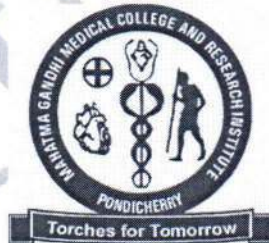




COMPILATION OF PROGRAM OUTCOME & COURSE OUTCOME ANALYSIS (2015-19)

Mahatma Gandhi Medical College & Research Institute



2020

PONDY-CUDDALAORE MAIN ROAD
Puducherry-607 402

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Program outcome and Course outcome analysis

Preamble

Mahatma Gandhi Medical College and Research Institute is one of the affiliated colleges of Sir Balaji Vidyapeeth (SBV). The university has provided the syllabus for various health care courses, where all courses have its own objectives and methodology to achieve the course outcomes.

As medical education is moving from traditional teaching learning process to competency based or outcome-based education, evaluation of the system performance is essential. Quality assurance is a key factor and this requires analysis of Program Outcome (PO) and Course Outcome (CO) mapping. This analysis is an important step in outcome-based education. Besides analysing the mapping, to make it more objective a score need to be obtained for mapping and attainment score need to be calculated for each course and program. All these analyses help to monitor not only the performance of the program but also the individual students. This type of analysis is not routine in health care education. In the absence of any such guideline by Medical Council of India, SBV has adopted the guideline prescribed by NBA to calculate score for mapping and attainment level of PO and CO.

Terminologies

Program educational objective (PEO)

Program Educational Objectives are broad statements that describe what graduates are expected to attain within few years of completing their program. These are based on the needs of the society as analysed and outlined by the regulatory bodies.

Program Outcome (PO):

Program outcomes are statements that describe broad aspects of knowledge, skill and attitude development, and encompass multiple learning experiences. Program consists of multiple courses.

Course Outcomes (CO):

Course outcomes describe the learning that will take place across the curriculum through concise statements, made in specific and measurable terms, of what students will know and/or be able to do as the result of having successfully completed a course.

Mapping of PEO, PO and the CO:

Mapping (program mapping) facilitates the alignment of course-level outcomes with program outcomes. It allows the regulatory bodies to visualise the program layout. It allows faculty to identify the shortfalls in the course for correction. It is also used to explore how students are meeting program-level outcomes at the course level.

Attainment score or level:

Attainment score or level is defined as a measure of a student's achievement in the course which compares every student to a standardised expectation for their level, regardless of individual starting points.

To assess the program outcome, pass percentage of the summative assessment is considered whereas for assessment of the course outcomes the institute uses course wise average marks of students.

(A) Undergraduate

1. Bachelor of Medicine and Bachelor of Surgery (MBBS)

Program Educational Objectives (PEO)

As defined in the MCI document, the roles of the Indian Medical Graduate are being considered as program educational objectives for under graduate program.

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- **PEO 1. Clinician** who understands and provides preventive, promotive, curative, palliative and holistic care with compassion.
- **PEO 2. Leader** and team member who understands health care system and acts to provide safe patient care with accountability and responsibility.
- **PEO 3. Communicator** possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.
- **PEO 4. Lifelong learner** keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher.
- **PEO 5. Professional** who understands and follows the principle of bio-ethics / ethics related to health care system.

Program outcome (PO)

- *At the end of the 5 ½ years of training IMG of MGMCRI should be able to:*
- **PO 1.** Perform the duty of a general physician.
- **PO 2.** Gather a history and perform a physical examination.
- **PO 3.** Prioritize a differential diagnosis following a clinical encounter.
- **PO 4.** Recommend and interpret common diagnostic and screening tests.
- **PO 5.** Enter and discuss orders and prescriptions.
- **PO 6.** Document a clinical encounter in the patient record.
- **PO 7.** Recognize a patient requiring urgent or emergent care and initiate evaluation and management.
- **PO 8.** Collaborate as a member of an inter-professional team.
- **PO 9.** Communicate effectively and appropriately with patient and their families, colleagues, other health care members, and other stake holders in the community.
- **PO 10.** Form clinical questions and retrieve evidence to advance patient care.
- **PO 11.** Give or receive a patient handover to transition care responsibility.
- **PO 12.** Obtain informed consent for tests and/or procedures.
- **PO 13.** Identify system failures and contribute to a culture of safety and improvement.

Course

MBBS program consists of following course. 1st MBBS consists of anatomy, physiology, biochemistry; 2nd MBBS consists of pathology, microbiology, pharmacology and forensic medicine and toxicology; 3rd MBBS is divided in two parts; Part 1 consists of ophthalmology, ENT and community medicine whereas part 2 consists of general medicine, general surgery, obstetrics & gynaecology and paediatrics. Each course has its own well-defined course outcome mentioned in individual course book.

Mapping and analysis of Courses, POs and PEOs

As undergraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course. Then, a correlation is established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' - no correlation, 1 - low correlation, 2 -medium correlation and 3 - high correlation) based on their perception. The average score is calculated and is correlated with the courses as a whole not individually. A 14x5 mapping matrix of Courses-PEOs (**Table. 1**) and 14x13 mapping matrix of Courses-POs (**Table. 2**) is prepared at the institute level in this regard for all courses in the program. Radar graph was plotted to find out the level of correlation between PEO-Course (**Fig. 2**) and PO-Course (**Fig. 3**).

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Course outcome (CO)

Anatomy

ANCO 1. Explain of the gross and microscopic structure of human body.

ANCO 2. Explain the normal regulation and integration of the functions of the organs and systems on basis of the structure of genetic pattern.

ANCO 3. Explain the clinical correlation of the organs and structures involved and Interpret the anatomical basis of the disease presentations.

ANCO 4. Explain the development of various structures of the human body, differentiate abnormal development and interpret the formation of various congenital anomalies.

ANCO 5. Explain the basic principles of Genetics and the basics of Genetic disorders.

ANCO 6. Identify various appearances of the normal human body in skiagrams after routine radiological investigations.

ANCO 7. Outline the internal structures in relation to the external surface of the body.

Biochemistry

BICO 1. Describe structure and function and interrelationship of biomolecules in health and disease

BICO 2. Explain Importance of nutrition in health and disease

BICO 3. Corelate the integration of various aspects of metabolism and its lab diagnosis

BICO 4. Explain the biochemical basis of inherited disorders and their associated consequences

BICO 5. Explain biochemical basis and rationale of clinical laboratory tests for inborn errors of metabolism, and interpret the results.

BICO 6. Explain biochemical basis and rationale of clinical laboratory tests, and interpret these in the clinical context.

BICO 7. Describe the molecular mechanism of gene expression and regulation, principles of genetic engineering and their application in medicine.

BICO 8. Follow good laboratory practice, handle biological tissue and body fluid.

Physiology

PYCO 1. Explain the normal functioning of the organs and organ systems of the body

PYCO 2. Comprehension of the normal structure and organization of the organs and systems on basis of the functions

PYCO 3. Explain the regulatory mechanisms in normal and physiological variations.

PYCO 4. Explain of age-related physiological changes in the organ functions that reflect normal growth and development.

PYCO 5. Explain the physiological basis of diseases.

PYCO 6. Perform system examinations

PYCO 7. Interpret laboratory data pertaining to normal function of organ and organ system.

Microbiology

MICO 1. Explain the role of microbial agents in health and disease

MICO 2. Explain the immunological mechanisms in health and disease

MICO 3. Correlate the natural history, mechanisms and clinical manifestations of infectious diseases as they relate to the properties of microbial agents

MICO 4. Apply the principles and application of infection control measures.

MICO 5. Explain the basis of choice of laboratory diagnostic tests and their interpretation.

MICO 6. Perform and interpret common microbiological test .

MICO 7. Suggest appropriate antimicrobial therapy, control and prevention of common infectious diseases.

MICO 8. Interpret laboratory investigations.

Pharmacology

PHCO 1. Explain essential and commonly used drugs with an understanding of the pharmacologic basis of therapeutics.

PHCO 2. Explain the basic concepts and principles of Pharmacokinetics & Pharmacodynamics

PHCO 3. Explain how these fundamental pharmacological properties can influence route of administration, drug action; drug efficacy and potency; drug levels in the body; potential for drug interactions; drug toxicity; and the appropriate choice of drug for pharmacotherapy in a given patient.

PHCO 4. Select and prescribe medicines based on clinical condition and the pharmacologic properties, efficacy, safety, suitability and cost of medicines for common clinical conditions of national importance.

PHCO 5. Explain pharmacovigilance, essential medicine concept and sources of drug information and industry-doctor relationship,

PHCO 6. Counsel patients regarding appropriate use of prescribed drug and drug delivery systems.

PHCO 7. Explain the process by which new drugs are discovered, developed, tested and finally approved by the Regulatory authority for use.

PHCO 8. Comprehend the fundamental principles of pharmacogenomics .

PHCO 9. Understand the specific pharmacology of the major drugs and drug classes currently used in medical practice including their indications, contraindications, clinical use, mechanisms of action, physiological effects, pharmacokinetic properties, major adverse effects and clinically significant drug interactions

PHCO 10. Explain the principles that underlie the pharmacotherapy of the major diseases and conditions including recognition and use of national organization-approved treatment algorithms.

PHCO 11. Understanding the physiological, pharmacological, and psychological effects of acute and chronic exposure of individuals to drugs of abuse

PHCO 12. Understanding the basic principles of toxicology; the mechanisms by which excess exposure to certain drugs, toxins, chemicals, heavy metals and poisons can lead to adverse toxicological effects; and the basic principles of clinically managing the poisoned patient.

Pathology

PACO 1. Comprehend of the causes of diseases

PACO 2. Comprehend of the evolution of diseases

PACO 3. Comprehend of the mechanisms of diseases

PACO 4. Explain the alterations in gross morphology of organs in disease states

PACO 5. Explain the alterations in cellular morphology of organs in disease states

PACO 6. Correlate the natural history, structural and functional changes with the clinical manifestations of diseases.

PACO 7. Correlate the natural history, structural and functional changes to diagnose a disease

PACO 8. Correlate the natural history, structural and functional changes, which form the basis of management of diseases.

PACO 9. Diagnose a disease with understanding of approach to laboratory diagnosis

PACO 10. Perform basic laboratory tests & to interpret test results of laboratory investigations as they apply to the care of the patient

Forensic Medicine & Toxicology

FMCO 1. Explain Law and Ethics related to clinical practice.

FMCO 2. Explain the principle of Medicolegal autopsy to find out cause and manner of death which leads to justice to the deceased.

FMCO 3. Describe and identify common Forensic pathology and its interpretation during medicolegal autopsy.

FMCO 4. Describe and identify various injuries and its interpretation in wound certificate .

FMCO 5. Elicit the key role of a doctor in branch of Clinical Forensic Medicine.

FMCO 6. Describe and identify nature of various poisons and its medicolegal interpretation/management.

FMCO 7. Explain various conditions related to Intellectual disability disorder and its medicolegal interpretation

FMCO 8. Detect occupational and environmental poisoning, prevention and epidemiology of common poisoning and their legal aspects particularly pertaining to workmen's compensation act.

FMCO 9. Interpret Medical Jurisprudence in view of Consumer Protection Act.

FMCO 10. Explain the principles of Forensic science as a part of Forensic Medicine which helps in solving crime cases.

ENT

ENCO 1. Elicit history and examination related to common otorhinolaryngology and head and neck diseases.

ENCO 2. Recognise, diagnose ,order appropriate investigations and manage common otorhinolaryngology problems in primary care settings.

ENCO 3. Elicit common otorhinolaryngology emergencies , provide initial care and refer timely.

ENCO 4. Interpret radiological investigations for common otorhinolaryngology and head and neck diseases .

ENCO 5. Recognise hearing impairment and refer for appropriate hearing rehabilitation program

ENCO 6. Perform a minor otorhinolaryngology procedures with documentation.

ENCO 7. Educate and counsel regarding noise pollution, congenital disorders, need for neonatal hearing screening.

Ophthalmology

OPCO 1. Explain common eye problems in the community.

OPCO 2. Elicit history , examination advise appropriate investigation to diagnose and manage common eye problems.

OPCO 3. Recognize and document ophthalmic emergencies and timely referral.

OPCO 4. Participate in national programmes applicable in the primary care setting.

OPCO 5. Perform minor ophthalmic procedures.

OPCO 6. Communicate and counsel patients with common ophthalmic problem.

Community Medicine

CMCO 1. Understand physical, social, psychological, economic and environmental determinants of health and disease.

CMCO 2. Recognize and manage common health problems including physical, emotional and Social aspects at individual, family and community level in the context of National Health Programs.

CMCO 3. Implement and monitor National Health Programs in the primary care setting.

CMCO 4. Explain knowledge of maternal and child wellness as they apply to national health care priorities and Programs.

CMCO 5. Elicit health issues and apply program activities regarding vulnerable groups appropriately (school children, adolescents, geriatrics population etc).

CMCO 6. Recognize, investigate, report, plan and manage common community health problems and emergencies.

CMCO 7. Explain descriptive epidemiology i.e characterize the health of a community (community diagnosis) which has influence on health.

CMCO 8. Perform nutritional status assessment of individual and family and develop the plan to implement nutritional interventions.

CMCO 9. Explain the principle of biomedical waste management.

CMCO 10. Perform the basic biostatistics and analyse common national epidemiological data.

General Surgery

GSCO 1. Explain of the structural and functional basis, principles of diagnosis and management of common surgical problems in adults and children,

GSCO 2. Select, calculate and administer appropriate intravenous fluids, electrolytes, blood and blood products based on the clinical condition.

GSCO 3. Apply the principles of asepsis, sterilization, disinfection, rational use of prophylaxis, therapeutic utilities of antibiotics and universal precautions in surgical practice.

GSCO 4. Explain common malignancies in India and their prevention, early detection and therapy,

GSCO 5. Perform common diagnostic and surgical procedures at the primary care level,

GSCO 6. Recognize, resuscitate, stabilize and provide Basic & Advanced Life Support to patients following trauma,

GSCO 7. Administer informed consent and counsel patient prior to surgical procedures,

GSCO 8. Commitment to advancement of quality and patient safety in surgical practice.

General Medicine

GMCO 1. Explain of the patho-physiologic basis, epidemiological profile, signs and symptoms of disease and their investigation and management,

GMCO 2. Interview and examine an adult patient and make a clinical diagnosis.

GMCO 3. Appropriately order and interpret laboratory tests.

GMCO 4. Initiate appropriate cost-effective treatment based on an understanding of the rational drug prescriptions, medical interventions required and preventive measures.

GMCO 5. Follow up of patients with medical problems and refer whenever required.

GMCO 6. Communicate effectively, educate and counsel the patient and family.

GMCO 7. Manage common medical emergencies and refer when required.

GMCO 8. Perform common medical procedures safely and understand patient safety issues.

Obstetrics & Gynaecology

OGCO 1 Conduct normal deliveries, using safe delivery practices in the primary and secondary care settings.

OGCO 2. Provide peri-conceptional counselling and antenatal care.

OGCO 3. Elicit history related to antenatal case, Perform serial obstetrics examination and analysis of findings.

OGCO 4. Identify high-risk pregnancies and refer appropriately.

OGCO 5. Prescribe drugs safely and appropriately in pregnancy and lactation.

OGCO 6. Diagnose complications of labor, institute primary care and refer in a timely manner.

OGCO 7. Perform early neonatal resuscitation.

OGCO 8. Provide postnatal care, including education in breast-feeding.

OGCO 9. Counsel and support couples in the correct choice of contraception.

OGCO 10. Interpret test results of laboratory and radiological investigations as they apply to the care of the obstetric patient.

OGCO 11. Interpret test results of laboratory and radiological investigations as they apply to the care of the gynaecology patient.

OGCO 12. Apply medico-legal principles as they apply to tubectomy, Medical Termination of Pregnancy (MTP), Pre-conception and Prenatal Diagnostic Techniques (PC PNDT Act) and other related Act and perform accordingly.

OGCO 13. Elicit a gynecologic history, perform appropriate physical and pelvic examinations and PAP smear in the primary care setting.

OGCO 14. Recognize, diagnose and manage common reproductive tract infections in the primary care setting,

OGCO 15. Recognize and diagnose common genital cancers and refer them appropriately.

OGCO 16. Elicit common post procedural complications and seek appropriate opinion

OGCO 17. Follow universal precaution , handle biological tissue and body fluid.

Paediatrics

PECO 1. Assess and promote optimal growth, development and nutrition of children and adolescents and identify deviations from normal.

PECO 2. Recognize and provide emergency and routine ambulatory and First Level Referral Unit care for neonates, infants, children and adolescents and refer as may be appropriate.

PECO 3. Perform procedures as indicated for children of all ages in the primary care setting.

PECO 4. Recognize children with special needs and refer appropriately.

PECO 5. Promote health and prevent diseases in children.

PECO 6. Participate in National Programmes related to child health and in conformation with the Integrated Management of Neonatal and Childhood Illnesses (IMNCI) Strategy.

PECO 7. Communicate appropriately and effectively with parents and child

Table 1. PEO-Course Mapping matrix

Sl. No.	Course	PEO1	PEO2	PEO3	PEO5	PEO5
1	Anatomy (AN)	3	0	0	2	1
2	Biochemistry(BI)	3	0	0	2	1
3	Physiology(PY)	3	0	0	2	1
4	Microbiology(MI)	3	2	2	3	2
5	Pathology(PA)	3	2	2	3	2
6	Pharmacology(PH)	3	2	2	3	2
7	FMT(FM)	3	0	2	3	2
8	Ophthalmology(OP)	3	3	3	3	3
9	ENT(EN)	3	3	3	3	3
10	Com. Medicine(CM)	3	3	3	3	3
11	G. Medicine (GM)	3	3	3	3	3
12	General Surgery(GS)	3	3	3	3	3
13	Obs. & Gyn(OG)	3	3	3	3	3
14	Paediatrics (PE)	3	3	3	3	3
	Average Score	3	1.93	2.07	2.79	2.29

(0 - no correlation; 1 - low correlation; 2 - medium correlation; 3 - high correlation)

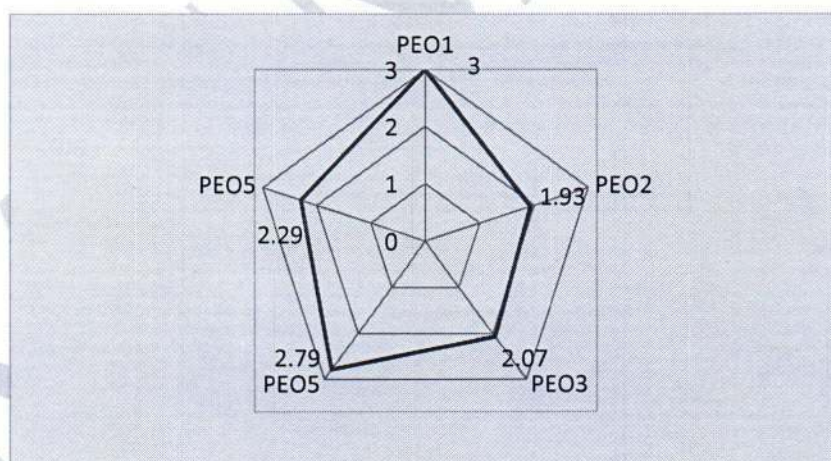


Figure 2. Mapping of PEO and Course

(0 - no correlation; 1 - low correlation; 2 - medium correlation; 3 - high correlation)

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Table 2. PO- Course Mapping matrix

Sl. No.	Course	PO1	PO2	PO3	PO4	PO5	PO6	PO7	PO8	PO9	PO1 0	PO1 1	PO1 2	PO1 3
1	AN	3	2	1	1	1	0	0	1	1	0	0	1	0
2	BI	3	2	1	1	0	0	2	1	0	2	0	0	2
3	PY	3	2	1	1	2	2	2	1	1	1	0	1	1
4	MI	3	0	3	3	1	1	1	2	2	2	2	3	2
5	PA	3	2	3	3	1	1	1	2	2	2	0	3	2
6	PH	3	2	0	0	0	0	0	0	0	0	2	0	2
7	FM	3	2	2	0	0	2	0	2	1	0	0	3	0
8	OP	3	3	3	3	3	3	3	3	3	3	3	3	3
9	EN	3	3	3	3	3	3	3	3	3	3	3	3	3
10	CM	3	3	2	2	2	3	3	3	3	0	0	2	3
11	GM	3	3	3	3	3	3	3	3	3	3	3	3	3
12	GS	3	3	3	3	2	3	3	3	3	3	3	3	3
13	OG	3	3	3	3	3	3	3	3	3	3	3	3	3
14	PE	3	3	3	3	3	3	3	3	3	3	3	3	3
Average Score	3	2.35	2.21	2.07	2.71	1.93	1.93	1.93	2.14	2.00	1.78	1.57	2.21	2.14

(0 - no correlation; 1 - low correlation; 2 - medium correlation; 3 - high correlation)

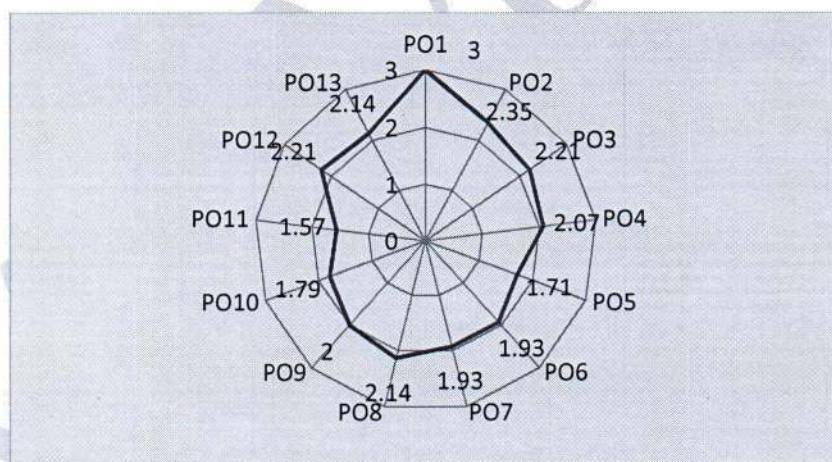


Figure 3. Mapping of Program outcome & Course

(0 - no correlation; 1 - low correlation; 2 - medium correlation; 3 - high correlation)

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Analysis of Courses, POs and PEOs

On analysing, the average score of individual program outcome 2.08, with a range from 1.57 to 3. It shows, there exist a strong correlation of all Courses with that of PO1, whereas medium correlation between Courses and PO2 to PO 13. Similarly, on analysing, the average score of individual program educational objective is 2.42 with range from 1.93 to 3. It shows there exist a strong correlation of all Courses with that of PEO1, whereas medium correlation between Courses and PEO 2 to PEO 5.

