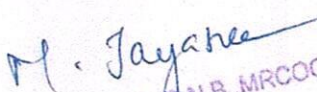



Papsmear check ✓

DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

Name:	Roll no:	Date	Yes	NO
Introduction give 1 mark if all done otherwise 0.5				
Wash hands, Introduce self, Ask Patient's name, age, parity, address, Explain procedure, ask patient to void and obtain consent				
Asks about her LMP (0.5)				
Asks about her last day of intercourse or any Pv done in the last 24 hours (1)				
Wear gloves To avoid douching with any antiseptic solution (0.5)				
Inspected external genitalia and checked urethral opening for discharge. (1)				
Inserted speculum and adjust it so that the entire cervix can be seen. (1)				
Scraped the whole transformation zone and the ectocervix by the Ayres spatula (1)				
Spread the specimen on a glass slide (0.5)				
Place the smear inside Koplik's jar (0.5)				
Took off the gloves, dispose in the proper container, Washed hands (0.5)				
Told the client when to return for results (0.5)				
Documented the results (2)				


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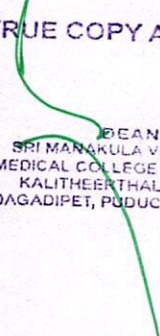
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AN - History Checklist

Name	Roll no:	Date:	Marks
Introduces self and role, Gains consent for history, Correctly identifies patient using at least 2 patient identifiable variables			2
Bleeding: Onset, Volume, Colour and Progression			2
Presence of clots, dysuria, dyspareunia or discharge			2
Pain – with SOCRATES as appropriate – include screening for shoulder tip pain			2
Menstrual history – age at time of menarche, LMP, regularity of periods and characteristics			2
Gynaecological history – contraception, menopause, STIs, cervical screening, history of PID			
Obstetric history – Gravity, Parity, outcome of pregnancies and bleeding in pregnancy			2
Enquire about risk factors: Ask about PID, IVF, FHx miscarriages, previous miscarriage			2
Past medical (surgical) history; drug history, family history, social history			2
Summary and interpretation of clinical findings accurately			2
Differential diagnoses explained to the patient			2


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Molar
Counselling for follow up pregnancy

Name	Roll no:	Date:	Marks
Introduces self and role, Correctly identifies patient using at least 2 patient identifiable variables			0.5
Ask the patient about her knowledge of molar pregnancy			0.5
What is a molar pregnancy? A molar pregnancy is a pregnancy in which the trophoblast develops into a mass of fluid-filled sacs that resemble clusters of grapes. It grows in an uncontrolled fashion to fill the womb. It occurs in about one in 1200 pregnancies. There are two types of molar pregnancy: a complete and a partial molar pregnancy			1
If this is such an abnormal pregnancy, why do I feel so pregnant? The overgrown placenta tends to produce massive amounts of the pregnancy hormone hCG (human Chorionic Gonadotrophin). Most of the symptoms of a molar pregnancy are caused by these high hormone levels. A molar pregnancy will probably bleed and the womb will seem bigger than it should be. Sometimes it can cause high blood pressure and thyroid problems. There may be increased symptoms of morning sickness.			2
How is a molar pregnancy treated? You will be admitted to hospital to have a small operation to empty your uterus (called a Dilatation and Curettage). This procedure is carried out under a general anaesthetic in the operating theatre. Instruments are used to ensure the inside of your uterus is empty. The operation usually takes about 5 to 10 minutes, and is done vaginally so you will have no cut/stitches. The tissue will be sent to the laboratory for examination and you will be told the result			2
What follow up is required? Blood levels of the pregnancy hormone hCG are measured weekly following a molar pregnancy until the pregnancy hormone level is so low that it can no longer be detected. In most women the levels of hCG drop fairly rapidly. Once your hormone level reaches zero for three weeks, follow-up will cease for those with a partial mole. For women with a complete mole, you will progress to monthly blood tests for a further six months.			2
Why are molar pregnancies followed up? Occasionally the molar tissue may persist and grow deeper into the wall of the uterus and spread; this is an invasive mole. Very rarely a molar pregnancy can develop into a choriocarcinoma which is a form of cancer. Thankfully the cure rate is almost 100%. This is the reason why molar pregnancies are followed up..			1
When can I fall pregnant again? We would advise that you do not fall pregnant while you are being followed up. It will become difficult to know if your pregnancy hormone levels are rising due to pregnancy or re-growth of the molar tissue. We advise you to wait until after your follow-up period before trying for another pregnancy. It is very important to tell us if you become pregnant.			1

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Structured viva - fetal surveillance

DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

Name	Roll no:	Date:	Marks
List at least 3 tests for fetal well being Fetal movement count, Cardiotocography (CTG) or electronic fetal monitoring (EFM), BPP, Doppler			2
Biophysical profile (BPP features) – Fetal breathing, – Fetal movement, – Fetal tone, – Amniotic fluid index (AFI), – NST			2
Maternal indications any 4: Postterm pregnancy, Hypertensive disorders of pregnancy, Diabetes, Antiphospholipid antibody syndrome, Advanced maternal age (elderly gravida), Vaginal bleeding, Prelabor rupture of membranes, Pregnancy after assisted reproductive technologies			2
Fetal indications any 4: Decreased fetal movement, Fetal growth restriction, Oligohydramnios/polyhydramnios, multiple pregnancy with significant growth discrepancy, • Preterm labor			2
A reactive NST shows two or more fetal heart rate accelerations reaching a peak of at least 15 bpm above the baseline rate and lasting for at least 15 seconds from onset to return in a 20-minute period.			2


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Obstetric examination - Checklis ✓

Name	Roll no:	Date:	Marks
Introduction Wash hands, Introduce self, Ask Patient's name, address, Explain examination, ask patient to void and obtain consent			0.5
Position the patient lying at 15° with a small rolled towel placed under the right hip and knees should be semiflexed and feet together and expose the abdomen from xiphisternum to pubic symphysis. Stand on right side of the patient			1
Abdominal inspection Distension, Fetal movements, Scars Skin changes Linea nigra: Striae gravidarum: Striae albicans: Excoriations Distended superficial veins Umbilicus eversion			
Palpation Tell if there is a dextrorotation, It will be corrected			1
Fundal height -Use the ulnar edge of left hand to press down in a stepwise fashion from xiphisternum downwards to find the fundus (first bit of resistance)			1
SFH - measure from pubic symphysis to fundal resistance with measuring tape To eliminate bias, measure with the inches side upwards, then turn over for centimetres reading.			1
Fundal grip :The uterine contour is outlined by the examiner, placing both of his or her hands on each upper quadrant of the patient's abdomen facing the maternal xiphoid cartilage. The ulnar border of each hand is in contact with the abdominal wall, and the opposite fingers are touching each other. Using the fingertips, the fundus is gently palpated to identify which fetal part is present in the upper pole (fundus) of the uterus.			1
Umbilical grip :Still facing the maternal xiphoid cartilage, both hands slide down from the uterine fundus towards the lateral uterine walls. The clinician's hands are placed flat and parallel to each other along the abdominal wall at the level of the umbilicus. The operator places the two flat hands sideways to the uterus and tries to bring them closer to the midline. Gently palpate each side of the uterus			1
First pelvic grip : the ulnar border of right hand is placed over pubic symphysis and place the thumb and fingers of the right hand close above the pubic symphysis and draws the thumb and finger near to clasp the lower uterine segment including its contents.			1
Second pelvic grip : the examiner faces toward the maternal pelvis. places the palms of both hands on either side of the lower abdomen, with the tips of the fingers facing downward toward the pelvic inlet. The fingertips of each hand are used to apply deep pressure from the outside to the inside and in a craniocaudal direction along the lower contour of the uterus towards the birth canal.			1
fifth maneuver " of Leopold, or maneuver of Zagenmeister, In the cephalic presentation, the hand is placed flat on the pubic symphysis, and the palpation could delineate the fetal head portion that can be reached above the pelvic inlet. If the fetal head accommodates two fingerbreadths above the pelvic brim, it is said to be engaged.			
Fetal heart auscultation Find the back of the fetus and place the Pinard Horn or Doppler fetal monitor (Sonicaid) just behind the anterior shoulder, i.e. halfway between mother's umbilicus and ASIS on the side of the fetus' back (try both sides if unsure) Feel the mother's pulse at the same time Calculate the fetal heart rate (should be 120-160 bpm). Listen for 1 minute.			1
Thank patient and restore clothing			0.5


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Sri Manakula Vinayagar Medical College and Hospital
DEPARTMENT OF OBSTETRICS & GYNAECOLOGY
Assessment (Clinical) Marklist - IV semester 2019 batch

Posting date: 22.11.2021 to 19.12.2021 (BATCH - C)

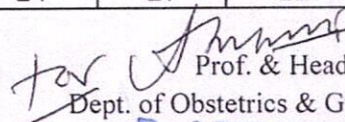
Roll No	Names	Leucorrhoea (12)	Obs. History (38)	Gyn. History (35)	Obs Examination (30)	Contraception (19)	Total (134)	%
51	JAYANTH K	3	24	17	6.5	8	58.5	44
52	JOSHUA MATHIVENDHAN K	6	32	26	18	11	93	69
53	K GURUPRAKASH	3	30	13	10	6	62	46
54	KALAIARASI K	8	29	13	10	13	73	54
55	KANCHI VENISHA	1	27	16	8	9	61	46
56	KAPILAN A	0	25	28	12	6	71	53
57	KARAN S	7	27	29	21.5	6	90.5	68
58	KARTHIGA R	7	23	22	10	6	68	51
59	KASI VISHNU RAJ N	2	29	29	21	7	88	66
60	KAVIYARASAN K	1	25	24	3	1	54	40
61	KEERTHIVASAN A	1	25	17	13	5	61	46
62	KHAN AZMEEN ABDUL AKBAR	3	33	21	21	4	82	61
63	KILAMBI TEJA SREE	3	22	17	9	2	53	40
64	KRISHNA PRASANTH P	6	28	14	10.5	4	62.5	47
65	LAKSHMI PRABA N	8	25.5	21	12	4	70.5	53
66	LEELA KRISHNA V	3	27	28	9	5	72	54
67	LINZA HASHIR	5	27	29	26	7	94	70
68	LOGEETHA ALIAS VISALATCHI S	5	29	31	23.5	10	98.5	74
69	LOGESHWARAN T	2	24	15	20	3	64	48
70	M AJAY YUVAN SANKAR	1	26	20	13	6	66	49
71	MADHUMITHA B	8	22	22	16	6	74	55
72	MADHUVARSHNE S	7	24	29	17	4	81	60
73	MADINENI BHAVYA SREE	3	21	24	6	3	57	43
74	MAHESH S	7	22	25	14	1	69	51
75	MANOBALAN S	6	24	27	22	2	81	60

Copy to

The Director
The Dean (Academic)

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for  Prof. & Head
Dept. of Obstetrics & Gynaecology

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DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

PMB- History checker

Name:

Date:

Roll no:

