# <u>Syllabus</u>

# Objective Structured Clinical Examination (OSCE) of DM/MCh Programs Conducted by Different Departments of SCTIMST



#### श्री चित्रा तिरुनाल आयुर्विज्ञान और प्रौद्योगिकी संस्थान, त्रिवेंद्रम केरल- 695 011, भारत SREE CHITRA TIRUNAL INSTITUTE FOR MEDICAL SCIENCES AND TECHNOLOGY, TRIVANDRUM KERALA - 695 011, INDIA ((एक राष्ट्रीय महत्व का संस्थान, विज्ञान एवं प्रौद्योगिकी विभाग, भारत सरकार)

((एक राष्ट्रीय महत्व का संस्थान, विज्ञान एवं प्रौद्योगिकी विभाग, भारत सरकार) (An Institution of National Importance, Department of Science and Technology, Govt. of India)

टेलीफॉन नं/.Telephone No. 0471-2443152 फाक्स/Fax: 0471-2446433,2550728

ई-मेल/E-mail :sct@sctimst.ac.in वेबसाइट/ Website : www.sctimst.ac.in

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## 1. **GENERAL INFORMATION**

Objective Structured Clinical Examination (OSCE) will be conducted with the internal assessment of all DM/MCh programs offered by various departments of SCTIMST. First OSCE (termed OSCE 1) will be conducted along with the internal assessment 2. The second OSCE (termed OSCE 2) will be conducted along with internal assessment 4. Maximum marks awarded for OSCE 1 and OSCE 2 are 50 each. The syllabi for OSCE for different DM and MCh programs conducted at various departments/divisions of SCTIMST are given below along with the syllabi for internal assessment.

## 2. DEPARTMENT OF ANESTHESIOLOGY

#### 2.1. PROGRAM: DM CARDIOVASCULAR AND THORACIC ANESTHESIA

#### 2.1.1. Syllabi of Internal Assessments

Sl. No.	Syllabus
Internal	1. Anatomy of Heart, and coronary arteries
Assessment 1	2. Anatomy of Aorta and branches
	3. Coronary blood flow
	4. Cardiac physiology
	5. Basics of mechanical ventilation, modes of ventilation
	6. Basics of acid-base disorders
	7. Respiratory physiology relevant to pulmonary circulation.
	8. Spinal cord circulation and spinal perfusion pressure
Internal	1. APPLIED PHARMACOLOGY: Basic and correlative pharmacology of
Assessment 2	drugs acting on the cardiovascular system and principles of vaso-active
(Theory)	drugs used in the perioperative period.
	2. APPLIED PATHOLOGY: General and Medical cardiac pathology (e.g.,
	CCP, pulmonary oedema, circulatory shock, brain heart and other organs
	interactions in pathological; state, ARDS, disorders of fluid, electrolyte,
	blood glucose, biomarkers, etc.).
	3. APPLIED MICROBIOLOGY: Pulmonary infections, Bloodborne
	infections, Surgical site infection following cardiac and thoracic surgery,
	and nosocomial infection in the intensive care units, sepsis. Management,
	Prevention of infections, Infection control in OT and ICU.
	4. Biostatistics - Sensitivity, specificity, type 1&2 errors, correlation
	coefficient, Regression analysis, odds ratio, sample size, Test for means,
	meta-analysis, planning a research study.
	5. Peri-operative and critical care hemodynamic and respiratory monitoring,
	basic and advanced.
	6. Transthoracic echocardiography basics and views.
Internal	1. Anesthesia and Intensive care management of ruptured abdominal
Assessment 3	aortic aneurysm.
	2. Anesthesia for coronary revascularisation.
	3. Anesthesia for valvular heart diseases.
	4. Anesthesia for cyanotic heart diseases.
	5. Anesthesia for acyanotic CHD.

	6. Anesthesia for CT and MRI procedures for cardiac disorders.					
	7. Anaesthesia for cardiac interventions for CHD.					
	8. Anesthesia for electrophysiology and pacemakers.					
	9. Anaesthesia for Thoracic surgeries.					
	10. Anesthesia management for coronary interventions and					
	percutaneous valve implantations.					
	11. Intraoperative Transesophageal echocardiographic monitoring.					
	12. Intraoperative neuromonitoring (TCD, evoked potentials, NIRS,					
	etc.).					
	13. Intraoperative coagulation monitoring.					
	14. Cardiac output monitoring					
Internal	1. Recent advances in cardiac anesthesia, cardiac surgery, cardiology					
Assessment 4	procedures relevant to anaesthesia including minimally invasive and					
(Theory)	robotic surgery.					
	2. Hemodynamic monitoring.					
	3. Vascular interventions for aortic aneurysmal diseases.					
	4. Cerebral protection during CPB related events and carotid artery					
	surgery.					
	5. Recent major trials, guidelines in cardiac anesthesia.					
	<ol> <li>Surgery.</li> <li>Recent major trials, guidelines in cardiac anesthesia.</li> <li>Intensive care of patients following cardiac surgery, thoracic surgery and vascular surgery.</li> </ol>					
	<ol> <li>Surgery.</li> <li>Recent major trials, guidelines in cardiac anesthesia.</li> <li>Intensive care of patients following cardiac surgery, thoracic surgery and vascular surgery.</li> <li>Acute pain services, regional blocks for cardiac surgeries.</li> </ol>					

## 2.1.2. Syllabus for OSCE 1

OSCE 1 will be conducted along with internal assessment 2 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Drugs	Investigations	Equipment	Guidelines/ Procedures/ Recent Advances in Anesthesia	Acute Cardiac Care
Anesthetic Agents	Arterial Blood	Ventilators	Central	Shock Patients
Opioids, Analgesics	Dulmonary	Anesthesia Machine	Catheters	Arrhythmia
Muscle Relaxants	Function Tests	Airway	Tracheostomy	Brain Oriented Resuscitation
Vasoactive	Lung And Airway	Adjuncts	Patient	Post OP
Vasodilators	- Xray, USG, CT Scan	Systemic And	Transport	Bleeding and
Anticoagulants	Basics of Cardiac	Pulmonary Pressure	Sepsis, VAP	Cardiac Tamponade
Osmotic Agents	and Vascular CT	Monitoring	Anesthesia Guidelines	1

Hormones	Preanesthetic	Cardiac Output	Airway	Pulmonary
	Evaluation Adult	Monitoring	Guidelines	Hypertensive
Steroids	CHD	Techniques	Radiation/	Crisis
		NMT	MRI Safety	Cyanotic Spell
		Lung &Airway		Infection
		Ultrasound		Control in ICU
				Massive Blood
				Transfusion