Program Attainment level

Attainment level of program is based on the pass percentage of the course in each subject. As per SBV pass criteria 50% is the minimum marks to declare the student pass. Accordingly (Table 3)

- Attainment Level 1: 60% of students score more than 50% marks out of the maximum relevant marks.
- Attainment Level 2: 70% of students score more than 50% marks out of the maximum relevant marks.
- Attainment Level 3: 80% of students score more than 50% marks out of the maximum relevant marks.

Table 3. Program attainment level

	AN	PY	BI	PA	MI	PH	FM	CM	OP	EN	GM	GS	OG	PE	Attain level
2015	87	84	86	89	98	99	97	99	93	90	90	95	95	99	3
2016	73	77	74	80	73	83	88	93	94	92	74	79	94	88	3
2017	97	99	99	92	90	90	91	90	90	93	86	83	86	89	3
2018	93	93	95	91	93	99	97	86	90	95	78	75	91	81	3
2019	88	91	90	83	88	99	83	90	84	89	78	78	85	94	3

Program Attainment score

To obtain attainment score for POs, we have considered the pass percentage of each course of a year for 5 years. Based on this pass percentage, a graded score is allotted (1-50 to 60%; 2-61 to 75%; 3- >75%) for each course in one year. Average of score for each year is taken as program attainment score. (Table 4, Fig. 4-8) The target for program attainment score was between 2-3 which is achieved during last 5 years.

Table 4. Program attainment score

Sl. No.	Year	A N	B I	P Y	1 st (Avg.)	P A	M I	P H	F M	2 nd (Avg.)	C M	O P	E N	3 rd (1) (Avg.)	G M	G S	O G	P E	3 rd (2) (Avg.)	Ove r All Avg.
1	2015	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
2	2016	2	3	2	2.3	3	2	3	3	2.8	3	3	3	3	2	3	3	3	2.8	2.73
3	2017	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
4	2018	3	3	3	3	3	3	3	3	3	3	3	3	3	3	2	3	3	2.8	2.95
5	2019	3	3	3	3	3	3	3	3	3	3	3	3	3	3	2	3	3	2.8	2.95

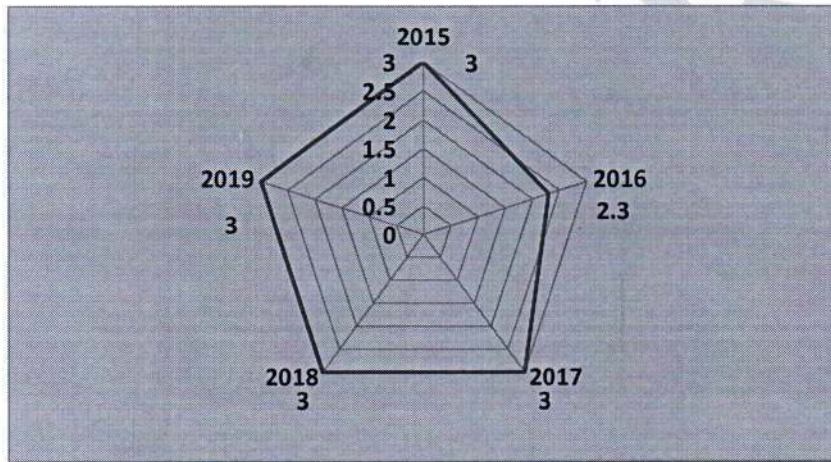


Figure 4: 1st MBBS Program Attainment score (2015-2019)
Criteria: Pass (%) :(1-50 to 60%; 2-61 to 75%; 3->75%).

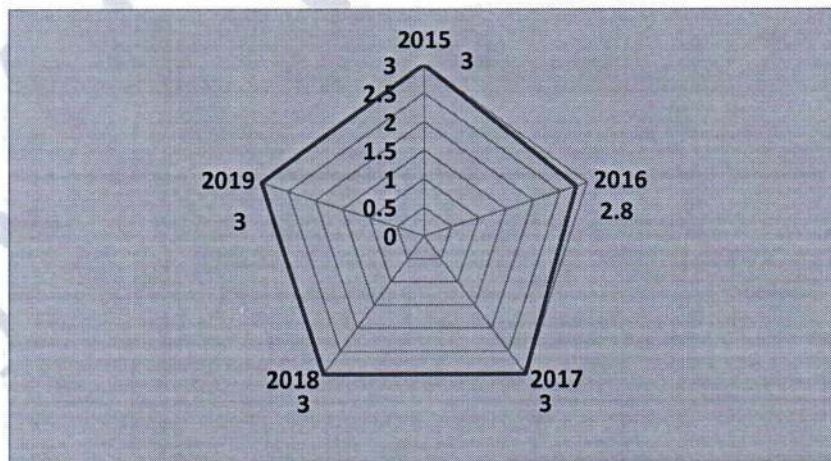


Figure 5: 2nd MBBS Program Attainment score (2015-2019)
Criteria: Pass (%) :(1-50 to 60%; 2-61 to 75%; 3->75%).

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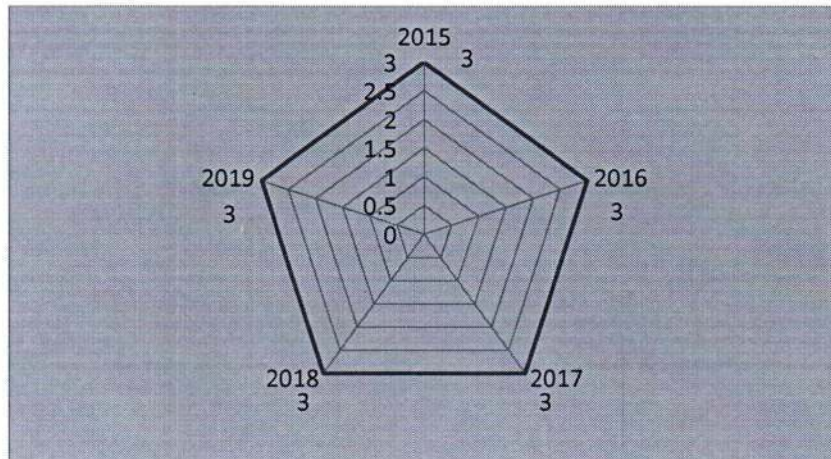


Figure 6: 3rd MBBS (1) Program Attainment score (2015-2019)
Criteria: Pass (%) :(1-50 to 60%; 2-61 to 75%; 3->75%).

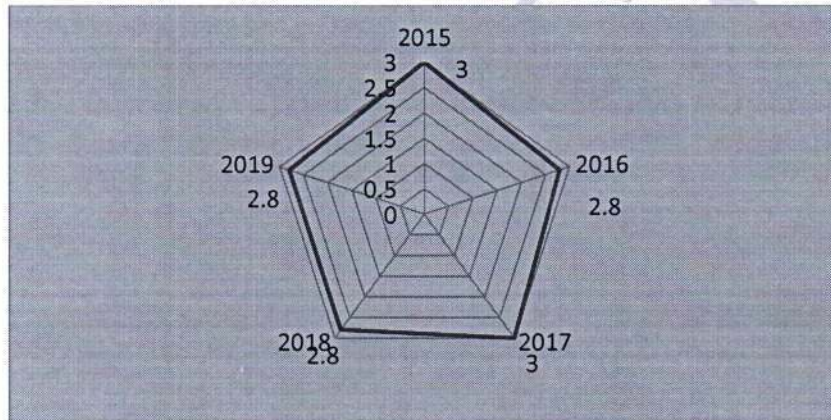


Figure 7: 3rd MBBS (2) Program Attainment score (2015-2019)
Criteria: Pass (%) :(1-50 to 60%; 2-61 to 75%; 3->75%).

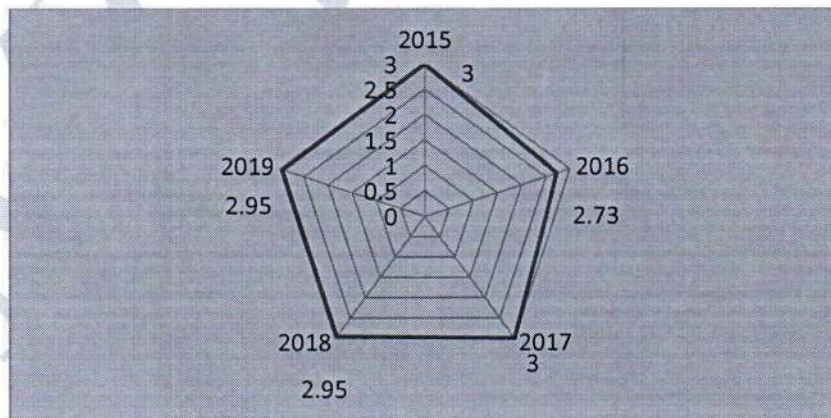


Figure 8: Overall MBBS Program Attainment score (2015-2019)
Criteria: Pass (%) :(1-50 to 60%; 2-61 to 75%; 3->75%).

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Course Attainment Score

Course assessment score is based on the pass percentage of the students in each course in a year. To obtain attainment score for course, summative assessment (SA) mark of individual student is being considered. The components of summative assessment are internal assessment mark (theory and practical), university examination (theory, practical/clinical, viva-voce, record). Based on the consolidated mark obtained in a course, individual student is given a score.

Marks obtained	< 50 %	50 – 54 %	55 – 59 %	≥ 60 %
Score	0	1	2	3

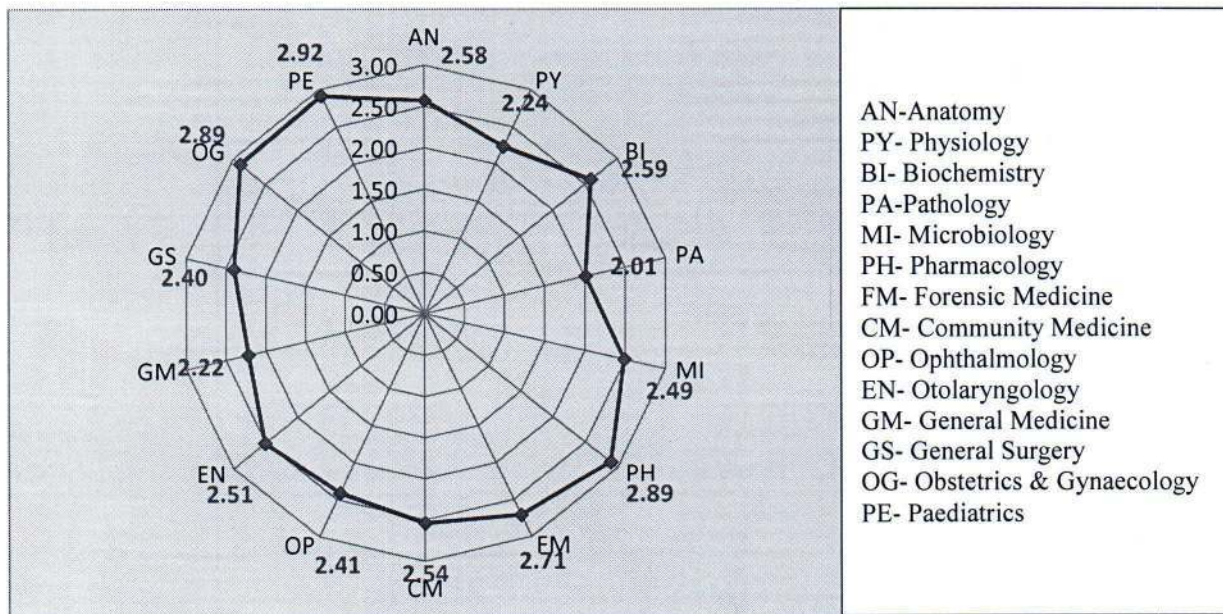
All the scores in that course are added and divided by the total no of the student appear for that score. The obtained result is considered as course attainment score. Average of previous three years score is calculated and considered for comparison with each year score. Last 5 years (2015-2019) course attainment score is given as

Table 5. Year-wise course attainment score is given in **Figure 9 to 13.**

Table 5. Course attainment score

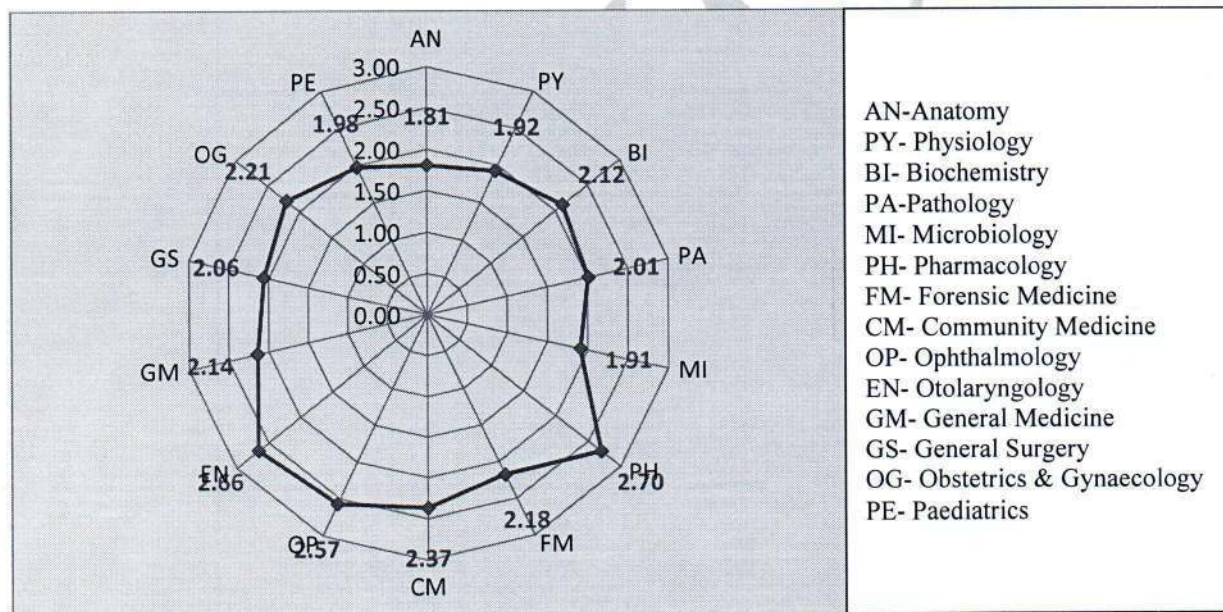
Sl. No.	Year	AN	PY	BI	PA	MI	PH	FM	CM	OP	EN	GM	GS	OG	PE
1	2015	2.58	2.24	2.59	2.01	2.49	2.89	2.71	2.54	1.41	2.51	2.22	2.40	2.89	2.92
2	2016	1.81	1.92	2.12	2.01	1.91	2.70	2.18	2.37	2.57	2.66	2.14	2.06	2.21	1.98
3	2017	2.94	2.79	2.93	2.54	2.31	2.49	2.58	2.47	2.48	2.62	1.94	2.41	2.47	2.86
4	2018	2.54	2.48	2.73	2.72	2.65	2.91	2.89	2.26	2.68	2.79	1.72	2.16	2.34	2.32
5	2019	2.53	2.50	2.55	2.40	2.58	2.94	2.38	2.76	2.14	2.81	1.89	2.29	1.76	2.61

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AN-Anatomy
 PY- Physiology
 BI- Biochemistry
 PA-Pathology
 MI- Microbiology
 PH- Pharmacology
 FM- Forensic Medicine
 CM- Community Medicine
 OP- Ophthalmology
 EN- Otolaryngology
 GM- General Medicine
 GS- General Surgery
 OG- Obstetrics & Gynaecology
 PE- Paediatrics

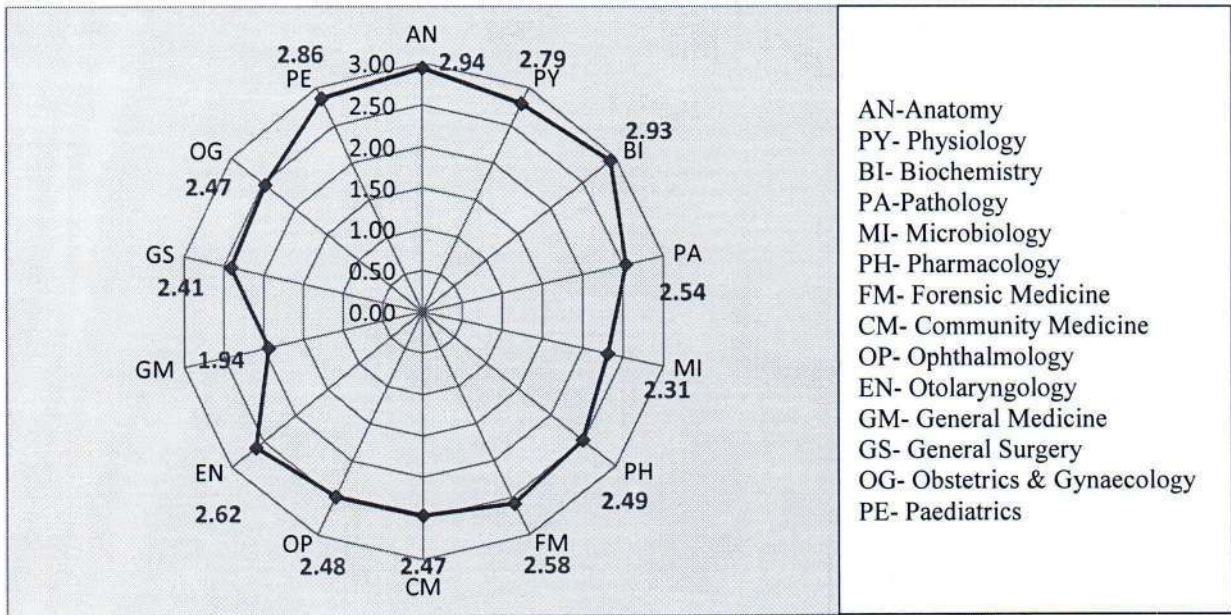
Figure 9: Course Attainment Score: 2015



AN-Anatomy
 PY- Physiology
 BI- Biochemistry
 PA-Pathology
 MI- Microbiology
 PH- Pharmacology
 FM- Forensic Medicine
 CM- Community Medicine
 OP- Ophthalmology
 EN- Otolaryngology
 GM- General Medicine
 GS- General Surgery
 OG- Obstetrics & Gynaecology
 PE- Paediatrics

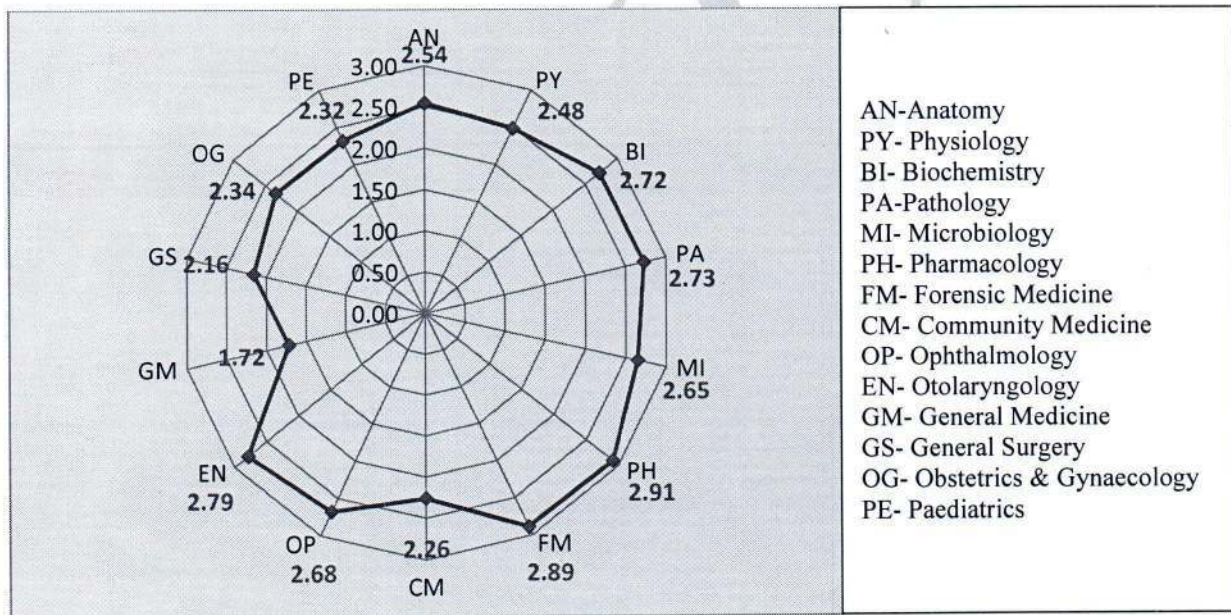
Figure 10: Course Attainment Score: 2016

