2.5.3

Dermatology department Reforms



DR. VASANTRAO PAWAR MEDICAL COLLEGE, HOSPITAL AND RESEARCH CENTRE, VASANTDADA NAGAR, ADGAON, NASHIK 422003

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Blue Printing of PG question papers

Skeleton of the assessment tool

Question pattern/type	No. of items	Marks	Marks including options		
LAQs	2 (25 marks each)	50	50		
SAQs	5 out of 6 (10 marks each)	50	60		
Total	8	100	110		







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MD DERMATOLOGY	TOPICS INCLUDED
PAPER 1	Basic science in relation to dermatology, leprosy and HIV/ AIDS
PAPER 2	Skin diseases, Dermatotherapeutics, Cosmetology, Dermatosurgery and laser
PAPER 3	HIV/ AIDS, VENEREOLOGY AND LEPROSY
PAPER 4	RECENT ADVANCES





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DIPLOMA DERMATOLOGY	TOPICS INCLUDED
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Self-assessment for postgraduate students:

Self-assessment is practiced in clinical batch postings. One student is asked to demonstrate the correct technique of the following tests:

- 1. KOH mounting of fungal scraping
- 2. Slit skin smear examination

The peer students will comment on the discrepancies in the technique of the performing student. Finally the teacher summates the correct method of the technique. Thus self-assessment enhances self-directed student learning.

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Station 1:KOH mounting of fungal scraping

Checklist:

Steps	Yes/No
Greet the patient	ē
Is the procedure explained to the patient?	E 0
Is proper position given to the patient?	
Is privacy of patient maintained?	
Use of proper sterile gloves, glass slide, blade	
Is there natural source of light?	
Is the fan switched off or window shut?	
Are the collected scraping fine enough?	
Is there any air bubble on placing the cover slip?	8
Is the time given for lysis of fungal elements enough?	
Identifying fungal elements under a microscope	

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Station 2: slit skin smear examination.

Checklist:

Steps	Yes/No
Greet the patient .	ts 1250
Is the procedure explained to the patient?	
Is proper position given to the patient?	* *
Is privacy of patient maintained?	1
Use of proper sterile gloves, glass slides, face mask, blade)
Use of proper light focus	
Is there enough ventilation in the room?	
Are the sites chosen for taking smear correct?	
Is the technique for taking the smear correct?	(4)
Is the technique for staining the slide correct?	
Observing the acid fast bacilli under a microscope.	2
	(*)



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Station 3: Demonstration of Copper T Insertion.

Checklist:

Steps	Yes/No
Greet the patient, Take proper consent	
Is the procedure explained to the patient?	
Is proper position given to the patient?	
Is privacy of patient maintained?	п
Use of proper sterile gloves.	
Use of proper light focus	
Introduction of speculum	
Carry out CuT insertion under all aseptic precautions	
Give side effects of CuT	- 14 - 15 - 16 - 16 - 16 - 16 - 16 - 16 - 16

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Station 4: Demonstration of PAP Smear.

Checklist:

Steps	Yes/No
Greet the patient	
Is the procedure explained to the patient?	
Is proper position given to the patient?	
Is privacy of patient maintained?	
Use of proper sterile gloves.	
Use of proper light focus	
Introduction of speculum	
PAP Smear taken from transformation zone with Ayer's spatula	
PAP Smear fixing	=
Making a smear on slide	
Fixing smear	
Labelling the slide	

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Station 5: Demonstration Of Colposcopy.

Checklist:

Yes/No	100
	Yes/No

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Case based Discussion (CbD)

Assessor's Registra	ation Number	Trainee	s Number	Date of Assessment (DD/MM/				
Assessor's	Name		·					
	10710007							
Year of specialty train	ing: ∐1(513) 🔲 2 (ST4)	3 (5T5)	(516) 📙 5(517)				
Case complexity:	☐ Low	☐ Moderate	☐ Hìgh	8				
Basis for discussion:	☐ Outpati	ent record / letter	☐ Discharge Sumr	nary 🗌 Inpatier	nt record	er		
Brief description of ca including curricula are covered:	200017					\$		
Well below expectation for stage of training	Below expectation for stage of training	Borderline for stage of training	Meets expectation for stage of training	Above expectation for stage of training	Well above expectation for stage of training	Unable to comment*		
1. Medical Record Kee	ping							
2. Clinical Assessment		_ 🗀	. 🗆 .					
3. Investigations and re			141					
4. Management plan		147	_			_		
5. Follow-up and future	THE PARTY OF THE P		-					
6. Overall clinical judge								
o. Overall clinical judge	ment	П	П			п		
*Unable to comment – Which aspects of the e		in the second of		iour and feel unable	to comment.			
		1		T 20		#3 ==		
Any suggested areas f	or development	t (mandatory field)						
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Agreed action (mandat	ory field)							
	П			2.				
Trainee's Signature	11		Assesso	r's Signature	AD	GAON SHIK		
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Mini-CEXAssess	mentForm	De	rmatolog	y.		9
Date		2.8	Patient	age		
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Patient problem				· ·		1 100
Candidate					ti.	
Setting	ED/Ward/O	utpatient cli	nic/Other			
Assessor						7/2
Competency	Counselling	/Patient edu	cation	()		tit.
1. Medical interview				8		īā
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2. Physical examinat			a	bove expect	ea	
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3. Professionalism/h			735			
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4. Counselling skills	Carried State of the State of t			boye expect		
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5. Clinical judgemen 1 2	3 4	1870	6 7	8	9	
	isfactory	satisfactory		bove expecte		
6. Organisation/effic	iency (not obs	erved 🗆)	9			
1 2	3 4		6 7	. 8	.9	
7. Overall clinical con	isfactory	satisfactory	а	bove expecte	ed	
1 2	3 4	5	6 7	8	9	
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To what degree was the	nis case an adeq	uate test of th	e doctor's a	bilities?		52
1 2	3 4	5	6 7	8	9	41
inadequate	etest	adequatetest	· · · ·	uperior test		
How did the candidate	e perform?	e: =		079		
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□-Did not meet expec	tations □-Borde	erline □-Metex •	xpectations	· 🗆-Above	eexpectations	ADGAON NASHIK
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JOURNAL CLUB PRESENTATION ASSESSMENT

