

**NATIONAL MEDICAL COMMISSION  
POSTGRADUATE MEDICAL EDUCATION BOARD**

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**POSTGRADUATE MEDICAL EDUCATION REGULATIONS**

**2021**

In Exercise of the powers conferred by Section 57 of the National Medical Commission Act, 2019, the National Medical Commission hereby makes the following regulations, namely:-

**1. SHORT TITLE AND COMMENCEMENT:**

- 1.1. These regulations may be called "The Postgraduate Medical Education Regulations, 2021.
- 1.2. They shall come into force on the date of their publication in the official Gazette.
- 1.3. These Regulations shall be applicable for all the Institutions coming under the purview of National Medical Commission.

**2. GENERAL CONDITIONS TO BE OBSERVED BY POSTGRADUATE TEACHING INSTITUTIONS:**

- 2.1. Postgraduate Medical Education in broad specialties shall be of three years duration in the case of degree course and two years in the case of Diploma course after MBBS and in the case of Super specialties, the duration shall be of three years after MD/MS.
- 2.2. Postgraduate curriculum shall be competency based.
- 2.3. Learning in postgraduate programme, though essentially autonomous and self-directed, shall also include assisted learning.
- 2.4. A combination of both formative and summative assessment is vital for the successful completion of the PG programme.

- 2.5. A modular approach to the course curriculum is essential for achieving a systematic exposure to the various sub-specialties concerned with a discipline.

### **3. GOALS OF POSTGRADUATE MEDICAL EDUCATION PROGRAMME**

The goal of postgraduate medical education shall be to produce competent specialists and/or Medical teachers:

- 3.1. Who shall recognize the health needs of the community, and carry out professional obligations ethically and in keeping with the objectives of the national health policy;
- 3.2. Who shall have mastered the competencies, pertaining to the specialty, that are required to be practiced at the secondary and the tertiary levels of the health care delivery system;
- 3.3. Who shall be aware of the contemporary advance and developments in the discipline concerned;
- 3.4. Who shall have acquired a spirit of scientific enquiry and are oriented to the principles of research methodology and epidemiology; and
- 3.5. Who shall have acquired the basic skills in the teaching of medical professionals.

### **4. GENERAL OBJECTIVES OF POST-GRADUATE TRAINING EXPECTED FROM STUDENTS AT THE END OF POST-GRADUATE TRAINING**

At the end of the postgraduate training in the discipline concerned the student shall be able to:

- 4.1. Recognize the importance of the concerned specialty in the context of the health needs of the community and the national priorities in the health sector.
- 4.2. Practice the specialty concerned ethically and in tune with the principles of primary healthcare.
- 4.3. Demonstrate sufficient understanding of the basic sciences relevant to the concerned specialty.
- 4.4. Identify social, economic, environmental, biological and emotional determinants of health in a given case, and take them into account while planning therapeutic, rehabilitative, preventive and promotive measure/strategies.
- 4.5. Diagnose and manage majority of the conditions in the specialty concerned on the basis of clinical assessment, and appropriately selected and conducted investigations.
- 4.6. Plan and advice measures for the prevention and rehabilitation of patients suffering from disease and disability related to the specialty.

- 4.7. Demonstrate skills in documentation of individual case details as well as morbidity and mortality rate relevant to the assigned situation.
- 4.8. Demonstrate empathy and humane approach towards patients and their families and exhibit interpersonal behavior in accordance with the societal norms and expectations.
- 4.9. Play the assigned role in the implementation of National Health Programme, effectively and responsibly.
- 4.10. Organize and supervise the chosen/assigned health care services demonstrating adequate managerial skills in the clinic/hospital or the field situation.
- 4.11. Develop skills as a self-directed learner, recognize continuing education needs; select and use appropriate learning resources.
- 4.12. Demonstrate competence in basic concepts of research methodology and epidemiology, and be able to critically analyze relevant published research literature.
- 4.13. Develop skills in using educational methods and techniques as applicable to the teaching of medical/nursing/paramedical students, general physicians and paramedical health workers.
- 4.14. Function as an effective leader of a health team engaged in health care, research and training.

## **5. STATEMENT OF THE COMPETENCIES:**

Keeping in view the general objectives of postgraduate training, each discipline shall aim at development of specific competencies which shall be defined and spelt out in clear terms. Each department shall produce a statement and bring it to the notice of the trainees in the beginning of the programme so that he or she can direct the efforts towards the attainment of these competencies.

## **6. COMPONENTS OF THE POSTGRADUATE CURRICULUM:**

The major components of the Postgraduate curriculum shall be:

- 6.1. Theoretical knowledge
- 6.2. Practical and clinical skills
- 6.3. Publication/submission of a Research article in scientific journals or Presentation of the paper in National Conference of the concerned Society.
- 6.4. Soft skill attributes including communication skills.
- 6.5. Training in research methodology, Medical Ethics and Medico legal aspects.

## **7. STARTING OF POSTGRADUATE MEDICAL COURSES AND THEIR RECOGNITION:**

- 7.1. An institution intending to start a Post Graduate medical education course or to increase the annual intake capacity in an already ongoing course shall obtain prior permission of the Medical Assessment and Rating Board of National Medical Commission, in accordance with the provisions under section 28 of NMC Act, 2019.
- 7.2. The Institution who have started a new postgraduate or higher specialty course shall apply for recognition of the Post Graduate Medical qualification to the Post Graduate Medical Education Board (PGMEB) of the National Medical Commission through the affiliating University, when the first admitted batch shall be due to appear for the examination to be conducted by the affiliating University.

In the event of deficiencies being found in the assessment, the Institution shall be granted an opportunity to submit compliance within 30 days from the date of communication of deficiencies by the N M C . Such an opportunity to comply with the deficiencies shall be availed by the Institute only twice. After the correction of the deficiencies the course shall be recognized and included in the list of recognized qualifications maintained by NMC. In all other cases, the prior permission of the National Medical Commission granted under section 28(1) of NMC Act, 2019, shall be deemed to have lapsed. Further, in such cases; only the qualifications in respect of first four batches of Postgraduate degree courses admitted to that Institution to that specialty shall be included in the recognized qualifications maintained by PGMEB.

- 7.3. For starting of fresh Postgraduate course in an existing Medical College or starting of fresh courses in a new Medical college, the applicant Institute shall mandatorily obtain consent of affiliation from the affiliating University.
- 7.4. The recognition so granted to a Postgraduate Course shall be for a period of five years, upon which it shall have to be renewed. The procedure for Renewal of recognition shall be same as applicable for the Grant of recognition. The Institute shall apply for renewal of recognition of Postgraduate course in the Institution at least six months prior to the expiry of the validity.
- 7.5. Failure to seek timely recognition as required in sub- clause 7.2 shall invariably result in stoppage of admission to the concerned Post Graduate Course.

In the event of failure of the institute to seek recognition at appropriate time for existing Post Graduate courses, the Post Graduate Medical Education Board

may recommend exemplary penalty as prescribed in the Penalty clause of the NMC.