	Yes	No
Introduction		
Introduces self and role, Gains consent for history, Correctly identifies patient using at least 2 patient identifiable variables		
Presenting complaints		
H/O presenting illness(2)		
Site - establishes where bleed is from		
Onset - establishes when symptoms first began (2 weeks ago)		
Character - established the type of bleed e.g. gushing/spotting/clots		
Radiation - no other areas of bleeding and		
Timing - it has been getting progressively worse		
Associated Symptoms - Asks about at least 2 of;(2)		
Weight loss		
Bloating or swelling		
Fevers or Malaise		
Abdo pain		
Urinary symptoms		
Abnormal vaginal discharge or dryness		
Itching		
Systems Review Any 3 of;(2)		
General/red flags - no fevers, weight loss, or night sweats		
Respiratory - No infective symptoms, haemoptysis or breathlessness		
Cardiovascular - No palpitations, or chest pain		
Gastrointestinal - No D+V, haematemesis or melaena Specifically establishes that patient has not been on HRT or Tamoxifen		
Menstrual history(1)		
Establishes patients age at menarche and menopause		
Asks after date of last menstrual period - 4 years ago		
Marital history		
Establishes that patient is not sexually active		
Enquires after smear history - nil		
Obstetric History (1)		
Establishes that patient has not been pregnant before		
Establishes that patient hasn't had any terminations of pregnancy		
Past Medical History (1)		
Accurately establishes this has never happened before		
Established PMH of Hypertension and T2DM		
Establishes there's no history or gynaecological (or other) surgery Prescribed medications - Metformin & Atenolol, Allergies - nil		
Family History (1)		
Establishes nil significant family history		
Social History Enquires after patient's home situation including 2 of; who's at home, mobility, and activities of daily life		
Ideas - the patient believes it could be to do with menopause		
Concerns - that it won't stop		
Expectations - she will be told how to stop the bleeds at this appointment		
Total		

DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

IUCD insertion checklist

Name:

Date:

Roll no:

IUCD insertion	Yes	NO	Remarks
Asks the client to empty her bladder and wash her perineal area			
Washes hands thoroughly as per protocols and dries them			
Pre insertion and Insertion Steps (Using aseptic, "no touch" technique throughout)			
Provides an overview of the insertion procedure. Reminds her to let the provider know if she feels any pain			
Gently inserts speculum, and cleanses the cervical os and vaginal wall with antiseptic			
Gently grasps the anterior lip of cervix with an vulsellum/tenaculum and applies gentle traction (If tenaculum is used, the prongs of tenaculum should hold the anterior lip of cervix at 11 o'clock and 1 o'clock positions to avoid cervical injury)			
Inserts the uterine sound using the "no touch" technique			
Loads the IUCD in its sterile package using 'No touch technique'			
Sets the blue length-gauge to the measurement of the uterus			
Carefully inserts the loaded IUCD, and releases it into the uterus using the 'withdrawal technique'			
Withdraws the plunger rod. Gently pushes the insertion tube upward again until slight resistance is felt			
Partially withdraws insertion tube until the string can be seen extending from the cervical os			
Uses sterile sharp curved scissors to cut the IUCD strings to 3- 4 cm length.			
Gently removes the vulsellum/ tenaculum and place them in kidney tray			
Examines the cervix for any bleeding, removes the speculum, and places it in the kidney tray			
Asks how the client is feeling and begin performing the post-insertion steps			
Disposes of waste materials appropriately			
Performs hand hygiene			

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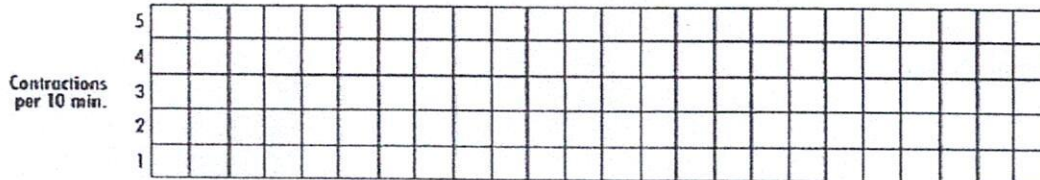
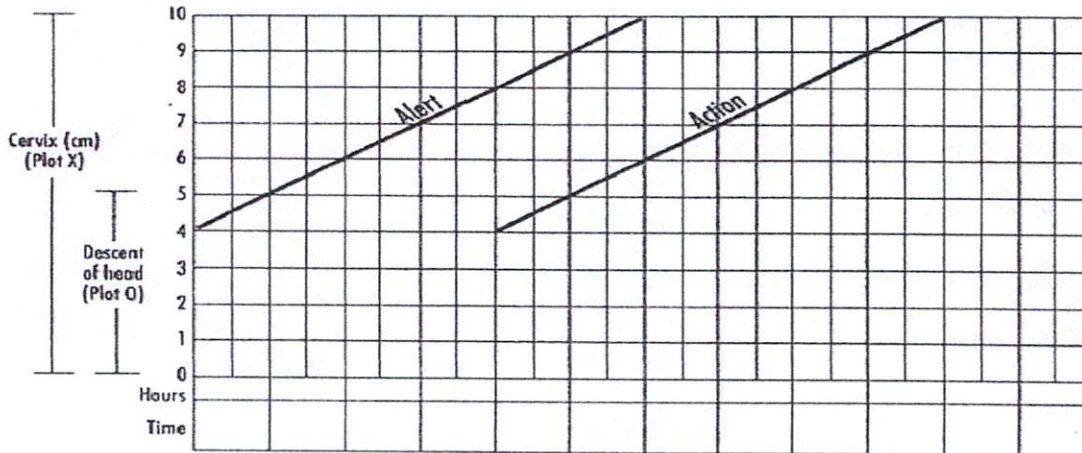
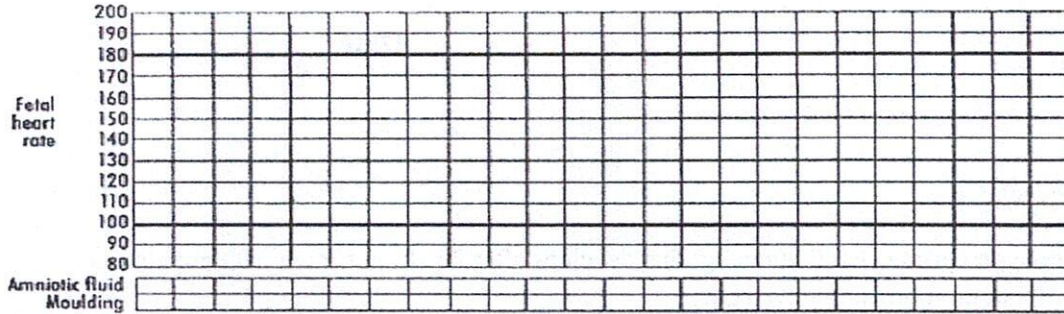
Plot paragraph
for given scenario

Name:

Date:

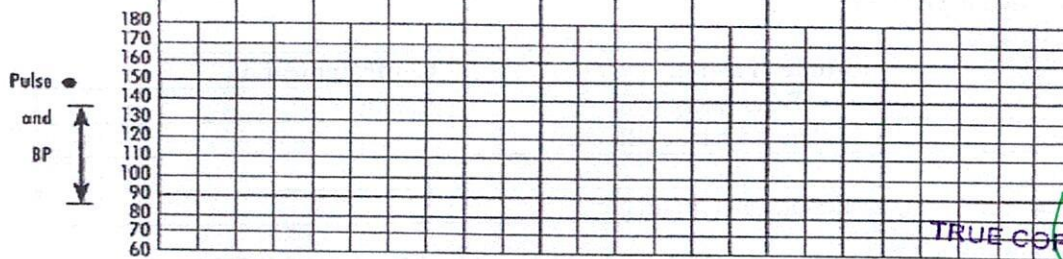
Roll no:

Name Gravida Para Hospital Number
Date of Admission Time of Admission Ruptured Membranes Hours



Oxytocin U/L drops/min.

Drugs given and IV fluids



Urine — protein

acetone

volume

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Shivachand niva - preeclampsia.

DEPARTMENT OF OBSTETRICS & GYNAECOLOGY

Name:

Date:

Roll no:

1. Definition of Preeclampsia

New onset hypertension ($>140/90$ mmhg) that develops after 20wks gestation with proteinuria with or without multiorgan involvement.

2. Investigation done in gestational HT/PE

1. CBC
2. Spot urinary protein: creatinine ratio
3. LFT – Liver enzymes
4. Blood Urea, Sr. creatinine, Uric acid
5. Fundus Examination

3. Complication of exercise

1. Eclampsia
2. Acute Renal Failure
3. DIC
4. HELLP Syndrome
5. Placental abruption
6. FGR

4. Antihypertensive used in GHT/PE

	Mode of action	Contraindication
1. Labetalol	A – B Adrenergic	Asthma
2. Nifedipine	Calcium Channel Blocker	
Hot Emergency		
3. Hydralazine	Peripheral Vasodilator	
4. TRUE COPY Labetalol		

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Sri Manakula Vinayagar Medical College and Hospital
DEPARTMENT OF OBSTETRICS & GYNAECOLOGY
Assessment (Clinical) Marklist - Phase III part II 2019 batch
Posting date: 15.05.2023 to -11.06.2023 (BATCH- A)

Roll No	Name	OSCE stations														
		Obs. History (10)	Obs. Exam (10)	Gyn. History (10)	Multiple Preg. (10)	PMB (10)	Pre-eclampsia (10)	IUCD (10)	Infertility (10)	Drugs (10)	NST (10)	Instr. (10)	Partogram (10)	Total (120)	Mark %	Atten. %
1	AASHISH CAROL SAFIN V	4	8	2.5	5	6.5	6.5	4	8	3	1	3	6	58	48	75
2	AASHISH VISHNUPRASAD	3	0	0	3	2	7	3	6	2	4	1	4	35	29	43
3	ABISHEK R	6	6	3.5	6	7	7.5	0	5	2	4	1	5	53	44	93
4	ADHITHYA T	8	7	5.5	4	3	9	5	6	3	4	1	4.5	60	50	56
5	ADITHIYAN B	6	3	3	2	3	7	3	6	1	3	1	4	42	35	75
6	AHILA RAJESWARI S	Absent														
7	AISHWARIYALAKKSHMI C	5	1	6	2	4.5	7.5	8	6	3	4	2	4.5	54	45	62
8	AISWARYA S IGNATIUS	9	7	3	9	2.5	7.5	6	7	4	5	4	6.5	71	59	81
9	AKSHAYA PK	8	8	5.5	2	3.5	7.5	4	8	4	7	2	4.5	64	53	75
10	ANBARASI P	9	9	4	4	5.5	8.5	7	6	3	6	7	5	74	62	100
11	ANIL KUMAR THOTAKURA	Absent														
12	ANIRUDH RAJENDRA KAGNE	8	5	5.5	5	2.5	6	7	8	3	4	2	6.5	63	52	68
13	ANN MARIA GEORGE	8	9	4.5	7	9	8	7	8	4	4	3	6	78	65	100
14	APARNA PRASANTH	5	9	5.5	9	5	9	5	7	3	5	2	4	69	57	100
15	ASHWANI SHURUTHI S	8	7	5.5	4	6	9	6	8	3	5	2	4	68	56	93
16	ASMITA S	8	9	1.5	8	1.5	8	6	6	3	5	2	6.5	65	54	87
17	B INDUSREE	7	6	6	9	9	7	7	7	4	6	3	4	75	63	93
18	B RAMYAA	6	5	1.5	7	2	6	7	8	3	6	2	5	59	49	87
19	BALAMURUGAN E	8	7	4	9	4	8	5	7	2	4	3	4	65	54	87
20	BALAKRISHNAN RAM K	7	7	5	9	10	7	2	6	4	8	2	3.5	71	59	87
21	BHARATHI A	5	4	3	4	5.5	6.5	3	6	4	5	2	4	52	43	93
22	BHARATHKUMAR V	8	7	4	9	6.5	9	4	7	3	4	5	6	73	60	87
23	BHUVANESWARY M	9	5	6	9	6	9	2	8	3	6	4	7	74	62	87

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 MADAGADIPET, CHENNAI - 605 107.

