Information Bulletin for National Eligibility cum Entrance Test (Post Graduate)

For admission to MD/MS/Post Graduate Diploma Courses 2013 Admission Session



National Eligibility cum Entrance Test - Post Graduate NATIONAL BOARD OF EXAMINATIONS

NATIONAL BOARD OF EXAMINATIONS

Medical Enclave, Ansari Nagar, Mahatma Gandhi Marg (Ring Road) New Delhi-110029 Phone : 0124-4517187 Website: www.nbe.gov.in/neetpg E-mail: neetpg@nbe.gov.in

IMPORTANT DATES

1.	Notice for National Eligibility-cum-Entrance Test	:	September 2012
2.	Availability of Information Bulletin-cum-Examination Fee Voucher at designated branches of Axis Bank	:	4 th October-10 th November 2012
3.	Online Registration and Scheduling for NEET-PG	:	4 th October-12 th November 2012
4.	Examination Dates of NEET-PG	:	23 rd November - 6 th December 2012
5.	Declaration of Results	:	By 31 st January 2013

Online applications can be accessed and completed till 23:59 hrs on 12th November 2012.

Information Bulletin

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IMPORTANT INFORMATION

Registration and scheduling for appearing in the NEET-PG examination is to be undertaken online at the website <u>www.nbe.gov.in/neetpg</u>

Application forms <u>CANNOT</u> be submitted in offline / printed copy by post; Candidates will be able to schedule their exams at the online registration system based on the availability of test centre on the date, time and venue of their choice on first come first served basis.

- For payment of Examination Fee kindly purchase Composite Information Bulletin-cum-Examination Fee Voucher of Rs. 2750/- (for SC/ST/PWD candidates) and Rs. 3750/- (for General/OBC candidates) from the selected branches of Axis Bank.
- o Kindly refer to the NEET website <u>www.nbe.gov.in/neetpg.</u>
- The unique serial number on the Information Bulletin-cum-Examination Fee Voucher is available underneath the scratch panel and needs to be entered on the NEET website for the online registration and scheduling process for NEET.

Candidates who are completing their internship AFTER 31st March 2013 or <u>LIKELY TO COMPLETE AFTER</u> 31st March 2013 <u>need not apply</u> in the NEET-PG exam as they shall be ineligible to participate at any stage of the admission process.

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1. INTRODUCTION

Government of India established the National Board of Examinations (NBE) in 1975 with the objective of improving the quality of the Medical Education by establishing high and uniform standards of postgraduate examinations in modern medicine on All India Basis and utilizing existing healthcare infrastructure for capacity building.

National Board of Examinations conducts entry and exit examinations at Postgraduate and Post Doctoral level and licensing examinations as Screening Test for Indian Nationals with Foreign Medical Qualifications.

NEET-PG is the eligibility-cum-ranking examination prescribed as the single entrance examination to various MD/MS and PG Diploma Courses under ambit of Post Graduate Medical Regulations notified by Medical Council of India with approval of the Ministry of Health and Family Welfare. Qualifying NEET-PG is mandatory for gaining entry to MD/MS/PG Diploma Courses under various universities/Institutions in the country.

Ministry of Health and Family Welfare, Government of India has notified National Board of Examinations for conducting the National Eligibility-cum-Entrance Test for Post Graduate courses (NEET-PG).

Vide amendments in the Post Graduate Medical Education Regulations (PGMER) issued by Medical Council of India with prior approval of Government of India it has been prescribed that:

- I. There shall be a single eligibility cum entrance examination namely 'National Eligibility-cum-Entrance Test for admission to Postgraduate Medical Courses' in each academic year.
- II. 3% seats of the annual sanctioned intake capacity shall be filled up by candidates with locomotory disability of lower limbs between 50% to 70%.

Provided that in case any seat in this 3% quota remains unfilled on account of unavailability of candidates with locomotory disability of lower limbs between 50% to 70% then any such unfilled seat in this 3% quota shall be filled up by persons with locomotory disability of lower limbs between 40% to 50% - before they are included in the annual sanctioned seats for General Category candidates.

Provided further that this entire exercise shall be completed by each medical college /institution as per the statutory time schedule for admissions.

III. In order to be eligible for admission to any postgraduate course in a particular academic year, it shall be necessary for a candidate to obtain minimum of marks at 50th percentile in 'National Eligibility-cum-Entrance Test for Postgraduate courses' held for the said academic year. However, in respect of candidates belonging to Scheduled Castes, Scheduled Tribes, Other Backward Classes, the minimum marks shall be at 40th percentile. In respect of candidates as provided in clause 9(II) with locomotory disability of lower limbs, the minimum marks shall be at 45th percentile. The percentile shall be determined on the basis of highest marks secured in the All-India common merit list in 'National Eligibility-cum-Entrance Test' for Postgraduate courses:

Provided when sufficient number of candidates in the respective categories fail to secure minimum marks as prescribed in National Eligibility-cum-Entrance Test held for any academic year for admission to Post Graduate Courses, the Central Government in consultation with Medical Council of India may at its discretion lower the minimum marks required for admission to Post Graduate Course for candidates belonging to respective categories and marks so lowered by the Central Government shall be applicable for the said academic year only.

IV. The reservation of seats in medical colleges/institutions for respective categories shall be as per applicable laws prevailing in States/ Union Territories. An all India merit list as well as State-wise merit list of the eligible candidates shall be prepared on the basis of marks obtained in National Eligibility-cum-Entrance Test and candidates shall be admitted to Post Graduate courses from the said merit lists only.

Provided that in determining the merit of candidates who are in service of Government/public authority, weightage in the marks may be given by the Government /Competent Authority as an incentive at the rate of 10% of the marks obtained for each year of service in remote and /or difficult areas upto the maximum of 30% of the marks obtained in National Eligibility-cum-Entrance Test, the remote and difficult areas shall be as defined by State Government/Competent authority from time to time.

- V. No candidate who has failed to obtain the minimum eligibility marks as prescribed in regulations, shall be admitted to any Postgraduate courses in the said academic year.
- VI. In non-Governmental medical colleges/institutions, 50% (Fifty Percent) of the total seats shall be filled by State Government or the Authority appointed by them, and the remaining 50% (Fifty Percent) of the seats shall be filled by the concerned medical colleges/institutions on the basis of the merit list prepared as per the marks obtained in National Eligibility-cum-Entrance Test.
- VII. 50% of seats in Post Graduate Diploma Courses shall be reserved for Medical Officers in the Government service, who have served for at least three years in remote and/or difficult areas. After acquiring the PG Diploma, the Medical Officers shall serve for two more years in remote and/or difficult areas as defined by State Government/Competent authority from time to time.
- VIII. The Universities and other authorities concerned shall organize admission process in such a way that teaching in postgraduate courses starts by 2nd May and by 1st August for super speciality courses each year.

- IX. There shall be no admission of students in respect of any academic session beyond 31st May for postgraduate courses and 30th September for super speciality courses under any circumstances. The Universities shall not register any student admitted beyond the said date.
- X. The Medical Council of India may direct, that any student identified as having obtained admission after the last date for closure of admission be discharged from the course of study, or any medical qualification granted to such a student shall not be a recognized qualification for the purpose of the Indian Medical Council Act, 1956. The institution which grants admission to any student after the last date specified for the same shall also be liable to face such action as may be prescribed by MCI including surrender of seats equivalent to the extent of such admission made from its sanctioned intake capacity for the succeeding academic year.

2. GENERAL INSTRUCTIONS, TERMS AND CONDITIONS

2.1. NEET-PG is a qualifying-cum-ranking examination notified under the provisions of Postgraduate Medical Education Regulations, 2000 by the Medical Council of India with prior approval of Government of India.

As per the Postgraduate Medical Education Regulations, "There shall be a single eligibility cum entrance examination namely 'National Eligibilitycum-Entrance Test for admission to Postgraduate Medical Courses' in each academic year". Qualifying NEET-PG is mandatory for gaining entry to MD/MS/PG Diploma Courses under various universities in the country. No candidate who has failed to obtain the minimum eligibility marks as prescribed in regulations, shall be admitted to any Postgraduate courses in the said academic year

- 2.2. Applicant may kindly note that appearance in NEET-PG does not confer any automatic rights to score a Post graduate MD/MS/Post Diploma seat. The selection and admission to Postgraduate seats in any medical institutions recognized for running MD/MS/Post Graduate Diploma courses as per Indian Medical Council Act, 1956 is subject to fulfilling the admission criteria, eligibility, medical fitness and such criteria as may be prescribed by the respective universities, medical institutions, Medical Council of India, State/Central Government.
- 2.3 Online Registration and Scheduling for the examination must be completed by <u>12th November 2012 (by 23:59hrs)</u>.
- 2.4 Applications of candidates producing false or fabricated information will not be considered and candidates may be further debarred from appearing in any future examinations conducted by NBE /MoHFW/Other Institutions.
- 2.5 Candidates should go through the bulletin carefully for eligibility criteria, scheme, pattern of examination etc before contacting the NBE for any queries. Queries pertaining to eligibility and other issues will only be entertained if the information requested is not given in bulletin or on website www.nbe.gov.in/neetpg.
- 2.6 Incomplete applications or applications not in accordance with instructions will not be considered and are liable to be rejected. The examination fee will not be refunded under any circumstances.
- 2.7. Fee will neither be carried forward to a future date nor refunded under any circumstances. Online applications and/or their acknowledgment of submission received after the due date will not be entertained and exam fee will not be returned in such cases. Application once submitted cannot be withdrawn.
- 2.8. Instructions in the information-bulletin are liable to changes based on decisions taken by the NBE from time to time. There is no equity or any rights that are /or deemed to be arising in favor of candidate.
- 2.9. NBE reserves the right to withdraw permission, if any, granted inadvertently to any candidate who is not eligible to appear in the NEET-PG even though the admit card/roll number has been issued or name/roll number is displayed on the website of the Board.

- 2.10. Candidates' eligibility is purely provisional & is subject to the fulfillment of eligibility criteria as prescribed by the NBE /MCI /University/ Medical College or Institute.
- 2.11. The existing schedule, pattern, policy and guidelines are for ready reference only but in no way they are or are ought to be treated as representative or acknowledgment of fact that NBE is bound to follow the same in future.
- 2.12. In case of any ambiguity in interpretation of any of the instructions/ terms/rules/criteria regarding the determination of eligibility/conduct of examinations/registration of candidates/information contained herein, the interpretation of the National Board of Examinations will be final and binding.
- 2.13 Requests are not entertained for change in date/ examination centre. Candidates are advised not to canvass for or submit such representations.
- 2.14 Absentees from the examination will forfeit their examination fee.
- 2.15 Test Results for NEET shall be available on the website www.nbe.gov.in/neetpg by 31st Jan 2013.
- 2.16 In addition to their admit card, candidates are required to carry one of the following Government issued (original) photo IDs to the examination centre -
 - Passport or
 - PAN Card or
 - Voters' ID card or
 - Driving License or
 - Aadhar Card or

• MCI/State Medical Council registration certificate bearing photograph of the candidate.

Kindly note that the above document has to be VALID i.e. has not expired; Photocopies of the above IDs will not be permitted.

The examination test centre staff on duty is authorized to verify the identity of candidates and may take steps to verify and record the identity of candidates. Candidates are required to extend requisite cooperation.

- 2.17. Candidates should ensure before applying for the registration that their MBBS degree is recognized as per provisions of Indian Medical Council Act. If it is found at any time that MBBS degree is not recognized, the candidature/result shall be cancelled/ deemed to be cancelled.
- 2.18. All the correspondence should preferably be addressed by e-mail. Email based query shall be addressed only if it is not anonymous and contains the name, postal address and contact telephone number of the sender. An e-mail containing vague or general queries that are contained in the Information Bulletin shall not be entertained. Queries shall not be entertained from person claiming themselves to be representative, associates or officiates of the applicant candidate. The following information shall not be

revealed by phone or email:

- a. Internal documentation /status.
- b. Internal Decision making process of National Board of Examinations
- c. Any claim /counter claim thereof.
- d. Dates & venue of internal meetings or name of the staff/officers dealing.
- e. Any information which in the opinion of NBE cannot be revealed.
- 2.19. Terms & Conditions of the NEET-PG as mentioned in the English version of information bulletin shall apply.
- 2.20. The NEET-PG shall be conducted by NBE at exam centres engaged for the purpose. Candidates will be able to schedule their exams based on the availability of test centre on the date, time and venue of their choice. Candidates are advised to familiarize themselves with the route and location of the exam centre; location maps for all test centres are available on the website.
- 2.21 Candidates are advised to look into <u>www.nbe.gov.in/neetpg</u> regularly for various information and notices pertaining to NEET-PG examination.
- 2.22 A Practice Test is available for the benefit of candidates to familiarize themselves with the Computer Based Test format at website www.nbe.gov.in/ptest. Applicants will be able to access the practice test in October 2012 upon entering their confirmation ID (issued at the end of registration and scheduling process).
- 2.23 Candidates kindly note that by registering for the NEET PG, they are covered by Non Disclosure Agreement (NDA); as per NDA candidates cannot disclose any question or contents of question paper in part or otherwise with any person or party or website or such other media/publication. Any act in breach of the NDA shall be liable for penal action as per law, kindly note that this is a punishable offence and shall lead to cancellation of candidature at the bare threshold.
- 2.24 The candidate is deemed to have read, agreed and accepted the Information Bulletin and the terms and conditions in the information bulletin for NEET-PG on completing the registration form the candidate
- 2.25 Each candidate can schedule and appear in NEET-PG 2012 once only. Any candidate found to register and/or applied more than one in NEET-PG 2012 shall be automatically debarred from the exam. His/Her candidature cancelled and further action as deemed appropriate by NBE shall be taken.
- 2.26 Possession/Use of Mobile Phones/Electronic Devices is strictly prohibited in the premises of NBE Examination Centres. Candidates Shall be liable for penal action for Possession/Use of Mobile Phones/Electronic Devices
- 2.27 The jurisdiction for court cases/disputes shall be within the exclusive jurisdiction of competent courts at <u>Delhi/New Delhi only.</u>

3. ELIGIBILITY CRITERIA FOR NEET-PG – 2013

- 3.1 Candidates who are in possession of MBBS degree or Provisional MBBS Pass Certificate recognized as per the provisions of the Indian Medical Council Act 1956 and possess permanent or provisional registration certificate of MBBS qualification issued by the Medical Council of India or State Medical Council and have completed one year of internship or likely to complete the internship on or before 31st March 2013, may apply for NEET-PG 2012 through online application system at website www.nbe.gov.in/neetpg
- 3.2 Candidates found to be ineligible at any stage of NEET-PG will not be permitted to appear in the examination and/or counseling. In an unlikely, event of any ineligible candidate appearing and/or being successful in the NEET-PG, the results/candidature of such candidate shall be cancelled and/or are deemed to be cancelled.
- 3.3 Requests for appearing in NEET-PG from candidates completing internship after 31st March 2013 or having qualifications that are not recognized shall be summarily rejected. Candidates are further advised not to canvass for the same.

Candidate who are completing their internship after 31st March 2013 or likely to complete after 31st March 2013 need not apply in the NEET-PG exam as they shall be ineligible to participate at any stage of the admission process.

- 3.4 Registration and /or appearance in NEET-PG does not confer any automatic rights upon the candidate for admission at medical institute /college or MD/MS or PG Diploma programme.
- 3.5 Eligibility for pursuing MD/MS/PG Diploma shall be as per the rules, regulations and guidelines of respective universities /medical institutions.
- 3.6 The dates indicated by candidates with regard to12 months Compulsory Rotating Resident Internship i.e. starting date, completion date, shall be treated as final and candidates will be required to submit the original Compulsory Rotating Resident Internship completion certificate at the time of counseling.
- 3.7 The cut off dates for the recognition of the Medical Colleges, from where the candidates have passed their MBBS Degree Course and completed compulsory rotatory Internship for the Admission year 2013 will be as prescribed by MCI. The Colleges recognized after the date prescribed by MCI will not considered.
- 3.8 Registration with M.C.I./State Medical Council/ is necessary and its documentary proof should be furnished at the time of counseling.