- 7.6. The Medical College /Institution may apply for increase in the intake of Post Graduate seats in the concerned specialty one year after the permission for the starting of the same was given, even before the recognition for concerned Post Graduate seats is conferred by Post Graduate Medical Education Board. This provision is introduced to maintain dynamic state of Post Graduate seats available.
- 7.7. Any Institute planning to start Postgraduate course in clinical specialties shall necessarily have permission from the PGMEB for starting Postgraduate courses in Pre and Para Clinical subjects. Pre-Clinical subjects consists of Anatomy, Physiology and Biochemistry. Para clinical subjects consists of courses in Pharmacology, pathology, Microbiology, community Medicine and Forensic Medicine. This shall not be applicable to standalone Postgraduate Institutions.
- 7.8. The existing/new medical colleges should mandatorily have the department of Blood Bank with components of blood separation unit.

## **8. NOMENCLATURE OF POSTGRADUATE COURSES.**

The nomenclature of postgraduate medical courses shall be as provided in the Schedule annexed to these Regulations.

## **9. GENERAL**

- 9.1. Medical Colleges recognized for running Bachelor of Medicine and Bachelor of Surgery (MBBS) course and Medical Institutions recognized for running post-graduate courses prior to the commencement of the National Medical Commission Act 2019 shall be eligible for starting a post-graduate medical education course or to increase the intake capacity in any already ongoing postgraduate medical education course.
- 9.2. Medical Colleges not yet recognized for the award of MBBS degree under the National Medical Commission Act, 2019, may apply for starting of a Post-graduate medical education course in pre-clinical and para clinical subjects, at the time of third renewal i.e., along with the admission of fourth batch for the MBBS course; and in clinical subjects, at the time of fourth renewal, i.e., along with the admission of fifth batch for the MBBS course.
- 9.3. The National Medical Commission may exempt any such existing/proposed non-teaching institutions or specialist institutions or autonomous Institutions owned and managed by the Central Government/State Government/Institute of eminence or excellence conferred by the Government of India from fulfilling the

prescribed provision of having an undergraduate teaching facility, and allow starting of Postgraduate medical courses subject to they fulfilling all required criteria.

- 9.4. The maximum number of students for a postgraduate medical course, who can be registered in any recognized department, for training for the award of postgraduate degree by the affiliating university, shall be determined by the facilities available in the department in terms of infrastructure, teaching staff and relevant clinical material.
- 9.5. Every student selected for admission to a Post Graduate medical course in any of the medical institutions shall register in the State Medical Council where he is pursuing his Post graduation course within a period of one month from the date of admission, failing which his admission to Postgraduate course shall stand cancelled.
- 9.6. A foreign national who wishes to pursue Postgraduate Medical course in India shall obtain temporary registration from the Ethics and Medical Registration Board of National Medical Commission. The Ethics and Medical Registration Board may, on payment of the prescribed fee for registration, grant temporary registration to such foreign student for the duration of the Post Graduate course limited to the medical college/institution to which he is admitted for the time being exclusively for pursuing postgraduate studies. If for any reason, the study period gets extended, the candidate shall necessarily obtain extension of temporary registration from the Ethics and Medical Registration Board of NMC.

Provided further that temporary registration to such foreign national shall be subject to the condition that such person is duly registered with appropriate registering authority in his own country wherefrom he has obtained his Basic Medical qualification, and is duly recognized by the corresponding Medical Council or concerned authority.

## **10. SELECTION OF POSTGRADUATE STUDENTS.**

### **10.1. Selection to Postgraduate Broad Specialty courses (MD/MS)**

- a. The common Final year Undergraduate examination to be known as “National Exit Test (NEXT)”, from the date it becomes operational, shall be the basis for admission to the postgraduate broad specialty courses in each academic year. Till such time that it is implemented, NEET - PG examination shall continue to operate for selection of Postgraduate students to Broad Specialty courses.
- b. The designated authority to conduct the “National Exit Test” shall be as specified by the National Medical Commission.

- c. In order to be eligible for admission to Postgraduate course for an academic year, the candidate should have qualified the National Exit test, and be eligible to be granted a license to practice as a medical practitioner and for enrollment in the State medical register or the National medical register, as the case may be.
- d. The Rules and Regulations regarding the conduct of National Exit Test (NEXT) shall be notified by the designated authority.
- e. Schedule and Admission process of Postgraduate Broad Specialty courses shall be per annexure 3.

## **10.2. Selection to Postgraduate Super Specialty courses**

- a. There shall be a uniform entrance examination namely “National Eligibility–cum-Entrance Test ( Super Speciality)” for admission to Postgraduate super specialty courses in each academic year and shall be conducted under the overall supervision of the National Medical Commission.
- b. The designated authority to conduct the “National Eligibility cum Entrance Test “(NEET SS) shall be as specified by the National Medical Commission.
- c. The Rules and Regulations regarding the conduct of “National Eligibility cum Entrance Test – Super Specialty (NEET-SS)” shall be notified by the designated authority.
- d. Schedule and Admission process of Super Specialty Postgraduate courses (DM/Mch) shall be per annexure 4.

**10.3** No authority/institution shall admit any candidate to any postgraduate medical course in contravention of the criteria/procedure as laid down by these Regulations and/or in violation of the judgments passed by the Hon’ble Supreme Court in respect of admissions. Any candidate admitted in contravention/ violation of aforesaid shall be discharged by the Commission forthwith. The authority/institution which grants admission to any student in contravention/ violation of the Regulations and/or the judgments passed by the Hon’ble Supreme Court, shall also be liable to face such action as may be prescribed by the Penalty Regulations of NMC.

## **11. COMMON COUNSELING**

- 11.1. There shall be a common counseling for admission in all Medical Educational Institutions to all Postgraduate Broad -Specialty courses (Diploma/ MD/ MS) on the basis of merit list of the National Exit Test and to all Postgraduate Super-Specialty courses (DM/MCh) on the basis of merit list of the National Eligibility-

cum-Entrance Test.

- 11.2. The Designated Authority for counselling for all the postgraduate broad specialty seats in various Institutions in the country coming under the purview of National Medical Commission shall be the Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India. The designated authority shall notify the Rules and Regulations for Common Counseling.
- 11.3. The Designated Authority for counselling for all the Postgraduate Super- Specialty seats in various Institutions in the country coming under the purview of the National Medical Commission shall be the Directorate General of Health Services, Ministry of Health and Family Welfare, Government of India. The designated authority shall notify the Rules and Regulations for Common Cancellation.

## **12. PERIOD OF TRAINING**

The Postgraduate students shall be called Junior Residents in all broad specialties and as Senior Residents in Super Specialties.

The period of training for the award of various postgraduate degrees shall be as follows:

### **12.1. Broad Specialities: Doctor of Medicine (MD) / Master of Surgery (MS)**

The period of training for obtaining these degrees shall be three completed years including the period of examination.