Roll No	Name	OSCE stations														
		Obs. History (10)	Obs. Examination (10)	Gyn. History (10)	Multiple Preg. (10)	PMB (10)	Pre-eclampsia (10)	IUCD (10)	Infertility (10)	Drugs (10)	NST (10)	Instr. (10)	Partogram (10)	Total (120)	Mark %	Atten. %
24	BIRAGADHEESWARI T M	7	5	5	3	4	7	3	6	2	7	2	5	56	47	87
25	C MATHANGI	5	3	0	2	5.5	7.5	1	5	3	5	1	2	40	33	100
26	CHANDANA R CHANDRAN	7	7	4	8	6	7	4	7	3	5	4	6	68	57	93
27	CHARANVISHWA B	6	3	6	4	4	6.5	3	5	2	4	1	5	50	41	87
28	CHEBATTINA NIKHIL	Absent														
29	CHUJITHA B	6	8	4.5	9	6	8	4	7	2	5	2	5.5	67	56	93
30	DAYANIDHI N	6	6	4.5	5	5.5	7.5	2	7	3	5	1	5	58	48	62
31	DEEPASHRI R	7	9	5.5	7	7.5	8.5	3	6	4	5	2	5.5	70	58	81
32	DEIVANAI M	7	9	2	4	4	9	5	7	3	5	2	5	62	52	68
33	DHEEPANRAAJ	7	9	2.5	5	5.5	7	5	7	3	5	3	3	62	52	87
34	DHEERAJ K	9	10	2.5	7	6	7.5	4	7	2	5	3	4	67	56	93
35	DORAIRAJ S R	8	6	0	2	3	9	5	8	3	5	1	5.5	56	46	68
36	E RETHANYAA	6	7	2.5	4	6	7	5	7	4	6	2	4	61	50	50
37	ESHWAR G	6	3	1.5	1	5.5	6	3	6	2	5	3	5	47	39	50

Note :

Remedial examination for students scoring less than 40% marks.

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The Director

The Dean Academic

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DEAN
SRI MANAKULA VINAYAGAR
MEDICAL COLLEGE & HOSPITAL
KALITHEERTHAKUPPAM,
MADAGADIPET, PUDUCHERRY-605 107.

Professor & HOD

Dept. of Obstetrics & Gynaecology

Dr. M.JAYASREE, D.N.B., MRCOG

Reg. No: 61746

PROFESSOR & HEAD

Department of Obstetrics & Gynaecology

Sri Manakula Vinayagar Medical College & Hos-
pital, Kalitheerthakuppam, Madagadipet, Puducherry-605

Department of Microbiology

TOPICS EVALUATED BY OSPE:

A. SEROLOGICAL TESTS

1. RF test
2. CRP test
3. ASLO test
4. TRUST/ RPR for syphilis
5. Widal for enteric fever
6. HIV-ICT/ELISA
7. HBV- ICT/ELISA
8. Dengue-ICT/ELISA

B. ANTIMICROBIAL SUSCEPTIBILITY TESTING

C. FUNGAL IDENTIFICATION EXERCISE

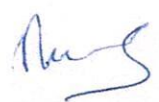
1. *Aspergillus flavus*
2. *Aspergillus fumigates*
3. *Aspergillus niger*
4. *Penicillium species*
5. *Fusarium species*
6. *Trichophyton mentagrophytes*
7. *Rhizopus species*
8. *Candida albicans*
9. *Cryptococcus neoformans*

D. HAND HYGIENE

E. PERSONAL PROTECTIVE EQUIPMENTS

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PROFESSOR & HEAD
DEPARTMENT OF MICROBIOLOGY
SRI MANAKULA VINAYAGAR MEDICAL COLLEGE & HOSPITAL
PUDUCHERRY - 605 107.

Department of Microbiology

Name/ Registration number of student _____

Date: _____

Skill Station: Hand hygiene

Situation: Perform the correct steps of hand hygiene using the hand rub solution provided

Observation: Observe if the participant is performing the following steps of hand hygiene correctly in the correct sequence (as necessary)

Mark "1" for each step done correctly

Mark 0.5 for partially done steps

Mark "0" if the task is not done or incorrectly done and calculate the score.

S.no	STEPS OF HAND HYGIENE	SCORE	REMARKS
1.	Took adequate volume of hand rub		
2.	Palm to palm		
3.	Back of hands (both hands)		
4.	Fingers interlaced (between fingers)		
5.	Fingers interlocked (Back of fingers)		
6.	Thumb rotational (Both hands)		
7.	Tip of fingers rotational (Both hands)		
8.	Allowed hands to dry		

Maximum score: 8

Student score: _____

Remedial: Yes/No

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ANTIMICROBIAL SUSCEPTIBILITY TESTING

Q. Aspirated Pus sample of a patient with an abscess over the gluteal region was sent for culture and sensitivity. Gram stain from the sample showed plenty of pus cells and gram positive cocci in clusters. Blood agar showed beta hemolytic colonies. Catalase and coagulase tests were positive. Antibiotic susceptibility test (AST) was performed using Kirby Bauer disk diffusion method. You are provided with the Zone of inhibition of the various antibiotics tested. Report your observations on the following.

Antibiotic	Observed Zone of Inhibition (mm)
Cefoxitin	12
Penicillin	21
Erythromycin	12
Clindamycin	16
Co-trimoxazole	18
Linezolid	23

CLSI Interpretation guidelines table

Antibiotic	Susceptible	Intermediate	Resistant
Cefoxitin	≥ 22	-	≤ 21
Penicillin	≥ 29	-	≤ 28
Erythromycin	≥ 23	14-22	≤ 13
Clindamycin	≥ 21	15-20	≤ 14
Co-trimoxazole	≥ 16	11-15	≤ 10
Linezolid	≥ 21	-	≤ 20

- A. Identify the organism **(2)**
- B. Interpret the AST based on the observed zones of inhibition **(4)**
- C. Prescribe the appropriate antibiotic to this patient based on the AST findings. Justify **(4)**

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SEROLOGICAL TEST

Q. A 25 yrs old female was admitted with complaints of fleeting joint pain on & off for the past 2 yrs. O/E there were tender sub cutaneous nodules over the left elbow. Physical examination showed evidence of mitral stenosis. A serological test was advised.

1. Identify the serological test.(2)
2. What is the significant titre? (2)
3. What is the principle of the test? (3)
4. What is the clinical diagnosis and treatment? (3)

Antibiotic	Susceptible	Intermediate	Resistant
Cefotaxim	≤23		≥24
Penicillin	≤29		≥30
Erythromycin	≤23	14-22	≥24
Clindamycin	≤21	12-20	≥24
Co-trimoxazole	≤16	11-15	≥17
Linezolid	≤21		≥20

Antibiotic	Observed Zone of Inhibition (mm)
Cefotaxim	12
Penicillin	21
Erythromycin	12
Clindamycin	16
Co-trimoxazole	18
Linezolid	23

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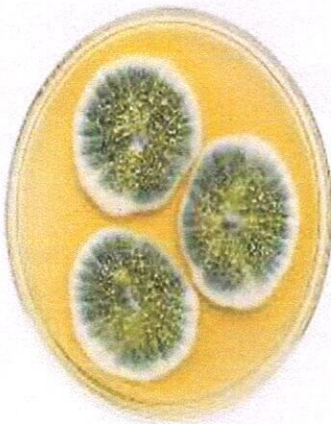
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FUNGAL IDENTIFICATION

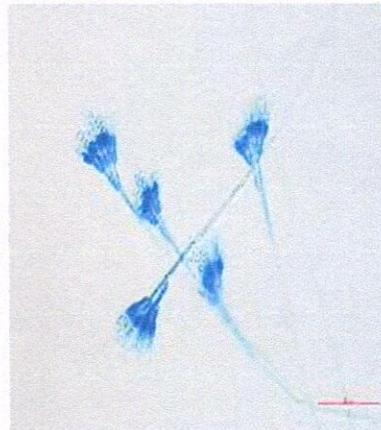
Q. A 50 yrs old farmer was admitted with C/O pain and lacrimation of the left eye following injury with sharp object. O/E there was ulceration of the cornea. Culture yielded a pure growth of the given fungus. Report your observation on the following:-

- A. Describe the colony morphology **(3)**
- B. Describe the microscopic appearance of LPCB mount **(3)**
- C. Identify the causative agent. **(2)**
- D. Name two other infections caused by this fungus. **(2)**

COLONY MORPHOLOGY



LPCB MOUNT



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Kalitheerthalkuppam, Madagadipet, Puducherry-605 107.