- 3.9 Some of the Universities/institutions are having regulations that candidates who are already pursuing the PG Course in their University or in another University are not eligible for admission till they complete the course. The candidates who are already pursuing PG Courses either through All India Quota or State Quota and are applying for a seat under All India Quota may confirm the eligibility conditions of that University in this regard. NBE/MCC/MoHFW shall not be responsible if such candidates are refused for admission. Such candidates may opt for the subject and the college at their own risk and cost.
- 3.10 A candidate can register and appear for NEET-PG only once for admission to a particular academic year.

4. EXAMINATION FEE

4.1 Amount

NEET-PG Exam fee Rs. 2750/- (For SC/ST/PWD candidates) Rs. 3750/- (For General/OBC candidates)

The above fees is inclusive of examination fees and information bulletin; Please note that information bulletin will not be sold separately, there is a composite voucher (as above) inclusive of examination fees and information bulletin. Information Bulletin shall be available at website for information.

4.2 How to pay

Kindly purchase Composite Information Bulletin-cum-Examination Fee Voucher from the selected branches of Axis Bank. Refer to Annexure of this information bulletin for list of branches of Axis Bank.

The unique serial number on the Information Bulletin-cum-Examination Fee Voucher is available underneath the scratch panel and needs to be entered on the NEETPG website for the online registration and scheduling process.

- 4.3 Candidates remaining absent from the examination or ineligible will forfeit their examination fee. Candidates are advised to read the rule position carefully and satisfy the terms and conditions for fulfillment of eligibility criteria before proceeding for payment of fees.
- 4.4 FEES SHALL NEITHER BE REFUNDED NOR CARRIED FORWARD IF THE APPLICATION FOR NEET-PG IS REJECTED/CANDIDATURE IS FOUND TO BE INELIGIBLE OR CANDIDATE IS UNABLE TO APPEAR IN THE EXAMINATION.

5. SCHEME OF EXAMINATION

- 5.1 NEET-PG is a qualifying-cum-ranking examination for admission to MD/MS/PG Diploma Courses in medical institutions recognized for running these courses under ambit of Post Graduate Medical Education Regulations. NEET-PG examination shall be held in November/December 2012 for admission to MD/MS/PG Diploma Courses session 2013-14 and conducted as a Computer Based Test.
- 5.2 The test comprises 240 multiple choice, single correct response questions in English Language only.
- 5.3 The examination shall be a multiple choice questions test delivered using computers network as per scheme prescribed.
- 5.4 Kindly note that the weightage of MCQ's is indicative and purely provisional. NBE reserves its rights to alter /vary /amend the same.
- 5.5 **Negative Marking:** There shall be no negative marking.

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		Forenoon Session	Afternoon Session		
	Candidate Entry Time	9:00 AM	14:15 PM		
	Venue Entry Closes	9:30 AM	14:45 PM		
	Check-in Procedure	9:00 AM to 10:00 AM	14:15 PM TO 15:15 PM		
	Test Start Time	10:00 AM	15:15 PM		
	Test End Time	1:15 PM	18:30 PM		

5.6 Allocation of time for the NEET-PG shall be as follows:

Kindly note that, the test time of 195 minutes includes – 15 minutes of test tutorial time and 180 minutes for attempting the test.

- 5.7 Kindly note that the applicant candidates shall be allocated to appear either in FORENOON session or in the AFTERNOON session i.e. the NEET-PG comprises ONE session/candidate only.
- 5.8 Syllabus: The Syllabus for the test shall comprise of subjects /knowledge areas as per the Graduate Medical Education Regulations issued by Medical Council of India with prior approval of Government of India. An extract of the same is enclosed at Annexure B, kindly refer to MCI website www.mciindia.org for complete document.

SL. NO	SUBJECT	SUBJECT WISE WEIGHT AGE IN NEET-PG EXAM OF 240 QUESTIONS (IN NUMBERS)
1	ANATOMY	20
2	PHYSIOLOGY	20
3	BIOCHEMISTRY	20
4	PATHOLOGY	15
5	MICROBIOLOGY	15
6	PHARMACOLOGY	15
7	FORENSICMEDICINE	9
8	OPHTHALMOLOGY	9
9	ENT	9
10	SPM, STATISTICS & BIOMEDICAL RESEARCH	20
11	GENERALMEDICINE	21
	PSYCHIATRY	4
	DERMATOLOGY & STD	4
12	GENERALSURGERY	21
	ORTHOPEDICS	3
	ANAESTHESIOLOGY,	3
	RADIOLOGY	3
13	OBSTETRICS & GYNAECOLOGY	20
14	PAEDIATRICS	9
	GRAND TOTAL	240

5.9 SUBJECT-WISE DISTRIBITON OF QUESTIONS FOR NEET 2013

Note: Kindly note that the weightage of MCQ's as above is indicative and purely provisional. NBE reserves its rights to alter /vary /amend the same.

The syllabus of the above topics shall be as per the latest Graduate Medical Education Regulations notified by the Medical Council of India with prior approval of the Govt. of India. For Graduate Medical Education Regulations please refer www.mciindia.org;

6. SCHEDULE OF EXAMINATION, ADMIT CARD AND PRACTICE TEST

- 6.1 The examination shall be conducted from 23rd November 6th December, 2012, which is referred to as the testing window (with 24th, 25th, 28th November and 2nd December as non-testing days).
- 6.2 Candidates have the option of choosing their examination centre, date and time through the online registration & scheduling system. Availability of test centre option is on a first come first served basis, and candidates will only be shown sessions that are available at the point of scheduling.
- 6.3 Please note that each candidate will be required to appear once during the testing window i.e. either Forenoon or Afternoon on the particular date.
- 6.4 REQUESTS FOR CHANGE OF CENTRE ARE NOT ENTERTAINED once the candidate schedules his/her examination. Candidates are advised not to canvass for the same.
- 6.5 At the end of Registration and Scheduling process the applicant will get a computer generated acknowledgement, this acknowledgment shall also be sent at the registered e-mail ID of the applicant. A print out of this acknowledgment constitutes the Admit Card-cum-Confirmation Slip. Candidate is required to affix a latest passport size photograph of the following specifications on this acknowledgement. Candidate is required to bring a print out of this acknowledgement to the Test centre along with a identification document as per para 6.6 below.

Specifications for Photograph –

- A photograph of minimum 35x45 mm with at least 75% coverage of face & head of the candidate.
- A caption indicating name of candidate and date of taking photograph should be there at the bottom of photo.
- Photograph should be taken in a white /very light colored background.
- The photograph needs to display full front view of the face. Please look directly into the camera with a neutral expression.
- Please avoid photograph with reflection or shadow on the face with red eyes.
- The photograph needs to be printed on a high quality paper with at least 600 dpi resolutions.
- The colours must possess the natural appearance and skin tone.
- The photograph must not have kinks, scratches and stains.
- 6.6 Candidates are required to bring their admit cards along with one of the following original Government issued identification card at the test site -

- Passport or
- PAN Card or
- Voters' ID card or
- Driving License or
- Aadhar Card or

• MCI/State Medical Council registration certificate bearing photograph of the candidate.

Please note that the document has to be valid document, expired documents (expired by date) or photocopies of original are not acceptable. The name of the candidate in the identification document shall be the same as that in the Admit Card-cum-Confirmation Slip.

- 6.7 Candidates may kindly note that they have to report by the time as indicated in the admit card and para 5.6 of this Information Bulletin. Candidates reporting late or beyond the prescribed time shall not be allowed to appear in the test.
- 6.8 A practice test to provide candidates with the feel and functionality of the actual test is available on NEET-PG website www.nbe.gov.in/neetpg. Candidates registered for NEET-PG can undertake the practice test prior to the actual test window. Candidates are advised to go through the practice test carefully to familiarize themselves with the screens, layout and navigation.

7. CENTRES FOR NEET-PG, REPORTING AT CENTRE & TEST DAY PROCEDURES

S.No.	City	S.No.	City
1	Ahmedabad	18	Jammu
2	Bengaluru	19	Jamshedpur
3	Bhopal	20	Kolkata
4	Bhubaneswar	21	Lucknow
5	Chandigarh	22	Mumbai
6	Chennai	23	Nagpur
7	Cochin	24	Navi Mumbai
8	Coimbatore	25	New Delhi
9	Dehradun	26	Noida
10	Faridabad	28	Pune
11	Ghaziabad	29	Raipur
12	Greater Noida	30	Ranchi
13	Gurgaon	31	Trivandrum
14	Guwahati	32	Varanasi
15	Hyderabad	33	Vishakhapatnam
16	Indore		
17	Jaipur		

7.1 The list of various cities where Examination centres are located is as under:

7.2 The candidate shall appear at the centre as shown on his/her Admit Card at his/her own cost. Candidates have the option of choosing their examination centre, date and time through the online registration & scheduling system. Availability of test centre option is on a first come first served basis, and candidates will only be shown sessions that are available at the point of scheduling.

- a. Test Centre Location: Exact address and location of the test centres is available at the online registration and scheduling application at neetpg website. Location map of the test centers are also available at the website. Candidates are advised to familiarize themselves with the test centre locations and ensure that they report for the test as per scheduled time only. Maps and directions to each centre are available on NEET-PG website www.nbe.gov.in/neetpg. Candidates are required to plan their travel accordingly.
- b. Candidates are advised to familiarize themselves with the location of examination centre and plan travel time accordingly. Candidates have to reach the test centres on or before the reporting time. Candidates may note that late entry to the examination premises is not permitted under any circumstances. NBE shall not be responsible for any delayed arrival of the candidate in reaching the centre due to any reason.
- c. All candidates at the centre shall be frisked by security guards and biometric information shall be captured.
- d. Identity checks will be made upon arrival at the test centre to ensure that there are no unauthorized candidates appearing for the exam. Candidates are required to cooperate with the security checks.
- e. Please note that only the registered candidates will be allowed at the examination centre.
- f. Friends or relatives accompanying the candidates will not be allowed entry in the examination centre under any circumstances and will not be allowed to contact the candidate while the examination process is ongoing.

7.3 REPORTING OF CANDIDATES TO THE CENTRE

- a. The candidates should arrive at the test centre at the reporting time mentioned in the admit card on the day of scheduled appointment. This will allow time for security checks, identity verification and checking in for examination.
- b. Candidates are required to bring their admit cards along with one of the following original Government issued identification card at the test site -
 - Passport or
 - PAN Card or
 - Voters' ID card or
 - Driving License or
 - Aadhar Card or
 - MCI/State Medical Council registration certificate bearing photograph of the candidate.

Please note expired IDs or photocopies of original are not acceptable.

c. Candidates without valid ID proof shall not be allowed to enter the examination premises.

7.4 SECURITY AT THE TEST CENTRE

Candidates will not be allowed to take mobile phones, watches, food items, study material, lockets, bags, electronic gadgets or any other prohibited items inside the examination premises. To avoid any hardship candidates are advised not to bring such items along with them

Finger prints of all the candidates will be captured and candidates are requested to cooperate with this essential activity to avoid any cases of impersonation. This is a security feature which will also ensure that only genuine and bonafide candidate appear for the exam and allowed to join an institute for training.

7.5 TEST DAY PROCEDURES

- a. After verification of ID and biometrics, candidates will be escorted to the designated computer terminal at the examination centre, a Test Centre Administrator (TCA) will check in the candidate.
- b. Candidates are required to keep their admit card and photo identification at all times during the conduct of examination.
- c. Pencils, eraser and rough paper will be distributed to each candidate. No need to bring stationary /writing material to exam centre.
- d. Candidates are required to listen to the TCA's instructions to begin the test.
- e. During the test, candidate may use the rough paper to do the rough work.
- f. Each workstation will be blocked on three sides front, left and right. Candidates are advised not to look around at other candidates as there will be surveillance cameras that record both audio and video.
- g. Any suspicious or disruptive behavior on part of the candidate may lead to cancellation of candidature.
- h. For any issues during the test, candidate may raise his or her hand to notify TCA/Invigilator.
- i. In case of any disruption, rest assured that a registered candidate will get to test again within the testing/examination window.
- j. All rough paper must be returned to the TCA after the test. Any attempt to take the rough papers out of the test centre will be considered disruptive behavior and liable for disqualification.

8. **RESERVATIONS AND DOMICILE**

- 8.1 As per the PG Medical Education Regulations, Merit list shall be published State wise & All India list. Reservations as per Government of India Guidelines /State Government Guidelines/PG Medical Education Regulations /rules & regulations shall be provided for Scheduled Castes (SC), Schedule Tribes (ST), Persons With Disabilities (PWD), Other Backward Classes (OBC) at eligible class of Institutions/Colleges.
- 8.2 For institutions of Armed Forces Medical Services -
- a. The candidates (serving in the Armed Forces and other eligible candidates viz. paramilitary officers / Ex-SSC officers / Civilians) opting for admission to AFMC and other institutions of the Armed Forces Medical services shall tick the option (Institutions of Armed Forces Medical Services) in the online form.
- b. ONLY those candidates opting for the above shall be considered for admission to the under mentioned Armed Forces Medical Services institutions.
- (i) Armed Forces Medical College (Pune)
- (ii) Army Hospital (Research & Referral), Delhi Cantt: (Delhi)
- (iii) INHŠAsvini (Mumbai)
- (iv) Command Hospital Air Force (Bangalore)
- (v) Command Hospital Western Command (Chandimandir)
- (vi) Command Hospital Central Command (Lucknow)
- c. Selection and final admissions to these institutions shall be made by the Armed Forces Medical Services based on applications by the candidates to these institutions, as per Govt of India Min of Defence rules and regulations in conjunction with those applicable to the affiliating Universities.
- d. There is no provision of reservation of seats for SC/ST/OBC in the Armed Forces institutions conducting Post Graduate courses.
- 8.3 **Domicile -** Guidelines of each State /Union Territory shall be applicable in respect of the seats owned /controlled by them respectively.
- 8.4 Documentary requirements:
- a. Candidates opting for reserved seats under any category are required to furnish certificate issued by competent authority in respect of SC/ST.
- b. The prescribed format of Certificate for candidates in respect of OBC is enclosed at Annexure D.
- 8.5 (a) For Persons with Disabilities there shall be 3% horizontal reservation for Physically Challenged persons (only for locomotory disabilities of lower limbs between 50% to 70% provided that in case any seat in this 3% quota

remains unfilled on account of unavailability of candidates with locomotory disability of lower limbs between 50% to 70% then any such unfilled seat in this 3% quota shall be filled up by persons with locomotory disability of lower limbs between 40% to 50% before they are included in the seats of respective category) in 50% All India PG Quota seats. Detailed information in this regard is available on the website of the Ministry of Health & Family Welfare (www.mohfw.nic.in).

- (b) For PWD seats, the qualified locomotor disabled candidates should get themselves certified at one of the under mentioned Disability Assessment Boards, constituted at the four metro-cities, before their scheduled date of counseling:
 - (i) Vardhman Mahavir Medical College & Safdarjang Hospital, Ansari Nagar, (Ring Road), New Delhi-110029
 - (ii) All India Institute of Physical Medicine and Rehabilitation, Hazi Ali Park, K.Khadya Marg, Mahalaxmi, Mumbai-400034
 - (iii) Institute of Post Graduate Medical Education & Research, 244 Archarya J.C. Bose Marg, Kolkata – 700020
 - (iv) Madras Medial College, Park Town, Chennai 600003

The Locomotor Disabled (LD) candidates are required to bring their treatment papers related to their disability, including the investigation reports at the time of reporting to the above mentioned designed institute to such disability certificate. The candidates are advised to obtain prescribed certificate before the date of counseling. Copy of the prescribed certificate is also enclosed at Annexure D.

9. INSTRUCTIONS FOR FILLING APPLICATION FORM

- 9.1 The application form for NEET-PG for admission to MD/MS courses for 2013 session is available online at website www.nbe.gov.in/neetpg.
- 9.2 Candidate may kindly note that there is no option for submitting the form other than the online mode, offline applications or printed copies cannot be accepted.
- 9.3 Candidates are required to go through the instructions given and overview of the application before proceeding to fill up the online application.
- 9.4 Online Applications for admission to the examination should be completed by the prescribed cutoff date (see "Important Dates" on cover page).