Provided that in the case of students possessing a recognised two year postgraduate diploma course in the same subject, the period of training, including the period of examination, shall be two year.

### **12.2. Super Specialities: Doctorate of Medicine (DM) / Magister Chirurgiae (MCh)**

The period of training for obtaining these Degrees shall be three completed years including the examination period.

Provided that where an institution, on the date of commencement of these Regulations, is imparting five years training in Neurology and Neurosurgery, such institution shall alter it to six years training course.

### **12.3. Diplomas**

The period of training for obtaining a Postgraduate Diploma shall be two completed years including the examination period.

## **13. MIGRATION**

Under no circumstance, Migration transfer of student undergoing any Post Graduate Degree/ Diploma / Super Specialty course shall be permitted by any University/ Authority.

## 14. FACULTY

### 14.1. Minimum Faculty Required in a Postgraduate Department.

- a. **Clinical Departments of Broad Specialties** (with Indoor Beds and Units):  
The first unit of the department shall have minimum three faculty consisting 1 professor, 1 Associate Professor and 1 Assistant Professor. The subsequent units may be headed a by Professor/ Associate Professor along with two Assistant Professors. All units shall have minimum one Senior Resident.
- b. **Departments of Anatomy, Physiology, and Biochemistry:** To add 1 Assistant Professor and 1Senior Resident in addition to the faculty/Resident prescribed for their annual sanctioned MBBS intake.
- 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.
- d. **All the remaining Departments** should have minimum of three faculty per Unit i.e. 1 Professor, 1 Associate Professor and 1 Assistant Professor and 1Senior Resident.
- e. **Super Specialty Departments** (with indoor beds and units): The first Unit of the department shall have minimum three faculty consisting of 1 Professor, 1 Associate Professor and 1 Assistant Professor. The Subsequent units may be headed by a Professor/Associate Professor along with two Assistant Professor.
- f. The requirement of one Professor per Department is only a minimum requirement. It is desirable that all the Units having Post Graduate students should be headed by a Professor. It has to be noted that down gradation for only one cadre below is permitted i.e., an Extra Associate Professor can be considered against the requirement of an Assistant Professor.
- g. A faculty cannot be considered against the requirement of a Senior Resident.
- h. The above mentioned requirement of teaching staff and senior residents are only minimum requirements. The staff strength of the Department/unit shall be enhanced based on the clinical load.

### 14.2. Eligibility for being designated Postgraduate Guide:

This would be in accordance with the “Minimum Qualifications for Teachers in Medical Institutions Regulations, 2021”

1. **Broad Specialties:** A teacher in a Medical College or Institution having a total of 5 years teaching experience as Assistant Professor and above after obtaining post-graduation degree in the concerned broad specialty subject, shall be recognized as Post Graduate Guide in that specialty, provided the department has been recognized/Permitted for conducting Postgraduate course in that subject.
  2. **Super Specialities:** A teacher in a Medical College or Institution having a total of 2 years teaching experience as Assistant Professor and above after obtaining the Super Specialty degree in the concerned super specialty subject, shall be recognized as Post Graduate Guide in that Super Specialty subject, provided the department has been recognized / permitted for conducting Super Specialty courses in that subject. Further, in the case of super specialty courses which were newly instituted, relaxation of qualification and experience for recognition as Post Graduate Guide granted by erstwhile MCI shall be continued for ten years from the date of start of the course by erstwhile MCI. This relaxation ceases to exist to all the existing super specialty courses once they complete ten years from the date on which they were started by erstwhile Medical Council of India. This provision is also applicable to the new courses to be instituted henceforth by National Medical Commission.
- 14.3. In addition, the institutions having both undergraduate and postgraduate courses shall fulfill the requirement of Teaching and non-teaching staff as per the “Minimum Requirements for Annual MBBS Admissions Regulations”.

## **15. INSTITUTIONAL FACILITIES**

### **15.1. Institutions with ongoing Undergraduate Medical courses (MBBS)**

- a. **Facilities:**  
Facilities and space in accordance with the Minimum Requirements for annual M.B.B.S. Admissions Regulations, 2020 of the NMC shall be in place at the time of application for starting the course or increasing seats.
- b. **Individual Department/ Specialty Requirements:**  
The specific and unique requirements for individual disciplines/specialties shall be mandatorily followed.
- c. **In-Patient Facilities:**
  1. A Broad specialty Department to be recognized for training of Post Graduate students, shall have minimum beds as mentioned in the “Minimum Requirements for Annual MBBS admissions Regulations, 2020” for the sanctioned intake of MBBS students.

2. In case of super-specialty departments there must be a minimum of 20 beds in a unit except in departments such as radiological specialties.
  3. Adequate High Dependency Unit and Intensive Care Unit Beds and other facilities shall be available.
  4. There should be adequate facilities for surgery and various non-invasive and invasive procedures/ interventions for diagnosis and management.
- d. Out-Patient Facilities:
1. There shall be adequate space and sufficient number of consultation cubicles available in the Out-Patient Department.
  2. Out-Patient load must be according to the Minimum Requirements for Annual MBBS Admissions Regulations, 2020 of the NMC.
  3. Specialty Clinics shall also be available for the training of post-graduate students in the relevant broad and super specialty department where such Postgraduate students will be posted.
- e. Laboratory and Imaging Facilities:
1. The institution shall have adequate laboratory and imaging facilities for the training of Post Graduate students and for research.
  2. Laboratories shall provide all the investigative facilities required and shall be regularly updated keeping in view the advancement of knowledge and technology and of research requirements.
  3. For training of students in non-clinical departments, proper and contemporary laboratory facilities shall be made available.
  4. Imaging facilities shall be contemporary and in keeping with the latest technology available for diagnosis and interventions. The institution shall have both CT Scan and MRI Scan facilities before starting a Postgraduate course.
  5. Out sourcing of the Laboratory/Radiological facilities shall not be permitted, where post graduate courses are being conducted.

- f. Equipment
  1. The department shall have adequate number of all such equipment including the latest ones necessary for training and as may be prescribed by the PGMEB for each specialty from time to time.
  2. The department shall have digital library and seminar hall with well equipped high speed internet Wi-Fi connected media room to have direct relay from in-house operation theaters and also to conduct or attend global scientific live programmes.
- g. All Institutions imparting Postgraduate education shall necessarily have a simulation laboratory for training of the Postgraduate students. The requirement of equipment in the simulation lab is based on the specialty concerned.

## **15.2. Standalone Postgraduate Medical Institutions**

The Medical Institutions that have been granted permission to start Postgraduate Courses in broad specialties under Section 9.3 of these Regulations shall have the following facilities.

### **1 Hospital**

- (a) The Institute shall have an hospital with minimum 400 beds.
- (b) The Hospital, in addition to clinical specialties shall have full-fledged Departments of Bio-chemistry, Pathology, Microbiology and Radiology/ Imaging including CT scan and MRI facilities.
- (c) The Hospital should have been running for at least two years prior on the date of application to seek permission to start the postgraduate course.