# 2.1.3. Syllabus for OSCE 2

OSCE 2 will be conducted along with internal assessment 4 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Drugs	Investigations	Equipment	Guidelines/ Procedures/ Recent Advances In Cardiac Anesthesia	Acute Cardiac Care
Antibiotics Prostacyclin and Thrombolytics Managing Anticoagulation Antiplatelet Drugs Resuscitation Fluids Blood and Blood Products Local Anesthetics	EEG Processed EEG in Anesthesia and ICU TCD MRI Sequences SJVO2 Biomarkers Echo, Cardiac Output	NIRS Echo EEG, Depth of Anesthesia Monitoring ONSD Advaced Airway Devices TEE IABP Bronchoscopy	AnestnesiaCardiacTamponadeMyocardialInfarctionCyanotic SpellParaplegia afterThoracic AorticSurgeryRegionalAnesthesia-USGGuidedAwake IntubationMinimally InvasiveCardiac Surgery	Brain Death and Organ Donation Massive Blood Transfusion Myasthesnia Crisis Sepsis and Blood Stream Infection Acute Limb Ischemia Emergency Coronary Intervention
			ЕСМО	

#### 2.2. PROGRAM: DM NEUROANESTHESIA

## 2.2.1. Syllabi of Internal Assessments

Sl. No.	Syllabus
Internal	1. Anatomy of brain, cranial nerves, blood vessels
Assessment 1	2. Anatomy of the spinal cord, vertebral column
(Theory)	3. Cerebral blood flow
	4. Cerebral metabolism
	5. Physiology of CSF
	6. Basics of mechanical ventilation, modes of ventilation
	7. Basics of acid-base disorders
	8. Respiratory physiology relevant to neuroanesthesia
	9. Cardiovascular physiology relevant to Neuroanesthesia.
	10. Intracranial pressure.
Internal	1. APPLIED PHARMACOLOGY: Basic and correlative pharmacology of
Assessment 2	drugs acting on the nervous system and principles of neurotherapeutics,
(Theory)	various drugs used in anesthesia and neurocritical care.
	2. APPLIED PATHOLOGY: General and Medical neuropathology. (e.g.
	ICP, cerebral edema, neurogenic pulmonary edema, brain heart and
	other organs interactions in pathological; state, ARDS, disorders of
	fluid, electrolyte, blood glucose, biomarkers, etc.
	3. APPLIED MICROBIOLOGY: Pulmonary infections, infection
	of the brain, spinal cord and its meninges, infection following
	Neurosurgery, and nosocomial infection in the intensive care units,
	sepsis. Management, Prevention of infections, Infection control in
	OT and Neuro ICU.
	4. <b>BIOSTATISTICS:</b> Sensitivity, specificity, type 1&2 errors, correlation
	coefficient, Regression analysis, odds ratio, sample size, Test for
	means, meta-analysis, planning a research study.
	5. Perioperative and critical care hemodynamic and respiratory monitoring.
	basic and advanced.
T ( 1	
Internal	1. Anesthesia and Intensive care management of head injured, SAH,
(Theory)	2 Anesthesia for supratentorial surgeries
(Theory)	3. Anesthesia for infratentorial surgeries
	4. Anesthesia for epilepsy surgery
	5. Anesthesia for pediatric neurosurgery
	6. Anesthesia for MRI procedures, intervention neuroradiology
	7. Anesthesia for aneurysm, AVMs and neurovascular procedures
	8. Pituitary hormones and anesthesia for pituitary surgery,
	A nesthesis management of head injury and spinal trauma
	10 Intraoperative neuromonitoring (FFG Depth of anesthesia TCD
	evoked potentials, NIRS, etc.)
	1 , , , ,

Internal	1. Recent advances in Neuroanesthesia, Neurosurgery, neuroradiology
Assessment 4	procedures relevant to neuroanesthesia (image guidance,
(Theory)	Intraoperative MRI, robotic surgeries).
	2. Neuromonitoring.
	3. Neuroradiology.
	4. Neuroprotection, neuronal plasticity, gene therapy,
	Neurorehabilitation, Brain death and Organ donation,
	5. Recent major trials, guidelines in neuroanesthesia
	6. Intensive care of patients following Neurosurgery, Neuro medical
	disorders. surgery. (Myasthenia gravis, GBS, acute stroke, status
	epilepticus, neurotrauma, Meningitis)
	7. Acute pain services, Chronic pain syndromes, Neuropathic Pain,
	Trigeminal neuralgia, etc. management.

# 2.2.2. Syllabus for OSCE 1

Station 1	Station 2	Station 3	Station 4	Station 5
Drugs	Investigations	Equipment	Guidelines/ Procedures/ Recent Advances in Anesthesia	Acute Neurocare - PBLD
Anesthetic Agents Opioids, Analgesics	ABG Pulmonary	Ventilators Anesthesia	Central Lines Tracheostomy	Unconscious Patient
Muscle Relaxants	Function Tests	Machine	Patient	Raised ICP
Vasoactive/	Lung and Airway - X-ray, USG, CT	Airway Gadgets	Transport Sepsis VAP	Brain Oriented Resuscitation
Vasodilators	Scan Basics of Head	ICP Monitoring	Anesthesia	Status Epilepticus
Osmotic Agents	CT Preenesthatia	NMT	Guidelines Airway	Triage of
Hormones	Evaluation of	Lung &Airway	Guidelines	Infection
Steroids	Problems	Ultrasound	Radiation/ MRI Safety	Control in ICU Anaphylaxis

## 2.2.3. Syllabus for OSCE 2

Station1	Station 2	Station 3	Station 4	Station 5
Drugs	Investigations	Equipment	Guidelines/ Procedures/ Recent Advances In Neuro Anesthesia	Acute Neurocare- Pbld
Antibiotics	EEG	TCD	SAH	Brain Death And
Inmmunosuppress ants, IVIG	Processed EEG in	Echo IONM	Stroke Brain, Spinal	Organ Donation Vasospasm
Managing Anticoagulation/	ICU	EEG, Depth of	Trauma	Myasthenia Gravis
Antiplatelet	TCD	Anesthesia Monitoring	Epilepsy	Meningitis
Drugs	MRI Sequences	NIRS	Regional Anesthesia-USG	GB Syndrome
IV Fluids, Blood Products	SJVO2 Biomarkers	ONSD Advanced	Guided Awake Intubation	Emergency Neuroradiology
Local Anesthetics	Echo, Cardiac Output	Airway Devices	Minimally Invasive Neurosurgery	

OSCE 2 will be conducted along with internal assessment 4 in 5 different stations.