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AN-Anatomy
 PY- Physiology
 BI- Biochemistry
 PA-Pathology
 MI- Microbiology
 PH- Pharmacology
 FM- Forensic Medicine
 CM- Community Medicine
 OP- Ophthalmology
 EN- Otolaryngology
 GM- General Medicine
 GS- General Surgery
 OG- Obstetrics & Gynaecology
 PE- Paediatrics

Figure11. Course Attainment Score: 2017



AN-Anatomy
 PY- Physiology
 BI- Biochemistry
 PA-Pathology
 MI- Microbiology
 PH- Pharmacology
 FM- Forensic Medicine
 CM- Community Medicine
 OP- Ophthalmology
 EN- Otolaryngology
 GM- General Medicine
 GS- General Surgery
 OG- Obstetrics & Gynaecology
 PE- Paediatrics

Figure12. Course Attainment Score: 2018

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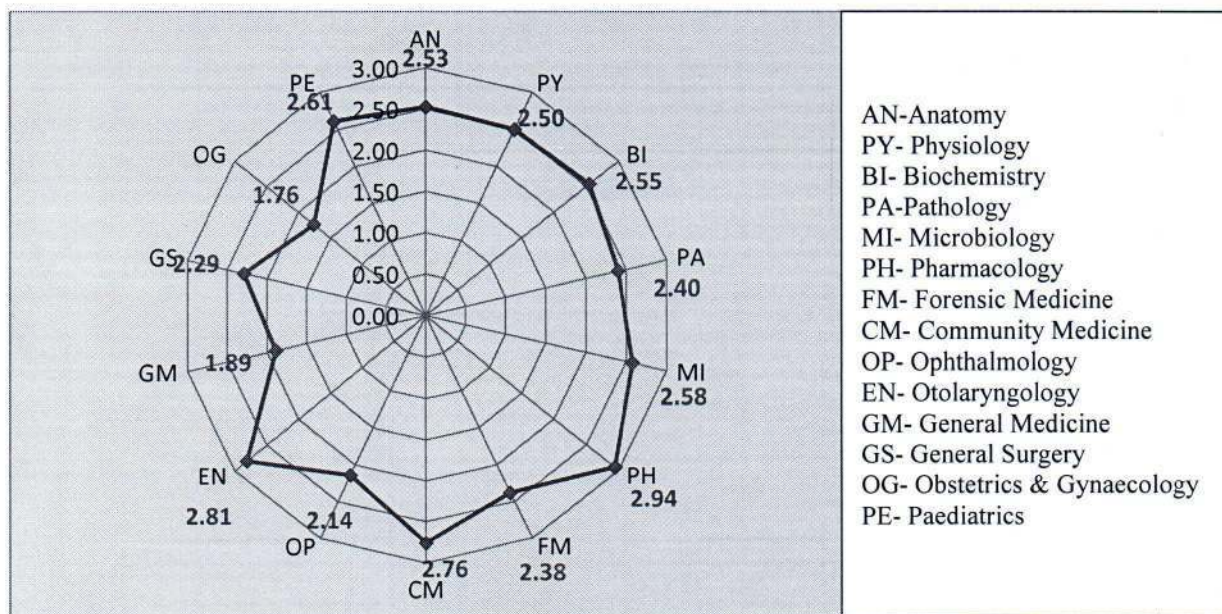


Figure13. Course Attainment Score: 2019

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, PO-Course and program attainment level. However, course attainment score needs improvement for some department. Reasons of low attainment score were discussed at the department level.

Measures initiated

Based on the feedback obtained from the students, faculty and professional peers on the curricular delivery system following steps were initiated.

- Mentor-mentee system was initiated to identify the reason for low academic performance.
- Students needing additional curricular support were identified and extra classes were conducted.
- Teaching and learning methods were modified to improve the curricular development as follows
 - Emphasis on small group teaching.
 - Use of standardised patient to improve the communication/ clinical presentation skill.
 - Use of skill labs to improve procedural skills of the students

- Conduct of objective structured clinical examinations for the formative assessment.
- Parents teacher's meeting were started to discuss the academic progress of the individual students.

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(B) Post-Graduate

2. General Medicine

Program Educational Objective (PEO)

PEO 1. Specialist who can provide comprehensive care related to General Medicine over and above the physician of first contact.

PEO 2. Leader and team member who understand health care system and act to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher

PEO 5. Professional who understands and follows the principle of bio-ethics / ethics related to health care system.

Program outcome

PO 1. Practice efficiently internal medicine specialty, backed by scientific knowledge including basic sciences and skills.

PO 2. Diagnose and manage majority of conditions in his specialty clinically and with the help of relevant investigations

PO 3. Exercise empathy and a caring attitude and maintain professional integrity, honesty and high ethical standards.

PO 4. Plan and deliver comprehensive treatment using the principles of rational drug therapy.

PO 5. Plan and advice measures for the prevention and rehabilitation of patients belonging to his specialty.

PO 6. Manage emergencies efficiently by providing Basic Life Support (BLS) and Advanced Life Support (ALS) in emergency situations.

PO 7. Demonstrate skills in documentation of case details including epidemiological Data.

PO 8. Play the assigned role in the implementation of National Health Programs.

PO 9. Demonstrate competence in basic concepts of research methodology and clinical epidemiology; and preventive aspects of various disease states.

PO 10. Be a motivated 'teacher' - defined as one keen to share knowledge and skills with a colleague or a junior or any learner.

PO 11. Continue to evince keen interest in continuing education irrespective of whether he/she is in a teaching institution or is practicing and use appropriate learning resources.

PO 12. Be well versed with his medico-legal responsibilities.

PO 13. Undertake audit, use information technology tools and carry out research - both basic and clinical, with the aim of publishing the work and presenting the work at scientific forums.

Course (C)

C 1. Applied basic medical science

C 2. General Medicine including Paediatrics, Dermatology & Psychiatry

C 3. Tropical Medicine and Infectious Disease

C 4. Geriatrics & Recent advances in Medicine

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO-Course (**Fig. 14**) and PO-Course (**Fig. 15**).

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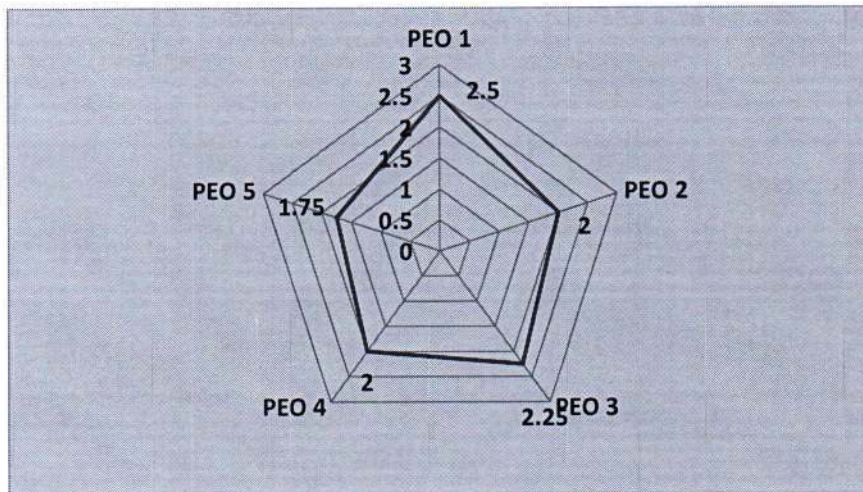


Figure 14. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

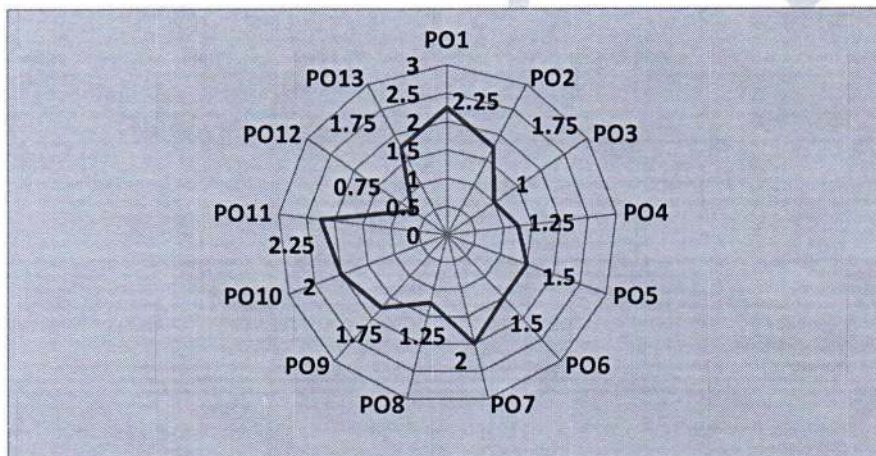


Figure 15. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 16)

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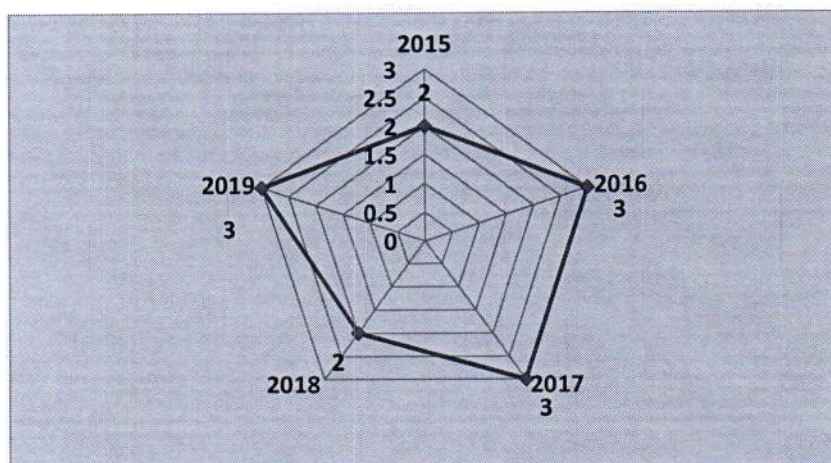


Figure 16. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 17)

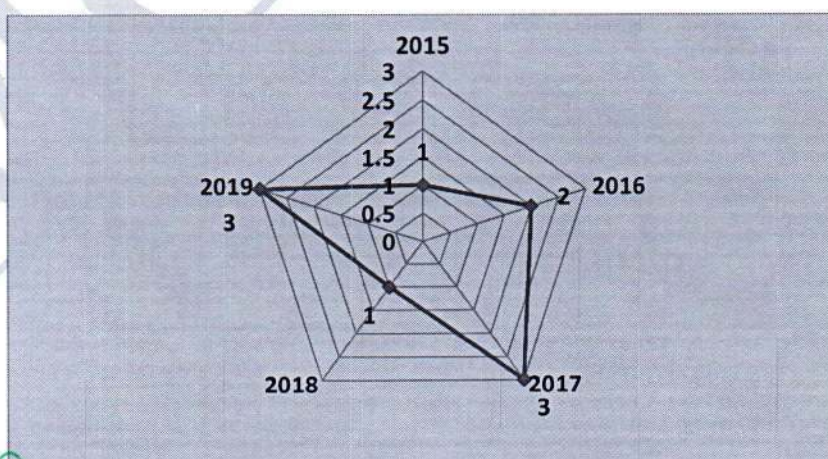


Figure 17. Course Attainment Score
Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above.

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Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, PO-Course and program attainment level. However, course attainment score were not satisfactory in the year 2018.

Measure initiated

- Quarterly test for postgraduate started along with clinical examinations
- E-portfolio started for recording the curricular and co-curricular activities.

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3. Paediatrics

Program Educational Objective (PEO)

PEO 1. Specialist who can provide comprehensive care related to paediatrics over and above the physician of first contact.

PEO 2. Leader and team member who understand health care system and act to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher

PEO 5. Professional who understands and follows the principle of bio-ethics / ethics related to health care system.

Program outcome

PO 1. Recognize the health needs of infants, children and adolescents in keeping with principles of the National Health Policy.

PO 2. Demonstrate adequate competencies pertaining to Paediatrics that are required to be practiced in the community and at all levels of health system.

PO 3. Effectively communicate with the child, family and the community regarding illness, prevention, treatment.

PO 4. Demonstrate knowledge of advances and developments in medical sciences as related to child health.

PO 5. Identify patient safety and system approach to medical errors.

PO 6. Identify the needs of patients and society and provide cost effective preventive care and advocacy.

PO 7. Communicate with stake holders of the health care system.

PO 8. Perform self-directed learning and critical appraisal of medical literature.

PO 9. Develop and execute a protocol for a scientific research project, collect and analyse the data and scientifically communicate to the others.

PO 10. Informed consent and shared responsibility

Course (C)

- C 1. Foundation course on applied basic medical sciences for paediatrics
- C 2. Neonatology and Community paediatrics
- C 3 . Preventive, Emergency and Systemic Paediatrics
- C 4. Paediatric Subspecialties

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined .Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0'being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 18**) and PO- Course (**Fig. 19**).

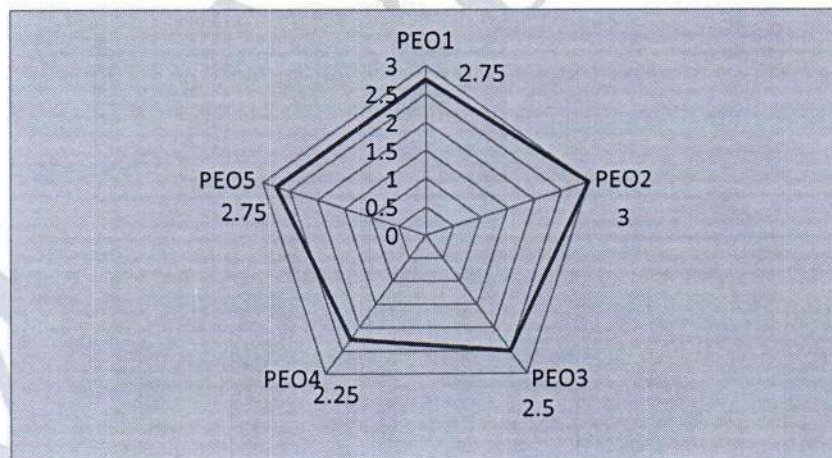


Figure 18. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

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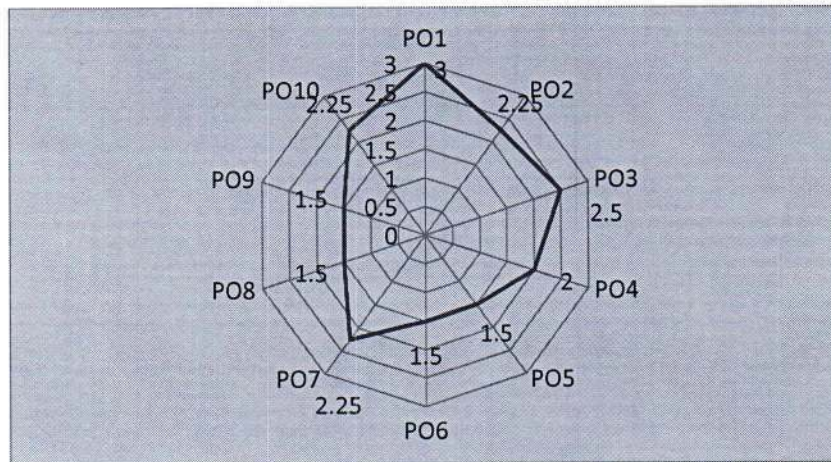


Figure 19. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 20)

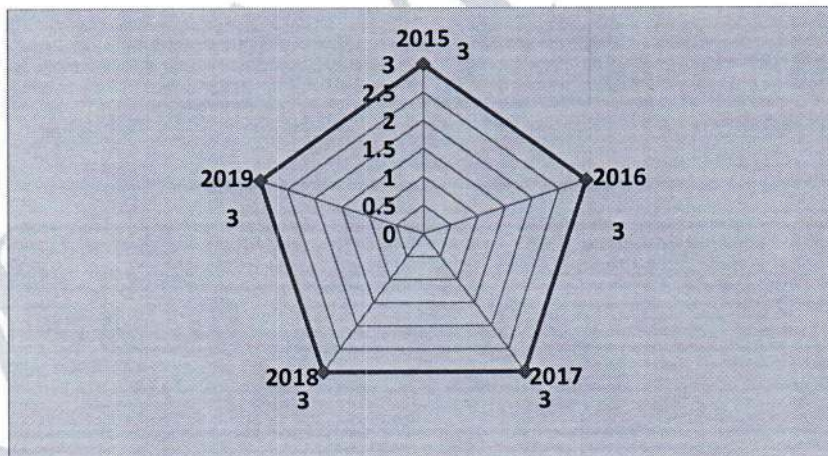


Figure 20. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - <

50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 21)

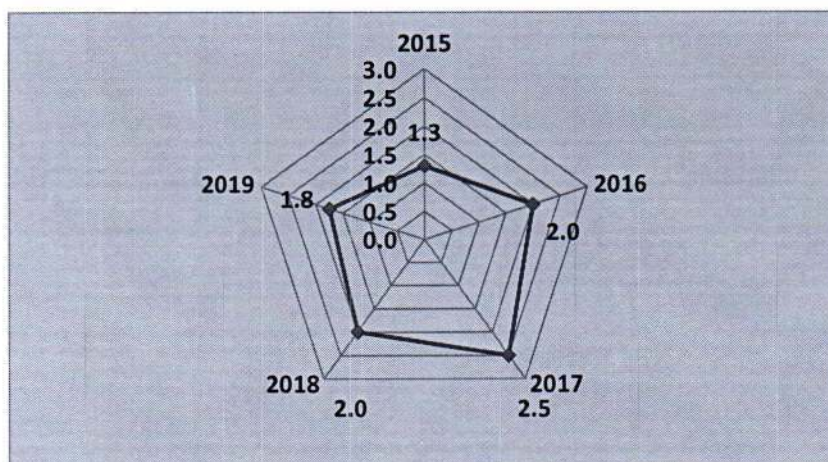


Figure 21. Course Attainment Score
Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above)

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, PO- Course and program attainment level. However, course attainment score were not satisfactory in the year 2015.

Measure initiated

- Quarterly test for postgraduate started along with clinical examinations
- E-portfolio started for recording the curricular and co-curricular activities.

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4. Psychiatry

Program educational objectives (PEO)

PEO 1. Specialist / clinician who can provide comprehensive care related to psychiatry, over and above the physician of first contact.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program outcomes (PO)

PO 1. Assess & manage a patient presenting with history suggestive of a mental disorder, across diverse practice settings, including outpatient, inpatient & emergency settings.

PO 2. Assess & manage mental/behavioural symptoms in a patient with physical illness, in collaboration with other medical/surgical specialists, incorporating the principles of liaison psychiatry

PO 3. Conduct mental health screening in non-psychiatric settings, including appropriate follow-up action

PO 4. Administer electroconvulsive therapy (ECT) in accordance with standard operating procedure

PO 5. Develop and implement a safe & comprehensive discharge plan for psychiatric inpatients.

PO 6. Plan & implement clinical audit, to improve patient care and outcomes

PO 7. Provide basic education regarding the mind, mental health & mental illness to a lay audience.

PO 8. Provide counselling about stress management, mental health promotion & prevention of mental illness.

PO 9. Deliver didactic psychiatry lectures for undergraduate medical students

PO 10. Conduct clinical training sessions for undergraduate medical students

PO 11. Develop & execute a protocol for a scientific research project & analyse the data.

PO 12. Prepare a manuscript based on original research & submit it to a scientific journal for publication.

PO 13. Present a research paper / case report / case series, in the form of an oral presentation, at a scientific conference.

PO 14. Present a research paper / case report / case series, in the form of a poster, at a scientific conference.

Course (C)

C 1. Basic sciences related to Psychiatry

C 2. General Psychiatry

C 3. Psychiatric specialities

C 4. Psychosomatic Medicine and Consultation-Liaison Psychiatry;
Neuropsychiatry and Behavioural Neurology.

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph

was plotted to find out the level of correlation between PEO- Course (Fig. 22) and PO- Course (Fig. 23).