### **2 Provision of Memorandum of Understanding**

A Standalone Postgraduate Medical Institution eligible to start postgraduate courses may enter into a comprehensive Memorandum of Understanding with an ongoing recognized medical college, located within a reasonable distance from it as it would not disrupt the smooth running of the said courses, for the purpose of availing the facilities of the basic medical sciences departments of the college. The Medical College shall be located in the same city and within a distance of 10 Km.

### **3 Individual Department/ Specialty Requirements**

- (a) The specific and unique requirements for individual disciplines/ specialties shall be mandatorily followed.
- (b) The Institution should provide facilities consistent with the all-round training including training in basic medical science and other departments related to the subject as recommended by the PGMEB.
- (c) Each department imparting training for postgraduate broad

speciality degree should have adequate variety and mix of cases that are regularly worked-up/ investigated as required with the Departments of Biochemistry, Pathology, Microbiology and Radiology/ Imaging so as to provide ample opportunities for learning.

- (d) There should be facilities of ancillary departments for coordinated training.
- (e) The department shall have digital library and seminar hall with well equipped high speed internet Wi-Fi connected media room to have direct relay from in-house operation theaters and also to conduct or attend global scientific live programmes.
- (f) The additional staff as mentioned in 14.1 is not applicable for standalone Postgraduate Medical Institutions.

4 Clinical, Laboratory and Imaging Facilities including Equipment.

The Clinical Laboratory and Imaging Facilities including Equipment shall be at par with those expected of a Medical College/ Institution as indicated in Section 15.1.

**16. NUMBER OF POST GRADUATE STUDENTS TO BE ADMITTED**

**16.1 Teacher Student ratio:** The ratio of recognized Postgraduate teacher to the number of students to be admitted for the postgraduate courses in broad and super-specialties is outlined in the table given below:

<b>Teacher: Student ratio of PG students</b>			
<b>Designation</b>	<b>1 PG/yr</b>	<b>2 PG/yr</b>	<b>3 PG/yr</b>
Professor	Never supervised any MD/MS student as recognized PG guide	Supervised 1 MD/MS student per year for at least two years	Five years as Professor + supervised at least two MD/MS student thesis per year for three years as Professor + at least one eligible research publication in the past three years as Professor + The department must be running postgraduate degree course for minimum of ten years.
Associate Professor	Never supervised any MD/MS student as recognized PG guide	Supervised 1 MD/MS student per year for at least two years + At least one eligible research publication in the past two years as Associate Professor + The Associate Professor shall be working as Unit Chief	

<b>Teacher: Student ratio of PG students</b>			
<b>Designation</b>	<b>1 PG/yr</b>	<b>2 PG/yr</b>	<b>3 PG/yr</b>
Assistant Professor	Meets eligibility criteria for promotion as Associate Professor but not yet promoted to that post and is eligible to be a PG guide.		

- 16.2. The maximum intake of postgraduate students in specialities where units are prescribed shall not exceed 3 PG seats per unit per academic year. The Institute should have adequate surgical load to get maximum seats in surgical specialities.
- 16.3. The intake of postgraduate students in the speciality of Anaesthesiology shall be dependent on facilities available in the department, speciality clinics offered, services offered outside the operation theatre, specialised OT services provided and the number of surgical procedures carried out.
- 16.4. The intake of postgraduate students in the speciality of Radio Diagnosis and Radiation Oncology shall depend on the Radiological facilities offered, the number of Radiological investigations carried out, specialised Radiological investigations done and specialised equipments available in the department.
- 16.5. The requirement of units and beds shall not apply in the case of Postgraduate courses in Basic and para-clinical departments.
- 16.6. The Institute can have any number of units to meet the needs of the workload. But only the minimum number of units required as per the Minimum Standard Requirements for annual MBBS admissions Regulations, 2020 of the NMC shall be taken into account to calculate the number of postgraduate seats to be sanctioned.
- 16.7. Provided that against the very same units, teaching personnel and infrastructure, no other postgraduate courses under any other body like National Board of Examinations, College of Physicians & Surgeons, etc., are permitted.
- 16.8. Clinical material: While considering the postgraduate students to be admitted, in addition to sections 14 and 15, the available clinical material and the appropriate clinical load for training as notified from time to time for each specialty by the Postgraduate Medical Education Board shall also be considered.

## **17. TRAINING PROGRAMME**

- 17.1. The training given with due care to the Post Graduate students in the recognized institutions for the award of various Post Graduate degrees shall determine the

expertise of the specialist and / or medical teachers produced as a result of the educational programme during the period of stay in the institution.

Provided that in respect of MD/MS students admitted with effect from academic session 2021, the training imparted as part of District Residency Programme in District Health System, as provided for in section 17.15 of these Regulations shall be considered as training imparted in a medical institution.

- 17.2. All the candidates joining the Post Graduate training programme shall work as Full Time Residents during the period of training and shall attend not less than 80% (Eighty percent) of the imparted training during each academic year. Further, pregnant Postgraduate students be allowed maternity leave as per existing Rules and Regulations. They shall also be paid stipend during this period. However, their term shall be re fixed by the concerned University to makeup the period lost in the training programme due to maternity leave.
- 17.3. The Post Graduate students undergoing Post Graduate Degree/Super-Specialty course in all the Institutions including private institutions shall be paid stipend on par with the stipend being paid to the Post Graduate students of State Government Medical Institutions/Central Government Medical Institutions, in the State/Union Territory where the institution is located. Similarly, the matter of grant of leave to Post Graduate students shall be regulated as per the respective Central/State Government rules. Heavy penalty shall to be levied on the Institutions for any violation of this clause as per Penalty Regulations of NMC.
- 17.4. Every institution undertaking Post Graduate training programme shall set up an Academic cell or a curriculum committee, under the chairmanship of a senior faculty member, which shall work out the details of the training programme in each specialty in consultation with other department faculty and also coordinate and monitor the implementation of these training Programmes.
- 17.5. The training programmes shall be updated as and when required. The structured training programme shall be written up and strictly followed, to enable the examiners to determine the training undergone by the candidates.
- 17.6. There shall be peripheral postings for Broad Specialty Postgraduate students in different Departments/Hospitals in keeping with the educational/ training requirements, for not more than four months excluding District residency Programme.
- 17.7. Post Graduate students of MS/MD/DM/MCh degree courses shall maintain a dynamic e-log book which needs to be updated on weekly basis about the work carried out by them and the training programme undergone during the period of training. MS/Mch students shall mandatorily enter details of surgical operations assisted or done independently.
- 17.8. The record (Log) books shall be checked and assessed periodically by the faculty members imparting the training.
- 17.9. The period spent during Super Specialty Postgraduate training by the Post Graduate students including in-service Post graduates, shall not be counted as teaching experience by any authority for effecting promotion.

17.10. The Post Graduate students shall be required to participate in the teaching and training programme of undergraduate students and interns.

