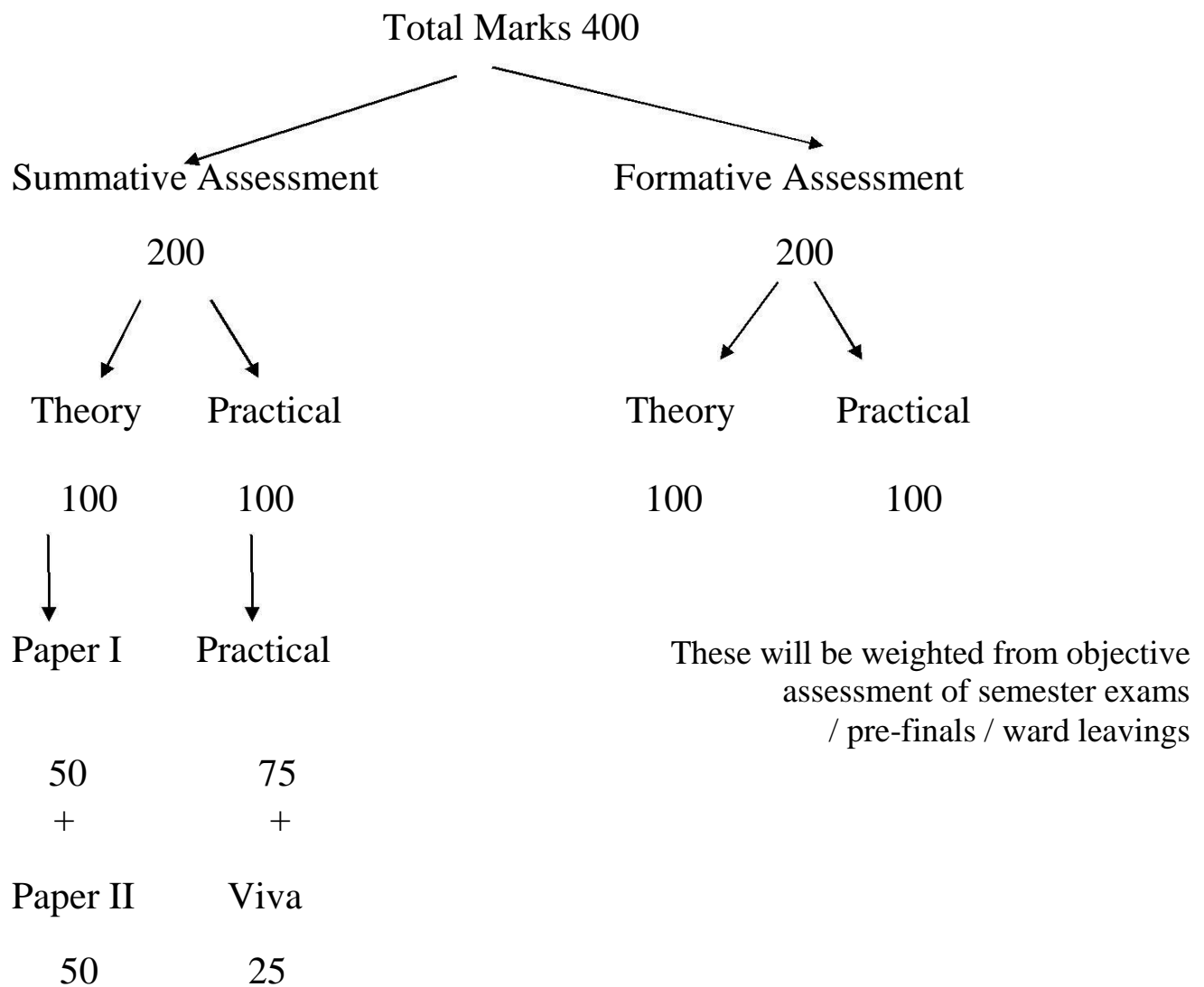
Subject	Total marks (50% from Theory performance and 50% from performance in practicals)	Number of Theory papers	Internal assessment (50% from theory performance and 50% from performance in practicals)
Anatomy	400	2	200
Biochemistry	400	2	200
Physiology	400	2	200
Community & Family Medicine including Ophthalmology	600	2	300
Forensic Medicine & Toxicology	200	1	100
Microbiology	400	2	200
Pathology	400	2	200
Pharmacology	400	2	200
Medicine including Psychiatry & Dermatology	400	2	200
Paediatrics	200	1	100
ObsGynae	400	2	200
Surgery including Orthopaedics& ENT	600	2	300