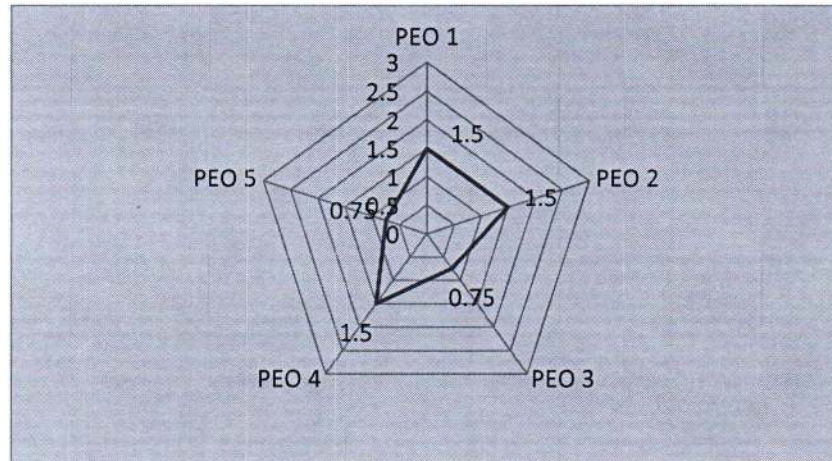


Figure 22. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

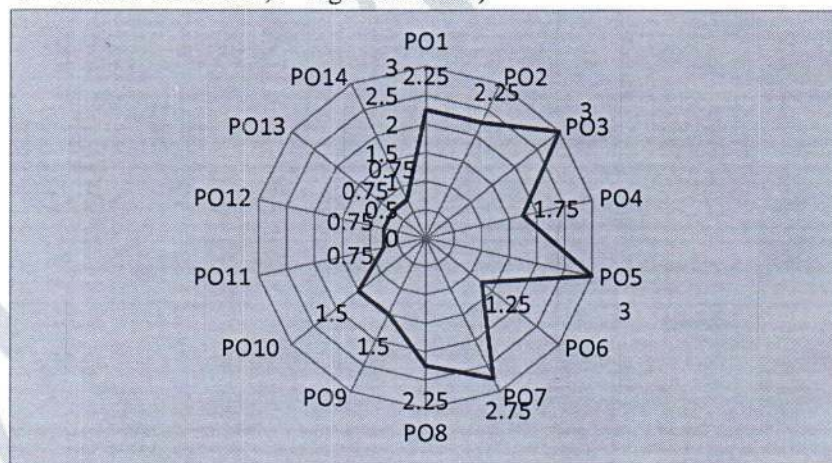


Figure 23. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 24)

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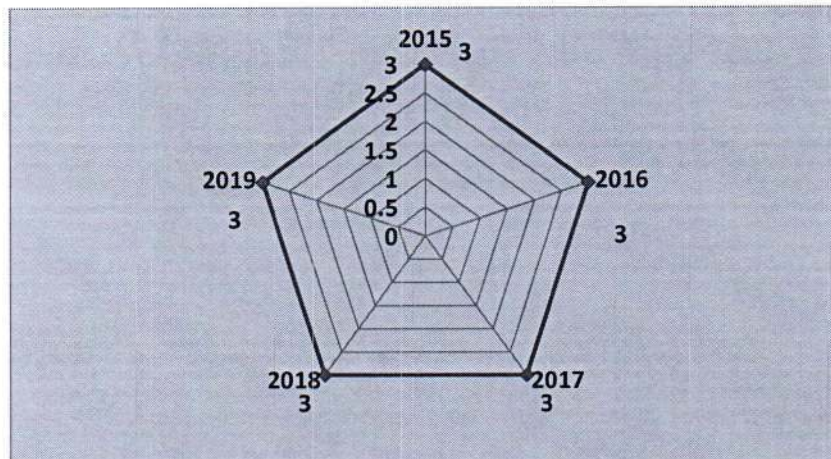


Figure 24. Program Attainment Score
 Criteria: Pass (%) <40 – 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 25)

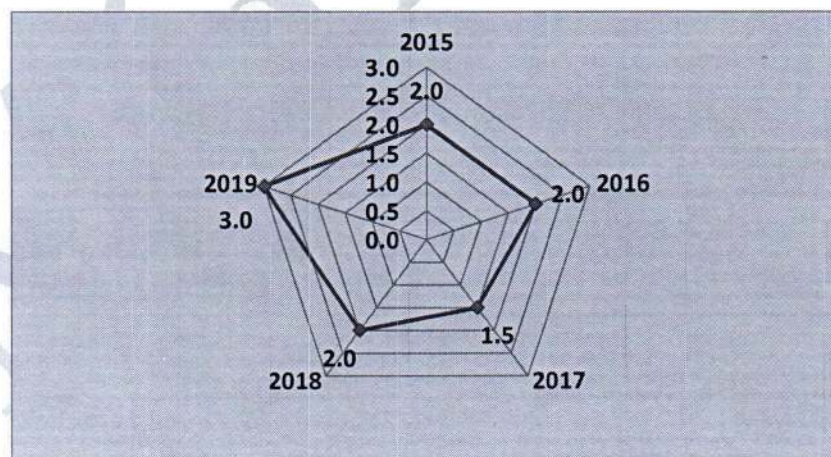


Figure 25. Course Assessment Score
 Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above)


Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, PO-Course and program attainment level. However, course attainment score were not satisfactory in the year 2017.

Measure initiated

- Quarterly test for postgraduate started along with clinical examinations
- E-portfolio started for recording the curricular and co-curricular activities.

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5. Anaesthesiology

Program educational objectives (PEO)

PEO 1. Specialist who can provide comprehensive care related to anaesthesiology.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program outcomes (PO)

PO 1. The resident should have knowledge of basic sciences as applied to Anaesthesia.

PO 2. The resident should be competent anaesthesiologist with required knowledge and procedural skills that will enable him/her to practice anaesthesiology independently.

PO 3. The resident should be up to date in the recent advances related to anaesthesiology.

PO 4. The resident should be familiar with the various teaching methods including simulators.

PO 5. The resident should develop appropriate organization and communication skill, to function in a group as leader or member in Operating Room/ Intensive Care Unit.

PO 6. The resident should ensure patient safety and develop a systematic approach to management of medical errors.

PO 7. Identify the need of patient and the society and provide cost effective care and advocacy.

PO 8. Communicate with stake holders of the health care system.

PO 9. Develop and execute a protocol for a scientific research project, collect, analyze the data and scientifically communicate to others.

PO 10. Develop skills for self-directed learning and critical appraisal of medical literature

PO 11. The resident should understand the importance of informed consent and shared responsibility.

Course (C)

C 1. Basic Sciences as applied to Anaesthesiology

C 2. Practice of Anaesthesia : Anaesthesia in relation to associated systemic and medical diseases

C 3. Anaesthesia in relation to sub-specialities and super-specialities

C 4. Intensive Care Medicine, Pain Medicine and Recent Advances

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 (*0'being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 26**) and PO- Course **Fig. 27**).

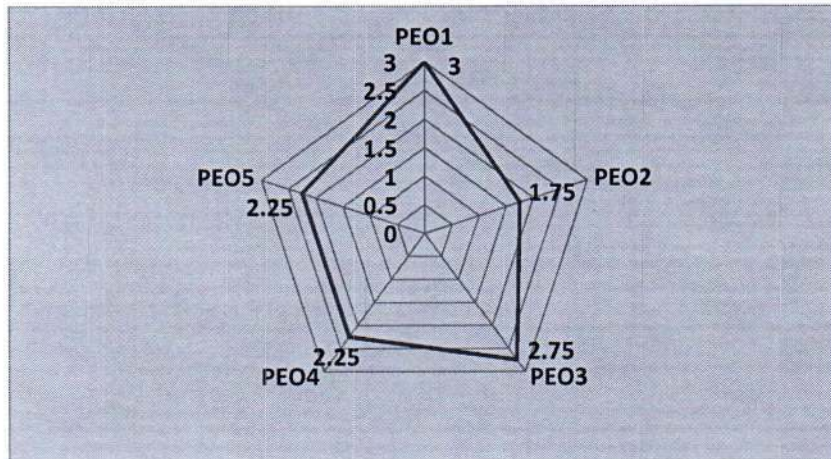


Figure 26. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

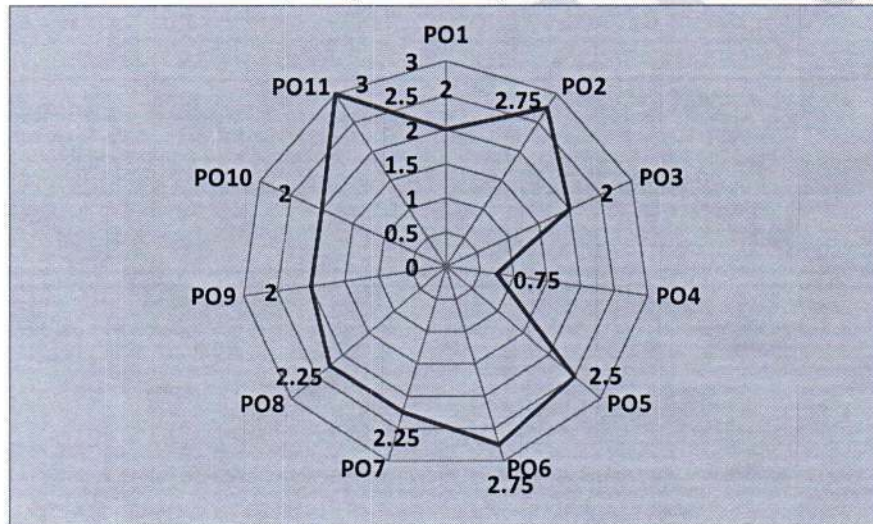


Figure 27. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 28)

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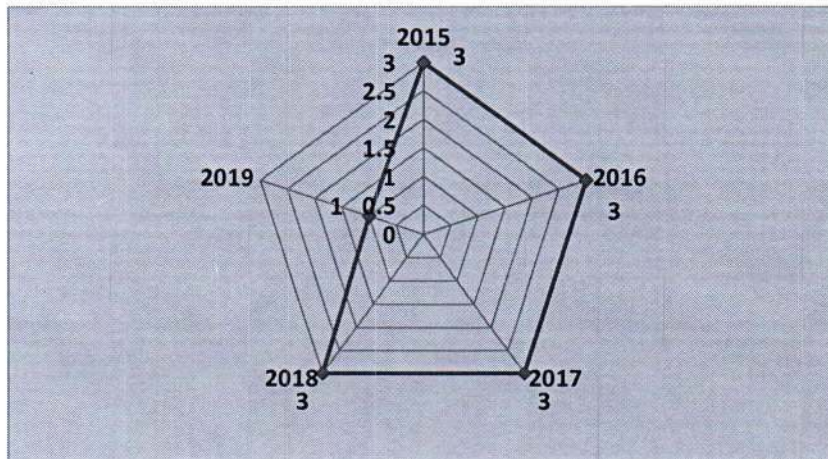


Figure 28. Program Attainment Score
Criteria: Pass (%) <40 – 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 29)

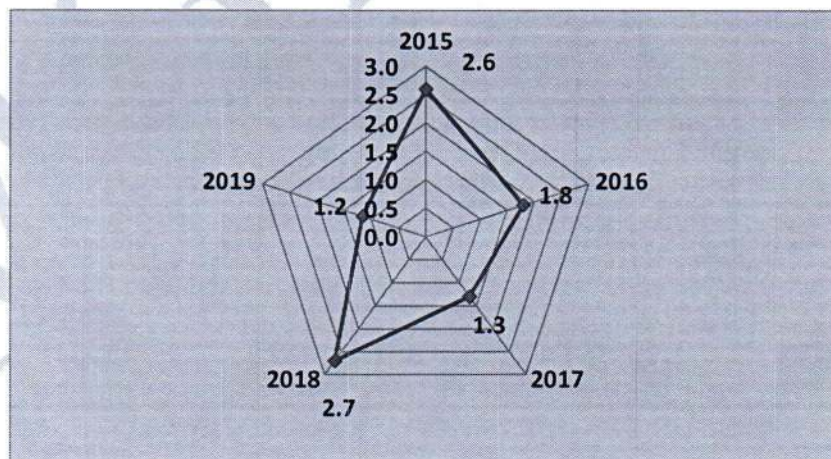


Figure 29. Course Attainment Score
Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above.


Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, PO-Course. However, program attainment score was not satisfactory in the year 2019 whereas course attainment score were not satisfactory in the year 2017 and 2019.

Measure initiated

- Post graduate training program was reviewed. Focused teaching and training session planed. Pedagogy was proposed.
- E-portfolio started for recording the curricular and co-curricular activities.

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6. Radiology

Program educational objectives (PEO)

PEO 1. Specialist who can provide Accurate reporting and care in imaging services

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program outcome

PO 1. Demonstrate knowledge of radiological physics.

PO 2. Become a skilled and competent radiologist to conduct and interpret various diagnostic/interventional imaging studies in various subspecialties of radiology.

PO 3. Demonstrate radiation safety for self, staff, and patients as set forth by the ALARA standards.

PO 4. Demonstrate effective critical thinking and problemsolving skills.

PO 5. Demonstrate effective patient care skills.

PO 6. Demonstrate teamwork while conducting patient procedures.

PO 7. Identify the needs of the patient and society to provide cost effective care.

PO 8. Utilize both written and oral communication effectively.

PO 9. Informed consent while performing a procedure.

PO 10. Demonstrate an understanding of advanced imaging modalities and the need for lifelong learning.

PO 11. Demonstrate an understanding of basic research protocols and carry out research in the field of radiology related clinical problems

PO 12. Demonstrate professional conduct and ethical decision making.

Course (C)

C 1. Radiological physics with basic medical science

C 2. Chest, CVS, CNS including Head & Neck, Eye, ENT, Musculoskeletal, paediatrics radiology and mammography

C 3. Abdominal imaging including GI, GU, Hepatobiliary, endocrine and metabolic, Obstetrics and Gynecology and interventional radiology.

C 4. Recent Advances, Nuclear medicine and radiology related to clinical specialities including oncologic imaging

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 30**) and PO- Course (**Fig. 31**).

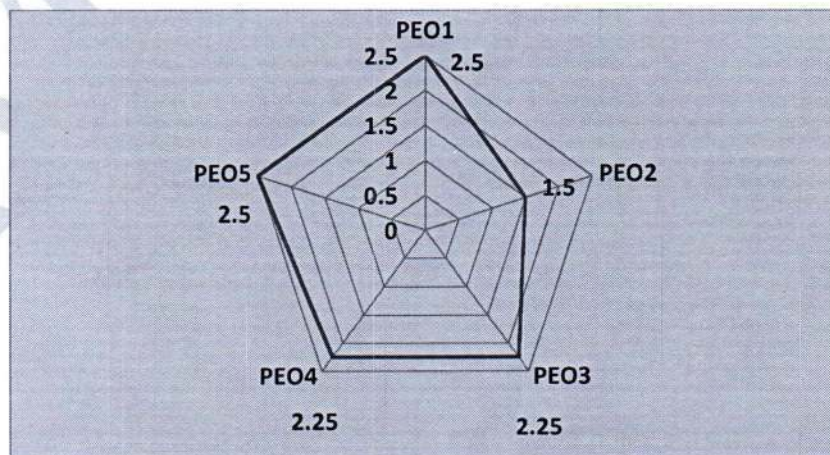


Figure 30. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation,

2 - medium correlation,3 - high correlation)

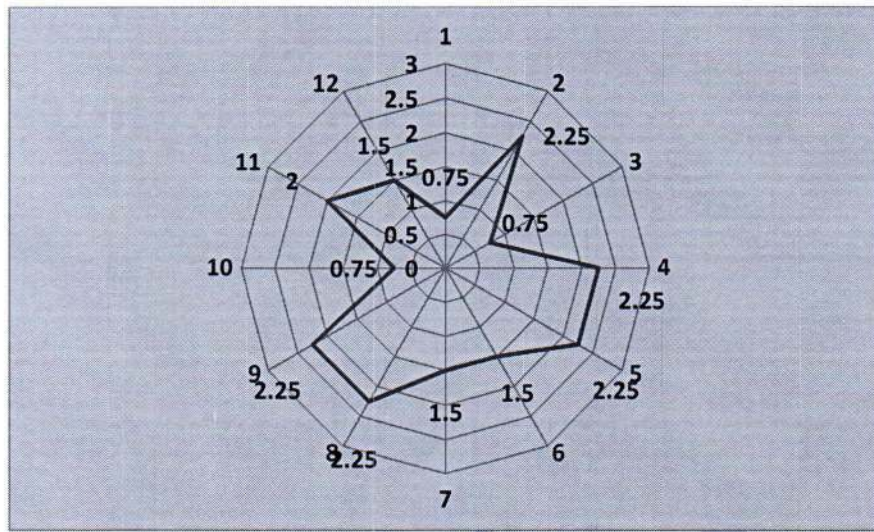


Figure 31. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation,3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1,40 to 60% - 2, >60 % to 3. (Fig. 32)

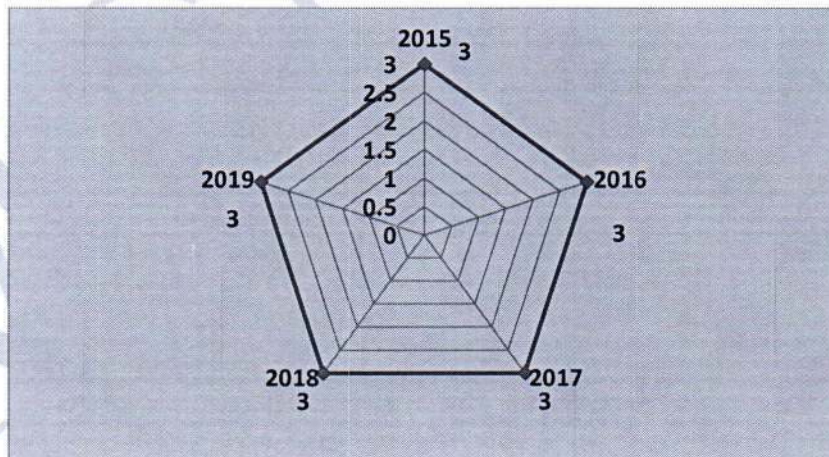


Figure 32. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were

university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 33)

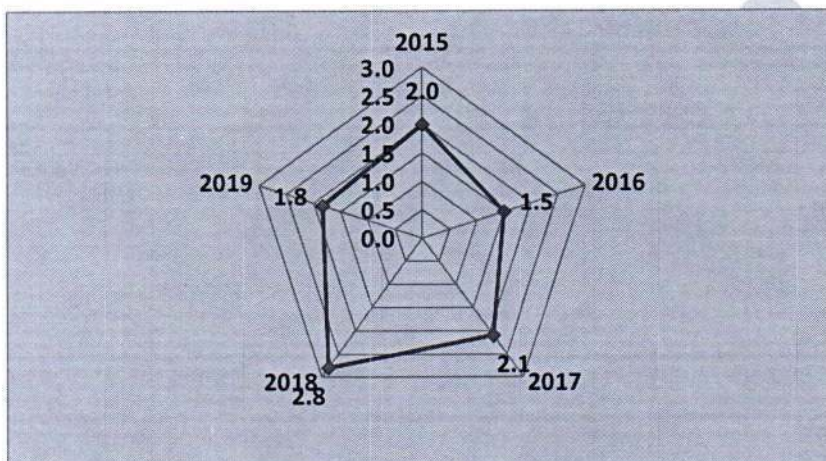


Figure 33. Course Attainment Score
Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above)

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, but PO-Course mapping showed mismatch. Program attainment level was satisfactory. However, course attainment score were not satisfactory in the year 2016 and 2019.

Measure initiated

- Quarterly test for postgraduate started along with radio-clinical examinations.

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7. Pulmonary Medicine

Program educational objectives (PEO)

PEO 1. Specialist who can provide comprehensive care related to Pulmonary Medicine, over and above the physician of first contact.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program outcome (PO)

PO 1. Demonstrate sound knowledge of common respiratory diseases and diagnose pulmonary disorders in community, emergencies and in critical care settings.

PO 2. Perform bedside pulmonary procedures, interventional pulmonary techniques in both emergencies and critical care set up.

PO 3. Identify patient safety and system approach to medical errors.

PO 4. Identify the needs of patients and society and provide cost effective preventive care and advocacy.

PO 5. Communicate with stake holders of the health care system.

PO 6. Perform SDL and Critical appraisal of medical literature.

PO 7. Demonstrate sound knowledge of Informed consent and shared responsibility.

PO 8. Develop and execute a protocol for a scientific research project, collect and analyse the data and scientifically communicate to other.

Course (C)

- C 1. Basic medical sciences as applicable to the Speciality
- C 2. Clinical Pulmonary Medicine including respiratory emergencies
- C 3. Clinical pulmonary medicine including critical care medicine
- C 4. Recent advances in Pulmonary Medicine

Mapping of Cs, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 34**) and PO- Course (**Fig. 35**).