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.

**17.12. Post Graduate training shall consists of following:**

**1. Broad Specialities: Doctor of Medicine (MD) / Master of Surgery (MS)**

- (a) Basic Medical Sciences: The teaching and training of the students shall be through lectures, seminars, journal clubs, group discussions, participation in laboratory and experimental work, and involvement in research studies in the concerned specialty and exposure to the applied aspects of the subject relevant to clinical specialties.
- (b) Clinical disciplines: The teaching and training of the students shall include graded responsibility in the management and treatment of patients entrusted to their care; participation in seminars, journal clubs, group discussions, clinical meetings, grand rounds, and clinico-pathological conferences; practical training in diagnosis and medical and surgical treatment; training in the Basic Medical Sciences, as well as in training allied clinical specialties. Postgraduate Degree Residents in Surgical Specialties shall participate in surgical operations as well.

**2. Doctorate of Medicine (DM)/Magister Chirurgiae (Mch)**

The training shall be on the same pattern as for MD/MS in clinical disciplines; with practical training including advanced diagnostic, therapeutic and laboratory techniques, relevant to the subject of specialization. Postgraduate Super Specialty students in surgical specialties shall participate in surgical operations as well.

**3. Diplomas**

The teaching and training of the students shall include graded clinical responsibility; lectures, seminars, journal clubs, group discussions and participation in clinical and clinico-pathological conferences, practical training to manage independently common problems in the specialty; and training in the Basic Medical

Sciences. Postgraduate Diploma Residents in surgical specialties shall participate in surgical operations as well.

- 17.13. A postgraduate student of a degree course in broad specialities/super specialities would be required to present one poster presentation/ to read one paper at a national/state conference/to have one research paper which should be published/accepted for publication/sent for publication during the period of his postgraduate studies so as to make him eligible to appear at the postgraduate degree examination.

**17.14. Common Course work**

The following course work shall be common and mandatory for all Postgraduate students irrespective of discipline / specialty.

- 1 Course in Research Methodology
  - a. All postgraduate students shall complete an online course in Research Methodology.
  - b. The students shall have to register on the portal of the designated training institutions.
  - c. The students have to complete the course within one year of the commencement of the batch
  - d. The online certificate generated on successful completion of the course and examination thereafter, will be acceptable evidence of having completed this course.
  - e. The above certification shall be a mandatory requirement to be eligible to appear for the final examination of the respective postgraduate course.
  - f. This requirement shall be applicable for all postgraduate students.
- 2 Course in Ethics
  - a. All postgraduate students shall complete course in Ethics including Good Clinical Practices and Good Laboratory Practices, which ever is applicable to them, to be conducted by Institutes themselves or by any other method.
  - b. The students have to complete the course within one year of the commencement of the batch
  - c. No Postgraduate Student shall be permitted to appear in the examination without completing the above course.
- 3 Course in Cardiac Life Support Skills (BCLS)
  - a. All postgraduate students shall complete a course in Basic Cardiac LifeSupport (BCLS) and Advanced Cardiac Life Support (ACLS) skills and get duly certified.
  - b. The students have to complete the course within one year of the commencement of the batch.

- c. No Postgraduate Student shall be permitted to appear in the examination without the above certification.

4 Awareness in basics of management and audit

Awareness in Medical Audit, Management, Health Economics, Health Information System, basics of statistics, exposure to human behavior studies and knowledge of pharmacy shall be imparted to the Post Graduate students.

5 Others

Institutions may arrange training in other courses such as on Telemedicine, How to write a manuscript and make effective presentations, Use of Pubmed and other resources etc.as required.

**17.15. District residency programme (DRP)**

**1. Preamble:**

Two essential tenets of postgraduate medical training are:

- (a) learning experiences have to be derived from and targeted to the needs of the community and
- (b) doctors have to be trained in diverse settings including those which are close to the community. The District Health System including the District Hospitals constitutes the most important part of the country's public health care enterprise. District Hospitals represent multi-specialty facilities providing comprehensive secondary level care to the communities than most medical colleges and these facilities are a major source of health services for the people.

**2. Objectives:**

The main objectives of the District Residency Programme (DRP) would be

- (a) to expose the postgraduate student to District Health System and involve them in health care services being provided at the District Hospital for serving while learning.
- (b) to acquaint them with the planning, implementation, monitoring and assessment of outcomes of the National Health programmes at the district level and
- (c) to orient them to promotive, preventive, curative and rehabilitative services being provided by various categories of healthcare professionals under the umbrella of National Health Mission.

In doing so, the postgraduate medical students would also be contributing towards strengthening of services of the District Health System as specialty resident doctors working as members of the district teams.

### **3. Definition of District Hospital:**

For the purpose of this programme, a District Hospital shall be a functional public sector/government-funded hospital of not less than 100 beds with facilities/staff for the designated specialties at that level/facility.

### **4. Definition of District Health System:**

For the purpose of this programme, the District Health System shall include all public sector/government-funded hospitals and facilities (including community health centers, primary health centers, sub health centers, urban health centers etc.), as well as community outreach system in a district. This would also include district system engaged in running respective public health services including the implementation of national and state public health programmes.

### **5. District Residency Programme:**

All postgraduate students pursuing MD/MS in broad specialties in all Medical Colleges/Institutions under the Indian Medical Council Act, 1956 shall undergo a compulsory residential rotation of three months in District Hospitals/ District Health System as a part of the course curriculum. Such rotation shall take place in the 3rd or 4th or 5th semester of the Postgraduate programme.

This rotation shall be termed as 'District Residency Programme' (DRP) and the postgraduate medical student undergoing training shall be termed as a 'District Resident'.

### **6. Training and Responsibilities of District Residents:**

#### **a. Clinical Specialities:**

During this rotation, the District Resident will be posted with the concerned/aligned specialty team/unit at the District Hospital, and will be trained under the overall guidance of the District Specialists. The District Resident will work under the overall directions and supervision of the District Residency Programme Coordinator (DRPC). The clinical responsibilities assigned to the Residents would include serving in outpatient, inpatient, casualty and other areas pertaining to their specialty, and encompass night duties.

#### **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. They would be trained in and contribute to the diagnostic/laboratories services, pharmacy services, forensic services, general clinical duties, managerial roles and public health programmes etc., as applicable. They may also be posted in research units / facilities, laboratories and field sites of the

Indian Council of Medical Research and other national research organizations.

**7. Stipend and Leave for District Residents:**

The District Residents shall continue to draw full stipend from their respective medical colleges for the duration of the rotation subject to the attendance record submitted by the appropriate district authorities to the parent medical college/institution, based on methods and system as prescribed. Subject to exigencies of work, the District Resident will be allowed one weekly holiday by rotation. They shall also be entitled to leave benefits as per the rules/guidelines of the Parent College / University.