## 3. DEPARTMENT OF CARDIOLOGY

#### 3.1. PROGRAM: DM CARDIOLOGY

#### 3.1.1. Syllabi of Internal Assessments

Sl. No.	Time Line	Syllabus
Internal	At the end of 6	Cardiac Anatomy, Cardiac Physiology, Genetics,
Assessment 1	months	Cardiac development, Cardiac Pathology,
		Pharmacology, Electrocardiography and Holter
Internal	At the end of 12	Non-invasive imaging in cardiology: Echo Doppler,
Assessment 2	months	MRI, Cardiac CT, Radionuclide studies
		ii) Cardiac hemodynamics, cardiac angiography,
		iii) Cardiac failure
Internal	At the end of 24	Clinical Cardiology, Cardiac Electrophysiology and
Assessment 3	months	rhythm disorders, Cardiac therapeutics, Cardiac
		Epidemiology.

Internal	At the end of 30	Recent advances (last 5 years) in Cardiology, Areas
Assessment 4	months	for future research in cardiology, Areas of
		advancement in cardiology.

#### 3.1.2. Syllabus for OSCE 1

OSCE 1 will be conducted along with internal assessment 2 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Drugs	ECG	Echo	Hemo-	Pediatric
			Dynamics	Cardiology
Antianginals	STEMI	Rheumatic	Basic Cath	CCHD
		VHD		(Cynotic Spell)
Antiplatelets	NSTEMI		Catheter	
		DCM	Course	X-Ray
Anticoagulants	Exercise ECG			
		RCM	Oxymetry	ECG
Thrombolytic Agents	Bradyarrythmias		(Blood Gas)	
		HCM		Echo (Situs,
Antilipidemic	Tachyarrythmias		РАН	Shunt, Pah,
Agents		Pericardial		Anatomy)
	Pacemaker ECG	Diseases	Assessment Of	
GDMT for HF			Valves	Management
(Betablockers,	Electrolyte	Pulmonary		(Medical/
ARNI, ACEI,	Imbalances	Hypertension	RCM Vs CCP	Intervention/
ARBS, MRAS,				Surgical)
SGLT2i)	Cardiomyopathy	CAD	Pericardial	
	(HCM, ARVD)		Tamponade	
Diuretics		DSE		
	HUTT/Holter		Prosthetic	
Antihypertensives		Shunt Lesions	Valves	
			(Profiling,	
Antiarryhtmics		Prosthetic	Etc.)	
		Valves		
Inotropes				
РАН				

#### 3.1.3. Syllabus for OSCE 2

OSCE 2 will be conducted along with internal assessment 4 in 7 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Electrophysiology	Angiograms	Interventional	Imaging	Preventive
		Cardiology		Cardiology
Basic EP Study	CAG	PTCA – Primary	TEE	Diet
		& Elective		
HUTT	Access (Radial		ICE	Yoga
	Vs. Femoral)			_

Holter		Adjuctive	Cardiac CT	Stress/Anxiety/
	LV/RV	Devices for		Depression
Sinus Node/AV	Angiogram	PTCA (ROTA,	Cardiac MRI	_
Node Dysfunction		IVL, Laser,		Exercise
	RSOV/ CAVF	Orbital	PET-CT	Prescription
Atrial Arrhythmias		Atherectomy,		
(Diagnosis &	Aortic & PA	etc.)	Nuclear	CAD
Management)	Angiogram		Imaging	
		CTO Techniques		Diabetis
SVT (Diagnosis &	Coronary		Acess Site	
Management)	Venogram	Intravascular	Doppler	Hypertension
		Imaging (IVUS,		
Ventricular	Peripheral	OCT, etc.)	DSE	Dyslipidemia
Arrhythmias	Angiogram			
(Diagnosis &		Hardware		Smoking
Management)	Special	Complications		Cessation
	Angiographic			
TPI, PPI	Techniques	Valve		Immunisation
		Interventions		
CRT, ICD	Prosthetic	(BMV, BAV,		Cardiac
	Valves	BPV, TAVR,		Rehabilitation &
Pacemaker & ICD		Newer		Palliative Care
Programming	Contrast Agents	advances)		~ 11. ^
		aup		Counselling &
		SHD		Discharge
		Intervention		Advice
		(RSOV, CAVF,		
		Paravalvular		
		Leak,		
		Pulmonary AV		
		Maltormations)		

Station 6	Station 7
Intensive Cardiac Care	Advanced Heart Failure Care
BLS/ACLS/ PALS	MCS (IABP, LVAD, RVAD)
Prescription For Acute Cardiac Emergencies	ECMO
Ventilator Management	Cardiac Transplant
Inotropes	
Renal Support Systems	

## 4. DEPARTMENT OF CARDIOVASCULAR AND THORACIC SURGERY

#### 4.1. PROGRAM: MCh CVTS

# 4.1.1. Syllabi of Internal Assessments

Sl. No.	Time Line	Syllabus
Internal Assessment 1	At the end of 6 months	<ul> <li>Principles of Cardiopulmonary bypass history, equipment, pathophysiology, clinical applications of CPB, myocardial protection, DHCA. CPB in infants and children. Recent advances in CPB.</li> <li>Surgical anatomy and embryology of the heart, lungs, aorta, blood vessels, thoracic duct and esophagus.</li> <li>Physiology of respiration and blood circulation in the fetus, infants and adults</li> <li>Cardiac pharmacology</li> <li>Pre and Post-op management of cardiac surgical patients</li> </ul>
Internal Assessment 2	At the end of 12 months	<ul> <li>Morphology of the heart, pathophysiology, and diagnostic methodology in congenital heart diseases.</li> <li>Pathophysiology of atherosclerosis, ischemic heart disease, valvular heart disease, rheumatic heart disease, aortic aneurysms and dissections, and pericardial disease.</li> <li>Mechanical assist devices and heart transplantation</li> <li>Cardiovascular and thoracic imaging</li> <li>Aetio pathogenesis and diagnosis of congenital, inflammatory, and malignant diseases of the lung, mediastinum, pleura, esophagus, diaphragm, and thoracic lymphatics</li> </ul>
Internal Assessment 3	At the end of 24 months	<ul> <li><u>Adult Cardiac Surgery and Vascular Surgery</u></li> <li>Indications, Risk stratification, surgical management, and prognostic factors of</li> <li>Ischemic Heart disease – CAD and its complications (VSR, LV aneurysm, Ischemic MR, etc.), TMLR, MICS, Stem cell therapy.</li> <li>Valvular heart disease- Mitral, Aortic and Tricuspid replacement and repair. surgery for Infective endocarditis, Mechanical and tissue valves, minimally invasive and robotic surgeries.</li> <li>Diseases of the aorta and great vessels-aneurysms, dissections, pulmonary embolism, EVAR.</li> <li>Surgery for arrhythmias, cardiac neoplasms, pericardial disease. HOCM</li> </ul>

