

**Postgraduate Institute of Medicine of Sri Lanka  
University of Colombo**

# **Regulations & Guidelines**

**for**

**MD (Medicine)**

**This prospectus is applicable from 1.1.2004**

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## GENERAL INTERNAL MEDICINE

### 1. INTRODUCTION

The following is an outline of the programme of training and examination leading to the degree of MD (Medicine) and Board Certification in Medicine and allied subjects.

The programme shall consist of five stages with two examinations; Qualifying Examination for the MD Programme in Medicine (the equivalent of the former MD Part I) and the MD (Medicine), and a supervised period of training in centres approved by the Board of Study in Sri Lanka and abroad.

The Institute recommends that candidates prepare for the examinations by gaining knowledge and clinical experience in hospital posts, attending and participating in postgraduate courses and programmes approved by the Board, studying up to date text-books, and by reading current medical journals available in the libraries and in the electronic medium.

### 2. OBJECTIVES

The objective of the training programme is to provide the trainee with comprehensive training in various aspects of Internal Medicine. At the end of the training, he should be competent and would have acquired enough knowledge, skills, experience and attitudes to make appropriate decisions as a specialist physician working in any part of Sri Lanka. They should be able to take part in any teaching programme for post-graduates and undergraduates.

At the end of the comprehensive training, the trainee should

- (a) learn to be kind and compassionate to their patients.
- (b) have acquired the knowledge, skills and attitudes to make accurate and safe decisions in internal medicine.
- (c) have a community based approach to clinical care
- (d) behave ethnically in clinical practice as laid down by the Sri Lanka Medical Council.

- (e) learn to communicate effectively with patients, relatives and members of the health care team.
- (f) be conscious about the cost of care.
- (g) be able to adapt to local conditions to work in any part of Sri Lanka.
- (h) learn to practice evidence based medicine
- (i) learn to respect the rules and regulations in the institution related to attendance, leave, punctuality, rosters etc.,
- (j) learn to function as a team leader.
- (k) be able to use Information Technology in clinical practice.
- (l) be able to conduct hospital meetings, seminars, audit etc.
- (m) be able to teach postgraduates, undergraduates and nursing staff.
- (n) be able to plan, conduct, participate in ethically conducted research.

### 3. GENERAL REGULATIONS

Candidates are referred to the General Regulations Book in addition to this book which deals with regard to specific regulations in medicine and allied specialities.

### 4. TRAINING PROGRAMME

#### 4.1 STAGE 1 (Qualifying Examination)

- 4.1.1 Stage I shall be the Qualifying Examination for the MD Programme in Medicine. (This is equivalent to the former MD (Part I) examination)
- 4.1.2 This examination shall consist of a Multiple choice/ (True/False) and a Best Response Question paper followed by an Objective

**Structured Clinical Evaluation (OSCE).**

**4.1.3** The eligibility requirements for entry to the Qualifying Examination for the MD Programme in Medicine that should be satisfied on or before the closing date of applications are

- (a) A medical degree registrable with the Sri Lanka Medical Council
- (b) Six months of service experience after successful completion of the internship.
- (c) Completion of six months service experience in medicine as 'first on-call' doctor, either during the internship or afterwards
- (d) Only four attempts will be allowed within a period of 5 years from the date of first attempt

**4.2 STAGE II (Registrar training)**

**4.2.1** Stage II is an in-service training period of 30 months.

**4.2.2** The eligibility requirements for entry to Stage II is the successful completion of the 'Qualifying Examination for the MD Programme in Medicine'

**4.2.3 (a)** The maximum number of trainees admitted to the training programme, will depend on the training slots available in the teaching centres.

(b) All eligible candidates should register with the Post graduate Institute of Medicine before entry to Stage II.

**Stage II consists of**

**4.2.4 (a) General Internal Medicine (1)** Twelve months of continuous training (subject to authorised leave) as a Registrar in a general medical unit in a teaching hospital under a trainer approved by the Board of Study in Medicine.

(b) **Speciality Rotation (1)** 40 weeks of training in following specialities in units approved by the Board of Study in Medicine.

This will include

Cardiology	-	10 weeks
Neurology	-	10 weeks
Chest Medicine	-	05 weeks
Rheumatology	-	05 weeks
Psychiatry	-	05 weeks
Dermatology	-	05 weeks

(c) **Speciality Rotation (2)**

Training in following specialities in units approved by the Board of Study in Medicine. These will be undertaken after the completion of the above appointments.