**8. Training during DRP and Certification thereof:**

- a. Quality of training shall be monitored by log books, supportive supervision and continuous assessment of performance. The attendance and performance of District Residents shall be tracked by the District Residency Programme Coordinator (DRPC) of the District concerned, as well as the parent Medical College through an appropriate electronic/digital or mobile enabled system. Such monitoring systems shall also be accessible to the State/Union Territory Steering Committee and the National Coordination Cell.
- b. The District Residents would remain in contact with their designated postgraduate teacher(s) and departments at their parent Medical College / Institution by phone and e-communication for guidance, learning, and for being able to participate remotely in scheduled case discussions, seminars, journal clubs and other academic academies.
- c. Satisfactory completion of the District Residency shall be an essential condition before the candidate is allowed to appear in the final examination of the respective postgraduate course.
- d. The District Residency Programme Coordinator (DRPC) shall issue certificate of satisfactory completion of DRP and report on the performance of the District Resident on a prescribed format to the concerned Medical College.

**9. Responsibility of Medical College/Medical Institution:**

It shall be incumbent upon all Medical Colleges/ Institutions to place the postgraduate students at the disposal of the Government of concerned State/Union Territory for the District Residency Programme. The faculty of the concerned departments would provide guidance to the District Residents by phone/e-communication. In accordance with Clause 17.4 of the Postgraduate Medical Education Regulations, 2021, each medical college/institution will set up a committee under the Academic Cell to coordinate and monitor implementation of District Residency Programme.

**10. Responsibility of Government of State/Union Territory:**

The Government of State/Union Territory shall implement the District Residency Programme within their jurisdiction as under:-

1. The Programme shall be coordinated jointly by the Department of Directorate of Medical Education and the Department of Directorate of Health Services. An Officer of the State/Union Territory Government shall be designated as the State/UT District Residency Programme (DRP) Nodal Officer. The concerned Government shall be responsible for the facilitation, oversight and supervision of the District Residency Programme.
2. The designated State/UT DRP Nodal officer shall identify and designate hospitals that are suitable for such rotation in terms of availability of specific specialties, specialists, facilities and services available in consultation with the Directorate of Health Services of the State and the medical colleges, and develop a placement schedule of the Postgraduate residents of the medical colleges due for Rotation at least 6 months in advance. This Official will also be responsible for grievance redressal at State Level.
3. The State DRP Nodal officer shall undertake rule-based allotment of the training facilities to the Postgraduate Residents using the platform developed by the National Medical Commission.
4. The State Government shall provide appropriate amenities to the District Residents, including, amongst others, suitable accommodation, mess, transportation to workplace (if living quarters is far away), security, especially for lady residents. Accommodation could be by means of government premises or that rented by concerned State Government and should conform to prescribed norms.
5. The District Residents shall remain under the jurisdiction of respective State/UT DRP Nodal officer where they are undergoing District residency.
6. In case all the postgraduate residents of a State/UT cannot be absorbed within their respective jurisdiction, possibility of posting them to other States/Union Territories may be explored by mutual understanding in consultation with the respective Governments facilitated by the National Coordination Cell. In such instances the expenditure of travel, food and accommodation to District Residents should be borne by the state which utilizes their services.
7. It shall be permissible for the postgraduate students from the North East Zone (NEZ) in various medical colleges/institutions in the country, to undergo District Residency Programme in their respective States.
8. The State/UT Governments may consider providing additional honorarium to the District Residents as a token of recognition of their contribution to the healthcare services of the States. In addition, the

concerned Governments may make provisions to incentivize postings to remote and difficult areas, and encourage volunteering by postgraduate students to serve at these places.

9. The concerned State Government shall also designate a senior official of the District Health System as the District Residency Programme Coordinator (DRPC) in each District for coordinating between the State DRP Nodal officer and the medical colleges. The District DRP coordinator shall also be responsible for orienting the postgraduate residents to the District health system, supervising the postings within the district, ensuring their accommodation and transport needs, and for grievances redressed, etc.. District DRP Coordinator shall be the competent authority for sanctioning leave to District Residents. The District DRP coordinator shall keep in touch with the Medical College authorities from where the services of the Postgraduates are drawn to discuss about any difficulties and grievances.

**11. Responsibility of National Medical Commission:**

The National Medical Commission shall develop a transparent electronic platform to facilitate and ensure rule-based placement of PG residents to various institutions under the District Residency Program. They shall also develop requisite norms, tools, guidelines for implementation (log book, feedback form, learning resources etc.), maintain a dashboard on the programme and above all, continuously monitor the quality of the training programme.

**12. Constitution of National/State Oversight Mechanisms:**

1. The National Medical Commission shall constitute a National Steering Committee in consultation with the Ministry of Health and Family Welfare, Government of India to oversee the implementation of the District Residency Programme.
2. The National Steering Committee shall be chaired by a nominee of the National Medical commission. The Committee shall comprise nominated members from the Ministry of Health and Family Welfare (not below the rank of Additional/ Joint Secretary), Nominee of Directorate General of Health Services (DGHS) and representatives of at least six Governments of States/Union Territories. The Committee will submit quarterly reports to the Central Government.
3. The National Steering Committee shall establish a National Coordination Cell (NCC) under the National Medical commission which shall be responsible for the smooth and efficient implementation of the District Residency Programme and grievance redressed at national level.
4. The Government of State/Union Territory shall constitute a State/Union Territory level Steering Committee chaired by Principal Secretary/ Secretary (Health) and comprising Principal Secretary/Secretary

(Medical Education), Director of Health Services, Director of Medical Education, Registrar of the Health University and Deans of the Medical Colleges to facilitate the implementation of the District Residency Programme.

**13. Launch of the District Residency Programme:**

The District Residency Programmes will be implemented with the PG (broad specialty) batch that has joined for the postgraduate course in 2021.

**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 in broad speciality and super speciality subjects 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. Hence a candidate shall secure not less than 50% marks in each head of examination which shall include Theory and Practical including clinical and viva voce examination.

No grace mark is permitted in Postgraduate Examination either for Theory or for Practical.

**18.1. Examiners**

1. All the Post Graduate Examiners in Broad and Super Specialties shall have three years' experience as recognized Post Graduate Guides in the concerned subject.
2. For all Post Graduate Examination, the minimum number of Examiners shall be four, out of which two shall be External Examiners, who shall be invited from other universities from outside the State.
3. An examiner shall ordinarily be not appointed for more than two consecutive regular examinations for the same Institution

**18.2. Valuation**

- a. All eligible Postgraduate examiners can perform the valuation of the answer scripts.
- b. All the answer scripts shall be subjected for two valuations by the concerned University. The average of the total marks awarded by the two valuers for the paper, which is rounded off to the nearest value, shall be considered for computation of the results. All the answer scripts, where the difference between two valuations is 15% and more of the total marks prescribed for the paper, shall be subjected to third valuation. The average of the best two total marks, awarded by the three evaluators for the paper,

rounded off to the nearest value, shall be considered for final computation of the results.