		• Surgeries for heart failure-Transplant and non- transplant options, Assist devices and artificial heart, tissue engineering.
Internal Assessment 4	At the end of 30 months	<ul> <li>Pediatric cardiac surgery and Thoracic Surgery         <ul> <li>Indications, Risk stratification, surgical management and prognostic factors of ASD, VSD, PAPVC, TAPVC, Cortriatriatum, unroofed CS, AVCD, SOV aneurysm, PDA, aortico LV tunnel, CoA, VSD-PS, TOF, Tricuspid atresia, pulmonary atresia. single ventricle physiology, Ebstein anomaly, AP window, truncus, interrupted aortic arch, coronary anomalies, PA from ascending aorta, HLHS, congenital Aortic and mitral valve disease, vascular rings and slings, DORV, TGA and other av discordance, DILV, Atrial isomerism, etc.</li> <li>Congenital, inflammatory and malignant disease of lung, Solitary Pulmonary Nodule, staging of Ca lung Pulmonary resections, Surgery for emphysema, empyema, VATS,</li> <li>Chest wall deformities, Thoracic outlet syndrome</li> <li>Diaphragmatic disease and its management, pleural disease, tracheal disease</li> </ul> </li> </ul>

# 4.1.2. Syllabus for OSCE 1

OSCE 1 will be conducted along with internal assessment 2 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Cardiac Anatomy Physiology	СРВ	Ischaemic Heart Disease and Vascular	Valvular Heart Disease And Thoracic	Pediatric Cardiac Surgery
Embryology of the heart Fetal circulation and circulatory changes at birth Anatomy of the heart,	Haemostasis, thrombosis and bleeding GIT, renal and hepatic physiology	The assessment of patients with coronary heart disease, including elective and	The assessment and management of patients with valvular heart disease; including both isolated and combined aortic	Fetal circulation and circulatory changes at birth Sequential cardiac analysis and terminology of cardiac malformations

great vessels   regulation   presentations   disease   treatment of	
congenital hear	-
Anatomy of the Inflammation To include The assessment disease	
cardiac the and	
chambers and Systemic preliminary management of Drugs for PAH	
valves inflammatory patients with	
response combined Diagnosis,	
Anatomy of the syndrome and initial coronary and investigation ar	d
peripheral management valvular heart treatment of	
vascular system ARDS of patients disease, congenital hear	-
and vascular with compli- including disease	
conduits Anticoagulant and cations of operative	
thrombolytic myocardial management Role of	
Anatomy of drugs infarction interventional	
conduction Cardiovascular cardiology.	
system Electro- Heparin Including physiology	
physiology, Protamine axis <sup>mitral</sup> including valve Risk assessmen	t
including regurgitation, physiology and and stratificatio	n
conduction Principles and ventricular haemodynamics	
disorders practice of CPB aneurysm and Types of cardia	С
septal Pathophysiology prosthesis and	
Coronary Relevant defects of valve indications for	ise
anatomy and equipment and incompetence	
variants technology and its Coronary and stenosis Anatomy,	
application application pathophysiolog	у,
Anatomy of Variants Consequences natural history	of
temoral triangle Monitoring of value disease the following	
and peripheral during CPB on cardiac conditions	
vascular system	
Inflammatory and angrography morphology - Patent ductus	
Myocardial pathophysiologica Anatomy of Dethorbusicles Actional	
the peripheral of mixed volve	ary
physiology bypass vascular diagona and Atrial contain	
Userse dynamics Delectile and new System and combined velve defect	
naemodynamics Pulsatile and non vascular combined valve delect vascular vascular	ntal
measurement pulsatile now conduits pathology (eg - venuicular se	ptai
Effect of CPR on mitral)	
Haemostasis pharmacokinetics Atheroma,	arv
thrombosis and medial Combined and venous	lai y
bleeding Priming fluids necrosis and valvular and shunts	
arteritis and arteritis	of
Acid base baemodilution disease the great arter	ies
balance Internet Intimal Intimal	105
Acid base balance hyperplasia Atrial corrected TG	4
Pulmonary – pH and alpha and graft fibrillation and - Single ventric	le/
physiology, stat athero- other univentricular	
ventilation and sclerosis arrhythmias heart	
gas exchange - Tetralogy of	
Fallot/Pulmo-	

Vascular	Neuropsychologic	Myocardial	Endocarditis and	nary atresia plus
biology and	al consequences	infarction and	prosthetic valve	VSD
reactivity	of CPB	compli-	endocarditis	- Pulmonary
		cations		atresia and intact
Physiology of	Cell salvage and		Risk assessment	septum
pulmonary	blood	Drugs used in	and stratification	- Hypoplastic left
vasculature	conservation	the treatment		heart
		of	Management of	- Truncus
Inotropes,	Cannulation and	hypertension,	cardiovascular	arteriosus
vasodilators and	institution of	heart failure	risk factors	- Double outlet
vasoconstrictors	cardiopulmonary	and angina		right ventricle
	bypass		Diagnosis	- Pulmonary
Blood		Cardiac	investigation	atresia plus VSD
transfusion and	Safe conduct of	arrhythmias	and assessment	and MAPCAs
blood products	CPB		of valvular heart	- Partial and
		Anti-	disease	complete
Routine	Weaning from	arrhythmic		atrioventricular
haematology	bypass and	drugs	Timing of	septal defects.
and biochemical	decannulation		surgical	- Anomalies of the
investigations		Antiplatelet,	intervention in	pulmonary
	Femoral	anticoagulant	valve disease	venous drainage
Chest	cannulation and	and		(partial and total)
radiograph and	decannulation	thrombolytic	Tracheobron-	- Anomalies of
ECG		drugs	chial tree and	systemic venous
	Repeat		lungs	drainage.
	sternotomy, with	Risk		- Congenital aortic
	pericardial	assessment	Bronchopul-	valve disease
	dissection,	and	monary	(including supra-
	cardiac	stratification	segments	valve stenosis).
	mobilisation and			- LV outflow tract
	cannulation	Natural	Thoracic inlet,	Obstruction
		history of	neck and	- Sinus oi
	Relevant	aortic disease	mediastinum	vaisaiva
	cannulation	D' '		Concentral mitral
	techniques and	Diagnosis,	Oesophagus and	- Congenital initial
	appropriate	investigation	upper GI tract	Congonital
	delivery of	and	Class to an all and	- Congenital
	cardiopiegia	assessment of	chest wall and	disease
	Muccordial	aortic disease	diaphragin	(including -
	function and	The	Banian and	Ehsteins
	dusfunction		malignent	abnormality)
	aystunction	preliminary	tumours of	- Anomalies of the
	Principles and	assessment	trachea	coronary arteries
	practice of	and initial	bronchus and	(including
	myocardial	management	lung	ALCAPA)
	protection	of patients	narenchyma	- Vascular rings
	Protoction	with acute	Parononymu	- Cardiac tumours
		dissection of	Oesophagitis	- Pericardial
			PBBBBBB	disease

