



Curriculum  
Fellowship Program  
in HIV Medicine for  
Medical Professionals  
2012-2013



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## FELLOWSHIP PROGRAM in HIV MEDICINE FOR MEDICAL PROFESSIONALS

### I. INTRODUCTION:

**Rajiv Gandhi University of Health Sciences**, Karnataka was established in 1996 in Bangalore by the government of Karnataka, India for the regulation and promotion of higher education in health sciences throughout the state. It currently affiliates all training institutions for courses of medicine, nursing, dentistry, pharmacy and allied health fields in Karnataka. There are a total of 662 colleges affiliated to the University. RGUHS is active in the field of HIV for more than a decade now.

**As a public health response to the growing epidemic of HIV and AIDS in the state, the University is keen on initiating a number of new activities.** The various activities is guided by the following principles.

- HIV/AIDS is a Developmental Issue needing an Integrated and Inclusive approach.
- Develop Innovative Institutional model and programmatic approach to effectively address the growing HIV epidemic.
- Need to update the curricula and the course content of HIV/AIDS in Medical Nursing and other allied courses.
- Develop modules and implement training in HIV/AIDS for dental, nursing Physiotherapy, Pharmacy and other allied courses.
- Support research to understand opportunist infections relevant to our country, co-infection, reasons for treatment failure, barriers of treatment and compliance.
- Develop distance learning, virtual classroom and satellite communication scheme in HIV/AIDS to update faculty members and practicing physicians.
- Compliment and Catalyze Government initiatives and National programmes.
- Network and Build Linkages with Other credible organizations' working in HIV/AIDS sector for mutual sharing and learning.



The growing epidemic of HIV/AIDS has necessitated a change in our understanding of health issues in the community and approach of our Health care delivery. The increased number of people affected by the HIV epidemic has threatened the effectiveness of the health care delivery system. In addition, the stigma and discrimination associated with the disease have complicated matters often resulting in denial of even the basic health services to HIV patients that are otherwise available to the general public.

National AIDS Control Organisation has been continually increasing the number of Community Care Centres and Anti Retroviral Treatment Centres to meet the growing demand for HIV care, treatment and support services. Karnataka State is now on the verge of having nearly 40 Community Care Centres and 30 Antiretroviral Treatment Centres. **The state has planned to cater to Anti Retroviral treatment needs of the people at primary Health Centre level in a phased manner.**

**The transformational changes seen in the National and State program has led to emergence of new challenges to be addressed.** The increase in the number of care and treatment centres has resulted in a felt need for committed and competent physicians to manage the centers. However, for most practicing doctors today, HIV Medicine was not a part of the curriculum at the time of their training. Also, the steady progress in knowledge and practice in this field necessitates constant updating. Currently, there are limited opportunities for physicians to hone their knowledge and skills. The state of Karnataka is facing an shortage of qualified and trained human resources to manage these ART and community care centres. This shortage is particularly felt among doctors.

**To address these deficiencies the University has taken the initiative to start a 12 month residential course in HIV Fellowship in at least two institutions in the state with a maximum of 10 participants from July 1<sup>st</sup> 2009 onwards.**



II. TITLE OF THE COURSE: **Fellow in HIV Medicine.**

III. GOALS:

- A) The programme envisaged is to **provide opportunity for hands on training** for acquiring high proficiency in integrated approach in HIV management for candidates who would be placed in institutions accredited for that purpose by the University.
- B) To improve the quality of HIV care support and treatment, in Karnataka and India through **focused building of capacities of medical professionals.**
- C) **To promote integrated model of care for PLHIVs** amongst these medical professionals there by reducing stigma and discrimination in health care settings.
- D) To facilitate **creation of a network of Institutions and Individuals of academic excellence** to constantly upgrade of health and HIV care.
- E) **To make available a trained pool of doctors as leaders** to be placed within Government & Non Governmental sector.
- a) *Who shall recognize the health needs of the community, and carry out professional obligations ethically and in keeping with the objectives of the national health policy.*
  - b) *Who shall have mastered most of the competencies, pertaining to the speciality, that are required to be practiced at the primary, secondary and the tertiary levels of the health care delivery system.*
  - c) *Who shall aware of the contemporary advances and developments in the discipline concerned.*
  - d) *Who shall have acquired a spirit of scientific inquiry and is oriented to the principals of research methodology and epidemiology; and*
  - e) *Who shall have acquired the basic skills in teaching, leadership qualities and commitment to the service of PLHIV.*