You will be able to print the acknowledgment of submission of online application on successful completion of online registration and scheduling. All fields marked * are mandatory. An acknowledgement shall also be sent by email to the registrant candidate.

- 9.5 Applications of candidates producing false or fabricated information will not be considered and candidates may be further debarred from appearing in any future examinations.
- 9.6 Information bulletin for NEET-PG can be downloaded from NEET website www.nbe.gov.in/neetpg. Candidates should go through the bulletin carefully for eligibility criteria before contacting the Board's Office. Queries pertaining to eligibility and other issues will only be entertained if the information requested is not given in bulletin or on website www.nbe.gov.in/neetpg.
- 9.7 Registration Guide:

Important Instructions

- I. Check your eligibility for NEET-PG 2013 on <u>www.nbe.gov.in/neetpg.</u>
- II. You must purchase an Information Bulletin-cum-Examination Fee Voucher from selected list of Axis Bank branches prior to beginning the online registration process. More information may be found on www.nbe.gov.in/neetpg.
- III. "*" indicates mandatory field. The boxes marked with this symbol must be filled in or you will not be allowed to complete your registration.
- IV. Ensure you have a valid and unique email address before you begin the registration process.

(a) Overview

To register to take the NEET-PG 2013, go to www.nbe.gov.in/neetpg and click on the "Register for NEET-PG" link. You can register and schedule for the NEET - PG 2013 from **4 October – 12 November 2012.**

During registration, you will:

- 1. Create a profile.
- 2. Fill out the NEET-PG application.
- 3. Schedule your test.

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Estimated time to complete this process: 15 minutes.

Before you begin, you should gather all the information you will need to complete the registration process, including your voucher, educational history, and internship details.

(b) Opening Screen

On the first screen of the registration website, you will see two boxes – "New users" and "Existing users." The first time you come to this website, please follow the instructions for "New users."

(c) Voucher

For "New users," you must enter your voucher number. Use a coin and gently scratch (as illustrated on the right) to obtain your voucher number.

(d) Captcha

You will see a special set of characters displayed on the screen. You will need to retype the characters in the box provided. These characters, called "Captchas," are a safety feature designed so the computer knows a human is entering the voucher number and not a computer programme. If you have trouble reading the characters, you can click the audio icon or the refresh icon. Once you have entered the Captchas, click on "Begin My Registration." This will take you to the next section, which is "Create a Profile."



1. Create a Profile

In this section, you will enter basic contact information.

Your name and email

- 1. You should enter your name exactly as it appears on your MBBS degree.
- 2. Enter your email address. This is where your Admit Card email will be sent.

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Create a login

Creating a login enables you to log back in later if you need to make changes, or request a resend of your Admit Card or NEET-PG application.

- 1. Username. Must be a combination of alphanumeric characters (letters and numbers) but does not contain spaces or special characters. The maximum length allowed is 50 characters.
- 2. Password. Must be 7-20 characters long and contain at least one alpha and one numerical character.
- 3. Secret reminder question.

If you forget your username and password, this question will help verify your identity.

4. Read the Data Privacy Policy and indicate your agreement to the policy. Agreement is required to register for the NEET-PG.

Additional contact information

1. Primary telephone number. Enter the entire number. Mobile number is recommended as Prometric will be using this number to send important NEET-PG related text messages by SMS.

2. Secondary telephone number. You may enter either a landline or another mobile number. Include Area Code/STD code in case of a landline number.

3. Postal Address. This is where you would like correspondence sent.

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Each address line should be limited to 30 characters including spaces. You may make use of Address line 1, 2 and 3 in case of longer addresses.

Click "Save & Continue" to move on to the next section, which is the NEET-PG Application.

Note that once your profile has been created and saved, you will no longer be able to use your voucher number to create another profile. Changes to your name or username will not be allowed once you leave this section.

2. Apply for NEET-PG

In the second section, you will enter information about yourself.

Personal Information

You will need to enter your Gender, Nationality, Category as per central list, Category as per domicile state list (for details refer to the Information Bulletin), and Date of Birth.

You will be asked about your preference to join an institute/hospital of Armed Forces.

You will also need to select "No" or "Yes" to the question "Are you a Person with Disabilities?

You will be asked to choose your domicile state.

Educational Background

You must enter the total aggregate marks obtained in your professional MBBS examination.

You will also be required to enter information on your MBBS, completion date for your internship (internship completion date must be on or before **31 March 2013**) and other educational qualifications.



Declaration by Candidate

In this section, you will be required to choose "I Agree" or "I Disagree" to the declaration statement. This declaration affirms that you are eligible to take the NEET-PG and all the information that you have entered is correct.

After reading this section, you need to State State Continue >

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choose "I agree," in order to click "Save & Continue" to proceed to the next section. If you select "I disagree," you will not be allowed to proceed.

Errors

If you choose "Save & Continue" and you have not completed any mandatory fields (marked by "*"), a new screen will appear telling you what you need to correct. The fields that are missing are highlighted in red. In this example, the candidate still needs to specify where he/she completed his/her MBBS, as well as the internship completion date.

Successful Submission of the Application

Once you complete the Application and choose the "I agree" button, all your information will be entered and saved into Prometric's computerised data





entry system. This could take several minutes. Please **Do NOT** close this window while your information is being saved.

After your information has been successfully saved, a copy of your application will be emailed to you within 24 hours to the email address specified by you.

You can now move on to Schedule your test.

3. Schedule test

Once your application has been successfully submitted, you can continue the online process to schedule an appointment to take the NEET-PG. You will be asked to choose a site and pick an available date and time at that site.



The NEET-PG may be taken during the window of 23 November - 6 December 2012. There will be two sessions each day - at 10 a.m. and at 3.15 p.m. Each candidate is only required to appear in one session during this testing window.

Select Location for the Test

When choosing a test site location, you will see "State / Union Territory" followed by a white box with an arrow at the end. Click on the arrow and scroll down to see a list of the states and territories where the NEET-PG will be given. Click on the state or territory where you would like to take the NEET-PG.

Select date and time

Once you choose your site, you must choose the date you want to take the NEET-PG. You will only be able to select dates highlighted in blue. If a date in the test window is not shown, it means that all available testing sessions at that site for that date have already been filled. Once you choose the date, you will need to choose the 10 a.m. session or the 3.15 p.m. session. If either of these two times does



not appear, it means all available testing seats for that time have already been filled.

If a site no longer has any available dates, you may use the blue "Back" button at the bottom of the screen to search for other sites.

Once you have made your site, date and time selections, you must click the "Save & Finish" button at the bottom of the screen.

Confirmation Page

If all information has been entered correctly, you will see a confirmation screen. You should read the confirmation screen to make sure all information is correct. If something is not correct, click the "Edit" button in the area where there correction needs to be made. **Note that no reschedule will be allowed.**

Be sure to review the page to make sure there are no red "Pending" buttons. A "Pending" button means you still need to enter some information. Click on the "Finish my registration" button to complete your registration and scheduling process.

If any information is incorrect, you can click the "Edit Profile" or "Edit Application"

buttons to make corrections.

If all information is correct, click on the "I am done (exit)" button to end your scheduling session. You will be sent an email Admit Card and Application Summary to the email address specified by you within 24 hours.

If you prefer, while on the confirmation page, you have the option to print your NEET-PG Admit Card and to print your Application Summary. Even if you print from this screen, the information will still be emailed to you.

Admit Card Summary Email

When you receive your Admit Card by email, you should read it carefully and verify all information is correct. You should then print a copy.

You must bring the Admit Card with you on the day you take your test. You will not be allowed to test without the Admit Card.

To the right is an example of what your email Admit Card will look like. You should expect to receive this email within 24 hours of submitting your completed application and scheduling.

When you begin your test, you must enter the NEET-PG Registration Number/Prometric Testing ID on your admit card into the computer.

Application Summary Email

Once your NEET-PG application has been successfully submitted, a summary of your application will be sent to you via email within 24 hours. Please save and print a copy of the application for your records.

To the right is an example of what your email application summary will look like. You should expect



ADMIT CARD FOR NEET - PG 2013 ADMISSION SESSION

Dear Raja Kusar



Thank you for registering for NEET – PG. NOR NEETPG Application Value And Table 100000

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to receive this email within 24 hours of submitting your completed application.

Re-entering the NEET-PG Scheduling System

If you have already begun the registration and scheduling process, but need to finish the process, edit your application information, get another copy of your application or a copy of your admit card, go https://neet.prometric.com and use the "Existing Users" link on the right-hand side. You will need to enter the username and password you've already created then click on "Log in."

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Note that no cancellation or changes to your testing schedule will be allowed once you have completed your registration and scheduling process.

Registration closes at 11.59 p.m. on 12 November, 2012. No changes will be allowed after that time.

Registration Help

If, during the registration process, you have questions or need help, you should click on the information links. They are always in blue text and underlined.

Information related to the area that you are completing will pop up.

The screen shot on the right is an example



of someone who clicked on the "password requirements" link.

The Testing Process

You will take the NEET-PG on a computer at the test centre you selected during the Scheduling part of the online registration process. You do not need any computer experience or typing skill to take your test. Your NEET-PG examination will begin with a short tutorial on the test and its features.

You must arrive one (1) hour before your scheduled appointment. This allows time for you to sign in and for staff to verify your identification and documentation.

You will need to bring the following items with you to the test centre:

- 1. **Admit Card.** You must bring your Admit Card with you to the test centre. You will not be allowed to test without it. Please paste your recent photograph on the Admit Card and get it attested by a gazetted officer.
- 2. **Required Identification.** You must present an original, valid (non-expired)

form of photo identification before you can test. The name on the photo identification must match your name as entered in the NEET-PG registration. Acceptable forms of photo identification are limited to: Passport, PAN Card, Voter's ID, Driving License, Aadhar Card or MCI / State Medical Council registration certificate bearing the candidate's photograph. Expired or Photocopies of the original are not acceptable.

Note: If you do not present an appropriate photo identification, you will not be allowed to take the NEET-PG.

Test Centre Rules

To ensure that all candidates are tested under equally favourable conditions, the following rules and procedures will be observed at each test centre. Your failure to follow any of the security procedures may result in the disqualification of your test. NBE and its engaged agencies reserve the right to audiotape and videotape any test session.

References. No reference materials, papers or study materials are allowed at the test centre. If you are found with these or any other aids, you will not be allowed to continue the test and your answers will not be scored. You will be provided with scratch papers and pencils to use during the test session. These items (used and unused) must be returned at the end of the test session. Removing scratch paper from the test centre will be considered an act of misconduct.

Personal Items. Personal items, other than identification documents, are not allowed in the testing room. This includes cell phones, PDAs, BlackBerry® devices, digital/analogue watches, and any other electronic or photographic devices etc. You will not have access to your personal items during the test. If you fail to follow the directions of the test centre staff, you will not be permitted to take the test. Any violation of this procedure during the test may result in cancellation of your scores, dismissal by the test centre staff, or banning from future testing. Test Centres, engaged, NBE and agencies deployed assume no responsibility for personal items or devices that you choose to bring into the test centre.

Breaks. There are no scheduled or unscheduled breaks. Once you have been seated at the test centre, you must remain in your seat during the test except when authorised to leave by a test centre staff member.

Visitors. Friends or relatives who accompany you to the test centre are not allowed to wait in the test centre or be in contact with you while you take the test.

Misconduct or Disruptive Behaviour. Candidates who engage in any kind of misconduct or disruptive or offensive behaviour may be dismissed from the test. Examples are: giving or receiving help, taking part in an act of impersonation, removing test materials or notes from the testing room, using rude or offensive language and behaviour that delays or interrupts testing.

Weapons. Weapons are strictly prohibited at the test centre.

Questions on Test Content. Test centre administrators are not allowed to answer any questions pertaining to the test content. If you do not understand a question on the test, you should answer the question to the best of your ability.

10. CAUTION NOTICE, NON DISCLOSURE AGREEMENT, UNFAIR MEANS & DISCLAIMER

10.1 Caution Notice

- a. Candidates are advised to refer to NEET-PG website <u>www.nbe.gov.in/neetpg</u>, Information Bulletin and website of Medical Counseling Committee <u>www.mcc.nic.in</u> for authentic information and periodic updates about the NEET-PG and conduct of counseling thereafter.
- b. Candidates are advised not to be allured by various claims of any party or person or institute for qualifying NEET-PG examination or securing seat as per the regulations.
- c. Candidates are advised to bring any such information to the notice of NBE by e-mail: neetpg@nbe.gov.in or fax 011-45593009.

10.2 Non Disclosure Agreement

The NEET-PG is a proprietary examination and is conducted by National Board of Examinations. The contents of this test are confidential, proprietary and are owned by National Board of Examinations. NBE explicitly prohibits the candidate from publishing, reproducing or transmitting any or some contents of this test, in whole or in part, in any form or by any means verbal or written, electronic or mechanical or for any purpose.

By registering for and /or appearing in NEET-PG the candidate explicitly agrees to the above Non Disclosure Agreement and general terms of use for NEET-PG as contained in this Information Bulletin, NEET-PG website.

Violation of any act or breach of the same shall be liable for penal action and cancellation of the candidature at the bare threshold.

10.3 **Unfair means** – NBE reserves its absolute rights to take penal action under applicable civil/criminal procedure/guideline or any other action deemed appropriate against candidates found using unfair means.

Unfair means includes:

- (i) Obtaining or attempting support for his candidature by the following means, namely:-
- a) offering illegal gratification to; or
- b) applying pressure on; or
- c) blackmailing, or threatening to blackmail any person connected with the conduct of the examination; or

- (ii) impersonation; or
- (iii) procuring impersonation by any person; or
- (iv) submitting fabricated documents or documents which have been tampered with; or
- (v) making statements which are incorrect or false or suppressing material information; or scheduling/appearing in NEET-PG 2012 more than once;
- (vi) resorting to the following means in connection with his candidature for the examination, namely :-
- a) obtaining copy of question paper in part or total through improper means;
- b) finding out the particulars of the persons connected with secret work relating to the examination;
- c) influencing the examiners; or influencing staff /officers deployed for exams; or
- (vii) using unfair means during the examination; or
- (viii) writing obscene matter or drawing obscene sketches; or
- (ix) misbehaving at test centre, provoking fellow examinees to boycott examination, creating a disorderly scene and the like; or
- (x) harassing or doing bodily harm to the staff deployed by the NBE or its designated agency for the conduct of their examination; or
- (xi) being in possession of or using any mobile phone, pager or any electronic equipment or device or any other equipment capable of being used as a communication device during the examination; or
- (xii) violating any of the instructions issued to candidates or contend in information bulletin along with their admission certificates permitting them to take the examination; or
- (xiii) appearing in exam for aiding a candidate or non bonafide purpose,
- (xiv) attempting to commit or, as the case may be, abetting the NBE of all or any of the acts specified in the foregoing clauses;

the candidate by indulging in NBE, may in addition to rendering himself liable to criminal prosecution, be liable:-

- a. to be disqualified by the NBE from the Examination for which he is a candidate; and/or
- b. to be debarred either permanently or for a specified period:-
- (i) by the NBE, form any examination or selection held by them;
- (ii) by the Central /State Government from any employment under them; and
- c. if he is already in service under Government to disciplinary action under the appropriate rules:

10.4 **Disclaimer** – The decision of NBE shall be final and binding for declaration of any person /candidate guilty of foregoing or such offence as shall be classified as UMC.

11. RESULTS

11.1 **QUALIFYING CRITERIA**

As per the Postgraduate Medical Education (Amendment) Regulations:

In order to be eligible for admission to any postgraduate course in a particular academic year, it shall be necessary for a candidate to obtain a percentile of 50 and above in 'National Eligibility-cum-Entrance Test for Postgraduate courses' held for the said academic year. However, in respect of candidates belonging to Scheduled Castes, Scheduled Tribes, Other Backward Classes, the minimum percentile shall be 40.

