

Make specialised PG courses uniform: MCI

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NEW DELHI: The Medical Council of India has recommended that all specialised post-graduate courses be made uniform, with the curriculum revised periodically depending on new developments in the fields.

It also proposes a national common entrance examination for PG and super speciality courses from July this year.

No uniformity

A working group, set up by the MCI Board of Governors in July to review PG courses, in its report, has said the existing system lacks uniformity of syllabus as the courses are being conducted by different agencies.

It has said the duration of training should be uniform: diplomas (two years), degrees (three years), fellowships (three years), DM/MCh (three years) and Post-DM fellowship (two years).

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- Permit research collaboration between institutions in remote areas and city centres

partmental rotations for at least six months in allied disciplines, and continuous, formal structured assessment with regular feedback for post-graduation.

The need-based assessment must be done on reliable data and also of specialists in various categories. New colleges and new courses should be started in underserved areas, keeping in mind equitable distribution of medical facilities across the country and subject to availability of facilities and expertise.

Basic specialities

Pointing out that there are many vacant seats in basic specialities like anatomy, resulting in a shortage of expertise, the report suggests that more incentives

be given for candidates taking up these courses such as differential pay scales or accelerated promotions for teachers in these subjects.

In anatomy, physiology and pharmacology, there could also be a cadre of non-medical teachers.

Recommending special incentives to private institutions for starting courses in basic specialities, the working group says shortage is due not only to a lack of seats, but also to popularity of courses. That is why private institutions are hesitant to start these courses, says the report.

Establishment of skill laboratories should be mandatory as these would help in improving training in several disciplines.

Funds may have to be al-

lotted from a central resource to the existing colleges for these laboratories.

To promote research, a collaboration protocol between medical institutions in remote areas and well equipped centres in cities can be permitted.

The number of publications and research accomplishments should be taken into account for accelerated promotion of teachers.

On continuing professional development, the working group says the MCI guidelines on accreditation of organisations for conduct of a continuing medical education programme and of individuals are already there but there is need to ensure regular participation.

Also, self-learning by distance education taking advantage of online courses should be encouraged. The MCI needs to develop an electronic resources library for use by all physicians at a reasonable cost.