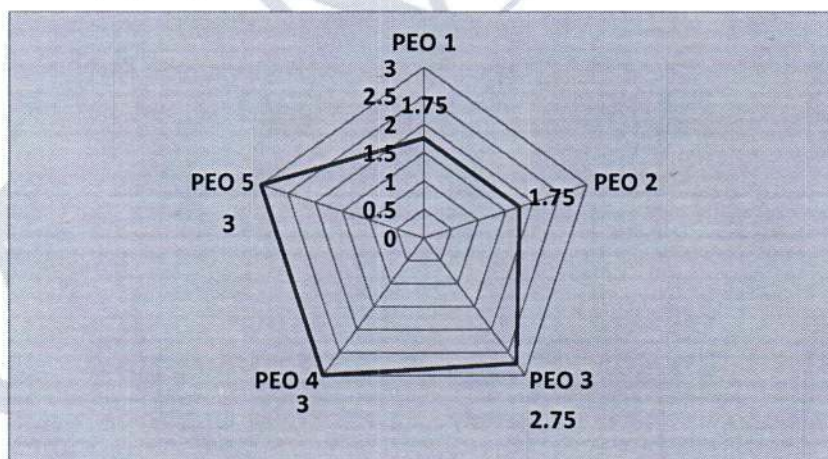


Figure 34. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

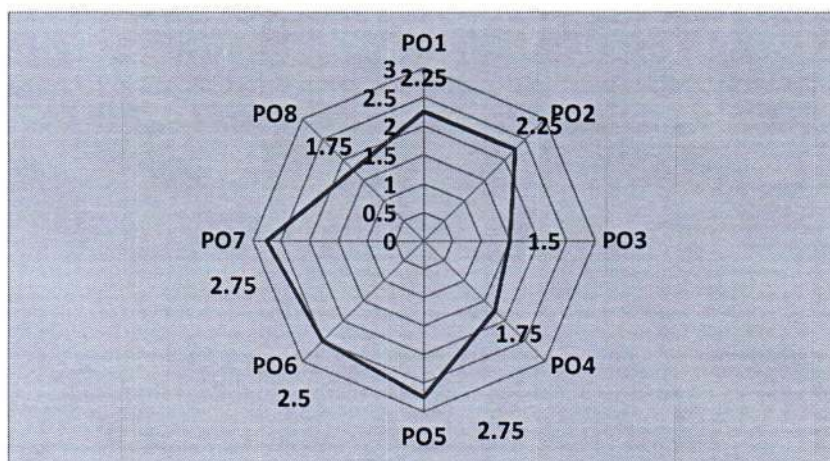


Figure 35. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 36)

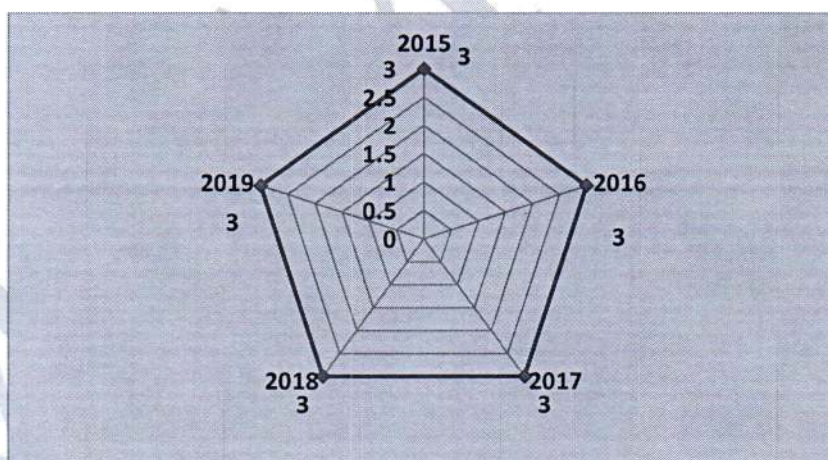


Figure 36. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60%

and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 37)

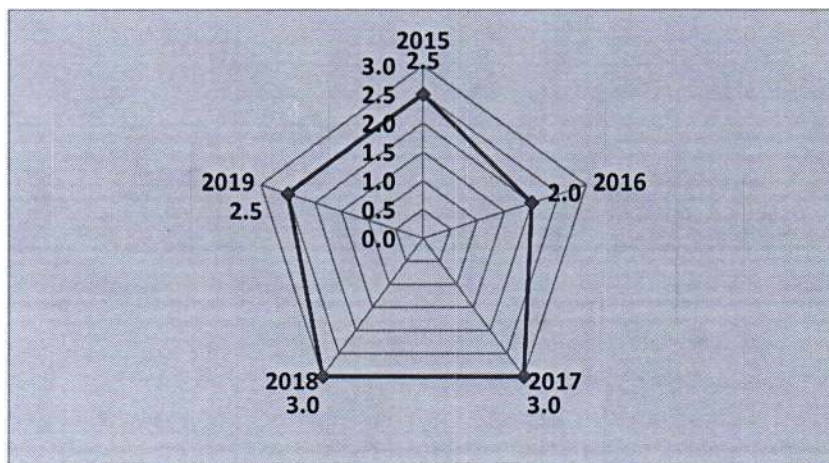


Figure 37. Course Attainment Score

Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above.

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO- Course, PO-Course, program attainment and course attainment score.

Measure initiated

- E-portfolio started for recording the curricular and co-curricular activities.

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8. Dermatology, Venerology & Leprology

Program educational objectives (PEO)

PEO 1. Specialist who can provide comprehensive care related to Dermatology, Venereology & Leprosy over and above the physician of first contact.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program outcome (PO)

PO 1. Provide treatment for common skin diseases.

PO 2. Provide treatment for skin diseases and its complications.

PO 3. Provide treatment for leprosy, sexually transmitted infections and its complications.

PO 4. Perform dermato-surgery procedures.

PO 5. Identify patient safety and system approach to medical errors.

PO 6. Identify the needs of patients and society and provide cost effective preventive care and advocacy.

PO 7. Communicate with stake holders of the health care system.

PO 8. Perform SDL and Critical appraisal of medical literature.

PO 9. Informed consent and shared responsibility.

PO 10. Develop and execute a protocol for a scientific research project, collect and analyse the data and scientifically communicate to other.

Course (C)

C 1. Basic sciences pertaining to Dermatology, Venereology & Leprology

C 2. General dermatology and Tropical dermatology – Principles of diagnosis and therapeutics

C 3. Leprosy and Sexually Transmitted Disease& Social public health and prevention.

C 4. Recent advances in Dermatology, Venereology and Leprology& Skin manifestations in systemic diseases vs aspects.

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0'being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course. (Fig. 38) and PO- Course (Fig. 35).

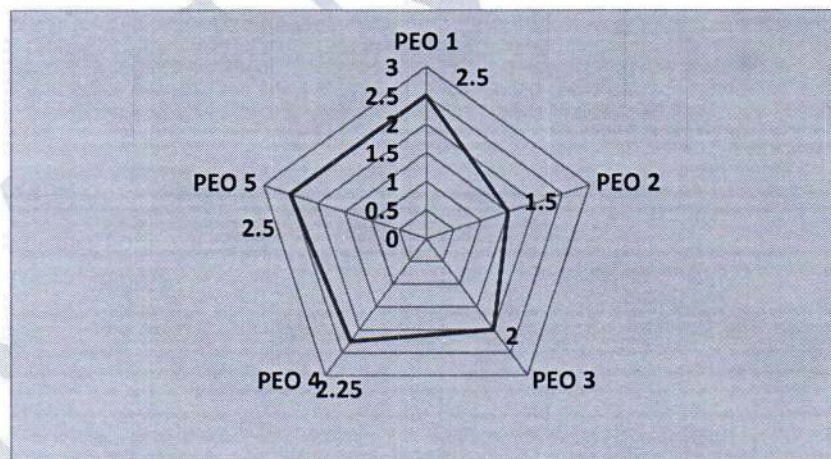


Figure 39. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

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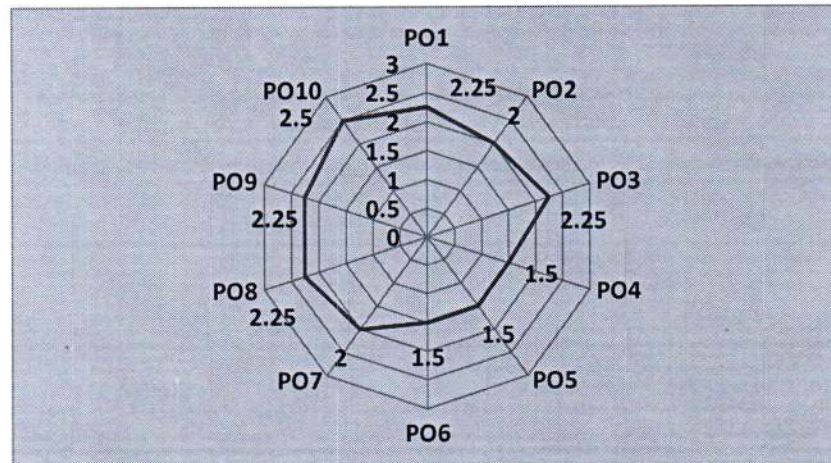


Figure 39. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 40)

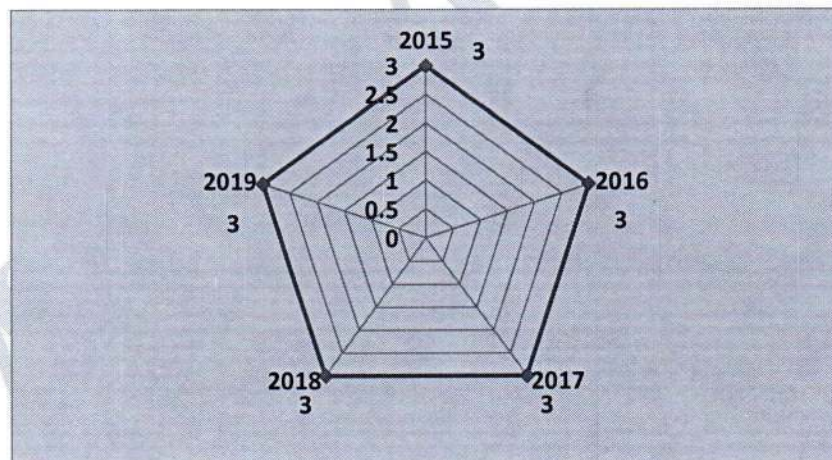


Figure 40. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%; 3-60%

and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 41)

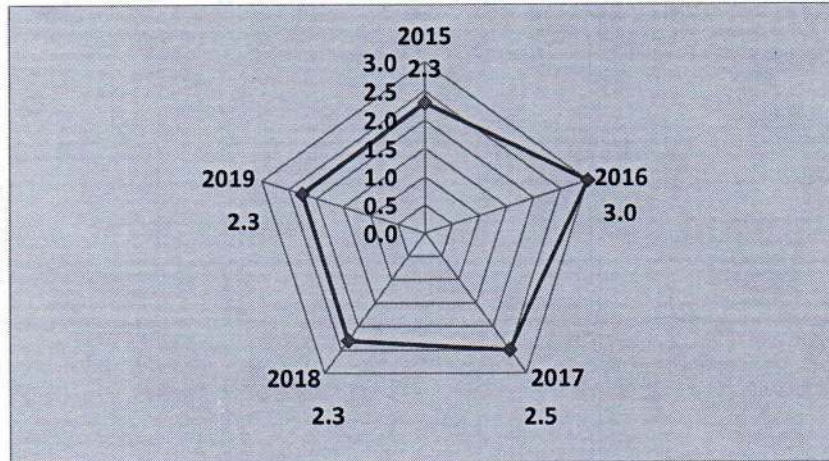


Figure 41. Course Attainment Score

Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, PO-Course, program attainment and course attainment score.

Measure initiated

- E-portfolio started for recording the curricular and co-curricular activities.

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9. General Surgery

Program educational objectives (PEO)

PEO 1. Specialist who can provide comprehensive care related to General Surgery, over and above the physician of first contact.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program Outcome

PO 1. Diagnose and appropriately manage common surgical ailments in a given situation.

PO 2. Perform common minor & major General Surgical procedures and provide peri-operative care.

PO 3. Identify situations calling for urgent or early surgical intervention and refer at the optimum time to the appropriate centers.

PO 4. Provide and coordinate emergency resuscitative measures in acute surgical situation including trauma.

PO 5. Identify patient safety and system approach to medical errors.

PO 6. Perform surgical audit on a regular basis and maintain records (manual and/or electronic) for life.

PO 7. Communicate with stake holders of the health care system.

PO 8. Must update knowledge in recent advances and newer techniques in the management of the patients.

PO 9. Develop and execute a protocol for a scientific research project, collect and analyse the data and scientifically communicate to other.

PO 10. Perform SDL and Critical appraisal of medical literature.

PO 11. The student will show integrity, accountability, respect, compassion and dedicated patient care.

PO 12. The student will demonstrate a commitment to excellence and continuous professional development.

PO 13. The student should demonstrate a commitment to ethical principles relating to providing patient care, confidentiality of patient information and informed consent.

PO 14. The student should show sensitivity and responsiveness to patients' culture, age, gender and disabilities.

Course (C)

C 1. Applied basic medical science


C 2. Principles and Practice of Surgery

C 3. General Surgery, Breast Endocrine and Surgical Gastroenterology

C 4. Recent Advances and Subspecialty

Mapping of Cs, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and CO are defined. Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course POs- Course


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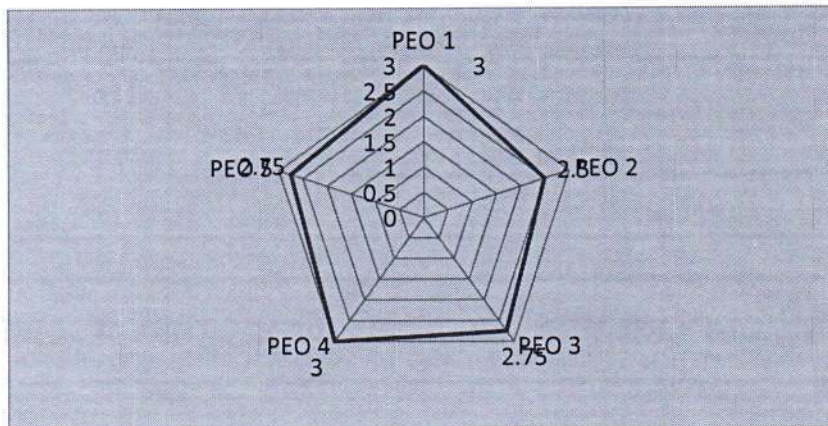


Figure 42. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

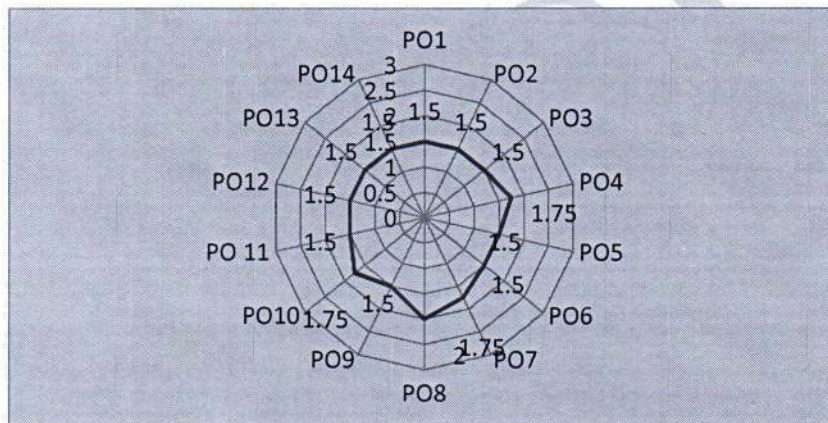


Figure 43. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% -2, >60 % to 3. (Fig. 44)

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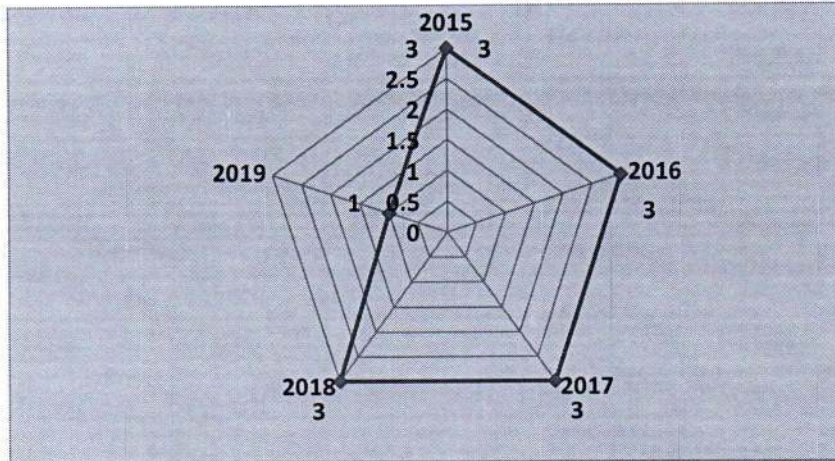


Figure 44. Program Attainment Score
 Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 45)

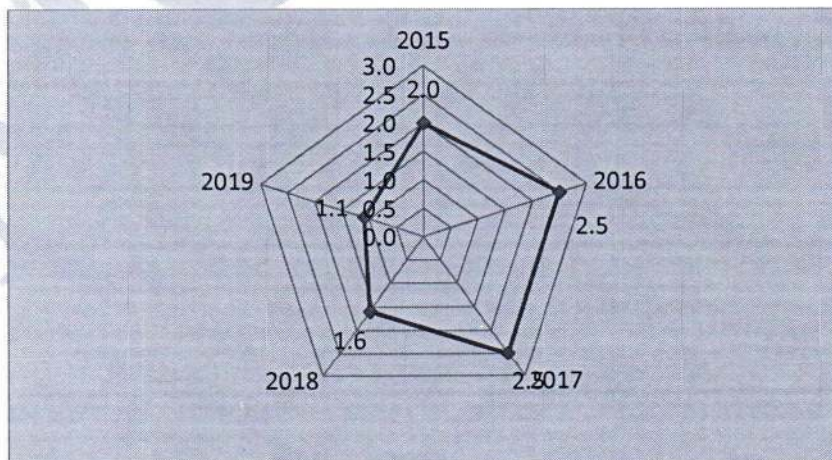


Figure 45. Course Attainment Score
 Criteria: Aggregate mark in SA 0 - < 50%; 1-50 to 54%; 2- 55 to 59%;3 - 60 and above

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course, PO-Course. However, program attainment score and course attainment score were not satisfactory 2019.

Measure initiated

- Post graduate training program was reviewed. Focused teaching and training session planed. Pedagogy was proposed.
- E-portfolio started for recording the curricular and co-curricular activities.

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10. Obstetrics & Gynaecology

Program Educational Objective

PEO 1. Specialist who can provide comprehensive care related to Obstetrics and Gynaecology, over and above the physician of first contact.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program outcome

PO 1. Provide antepartum, intra-partum, postpartum care along with immediate care of new born with management of related complications.

PO 2. Perform common minor & major Obstetrics and Gynaecological procedures and provide peri-operative care.

PO 3. Provide care for reproductive tract and fertility related problem.

PO 4. Provide Care of patient with common non-reproductive medical disorders

PO 5. Identify patient safety and system approach to medical errors.

PO 6. Identify the needs of patients and society and provide cost effective preventive care and advocacy.

PO 7. Communicate with stake holders of the health care system.

PO 8. Perform SDL and Critical appraisal of medical literature.

PO 9. Develop and execute a protocol for a scientific research project, collect and analyse the data and scientifically communicate to other.

PO 10. Informed consent and shared responsibility.

Course (C)

C 1. Applied basic medical science

C 2. Obstetrics including social obstetrics and neonatology

C 3. Gynaecology including family planning

C 4. Recent advances in obstetrics and gynaecology

Mapping of Course, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 (‘0’ being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (Fig. 46) and PO- Course (Fig. 47).