- c. After the computation and declaration of the results, under no circumstances, revaluation is permitted by any authority.
- d. All the Health Universities/Institutions imparting Postgraduate courses shall implement digital valuation henceforth.

### **18.3. Number of candidates**

The maximum number of candidates to be examined in Clinical/practical and Oral on any day shall not exceed eight for MD/MS degree/ and three for DM/MCh examinations.

### **18.4. Number of examinations**

The university shall conduct not more than two examinations in a year, for any subject, with an interval of not less than 4 and not more than 6 months between the two examinations.

### **18.5. Broad Specialties: Doctor of Medicine (MD)/Master of Surgery (MS)**

MD/MS examinations, in any subject shall consist of Theory Papers, and clinical/Practical and Oral examinations.

#### **1. Theory**

There shall be four theory papers. Out of these first paper shall be of Basic Medical Sciences and the fourth paper shall be of recent advances. The theory examinations shall be held well in advance before the Clinical and Practical examination.

#### **2. Clinical / Practical and Oral**

1. Clinical examination for the subjects in Clinical Sciences shall be conducted to test the knowledge and competence of the candidates for undertaking independent work as a specialist/Teacher, for which candidates shall be examined for one long case and two short cases.
2. Practical examination for the subjects in Basic Medical Sciences shall be conducted to test the knowledge and competence of the candidates for making valid and relevant observations based on the experimental/ Laboratory studies and his ability to perform such studies as are relevant to his subject.

3. The Oral examination shall be thorough and shall aim at assessing the candidate's knowledge and competence about the subject, investigative procedures, therapeutic technique and other aspects of the specialty, which form a part of the examination

#### **18.6 Super Specialties: Doctorate of Medicine (DM)/Magister Chirurgiae (MCh)**

The Examination consists of: (1) Theory and (2) Clinical/Practical and Oral

##### **1. Theory:**

There shall be four theory papers, out of these first paper shall be on Basic Medical Sciences, and the fourth paper be on Recent Advances. The theory examination shall be held in advance before the Clinical and Practical examination.

##### **2. Clinical / Practical and Oral:**

Practical examination may consist of carrying out special investigative techniques for Diagnosis and Therapy. M.Ch candidates shall also be examined in surgical procedures. Oral examination shall be comprehensive enough to test the candidate's overall knowledge of the subject.

#### **18.7 Postgraduate Diploma**

Diploma examination in any subject shall consist of Theory, Practical/Clinical and Oral.

##### **1. Theory**

There shall be three Theory papers. First paper out of these shall be on Basic Medical Sciences. The theory examination will be held well in advance before the Clinical examination.

##### **2. Clinical and Oral**

Clinical examination for the subject in clinical Science shall be conducted to test /aimed at assessing the knowledge and competence of the candidate for undertaking independent work as a Specialist / Teacher for which a candidate shall examine a minimum of one long case and two short cases.

The oral examination shall be thorough and shall aim at assessing the candidate's knowledge and competence about the subject, investigative procedures, therapeutic technique and other aspects of the speciality, which shall form a part of the examination.

#### **19. POSTGRADUATE DIPLOMA COURSES**

No new Diploma courses shall be permitted from 2021 onwards. All the Rules and Regulations of erstwhile MCI regarding existing Diploma courses shall be applicable till all the Diploma courses are phased out and the last Diploma candidate has cleared the examination.

## **20. PHD**

Ph.D. Degree may be instituted in all subjects wherever recognized postgraduate qualification in medical subjects are awarded by the concerned Universities subject to fulfillment of the following guidelines:

- 20.1. Ph.D. shall be awarded only upon completion of MD or MS or MSc. in medical subjects.
- 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).
- 20.3. For starting Ph.D. course, the institution concerned shall have the following facilities, namely:-
  1. Adequate facilities for experimental medicine and experimental surgery;
  2. Ancillary Departments, adequately equipped and well-staffed as prescribed for Postgraduate departments;
  3. Adequate facilities for advanced research work and laboratory investigations in the departments of Biochemistry, Physiology, Microbiology, Pathology, Radio-diagnosis.
- 20.4. A guide for the Ph.D. degree shall have not less than fifteen years teaching experience after obtaining his postgraduate qualification.

## **21. COLLABORATIVE RESEARCH**

- 21.1. Impetus may be provided to Research in Medical field to produce Physician Scientists of highest caliber by collaborative arrangement with other scientific organizations of excellence such as Institutes of Eminence/ Excellence conferred by Government of India. New courses/ Specialities may also be started with the sole intention of producing high quality Physician Scientists, by leveraging the scientific expertise at the Institutes of Eminence/ Excellence. Such of the Postgraduate students who wish to do combined MD-PHD programme can do so by simultaneous registration for MD/MS from National Medical Commission recognized Institutions and PHD from Institute of Excellence/Eminence conferred by Government of India. They shall be awarded MD/MS from the National Medical Commission Institutions and PHD from the Institute of Eminence/Excellence.
- 21.2. International Collaboration may also be explored for MD-PHD Programme.
- 21.3. Institutes of Eminence/Excellence may also initiate integrated MD-PHD or Dual Degree Programmes by admitting students for both degrees after establishing necessary facilities and Infrastructure as prescribed by National Medical Commission for the Postgraduate teaching and training. In such cases

both MD and PHD degrees will be awarded by Institutes of Eminence/Excellence.

- 21.4. Faculty with MD/MS along with PHD qualification having three years of teaching experience after obtaining PHD or faculty with MD/MS with fifteen years of teaching experience shall be recognized as PHD guides and they are also eligible to guide Post Graduate students.

**22. PENALTY FOR VIOLATION OF REGULATIONS:**

Penalty for violation of Post Graduate Medical Education Regulations shall be as per the Penalty Regulations of the National Medical Commission.

**23. Provision to amend the Postgraduate Medical Education Regulations - 2021:**

National Medical Commission is empowered to make any addition, deletion, substitution or any other amendment to Postgraduate Medical Education Regulations – 2021 including the changes in the Schedules as and when required.

Criteria to be fulfilled by institutions eligible to start postgraduate course(s) under section 9.3 of PGMER, 2021, which are required to create their own facilities for setting up departments in basic medical sciences:

1. The basic subjects identified for the purpose of creation of facilities shall be:

- a) Anatomy
- b) Physiology
- c) Pharmacology
- d) Community Medicine with Forensic Medicine being optional.

2. Staff requirements:

The minimum staff required in each of the departments of Anatomy, Physiology, Pharmacology and Community Medicine shall be:

- |                                     |     |
|-------------------------------------|-----|
| a. Professor or Associate Professor | One |
| b. Assistant Professor              | Two |

Provided that the department of Community Medicine shall also have:

- a. Epidemiologist-cum-Lecturer
- b. Statistician-cum-Lecturer
- c. Health Educator-cum-Lecturer

3. Infrastructural requirements

- a) The infrastructural requirements in terms of lecture theatres and demonstration rooms could be common.
- b) The research laboratories shall be well-equipped so that the teachers in the departments concerned shall be able to work on solicited research projects.
- c) Department of Anatomy: Apart from the common facilities, there shall be place for dissection with adequate accommodation, along with an embalming room, cold room and also a museum. Histology and Research laboratory may be clubbed together.