In respect of candidates with locomotory disability of lower limbs, the minimum percentile shall be 45. The percentile shall be determined on the basis of highest scaled scores secured in the All-India common merit list in 'National Eligibility-cum-Entrance Test' for Postgraduate courses.

S.No.	Category	Passing Criteria
1.	General	50% Percentile
2.	SC/ST/OBC	40% Percentile
3.	PWD	45% Percentile

11.2 VALIDITY OF NEET-PG RESULT

The validity of the result of the NEET-PG shall be only for the current admission session i.e. 2013 admission session for MD/MS/PG Diploma courses and cannot be carried forward for the next session of admissions for MD/MS/PG Diploma.

Kindly note that the schedule of admissions for MD/MS/PG Diploma courses is governed by Post Graduate Medical Education Regulations issued by Medical Council of India with prior approval of Central Government and the Judgments of Hon'ble Supreme Court of India.

11.3 DECLARATION OF RESULT

The results for NEET shall be declared by 31st January 2013. The mark sheet-cum-result certificate for the NEET-PG examination can be downloaded from the website www.nbe.gov.in/neetpg after the declaration of result.

11.4 **DISPATCH OF RESULT**

The result will be displayed at NEET-PG website.

11.5 **TIE – BREAKER CRITERIA**

In the event of two or more candidates obtaining same percentile, the merit

position shall be determined by the number of wrong responses of such candidates. Candidate with less number of wrong responses shall be placed at higher merit.

In case of tie with same percentile rank and same number of wrong responses, date of birth shall be considered to determine inter-se-merit. An elder candidate shall be placed at a higher merit failing which marks obtained in qualifying exam i.e. MBBS shall be considered.

11.6 **RESULTS – EQUATING & SCALING**

The question paper of NEET-PG comprises of 240 multiple choice questions each with four options and only one correct response. Multiple question papers are used for NEET-PG for different sessions and days.

A standard psychometrically-sound approach is employed for the scoring process of DNB CET. This approach has been applied to score all large scale Computer Based Examination utilizing multiple question papers.

Step 1: Calculation of Raw Marks

Raw marks are calculated based on the number of questions answered correctly, incorrectly or omitted.

CorrectAnswer	+1 point
Incorrect Answer /Omitted	0 point

Step 2: Raw Marks are equated

While all papers (forms) are carefully assembled to ensure that the content is comparable, the difficulty of each form may be perceived by different subjects undertaking the test to slightly vary. Such minor differences in the overall difficulty level are accurately measured after all the different question papers (forms) have been administered and the results analyzed. A post-equating process is necessary to ensure validity and fairness.

Equating is a psychometric process to adjust differences in difficulty so that scores from different test papers (forms) are comparable on a common metric and therefore fair to candidates testing across multiple papers (forms). To facilitate this comparison, each form contains a pre-defined number of questions (items) selected from a large item bank, called an equating block, which is used as an anchor to adjust candidates scores to the metric of the item bank. Taking into account of candidates' differential performance on these equating blocks, each individual's raw marks are adjusted for difference in paper (form) difficulties.

During post-equating, test items are concurrently analyzed and the estimated item parameters (item difficulty and discrimination) are put onto a common metric. Item Response Theory (IRT), a psychometrically supported
statistical model, is utilized in this process. The result is a statistically equated raw score that takes into account the performance of the candidate along with the difficulty of the form administered.

Step 3: Equated raw score is scaled

In order to ensure appropriate interpretation of an equated raw score, the scores must be placed on a common scale or metric. A linear transformation is used for this scaling process, which is a standard practice for such test administration.

Post equating takes into account any statistical differences in examination difficulty and ensures all candidates are evaluated on a common scale. The aforesaid steps ensure that all examination scores are valid, equitable and fair. Merit List shall be prepared on the basis of scaled score obtained by the candidates.

11.7 There is no provision for re-checking/re-totaling/re-evaluation of the question paper, answers, score/marks and no query in this regard will be entertained.

12. COUNSELING DETAILS

The allocation of seats for MD/MS/PG Diploma courses 2013 Admission session in various medical institutions /medical colleges under ambit of PGME Regulations shall be undertaken as per procedure as prescribed in PG Medical Education Regulation.

The reservation of seats in medical colleges/institutions for respective categories shall be as per applicable laws prevailing in States/ Union Territories. An All India Merit List as well as State-wise merit list of the eligible candidates shall be prepared on the basis of scaled scores obtained in National Eligibility-cum-Entrance Test and candidates shall be admitted to Post Graduate courses from the said merit lists only.

No candidate who has failed to obtain the minimum percentile as prescribed in the Regulation above shall be admitted to any Postgraduate courses in the said academic year.

In non-Governmental medical colleges/institutions, 50% (Fifty Percent) of the total seats shall be filled by State Government or the Authority appointed by them, and the remaining 50% (Fifty Percent) of the seats shall be filled by the concerned medical colleges/institutions on the basis of the merit list prepared as per the scaled scores obtained in National Eligibility-cum-Entrance Test."

Candidate may kindly visit the website of Medical Counseling Committee at www.mcc.nic.in for details of counseling.

At a glance, allocation of seats:-



13. AVAILABILITY OF MD/MS SEATS FOR 2013 SESSION

- 13.1 Candidates are advised to visit <u>www.mciindia.org</u> for the latest information about various MD/MS/Post Graduate Diploma courses & seats available at various Medical Colleges/Institutions.
- 13.2 Candidates may also visit website of Medical Counseling Committee www.mcc.nic.in for details of seats available and schedule of counseling.
- 13.3 Medical institutions that are not covered by centralized admissions for MD/MS/PG Diploma seats through NEET are: -
- (i) AIIMS, New Delhi
- (ii) PGIMER, Chandigarh
- (iii) JIPMER, Pondicherry

or

Such Institutions as may be notified by MoHFW, Govt. of India.

13.4 A provisional & indicative list of MD/MS/PG Diploma Courses where seats may be available is placed at Annexure C.

14. OVERVIEW OF COMPUTER BASED TESTING



15. CONTACT NBE

15.1

Candidate Care Helpline Number (Monday - Friday, 0900 - 1700hrs)	0124-4517187
E-mail	neetpg@nbe.gov.in
Official Website	www.nbe.gov.in/neetpg

15.2 Guidelines for communication

- i. The e-mail query shall be addressed only if it is not anonymous and contains the name, postal address and contact telephone number of sender
- ii. An e-mail containing vague or general queries that are contained in the Information Bulletin shall not be entertained.
- iii. The following information shall not be revealed:
 - a. Internal movement of file
 - b. Any claim /counter claim thereof.
 - c. Names of the staff/officers dealing.
 - d. Any information which in the opinion of NBE cannot be revealed.
- iv. Queries shall not be entertained from person claiming themselves to be representative, associates or affiliates of the applicant /candidate.
- 15.3 Candidates can also submit queries through contact us link at NEET-PG website.
- 15.4 Please refer to FAQ's section (S. No. 5) for detailed note on timings for contact centre.

16. AN OVERVIEW OF NEET-PG 2012 (For admission to MD/MS/PG Diploma courses 2013 session)

1.	Purpose of Examination	Qualifying cum Ranking Examination for admission to MD/MS/PG Diploma courses
2.	Periodicity	Annual
3.	Pattern of examination	MCQ based with single correct response
4.	No. of items (questions)	240
5.	Negative marking	No
6.	Syllabus	As per Graduate Medical Education Regulation
7.	Mode of conduct	Computer Based
8.	Criteria for passing the examination	Minimum percentile of 50 in the exam for General Minimum percentile of 40 for SC/ST/OBC Minimum percentile of 45 for PWD
9.	SeatAllotment	Merit Based Counseling conducted as per PG Medical Education Regulations
10.	Reservation of seats	As per applicable guidelines /Regulation /Govt. Policy
11.	Last date of Voucher Sales	November 10th, 2012
12.	Last date of Online Application	November 12th, 2012 – By 23:59 hrs
13.	Test Dates	November 23rd, 2012 to December 6th, 2012
14.	Declaration of Results	By 31st January 2013

17. FREQUENTLY ASKED QUESTIONS

Background on NEET-PG

1. What is the National Eligibility-cum-Entrance Test for Postgraduates?

The National Eligibility-cum-Entrance Test for Postgraduates (NEET-PG) is a new qualifying-cum-entrance examination notified under the provisions of Postgraduate Medical Education Regulations 2000, by the Medical Council of India with prior approval from the Government of India. It will be the single test for admission to Postgraduate Medical Courses starting from the academic year 2013-14.

2. Is the NEET-PG a mandatory test?

Yes, the NEET-PG is a mandatory test for gaining admission to any Postgraduate Medical Courses.

3. Who is eligible to take the NEET-PG?

Candidates who are in possession of MBBS degree / Provisional Pass Certificate recognised as per the provisions of the Indian Medical Council Act 1956 and possess permanent / provisional registration certificate of MBBS qualification issued by the Medical Council of India and have completed one year of internship / likely to complete on or before 31 March 2013 may apply for NEET-PG.

4. Who will be conducting the NEET-PG?

The National Board of Examinations (NBE) will be conducting the NEET-PG.

5. When will the NEET-PG be conducted?

The first NEET-PG will be conducted in November/December 2012 and annually thereafter.

Format of NEET-PG

1. What is the test format for NEET-PG?

The NEET-PG will be conducted as a computer-based test (CBT). This is not an Internet-based test, i.e. a candidate does not take the test over the Internet. In a computer-based test, a candidate will read the questions on a computer screen and choose an answer by using a mouse to click on the appropriate option.

2. What does a computer-based test look like?

A Practice Test will be made available on the NEET-PG website www.nbe.gov.in/neetpg to provide candidates with the look and feel, as well as functionality of the actual test.

3. Can I take the test from any computer?

No, a candidate will have to test on a pre-assigned workstation, in the testing venue chosen by him/her during the time of registration and scheduling.

Test Duration & Pattern

1. What is the duration of the test?

The test duration is 3 hours and will be conducted in a single session. There will also be an additional 15-minute tutorial prior to the start of the test. Candidates will also need to accept a non-disclosure agreement (NDA) before beginning the test.

2. How many questions will there be?

There will be a total of 240 questions and only one section.

3. Can I move back and forth between the questions?

Yes, candidates will have the option to navigate between the questions via the Review Screen. Candidates are advised to make use of the Practice Test on the NEET-PG website www.nbe.gov.in/neetpg to familiarise themselves with the navigation and functionality of the actual test. A 15-minute tutorial will also be available prior to the start of the actual test.

4. What type of questions will there be?

The test will only contain multiple choice questions, each with four (4) options and only one (1) correct response.

5. What is the syllabus / course on which the test would be based?

The test will include all subjects as indicated in the information bulletin.

6. What is the 15-minute tutorial?

The tutorial provides a series of screens that will orient you to the computerbased NEET-PG. This will give you an opportunity to try the various features, including how to navigate between questions, review them, select, deselect, change and mark responses etc. The tutorial has a total duration of 15 minutes and candidates are advised to go through it entirely before starting the actual test. At the end of the tutorial, candidates will be asked to accept a non-disclosure agreement (NDA) before beginning the test. For a similar preview, candidates can take a tour of the Practice Test which will be available on NEET-PG website www.nbe.gov.in/neetpg.

7. What is the Practice Test?

The Practice Test is a sample computer-based test that is intended to familiarise candidates with the navigation and functionality of the NEET-PG. It includes a tutorial on using the various features of the test like moving between screens, selecting, de-selecting, marking and reviewing responses

etc., as well as some sample questions which will allow candidates to try out these features. Note that these sample questions are not representative of the content of difficulty level of the actual test.

Registration & Scheduling

1. When will the NEET-PG 2012 be conducted?

The first NEET-PG will be conducted between 23 November and 6 December 2012. There will be a total of 10 testing days within this testing window, with 2 testing sessions a day. Each candidate will only be required to attend one testing session during this window.

2. What are the timings for the testing sessions?

There will be 2 sessions – one at 10 AM and another at 3:15 PM.

3. Where will the test be conducted?

The test will be conducted at selected test centres in 33 cities: Ahmedabad, Bengaluru, Bhopal, Bhubaneswar, Chandigarh, Chennai, Cochin, Coimbatore, Dehradun, Faridabad, Ghaziabad, Greater Noida, Gurgaon, Guwahati, Hyderabad, Indore, Jaipur, Jammu, Jamshedpur, Kolkata, Lucknow, Mumbai, Nagpur, Navi Mumbai, New Delhi, Noida, Patna, Pune, Raipur, Ranchi, Trivandrum, Varanasi and Vishakhapatnam.

4. Where can I get the list of test centres for NEET-PG?

The list of test centres is available on the NEET-PG website www.nbe.gov.in/neetpg.

5. Will I be able to select my preferred date, time and location for the test?

Yes, candidates will be able to select their preferred location, date and time for their test during the online registration and scheduling process. Availability will be based on a first come, first served basis, and only available sessions will be shown at the time of scheduling. Please note that no reschedule or cancellation will be allowed once your registration/scheduling is completed.

6. How do I apply for the test?

Candidates may register for and schedule their test online via www.nbe.gov.in/neetpg from 4 October to 12 November 2012. Prior to this, candidates need to purchase an Information Bulletin-cum-Examination Fee Voucher from participating Axis Bank branches to obtain the unique serial number on the voucher which is required for the registration and scheduling process.

7. What is the test fee?

The fee for the NEET-PG is Rs. 2750 for SC/ST/PWD candidates; and Rs. 3750 for General/OBC candidates.

8. How do I pay for the test?

Candidates are required to fill in the specialized pay-in slip available on the NEET-PG website www.nbe.gov.in/neetpg and bring this to any of the participating Axis Bank branches to purchase an Information Bulletin-cum-Examination Fee Voucher. Sale of the Information Bulletin-cum-Examination Voucher begins on 4 October and ends on 10 November 2012. The list of participating Axis Bank branches is available on www.nbe.gov.in/neetpg.

9. What is the last day for online registration and scheduling?

The online registration and scheduling window opens on 4 October and closes on 12 November 2012.

10. Where can I find the voucher number required for online registration?

You can find the voucher number under the scratch-off area of the Information Bulletin-cum-Examination Fee Voucher you purchased at one of the selected Axis Bank branches. Please use a coin to scratch off gently so the voucher number does not become illegible. Vouchers will not be refunded under any circumstances.

11. Can I use my friend's email address when registering for NEET-PG?

No, you need to use a valid and unique email address, that is your own.

12. Is there a restriction on what can be entered within the address fields during the online registration?

Yes, you need to limit each address line to 30 characters including spaces. You may make use of Address line 1, 2 and 3 in case of longer addresses. Special characters are acceptable.

13. What happens after I've submitted my online application?

After the successful submission of the online application for NEET-PG, candidates will receive an Admit Card via email. Candidates may also log on to the NEET-PG registration and scheduling website via www.nbe.gov.in/neetpg to print a copy of their Admit Card. The Admit Card will specify the Registration Number / Testing ID of the candidate, test date, time and location. Candidates are required to appear for the test at the specified test centre, on the date and time indicated on the Admit Card.

14. Can I appear for NEET-PG more than once during the testing window?

No, you can only appear for NEET-PG only once during the annual testing window. It will be deemed a fraudulent activity if one attempts to appear

more than once. Admit Cards and photo IDs of the candidates will be checked, and digital images and fingerprints will be captured at the test centre.

15. If I have made any mistake(s) while registering for NEET-PG, can I make changes later to rectify?

If you make mistakes while entering your application data, you may log back in to the NEET-PG registration and scheduling website via www.nbe.gov.in/neetpg and select "Edit Profile" to make changes to your personal details such as address or "Edit Application" to make changes to your application data such as educational information. For security reasons, editing of candidate's full name and username will not be allowed. The ability to edit application profile and application details will be available until the end of the registration window i.e. until 11:59 PM IST on 12 November 2012.

Rescheduling & Cancellation

1. Can I reschedule my test date / time?

No, you will not be allowed to change your test location, time or date once you have completed your online registration and scheduling process. Please select your preferred choices carefully based on the availability shown to you at the time of your scheduling.