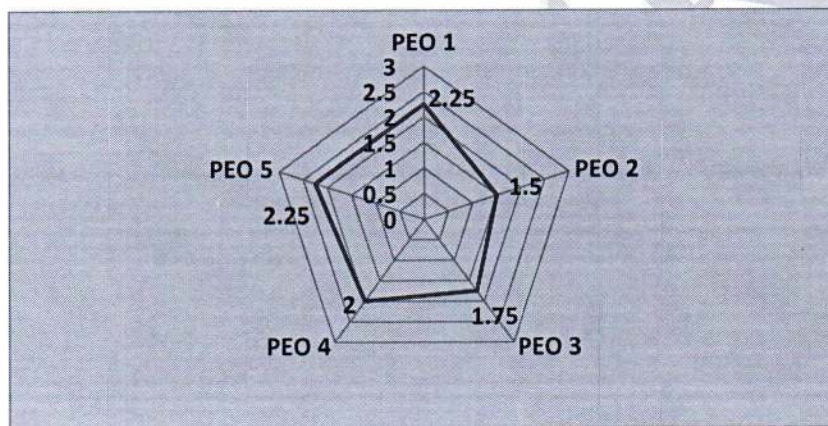


Figure 46. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

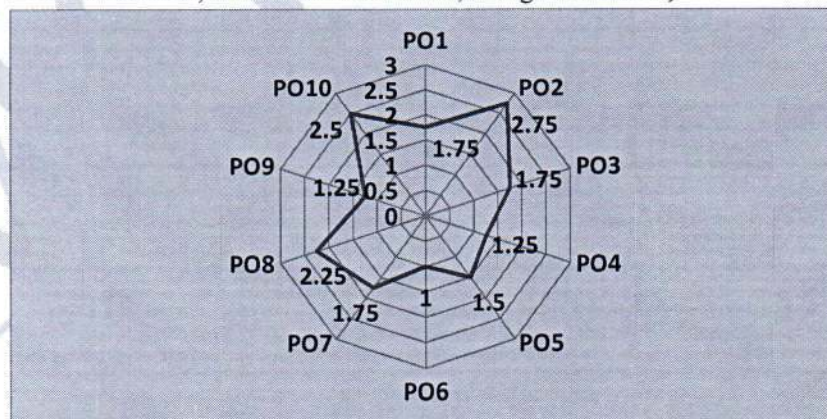


Figure 47. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% -2, >60 % to 3. (Fig. 48)

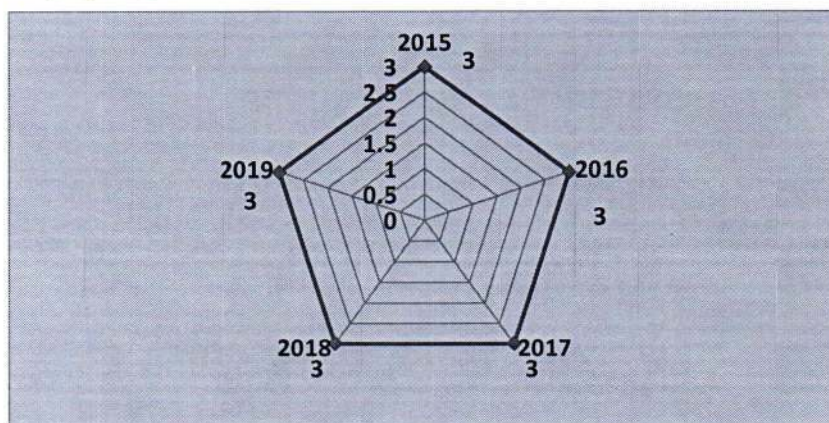


Figure 48. Program Attainment Score
Criteria: Pass (%) <40 – 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 49)

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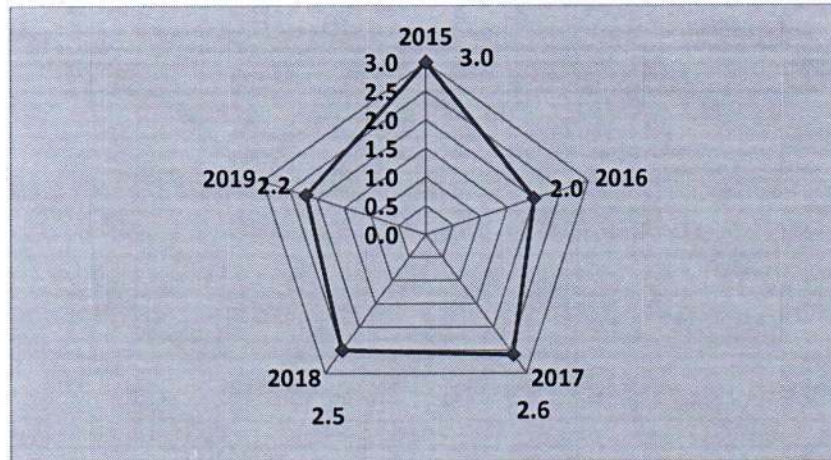


Figure 49. Course Attainment Score

Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above)

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course. Mapping of PO-Course needed relook. Both program attainment score and course attainment score were satisfactory.

Measure initiated

- Post graduate training program was reviewed. Focused teaching and training session planed. Pedagogy was proposed.
- E-portfolio started for recording the curricular and co-curricular activities.

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11. Ophthalmology

Program Educational Objective

PEO 1. Specialist / clinician who can provide comprehensive care related to Ophthalmology, over and above the physician of first contact.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program Outcome (PO)

PO 1. Have knowledge of basic sciences in relation to Ophthalmology, & theory and practice of refraction

PO 2. Able to Identify and treat common extraocular and ocular diseases.

PO 3. Perform common major and minor eye surgeries.

PO 4. Having adequate knowledge & competence to perform and interpret specialised investigative procedures.

PO 5. Having adequate knowledge / assisted surgeries for management of corneal & Retinal diseases, Squint and Glaucoma

PO 6. Part of community outreach activity, identify and manage ocular trauma & emergencies.

PO 7. Communicate with stake holders of the health care system.

PO 8. Having basic knowledge of Bio medical research; Perform SDL and Critical appraisal of medical literature.

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PO 9. Informed consent and shared responsibility. Basic knowledge of medico-legal aspects.

PO 10. Knowing the recent developments in technology, therapeutics & diseases of the eye and adnexa.

Course (C)

C 1. Applied basic medical science related to Ophthalmology, Refraction & Optics

C 2. Clinical Ophthalmology

C 3. Systemic Diseases in Relation to Ophthalmology

C 4. Recent Advances in Ophthalmology and Community Ophthalmology

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 (0 being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 50**) and PO- Course (**Fig. 51**).

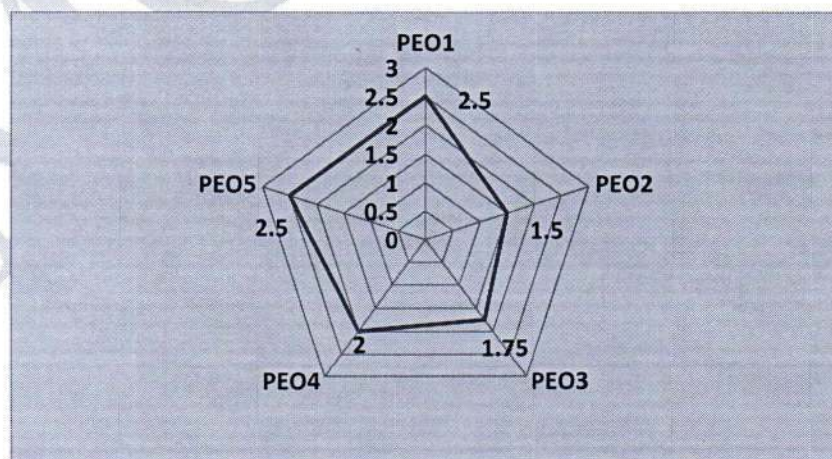


Figure 50. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

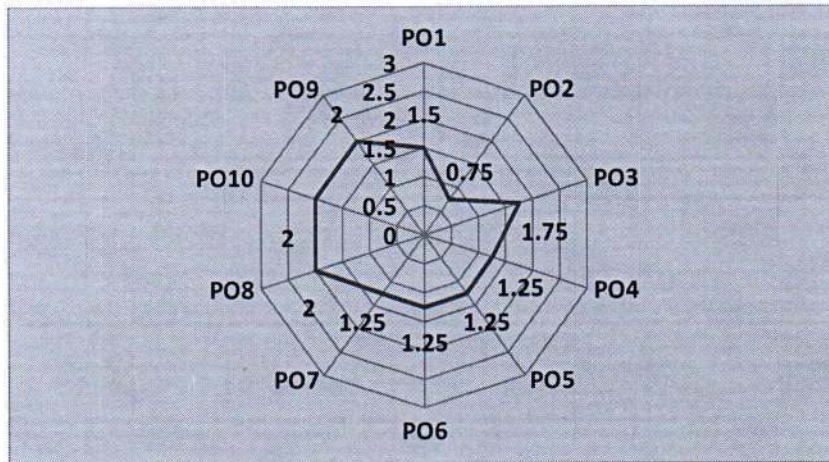


Figure 51. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 52)

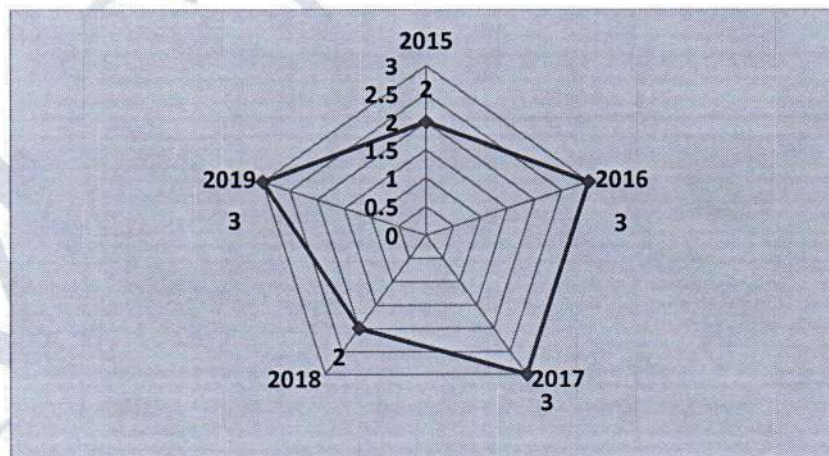


Figure 52. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the

consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 53)

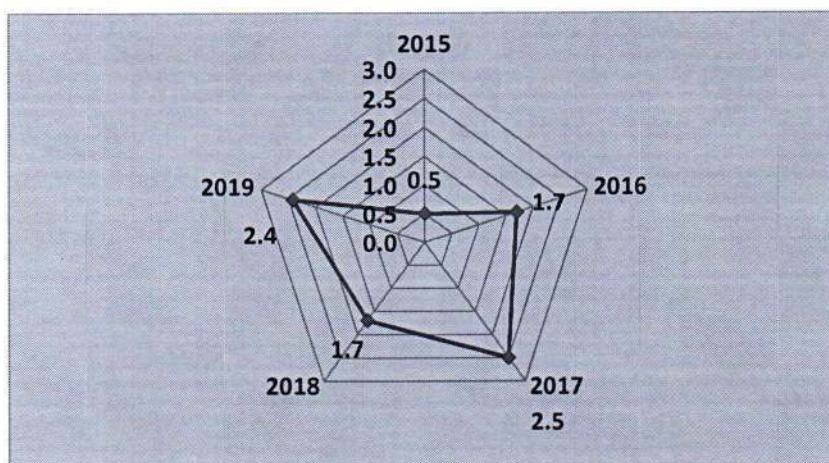


Figure 53. Course Attainment Score
Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above.

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course. Mapping of PO-Course needed relook. Both program attainment score and course attainment score were satisfactory.

Measure initiated

- Post graduate training program was reviewed. Focused teaching and training session planed. Pedagogy was proposed.
- E-portfolio started for recording the curricular and co-curricular activities.

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12. Orthopedics

Program Educational Objective

PEO 1. Specialist / clinician who can provide comprehensive care related to Orthopaedics, over and above the physician of first contact.

PEO 2. Leader and a team member who understands the health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care settings.

PEO 4. Lifelong learner keen on updating oneself regarding the advancements in the healthcare field, and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principles of bioethics / ethics related to the health care system.

Program Outcome (PO)

PO 1. Provide emergency care in Orthopaedic Trauma patients, triage, resuscitation and management of complications.

PO 2. Perform basic Trauma surgeries and provide pre and post operative care.

PO 3. Identify and provide appropriate care for Orthopaedics diseases.

PO 4. Identify and provide appropriate care to all sub-speciality patients in Orthopaedics.

PO 5. Identify patient safety and system approach to medical errors, get informed concern and share responsibilities.

PO 6. Identify the needs of patients and society and provide cost effective care in the field of orthopaedics

PO 7. Communicate with stake holders of health care system to facilitate orthopaedic care.

PO 8. Perform literature search and critical appraisal of literature and involve in research related to orthopaedics.

PO 9. Informed consent and shared responsibility.

Course

- C1. Basic Sciences as applied to Orthopaedics
- C 2. Traumatology and rehabilitation
- C 3. Orthopaedic Disease
- C 4. Recent advances and sub speciality in Orthopaedics

Mapping of Courses, POs and PEOs

TAs postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 54**) and PO- Course (**Fig. 55**).

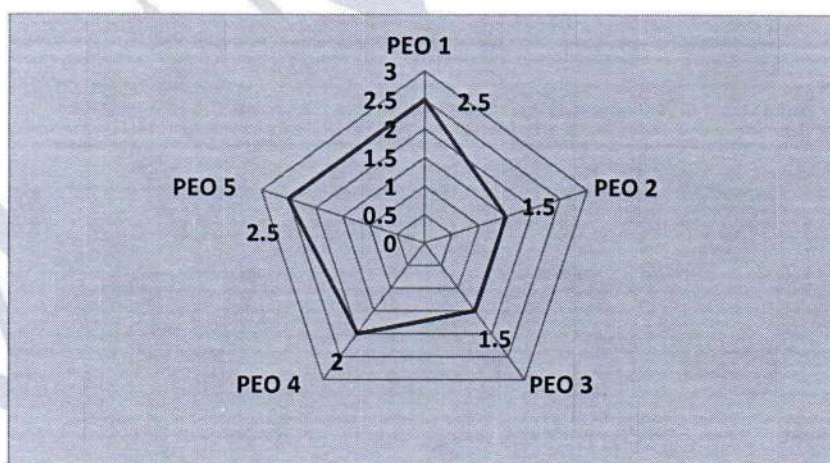


Figure 54. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

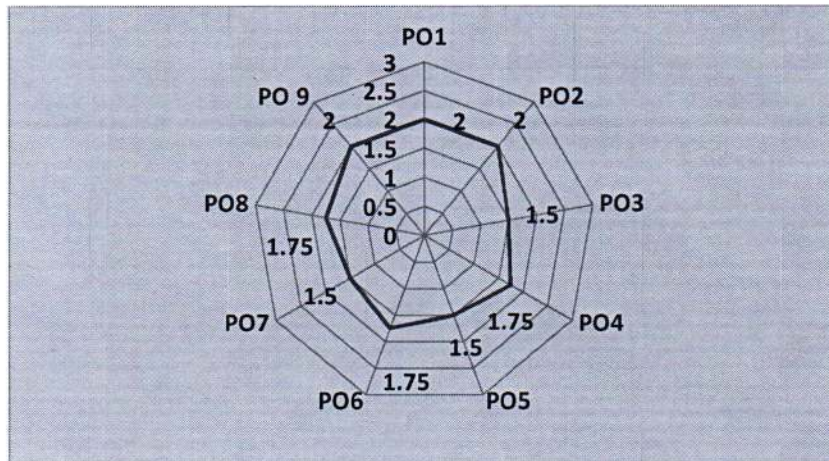


Figure 55. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% -2, >60 % to 3. (Fig. 56)

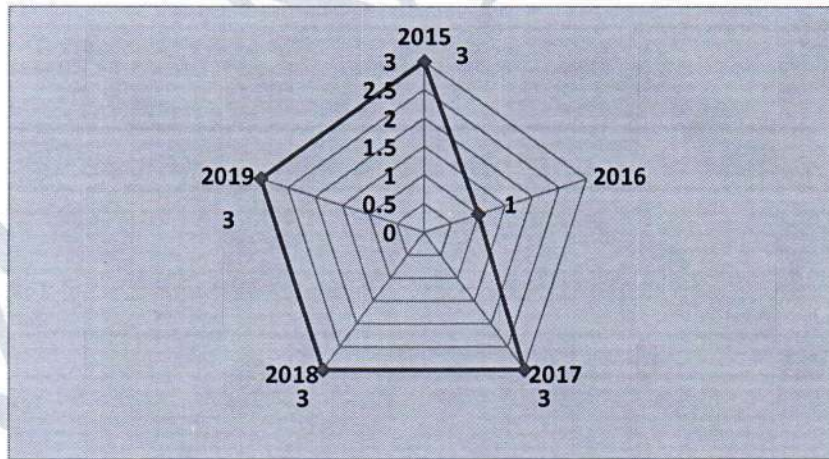


Figure 56. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the

consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 57)

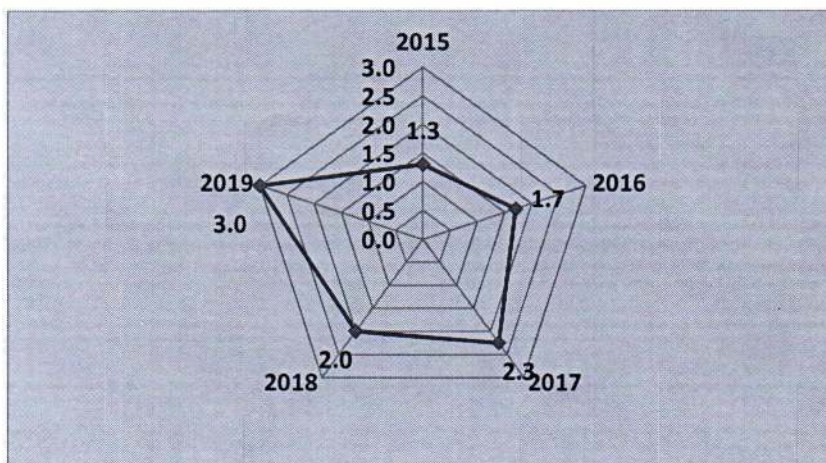


Figure 57. Course Attainment Score
Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above)

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course. Mapping of PO-Course needed relook. Both program attainment score was not satisfactory the year 2016 and course attainment score was not satisfactory in the year 2015 and 2016.

Measure initiated

- Post graduate training program was reviewed. Focused teaching and training session planned.
- E-portfolio started for recording the curricular and co-curricular activities.

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13. Otorhinolaryngology

Program Educational Objectives (PEO):

- PEO 1.** Specialist who can provide comprehensive care related to Otorhinolaryngology and Head & Neck Surgery over and above the physician of first contact.
- PEO 2.** Leader and team member who understands health care system and act to provide safe patient care with accountability and responsibility.
- PEO 3.** Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.
- PEO 4.** Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher
- PEO 5.** Professional who understands and follows the principle of bio-ethics / ethics related to health care system

Program Outcome (PO)

After three years of residency program candidate should be able to

- PO 1.** Practice his or her specialty efficiently and ethically, keeping in mind the requirement of the patient and maintain a good rapport with the patients.
- PO 2.** He/she should gain adequate skills to individually manage oto-rhino-laryngological diseases both medically and surgically.
- PO 3.** Manage all kinds of emergencies in otorhinolaryngology and Head and Neck.
- PO 4.** Develop good learning and teaching skills along with communication skills with stake holders of the health care system.
- PO 5.** Take part in National Health program and take an active role in prevention and rehabilitation of Otolaryngology related diseases.
- PO 6.** Know the basic concept of research methodology, plan a research project, plan and write a dissertation/ thesis with a fair knowledge of statistics
- PO 7.** Acquire in depth knowledge of the subject, latest diagnostic and therapies available and recent advances.

PO 8 They should be able to perform common Audio – vestibular tests like, Pure tone audiometry, BERA, etc.

PO 9. Identify patient safety and system approach to medical errors.

Course (C)

C 1. Applied Basic science related to otorhinolaryngology

C 2. Principles and practices of oto-rhinology

C 3. Recent advance in otorhinolaryngology and head and neck

C 4. General surgical principles in laryngology and head and neck

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 58**) and PO- Course (**Fig. 59**).

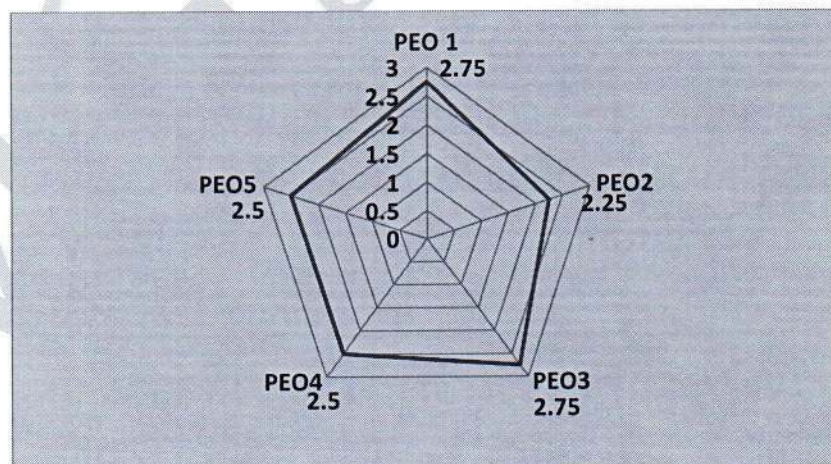


Figure 58. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

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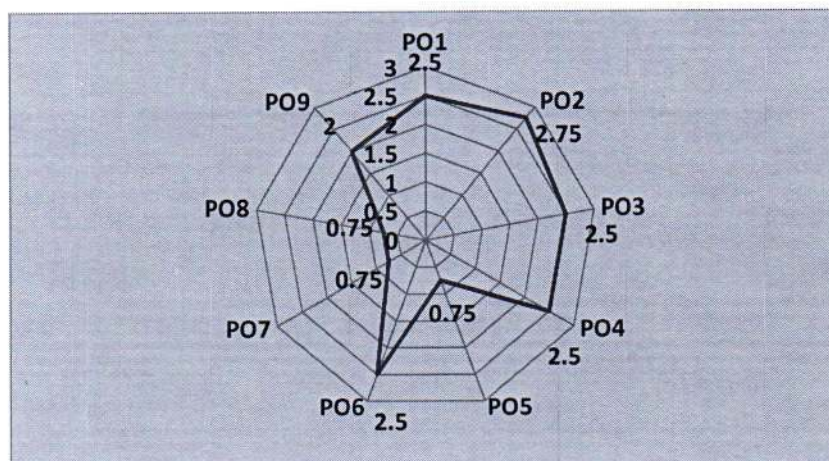


Figure 59. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% - 2, >60 % to 3. (Fig. 60)

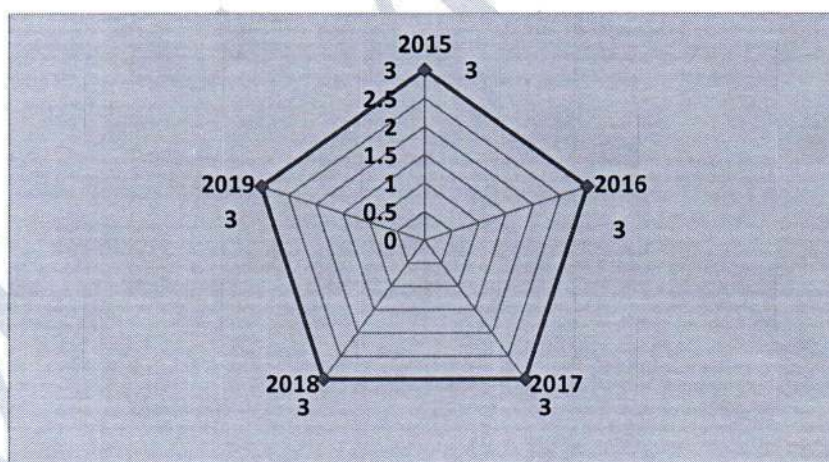


Figure 60. Program Attainment Score
Criteria: Pass (%) <40 - 1, 40 to 60 -2, >60 -3]

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60%

and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 61)

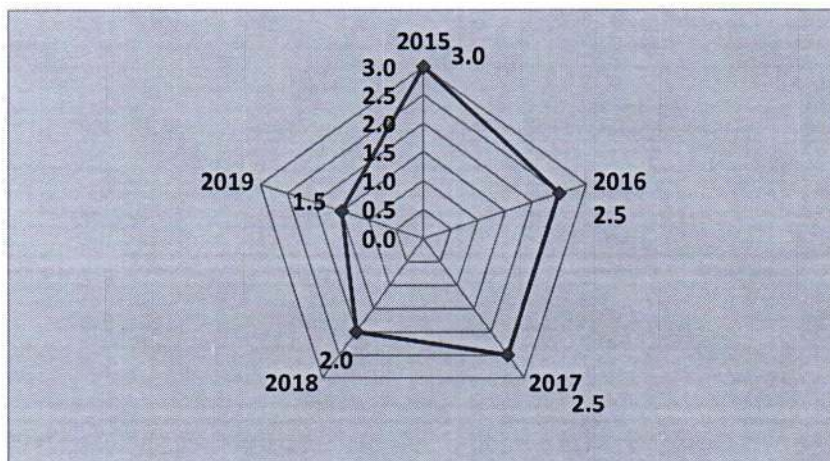


Figure 61. Course Attainment Score
Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above.