- There shall be at least one end semester examination at the end of each semester and one preliminary / pre-final exam (as the last end semester examination) before final professional examination for the purpose of calculating internal assessment marks.
- The conducts of mid-semester examinations are optional and may be conducted by respective departments. Internal assessment at AIIMS Bhopal is envisaged as continuous process and shall include performance in performances in activities like seminars, tutorials, inter-departmental teaching, ward-leaving etc and assessed objectively.

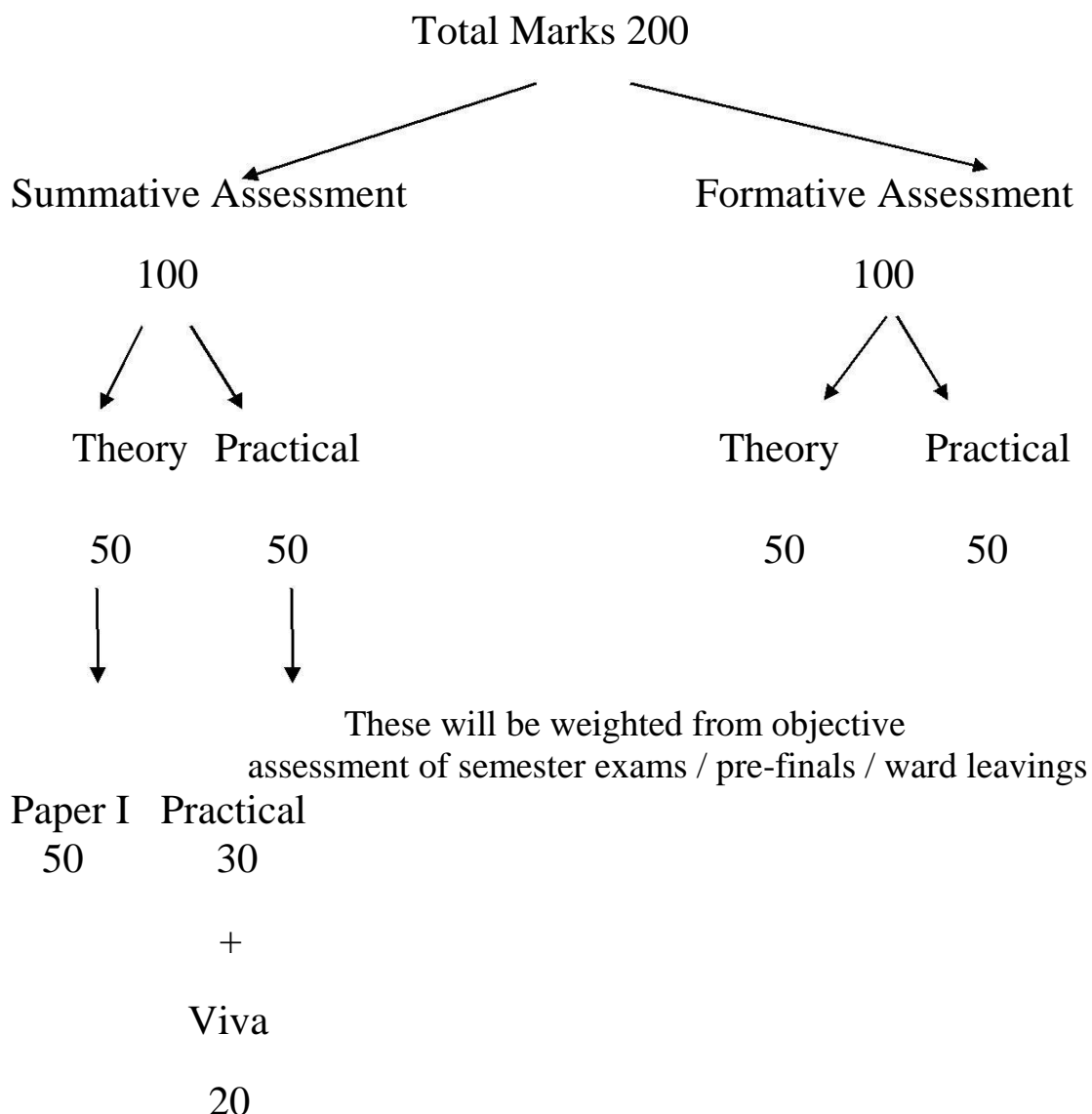
For a subject with 600 marks the distribution of marks is as follows:



For a subject with 400 marks the distribution of marks is as follows:



For a subject with 200 marks the distribution of marks is as follows:



The conduct of Mid Semester Exam List is optional and may be conducted by respective departments. Internal Assessment at AIIMS Bhopal is envisaged as continues process and shall include performances in activities like seminar, tutorials, inter departmental teaching, ward-leaving etc and their objective assessment.

Rules of Attendance:

Attendance of 75% in each subject and 80% aggregate is necessary to appear for 1st, 2nd and final professional examinations. 5% condonation in deserving cases can be done at the discretion of Director/Dean. Students with less than 75% aggregate will not be allowed to appear for the examinations.

Rules for Internal Assessment:

A minimum of 40% (separately in theory and practical) is necessary in each subject to appear for the examinations.

Supplementary Examinations:

Supplementary exam for 1st and final professional will be conducting within 45 days of declaration of the main examination results. If the student clears the supplementary exams he will be allowed to join the original batch.

In case the student fails in the supplementary exams in 1st professional he has to join the fresh batch and will appear for exams along with that batch. In case the student fails in the supplementary exams in final professional, he/she will have to write the succeeding main exam after 1 year.

Supplementary exams for II professional will be conducted every 6 months. Students will have to clear all the subjects of II prof 6 months before the final exams in order to appear for those exams.

ATTEMPTS

If a student does not qualify/pass MBBS 1st Professional examination in 3 attempts (regular & supplementary) and 2nd Professional Examination/3rd Professional Examination in 4 attempts i.e. 2 regular plus 2 supplementary examinations (for all subjects) for each phase then the name of such students will be struck off from the rolls of the Institute.

COMPULSORY ROTATORY INTERNSHIP TRAINING

After passing the Final M.B.B.S. examination, all the candidates will be required to do compulsory internship for a period of one calendar year (12 months) in the hospital and rural health centers recognized by the AIIMS. During the internship period, the interns are allowed a total of 15 days leave in full term of one year.

The degree of M.B.B.S. shall be awarded to them after satisfactory completion of one year's internship.



AIIMS Bhopal Hospital



AIIMS Hostel Mess as on January 2013

Hostel Mess



Cultural Festival



Library



Lecture Theatre



LAB

Schedule for foundation course MBBS 2015 (From 03.08.2015 onwards)

S. no.	Topic	Faculty in-charge	Remarks	Date & Time
1.	Breaking the ice	Dr Neelkamal Kapoor & CMET team	3 Hr	03.08.2015 2-5 PM
2.	Value of professionalism and ethics in Medicine	Director	1Hr	04.08.2015 2-3 PM
3	Expectations of society from medical professionals	Guest faculty	1Hr	04.08.2015 3-4 PM
4	Overview of MBBS COURSE	Dr Balakrishnan S	1Hr	04.08.2015 4-5 PM
5	Assessment and evaluation	Dr Arneet Arora	1 Hr	04.08.2015 5-6 PM
6	Community medicine	Dr Arun Kokane and team	2 field visits + 1 day briefing , 3 afternoons	05.08.2015 to 07.08.2015 2-5 PM
7	Importance of learning techniques and time management	Dr Rekha Lalwani & team	3 Hr	10.08.2015 2-5 PM
8	Psychosocial issues and stress management in medical students	Ms Sukanya Ray	1Hr	11.08.2015 2-3 PM
9	Communication skills	Dr Neelkamal Kapoor	1hr	11.08.2015 3-4 PM
10	Language skill	Dr Kapoor, Dr Sunita , Dr Bertha, Dr Ashwin	3 Hr	12.08.2015 2-5 PM
10	Basic life support	Dr JP Sharma, Dr Saurabh Saigal &team	3 Hr	13.08.2015 2-5 PM