Registrar to a medical unit in a non-teaching hospital	-	04 weeks
Elective appointment	-	04 weeks
Intensive care medicine	-	04 weeks

(d) **General Internal Medicine (2)**

Six months of general medical training. Having completed the above, the trainee will return to the unit where he/she did the first twelve months of general medical training for another six months of training as a registrar.

(e) On completion of (a) – (d) any balance period before the MD Exam should be spent in the same General Medicine Unit. A short period of study leave with approval may be requested from the trainer. The trainee should return back to the general medical unit the day after the results are released.

4.2.5 The trainee is required to maintain a log book during the Stage II. This will be assessed at continuous assessments.

4.2.6 A continuous assessment of the trainee will take place at regular intervals. RITA programme marks awarded for the continuous assessment and for the case book will be carried forward to the MD (Medicine) examination. The weightage for the continuous assessment will be determined by the Board of Study. A regular Appraisal system will be operational between trainee, trainer(supervisor) and PGIM.

4.2.7 Candidates are referred to the general regulation in addition to this document.

#### ATTENDANCE

Minimum of 80% attendance at organized lecture courses, practicals, fieldwork, clinicals, etc. is a requirement before trainees are granted permission to sit the examination. Under exceptional circumstances the Board of Management may waive this requirement on the recommendation of the relevant Board of Study. Attendance at RITA and Appraisals is essential.

#### 4.2.8 CASE BOOK

- (a) Each candidate will be expected to complete a case book consisting of five case histories with discussion of important and relevant issues related to each case.
- (b) Three cases will be from cases seen and managed during the general medicine appointments and two from cases seen and managed during speciality rotations.
- (c) The case reports will be entered by the candidate and

signed up by the supervising consultant during their clinical appointments.

(d) Candidates will be required to submit the completed case books for evaluation four months before the closing date of applications for the MD (Medicine) examination.

(e) Marks will be awarded for the case book by the assessors.

#### 4.3 STAGE III (MD Exam)

4.3.1 Stage III shall be the MD (Medicine) examination.

4.3.2 The eligibility for entry to this examination will be

- (a) the successful completion of the Qualifying Examination for MD trainees unless exempted under Section 6.1
- (b) the successful completion of the stipulated training period (Stage II). During this period the supervising consultant will have to complete assessment forms certifying the adequacy of the training every six months in case of general medical training and at the end of each required period of training in specialist appointments.
- (c) having a satisfactory mark at the continuous assessment during the general medical training Record of In Service training assesment(RITA programme) and the completed Appraisal forms.
- (d) the satisfactory completion and submission of the case book
- (e) the submission and acceptance of the log book
- (f) candidates who are eligible are required to be present for the first scheduled examination after completion of the training programme. If a candidate does not sit the first scheduled examination or subsequent scheduled examination for reasons not acceptable to the Board of Study the examination will be counted as an attempt if fees had been paid, they will not be refunded.
- (g) Only six attempts will be allowed within a period of 8 years from the date of passing part I.

4.3.3 Scope of the Examination

The candidates are expected to have an adequate knowledge of the physiological, biochemical and pathological basis of Medicine. The candidate must be familiar with health problems in this country, and principles in the prevention and control of diseases and promotion of health. Have to complete the course in a finite time.

It is expected that the candidates possess specialist knowledge of the principles and practice of internal medicine and therapeutics to enable him to manage a general medical unit. A high degree of competence would be expected in the clinical skills. In addition, knowledge of the indications for and interpretation of all common pathological, radiological and other investigations is expected. The examination will aim to test competencies listed in objectives of the course (2.0).

#### 4.3.4 Components of the MD (Medicine) Examination

The MD (Medicine) Examination shall consist of an essay paper, case histories, data interpretations, slide interpretations, short cases, long cases and a viva. The candidate will be required to qualify at the written component in order to proceed to the clinical and viva components. If unsuccessful at any stage, the candidate will have to re-sit the whole examination.

However, in the case of candidates who obtain 60 marks at the written exam have an option of exemption from written exam at the next 2 sittings on 2 years whichever is shorter.