Date of Assessment									
Name		:8							
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5. Answeringquestions6. Quality of				125					
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7. Globalrating				.*					
8. Based on this assessment,	how	would	l you r	ate the	Trainee'sp	erforn	nance		M.
at this stageoftraining?		expectatio			sfactory	bettertl		u/c	= 23
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Please print Assessor's name									
Assessor's Registration numb	er 🗌				Date	:	AWAGA	ADGAON	STATE OF THE STATE
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Mini-Assessed Clinical Encounter

Date of Assessment Surname:	Foren	20 ame:	8 4		
Setting:Gen.Hosp OPD	In-patien	t 🗆 Cris	is/Emergency	O CMHT D	iag 1:F □□
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1 History tolding	1 2	3	· 4	5 6	u/c
 History taking Communication skills 			. 🛘		
3. Clinical judgement		П	П		
4. Professionalism			. 0		
5. Organization/ efficiency		□,	. 0		
. Overall clinicalcare					
7. Based on this assessment	. how woul	d vou ra	te the Trainee	'sperformance	
at this stageoftraining?	Belowexpectat		satisfactory bet		u/c
Anything especially good?		S	uggestions for	development	
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Please print Assessor's name	j	ti.			
Assessor's Registration numb	oer	u se	Da	ate:	ADGAON NACHUK



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OSCE

For PG students 5 stations will be set; students will rotate through each Station. There will be examiners who will assess the students. At each Station task will be given to the students to judge communication, clinical Practical skills. Examiner will be appointed for each station. At each station there will be interaction between examiner and students. The marking Scheme for each station is structured. Check list is prepared for each station Based on skills to be tested. Student instructions are prepared.

Stations:

Students Instruction:

Station I- History taking

A 35 years male presents in the OPD with complaints of itching and multiple violaceous lesions over body.

You are attending resident doctor. Take history mentioning course, duration of symptoms, precipitating and relieving factors.

Time -30 minutes

Station II- Drug history

Take history regarding skin treatment, regular medications, over the counter drugs
Time-15 minutes

Station III- Clinical examination

Observe and interpret the morphology of the lesion colour, shape, regularity and give a differential diagnosis

Time-10 minutes

Station IV - Investigation and Interpretation of the biopsy



Refer all investigations for clinical scenario and interpret the histopathological findings of the biopsy provided. Provide a possible diagnosis

Time: 10 minutes

Station V-Treatment

Interpret all the therapies for the clinical case including systemic, topical, bioloigics if any, education, counselling and follow up

Time: 5 minutes

Examiner instructions:

Station 1: History taking Skills

Ability to establish rapport with patient - 5 marks

Able to elicit pertinent positive and negative history during history of presenting illness to help to formulate a differential diagnosis 10 morks

Able to elicit relevant Family and personal history - 5 marks

Station II: Drug history

Ability to establish current treatment if any - 5 marks

Able to elicit intermittent use of over the counter drug – 15 marks

Station III: Clinical examination

Ability to identify the primary lesion-5 marks

Able to mention the morphology, shape, size, colour, regularity and other related clinical and specific nature -5 marks

Provide a differential diagnosis - 10 marks



Station IV: Investigation and interpretation of biopsy

Able to enlist the specific, appropriate and needful lab investigation and besdside clinical investigation - 10 mark.

Able to interpret the histopathological changes seen in biopsy – 10 marks

Able provide a differential diagnosis -5 marks

Station V: Treatment

Ability to establish rapport-5 marks

Able to explain the role, mechanism of the drug, procedure for the same, risks and benefits, potential side-effects -10 marks

Able to clarify any doubts, answer any questions pit forth - 5 marks

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