- d) Department of Physiology: There shall be clinical, experimental and animal physiology laboratories along with museum.
- e) Department of Pharmacology: The facilities could be common except for research laboratory, which shall be separate.
- f) Department of Community Medicine: There shall be a museum along with a well-equipped Rural/Urban Health Centre with necessary staff.
- g) Animal experimentation should continue to be included as an integral part of the competency based curriculum of Postgraduate Courses in Physiology and Pharmacology in medical institutions and the concerned medical institutions shall ensure that all governing statutory regulations with regard to the use of animal experimentation in Postgraduate Courses in teaching and training of the said Postgraduate courses are strictly adhered to.

Specialities / Subjects in which Postgraduate Degree and Diploma can be awarded by the Indian Universities and the eligibility requirements of candidates for registration for the same.

A. M.D. (Doctor of Medicine) for which candidates must possess recognized degree of MBBS (or its equivalent recognized degree)

1. Anatomy
2. Anesthesiology
3. Aerospace Medicine
4. Biochemistry
5. Community Medicine
6. Dermatology, Venerology and Leprosy
7. Emergency Medicine
8. Family Medicine
9. Forensic Medicine and Toxicology
10. General Medicine
11. Geriatrics
12. Health Administration
13. Hospital Administration
14. Immuno Hematology and Blood Transfusion
15. Master of Public Health ( Epidemiology)
16. Microbiology
17. Marine Medicine
18. Nuclear Medicine
19. Pathology
20. Palliative Medicine
21. Pediatrics
22. Pharmacology
23. Physical Medicine Rehabilitation
24. Physiology
25. Psychiatry
26. Radio-diagnosis
27. Respiratory Medicine
28. Radiation Oncology

B. M.S. (Master of Surgery) for which candidates must possess recognized degree of MBBS (or its equivalent recognized degree).

1. Otorhinolaryngology – Head and Neck
2. General Surgery
3. Ophthalmology
4. Orthopedics
5. Obstetrics & Gynecology
6. Traumatology and Surgery

C. D.M. (Doctorate of Medicine) for which candidates must possess recognized degree of M.D. (or its equivalent recognized degree) in the subject shown against them.

<b>Sl. No.</b>	<b>Area of Specialization</b>	<b>Prior Requirement</b>
1.	Cardiology	MD Medicine
2	Cardiac Anesthesia	MD Anaesthesia
3	Clinical Immunology and Rheumatology	MD General Medicine) MD Paediatrics
4	Clinical Haematology	MD General Medicine MD Paediatrics MD Pathology
5	Critical care Medicine	MD Anaesthesiology MD General Medicine MD Paediatrics MD Respiratory Medicine
6	Endocrinology	MD General Medicine MD Paediatrics
7	Hepatology	MD General Medicine
8	Interventional Radiology	MD radiology
9	Medical Gastroenterology	MD General Medicine

10	Medical Genetics	MD/MS in any subject
11.	Medical Oncology	MD General Medicine
12	Neonatology	MD Paediatrics
13	Nephrology	MD General Medicine
14.	Neuro Anaesthesia	MD Anaesthesiology
15	Neurology	MD General Medicine

<b>Sl. No.</b>	<b>Area of Specialisation</b>	<b>Prior Requirement</b>
16.	Paediatric Cardiology	MD Paediatrics
17.	Paediatric Gastroenterology	MD Paediatrics
18.	Paediatric Neurology	MD Paediatrics
19	Paediatric Oncology	MD Paediatrics
20	Paediatric Hepatology	MD Paediatrics
21	Paediatric Nephrology	MD paediatrics
22	Paediatrics and Neonatal Anaesthesia	MD Anaesthesiology
23	Pulmonary Medicine	MD General Medicine MD Respiratory .Medicine MD Paediatrics
24	Virology	MD Microbiology

- D. M.Ch. (Master of Chirurgie) for which candidates must possess recognized degree of M.S. (or its equivalent recognized degree) in the subjects shown against them.

<b>Sl. No.</b>	<b>Area of Specialisation</b>	<b>Prior Requirement</b>
1.	Cardiac Surgery	MS General Surgery
2	Gynecological Oncology	MD/MS Obstetrics & Gynaecology
3	Hepato-Pancreato-Biliary-Surgery	MS General Surgery
4	Head and Neck Surgery	MS General Surgery MS ENT
5	Neuro-Surgery	MS General Surgery MS ENT

6	Paediatric Surgery.	MS (Surgery)
7	Paediatric Cardiothoracic and Vascular Surgery	MS General Surgery
8	Plastic & Reconstructive Surgery	MS General Surgery MS ENT
9	Surgical Oncology	MS (Surgery)
10	Surgical Gastroenterology	MS General Surgery
11	Thoracic Surgery	MS General Surgery
12.	Urology	MS General Surgery
13	Vascular Surgery	M.S General Surgery

- E. The Medical qualifications granted by other statutory bodies in India for which candidates must possess recognized degree of MBBS.

**Schedule and Admission process of Postgraduate Broad Specialty courses  
(MD/MS)**

Sl. No.	Schedule for Admission	Central Counselling		State Counselling
		All India Quota	Deemed + Central Institute	
1	Conduct of Exam	By 10 January		
2	Declaration of Result	By end of January		
3	First Round of Counselling	12 March-24 March	12 March-24 March	25 March-5 April
4	Last date of Joining	3 April	3 April	12 April
5	Second round of Counselling	6 April – 12 April	6 April – 12 April	15 April-26 April
6	Last date of joining	22 April	22 April	3 May
7	Mop up Round		12 May-22 May	16 May-20 May
8	Last date of joining		26 May	26 May
9	Forwarding the list of students in order of merit equaling to ten times the number of vacant seats to the Medical Colleges by the Counselling Authority		27 May	27 May
10	Last date of joining		31 May	31 May

This counselling schedule is subject to change as and when common counselling envisaged under section 10 of PGMEB is given to effect.

**Schedule and Admission process of Super Specialty Postgraduate courses  
(DM/MCh)**

<b>Sl.No.</b>	<b>Schedule for Admission</b>	<b>Super Speciality</b>
1	Conduct of Entrance Examination	By 10 July
2	Declaration of the result of the Qualifying Exam/Entrance Exam.	By 15 July
3	First round of counselling admission	By 31 July
4	Last date for joining the allotted college and the course	Between 1 and 7 August
5	Second round of counselling / admission	By 20 August
6	Last date of joining for the second round of counselling / admission	By 27 August
7	Commencement of academic session/term	1 August
8	Last date up to which students can be admitted/joined against vacancies arising due to any reason	31 August

In any circumstances, last date for admission/ joining will not be extended after 31 August.