Cardioplegia	the ascending	Oesophageal	- Interrupted aortic
solutions and	aorta.	motility	arch
delivery modes.		disorders	
Non-cardioplegic techniques of myocardial protection Mechanical	Classification of aortic aneurysms	Malignant and benign tumours of the oesophagus, pleura and chest wall,	Cardiac catheterisation data including interpretation of haemodynamic data, shunt and resistance
circulatory		mediastinum	calculations
support in the pre-			
operative, peri-		Anatomy and	Echocardiography
operative and		physiology of	in congenital heart
post-operative		the pleura	disease, including
periods			2D, doppler, and
		Pneumothorax	TOE
IABP		Pleural effusion	
		Empyema	Principles of
Ventricular assist			Paediatric Intensive
devices		Haemothorax	Care.
		Chylothorax	

# 4.1.3. Syllabus for OSCE 2

OSCE 2 will be conducted along with internal assessment 4 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Postoperative Management and Intensive Care	СРВ	Ischaemic Heart Disease And	Valvular Heart Disease And Thoracic	Pediatric Cardiac Surgery
		Vascular	moracie	Surgery
Haemodynamics:	Anticoagulant	Operative	Operative	Operative
physiology and	and	treatment	treatment	management
measurement	thrombolytic			
	drugs	Off pump and	Options for	Sternotomy -
Haemostasis,		on pump	operative	open and
thrombosis and	Heparin	surgery	management	close,
bleeding	Protamine axis		including: valve	including
		Results of	replacement/repair	resternotomy
Acid base balance	Principles and practice of	surgery - survival, graft	(mechanical, biological stented	in children
Pulmonary	CPB	patency,	and stentless grafts,	Thoracotomy
physiology,		recurrence	homografts and	
ventilation and gas	Relevant		autografts)	Approaches
exchange	equipment and			for ECMO,
	technology			cannulation

GIT, renal and	and its	Arterial	Valve design:	and
hepatic physiology	application	revascularisat	materials,	management
Nutrition		ion	configuration and	
	Monitoring		biomechanics.	Surgical
	during CPB			management
Temperature		Redo	Results of surgery	of the
regulation	Inflammatory	coronary	– survival, valve	following
	and	artery surgery	thrombosis,	conditions:
	pathophysiolo		endocarditis,	
Myocardial	gical response		bleeding	- Patent ductus
infarction and	to bypass	Role of PCI		arteriosus
complications		and non-	Interpretation of	- Atrial septal
<b>T 1 1 1</b>	Pulsatile and	operative	survival and follow	defect
Endocarditis	non pulsatile	treatment	up data	- Ventricular
Pericarditis	flow			septal defect.
Systemic		Management	Cardiac	- Coarctation
inflammatory	Effect of CPB	of cardio-	performance and	- Aortopulmon
response syndrome	on pharmaco-	vascular risk	long term	ary window.
Bronchopulmonary	Kinetics	Tactors	functional status	- Vascular ring
	Drimin a fluida	Comulias	Current for	- Aortopulmon
AKDS	end hearno	tions of	Surgery for	
Drugs used in the	dilution	myocardial	problems Surgical	shunts
treatment of	unution	inforction and	treatment of	- PA handing
hypertension heart	Acid base	ischaemic	arrhythmias	- Partial
failure and angina	halance $- nH$	heart disease	annyunnas	atrioventricul
fulfulo und unginu	and alpha stat	VSD mitral	Management of	ar septal
	und uipild stat	regurgitation.	complications of	defect
Inotropes.	Neuropsychol	aneurvsm.	surgerv	- Aortic and
vasodilators and	ogical	Jan		mitral valve
vasoconstrictors	consequences	Knowledge of	Cardiac	surgery
	of CPB	operative	rehabilitation	including
Anti-arrhythmic		treatment		Ross
drugs	Cell salvage	including	Non operative	procedure.
	and blood	spinal cord	management of	- Open aortic
Haemostatic drugs	conservation	and cerebral	endocarditis	valvotomy
		protection		- Open
Antiplatelet,	Cannulation	strategies	Valve selection	pulmonary
anticoagulant and	and institution			valvotomy
thrombolytic drugs	of cardiopul-	• Type A	Anticoagulation	- Tricuspid
	monary bypass	aortic	management	valve surgery
Organisms involved		dissection	including	including
in cardiorespiratory	Safe conduct		complications.	Ebsteins
intection	ot CPB	• Type B	<b>.</b>	Tetralogy of
A 1.1		aortic	Isolated, aortic	Fallot.
Antimicrobial	weaning from	aissection	valve replacement	- Complete
treatment and	bypass and	. Troumatio	isolated mitral	au ioventricul ar sental
poncies	decannulation	• Traumatic	Valve replacement	defect
	Formers	aurtic	white valve repair	- Interrupted
	remoral	Tuptute		aortic arch
	camulation			

Cardiac arrhythmias	and	Thoraco-	Tricuspid valve	- Total
and treatment of	decannulation	abdominal	surgery	anomalous
cardiac arrhythmias		aneurysm		pulmonary
	Repeat		Combined valve	venous
Blood transfusion	sternotomy,	Results of	and graft surgery	drainage.
and blood products	with	surgery –		- Transposi-
	pericardial	survival,	Surgical strategies	tion of the
Wound infection and	dissection,	complication	for managing the	great arteries
sternal disruption	cardiac	rates	small aortic root	- Double
	mobilisation			outlet right
Neuropsychological	and	Non-surgical	Redo Valve	ventricle
consequences of	cannulation	management	surgery	- Pulmonary
surgery and critical		including the		atresia plus
care	Relevant	role of	Valve surgery for	VSD and
	cannulation	endovascular	endocarditis	MAPCAs
Analysis and	techniques and	stenting		
interpretation of	appropriate		Techniques for	Fontan
post-operative and	delivery of	Management	surgical ablation of	procedures
critical care charts	cardioplegia	of cardiovas-	arrhythmias	
and documentation		cular and		Extra cardiac
	Myocardial	non-cardio-	Alternative surgical	conduits and
Chest radiograph	function and	vascular risk	approaches to valve	their
and ECG	dysfunction	factors	surgery including	replacement
Echocardiography	<b>D</b> · · 1 1		thoracotomy, trans-	
including TOE	Principles and	Preparation	septal approaches,	Rastelli
	practice of	for and	and minimal access	procedure
Management of fluid	myocardial	management	surgery	Norwood
balance and	protection	of cardiopul-		procedure
circulating volume	Continutoria	monary	Thoracic Incisions	I runcus
Dein sentuel	Cardioplegia	bypass,	- I ypes of incisions	arteriosus
Pain control	dolivory	alternetive	and appropriate	Tepan
Managamantof	modes	alternative,	use, including	
management of	moues.	strategies for	nateral, anterior,	Peculte of
post-operative	Non	descending	video assisted	Surgery
naemonnage	cardionlagic	aortic surgery	video-assisted	surgery -
Cardionulmonary	techniques of	aorrie surgery	approaches	complications
resuscitation (ALS)	myocardial	Organ	Forly and late	and
resuscitation (ALS)	protection	protection	complications of	management
Management of	protection	strategies	thoracic incisions	management.
complications of	Mechanical	including	thoracle mensions	Late
surgery	circulatory	DHCA RCP	Complex chest wall	complications
surgery	support in the	and SACP	reconstruction	of surgery for
Use of intra-aortic	pre-operative			congenital
balloon nump	peri-operative	Femoral	Lung volume	heart disease
Cancon Pump	and post-	cannulation	reduction surgerv.	
Use of defibrillator	operative		techniques	Management
Understanding and	periods	Axillarv	complications and	of adults and
use of cardiac pacing	1	cannulation	management of	children
	IABP		complications	following
			r	0