4.3.5 On successful completion of MD (Medicine) examination, the candidate will be conferred the degree of Doctor of Medicine.

4.3.6 Once the exam is completed and results are released the

unsuccessful candidate has to revert back the next day to the last Ministry of Health placement.

#### 4.4 STAGE IV (Local SR training)

4.4.1 Stage IV and Stage V will commence on successful completion of Stage III.

4.4.2 Stage IV will consist of training as a Senior Registrar in a unit attached to a teaching hospital approved by the Board of Study in Medicine. This period of training could be before or after Stage V (training abroad). Duration of training for each speciality is given in 5.0 below.

However, at least 75% of the local training period should be completed before leaving for overseas training. In this instance a preliminary report certifying satisfactory performance of the trainee for the period of training already completed is mandatory prior approval of the overseas training.

#### 4.5 STAGE V (Overseas Training)

4.5.1 This will consist of a period of training in a teaching centre abroad approved by the Board of Study in Medicine. Duration of training for each speciality is given in 5.0 below.

4.5.2 The trainee should present the relevant information to the Board of Study in Medicine well in advance to get the overseas training post approved. Details of the facilities available in the training unit, qualifications and experience of the trainers and the detailed programme of training offered to the trainee should be made available to the Board.

4.5.3 The supervisor will submit final report certifying the satisfactory performance of the trainee on completion of Stage IV prior

to Board Certification. An annual viva voce examination in the SR period before and after foreign training appointment is being introduced for general medicine and specialties.

## **5. REQUIREMENTS FOR SPECIALIZED TRAINING (STAGES IV & V) IN GENERAL INTERNAL MEDICINE & OTHER ALLIED SPECIALTIES**

### **SPECIALITIES**

#### **5.1 CARDIOLOGY**

A period of four years of training in cardiology. Three years of this will be in an approved cardiology unit in Sri Lanka and one year in an approved centre abroad.

#### **5.2 CARDIAC ELECTROPHYSIOLOGY**

A period of four years of training spent in units specialising in cardiology and cardiac electro-physiology. Two years of this will be in an approved cardiology unit in Sri Lanka and two years in an approved centre abroad undergoing training in cardiac electrophysiology.

#### **5.3 ENDOCRINOLOGY**

A period of three years of training in endocrinology. One year of this will be in an approved endocrinology unit and in other units in Sri Lanka as stipulated by the training programme and one year in an approved centre abroad. The third year can either be in Sri Lanka or abroad in a unit approved by the Board of Study.

#### **5.4 GENERAL INTERNAL MEDICINE**

One year in an approved general medical unit in Sri Lanka and one year in a centre abroad, approved by the Board of Study.

#### **5.5 GASTROENTEROLOGY**

A period of three years of training in gastroenterology. Two years

of this will be in training units and in other units in Sri Lanka as stipulated by the training programme and one year in a centre abroad approved by the Board of Study.

#### **5.6 NEPHROLOGY**

A period of four years of training in nephrology. Three years of this will be in approved training units in Sri Lanka as stipulated by the training programme and one year in a centre abroad approved by the Board of Study. The 3<sup>rd</sup> year can be either be in Sri Lanka or abroad.

#### **5.7 NEUROLOGY**

A period of three years of training in neurology. Two years of this will be in an approved neurology unit and other units in Sri Lanka as stipulated by the training programme and one year in a centre abroad approved by the Board of Study.

#### **5.8 NEUROPHYSIOLOGY**

A period of three years of training spent in units specialised in neurology and neurophysiology. Two years of this (one year of clinical neurology and one year of clinical neurophysiology) will be in an approved neurology unit and other units in Sri Lanka as stipulated by the training programme and one year in neurophysiology a centre abroad approved by the Board of Study.

#### **5.9 RESPIRATORY MEDICINE**

A period of three years of training in respiratory medicine. Two years of this will be in an approved respiratory medicine department and other units in Sri Lanka as stipulated by the training programme and one year in a centre abroad approved by the Board of Study.

#### **5.10 RHEUMATOLOGY AND REHABILITATION**

A period of three years of training in Rheumatology and Rehabilitation. Two years of this will be in an approved Rheumatology unit in Sri Lanka and one year in a centre abroad approved by the Board of Study.