2. Can I cancel the test?

No, under no circumstances will a cancellation / refund be allowed.

3. If I do not take my test, will I be eligible for a refund?

No, your fees will not be refunded in case you do not appear for your test as per your scheduled location, date and time.

Testing Day

1. What is the reporting time for the test?

Candidates must arrive at their assigned test centre one (1) hour before their scheduled test start time. If the test begins at 10 AM, you must reach the test centre no later than 9 AM. If the test begins at 3:15 PM, you must reach the test centre no later than 2:15 PM. This will allow for security checks, identity verification and check-in. The test centre gates will close 30 minutes prior to the test start time. Candidates who arrive late will not be allowed to test.

2. What do I need to bring to the test centre?

Candidates are required to bring a printed copy of their Admit Card along with one of the following valid and original government-issued identification card (ID):

- Passport or
- PAN card or
- Voter's ID or
- Driving License or
- Aadhar Card or
- MCI / State Medical Council registration certificate bearing the candidate's photograph

Expired or photocopies of the ID are not acceptable. Candidates without a valid ID proof will not be allowed to enter the test centre.

Note: You will not be allowed to take personal items such as mobile phones, watches, food items, study material, lockets, bags, electronic gadgets or any other prohibited items into the testing room. You are advised not to bring these to the test centre.

3. **Does the name appearing on the photo identification need to match the one shown on the Admit Card?**

The name on your photo identification must match your name as shown on your Admit Card. If your name has been changed due to events such as marriage, you must show the relevant document mentioned below at the time of the test.

- Marriage Certificate
- Divorce Decree
- Legal Name Change Document

4. Where can I find directions for getting to my test centre?

Maps and directions to each test centre will be available on the NEET-PG website www.nbe.gov.in/neetpg. Candidates are advised to plan their travel accordingly and make allowance for traffic and other unforeseen circumstances.

5. What happens during the security checks, identity verification and check-in?

Candidates will need to produce their Admit Card and one valid and original ID for verification upon arrival at the test centre. Only registered candidates will be allowed into the test centre. Candidates will be frisked before entering the testing room to ensure they are not carrying any prohibited items. A digital photo and fingerprint of all candidates will also be captured electronically as part of the check-in process.

6. Will there be any breaks during the test?

No, there will be no scheduled breaks during the test but candidates are allowed to go to the restroom by raising their hand to inform the test centre administrator. Note that the on-screen timer will continue running during restroom breaks.

7. What will I be provided with during the test?

At the test centre, each candidate will be seated at a desk with a computer terminal and he/she will be provided with pencils, eraser and rough/scratch paper. Rough work cannot be done on any other paper/sheet, as no other material will be allowed inside the testing room. On completion of the test, candidates will have to hand all the scratch paper and stationery back to the test centre administrator.

8. How do I know when the test time has ended?

There will be an on-screen timer on the top right corner of your screen which will count down from 3 hours. Candidates are advised to check this timer regularly and allocate their time carefully. A pop-up window will appear before the test ends to alert candidates.

9. Will I be able to leave early if I finish the test before the allocated test time has ended?

No, candidates will not be allowed to leave until the entire duration of the test is up with the exception of genuine medical conditions.

Scoring & Results

1. How are raw scores calculated?

Raw scores are calculated based on the number of questions answered correctly, incorrectly, or omitted. Each correct answer will be awarded one (1) point. Questions left unanswered /incorrectly answered will be awarded zero (0) point.

2. What happens after raw scores are calculated?

Like virtually all large-scale exams, NEET-PG will utilise multiple question papers, or versions, of the test. While all forms are carefully assembled to ensure that the content is comparable, the difficulty of each form may vary slightly. Such minor differences in the overall difficulty level cannot be accurately measured until after all of the forms have been administered and the results analysed. To facilitate this comparison, each form will contain a pre-defined number of questions selected from a large item bank that will be used for equating. By comparing candidate responses to these common questions across multiple forms, the ability level of the individuals can be evaluated and the precise difficulty of the question papers calculated. The raw scores are then adjusted, as necessary, through a process called equating. Equating assures fairness for all candidates by allowing accurate comparisons to be made of performance across all of the test papers. Equated raw scores are then placed on a common scale or metric to ensure appropriate interpretation of the scores. This process is called scaling. Lastly, once scaled scores are established, the final step is to rank candidates using percentiles.

3. What is a percentile rank?

A percentile rank is the percentage of candidates that fall below a given score. For example, a 75 percentile would imply that you have scored higher than 75% of the total NEET-PG test-takers.

4. How will I know if I've been successful in the NEET-PG?

In order to be eligible for admission to any postgraduate course in a particular academic year, a candidate must obtain a percentile rank of 50* and above in the NEET-PG. These successful candidates will be given a merit position (rank) based on their scaled scores obtained in the NEET-PG. Distribution of PG medical seats will be allotted on the basis of NEET-PG merit. The merit list will also be published on the NEET website.

* SC/ST/OBC candidates need to obtain a percentile rank of 40 and above to be eligible.

* PWD candidates need to obtain a percentile rank of 45 and above to be eligible.

5. What happens if I obtain the same percentile rank as another candidate?

In the event two or more candidates obtain the same percentile rank, the merit position shall be determined by the number of wrong responses of these candidates. The candidate with the fewest number of wrong responses shall be placed higher on the merit list. If there is still a tie, date of birth shall be considered to determine inter-se-merit, i.e. an elder candidate shall be placed at a higher merit.

6. When will the results of NEET-PG be available?

The results of NEET-PG list will be declared on the NEET website www.nbe.gov.in/neetpg on 31 January 2013. Both the percentile rank and merit list will be made available. The results will also be sent to successful candidates by post.

7. How long are my results valid for?

The results for NEET-PG 2012 are only valid for the current admission session, i.e. 2013 admission for MD/MS/PG Diploma.

Other Information

1. In case I purchased a voucher and missed registering during the registration and scheduling window, can I still register for NEET-PG?

No, you can only register and schedule for NEET-PG from 4 October – 12 November 2012. No exceptions will be permitted.

2. If I do not get my Admit Card, who should I contact?

You need to log in to the NEET-PG registration and scheduling website via

www.nbe.gov.in/neetpg using your username & password and select "Email Admit Card". Your Admit Card will be emailed to the email address you provided during registration. There is also an option for you to print you Admit Card directly from the website.

3. In case the website does not work and I am unable to schedule myself, how should I register?

If the registration and scheduling website is not accessible for any reason, please close your Internet browser and try again. You can register for and schedule your test anytime between 4 October and 12 November 2012.

4. If my voucher number does not work, who should I contact?

Please contact the NBE Candidate Care on 0124 451 7178.

5. What are the timings to contact the NBE Candidate Care helpline?

The FAQs, IVRS and online instructions are designed to enable selfservice. You are requested to use these tools to guide you through the entire process and help answer most of your queries. In case you are still facing issues, then NBE Candidate Care Support is available by phone and email.

Phone: 0124 451 7187

Webmail: neetpg@nbe.gov.in

Phone support availability:

- Registration Phase: 4 October to 12 November 2012, 9:00AM to 5:00PM from Mondays to Fridays
- Pre-testing window: 13 November to 22 November 2012, 9:00AM to 5:00PM from Mondays to Fridays
- Testing window: 23 November to 6 December 2012, 8:00AM to 7:00PM daily

NBE Candidate Care will be closed on the following national public holidays:

- Wednesday, 24 October 2012 Dussehra
- Tuesday, 13 November 2012 Diwali

Webmail support availability:

Webmail support will be available from 4 October 2012 until 6 December 2012.

18. ANNEXURES

Α.	1. PG Medical Education Regulation, December 2010	
	2. PG Medical Education Regulation, February 2012	
	3. MCI – MOM dtd. 23.07.2012	
В.	Syllabus – Enclosed is the extract from Graduate Medical Education Regulations published by Medical Council of India with prior approval of Government of India. A complete copy of the Graduate Medical Education regulations is available at MCI website www.mciindia.org	
C.	List of MD/MS/PG Diploma specialties in which courses are available – This is the extract from the MCI website. This list is purely provisional, for final and confirmed list kindly refer to MCI website www.mciindia.org or website of Medical Counseling Committee www.mcc.nic.in	
D.	Format of OBC Certificate and Certificate for Locomotor Disability	

MEDICAL COUNCIL OF INDIA NOTIFICATION

New Delhi, the 21st December, 2010

No. **MCI.18(1)/2010-Med./49070.** – In exercise of the powers conferred by Section 33 of the Indian Medical Council Act, 1956(102 of 1956), the Medical Council of India with the previous approval of the Central Government hereby makes the following regulations to further amend the "Postgraduate Medical Education Regulations, 2000", namely:-

- 1. (i) These Regulations may be called the "Postgraduate Medical Education (Amendment) Regulations, 2010 (Part-II)".
 - (ii) They shall come into force from the date of their publication in the Official Gazette.
- 2. In the "Postgraduate Medical Education Regulations, 2000", the following additions / modifications / deletions / substitutions, shall be as indicated therein:-
- 3. Clause 9 under the heading 'SELECTION OF POSTGRADUATE STUDENTS' shall be substituted as under:-
- "9. Procedure for selection of candidate for Postgraduate courses shall be as follows:
- 7 There shall be a single eligibility cum entrance examination namely 'National Eligibility-cum-Entrance Test for admission to Postgraduate Medical Courses' in each academic year.
- 8 3% seats of the annual sanctioned intake capacity shall be filled up by candidates with locomotory disability of lower limbs between 50% to 70%.

Provided that in case any seat in this 3% quota remains unfilled on account of unavailability of candidates with locomotory disability of lower limbs between 50% to 70% then any such unfilled seat in this 3% quota shall be filled up by persons with locomotory disability of lower limbs between 40% to 50% - before they are included in the annual sanctioned seats for General Category candidates.

Provided further that this entire exercise shall be completed by each medical college/institution as per the statutory time schedule for admissions.

9 In order to be eligible for admission to any postgraduate course in a particular academic year, it shall be necessary for a candidate to obtain minimum of 50% (Fifty Percent) marks in 'National Eligibility-cum-Entrance Test for Postgraduate courses' held for the said academic year. However, in respect of candidates belonging to Scheduled Castes, Scheduled Tribes, Other Backward Classes, the minimum percentage marks shall be 40% (Forty Percent) and in respect of candidates as provided in clause 9 (II)

above with locomotory disability of lower limbs, the minimum percentage marks shall be 45% (Forty Five Percent) in the National Eligibility-cum-Entrance Test:

Provided when sufficient number of candidates in the respective categories fail to secure minimum marks as prescribed in National Eligibility-cum-Entrance Test held for any academic year for admission to Post Graduate Courses, the Central Government in consultation with Medical Council of India may at its discretion lower the minimum marks required for admission to Post Graduate Course for candidates belonging to respective categories and marks so lowered by the Central Government shall be applicable for the said academic year only.

- 10 The reservation of seats in medical colleges/institutions for respective categories shall be as per applicable laws prevailing in States/ Union Territories. An all India merit list as well as State-wise merit list of the eligible candidates shall be prepared on the basis of marks obtained in National Eligibility-cum-Entrance Test and candidates shall be admitted to Post Graduate courses from the said merit lists only.
- 11 No candidate who has failed to obtain the minimum eligibility marks as prescribed in Sub Clause (II) above shall be admitted to any Postgraduate courses in the said academic year.
- 12 In non-Governmental medical colleges/institutions, 50% (Fifty Percent) of the total seats shall be filled by State Government or the Authority appointed by them, and the remaining 50% (Fifty Percent) of the seats shall be filled by the concerned medical colleges/institutions on the basis of the merit list prepared as per the marks obtained in National Eligibility-cum-Entrance Test.

Dr. P. Prasannaraj, Addl. Secy. [ADVT-III/4/100/10/Exty.]

Foot Note: The Principal Regulations namely, "Postgraduate medical Education Regulations, 2000" were published in Part – III, Section (4) of the Gazette of India on the 7th October, 2000, and amended vide MCI notification dated 03.03.2001, 06.10.2001, 16.03.2005, 23.03.2006, 20.10.2008, 25.03.2009, 21.07.2009, 17.11.2009, 09.12.2009 & 16.04.2010.

MEDICAL COUNCIL OF INDIA NOTIFICATION

New Delhi, the 15th February, 2012

No.**MCI-18(1)/2010-Med./62052.**- In exercise of the powers conferred by Section 33 of the Indian Medical Council Act, 1956 (102 of 1956), the Medical Council of India with the previous approval of the Central Government hereby makes the following regulations to further amendthe "Postgraduate Medical Education Regulations, 2000", namely :-

(i) These Regulations may be called the "Postgraduate Medical Education (Amendment) Regulations, 2012 (PartI)".

1.

- (ii) They shall come into force on the date of their publication in the Official Gazette.
- 2. Postgraduate Medical Education (Amendment) Regulations, 2010 (Part II), vide notification No. MCI.18(1)/2010-Med/49070 dated 21st December, 2010 published on 27th December 2010, shall be applicable from the academic year commencing from 2013-2014.
- 3. In the "Postgraduate Medical Education Regulations, 2000", the following additions/modifications/deletions/substitutions, shall be as indicated therein
- 4. Clause 9 sub-cluase III, under the heading "SELECTION OF POSTGRADUATE STUDENTS", as amended vide notification NO. Medical Council of India.18(1)/2010-Med/49070 dated 21st December 2010, following shall be substituted as under:

"In order to be eligible for admission to any postgraduate course in a particular academic year, it shall be necessary for a candidate to obtain minimum of marks at 50th percentile in 'National Eligibility-cum-Entrance Test for Postgraduate courses' held for the said academic year. However, in respect of candidates belonging to Scheduled Castes, Scheduled Tribes, Other Backward Classes, the minimum marks shall be at 40th percentile. In respect of candidates as provided in clause 9(II) above with locomotory disability of lower limbs, the minimum marks shall be at 45th percentile. The percentile shall be determined on the basis of highest marks secured in the All-India common merit list in 'National Eligibility-cum-Entrance Test' for Postgraduate courses:

Provided when sufficient number of candidates in the respective categories fail to secure minimum marks as prescribed in National Eligibility-cum-Entrance Test held for any academic year for admission to Post Graduate Courses, the Central Government in consultation with Medical Council of India may at its discretion lower the minimum marks required for admission to Post Graduate Course for candidates belonging to respective categories and marks so lowered by the Central Government shall be applicable for the said academic year only."

5. Clause 9 under the heading "SELECTION OF POSTGRADUATE

STUDENTS', as amended vide notification No. MCI.18(1)/2010-Med/49070 dated 21st December 2010, following shall be added after sub-clause IV which is as under :-

"Provided that in determining the merit of candidates who are in service of Government/public authority, weightage in the marks may be given by the Government /Competent Authority as an incentive at the rate of 10% of the marks obtained for each year of service in remote and /or difficult areas upto the maximum of 30% of the marks obtained in National Eligibility-cum-Entrance Test, the remote and difficult areas shall be as defined by State Government/Competent authority from time to time."

6. Clause 9 under the heading 'SELECTION OF POSTGRADUATE STUDENTS', as amended vide notification No. MCI.18(1)/2010-Med/49070 dated 21st December 2010, following shall be added after sub-clause VI which is as under :-

"VII. 50% of seats in Post Graduate Diploma Courses shall be reserved for Medical Officers in the Government service, who have served for at least three years in remote and/or difficult areas. After acquiring the PG Diploma, the Medical Officers shall serve for two more years in remote and/or difficult areas as defined by State Government/Competent authority from time to time.

- VIII. The Universities and other authorities concerned shall organize admission process in such a way that teaching in postgraduate courses starts by 2nd May and by 1st August for super speciality courses each year. For this purpose, they shall follow the time schedule indicated in Appendix-III.
- IX. There shall be no admission of students in respect of any academic session beyond 31st May for postgraduate courses and 30th September for super speciality courses under any circumstances. The Universities shall not register any student admitted beyond the said date.
- X. The Medical Council of India may direct, that any student identified as having obtained admission after the last date for closure of admission be discharged from the course of study, or any medical qualification granted to such a student shall not be a recognized qualification for the purpose of the Indian Medical Council Act, 1956. The institution which grants admission to any student after the last date specified for the same shall also be liable to face such action as may be prescribed by MCI including surrender of seats equivalent to the extent of such admission made from its sanctioned intake capacity for the succeeding academic year."