Interpretation of	Ventricular	Surgery for	Myasthenia gravis:	congenital
blood gas results	assist devices	acute	medical, surgical	heart surgery
Airway management		dissection of	and peri-operative	
		the ascending	management	Management
Understanding of		aorta		of compli-
ventilatory			Surgery for benign	cations of
techniques and		Aortic root	and malignant	surgery
methods		replacement	conditions of the	
			lungs, including	Cardiopul-
Recognition,		Complex	uncomplicated	monary
evaluation and		aortic surgery	lobectomy/pneumo	resuscitation
treatment of		including	nectomy for lung	
multiorgan		arch surgery,	cancer, wedge	Role of
dysfunction		descending	resection and	mechanical
		aortic and	metastasectomy	assist (IABP,
Feeding and		thoraco-		VAD and
nutrition		abdominal	Segmentectomy	ECMO)
		aortic surgery	and lobectomy for	
Re-exploration for			benign and	Indications for
bleeding or			malignant disease.	referral for
tamponade				transplantation

#### 4.2. PROGRAM: MCh VASCULAR SURGERY

## 4.2.1. Syllabi of Internal Assessments

Sl. No.	Time Line	Syllabus
Internal Assessment 1	At the end of 6 months	Applied Anatomy - Regional and developmental - of Aorta and arteries and branches. Exposure of blood vessels at every body part in the chest, abdomen, and neck, Veins in extremities and inferior vena cava. Applied Physiology - Arterial, venous and lymphatic physiology. Applied Bacteriology - Infection in Vascular Surgery, prosthetic graft infection, primary and secondary aorto- enteric fistula. Noninvasive Vascular Laboratory evaluation.
Internal Assessment 2	At the end of 12 months	Applied Pathology-Pathology of diseases of the Aorta, Arteries, Pathology of Deep Venous thrombosis, and AV malformation. Imaging in vascular surgery. Radiation Safety. Perioperative care of Vascular surgery patients. Vascular grafts and devices.
Internal Assessment 3	At the end of 24 months	Aortic aneurysm- Arch/ Thoracic/Thoraco abdominal and abdominal aortic aneurysm- evaluation, decision making and management Peripheral and splanchnic aneurysms- decision-making and management. Cerebrovascular diseases- presentation and management Acute and chronic limb ischemia – evaluation, decision making and management. Vascular Trauma Chronic venous insufficiency- presentation, decision making and management.
Internal Assessment 4	At the end of 30 months	Diabetic foot and its management Renovascular disease- evaluation, decision making and management Thoracic Outlet syndrome- presentation and management Mesenteric Vascular Disease- Presentation, evaluation and management Vascular Malformations Hemodialysis access – creation, follow-up and management of complications Recent advances in vascular and endovascular surgery

# 4.2.2. Syllabus for OSCE 1

OSCE 1 will be conducted along with internal assessment 2 in 5 different stations.
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Station 1	Station 2	Station 3	Station 4	Station 5
Vascular	Vascular Annlied	Assessment	Vascular	Post-Onerative Care
Anatomy	Bacteriology,	and Pre-	Grafts And	of Vascular Surgery
Physiology and	Pharmacology	Operative	Devices	Patients
Atherosclerotic	and Pathogenesis	Optimiza-		
<b>Risk Factors</b>		tion of		
		Patients with		
		Peripheral		
		Vascular		
	<b>TT</b>	Disease	•	a
Embryology of	Haemostasis,	ABI	Autogenous	Systemic
the Aorta and	Thrombosis and	D1 (1	Grafts	Complications:
IVC	Bleeding	Plethysmo-	(Including	Cardiac
Anotomy of the	Sustamia	Grapny	Vein	Systemia
Anatomy of the	Systemic	Duplay Soon	Faivest,	Systemic
Vascular System	Response	Duplex Scall	and	Pespiratory
and Vascular	Syndrome	DSA	Endoscopic)	Respiratory
Conduits	Syndrome	DSA	Lindoscopic)	Systemic
Conduits	ARDS	CT/MRI	Prosthetic	Complications: Renal
Anatomy of		Cirinid	Grafts	comprioutions, itenui
Femoral	Anticoagulant and	РЕТ СТ		Systemic
Triangle and	Thrombolytic		Biologic	Complications:
Peripheral	Drugs	IVUS	Grafts	Neurologic
Vascular System	-			
	Antiplatelet Agents	Preoperative	Bioeng-	Graft Thrombosis
Exposure of		Cardiac	Ineered	
Blood Vessels at	Cell Salvage and	Optimization	Vascular	Graft Infection
Every Body Part	Blood		Grafts	
in the Chest,	Conservation	Preoperative		Anastomotic
Abdomen, and		Renal	Nonaortic	Aneurysms
Neck	NOACS	Optimization	Stents And	
<b>TT</b> / ·			Stent Grafts	Local Complications:
Haemostasis,	Graft Infection	Preoperative	A suti a Ctaut	Aorto-Enteric Fistula
I hrombosis and		Pulmonary	Aortic Stent	
Bleeding	Mycotic	Optimization	Grans	Local Endovascular
Blood	Aneurysins		Fenestrated	Complications
Transfusion and	Pathogenesis of		And	Venous
Blood Products	Various Arterial		Branched	Complications
	and Venous		Stent Grafts	Complications
Radiation Safety	Diseases		Stent Gluits	Local Complications
				Lymphatic