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course. Mapping of PO-Course needed relook. Although program attainment score was satisfactory and course attainment score was not satisfactory on 2019.

Measure initiated

- Post graduate training program was reviewed. Focused teaching and training session planed. Pedagogy was proposed.
- E-portfolio started for recording the curricular and co-curricular activities.

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14. Pathology

Program Educational Objective (PEO)

PEO 1. Pathologist who can provide all diagnostic information in the fraternity of laboratory medicine especially in histopathology, clinical pathology, and transfusion medicine with a knowledge of general principles and methodology with interpretation of values

PEO 2. Understands health care system and be a leader and as a part of a team, to develop an attitude of cooperation with colleagues, and interact with the patient and the clinician or other colleagues to provide the best possible diagnosis or opinion.

PEO 3. Communicator (Affective domain) Interpret and correlate clinical and laboratory data so that clinical manifestations of diseases can be explained.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in diagnostic field and capable to teach Pathology to undergraduates, postgraduates, nurses and paramedical staff including laboratory personnel

PEO 5. Professional who understands and follows the principle of bio-ethics / ethics related to health care system and biomedical waste disposal, quality system and ensures good clinical laboratory practices

Program outcome (PO)

PO 1: Provide a definitive diagnosis in haematology, histopathology and Cytology

PO 2. Practice safe blood transfusion with management of its adverse reactions

PO 3. To interpret all routine diagnostic tests and handle in trouble shootings.

PO 4. Identify patient safety and system approach to different errors in laboratory in phases like pre-analytical, analytical and post-analytical.

PO 5. Communicate with colleagues, faculty and stake holders of the health care system.

PO 6. Update with recent advances and Develop communication skills to word reports and professional opinion as well as to educate students and interact with patients, peers and paramedical staff, and for effective teaching.

PO 7. Maintaining proper etiquette in dealings with patients, relatives and other health personnel and to respect the rights of the patient including the right to information and second opinion.

PO 8. Perform Self-directed Learning and Critical appraisal of medical literature.

PO 9. Develop and execute a protocol for a scientific research project, collect and analyze the data and scientifically communicate to others.

Course (C)

C 1. General Pathology, Pathophysiology, Immunopathology and Cytopathology

C 2. Systemic Pathology

C 3. Haematology, Transfusion Medicine (Blood Banking) and Laboratory Medicine.

C 4. Recent advances and Applied aspects.

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and CO are defined. Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 62**) and PO- Course (**Fig. 63**).

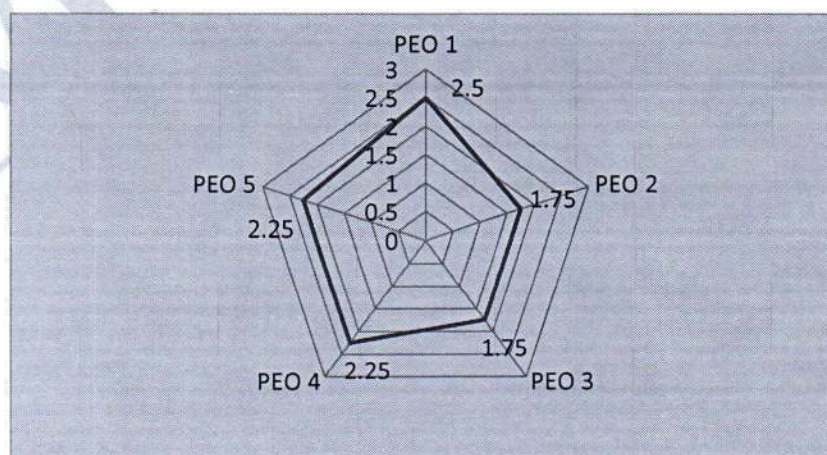


Figure 62. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

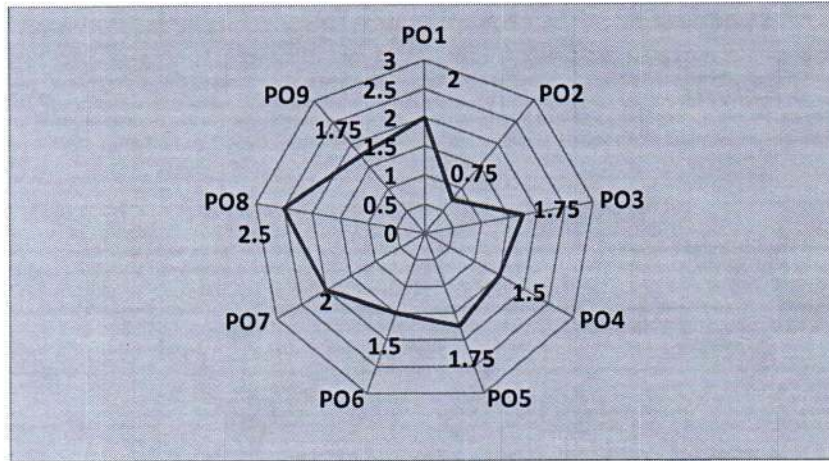


Figure 63. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Program Attainment score

To obtain attainment score for POs, the pass percentage of each year was considered. Based on this pass percentage, a graded score was allotted i. e. <40% - 1, 40 to 60% -2, >60 % to 3. (Fig. 64)

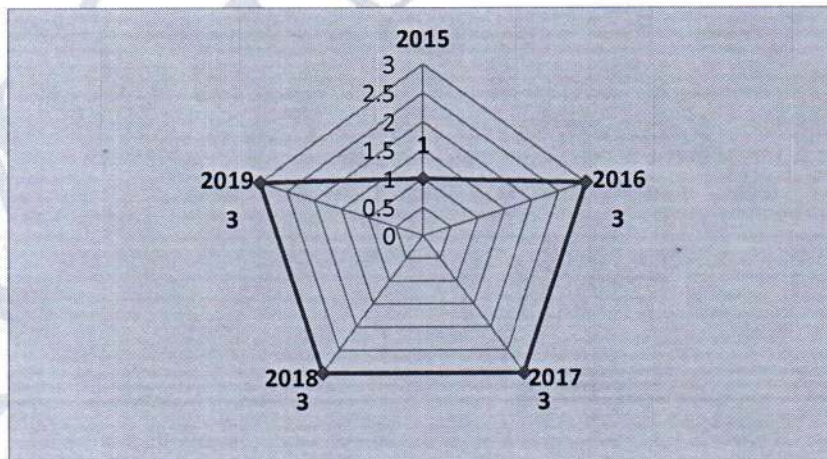


Figure 64. Program Attainment Score
Criteria: Pass (%) <40 – 1, 40 to 60 -2, >60 -3.

Course Attainment Score

To obtain attainment score for course, summative assessment mark of individual student was being considered. The components of summative assessment were university examinations theory, practical/clinical and viva-voce. Based on the consolidated mark obtained in a course, individual student was given a score (0 - < 50 %marks out of the maximum relevant marks; 1-50 to 54%; 2-55 to 59%;3-60% and above). All the scores in that course were added and divided by the total no of the student appear for that score. The obtained result was considered as course attainment score. (Fig. 65)

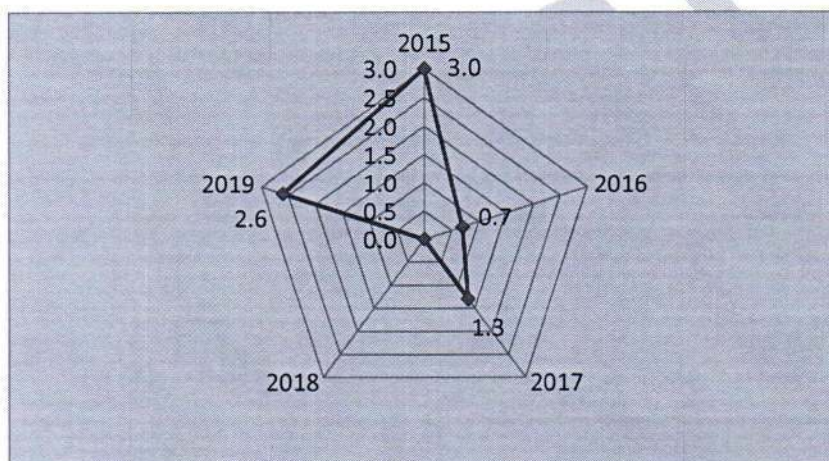


Figure 65. Course Attainment Score

Criteria: Aggregate mark in SA 0 - < 50 %; 1-50 to 54%; 2-55 to 59%;3-60 and above)

Outcome analysis

Outcome analysis revealed satisfactory mapping of PEO-Course. Mapping of PO-Course needed relook. Program attainment score was not satisfactory in the year 2015. Course attainment score was not satisfactory in the year 2016, 2017 and 2018.

Measure initiated

- Post graduate training program was reviewed. Focused teaching and training session planed.
- E-portfolio started for recording the curricular and co-curricular activities.

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15. Community Medicine

Program Educational Objective (PEO)

PEO 1: Public health Specialist who can provide comprehensive primary health care, assess community needs and provide suitable intervention at all levels.

PEO 2. Leader and team member who understand health care system and act to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principle of bio-ethics / ethics related to health care system.

Program outcome

PO 1. Identify, manage, prioritize the health needs and demands of the community and formulate an appropriate plan of action.

PO 2. Implement and evaluate health programs, assess and allocate resources appropriately and manage health information systems.

PO 3. Establish surveillance system and respond to public health threats.

PO 4. Plan and execute a research study, perform appropriate bio-statistical analysis and prepare reports.

PO 5. Assist in undergraduate teaching learning activities and evaluation.

PO 6. Identify patient safety and system approach to medical errors.

PO 7. Identify the needs of patients and society and provide cost effective preventive care and advocacy.

PO 8. Communicate with stake holders of the health care system.

PO 9. Perform SDL and Critical appraisal of medical literature.

PO 10. Informed consent and shared responsibility.

Course (C)

C 1. General epidemiology, biostatistics, demography, behavioural & environmental sciences

C 2. Epidemiology, prevention & control of communicable & non- communicable diseases

C 3. Health care & special groups, nutrition.

C 4. Healthcare administration and health management

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 66**) and PO- Course (**Fig. 67**).

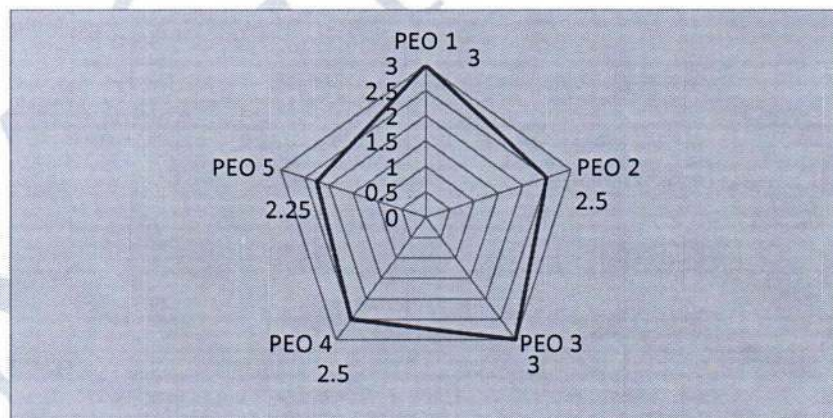


Figure 66. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

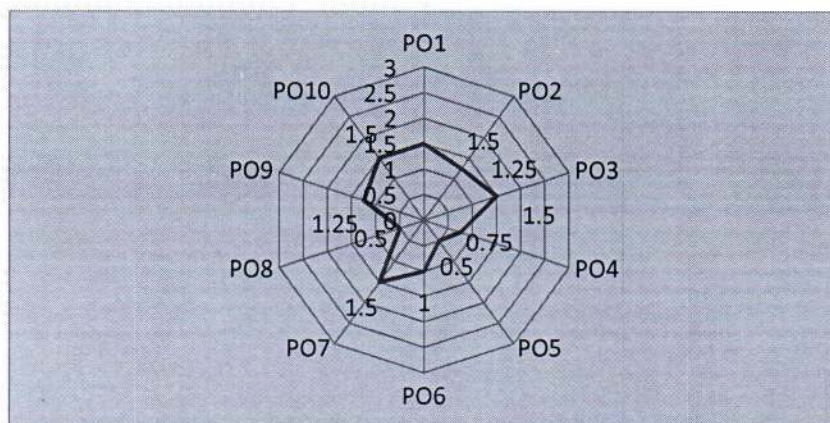


Figure 67. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Outcome analysis

Although PEO & Course mapping analysis and PO & Course mapping analysis was satisfactory course attainment score could not be assessed as there was no examination.

E-portfolio started for recording the curricular and co-curricular activities.

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16. Microbiology

Program Educational Objective (PEO)

PEO 1. Professional who understands and follows the principle of bio-ethics / ethics related to health care system.

PEO 2. Specialist who can provide services in basic as well as advanced laboratory investigations

PEO 3. Communicator possessing adequate communication skills to convey required information in an appropriate manner in various health care setting.

PEO 4. Leader and a team member who understands health care system and act to provide safe patient care with accountability and responsibility.

PEO 5. Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher.

Program outcome

PO 1. Demonstrate competence as a clinical microbiologist

PO 2. Uphold the prestige of the discipline amongst the fraternity of doctors.

PO 3. Demonstrate application of microbiology in a variety of clinical settings to solve diagnostic and therapeutic problems along with preventive measures.

PO 4. Establish good clinical microbiological services in a hospital and in the community in the fields of bacteriology, virology, parasitology, immunology and mycology.

PO 5. Demonstrate effective communication skills required for the practice of clinical microbiology and while teaching undergraduate students.

PO 6. Interact effectively with the allied departments by rendering services in basic as well as advanced laboratory investigations.

PO 7. Play a pivotal role in hospital infection control, including formulation of antibiotic policy and management of biomedical waste.

PO 8. Acquire skills in conducting collaborative research in the field of Microbiology and allied sciences.

PO 9. Conduct such clinical/experimental research as would have significant bearing on human health and patient care.

PO 10. Plan, executes, analyze and present the research work in medical microbiology.

PO 11. To acquire various skills for collaborative research.

PO 12. Plan, execute and evaluate teaching assignments in Medical Microbiology.

PO 13. To participate is various workshops/seminars/journal clubs/demonstration in the allied departments.

Course (C)

C 1. General Microbiology& Immunology

C 2. Systematic Bacteriology

C 3. Virology, Mycology & Parasitology

C 4. Applied microbiology and Recent advances

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Courses are defined .Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0'being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 68**) and PO- Course (**Fig. 69**).

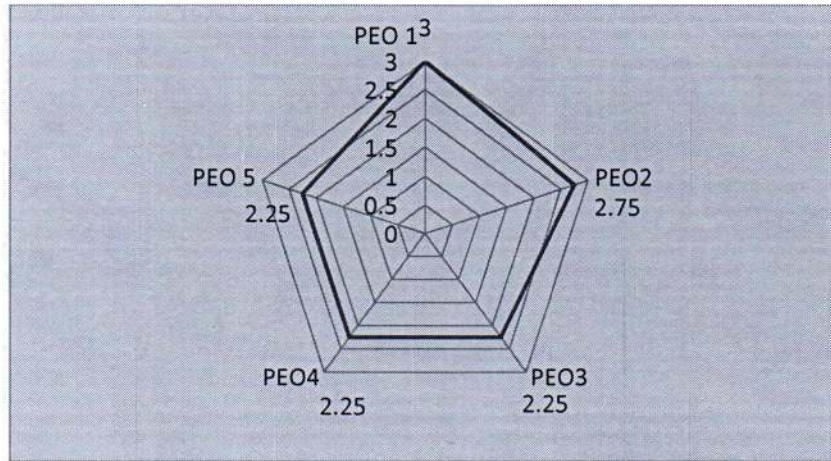


Figure 68. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

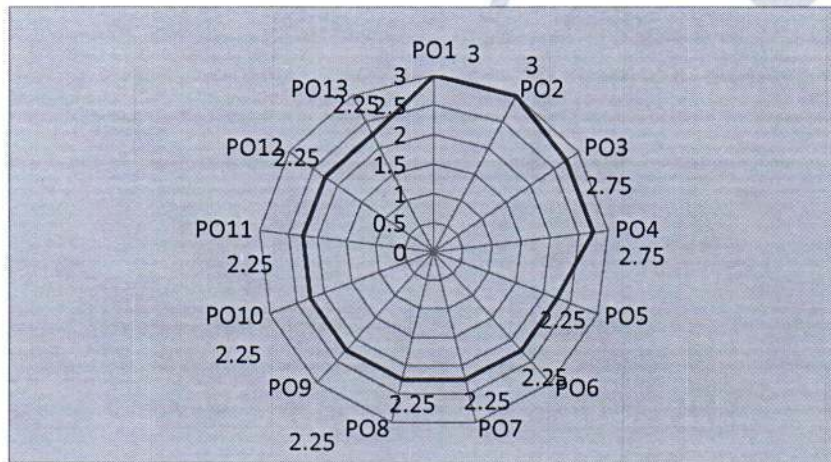


Figure 69. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Outcome analysis

Although PEO & Course mapping analysis and PO & Course mapping analysis was satisfactory course attainment score could not be assessed as there was no examination.

E-portfolio started for recording the curricular and co-curricular activities.

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17. Pharmacology

Program Educational Objective (PEO)

PEO 1. Specialist who can explain clearly concepts and principles of Pharmacology and therapeutics.

PEO 2. Leader and team member who understands health care system and act to provide safe patient care by training the health care professionals with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in the field of Pharmacology and therapeutics and able to perform the role of researcher and teacher

Program outcome

PO 1. Able to explain clearly concepts and principles of Pharmacology and therapeutics.

PO 2. Apply and integrate the knowledge of pathophysiology of diseases and its modulation by drugs.

PO 3. Acquire Knowledge of the various recent advances in pharmacology pertaining to new drug development and treatment approach of various disorders.

PO 4. Able to effectively teach undergraduate students in medicine (MBBS, Dentistry and Nursing) so they become competent healthcare professionals and able to contribute to training of postgraduate trainees.

PO 5. Perform major in vivo and in vitro animal experiments with proper animal handling and care according to guidelines proposed for animal research.

PO 6. Demonstrate the skills in prescription writing, auditing and effectively communicate with the patients, health care team, faculty and peers on the rational use of drugs, adverse drug reaction reporting and medication adherence.

PO 7. Demonstrate and apply the knowledge of basics of research methodology, ethics, biostatistics and important guidelines to perform animal and human

research and to have the potential ability to pursue further specializations and eventually be competent to guide students.

PO8 Apply skills for self-directed learning to keep up with developments in the field and to continuously build to improve on skills, expertise and perpetual professional development.

Course (C)

- C 1. General pharmacology.
- C 2. Systemic pharmacology.
- C 3. Clinical pharmacology.
- C 4. Recent advances in pharmacology.

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and CO are defined Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 70**) and PO- Course (**Fig. 71**).