## **6. BOARD CERTIFICATION**

On completion of all five stages of the programme as defined above,

the trainee will face an interview by a Board of Examiners appointed by the Board of Study in Medicine. The Board of Study in Medicine will grant Board Certification on the recommendation of the Board of Examiners.

## **7. EXEMPTIONS**

The following exemptions will apply to those candidates who have successfully completed MRCP(UK) examination or an equivalent as determined by the Board of Study.

### **7.1 Stage I**

Candidates who have successfully completed the MRCP (UK) or equivalent will be exempted from the Qualifying Examination for MD Training Programme. Those who hold the MRCP (UK) or equivalent should register such with the PGIM.

### **7.2 Stage II**

Candidates will have to complete the equivalent of the same thirty months of training as defined in Stage II, after successful completion of MRCP (UK) or equivalent Examination.

A candidate may claim exemption for a maximum of twelve months of training done abroad, six months in general medicine and six months in the specialities. These exemptions will be for training done abroad after the MRCP (UK) or equivalent and will have to be deemed as satisfactory by the Board of Study in Medicine.

The balance of the training must be done in Sri Lanka, under the scheme of training programme of the PGIM as indicated in the prospectus. Twelve months of the training will be in general medicine and six months in the specialities which have not been done overseas.

### **7.3 Stage III**

On meeting these requirements the candidate may sit MD (Medicine) and if successful will be awarded the degree of Doctor of Medicine.

### **7.4 Stage IV and V**

For Board Certification as a specialist, the candidate with the MRCP or equivalent will have to

- (a) be successful in the MD (Medicine) examination
- (b) complete a twelve months period of training as a Senior Registrar in a teaching hospital in Sri Lanka
- (c) provide evidence that the candidate has satisfactorily completed the twelve months training overseas after successful completion of MRCP Part II (UK) in a post recognised by the Board of Study in Medicine or equivalent. In the absence of such evidence, the candidate will be required to complete further twelve months as a Senior Registrar in a teaching hospital in Sri Lanka.

For specialities other than general internal medicine, the period of training is as defined in section 5.0

## **QUALIFYING EXAMINATION FOR THE MD PROGRAMME IN MEDICINE**

- (a) This examination shall consist of a Multiple Choice Question (MCQ)/ Best Response paper and an Objective Structured Clinical Examination (OSCE)
- (b) Only those who are successful in the MCQ/Best Response paper shall proceed to the OSCE
- (c) Candidates have to pass the MCQ/Best Response papers and the OSCE at the same sitting to be successful at the Qualifying Examination for the MD Programme in Medicine.

## **MD (MEDICINE) EXAMINATION**

It is expected that the candidate possesses a specialist knowledge of the principles and practice of internal medicine and therapeutics which would enable a person to manage a general medical unit. A high degree of competence would be expected in the clinical skills. In addition, a knowledge of the indications for and interpretation of all common pathological, radiological and other investigations is expected.

The candidate should be competent to carry out investigative procedures such as needle biopsies and aspirations and be able to perform simple side-room laboratory tests. He should also be familiar with the practical procedures involved in intensive medical care. A fundamental knowledge of the other specialities in medicine is necessary. The candidate is expected to have read widely in general medicine, be familiar with current medical literature, and have some knowledge of medical history and ethics and have developed proper attitudes and communication skills.

### **Components**

- |                    |  |
|--------------------|--|
| <b>Paper I</b>     | <b>Essay Question (1 hr)</b>   |
| <b>Paper II</b>    | <b>Three parts Slide interpretation questions (20 questions, 1 hr)</b> |
|                    | <b>Data interpretation questions (10 questions, 1 hr, 30 min)</b>      |
|                    | <b>Case history questions (5 questions, 1 hr 15 min)</b>               |
| <b>Long case</b>   | <b>45-minute consultation and 20-minute discussion with examiners</b>  |
| <b>Short cases</b> | <b>30 minutes. Minimum of 4 cases by 2 panels of examiners</b>         |
| <b>Viva voce</b>   | <b>15 minutes with each of two sets of examiners</b>                   |

## **INTERPRETATION AND AMENDMENTS**

On any other matter regarding this programme/s or on a matter of interpretation of these regulations, the decision of the Board of Study in Medicine duly approved by the Board of Management of the Post Graduate Institute of Medicine shall be final.

The prospectus is subject to revision from time to time. Adequate notice will be given of such changes.