No: 177 /SMVMCH/Pediatrics/UG-Schedule/2023

DEPARTMENT OF PAEDIATRICS

Clinical Teaching Schedule for III MBBS – VI semester (2020-2025)

Posting from 24.04.23 to 21.05.23 (4 weeks posting) Batch – A

Time: 10.30 A.M to 1.30 P.M

DATE	TOPIC	COMPETENCY	LOG BOOK(Y/N)	OSCE	FACULTY
24.04.23	Case format revision		–	1-5	Dr.Giridharan
25.04.23	New born history and examination	20.4, 20.5, 20.6	Yes	6-10	Dr.Hemanth
26.04.23	Growth	1.4,2.2, 2.3, 2.5, 33.11	Yes/ Skill session	11-15	Dr.T.Preethi
27.04.23	Development	3.3, 3.4, 3.7, 4.6, 5.11	Yes	16-20	Dr.T.Kanimozhi
28.04.23	Breast feeding	7.5, 7.7, 7.8, 7.9, 7.10, 7.11, 18.6, 18.7	Yes	21-25	Dr.Nithiya
29.04.23	Diarrhea	24.9,24.10, 24.11, 24.12, 24.13, 24.14, 27.14, 27.23	Yes	26-30	Dr.Thambi
02.05.23	IMNCI, Adolescent mal nutrition obesity	10.3, 10.4, 10.5, 16.2, 16.3, 20.18, 8.5, 11.3, 11.4, 11.5, 6.8, 6.9, 6.11	Yes	31-35	Dr.Hemanth
03.05.23	Skills lab – NRP, Temp, NG insertion	20.3, 27.27, 24.15	Yes/Skill Session		Dr.Giridharan Dr.Thambi
04.05.23	RS – ENT, Asthma Atopic Dermatitis	28.10, 28.11, 28.12, 31.2, 31.4, 31.8, 31.9	–	36-40	Dr.Vinothini
05.05.23	CVS – Acyanotic CHD CVS – Cyanotic CHD	23.10, 23.11, 23.12, 23.13, 23.18	Yes	41-45	Dr.Sakthi Abirami
06.05.23	RS - pneumonia	28.13, 28.14, 28.15, 28.16, 34.9	Yes	46-50	Dr.Nithiya

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No: 126 /SMVMCH/Paedi/UG- Schedule/2023

DEPARTMENT OF PAEDIATRICS

Clinical Posting Schedule for II MBBS - 3rd Semester (2021-2026)

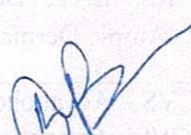
Posting from 27.03.23 to 09.04.23 (2 weeks posting) Batch – B

Time: 10.30 to 1.30 P.M

S. No	DATE	TOPIC	COMPETENCY	LOG BOOK (Y/N)	OSCE Q. NOS.	FACULTY	POSTGRADUATES
1	27.03.23	History taking and development immunization	PE34.5 1.7 19.6, 19.11	Yes/ Cert (3) Yes/ Cert (5)	1-4	Dr.T.Preethi	Dr.Thamizharasan
2	28.03.23	Nutrition, Complementary feeding, diet plan, vitamins and minerals	8.4, 9.4, 9.5 9.7 12.3, 12.4, 12.8, 12.9, 12.17, 12.18, 12.21, 13.3, 13.4, 13.5	Yes Yes	5-8	Dr. Thambi	Dr.Nadheem
3	29.03.23	Anthropometry growth charts	9.6, 33.11	Yes/ Cert (2)	9-12	Dr.Vinothini	Dr.Neha
4	30.03.23	General examination and vitals	34.6, 34.7, 23.8, 23.9, 29.11	Cert (3)	13-16	Dr.Nithiya	Dr.Indhuja
5	31.03.23	Cardiovascular system history and examination	23.7 23.10	Bedside skill	17-20	Dr.Hemanth	Dr.Satya Sujatha
6	03.04.23	Respiratory system History and examination Abdomen history and examination	28.9 26.5, 29.10 26.6, 26.7, 29.12,		21-24	Dr.Giridharan	Dr. Kokila
7	04.04.23	CNS examination Central Nervous System History	30.18, 30.17		25-28	Dr.Nithiya	Dr. Karikalan
8	05.04.23	Newborn history and examination	20.4	Bedside skill	29-32	Dr.Giridharan	Dr.Rajeswari
9	06.04.23	Ward leaving exam					

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Professor & Head
Department of Paediatrics
Dr. T. BHARATH KUMAR

Regd. No: 75119
 PROFESSOR & HEAD
 Department of Pediatrics
 Sri Manakula Vinayagar Medical College & Hospital
 Kalitheerthakuppam, Madagadipet,
 Puducherry-605107.

08.05.23	CVS - ARF/RHD	Nil	Nil	51-55	Dr.A.Arulkumaran
09.05.23	Fever with Hepatosplenomegaly	29.13, 29.14, 29.15, 29.18, 29.19	Yes	56-60	Dr.T.Kanimozhi
10.05.23	Skills lab – 1M, IV, Immunization	19.7, 19.10, 19.12, 19.14, 24.16, 27.20, 15.6, 19.3, 15.7, 24.17, 19.8	Yes/Skill Session		Dr.T.Preethi Dr.Hemanth
11.05.23	Fever with Jaundice	26.8, 26.9, 26.13	Yes	61-65	Dr.Giridharan
12.05.23	Nephrotic Syndrome		–	66-70	Dr.Bharath Kumar
13.05.23	Normal Newborn			71-75	Dr.A.Arulkumara
15.05.23	Acute glomerulo - nephritis		–	76-80	Dr.Nithiya
16.05.23	New born jaundice		–	81-85	Dr.Thambi
17.05.23	Skills lab – BLS/O2/BM/LP/liver biopsy	27.28, 27.10, 27.14, 27.16, 27.15, 27.17, 27.18, 29.17, 30.23, 26.10	Yes/ Skill Session		Dr.Sakthi Abirami Dr.Nithiya
18.05.23	Newborn – preterm/ IUGR/LGA		Yes	86-90	Dr.Bharath Kumar
19.05.23	Ward leaving				
20.05.23	Ward leaving				

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- The Dean
- The Dean (Academic)
- Notice Board
- File

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MEDICAL COLLEGE & HOSPITAL
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Professor & Head
Department of Paediatrics
Dr. T. BHARATH KUMAR
Regd. No: 75119
PROFESSOR & HEAD
Department of Paediatrics
Sri Manakula Vinayagar Medical College & Hospital
Kalitheerthakuppam, Madagadipet,
Puducherry-605107.



DEPARTMENT OF PEDIATRICS

Clinical Teaching Schedule for IV MBBS – VIII Semester (2019-2024)
Posting date from 26.06.23 to 09.07.23 (2 weeks posting) Batch – C1

Time: 10.30 to 1.30 P.M

S. No.	Date	Case	Topic	Competency	OSCE	Log book	Faculty
1	26.06.23	Newborn	Asthma	28.20, 31.11, 31.6	1-5	Y Y	Dr.Bharath Kumar
2	27.06.23	Pediatric	CT, MRI, USG, Chest X ray, X ray KUB	30.21, 30.22, 21.13, 21.12, 34.8	6-10	Y	Dr.Bharath Kumar
3	28.06.23	Pediatric	Genitourinary Pediatric surgery	21.8, 21.9, 21.10, 22.2 21.14, 21.15	11-15	Y	Dr.A.Arulkumaran
4	30.06.23	Neonate	CNS, EEG, Coma and convulsions	30.19, 30.22, 27.22 (c)	16-20	Y	Dr.Bharath Kumar
5	01.07.23	Neonate	Chromosomal disorder	32.2, 32.3, 32.5, 32.7, 32.8, 32.10, 32.12, 32.13	21-25	Y	Dr.T.Preethi
6	03.07.23		X-ray, instruments, Vaccines & Drugs, Nutrition		26-30		Dr.A.Arulkumaran
7	04.07.23	Pediatric	Shock and fluids Abuse and emergency calls	27.19 (c), 27.21 (c) 27.31, 27.30, 27.32, 27.33, 27.34, 27.35	31-35	Y/ cert	Dr.Bharath Kumar
8	05.07.23	Pediatric	Hypothyroid, type 1 DM Ambiguous genitalia, SMR staging, pubertal delay	33.2, 33.3, 33.5 33.7, 33.9, 33.10	36-40	Y	Dr.T.Kanimozhi
9	06.07.23	Pediatric	ECG, ECHO	23.14, 23.15	41-45	Y	Dr.Bharath Kumar
10	07.07.23		Ward Leaving				

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Professor & Head

Department of Paediatrics

Dr. T. BHARATH KUMAR

Regd. No: 75119

PROFESSOR & HEAD

Department of Pediatrics

Sri Manakula Vinayagar Medical College & Hospital
 Kalitheerthakuppam, Madagadipet,
 Puducherry-605107.

162	Saturday	14.11.22	8.30-10.30 AM	Monday				All Teachers
163	Monday	14.11.22	8.30-10.30AM 10.40-1.30 AM	Upper limb- 7 th formative Revision Test AETCOM – Foundations of Communication		AETCOM – Foundations of Communication		
164	Tuesday	15.11.22	10.40-12.40AM	AETCOM – Foundations of Communication	12.40-1.30 PM Femoral Triangle			DR. N.S
165	Wednesday	16.11.22	10.40-11.40AM	Hip joint	Revision Thigh, Gluteal region			Dr. K.V.P.S
166	Thursday	17.11.22	10.40-11.40AM 11.40-12.40 PM	Knee joint Arches of foot	Revision - Knee joint leg, Arches of foot	Upper Limb- OSPE- Test		Dr. N.A.P Dr.R.S
167	Friday	18.11.22	11.40-12.40 PM	Venous drainage				Dr. D.S
168	Monday	21.11.22	8.30-10.30 AM 10.40-11.40AM	Lower limb- 8 th formative Revision Test Peritoneum	Revision –Anterior abdominal wall, Peritoneum			DR. N.S
169	Tuesday	22.11.22	10.40-11.40AM	Inguinal canal	Revision - Inguinal canal			Dr. K.V.P.S
170	Wednesday	23.11.22	10.40-11.40AM	Stomach	Revision- Stomach			Dr. N.A.P
171	Thursday	24.11.22	10.40-11.40AM	Duodenum & Pancreas	Revision- Duodenum & Pancreas	Lower limb- Spotters- OSPE		Dr. D.S
172	Friday	25.11.22	10.40-11.40 PM	Kidney				Dr. R.S
173	Saturday	26.11.22	9.30-10.30 AM	Portal vein	Revision– Thorax			DR. N.S

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DEPARTMENT OF ANATOMY - 2021 - 22


TEACHING SCHEDULE FOR THE MONTH OF NOVEMBER

Sl. No	DAY	DATE	TIME	TOPIC	Practical 11.40AM – 1.30PM All Teachers	Practical 02.30PM-04.30PM All Teachers	FACULTY
154	Wednesday	2.11.22	10.40-11.40AM 11.40-12.40 PM	Anterior triangle Posterior triangle	SGT		Dr. K.V.P.S Dr. N.A.P
155	Thursday	3.11.22	10.40-11.40AM 11.40-12.40 PM	Parotid gland Deep cervical fascia	SGT	H&N OSPE charts, Embryology models, Histology – Batch -B	Dr. D.S Dr. R.S
156	Friday	4.11.22	10.40-11.40 PM	Thyroid gland		H&N OSPE charts, Embryology models, Histology – Batch A	DR. N.S
157	Monday	7.11.22	8.30-10.30AM 10.40-1.30PM	VI-Formative Assessment- Head & Neck part-II MCQ REVISION Spotters REVISION			All Teachers All Teachers
158	Tuesday	8.11.22	10.40-11.40AM	Brachial Plexus-Lecture	Discussion – Brachial plexus, Axilla –I & Pectoral region		Dr. K.V.P.S
159	Wednesday	9.11.22	10.40-11.40AM	Shoulder joint	Discussion – Shoulder joint, Scapular region, Arm		Dr. N.A.P
160	Thursday	10.11.22	10.40-11.40AM	Cubital fossa	Discussion – Cubital fossa, Elbow joint, Forearm, Hand	Head & Neck Spotters - OSPE - Test	Dr. D.S
161	Friday	11.11.22	10.40-11.40 PM	Nerves & Blood vessels of Upper limb			Dr. R.S