Dr. SANGEETA SHARMA, Secy.

[ADVT.III/4/100/11/Exty.]

Foot Note – The Principal Regulations namely, "Postgraduate Medical Education Regulations, 2000" were published in Part III, Section 4 of the Gazette of India on the 7th October, 2000 and amended vide MCI notification dated 3-3-2001, 6-10-2001, 16-03-2005, 23-03-2006, 20-10-2008, 25-03-2009, 21-7-2009, 17-11-2009, 9-12-2009, 16-4-2010 and 27-12-2010.

Annexure A-3

As per the amendment in Postgraduate Medical Education Regulations, 2000– NEET–PG dated September 2012 "the superintendence, direction and control of National Eligibility-cum-Entrance Test shall vest with the National Board of Examinations under overall supervision of the Ministry of Health & Family Welfare, Government of India".

Annexure B

CURRICULUM (SUBJECT-WISE) AS PER THE GRADUATE MEDICAL EDUCATION REGULATIONS – MEDICAL COUNCIL OF INDIA (WWW.MCIINDIA.ORG)

Pre-clinical subjects - Phase I: In the teaching of these subjects stress shall be laid on basic principles of the subjects with more emphasis on their applied aspects.

(1) HUMANANATOMY

(i) Goal

The broad goal of the teaching of undergraduate students in Anatomy aims at providing comprehensive knowledge of the gross and microscopic structure and development of human body to provide a basis for understanding the clinical correlation of organs or structures involved and the anatomical basis for the disease presentations.

ii) Objectives :

- A) **Knowledge**: At the end of the course the student should be able to
- a. comprehend the normal disposition, clinically relevant interrelationships, functional and cross sectional anatomy of the various structures in the body.
- b. identify the microscopic structure and correlate elementary ultra-structure of various organs and tissues and correlate the structure with the functions as a prerequisite for understanding the altered state in various disease processes.
- c. comprehend the basic structure and connections of the central nervous system to analyse the integrative and regulative functions of the organs and systems. He/She should be able to locate the site of gross lesions according to the deficits encountered.
- d. demonstrate knowledge of the basic principles and sequential development of the organs and systems, recognise the critical stages of development and the effects of common teratogens, genetic mutations and environmental hazards.

He/She should be able to explain the developmental basis of the major variations and abnormalities.

- (B) **Skills**: At the end of the course the student should be able to:
- (a) Identify and locate all the structures of the body and mark the topography of the living anatomy.
- (b) Identify the organs and tissues under the microscope.
- (c) understand the principles of karyotyping and identify the gross congenital anomalies.

- (d) understand principles of newer imaging techniques and interpretation of Computerised Tomography (CT) Scan, Sonogram etc.
- (e) understand clinical basis of some common clinical procedures i.e., intramuscular & intravenous injection, lumbar puncture and kidney biopsy etc.
- (C) **Integration :** From the integrated teaching of other basic sciences, student should be able to comprehend the regulation and integration of the functions of the organs and systems in the body and thus interpret the anatomical basis of disease process.

(2) HUMAN PHYSIOLOGY INCLUDING BIO-PHYSICS

(A) **PHYSIOLOGY**

i) **GOAL:** The broad goal of the teaching of undergraduate students in Physiology aims at providing the student comprehensive knowledge of the normal functions of the organ systems of the body to facilitate an understanding of the physiological basis of health and disease.

ii) **OBJECTIVES**

- a) **KNOWLEDGE**: At the end of the course the student will be able to :
- (1) explain the normal functioning of all the organ systems and their interactions for well coordinated total body function.
- (2) assess the relative contribution of each organ system to the maintenance of the milieu interior.
- (3) elucidate the physiological aspects of normal growth and development.
- (4) describe the physiological response and adaptations to environmental stresses.
- (5) list the physiological principles underlying pathogenesis and treatment of disease.
- b) **SKILLS**: At the end of the course the student should be able to :
- (1) conduct experiments designed for study of physiological phenomena.
- (2) interpret experimental/investigative data.
- (3) distinguish between normal and abnormal data derived as a result of tests which he/she has performed and observed in the laboratory.
- c) **INTEGRATION :** At the end of the integrated teaching the student should acquire an integrated knowledge of organ structure and function and its regulatory mechanisms.
- (B) **BIOPHYSICS**
- (a) GOAL & OBJECTIVES : The broad goal of teaching Biophysics to

undergraduate students is that they should understand basic physical principles involved in the functioning of body organs in normal and diseased conditions.

Total time for teaching Biophysics	=	5 hours
Out of which: 1. Didactic lectures	=	3 hours
2. Tutorial/group discussion	=	1 hour
3. Practical	=	1 hour

- (b) **Topic distribution**
- 1. Lectures :
- (i) Physical principles of transport across cell memberanes and across capillary wall.
- (ii) Biopotentials.
- (iii) Physical principles governing flow of blood in heart and blood vessels. Also physical principles governing flow of air in air passages.
- 2. **Tutorial/group discussion:** On the topic covered in didactic lectures.
- 3. Practical: Demonstration of :
- a. Biopotential on oscilloscope
- b) Electro Encephalogram (EEG)
- c) Electro Myelogram (EMG)
- d) Electro Cardiogram (ECG)
- (3) **BIOCHEMISTRY :** Biochemistry including medical physics and Molecular Biology.
- i) **GOAL**: The broad goal of the teaching of undergraduate students in biochemistry is to make them understand the scientific basis of the life processes at the molecular level and to orient them towards the application of the knowledge acquired in solving clinical problems.
- ii) **OBJECTIVES**
- a) **KNOWLEDGE:** At the end of the course, the student should be able to:
- (1) describe the molecular and functional organization of a cell and list its subcellular components;
- (2) delineate structure, function and inter-relationships of biomolecules and consequences of deviation from normal;
- (3) summarize the fundamental aspects of enzymology and clinical application wherein regulation of enzymatic activity is altered;
- (4) describe digestion and assimilation of nutrients and consequences of malnutrition;
- (5) integrate the various aspects of metabolism and their regulatory pathways;

- (6) explain the biochemical basis of inherited disorders with their associated sequelae;
- (7) describe mechanisms involved in maintenance of body fluid and pH homeostasis;
- (8) outline the molecular mechanisms of gene expression and regulation, the principles of genetic engineering and their application in medicine;
- (9) summarize the molecular concepts of body defence and their application in medicine;
- (10) outline the biochemical basis of environmental health hazards, biochemical basis of cancer and carcinogenesis;
- (11) familiarize with the principles of various conventional and specialized laboratory investigations and instrumentation analysis and interpretation of a given data;
- (12) the ability to suggest experiments to support theoretical concepts and clinical diagnosis.
- b. **SKILLS:** At the end of the course, the student should be able to:
- (1) make use of conventional techniques/instruments to perform biochemical analysis relevant to clinical screening and diagnosis;
- (2) analyze and interpret investigative data;
- (3) demonstrate the skills of solving scientific and clinical problems and decision making;
- c. **INTEGRATION :** The knowledge acquired in biochemistry should help the students to integrate molecular events with structure and function of the human body in health and disease.

(4) INTRODUCTION TO HUMANITIES & COMMUNITY MEDICINE

Including Introduction to the subjects of Demography, Health Economics, Medical Sociology, Hospital Management, Behavioral Sciences inclusive of Psychology.

OBJECTIVES

- a) **KNOWLEDGE**: The student shall be able to :
- 1. explain the principles of sociology including demographic population dynamics;
- 2. identify social factors related to health, disease and disability in the context of urban and rural societies;
- 3. appreciate the impact of urbanization on health and disease;
- 4. observe and interpret the dynamics of community behavior;

- 5. describe the elements of normal psychology and social psychology;
- 6. observe the principles of practice of medicine in hospital and community setting;
- b). **SKILLS**: At the end of the course, the student should be able to make use of:
- 1. Principles of practice of medicine in hospital and community settings and familiarization with elementary nursing practices.
- 2. Art of communication with patients including history taking and medicosocial work.

Teaching of community medicine, should be both theoretical as well as practical. The practical aspects of the training programme should include visits to the health establishments and to the community where health intervention programmes are in operation.

In order to inculcate in the minds of the students the basic concepts of community medicine to be introduced in this phase of training, it is suggested that the detailed curriculum drawn should include at least 30 hours of lectures, demonstrations, seminars etc. together with atleast 15 visits of two hours each.

5. **PARA CLINICAL SUBJECTS OF PHASE II**

1 **PATHOLOGY**:

i) **GOAL**: The broad goal of the teaching of undergraduate student in Pathology is to provide the students with a comprehensive knowledge of the mechanisms and causes of disease, in order to enable him/her to achieve complete understanding of the natural history and clinical manifestations of disease.

ii) **OBJECTIVES**

- a) **KNOWLEDGE**: At the end of the course, the student should be able to :-
- (1) describe the structure and ultrastructure of a sick cell, mechanisms of cell degeneration, cell death and repair and be able to correlate structural and functional alterations.
- (2) explain the pathophysiological processes which govern the maintenance of homeostasis, mechanisms of their disturbance and the morphological and clinical manifestations associated with it.
- (3) describe the mechanisms and patterns to tissue response to injury such that she/he can appreciate the pathophysiology of disease processes and their clinical manifestations.
- (4) correlate normal and altered morphology (gross and microscopic) of different organ systems in common diseases to the extent needed for understanding of disease processes and their clinical significance.

SKILLS: At the end of the course, the student should be able to:-

- (1) describe the rationale and principles of technical procedures of the diagnostic laboratory tests and interpretation of the results;
- (2) perform the simple bed-side tests on blood, urine and other biological fluid samples;
- (3) draw a rational scheme of investigations aimed at diagnosing and managing the cases of common disorders;
- (4) understand biochemical/physiological disturbances that occur as a result of disease in collaboration with pre clinical departments.
- c. **INTEGRATION:** At the end of training he/she should be able to integrate the causes of disease and relationship of different etiological factors (social, economic and environmental) that contribute to the natural history of diseases most prevalent in India.

2. MICROBIOLOGY

 GOAL : The broad goal of the teaching of undergraduate students in Microbiology is to provide an understanding of the natural history of infectious disease in order to deal with the etiology, pathologenesis, laboratory diagnosis, treatment and control of infections in the community.

ii) **OBJECTIVES**

- a. **KNOWLEDGE**: At the end of the course, the student should be able to:
- 1. state the infective micro-organisms of the human body and describe the host parasite relationship.
- 2. list pathogenic micro-organisms (bacteria, viruses, parasites, fungi) and describe the pathogenesis of the diseases produced by them.
- 3. state or indicate the modes of transmission of pathogenic and opportunistic organisms and their sources, including insect vectors responsible for transmission of infection.
- 4. describe the mechanisms of immunity to infections.
- 5. acquire knowledge on suitable antimicrobial agents for treatment of infections and scope of immunotherapy and different vaccines available for prevention of communicable diseases.
- 6. apply methods of disinfection and sterilization to control and prevent hospital and community acquired infections.
- 7. recommend laboratory investigations regarding bacteriological examination of food, water, milk and air.
- (b). **SKILLS**: At the end of the course, the student should be able to:

- (1) plan and interpret laboratory investigations for the diagnosis of infectious diseases and to correlate the clinical manifestations with the etiological agent.
- (2) identify the common infectious agents with the help of laboratory procedures and use antimicrobial sensitivity tests to select suitable antimicrobial agents.
- (3) perform commonly employed bed-side tests for detection of infectious agents such as blood film for malaria, filaria, gram staining and AFB staining and stool sample for ova cyst.
- (4) Use the correct method of collection, storage and transport of clinical material for microbiological investigations.
- c. **INTEGRATION :** The student should understand infectious diseases of national importance in relation to the clinical, therapeutic and preventive aspects.

3. PHARMACOLOGY

- i) **GOAL:** The broad goal of the teaching of undergraduate students in Pharmacology is to inculcate a rational and scientific basis of therapeutics.
- ii) **OBJECTIVES**
- a. **KNOWLEDGE**: At the end of the course, the student should be able to:
- 1. describe the pharmacokinetics and pharmacodynamics of essential and commonly used drugs.
- 2. list the indications, contraindications, interactions and adverse reactions of commonly used drugs.
- 3. indicate the use of appropriate drug in a particular disease with consideration to its cost, efficacy and safety for
- i) individual needs.
- ii) mass therapy under national health program.
- 4. describe the pharmacokinetic basis, clinical presentation, diagnosis and management of common poisonings.
- 5. list the drugs of addiction and recommend the management.
- 6. classify environmental and occupational pollutants and state the management issues.
- 7. indicate causations in prescription of drugs in special medical situations such as pregnancy, lactation, infancy and old age.
- 8. integrate the concept of rational drug therapy in clinical pharmacology.
- 9. state the principles underlying the concept of 'Essential Drugs'

- 10. evaluate the ethics and modalities involved in the development and introduction of new drugs.
- b. **SKILLS**: At the end of the course, the student should be able to:
- 1. prescribe drugs for common ailments.
- 2. recognise adverse reactions and interactions of commonly used drugs.
- 3. observe experiments designed for study of effects of drugs, bioassay and interpretation of the experimental data.
- 4. scan information on common pharmaceutical preparations and critically evaluate drug formulations.
- c. **INTEGRATION**: Practical knowledge of use of drugs in clinical practice will be acquired through integrated teaching with clinical departments and pre clinical departments.

4. FORENSIC MEDICINE INCLUDING TOXICOLOGY

i) GOAL : The broad goal of the teaching of undergraduate students in Forensic Medicine is to produce a physician who is well informed about medicolegal responsibilities in practice of medicine. He/She will also be capable of making observations and inferring conclusions by logical deductions to set enquiries on the right track in criminal matters and connected medicolegal problems.

He/She acquires knowledge of law in relation to medical practice, medical negligence and respect for codes of medical ethics.

- ii) **OBJECTIVES**
- a. **KNOWLEDGE :** At the end of the course, the student should be able to:
- 1. identify the basic medicolegal aspects of hospital and general practice.
- 2. define the medicolegal responsibilities of a general physician while rendering community service either in a rural primary health centre or an urban health centre.
- 3. appreciate the physician's responsibilities in criminal matters and respect for the codes of medical ethics.
- 4. diagnose, manage and identify also legal aspects of common acute and chronic poisonings.
- 5. describe the medicolegal aspects and findings of post-mortem examination in case of death due to common unnatural conditions & poisonings.
- 6. detect occupational and environmental poisoning, prevention and epidemiology of common poisoning and their legal aspects particularly pertaining to Workmen's Compensation Act.

7. describe the general principles of analytical toxicology.

The following has been added in terms of notification published on 15.12.2008 in the Gazette of India and the same is annexed as Annexure V.

- 8. Medical jurisprudence in view of the Consumer Protection Act wherein doctors have been covered under its ambit. They have both rights as well as responsibilities. Under medical insurance acts of negligence covered as well as rights for effective service delivery.
- b) **SKILLS**: At the end of the course, the student should be able to :-
- 1. make observations and logical inferences in order to initiate enquiries in criminal matters and medicolegal problems.
- 2. diagnose and treat common emergencies in poisoning and manage chronic toxicity.
- 3. make observations and interpret findings at postmortem examination.
- 4. observe the principles of medical ethics in the practise of his profession.
- (c) **INTEGRATION** : Department shall provide an integrated approach towards allied disciplines like Pathology, Radiology, Forensic Sciences, Hospital Administration etc. to impart training regarding medicolegal responsibilities of physicians at all levels of health care. Integration with relevant disciplines will provide scientific basis of clinical toxicology e.g. medicine, pharmacology etc.