# 4.2.3. Syllabus for OSCE 2

Station 1	Station 2	Station 3	Station 4	Station 5
Aortic Aneurysm and Peripheral	Extra Cranial Carotid	Acute And Chronic Limb Ischemia,	Mesenteric Vascular Disease	Venous Disorders And Vascular Trauma
Aneurysm	Artery	Diabetic Foot	and Reno-	
	Disease, and Splanchnic	Management	vascular Hyper- tonsion	
Aortic Arch	Symptomatic	Acute limb	Acute	Acute DVT: Mechanical
Aneurysm	Carotid artery stenosis	ischemia	mesenteric ischemia	and Pharmacologic Prophylaxis
DTA Aneurysm		Aortoiliac		1 2
Thoraco abdominal aortic	Asympto- matic Carotid artery	occlusive disease	Chronic mesenteric ischemia	Acute DVT: Surgical and Interventional Treatment
aneurysm	stenosis	Femoro popliteal	Mesenteric	Superficial Thrombophlebitis and its
Iliac Artery aneurysm	Vulnerable carotid	occlusive disease	dissection	Management
Eamonal	plaque	Infragonicular	Mesenteric	Vena Cava Interruption
aneurysm	Carotid aneurysm	occlusive disease	thrombosis	Varicose Veins: Surgical/Endovenous
Inflammatory	5		Patho-	Treatment
aneurysm	Carotid dissection	Diabetic foot pathogenesis	genesis of Renovas-	Treatment of Perforator
Mycotic			cular	Vein Incompetence
aneurysm	Vertebral artery disease	Diabetic foot management	hypert- ension	Deep Vein Valve
arteritis-related	Mesenteric	Vasculitis	Open	Reconstruction
aneurysm	artery aneurysms	associated PAD	surgical options for	Iliocaval Venous Obstruction: Surgical
Acute Type B aortic dissection			renal artery stenosis	Treatment/Endovascular Treatment
Chronic Type B aortic dissection			Endovascul ar options	Portal Hypertension
Connective tissue disease-associated			for renal artery stenosis	Nutcracker Syndrome Superior Vena Cava
aneurysm				Occlusion and Management

## 5. DEPARTMENT OF IMAGING AND INTERVENTIONAL RADIOLOGY

# 5.1. PROGRAM: DM CARDIOVASCULAR IMAGING AND VASCULAR INTERVENTIONAL RADIOLOGY

#### 5.1.1. Syllabus for OSCE 1

OSCE 1 will be conducted along with internal assessment 2 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Drugs	Hardware Devices in Intervention	Measurements or Image Processing	Contrast Agents	Guidelines in Management of Vascular Problems or Imaging
Rate Regulators	Sheaths	Measuring	Iodinated	Management of
Vasodilators	Wires	Aortic Dimensions for	contrast Agents	Claudication
Emergency drugs	Catheters	TAVR	based agents	Varicose Veins
Antiemetics	Guide catheters	Cardiac Function	Ultrasound	Management of
Antihypertensives	Microcatheters	Analysis - EF,	contrast agents	DVT
Anticoagulants IVF	Embolising Agents	Flow assessment Coronary artery reconstructions		Aortic Dissection- imaging
Local anesthetic agents.		Congenital heart disease		Myocarditis- Imaging
		reconstructions		DCM - Imaging
				TOF – CT Imaging

#### 5.1.2. Syllabus for OSCE 2

OSCE 2 will be conducted along with internal assessment 4 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
<b>Drugs for Cardiac</b>	Hardware	Measurements	Contrast	Guidelines in
<b>CT and Cardiac</b>	<b>Devices</b> in	or Image	Agents	Management of
MRI	Intervention	Processing	-	Vascular
				Problems or
				Imaging

Stress perfusion	Stents	Plan aortic	Iodinated	Acute Limb
agents	Vascular plugs	aneurysm	contrast	ischemia
Antidotes during	Lipiodol	management-	Agents- Their	Interventions in
stress Imaging	DCB	TEVAR and	interactions	Acute dissection,
Thrombolytics	Hypressure	EVAR	Newer	IMH, PAU
NOACS	Balloons	Plan TEVAR in	Gadolinium	Interventions in
Vasopressors	Closure	aortic dissection	based Agent	Renovascular
Blood products	devices	Cardiac MR	Ultrasound	hypertension
		analysis	contrast agents	Imaging in
			in specific	Fontan failure
			situations	Imaging in
				Lymphatic leaks

#### 5.2. PROGRAM: DM NEUROIMAGING AND INTERVENTIONAL NEURORADIOLOGY

## 5.2.1. Syllabus for OSCE 1

OSCE 1 will be conducted along with internal assessment 2 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Drugs	Neuropathol ogy, Neuro- microbiology and Neuro- chemistry	Imaging, Image processing, and Instrumentation	Contrast Agents	Neuroanatomy/ Embryology/ Genetics
Vasodilators Emergency drugs Antihypertensives Anticoagulants Fibrinolytics Antiplatelets Anti-anaphylaxis management Common local aesthetic/pain medications.	Identification of common intracranial intraaxial and extra axial, adult and pediatric tutors. Identification of common bacteria/fungi /parasites/ virus causing the intracranial pathology. CSF biochemistry	Reconstruction and or processing of basic and advanced MRI/CT studies (Eg:fmri/DTI/Sp ectroscopy post processing flow studies/VRT/Fusi on imaging, etc.) DSA/CT/MR machines and principles Stereotactic Radiosurgery Radiation protection	Iodinated contrast Agents Gadolinium based agents Ultrasound contrast agents Contrast reactions	Gross and imaging anatomy of the brain and spine Gross and Imaging anatomy of head and neck Vascular anatomy of the brain, head, and neck Embryology of brain, spine, and neuro- vasculature Genetics, advanced sequencing methods for common pediatric genetic neurological diseases.