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174	Monday	28.11.22	8.30-10.30AM 10.40-11.40AM	Thorax- 9 th Formative Revision Test Uterus	Revision – uterus	All Teachers Dr. K.V.P.S
175	Tuesday	29.11.22	10.40-11.40AM	Urinary bladder	Revision - Urinary bladder	Dr. N.A.P
176	Wednesday	30.11.22	10.40-11.40AM	Rectum	Revision - Rectum	Dr. D.S


Dr.K.V.P.Suriyakumari
Professor & Head,
Department of Anatomy

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Sl. No	DAY	DATE	TIME	TOPIC	Practical 11.40AM – 1.30PM All Teachers	Practical 02.30PM-04.30PM All Teachers	FACULTY
177	Thursday	1.12.22	10.40-11.40AM	Anal canal	Revision – Anal canal	Thorax- Spotters OSPE-Test	Dr. R.S
178	Friday	2.12.22	10.40-11.40 PM	Prostate			DR. N.S
179	Monday	5.12.22	8.30-10.30AM 10.40-11.40AM	10th Formative Test Abdomen – I Ischio-anal fossa	Revision – Abdomen - I		Dr. K.V.P.S
180	Tuesday	6.12.22	10.40-11.40AM	Perineum- I	Revision- Perineum- I		Dr. N.A.P
181	Wednesday	7.12.22	10.40-11.40AM	Perineum- I	Revision- Perineum- I		Dr. D.S
182	Thursday	8.12.22	10.40-11.40AM	Perineum- II	Revision- Perineum- II	Spotters – Abdomen – I OSPE-Test	Dr. R.S
183	Friday	9.12.22	10.40-11.40 PM	Histology –General			DR. N.S
184	Saturday	10.12.22	9.30- 10.30 AM	Histology- Excretory system	Histology – Revision-TEST	Revision – Pelvis & Perineum	Dr. K.V.P.S
185	Monday	12.12.22	8.30-10.30AM 10.40-11.40AM 11.40-12.40 PM	11th Formative Test- Pelvis &perineum Histology – Respiratory system Histology – Endocrinology	Histology - Revision -Test		Dr. N.A.P Dr. D.S

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Dr. K.V.P. Suriyakumari
Professor & Head,
Department of Anatomy

**Department of Forensic Medicine
Session plan**

Name of faculty: Dr. R.N. Kagne, Dr. Vimal. M, Dr. Nishanthi. A

Batch: 2019 (6th Semester)

Date: 17.08.2022 & 23.08.2022

Duration of session: 5 hours

Time: 08:30 to 10:30am & 02:00 to 04:00pm

Topic for the session: AETCOM Module 3.2

Time	Design	T-L method	Moderator
17.08.2022 08.30 to 09.00 am (30 mins)	Pre-test	Google Forms	ALL
09.00 to 09.30 am (30 mins)	Role play – Introduction to Case	Role play	ALL
09:30 to 10.30 am (60 mins)	Small Group Discussion (24 Groups) 1. Medical Error & its types (1 - 4) 2. Swiss cheese model of medical error (5 - 8) 3. Examples of medical errors (Real reported events) (9 – 12) 4. Pros and cons of medical error disclosure to patients their relatives (Ethical/Medico legal perspectives) (13 – 16) 5. Steps in disclosure of medical errors (17 – 20) 6. Strategies in prevention of medical errors (21 – 24)	Self Directed Learning	ALL
02.00 to 04.00 pm (120 mins)	Large Group presentation and discussion (Group 1 – 24) (24 x 5 = 120mins)	Power point presentation	ALL
23.08.2022 02.00 to 02.30 pm (30 mins)	Reflective Writing	Google Forms	ALL
23.08.2022 02.30 to 03.00 pm (30 mins)	Post Test & Feedback	Google Forms	ALL

Dr. R.N. Kagne
Professor

Department of Forensic Medicine

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Sri MANAKULA



VINAYAGAR

Medical college and Hospital

DEPARTMENT OF BIOCHEMISTRY

NAME OF THE TEST

Barfoed's test

Date:

PROCEDURE	Marks																			
Take 2ml of Barfoeds reagent in a clean dry test tube	0.5																			
Add 1 ml of given solution and mix well	0.5																			
keep in boiling water bath for 2 minutes	1																			
Cool under running tap water	0.5																			
Add phosphomolybdic acid soln in drops while mixing well till soln becomes clear.	0.5																			
TOTAL MARKS	4																			

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DEPARTMENT OF BIOCHEMISTRY

I yr. MBBS (2021-22) PRACTICAL SCHEDULE - APRIL 2022

Date: 04.04.2022

Date	Day	Batch	Time	Topic	Faculty
05.04.22	Tue	A & B	2.30-4.30 pm	Introduction to Practical Biochemistry	All faculties
11.04.22	Mon	B	2.30-4.30 pm	Demonstration skills & Introduction to carbohydrates	All faculties
12.04.22	Tue	A	2.30-4.30 pm	Demonstration skills & Introduction to carbohydrates	All faculties
18.04.22	Mon	B	2.30-4.30 pm	Reactions of Monosaccharides	All faculties
19.04.22	Tue	A	2.30-4.30 pm	Reactions of Monosaccharides	All faculties
25.04.22	Mon	B	2.30-4.30 pm	Viva & Reactions of Disaccharides	All faculties
26.04.22	Tue	A	2.30-4.30 pm	Viva & Reactions of Disaccharides	All faculties

S.V. Kulkarni

**Professor & Head
Department of Biochemistry**

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I yr MBBS - Practical Schedule for the month of December- 2019

SI NO	Date	Day	Batch	Time	Topic	Competency	Faculty
1.	02/12/19	Monday	B	2.30-4.30	Analysis of abnormal urine	BI 11.4 (SLO 2)	All Faculties
2.	03/12/19	Tuesday	A	2.30-4.30	Analysis of abnormal urine	BI 11.4 (SLO 2)	All Faculties
3.	09/12/19	Monday	B	2.30-4.30	Analysis of abnormal urine	BI 11.4 (SLO 2)	All Faculties
4.	10/12/19	Tuesday	A	2.30-4.30	Analysis of abnormal urine	BI 11.4 (SLO 2)	All Faculties
5.	16/12/19	Monday	B	2.30-4.30	VIVA & Revision of practical's		All Faculties
6.	17/12/19	Tuesday	A	2.30-4.30	VIVA & Revision of practical's		All Faculties
7.	23/12/19	Monday	B	2.30-4.30	Exam/OSPE		All faculties
8.	24/12/19	Tuesday	A	2.30-4.30	Exam/ OSPE		All faculties
9.	30/12/19	Monday	B	2.30-4.30	Colorimeter	BI11.6	All faculties
10.	31/12/19	Tuesday	A	2.30-4.30	Colorimeter	BI11.6	All faculties

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Department of Biochemistry

Department of Biochemistry
I MBBS (2020 – 21) Practical Schedule September-October 2021

Day	Date	Batch	Practical	Moderator
Monday	30/08/21	B	Estimation of Total Cholesterol, TGL, HDL	All Faculties
Tuesday	31/08/21	A	Estimation of Total Cholesterol, TGL, HDL	All Faculties
Monday	06/09/21	B	Estimation of Bilirubin, AST, ALT	All Faculties
Tuesday	07/09/21	A	Estimation of Bilirubin, AST, ALT	All Faculties
Monday	13/09/21	B	Estimation of ALP, Ca, Phosphorus	All Faculties
Tuesday	14/09/21	A	Estimation of ALP, Ca, Phosphorus	All Faculties
Monday	20/09/21	B	Reactions of carbohydrates	All Faculties
Tuesday	21/09/21	A	Reactions of carbohydrates	All Faculties
Monday	27/09/21	B	IA Practical – 2 / OSPE	All Faculties
Tuesday	28/09/21	A	IA Practical – 2 / OSPE	All Faculties
Monday	04/10/21	B	Analysis of normal urine	All Faculties
Tuesday	05/10/21	A	Analysis of normal urine	All Faculties
Monday	11/10/21	B	IA Practical – 3 / OSPE	All Faculties
Tuesday	12/10/21	A	IA Practical – 3 / OSPE	All Faculties
Monday	18/10/21	B	Analysis of abnormal Urine	All Faculties
Tuesday	19/10/21	A	Analysis of abnormal Urine	All Faculties
Monday	25/10/21	B	IA Practical – 4 / OSPE	All Faculties
Tuesday	26/10/21	A	IA Practical – 4 / OSPE	All Faculties

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I MBBS (2020 – 21) Practical Schedule October- November 2021

Day	Date	Batch	Practical	Moderator
Monday	25/10/21	B	Reactions of carbohydrates and protein	All Faculties
Tuesday	26/10/21	A	Reactions of carbohydrates and protein	All Faculties
Monday	08/11/21	B	Practical Test -1/ OSPE (Reactions of carbohydrates & proteins)	All Faculties
Tuesday	09/11/21	A	Practical Test – 1 / OSPE (Reactions of carbohydrates & proteins)	All Faculties
Monday	15/11/21	B	Practical Test – 2 / OSPE (Analysis of normal & abnormal urine)	All Faculties
Tuesday	16/11/21	A	Practical Test – 2 / OSPE (Analysis of normal & abnormal urine)	All Faculties
Monday	22/11/21	B	Practical Test -3/ OSPE (Quantitative experiments & Instruments)	All Faculties
Tuesday	23/11/21	A	Practical Test -3/ OSPE (Quantitative experiments & Instruments)	All Faculties
Monday	29/11/21	B	Practical Test -4(Charts) / OSPE	All Faculties
Tuesday	30/11/21	A	Practical Test -4(Charts) / OSPE	All Faculties

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Medical College and Hospital

Department Of Biochemistry

I yr MBBS - Practical Schedule for the month of February- 2020

SI NO	Date	Day	Batch	Time	Topic	Competency	Faculty
1.	03/02/20	Monday	B	2.30-4.30	Estimation of Serum& Creatinine	B11.21 11.7	All Faculties
2.	04/02/20	Tuesday	A	2.30-4.30	Estimation of Serum& Creatinine	B11.21 11.7	All Faculties
3.	10/02/20	Monday	B	2.30-4.30	Estimation of Blood urea	B11.21	All Faculties
4.	11/02/20	Tuesday	A	2.30-4.30	Estimation of Blood urea	B11.21	All Faculties
5.	17/02/20	Monday	B	2.30-4.30	Demonstration of TAG Tc & HDL	B11.9 11.10	All Faculties
6.	18/02/20	Tuesday	A	2.30-4.30	Demonstration of TAG Tc & HDL	B11.9 11.10	All Faculties
7.	24/02/20	Monday	B	2.30-4.30	VIVA&Dyslipidemia Charts/ OSPE		All Faculties
8.	25/02/20	Tuesday	A	2.30-4.30	VIVA &Dyslipidemia Charts/ OSPE		All Faculties

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Department of Biochemistry
List of Practicals in Student's Lab
I-MBBS (2019-2020 Batch)