(5) **COMMUNITY MEDICINE**

- i) **GOAL** : The broad goal of the teaching of undergraduate students in Community Medicine is to prepare them to function as community and first level physicians in accordance with the institutional goals.
- ii) **OBJECTIVES**
- a) **KNOWLEDGE**: At the end of the course, the student should be able to :-
- 1. describe the health care delivery system including rehabilitation of the disabled in the country;
- 2. describe the National Health Programmes with particular emphasis on maternal and child health programmes, family welfare planning and population control.
- 3. list epidemiological methods and describe their application to communicable and non-communicable diseases in the community or hospital situation.
- 4. apply biostatistical methods and techniques;
- 5. outline the demographic pattern of the country and appreciate the roles of the individual, family, community and socio-cultural milieu in health and disease.

- 6. describe the health information systems.
- 7. enunciate the principles and components of primary health care and the national health policies to achieve the goal of 'Health for All'.
- 8. identify the environmental and occupational hazards and their control.
- 9. describe the importance of water and sanitation in human health.
- 10. to understand the principles of health economics, health administration, health education in relation to community.
- b) **SKILLS:** At the end of the course, the student should be able to :-
- 1. use epidemiology as a scientific tool to make rational decisions relevant to community and individual patient intervention.
- 2. collect, analyse, interpret and present simple community and hospital based data.
- 3. diagnose and manage common health problems and emergencies at the individual, family and community levels keeping in mind the existing health care resources and in the context of the prevailing socio-cultural beliefs.
- 4. diagnose and manage maternal and child health problems and advise a couple and the community on the family planning methods available in the context of the national priorities.
- 5. diagnose and manage common nutritional problems at the individual and community level.
- 6. plan, implement and evaluate a health education programme with the skill to use simple audio-visual aids.
- 7. interact with other members of the health care team and participate in the organisation of health care services and implementations of national health programmes.
- c). **INTEGRATION**: Develop capabilities of synthesis between cause of illness in the environment or community and individual health and respond with leadership qualities to institute remedial measures for this.

(1.) CLINICAL SUBJECTS OF PHASE II & PHASE III

The teaching and training in clinical subjects will commence at the beginning of Phase II and continue throughout the clinical subjects will be taught to prepare the MBBS graduates to understand and manage clinical problems at the level of a practitioner. Exposure to subject matter will be limited to orientation and knowledge required of a general doctor. Maximum attention to the diagnosis and management of the most common and important conditions encountered in general practice should be emphasised in all clinical subject areas. Instructions in

clinical subjects should be given both in out patient and in-patient during clinical posting. Each of the clinical departments shall provide integrated teaching calling on pre-clinical, para-clinical and other clinical departments to join in exposing the students to the full range of disciplines relevant to each clinical area of study. Problem approach will be emphasized based on basic social sciences and a continuation of clinical and laboratory syllabi to optimally understand and manage each clinical condition.

The course shall comprise of:

(1) **MEDICINE & ITS ALLIED SPECIALITIES:**

(A) **MEDICINE**:

- i) **GOAL:** The broad goal of the teaching of undergraduate students in Medicine is to have the knowledge, skills and behavioral attributes to function effectively as the first contact physician.
- ii) **OBJECTIVES**
- (a) **KNOWLEDGE :** At the end of the course, the student should be able to:
- (1) diagnose common clinical disorders with special reference to infectious diseases, nutritional disorders, tropical and environmental diseases.
- (2) outline various modes of management including drug therapeutics especially dosage, side effects, toxicity, interactions, indications and contraindications.
- (3) propose diagnostic and investigative procedures and ability to interpret them.
- (4) Provide first level management of acute emergencies promptly and efficiently and decide the timing and level of referral, if required.
- (5) recognize geriatric disorders and their management.
- b. **SKILLS:** At the end of the course, the student should be able to:
- 1. develop clinical skills (history taking, clinical examination and other instruments of examination) to diagnose various common medical disorders and emergencies.
- 2. refer a patient to secondary and/or tertiary level of health care after having instituted primary care.
- 3. perform simple routine investigations like haemogram, stool, urine, sputum and biological fluid examinations.
- 4. assist the common bedside investigative procedures like pleural tap, lumbar puncture, bone marrow aspiration/biopsy and liver biopsy.

c. **INTEGRATION:**

- 1. with community medicine and physical medicine and rehabilitation to have the knowledge and be able to manage important current national health programs, also to be able to view the patient in his/her total physical, social and economic milieu.
- 2. with other relevant academic inputs which provide scientific basis of clinical medicine e.g. anatomy, physiology, biochemistry, microbiology, pathology and pharmacology.

(B) **PEDIATRICS**: Pediatrics including Neonatology

The course includes systematic instructions in growth and development, nutritional needs of a child, immunization schedules and management of common diseases of infancy and childhood, scope of Social Pediatrics and counselling.

i) **GOAL** : The broad goal of the teaching of undergraduate students in Pediatrics is to acquire adequate knowledge and appropriate skills for optimally dealing with major health problems of children to ensure their optimal growth and development.

ii) **OBJECTIVES**

a. **KNOWLEDGE**

At the end of the course, the student should be able to:

- 1. describe the normal growth and development during foetal life, neonatal period, childhood and adolescence and outline deviations thereof.
- 2. describe the common paediatric disorders and emergencies in terms of epidemiology, etiopathogenesis, clinical manifestations, diagnosis, rational therapy and rehabilitation.
- 3. state age related requirements of calories, nutrients, fluids, drugs etc. in health and disease.
- 4. describe preventive strategies for common infectious disorders, malnutrition, genetic and metabolic disorders, poisonings, accidents and child abuse.
- 5. outline national programmes relating to child health including immunisation programmes.
- b. **SKILLS**: At the end of the course, the student should be able to:
- 1. take a detailed pediatric history, conduct an appropriate physical examination of children including neonates, make clinical diagnosis, conduct common bedside investigative procedures, interpret common laboratory investigation results and plan and institute therapy.

- 2. take anthropometric measurements, resuscitate newborn infants at birth, prepare oral rehydration solution, perform tuberculin test, administer vaccines available under current national programs, perform venesection, start an intravenous saline and provide nasogastric feeding.
- 3. conduct diagnostic procedures such as lumbar puncture, liver and kidney biopsy, bone marrow aspiration, pleural tap and ascitic tap.
- 4. distinguish between normal newborn babies and those requiring special care and institute early care to all new born babies including care of preterm and low birth weight babies, provide correct guidance and counselling in breast feeding.
- 5. provide ambulatory care to all sick children, identify indications for specialized/ inpatient care and ensure timely referral of those who require hospitalization.
- (c). **INTEGRATION** : The training in pediatrics should prepare the student to deliver preventive, promotive, curative and rehabilitative services for care of children both in the community and at hospital as part of a team in an integrated form with other disciplines, e.g. Anatomy, Physiology, Biochemistry, Microbiology, Pathology, Pharmacology, Forensic Medicine, Community Medicine and Physical Medicine and Rehabilitation.

(C) **PSYCHIATRY**

- i) **GOAL**: The aim of teaching the undergraduate student in psychiatry is to impart such knowledge and skills that may enable him to diagnose and treat common psychiatric disorders, handle psychiatric emergencies and to refer complications /unusual manifestations of common disorders and rare psychiatric disorders to the specialist.
- ii) **OBJECTIVES**
- a. **KNOWLEDGE** : At the end of the course, the student should be able to:
- 1. comprehend nature and development of different aspects of normal human Behaviour like learning, memory, motivation, personality and intelligence;
- 2. recognize differences between normal and abnormal behaviour;
- 3. classify psychiatric disorders;
- 4. recognize clinical manifestations of the following common syndromes and plan their appropriate management of organic psychosis, functional psychosis, schizo-phrenia, affective disorders, neurotic disorders, personality disorders, psycho-physiological disorders, drug and alcohol dependence, psychiatric disorders of childhood and adolescence;

- (5) describe rational use of different modes of therapy in psychiatric disorders.
- b. **SKILLS:** The student should be able to:
- 1. interview the patient and understand different methods of communications in patient-doctor relationship;
- 2. elicit detailed psychiatric case history and conduct clinical examination for assessment of mental status;
- 3. define, elicit and interpret psycho-pathological symptoms and signs.
- 4. diagnose and manage common psychiatric disorders;
- 5. identify and manage psychological reactions and psychiatric dis-orderes in medical and surgical patients in clinical practice and in community setting.
- c. **INTEGRATION:** Training in Psychiatry should prepare the students to deliver preventive, promotive, curative and re-habilitative services for the care of patients both in the family and community and to refer advance cases to a pecialised Psychiatry/Mental Hospital. Training should be integrated with the departments of Medicine, Neuro Anatomy, Behavioral Sciences and Forensic medicine.

D DERMATOLOGY AND SEXUALLY TRANSMITTED DISEASES

- GOAL: The aim of teaching the undergraduate student in Dermatology, S.T.D. and Leprology is to impart such knowledge and skills that may enable him to diagnose and treat common ailments and to refer rare diseases or complications/unusual manifestations of common diseases, to the specialist.
- ii) **OBJECTIVES**:
- a. **KNOWLEDGE** : At the end of the course of Dermato -S.T.D. and Leprology, the student Shall be able to:
- 1. demonstrate sound knowledge of common diseases, their clinical manifestations, including emergent situations and of investigative procedures to confirm their diagnosis:
- 2. demonstrate comprehensive knowledge of various modes of therapy used in treatment of respiratory diseases;
- 3. describe the mode of action of commonly used drugs, their doses, side effects /toxicity, indications and contra-indications and interactions;
- 4. describe commonly used modes of management including the medical and surgical procedures available for the treatment of various diseases

and to offer a comprehensive plan of management for a given disorder;

- b. **SKILLS:** The student should be able to:
- 1. interview the patient, elicit relevant and correct information and describe the history in a chronological order.
- 2. conduct clinical examination, elicit and interpret physical findings and diagnose common disorders and emergencies;
- 3. perform simple, routine investigative and office procedures required for making the bed-side diagnosis, especially the examination of scrapings for fungus, preparation of slit smears and staining for AFB for leprosy patients and for STD cases;
- 4. take a skin biopsy for diagnostic purposes;
- 5. manage common diseases recognizing the need for referral for specialized care, in case of inappropriateness of therapeutic response;
- 6. assist in the performance of common procedures, like laryngoscopic examination, pleural aspiration, respiratory physiotherapy, laryngeal intubation and pneumo-thoracic drainage/aspiration.
- c. **INTEGRATION:** The broad goal of effective teaching can be obtained through integration with departments of Medicine, Surgery, Microbiology, Pathology, Pharmacology and Preventive & Social Medicine.

(2) SURGERY & ITS ALLIED SPECIALITIES

- (A) **SURGERY** including Paediatric Surgery:
- i) **GOAL:** The broad goal of the teaching of undergraduate students in Surgery is to produce graduates capable of delivering efficient first contact surgical care.
- ii) **OBJECTIVES**:
- a. **KNOWLEDGE**: At the end of the course, the student should be able to:
- 1. describe aetiology, pathophysiology, principles of diagnosis and management of common surgical problems including emergencies, in adults and children.
- 2. define indications and methods for fluid and electrolyte replacement therapy including blood transfusion.
- 3. define asepsis, disinfection and sterilization and recommended judicious use of antibiotics.
- 4. describe common malignancies in the country and their management including prevention.
- 5. enumerate different types of anaesthetic agents, their indications, mode of administration, contraindications and side effects.
- b. **SKILLS:** At the end of the course, the student should be able to:
- 1. diagnose common surgical conditions both acute and chronic, in adult and children.
- 2. plan various laboratory tests for surgical conditions and interpret the results.
- 3. identify and manage patients of hemorrhagic, septicaemic and other types of shock.
- 4. be able to maintain patent air-way and resuscitate
- i) a critically injured patient
- ii) patient with cardio-respiratory failure
- iii) a drowning case
- 5. monitor patients of head, chest, spinal and abdominal injuries, both in adults and children.
- 6. provide primary care for a patient of burns.
- 7. acquire principles of operative surgery, including pre-operative, operative and post operative care and monitoring.
- 8. treat open wounds including preventive measures against tetanus and gas gangrene.
- 9. diagnose neonatal and pediatric surgical emergencies and provide sound primary care before referring the patient to secondary/tertiary centres.
- 10. identify congenital anomalies and refer them for appropriate management.

In addition to these he should have observed/assisted/performed the following:

- 1. Incision and drainage of abscess
- 2. Debridement and suturing open wound
- 3. Venesection
- 4. Excision of simple cyst and tumours
- 5. Biopsy of surface malignancy
- 6. Catheterisation and nasogastric intubation
- 7. Circumcision
- 8. Meatotomy
- 9. Vasectomy
- 10. Peritoneal and pleural aspirations
- 11. Diagnostic proctoscopy
- 12. Hydrocele operation
- 13. Endotracheal intubation
- 14. Tracheostomy and cricothyreidotomy
- 15. Chest tube insertion

(c). **INTEGRATION:** The undergraduate teaching in surgery should be integrated at various stages with different pre and para and other clinical departments.

B. ORTHOPEDICS:

- a. **KNOWLEDGE:** The student should be able to:
- 1. explain the principles of recognition of bone injuries and dislocation.
- 2. apply suitable methods to detect and manage common infections of bones and joints.
- 3. identify congenital, skeletal anomalies and their referral for appropriate correction or rehabilitation.
- 4. recognize metabolic bone diseases as seen in this country.
- 5. explain etiogenesis, manifestations, diagnosis of neoplasm affecting bones.
- b. **SKILLS**: At the end of the course, the student should be able to:
- 1. Detect sprains and deliver first aid measures for common fractures and sprains and manage uncomplicated fractures of clavicle, Colles's, forearm, phallanges etc.
- 2. Techniques of splinting, plaster, immobilization etc.
- 3. Management of common bone infections, learn indications for sequestration, amputations and corrective measures for bone deformities.
- 4. Aspects of rehabilitation for Polio, Cerebral Palsy and Amputation.
- c. **APPLICATION:** Be able to perform certain orthopedic skills, provide sound advise of skeletal and related conditions at primary or secondary health care level.
- d. **INTEGRATION:** Integration with anatomy, surgery, pathology, rediology and Forensic

Medicine be done.

C. RADIO-DIAGNOSIS AND RADIOTHERAPY

A **RADIODIAGNOSIS & IMAGING**:

i) GOAL: The broad goal of teaching the undergraduate medical students in the field of Radio-diagnosis should be aimed at making the students realise the basic need of various radio-diagnostic tools in medical practice. They should be aware of the techniques required to be undertaken in different situations for the diagnosis of various ailments as well as during prognostic estimations.

ii) **OBJECTIVES**

- a. **KNOWLEDGE:** The student should be able to:
- 1. understand basics of X-ray production, its uses and hazards.
- 2. appreciate and diagnose changes in bones like fractures, infections, tumours and metabolic bone diseases.
- 3. identify and diagnose various radiological changes in disease conditions of chest and mediastinum, skeletal system, G.I. Tract, Hepatobiliary system and G.U. system.
- 4. learn about various imaging techniques, including isotopes C.T., Ultrasound, M.R.I. and D.S.A.
- b. **SKILL** : At the end of the course the student should be able to:
- 1. use basic protective techniques during various imaging procedures.
- 2. Interpret common X-ray, radio-diagnostic techniques in various community situations.
- 3. advise appropriate diagnostic procedures in specialized circumstances to appropriate specialists.

B RADIOTHERAPY

i) **GOAL:** The broad goal of teaching the undergraduate medical students in the field of Radiotherapy is to make the students understand the magnitude of the ever-increasing cancer problem in the country. The students must be made aware about steps required for the prevention and possible cure of this dreaded condition.

ii) **OBJECTIVES**

- a. **KNOWLEDGE:** The students should be able to:
- 1. identify symptoms and signs of various cancers and their steps of investigations and management.
- 2. explain the effect of radiation therapy on human beings and the basic principles involved in it.
- 3. know about radio-active isotopes and their physical properties
- 4. be aware of the advances made in radiotherapy in cancer management and knowledge of various radio therapeutic equipment while treating a patient.
- b. **SKILL** : At the completion of the training programme, the student should be able to:
- 1. take a detailed clinical history of the case suspected of having a malignant disease.