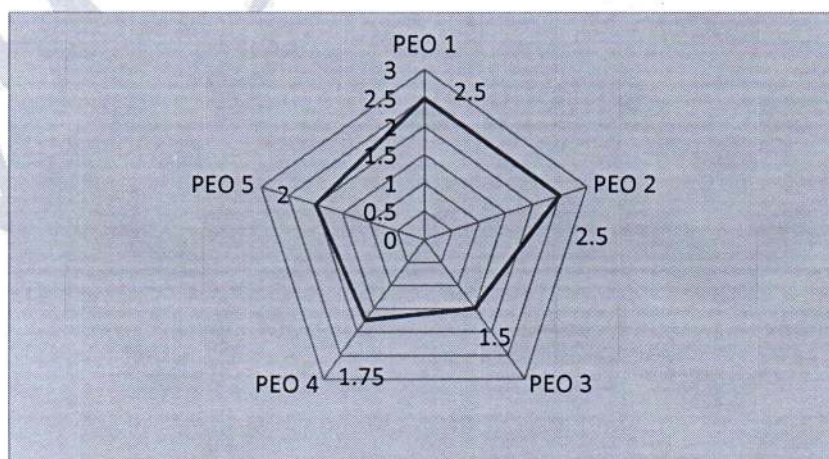


Figure 70. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

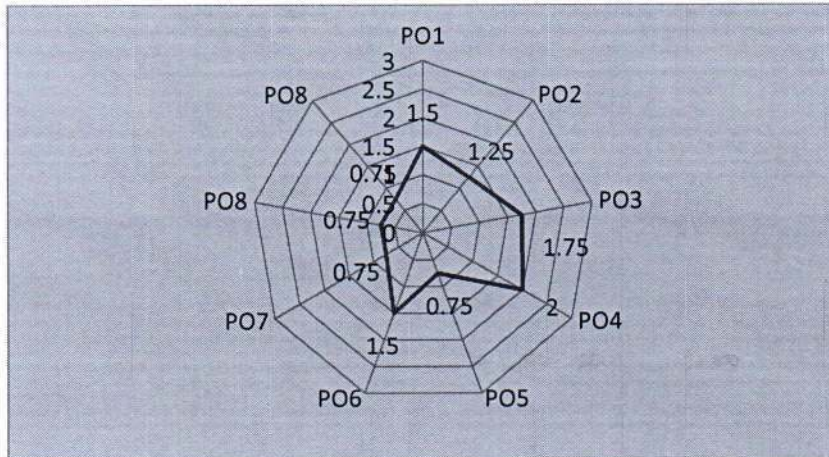


Figure 71. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Outcome analysis

Although PEO & Course mapping analysis and PO & Course mapping analysis was satisfactory course attainment score could not be assessed as there was no examination.

E-portfolio started for recording the curricular and co-curricular activities.

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18. Forensic Medicine & Toxicology

Program Educational Objective (PEO)

PEO 1. Professional who aids in application of medical knowledge and methodology for the resolution of legal questions and problems for individuals and society.

PEO 2. Professional who can observe, document, collect, assess, and make scientific interpretation of medical evidence deriving from clinical and post mortem investigations required for the different fields of law, including criminal, civil, work, family, and administrative law.

PEO 3. Professional who demonstrate knowledge and comprehension of toxicological principles in diagnosing, treating, investigating, analysing, documenting and reporting a case of suspected poisoning.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher

PEO 5. Leader, communicator and team member who understands the Medico-legal requirements of the health care system and act to provide safe patient care with accountability and responsibility.

Program outcome

PO 1. Become an expert in Forensic Medicine.

PO 2. Identify and define medico-legal problems as they emerge in the community and work to resolve such problems by planning, implementing, evaluating and modulating Medico-legal services.

PO 3: Undertake medico-legal responsibilities and discharge medico-legal duties in required settings.

PO 4. Keep abreast with all recent developments and emerging trends in Forensic Medicine, Medical Ethics and the law

PO 5. Deal with general principles and practical problems related to forensic, clinical, emergency, environmental, medico-legal and occupational aspects of toxicology.

PO 6. Deal with medico-legal aspects of Psychiatry, mental health and drug addiction.

PO 7. Impart education in Forensic Medicine and Toxicology to under-graduate and postgraduate students with the help of modern teaching aids.

PO 8. Assess the students' knowledge and skills in the subject of Forensic Medicine.

PO 9. Oriented to research methodology and conduct of research in the subject

Course (C)

C 1. Applied basic medical science

C 2. Clinical forensic medicine and medical jurisprudence.

C 3. Forensic pathology and toxicology

C 4. Applied aspects of clinical disciplines, forensic sciences and recent advances in forensic medicine and forensic psychiatry.

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and CO are defined. Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO- Course (**Fig. 72**) and PO- Course (**Fig. 73**).

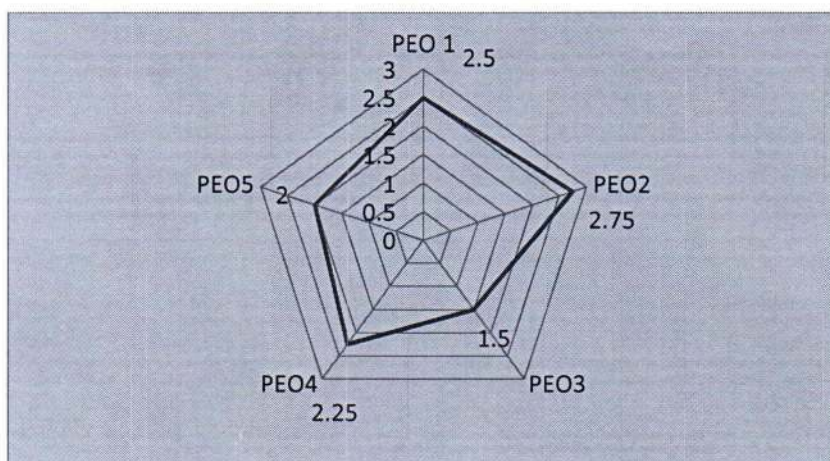


Figure 72. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

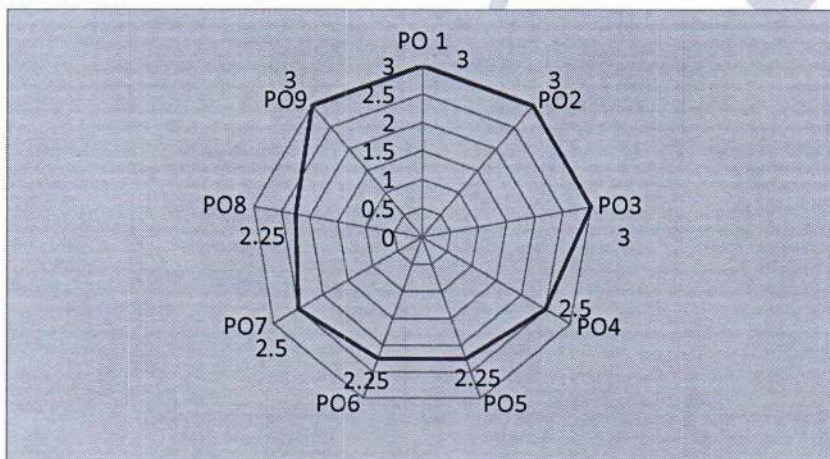


Figure 73. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Outcome analysis

Although PEO & Course mapping analysis and PO & Course mapping analysis was satisfactory course attainment score could not be assessed as there was no examination.

E-portfolio started for recording the curricular and co-curricular activities.

19. Anatomy

Program Educational Objective (PEO)

PEO 1. Specialist who has acquired the competencies pertaining to the subject of Anatomy that are required to be practiced at all levels of health system and has acquired skills in educating medical & paramedical professions

PEO 2. Leader and team member who understands health care system and act to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher.

PEO 5. Professional who understands and follows the principle of bio-ethics / ethics related to health care system

Program Outcome (PO)

PO 1. Acquire in depth knowledge of gross anatomy, histology, embryology, neuroanatomy, genetics, surface anatomy, radiological anatomy, comparative anatomy, applied aspects and recent advances of the above mentioned branches of anatomy to clinical practice.

PO 2. Comprehend the principles underlying the structural organization of body and correlate with its function.

PO 3. Should obtain the necessary skills in organizing/delivering lectures by using different methods of teaching learning & using innovations to make presentations of the subject topics and research outputs. Should also get involved in integrated teaching programs and e learning activities.

PO 4. Demonstrates knowledge about human bones, surface marking of clinically important structures, identifying important structures visualised by imaging techniques.

PO 5. Demonstrates anatomical basis of common clinical procedures expected to be performed by a basic medical doctor & acquire skills of integrating anatomy with other disciplines

PO 6. Acquire mastery in dissection skills, embalming, museum preparation, tissue preparation, staining, karyotyping.

PO 7. Should acquire knowledge in the basic aspects of Biostatistics and research methodology & recent advances

PO 8. Communicate effectively with peers, students & teachers from various medical and paramedical fields.

PO 9. Ability to use computer applications like Microsoft office to search scientific databases & acquire skills in paper and poster presentation and publish papers

PO 10. Demonstrates honest work ethics & empathetic behavior with students & colleagues. Due respect in handling cadaver during dissection. Humane touch while demonstrating living surface marking.

Course (C)

C 1. Gross Anatomy

C 2. Embryology, microscopic anatomy and genetics

C 2. Neuroanatomy

C 4. Applied Human Anatomy and recent advances in anatomical sciences

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO-Course (**Fig. 74**) and PO-Course (**Fig. 75**).

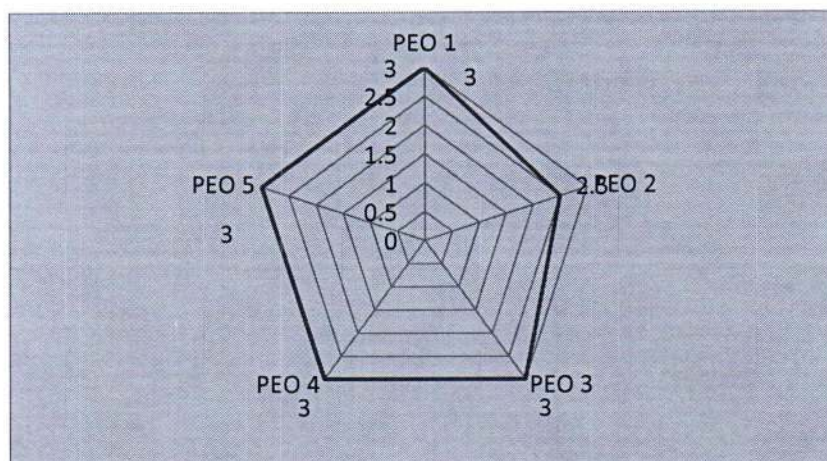


Figure 74. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

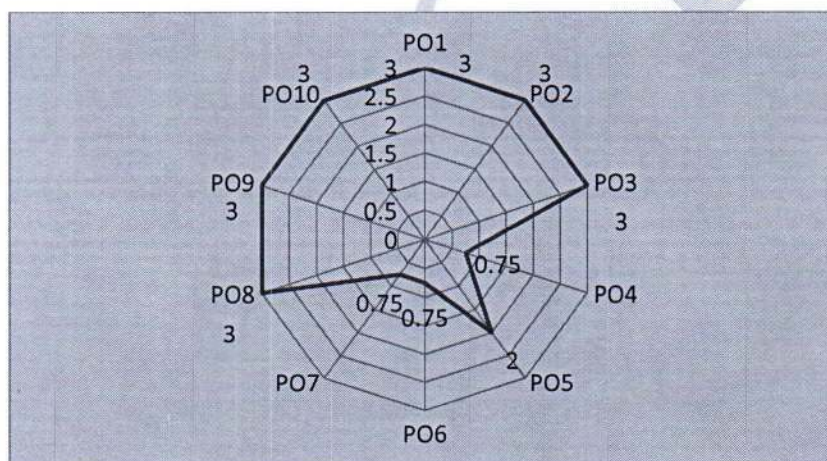


Figure 75. PO & Course (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Outcome analysis

Although PEO & Course mapping analysis and PO & Course mapping analysis was satisfactory course attainment score could not be assessed as there was no examination.

E-portfolio started for recording the curricular and co-curricular activities.

20. Biochemistry

Program Educational Objectives (PEO)

PEO 1. Specialist who can provide comprehensive care related to Diagnostic services in biochemistry over and above the physician of first contact.

PEO 2. Leader and team member who understands health care system and act to provide safe patient care with accountability and responsibility.

PEO 3. Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.

PEO 4. Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of researcher and teacher

PEO 5. Professional who understands and follows the principle of bio-ethics / ethics related to health care system.

Program Outcome (PO)

PO 1. Able to explain clearly concepts and principles of biochemistry regarding Biomolecules human nutrition, metabolism, metabolic interrelationships, metabolic homeostasis, molecular and cell biology, body defence against xenobiotics and pathogens, including correlations of these with cellular and molecular processes involved in health and disease.

PO 2. Biochemistry of principles of various laboratory estimations, instrumentations and rationale underlying biochemical laboratory investigations and interpreting the data.

PO 3. To set up/supervise/manage a diagnostic laboratory in Biochemistry in a hospital including modern laboratory techniques, ensuring total quality assurance in clinical biochemistry, and providing a reliable support service

PO 4. Provide clinicians with consultation services for diagnostic tests in biochemistry and in interpretation of laboratory results.

PO 5. The student should be able to effectively teach undergraduate students in medicine and allied health science courses so they become competent health care

professionals and able to contribute to training of undergraduate and post graduate students.

PO 6. Communicate with stake holders of the health care system

PO 7. Should be able to carry out a research project from planning to publication and be able to pursue academic interests and continue life-long learning to become more experienced in all the above areas.

PO 8. Effectual use of nutrition, lifestyle, cost of diagnostic tests and genetic counselling and exhibits shared responsibility.

Course (C)

C 1. Biomolecules, cell biology, biochemical techniques, biostatistics and research methodology, basics of medical education in teaching and assessment of biochemistry

C 2. Enzymes, bioenergetics, biological oxidation, metabolism of biomolecules, intermediary metabolism and regulation, inborn errors of metabolism and nutrition.

C 3. Molecular and cancer biology, immunology and effects of environmental pollutants on the body

C 4. Clinical biochemistry and molecular diagnostics related to different body systems/organs, endocrinology, and recent advances in biochemistry

Mapping of Course, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Course are defined. Then, a correlation was established between Courses and POs and Courses and PEOs on the scale of 0 to 3 ('0' being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO-Course (**Fig. 76**) and PO-Course (**Fig. 77**).

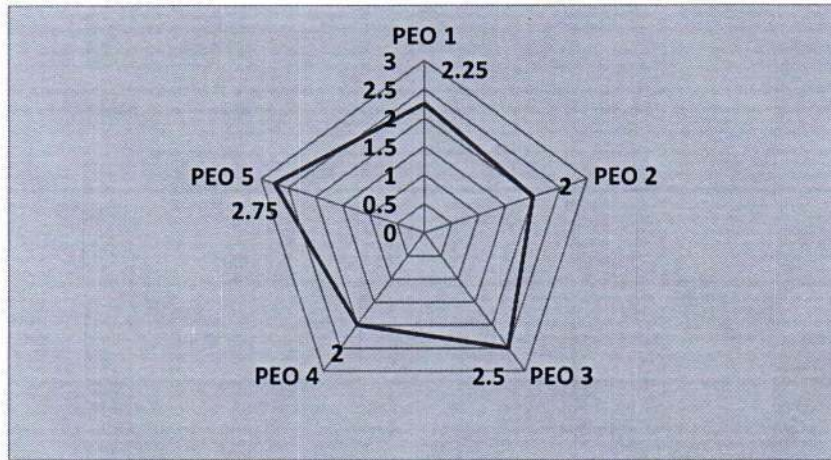


Figure 76. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

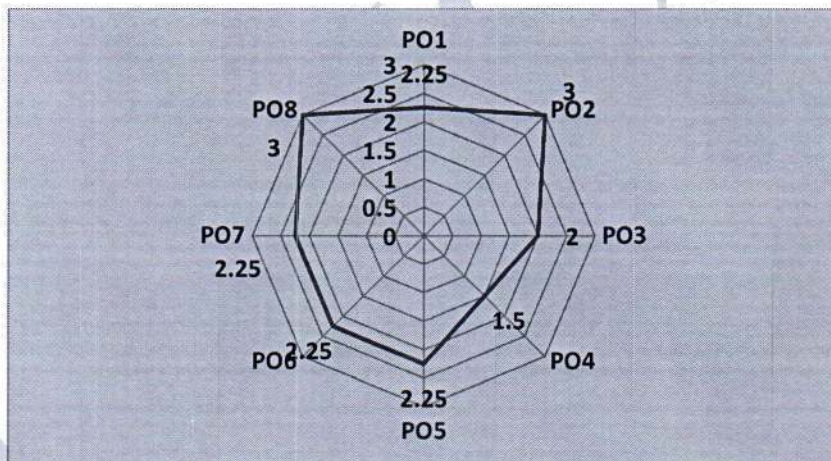


Figure 77. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Outcome analysis

Although PEO & Course mapping analysis and PO & Course mapping analysis was satisfactory course attainment score could not be assessed as there was no examination.

E-portfolio started for recording the curricular and co-curricular activities.


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21. Physiology

Program Educative Objectives (PEO)

PEO 1: Specialist who can provide comprehensive care related to physiology to the community.

PEO 2: Leader and team member who understands health care system and acts to provide safe patient care with accountability and responsibility.

PEO 3: Communicator possessing adequate communication skill to convey required information in an appropriate manner in various health care setting.

PEO 4: Lifelong learner keen on updating oneself regarding the advancement in the health care field and able to perform the role of a researcher and a teacher

PEO 5: Professional who understands and follows the principle of bio-ethics / ethics related to health care system.

Program Outcome (PO)

PO 1. Teach effectively the basic physiological mechanisms of human body with reference to their implications in the pathogenesis of diseases and management to undergraduate medical, paramedical and other basic science students.

PO2. Serve the community as competent physiologist by imparting knowledge on physiological understanding of health problems.

PO 3. Interact with the allied departments and render services in advanced laboratory investigations.

PO 4. Render appropriate advice/service to the clinicians as and when it is required.

PO 5. Possess necessary knowledge, skills and attitude to carry out research in Physiology,

PO 6. Apply the principles of professionalism and ethics in rendering the service.

Course (C)

- C 1. General Physiology including history of Physiology
- C 2. Systemic Physiology (system providing transport, nutrition and energy)
- C 3. Systemic Physiology (system concerned with regulation, neural control and procreation)
- C 4. Applied Physiology including recent advances

Mapping of Courses, POs and PEOs

As postgraduate medical program is regulated by the Medical Council of India, roles and syllabus are defined by it. Based on that PEO, PO and Courses are defined. Then, a correlation was established between Course and POs and Course and PEOs on the scale of 0 to 3 (‘0’ being no correlation, 1 being the low correlation, 2 being medium correlation and 3 being high correlation) based on their perception. The average score was calculated and was correlated with the courses as a whole. Radar graph was plotted to find out the level of correlation between PEO-Course (**Fig. 2**) and PO-Course (**Fig. 3**).

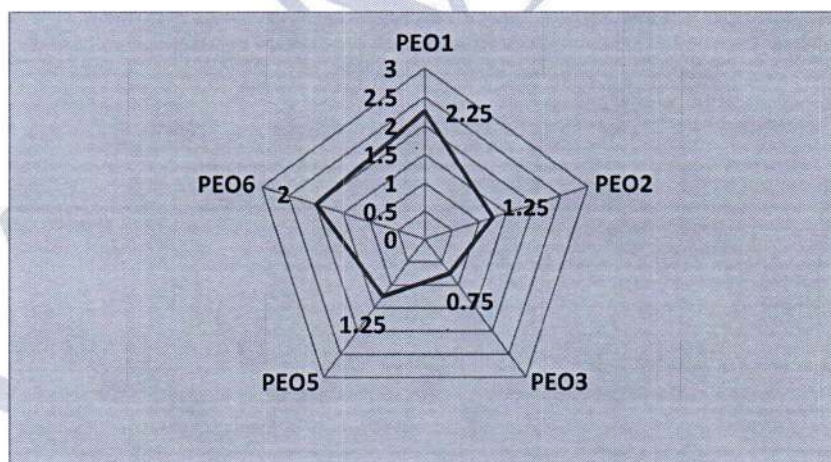


Figure 78. PEO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

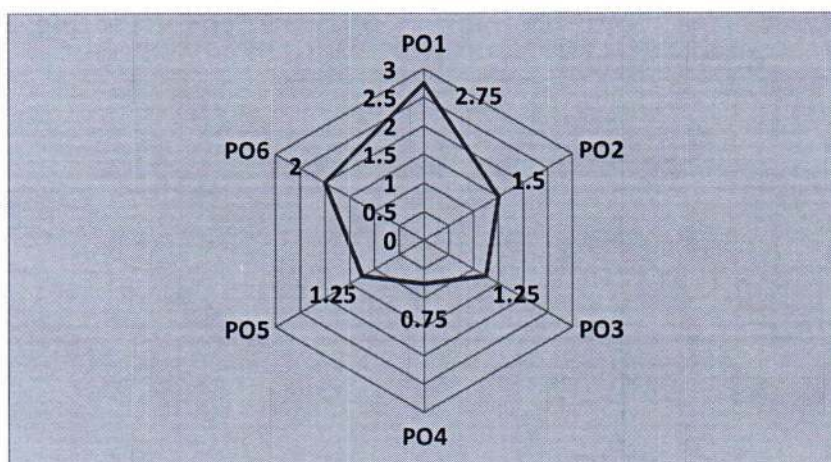



Figure 79. PO & Course mapping analysis (0 - no correlation, 1 - low correlation, 2 - medium correlation, 3 - high correlation)

Outcome analysis

Although PEO & Course mapping analysis and PO & Course mapping analysis was satisfactory course attainment score could not be assessed as there was no examination.

E-portfolio started for recording the curricular and co-curricular activities.


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