S.No	Name of the Practical
1.	Introduction to laboratory equipments and instructions
Qualitative Experiments	
1.	Qualitative analysis of Carbohydrates
2.	Qualitative analysis of Proteins
3.	Analysis of normal constituents of Urine
4.	Analysis of abnormal constituents of Urine
Quantitative Experiments	
1.	Principle of Colorimetry & Verification of Beer's Law
2.	Estimation of Serum Glucose
3.	Estimation of Serum Urea
4.	Estimation of Serum Creatinine
5.	Estimation of Serum Uric acid
6.	Estimation of Serum Total Protein and Albumin
7.	Estimation of Serum Bilirubin
8.	Estimation of Serum Cholesterol
9.	Estimation of Alanine Transaminase
10.	Estimation of Aspartate Transaminase
11.	Estimation of Alkaline Phosphatase
12.	Estimation of Serum Calcium
13.	Estimation of Serum Phosphorous
14.	Estimation of Serum Amylase
Techniques	
1.	Serum Electrophoresis
2.	Paper Chromatography
3.	Thin Layer Chromatography

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MANAKULA



VINAYAGAR

Medical College and Hospital

Department of Biochemistry

List of Practicals in Student's Lab

I-MBBS (2020-2021 Batch)

S.No	Name of the Practical
1.	Introduction to laboratory equipments and instructions
Qualitative Experiments	
1.	Qualitative analysis of Carbohydrates
2.	Qualitative analysis of Proteins
3.	Analysis of normal constituents of Urine
4.	Analysis of abnormal constituents of Urine
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1.	Principle of Colorimetry & Verification of Beer's Law
2.	Estimation of Serum Glucose
3.	Estimation of Serum Urea
4.	Estimation of Serum Creatinine
5.	Estimation of Serum Uric acid
6.	Estimation of Serum Total Protein and Albumin
7.	Estimation of Serum Bilirubin
8.	Estimation of Serum Cholesterol
9.	Estimation of Alanine Transaminase
10.	Estimation of Aspartate Transaminase
11.	Estimation of Alkaline Phosphatase
12.	Estimation of Serum Calcium
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1.	Serum Electrophoresis
2.	Paper Chromatography
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Department of Biochemistry

List of Practicals in Student's Lab

I-MBBS (2021-2022 Batch)

S.No	Name of the Practical
1.	Introduction to laboratory equipments and instructions
Qualitative Experiments	
1.	Qualitative analysis of Carbohydrates
2.	Qualitative analysis of Proteins
3.	Analysis of normal constituents of Urine
4.	Analysis of abnormal constituents of Urine
Quantitative Experiments	
1.	Principle of Colorimetry & Verification of Beer's Law
2.	Estimation of Serum Glucose
3.	Estimation of Serum Urea
4.	Estimation of Serum Creatinine
5.	Estimation of Serum Uric acid
6.	Estimation of Serum Total Protein and Albumin
7.	Estimation of Serum Bilirubin
8.	Estimation of Serum Cholesterol
9.	Estimation of Alanine Transaminase
10.	Estimation of Aspartate Transaminase
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1.	Serum Electrophoresis
2.	Paper Chromatography
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Department Of Biochemistry
I yr. MBBS - Practical Schedule - April 2021

S.No.	Date	Day	Batch	Time	Topic	Competency No.	Faculty
1.	12/04/21	Mon	B	2.30-4.30	Reactions of Albumin	-	All Faculties
2.	13/04/21	Tues	A	2.30-4.30	Reactions of Albumin	-	All Faculties
3.	19/04/21	Mon	B	2.30-4.30	VIVA	-	All Faculties
4.	20/04/21	Tues	A	2.30-4.30	VIVA	-	All Faculties
5.	26/04/21	Mon	B	2.30-4.30	Test on Reactions of Albumin/OSPE	-	All Faculties
6.	27/04/21	Tues	A	2.30-4.30	Test on Reactions of Albumin/OSPE	-	All Faculties

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I yr. MBBS - Practical Schedule - July August 2021

S.No.	Date	Day	Batch	Time	Topic	Competency No.	Faculty
1.	19.07.21	Mon	B	2.30-4.30	Colour reactions of protein	-	All Faculties
2.	20.07.21	Tues	A	2.30-4.30	Colour reactions of protein	-	All Faculties
3.	26.07.21	Mon	B	2.30-4.30	Colour reactions of protein	-	All Faculties
4.	27.07.21	Tues	A	2.30-4.30	Colour reactions of protein	-	All Faculties
5.	02.08.21	Mon	B	2.30-4.30	Analysis of Normal urine	-	All Faculties
6.	03.08.21	Tues	A	2.30-4.30	Analysis of Normal urine	-	All Faculties
7.	09.08.21	Mon	B	2.30-4.30	Analysis of Normal urine	-	All Faculties
8.	10.08.21	Tues	A	2.30-4.30	Analysis of Normal urine	-	All Faculties
9.	17.08.21	Mon	B	2.30-4.30	Analysis of Abnormal urine		All Faculties
10.	18.08.21	Tues	A	2.30-4.30	Analysis of Abnormal urine		All Faculties
11.	23.08.21	Mon	B	2.30-4.30	Analysis of Abnormal urine		All Faculties
12.	24.08.21	Tues	A	2.30-4.30	Analysis of Abnormal urine		All Faculties
13.	30.08.21	Mon	B	2.30-4.30	Test/OSPE		All Faculties
14.	31.08.21	Tues	A	2.30-4.30	Test/OSPE		All Faculties

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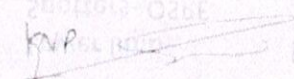
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163	Monday	14.11.22	8.30-10.30AM 10.40-1.30 AM	Upper limb- 7th formative Revision Test AETCOM – Foundations of Communication		AETCOM – Foundations of Communication	All Teachers
164	Tuesday	15.11.22	10.40-12.40AM	AETCOM – Foundations of Communication	12.40-1.30 PM Femoral Triangle		DR. N.S
165	Wednesday	16.11.22	10.40-11.40AM	Hip joint	Revision Thigh, Gluteal region		Dr. K.V.P.S
166	Thursday	17.11.22	10.40-11.40AM 11.40-12.40 PM	Knee joint Arches of foot	Revision - Knee joint leg, Arches of foot	Upper Limb- OSPE- Test	Dr. N.A.P Dr.R.S
167	Friday	18.11.22	11.40-12.40 PM	Venous drainage			Dr. D.S
168	Monday	21.11.22	8.30-10.30 AM 10.40-11.40AM	Lower limb- 8th formative Revision Test Peritoneum	Revision –Anterior abdominal wall, Peritoneum		DR. N.S
169	Tuesday	22.11.22	10.40-11.40AM	Inguinal canal	Revision - Inguinal canal		Dr. K.V.P.S
170	Wednesday	23.11.22	10.40-11.40AM	Stomach	Revision- Stomach		Dr. N.A.P
171	Thursday	24.11.22	10.40-11.40AM	Duodenum & Pancreas	Revision- Duodenum & Pancreas	Lower limb- Spotters- OSPE	Dr. D.S
172	Friday	25.11.22	10.40-11.40 PM	Kidney			Dr. R.S
173	Saturday	26.11.22	9.30-10.30 AM	Portal vein	Revision– Thorax		DR. N.S

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174	Monday	28.11.22	8.30-10.30AM 10.40-11.40AM	Thorax- 9 th Formative Revision Test Uterus	Revision – uterus	All Teachers Dr. K.V.P.S
175	Tuesday	29.11.22	10.40-11.40AM	Urinary bladder	Revision - Urinary bladder	Dr. N.A.P
176	Wednesday	30.11.22	10.40-11.40AM	Rectum	Revision - Rectum	Dr. D.S


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Sl. No	DAY	DATE	TIME	TOPIC	Practical 11.40AM – 1.30PM All Teachers	Practical 02.30PM-04.30PM All Teachers	FACULTY
154	Wednesday	2.11.22	10.40-11.40AM 11.40-12.40 PM	Anterior triangle Posterior triangle	SGT		Dr. K.V.P.S Dr. N.A.P
155	Thursday	3.11.22	10.40-11.40AM 11.40-12.40 PM	Parotid gland Deep cervical fascia	SGT	H&N OSPE charts, Embryology models, Histology – Batch -B	Dr. D.S Dr. R.S
156	Friday	4.11.22	10.40-11.40 PM	Thyroid gland		H&N OSPE charts, Embryology models, Histology – Batch A	DR. N.S
157	Monday	7.11.22	8.30-10.30AM 10.40-1.30PM	VI-Formative Assessment- Head & Neck part-II MCQ REVISION Spotters REVISION			All Teachers All Teachers
158	Tuesday	8.11.22	10.40-11.40AM	Brachial Plexus-Lecture	Discussion – Brachial plexus, Axilla –I & Pectoral region		Dr. K.V.P.S
159	Wednesday	9.11.22	10.40-11.40AM	Shoulder joint	Discussion – Shoulder joint, Scapular region, Arm		Dr. N.A.P
160	Thursday	10.11.22	10.40-11.40AM	Cubital fossa	Discussion – Cubital fossa, Elbow joint, Forearm, Hand	Head & Neck Spotters - OSPE - Test	Dr. D.S
161	Friday	11.11.22	10.40-11.40 PM	Nerves & Blood vessels of Upper limb			Dr. R.S

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Sl. No	DAY	DATE	TIME	TOPIC	Practical 11.40AM – 1.30PM All Teachers	Practical 02.30PM-04.30PM All Teachers	FACULTY
177	Thursday	1.12.22	10.40-11.40AM	Anal canal	Revision – Anal canal	Thorax- Spotters OSPE-Test	Dr. R.S
178	Friday	2.12.22	10.40-11.40 PM	Prostate			DR. N.S
179	Monday	5.12.22	8.30-10.30AM 10.40-11.40AM	10th Formative Test Abdomen – I Ischio-anal fossa	Revision – Abdomen - I		Dr. K.V.P.S
180	Tuesday	6.12.22	10.40-11.40AM	Perineum- I	Revision- Perineum- I		Dr. N.A.P
181	Wednesday	7.12.22	10.40-11.40AM	Perineum- I	Revision- Perineum- I		Dr. D.S
182	Thursday	8.12.22	10.40-11.40AM	Perineum- II	Revision- Perineum- II	Spotters – Abdomen – I OSPE-Test	Dr. R.S
183	Friday	9.12.22	10.40-11.40 PM	Histology –General			DR. N.S
184	Saturday	10.12.22	9.30- 10.30 AM	Histology- Excretory system	Histology – Revision-TEST	Revision – Pelvis & Perineum	Dr. K.V.P.S
	Monday	12.12.22	8.30-10.30AM 10.40-11.40AM 11.40-12.40 PM	11th Formative Test- Pelvis &perineum Histology – Respiratory system Histology – Endocrinology	Histology - Revision -Test		Dr. N.A.P Dr. D.S

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Dr. K.V.P. Suriyakumari
Professor & Head,
Department of Anatomy

2022 AETCOM module 3.2 Pretest Batch 2019-24

Questions Responses 111 Settings

Section 1 of 3

2022 AETCOM Module 3.2: Disclosure of medical errors - Pretest form (II^{lyr} MBBS - batch 2019-24)

The data collected through this form may be used for educational and research purposes. However, the individual identity of the students will not be revealed at any cost.