2. assist various specialists in administration of anticancer drugs and in application and use of various radiotherapeutic equipment, while treating a patient.

(3) **OTO-RHINO-LARYNGOLOGY**

i) GOAL: The broad goal of the teaching of undergraduate students in Otorhinolaryngology is that the undergraduate student have acquired adequate knowledge and skills for optimally dealing with common disorders and emergencies and principles of rehabilitation of the impaired hearing.

ii) **OBJECTIVES**

- a. **KNOWLEDGE** At the end of the course, the student should be able to:
- 1. describe the basic pathophysiology of common ENT diseases and emergencies.
- 2. adopt the rational use of commonly used drugs, keeping in mind their adverse reactions.
- 3. suggest common investigative procedures and their interpretation.
- b. **SKILLS**: At the end of the course, the student should be able to:
- 1. examine and diagnose common ENT problems including the pre-malignant and malignant disorders of the head and neck.
- 2. manage ENT problems at the first level of care and be able to refer whenever necessary.
- 3. Assist/carry out minor surgical procedures like ear syringing, ear dressings, nasal packing etc.
- 4. assist in certain procedures such as tracheostomy, endoscopies and removal of foreign bodies.
- c. **INTEGRATION:** The undergraduate training in ENT will provide an integrated approach towards other disciplines especially neurosciences, ophthalmology and general surgery.

(4.) **OPHTHALMOLOGY**

i) **GOAL:** The broad goal of the teaching of students in ophthalmology is to provide such knowledge and skills to the students that shall enable him to practice as a clinical and as a primary eye care physician and also to function effectively as a community health leader to assist in the implementation of National Programme for the prevention of blindness and rehabilitation of the visually impaired.

ii) OBJECTIVES

a. **KNOWLEDGE :** At the end of the course, the student should have knowledge of:

- 1. common problems affecting the eye:
- 2. principles of management of major ophthalmic emergencies
- 3. main systemic diseases affecting the eye
- effects of local and systemic diseases on patient's vision and the necessary action required to minimise the sequalae of such diseases;
- 5. adverse drug reactions with special reference to ophthalmic manifestations;
- 6. magnitude of blindness in India and its main causes;
- 7. national programme of control of blindness and its implementation at various levels
- 8. eye care education for prevention of eye problems
- 9. role of primary health centre in organization of eye camps
- 10. organization of primary health care and the functioning of the ophthalmic assistant.
- 11. integration of the national programme for control of blindness with the other national health programmes;
- 12. eye bank organization
- b. **SKILLS:** At the end of the course, the student should be able to:
- 1. elicit a history pertinent to general health and ocular status;
- 2. assist in diagnostic procedures such as visual acuity testing, examination of eye, Schiotz tonometry, Staining for Corneal pathology, confrontation perimetry, Subjective refraction including correction of presbyopia and aphakia, direct ophthalmoscopy and conjunctival smear examination and Cover test.
- 3. diagnose and treat common problems affecting the eye;
- 4. interpret ophthalmic signs in relation to common systemic disorders;
- 5. assist/observe therapeutic procedures such as subconjunctival injection, Corneal/Conjunctival foreign body removal, Carbolic cautery for corneal ulcers, Nasolacrimal duct syringing and tarsorraphy;
- 6. provide first aid in major ophthalmic emergencies;
- 7. assist to organise community surveys for visual check up;
- 8. assist to organise primary eye care service through primary health centres;
- 9. use effective means of communication with the public and individual to motivate for surgery in cataract and for eye donation;
- 10. establish rapport with his seniors, colleagues and paramedical workers, so as to effectively function as a member of the eye care team.

- c. **INTEGRATION :** The undergraduate training in Ophthalmology will provide an integrated approach towards other disciplines especially neurosciences, Otorhino-laryngology, General Surgery and Medicine.
- (5.) **OBSTETRICS AND GYNAECOLOGY :** Obstetrics and Gynaecology to include family welfare and family planning.
- i) **GOAL:** The broad goal of the teaching of undergraduate students in Obstetrics and Gynaecology is that he/she should acquire understanding of anatomy, physiology and pathophysiology of the reproductive system and gain the ability to optimally manage common conditions affecting it.

ii) **OBJECTIVES**

- a. **KNOWLEDGE**: At the end of the course, the student should be able to:
- 1. Outline the anatomy, physiology and pathophysiology of the reproductive system and the common conditions affecting it.
- 2. detect normal pregnancy, labour puerperium and manage the problems he/she is likely to encounter therein.
- 3. list the leading causes of maternal and perinatal morbidity and mortality.
- 4. understand the principles of contraception and various techniques employed, methods of medical termination of pregnancy, sterilisation and their complications.
- 5. identify the use, abuse and side effects of drugs in pregnancy, remenopausal and post-menopausal periods.
- 6. describe the national programme of maternal and child health and family welfare and their implementation at various levels.
- 7. identify common gynaecological diseases and describe principles of their management.
- 8. state the indications, techniques and complications of surgeries like Caesarian section, laparotomy, abdominal and vaginal hysterectomy, Fothergill's operation and vacuum aspiration for M.T.P.
- b. **SKILLS**: At the end of the course, the student should be able to:
- 1. examine a pregnant woman; recognise high risk pregnancies and make appropriate referrals.
- 2. conduct a normal delivery, recognise complications and provide postnatal care.
- 3. resuscitate the newborn and recognise congenital anomalies.
- 4. advise a couple on the use of various available contraceptive

devices and assist in insertion in and removal of intra-uterine contraceptive devices.

- 5. perform pelvic examination, diagnose and manage common gynaecological problems including early detection of genital malignancies.
- 6. make a vaginal cytological smear, perform a post coital test and wet vaginal smear examination for Trichomonas vaginalis, moniliasis and gram stain for gonorrhoea.
- 7. interpretation of data of investigations like biochemical, histopathological, radiological, ultrasound etc.
- c. **INTEGRATION:** The student should be able to integrate clinical skills with other disciplines and bring about coordinations of family welfare programmes for the national goal of population control.

d. GENERAL GUIDELINES FOR TRAINING:

- 1. attendance of a maternity hospital or the maternity wards of a general hospital including :
- (i) antenatal care
- (ii) the management of the puerperium and
- (iii) a minimum period of 5 months in-patient and out-patient training including family planning.
- 2. of this period of clinical instruction, not less than one month shall be spent as a resident pupil in a maternity ward of a general hospital.
- 3. during this period, the student shall conduct at least 10 cases of labour under adequate supervision and assist in 10 other cases.
- 4. a certificate showing the number of cases of labour attended by the student in the maternity hospital and/or patient homes respectively, should be signed by a responsible medical officer on the staff of the hospital and should state:
- A) that the student has been present during the course of labour and personally conducted each case, making the necessary abdominal and other examinations under the supervision of the certifying officer who should describe his official position.
- B) that satisfactory written histories of the cases conducted including wherever possible antenatal and postnatal observations, were presented by the student and initialed by the supervising officer.
- (6.) **FAMILY PLANNING:** Training in Family Planning should be emphasized in all the three phases and during internship as per guideline provided in Appendix A.

(7.) **COMMUNITY MEDICINE :** The teaching and training of community medicine will continue during the first two semesters of phase III (clinical Phase). The goals, objectives and skills to be acquired by the student has already been outlived in Phase II (Para Clinical Phase).

(8.) **EMERGENCY MEDICINE**

Annexure C

List of MD/MS/PG Diploma specialties in which courses are available

This is the extract from the MCI website. This list is purely provisional, for final and confirmed list kindly refer to MCI website www.mciindia.org or website of Medical Counseling Committee <u>www.mcc.nic.in</u>

SI. No.	Subject	Code No.
1	MS Anatomy	ANAT
2	MD Anaesthesiology	ASTH
3	MD Biochemistry	BIOC
4	MD Biophysics	BIOP
5	MD Dermatology	DERM
6	MD Forensic Medicine	FMED
7	MD General Medicine	GMED
8	MD Obst. & Gynae	OBGY
9	MD Venerology	VENE
10	MS E.N.T.	EN-T
11	MD Microbiology	MICR
12	MD Midwifery	MIWF
13	MD Physical Medicine & Rehabilitation	PM-R
14	MS General Surgery	GSUR
15	MS Ophthalmology	OPTH
16	MS Orthopaedics	ORTH
17	MD Paediatrics	PAED
18	MD Pathology	PATH
19	MD Pharmacology	PHAR
20	MD Physiology	PHYS
21	MD Preventive and Social Medicine	P-SM
22	MD Psychiatry	PSYY
23	MD Radio Diagnosis	RADD
24	MD Radio Therapy	RADT
25	MD Skin & Veneral Diseases	SKVD
26	MD TB & Respiratory Diseases	TBRD
27	MD Dermatology; Venereology & Leprosy	DV-L
28	MD Community Health Administration	CH-A

MD/MS/DIPLOMA Courses for which seats may be available

SI. No.	Subject	Code No.
29	MD Tropical Medicine	TMED
30	MD Transfusion Medicine	T-FM
31	Dip. Anaesthesiology	D-AN
32	Dip. Bacteriology	DBCT
33	Dip. Child Health	D-CH
34	Dip. Community Medicine	D-CM
35	Dip. Clinical Pathology	D-CP
36	Dip. Dermatology	DDER
37	Dip. Diabetology	DDIB
38	Dip. Forensic Medicine	D-FM
39	Dip. Obstetrics and Gynaecology	D-GO
40	Dip. Haematology and Blood Transfusion	DHBT
41	Dip. Health Administration	DHEA
42	Dip. Hospital Administration	DHOA
43	Dip. Immunology and Blood Transfusion	DIBT
44	Dip. Industrial Hygiene	DINH
45	Dip. Leprosy	DLEP
46	Dip. Otorhinolaryngology	D-LO
47	Dip. Medical Radio Diagnosis	DMRD
48	Dip. Medical Radiology and Electrology	DMRE
49	Dip. Medical Radiotherapy	DMRT
50	Dip. Ophthalmic Medicine and Surgery	DOMS
51	Dip. Ophthalmology	D-OP
52	Dip. Orthopaedics	DORT
53	Dip. Public Health	D-PH
54	Dip. Physical Medicine	D-PM
55	Dip. Physical Medicine and Rehabilitation	DPMR
56	Dip. Psychological Medicine	DPSY
57	Dip. Radiation Medicine	D-RM
58	Dip. T.B. & Chest Diseases	DTCD
59	Dip. Tropical Medicine and Hygiene	DTMH
60	Dip. Venerelogy and Dermatology	D-VD
61	Dip. Veneral Dieseases and Leprosy	DVDL
62	Dip. Venereology	DVEN

Annexure D

Proforma for Other Backward Class (OBC) Certificate

(CERTIFICATE TO BE PRODUCED BY OTHER BACKWARD CLASSES APPLYING FOR ADMISSION TO CENTRAL EDUCATIONAL INSTITUTIONS (CEIs), UNDER THE GOVERNMENT OF INDIA)

This is to certify that Shri/Smt./Kum.	Son/Daughter of
Shri/Smt.	Of Village/Town
Distric/Division	in the
State belongs to the	

Community which is recognized as a Backward class under:

- (i) Resolution No. 12011/68/93-BCC(C) dated 10/09/93 published in the Gazette of India Extraordinary part I Section I No. 186 dated 13/09/93.
- (ii) Resolution No. 12011/9/94-BCC dated 19/1 0/94published in the Gazette of India Extraordinary part I Section I No. 163 dated 20/10/94.
- (iii) Resolution No. 12011/7/95-BCC dated 24/05/95 published in the Gazette of India Extraordinary part I Section I No. 88 dated 25/05/95.
- (iv) Resolution No. 12011/96/94-BCC dated 09/03/96.
- (v) Resolution No. 12011/44/96-BCC dated 06/12/96 published in the Gazette of India Extraordinary part I Section I No. 210 dated 11/12/96.
- (vi) Resolution No. 12011/13/97-BCC dated 03/12/97.
- (vii) Resolution No. 12011/99/94-BCC dated 11/12/97.
- (viii) Resolution No. 12011/68/98-BCC dated 27/10/99.
- (ix) Resolution No. 12011/88/98-BCC dated 06/12/99 published in the Gazette of India Extraordinary Part I Section I No. 270 dated 06/12/99.
- (x) Resolution No. 12011/36/99-BCC dated 04/04/2000 published in the Gazette of India Extraordinary Part I Section I No. 71 dated 04104/2004.
- (xi) Resolution No. 12011/44/99-BCC dated 21/09/2000 published in the Gazette of India Extraordinary Part I Section 1 No. 210 dated 21/09/2000.
- (xii) Resolution No. 12015/09/2000-BCC dated 06/09/2001.
- (xiii) Resolution No. 12011/01/2001-BCC dated 19/06/2003.
- (xiv) Resolution No. 12011/04/2002-BCC dated 13/01/2004.
- (xv) Resolution No. 120 11/09/2004-BCC dated 16/01/2006 published in the Gazette of India Extraordinary Part I Section I No. 210 dated 16/01/2006.

Shri/Smt. /Kum. _____ and/or his family ordinarily reside(s) in the ______ District/Division of State. This is also to certify that he/she does not belong to the persons/sections (Creamy Layer) mentioned in Column 3 of the Scheduled to the Government of India. Department of Personnel & Training O.M. No. 36012/22/93-Estt. (SCT) dated 08/09/93 which is modified vide OM No. 36033/3/2004 Estt. (Res.) dated 09/03/2004 or the latest notification of the Government of India.

Dated:

District Magistrate/Competent Authority

Seal

NOTE:

- (a) The Term ordinarily used here will have the same meaning as in Section 20 of the Representation of the People Act, 1950.
- (b) The authorities competent to issue Caste Certificates are indicated below:
- District Magistrate/Additional Magistrate/Collector/Deputy Commissioner/Additional Deputy Commissioner/ Deputy Collector/1st Class Stipendiary Magistrate/Sub-Divisional Magistrate/Taluka Magistrate/Executive Magistrate/Extra Assistant Commissioner (not below the rank of 1st Class Stipendiary Magistate.)
- (ii) Chief Presidency Magistrate/Additional Chief Presidency Magistrate/Presidency Magistrate.
- (iii) Revenue Officer not below the rank of Tehsildar.
- (iv) Sub-Divisional Officer of the area where the candidate and/or his family resides.
- (c) The annual income/status of the parents of the applicant should be based on financial year ending March 31, 2011.

Annexure D

CERTIFICATE OF LOCOMOTOR DISABILITY (For Admission to Medical Courses in All India Quota)

Vardhman Mahavir Medical College & Safdarjang Hospital, New Delhi-110029 All India Institute of Physical Medicine and Rehabilitation, Hazi Ali, Mumbai-400034 Institute of Post Graduate Medical Education & Research, Kolkata-700020 Madras Medical College, Park Town, Chennai-600003

(select and tick-mark any one of the above)

Dated						
Agedyears Son/daughter of Mr						
Rank Nois suffering From(Name of the Disease) And has Permanent Physical Impairment (PPI) of Left/Right/Both Lower Limb. He/She is Locomotor disabled and has the percentage of(in words)(in figure) of (40%-70%) disability of lower limbs.						
He/she is eligible /NOT eligible for admission in Medical/dental courses as per the MCI/DCI guidelines subject to his being otherwise medically fit.						
	Recent Passport size photograph of the candidate duly attested by the issuing authority					
_Sign. & Name	Sign. & Name					
(Specialist, Deptt. Ortho.)	(Specialist, Deptt. PMR/Ortho)					
	Mr./Ms ears Son/daughter of Mr ffering From ermanent Physical Impairr is Locomotor disabled a (in figure) of (40%-7 digible for admission in Med ect to his being otherwise m					





National Eligibility cum Entrance Test - Post Graduate

NATIONAL BOARD OF EXAMINATIONS

Medical Enclave, Ansari Nagar, Mahatma Gandhi Marg (Ring Road) New Delhi-110029 Phone : 0124-4517187 Website: www.nbe.gov.in/neetpg E-mail: neetpg@nbe.gov.in