# 5.2.2. Syllabus for OSCE 2

Station 1	Station 2	Station 3	Station 4	Station 5
Diagnostic Neuro- radiology	Interventional Neuroradiology	Devices and hardware, Drugs, Complications management	Neuro otology/ Neuro- ophthalmology, Head and neck /fetal neuroradiology	Guidelines
Neurotrauma White matter disease Intracranial Infections Brain tumors Metabolic diseases Pediatric neurological diseases Spine diseases (developmental /neoplastic, trauma and inflammatory/d egenerative/vas cular/miscellan eous)	Ischemic and hemorrhagic stroke Aneurysmal disease Arterial occlusive disease Arteriovenous fistula Venous diseases (venous thrombosis, IIH/intracranial hypotension) Vasculopathy Brain vascular malformations Spine neurovascular diseases Vascular tumors Craniofacial malformations Pediatric vascular diseases Functional	Devices used for cerebral angiography Devices used for neurointer- ventional procedures Embolic agents Sheaths/ catheters/guide catheters/ microcatheters/ wires/microgui dewires/closure devices Common drugs used in neuro- interventions Procedural complications and	Temporal bone Skull base Ocular and orbital pathology Head and neck diseases Neck spaces Paranasal sinuses Fetal Neuroimaging	Guidelines, algorithms / strategies in imaging workup of neurological diseases (eg: MS, Glioma follow-up, pituitary tumors, radiation necrosis, stroke, etc.) Guidelines in the management of neurovascular diseases in interventional neuroradiology (eg: stroke, AVM, aneurysms, dural fistula, dural sinus thrombosis, etc.)
	neurointerventions tests	management		etc.)

## 6. DEPARTMENT OF NEUROLOGY

#### 6.1. PROGRAM: DM NEUROLOGY

#### 6.1.1. Syllabi of Internal Assessments

Exams	Topics
Internal Assessment 1 (Theory)	Fundamentals of neuropsychology
	Neuro-ophthalmology
	Neuro-otology
	Neuro-urology
	Neuro-endocrinology
	<ul> <li>Microbiology and Neuropathology</li> </ul>
	Neuroimmunology
Internal Assessment 2 (Theory)	Neuroanatomy
	Neurophysiology and neurochemistry
	Neuropharmacology
	Neurogenetics
	Neuroepidemiology
Internal Assessment 3 (Theory)	Approach to and management of
	• Stroke
	Movement disorder
	CNS infections
Internal Assessment 4 (Theory)	Approach to and management of
	Neuromuscular disorders
	• Epilepsy
	<ul> <li>Neuroimmunological diseases, multiple sclerosis and</li> </ul>
	related disorders
	Neurodegenerative diseases

## 6.1.2. Syllabus for OSCE 1

OSCE 1 will be conducted along with internal assessment 2 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Basic Sciences	Neurological symptoms and signs	Neuroimaging	Investigations	Acute Neurological emergencies
Anatomy: Basal ganglia, cerebellum, thalamus, brainstem, limbic system, lobes,	Symptom analysis Localization Elicitation of signs	CT Brain Basic MRI sequences	Interpretation of CSF results Antibody test interpretation	Stroke Status epilepticus

spinal cord, blood supply Physiology: Circuits (including basal ganglia and its pathways, frontal subcortical circuits, papez circuit), pathways (ascending and descending pathways), receptors	Pattern recognition (clinical/video) Identification of semiology (movement disorders, epilepsy)	MRI Stroke protocol interpretation including angiogram, and venogram	Analysis of fundus photographs	Neuromuscular respiratory failure Neuroinfections Movement disorder emergencies
receptors				

## 6.1.3. Syllabus for OSCE 2

OSCE 2 will be conducted along with internal assessment 4 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
<b>Clinical scenarios</b>	EEG	NCS/EMG/	Neuropathology	Neuroimaging
and management		EPs	and genetics	
protocols				
Analysis of specific	Interpretation	Interpretation	Gross specimens	MRI and CT
clinical scenarios	and analysis of	and analysis of	Histopathology:	including
	EEG	nerve	- Muscle	angiogram,
Formulation of		conduction	- Nerve	venogram,
differential diagnosis		reports, EMG	- Brain	vessel wall
		and evoked	parenchyma	imaging, MRS,
Management		potential	- Meninges	and perfusion
protocols for		studies		imaging
neurological			Genetic report	
conditions			interpretation	Pattern
				recognition

## 7. DEPARTMENT OF NEUROSURGERY

#### 7.1. PROGRAM: MCh NEUROSURGERY

## 7.1.1. Syllabi of Internal Assessments

Sl. No.	Syllabus
Internal	1. Anatomy of brain, cranial nerves, blood vessels
Assessment 1	2. Anatomy of the spinal cord, vertebral column
	3. Cerebral blood flow and Physiology of CSF
	4. Basics of neurophysiology

	5. Pharmacology – basics (anti-epileptics, drugs for treating cerebral edema)
	6. History of Neurosurgery
	7. Basics of electrolyte balance
	The Dubles of electrony to culture
Internal	1. General and Medical neuropathology
Assessment 2	2. Infection of the brain, spinal cord and its meninges, infection following
(Theory)	Neurosurgery, and nosocomial infection in the intensive care units,
	sepsis. Management, Prevention of infections, Infection control in OT and
	Neuro ICU.
	3. Biostatistics- Sensitivity, specificity, type 1&2 errors, correlation
	coefficient, Regression analysis, odds ratio, sample size, Test for means,
	meta-analysis, planning a research study.
	4. Basic Neuro radiology
	5. Basics of neuro monitoring
Internal	1. Intra Cranial Aneurysms and Their Management.
Assessment 3	2. Vascular Malformations of The Brain (Other Than Saccular
	Aneurysm)
	3. Meningiomas of the Brain And Management
	4. Supratentorial Gliomas and Intraventricular Tumors
	5. Pineal Region Tumours
	6. Pit Net Pituitary Adenomas and Their Management
	7. Head Injury and Management
	8. Epilepsy Surgery
	9. Tumours of the Posterior Fossa
	10. Spine Surgery Including Trauma
Internal	1. Recent advances in Neurosurgery (image guidance, Intraoperative
Assessment 4	MRI, robotic surgery) and neuroradiology
(Theory)	2. Intra operative Neuromonitoring.
	3. Surgery for movement disorder
	4. Cerebral revascularization surgery and surgery for stroke
	5. Surgical management of pain
	6. Pediatric neurosurgery, surgery for malformations, hydrocephalus
	/. Craniovertebral junction anomalies
	8. Skull base surgery and its applications
	9. Recent landmark trials in Neurosurgery
	10. Metastatic lesions of the brain and spine

# 7.1.2. Syllabus for OSCE 1 and 2

OSCE 1 and 2 will be conducted along with internal assessments 2 and 4 in 5 different stations.

Station 1	Station 2	Station 3	Station 4	Station 5
Radiology	Osteology (Skull, Vertebrae)	Instruments	Case Scenario	Pathology Specimen

Xray	Various	Brain cannula	SAH	Various
CT Scan MRI	anatomical aspects	VP shunt Leila retractor Rongeours Dissectors Aneurysm clip Hudsons brace Gigli wire saw LP shunt Micro scissors	Lobar hemorrhage / IVH Acute stroke Acute herniation Apoplexy Status epilepticus	intracranial tumors / hemorrhage / colloid cyst / hydrocephalus