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Valid email

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- ☐ I do not agree

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Section 1 of 3

2022 AETCOM Module 3.2: Disclosure of medical errors - Post test form (Illyr MBBS - batch 2019-24)

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Section 1 of 2

2022 AETCOM Module 3.2: Disclosure of
medical errors - Discussion topics and case
scenario reflective writing (IInd MBBS - batch
2019-24)

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☐ Yes

☐ No

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РАДАЧАНИНІВ АЛЮЖАНІВ



Відомості про громаду

Громада

Відомості про громаду

Відомості про громаду



DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: AKSHARA

Test Date: 4 July 23

Skill Step	Critical Performance Steps	✓ If done Correctly
1 – Rescuer Adult BLS Skills Evaluation		
During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.		
1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)	✓
2	ACTIVATES emergency response system	✓
3	Checks for PULSE (no more than 10 seconds)	✓
4	Gives HIGH-QUALITY CPR:	
	• Correct Compression HAND PLACEMENT	Cycle 1: ✓
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)	Cycle 2: ✓ Time: ✓
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)	Cycle 3: ✗ ✓
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)	Cycle 4: ✓
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds	Cycle 5: ✓
Second Rescuer AED Skills Evaluation and SWITCH		
During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles		
5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask	✓
6	First rescuer continues compressions while second rescuer turns an AED and applies pads	✓
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH	✓
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock	✓
First Rescuer Bag-Mask Ventilation		
During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask.		
9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:	Cycle 1 Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)	✓
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)	✓

AFTER 2 CYCLES, STOP THE EVALUATION

- If the student completes all steps successfully (a in each box to the right of Critical Performance Criteria), the student passed this scenario.
- If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation
- After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.
- If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.

Instructor Signature: [Signature]

Print Instructor Name: Dr. Sarguman

Date: 4 July

Remediation (if needed):

Instructor Signature: [Signature]

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Print Instructor Name: [Signature]

Date: 4 July

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MADAGADIPET, PUDUCHERRY-605 107.



DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test

18770214

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: ANUSREE K

Test Date: 4/07/2023

Skill Step	Critical Performance Steps	CPR Skills (Circle one): AED Skills (Circle one):	Pass Pass	Needs Remediation Needs Remediation	✓ If done Correctly
1 – Rescuer Adult BLS Skills Evaluation During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.					
1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)				✓
2	ACTIVATES emergency response system				✓
3	Checks for PULSE (no more than 10 seconds)				✗
4	Gives HIGH-QUALITY CPR:				
	• Correct Compression HAND PLACEMENT				Cycle 1: ✓
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)				Cycle 2: Time:
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)				Cycle 3: ✓
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)				Cycle 4: ✓
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds				Cycle 5: ✓
Second Rescuer AED Skills Evaluation and SWITCH During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles					
5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask				✓
6	First rescuer continues compressions while second rescuer turns an AED and applies pads				✓
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH				✓
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock				✓
First Rescuer Bag-Mask Ventilation During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask.					
9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:				Cycle 1 Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)				✓
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)				✓

AFTER 2 CYCLES, STOP THE EVALUATION

- If the student completes all steps successfully (a in each box to the right of Critical Performance Criteria), the student passed this scenario.
- If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation
- After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.
- If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.

Instructor Signature: Dr. Sargunary

Print Instructor Name: Dr. Sargunary

Date: 4/7/23

Remediation (if needed):

Instructor Signature: _____

Print Instructor Name: _____

Date: TRUE COPY ATTESTED



DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test

18770205

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: M. AISHVARYA SHRI

Test Date: 4/7/23

Skill Step	Critical Performance Steps	CPR Skills (Circle one): AED Skills (Circle one):	Pass Pass	Needs Remediation Needs Remediation	✓ If done Correctly
1 – Rescuer Adult BLS Skills Evaluation During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.					
1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)				✓
2	ACTIVATES emergency response system				✓
3	Checks for PULSE (no more than 10 seconds)				✓
4	Gives HIGH-QUALITY CPR:				
	• Correct Compression HAND PLACEMENT				Cycle 1: ✓
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)				Cycle 2: Time: ✓
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)				Cycle 3: ✓
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)				Cycle 4: ✓
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds				Cycle 5: ✓

Second Rescuer AED Skills Evaluation and SWITCH

During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles

5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask				✓
6	First rescuer continues compressions while second rescuer turns an AED and applies pads				✓
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH				✓
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock				✓

First Rescuer Bag-Mask Ventilation

During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask.

9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:				Cycle 1	Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)				✓	
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)				✓	

AFTER 2 CYCLES, STOP THE EVALUATION

- If the student completes all steps successfully (a in each box to the right of Critical Performance Criteria), the student passed this scenario.
- If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation
- After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.
- If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.

Instructor Signature: [Signature]

Print Instructor Name: Dr. Sargunary

Date: 4/7/23

Remediation (if needed):

Instructor Signature:

Print Instructor Name:

Date:

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DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test 18770204

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: ANIL NIVAS MOHAN R.M

Test Date: 4/07/2023

Skill Step	Critical Performance Steps	CPR Skills (Circle one): Pass Needs Remediation	AED Skills (Circle one): Pass Needs Remediation	✓ If done Correctly
1 – Rescuer Adult BLS Skills Evaluation During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.				
1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)			✓
2	ACTIVATES emergency response system			✓
3	Checks for PULSE (no more than 10 seconds)			✗
4	Gives HIGH-QUALITY CPR:			
	• Correct Compression HAND PLACEMENT		Cycle 1:	✓
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)		Cycle 2:	Time:
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)		Cycle 3:	✓
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)		Cycle 4:	✓
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds		Cycle 5:	✓

Second Rescuer AED Skills Evaluation and SWITCH During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles				
5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask			✓
6	First rescuer continues compressions while second rescuer turns an AED and applies pads			✓
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH			✓
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock			✓

First Rescuer Bag-Mask Ventilation During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask.				
9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:		Cycle 1	Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)		✓	
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)		✓	

AFTER 2 CYCLES, STOP THE EVALUATION				
<ul style="list-style-type: none">• If the student completes all steps successfully (a in each box to the right of Critical Performance Criteria), the student passed this scenario.• If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation• After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.• If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.				

Instructor Signature: <u>Dr. Sargunary</u>	Remediation (if needed):
Print Instructor Name: <u>Dr. Sargunary</u>	Instructor Signature: _____
Date: <u>4/7/23</u>	Print Instructor Name: _____
	Date: _____

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DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: 1. GANMADHARAN

Test Date: _____

CPR Skills (Circle one): Pass

Needs Remediation

AED Skills (Circle one): Pass

Needs Remediation

Skill Step

Critical Performance Steps

✓ If done Correctly

1 – Rescuer Adult BLS Skills Evaluation

During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.

1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)	✓	
2	ACTIVATES emergency response system	✓	
3	Checks for PULSE (no more than 10 seconds)	✓	
4	Gives HIGH-QUALITY CPR:		
	• Correct Compression HAND PLACEMENT	Cycle 1: ✓	
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)	Cycle 2: ✓	Time: 16 sec
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)	Cycle 3: ✓	
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)	Cycle 4: ✓	
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds	Cycle 5: ✓	

Second Rescuer AED Skills Evaluation and SWITCH

During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles

5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask	✓	
6	First rescuer continues compressions while second rescuer turns an AED and applies pads	✓	
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH	✓	
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock	✓	

First Rescuer Bag-Mask Ventilation

During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask.

9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:	Cycle 1	Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)	✓	✓
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)	✓	✓

AFTER 2 CYCLES, STOP THE EVALUATION

- If the student completes all steps successfully (a ✓ in each box to the right of Critical Performance Criteria), the student passed this scenario.
- If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation
- After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.
- If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.

Instructor Signature: _____

Remediation (if needed):

Instructor Signature: _____

Print Instructor Name: _____

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Print Instructor Name: _____

Date: _____

Date: _____

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MEDICAL COLLEGE & HOSPITAL
KALITHEERTHAL KUPPAM,
MADAGADIPET, PUDUCHERRY-605 107.



DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: HARISH T-S

Test Date: 5/7/23

Skill Step	Critical Performance Steps	CPR Skills (Circle one): AED Skills (Circle one):	Pass Pass	Needs Remediation Needs Remediation	✓ If done Correctly
1 – Rescuer Adult BLS Skills Evaluation During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.					
1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)				✓
2	ACTIVATES emergency response system				✓
3	Checks for PULSE (no more than 10 seconds)				✓
4	Gives HIGH-QUALITY CPR:				
	• Correct Compression HAND PLACEMENT				Cycle 1: ✓
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)				Cycle 2: ✓ Time: 21 sec
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)				Cycle 3: ✓
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)				Cycle 4: ✓
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds				Cycle 5: ✓

Second Rescuer AED Skills Evaluation and SWITCH

During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles

5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask				✓
6	First rescuer continues compressions while second rescuer turns an AED and applies pads				✓
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH				✓
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock				✓

First Rescuer Bag-Mask Ventilation

During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask

9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:				Cycle 1	Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)				✓	✓
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)				✓	✓

AFTER 2 CYCLES, STOP THE EVALUATION

- If the student completes all steps successfully (a ✓ in each box to the right of Critical Performance Criteria), the student passed this scenario.
- If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation
- After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.
- If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.

Instructor Signature: _____

Remediation (if needed):

Instructor Signature: _____

Print Instructor Name: _____

Print Instructor Name: _____

Date: _____

Date: _____

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MEDICAL COLLEGE & HOSPITAL
KALITHEERTHALKUPPAM
MADAGADIPE, PUDUCHERRY-605 007



DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: EYA2HINI.S 18770236 Test Date: 5/7/23

CPR Skills (Circle one):		Pass	Needs Remediation
AED Skills (Circle one):		Pass	Needs Remediation
Skill Step	Critical Performance Steps	✓ If done Correctly	
1 – Rescuer Adult BLS Skills Evaluation			
During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.			
1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)	✓	
2	ACTIVATES emergency response system	✓	
3	Checks for PULSE (no more than 10 seconds)	✓	
4	Gives HIGH-QUALITY CPR:		
	• Correct Compression HAND PLACEMENT	Cycle 1: ✓	
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)	Cycle 2: ✓	Time: 14 sec
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)	Cycle 3: ✓	
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)	Cycle 4: ✓	
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds	Cycle 5: ✓	
Second Rescuer AED Skills Evaluation and SWITCH			
During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles			
5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask	✓	
6	First rescuer continues compressions while second rescuer turns an AED and applies pads	✓	
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH	✓	
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock	✓	
First Rescuer Bag-Mask Ventilation			
During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask			
9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:	Cycle 1	Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)	✓	✓
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)	✓	✓
AFTER 2 CYCLES, STOP THE EVALUATION			
<ul style="list-style-type: none">• If the student completes all steps successfully (a in each box to the right of Critical Performance Criteria), the student passed this scenario.• If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation• After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.• If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.			
Instructor Signature: _____		Remediation (if needed):	
Print Instructor Name: _____		Instructor Signature: _____	
Date: _____		Print Instructor Name: _____	
		Date: _____	