11.	History of medicine and evolution of medical knowledge	Dr Neelkamal Kapoor	1Hr	14.09.2015 2-3 PM
12	Online resources and e-learning in medicine	Dr Abhijeet Pakhare	1Hr	14.08.2015, 3-4 PM
13	Why Research	Dr Sunita Athavale	3 Hr	17.08.2015 2-5 PM
14	Bio hazard safety	Dr Shashank Purwar	1Hr	18.08.2015 2-3 PM
15	AYUSH	Guest faculty	1hr	18.08.2015 3-4 PM
16	How to lead a healthy lifestyle	Dr Bhavna Dhingra	1hr	18.08.2015 4-5 PM
17	Saturday On all Saturdays (10AM-12noon) students will be divided into 5 groups and shall rotate in 5 departments	Blue group Surgery +burns + Plastic surg +neurosurg - Green group Medicine + paediatrics+ neurology - Yellow group Obs&Gynae +Dermatology+Psychiatry- Orange group Ortho +PMR+- Red group Laboratory -	Coordination by - DR John Santoshi- Ortho PMR Dr ShashankPurwar Laboratory Dr Rajneesh Joshi - Medicine and allied Dr PuneetAgarwal- Surgery and allied Dr Ajay Halder- Obs. &Gynec + Dermatology+ Psychiatry	08.08.2015 22.08.2015& 29.08.2015
18	Co- Curricular activities like Debates, group work, essay writing competition, etc shall be interspersed with the above mentioned topics			

Academic Calender, MBBS, AIIMS Bhopal

Semester	January				February				March				April				May				June				July				August				September				October				November				December																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																										
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Semester	Week wise distribution				
	Teaching	Exam/Prep	Vacation	Events Holidays	Total
Foundation (Beginning of 1st Semester)					4
1	12	2	2	2	18
2	20	8	2	2	32
3	14	2	2	2	20
4	24	2	2	2	30
5	12	6	2	2	22
6	25	1	2	2	30
7	17	1	2	2	22
8	23	1	0	2	26
Electives (End of 8th Semester)					4
9	11	8	1	2	22
Total	158	31	15	18	230

Teaching	Core teaching time	Electives in any of the departments of seven AIIMS
	Foundation course	
Examination	Preparatory time (Office hours, revisions etc)	
	1st Professional Examination Final (Anatomy, Physiology, Biochemistry)	
	2nd Professional Examination Final (Pathology, Microbiology, Pharmacology, Forensic Medicine)	
	3rd Professional Examination Final (Medicine, Surgery, Gynecology, CFM, Pediatrics)	
	Prelims	
	End Semester Examination	
	Mid Semester Examination	
Vacations	Vacation	

Holidays / events - Two weeks in each semester is a period to adjust for Gazzated holidays, and Cultural/Sports events for which teaching may be suspended

- The members stressed upon having 4 weeks foundation course at the beginning of the course and provision of 4 week electives during the course. It will be mandatory for every student to undergo electives however he/she will have liberty to choose the department/s for doing electives. No single elective shall be of less than two weeks duration and student will have to produce duly signed record of electives undergone, by the concerned HoD. The electives can be opted in any of the seven AIIMS. These electives shall be separately mentioned in the Transcript certificate.

ALL INDIA INSTITUTE OF MEDICAL SCIENCES BHOPAL

I & II SEMESTER MBBS TIMETABLE (FROM 03.08.2015)

T/S- TUTORIAL/SEMINAR

	8-9 AM	9-10 AM	10-11 AM	11 AM- 01.00 PM	2-3 PM	3-5 PM
Monday	-----	Physiology	Physiology	Practical Physiology/ Biochemistry	Anatomy	Dissection
Tuesday	Biochemistry	Physiology	Physiology	Practical Physiology/ Biochemistry	Physiology (T/S)	Dissection
Wednesday	Anatomy	Anatomy	Anatomy	Dissection	Biochemistry	Histology
Thursday	Anatomy	Biochemistry	Biochemistry	Dissection	Physiology (T/S)	Practical Physiology/ Biochemistry
Friday	-----	Physiology	Physiology	Dissection	Biochemistry (T/S)	Practical Physiology/ Biochemistry
Saturday						