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KALITHEERTHAL KUPPAM,
ADAGADIPEI, PULUUCHESHI-605 109



DEPARTMENT OF ANESTHESIOLOGY

CPR and AED Skills Test

1- And 2- Rescuer Adult BLS – CPR and AED Checklist

Candidate Name & ID: D. B. KALAISELVI

Test Date: 5/7/23

Skill Step	Critical Performance Steps	✓ If done Correctly
I – Rescuer Adult BLS Skills Evaluation		
During this first phase, evaluate the first rescuer's ability to initiate BLS and deliver high-quality CPR for 5 cycles.		
1	ASSESSES: Checks for response and for no breathing or no normal breathing, only gasping (at least 5 seconds but no more than 10 seconds)	✓
2	ACTIVATES emergency response system	✓
3	Checks for PULSE (no more than 10 seconds)	✓
4	Gives HIGH-QUALITY CPR:	
	• Correct Compression HAND PLACEMENT	Cycle 1: ✓
	• ADEQUATE RATE: At least 100/min (i.e., delivers each set of 30 chest compressed in 18 seconds or less)	Cycle 2: ✓ Time: 20 sec
	• ADEQUATE DEPTH: Delivers compression at least 2 inches in depth (at least 23 out of 30)	Cycle 3: ✓
	• ALLOWS COMPLETE CHEST RECOIL (at least 23 out of 30)	Cycle 4: ✓
	• MINIMIZES INTERRUPTIONS: Gives breathes with pocket mask in less than 10 seconds	Cycle 5: ✓

Second Rescuer AED Skills Evaluation and SWITCH

During this next phase, evaluate the second rescuer's ability to use the AED and both rescuer's abilities to switch roles

5	DURING FIFTH SET OF COMPRESSIONS: Second rescuer arrives with AED and bag mask	✓
6	First rescuer continues compressions while second rescuer turns an AED and applies pads	✓
7	Second rescuer clears victim, allowing AED to analyze-RESCUERS SWITCH	✓
8	If AED indicates a shockable rhythm, second rescuer clears victim again and delivers shock	✓

First Rescuer Bag-Mask Ventilation

During this next phase, evaluate the first rescuer's ability to give breaths with a bag-mask

9	Both rescuers RESUME HIGH-QUALITY-CPR immediately after shock delivery:	Cycle 1	Cycle 2
	• SECOND RESCUER gives 30 compressions immediately after shock delivery (for 2 cycles)	✓	✓
	• FIRST RESCUER successfully delivers 2 breaths with bag-mask (for 2 cycles)	✓	✓

AFTER 2 CYCLES, STOP THE EVALUATION

- If the student completes all steps successfully (a in each box to the right of Critical Performance Criteria), the student passed this scenario.
- If the student does not complete all steps successfully (as indicated by a blank box to the right of any of the Critical Performance Criteria), give the form to the student for review as part of the student's remediation
- After reviewing the form, the student will give the form to the instructor who is reevaluating the student, the student will reperform the entire scenario, and the instructor will notate reevaluation on this same form.
- If the reevaluation is to be done at a different time, the instructor should collect this sheet before the student leaves the classroom.

Instructor Signature: _____

Print Instructor Name: _____

Date: _____

Remediation (if needed):

Instructor Signature: _____

Print Instructor Name: _____

Date: _____

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5/7/23

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DEPARTMENT OF ANAESTHESIOLOGY

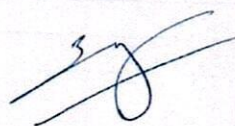
CRIM- Orientation Program

Basic Life Support –Skill Training

S.No	Name	Pretest Mark	Post test Mark
1	Barathselvan	10 / 20	19/20
2	Arunachalam	11 / 20	18/20
3	Agilan	11 / 20	16/20
4	Aravind	9 / 20	15/20
5	Chandrakanth	11 / 20	17/20
6	Ajiesh	9 / 20	14/20
7	Ahilniv	12 / 20	18/20
8	Abbivignesh	10 / 20	16/20
9	Chavith	3 / 20	13/20
10	Avacollin	11 / 20	16/20
11	Narmadha	4 / 20	19/20
12	Dhanya	13 / 20	14/20
13	Aishwarya vel	8 / 20	20/20
14	Alaukika bansal	9 / 20	19/20
15	Sowjanya	8 / 20	17/20
16	Barshini	10 / 20	14/20
17	Archana	5 / 20	18/20
18	K. deva suriya	17 / 20	15/20
19	Akshara	12 / 20	18/20
20	Citi babu	10 / 20	16/20
21	Anusree	13 / 20	19/20
22	Bismi maheen	12 / 20	14/20
23	Akshaya	7 / 20	20/20
24	Keerthana	8 / 20	19/20
25	Keren daniel	12 / 20	17/20
26	Jeevitha	7 / 20	14/20
27	Jennita	8 / 20	18/20
28	Janani j	11 / 20	16/20
29	Graciya jacob	12 / 20	14/20
30	Jothika pandey	9 / 20	16/20
31	Kalaiselvi	7 / 20	15/20
32	Jayaprabha	10 / 20	17/20
33	Gomathi	18 / 20	18/20
34	Jeevitha	8 / 20	18/20
35	Eyazhini	7 / 20	16/20
36	Karthiga	6 / 20	14/20

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37	Jerusha	8 / 20	15/20
38	Divya	10 / 20	17/20
39	Girija	13 / 20	16/20
40	Kiruthika john	11 / 20	19/20
41	Gangadharan	12 / 20	14/20
42	Grish	7 / 20	20/20
43	Kuzhali	7 / 20	19/20
44	Gurucharan	16 / 20	17/20
45	Karthik raj	12 / 20	14/20
46	Kirthana t	10 / 20	18/20
47	Hemanth kumar	12 / 20	16/20
48	Harish	10 / 20	19/20
49	Manimozhi	7 / 20	14/20
50	Sonali nenavata	8 / 20	20/20
51	Litty maria augustine	11 / 20	19/20
52	Gowtham	9 / 20	17/20
53	Meena loshini	11 / 20	14/20
54	Pavithra	6 / 20	18/20
55	Madhumitha	14 / 20	17/20
56	Malika sinha	13 / 20	18/20
57	Logarchana	5 / 20	18/20
58	Parvathi	9 / 20	16/20
59	Manami	11 / 20	13/20
60	Maazna	9 / 20	15/20
61	Mangaiyar thilagam	10 / 20	17/20
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63	Lakshmi karthika	7 / 20	15/20
64	Kamali	11 / 20	18/20
65	Manickam	13 / 20	19/20
66	Poorna vignesh	11 / 20	17/20
67	Natisha	10 / 20	15/20
68	Lajvanthi	13 / 20	17/20
69	Ponmanaselvan	12 / 20	18/20
70	Mukesh raj	12 / 20	16/20
71	Nirmala	12 / 20	18/20
72	Nithyasree	10 / 20	15/20
73	Prasana	7 / 20	16/20
74	Sathiya sri prasad	8 / 20	14/20
75	Rajithra	12 / 20	17/20
76	Shyam sundar P	7 / 20	13/20
77	Sneha	13 / 20	20/20
78	Rithi vibansya	8 / 20	14/20
79	Sivasoundar	11 / 20	18/20
80	Raja lakshmi	8 / 20	14/20

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81	Prasanna	12 / 20	16/20
82	Raghuram	14 / 20	18/20
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118	Subalakshmi	13 / 20	19/20
119	Sriram seshamani	5 / 20	17/20
120	Amrutha	13 / 20	19/20
121	Stephil sam	Absent	Absent
122	Visayama	Absent	Absent
123	Varadharjan	Absent	Absent
124	Guruprasath	Absent	Absent

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125	Subitsha	Absent	Absent
126	Jashwanth	Absent	Absent
127	Ramu	Absent	Absent

Dr.C.Prasath
Professor

Department of Anaesthesiology

Dr. C. PRASATH

Regd. No. 59992
PROFESSOR

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Dr.Suneeth P Lazarus
Professor & Head

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Dr. SUNEETH P LAZARUS, M.D.

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DEPARTMENT OF ANAESTHESIOLOGY

CRIM- Orientation Program

Basic Life Support –Skill Training

S.No	Name	Pretest Mark	Post test Mark
1	Barathselvan	10 / 20	19/20
2	Arunachalam	11 / 20	18/20
3	Agilan	11 / 20	16/20
4	Aravind	9 / 20	15/20
5	Chandrakanth	11 / 20	17/20
6	Ajiesh	9 / 20	14/20
7	Ahilmiv	12 / 20	18/20
8	Abbivignesh	10 / 20	16/20
9	Chavith	3 / 20	13/20
10	Avacollin	11 / 20	16/20
11	Narmadha	4 / 20	19/20
12	Dhanya	13 / 20	14/20
13	Aishwarya vel	8 / 20	20/20
14	Alaukika bansal	9 / 20	19/20
15	Sowjanya	8 / 20	17/20
16	Barshini	10 / 20	14/20
17	Archana	5 / 20	18/20
18	K. deva suriya	17 / 20	15/20
19	Akshara	12 / 20	18/20
20	Citi babu	10 / 20	16/20
21	Anusree	13 / 20	19/20
22	Bismi maheen	12 / 20	14/20
23	Akshaya	7 / 20	20/20
24	Keerthana	8 / 20	19/20
25	Keren daniel	12 / 20	17/20
26	Jeevitha	7 / 20	14/20
27	Jennita	8 / 20	18/20
28	Janani j	11 / 20	16/20
29	Graciya jacob	12 / 20	14/20
30	Jothika pandey	9 / 20	16/20
31	Kalaiselvi	7 / 20	15/20
32	Jayaprabha	10 / 20	17/20
33	Gomathi	18 / 20	18/20
34	Jeevitha	8 / 20	18/20
35	Eyazhini	7 / 20	16/20
36	Karthiga	6 / 20	14/20

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37	Jerusha	8 / 20	15/20
38	Divya	10 / 20	17/20
39	Girija	13 / 20	16/20
40	Kiruthika john	11 / 20	19/20
41	Gangadharan	12 / 20	14/20
42	Grish	7 / 20	20/20
43	Kuzhali	7 / 20	19/20
44	Gurucharan	16 / 20	17/20
45	Karthik raj	12 / 20	14/20
46	Kirthana t	10 / 20	18/20
47	Hemanth kumar	12 / 20	16/20
48	Harish	10 / 20	19/20
49	Manimozhi	7 / 20	14/20
50	Sonali nenavata	8 / 20	20/20
51	Litty maria augustine	11 / 20	19/20
52	Gowtham	9 / 20	17/20
53	Meena loshini	11 / 20	14/20
54	Pavithra	6 / 20	18/20
55	Madhumitha	14 / 20	17/20
56	Malika sinha	13 / 20	18/20
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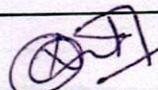
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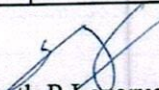
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