- IV. OBJECTIVES: After the completion of the training the student shall be able to
- A) **Recognise the importance of HIV/AIDS in the context of the health need of the community and the national priorities** in the health sector and acquire the knowledge and the skills needed.
  - B) **Practise the speciality, ethically and in step with the principles of primary health care** and adopt integrated module of HIV care services. Diagnose and manage the conditions on the basis of clinical assessment; and appropriately select and conduct investigations.
  - C) **Identify social, economic, environment, biological and emotional determinates of health in a HIV/AIDS patients**, and take them into account while planning therapeutic, rehabilitative, preventive and promotive measures/strategies.
  - D) **Plan and advise measures for the prevention and rehabilitation of patients suffering from disease and disability**. Demonstrate sufficient understanding of the basic sciences and related diseases relevant to the speciality.
  - E) **Demonstrate skill in documentation of individual case details** as well as morbidity and mortality data relevant to the assigned situation. **Function as an effective leader of a health team engaged in health care, research and training**.
  - F) **Demonstrate empathy and humane approach** towards patients and their families and exhibit interpersonal behavior in accordance with societal norms and expectations.
  - G) **Play the assigned role in the implementation of national health programmes**, effectively and responsibly. Organize and supervise the health care services, demonstrating adequate managerial skills in the clinic/hospital or the field situation.
  - H) **Develop skills as a self-directed learner, recognise continuing educational needs**; select and use appropriate learning resources. Demonstrate competence in basic concepts of research methodology and epidemiology, and be able to critically analyse relevant published research literature.



## V. EDUCATIONAL APPROACH:

The HIV Fellowship program shall be a 12 month, full time, hands on, residential training program for doctors. The trainees will have the graded responsibilities in the management and treatment of patients entrusted to his/her care. The participation of the fellows in all facets of care is essential. Every fellow should take part in seminars, group discussions, rounds, case demonstration, clinics, journal meetings, CPC and Clinical meetings. Training includes involvement in laboratory and research studies. The participants shall learn the management of HIV patients in institutional settings and HIV issues in the community. They shall undergo training in ART/VCTC/PPTCT/RNTCP/STI centres. Accomplished National and International faculty residing in India and abroad would facilitate learning. The course focuses on equipping the 'fellows' to appreciate and adopt an integrated approach to health and HIV management. The highlights of the training includes

- Hands on clinical care experience under the guidance of experts in the HIV field.
- Structured problem based exercises to stimulate specific case examples.
- Sessions include management, Leadership, Epidemiology, Infection control, Public Health Systems, Psychosocial and behavior Issues.
- Audio visual material and/or printed handouts to supplement reading and classroom instruction.
- Exposure and experiential visits to various HIV program implementation sites of both Government and Non Government sectors at the primary and secondary levels of health care.
- Use of Internet/Medline and other teaching AIDS.
- Video conferencing with National and International faculty.

Course participants would be managing outpatients and inpatients in a HIV care facility having an integrated and inclusive model of care. The Fellowship program focuses on building knowledge, clinical skills, research and communication techniques and right attitude. **The training programme prepares the physician to be a leader in HIV Care, support, training and management.**





VI. RECOGNITION OF THE INSTITUTION FOR THE COURSE:

- An institution desirous of starting the programme should have been in existence as a centre and engaged in implementation of AIDS control Program for at least 5 years.
- An institution starting the Fellow in HIV program should have in-house faculties listed below

Particulars	Criteria
Teaching Staff	<ul style="list-style-type: none"><li>• Minimum of 3 qualified teachers or Consultants, of which one teacher appointed shall be full time. Other 2 may be part time visiting consultants and these two should not be faculty for the Fellowship Programme in any other institution</li><li>• Post Graduate degree in Clinical specialties or Para Clinical like Pathology/Microbiology/Community medicine or Public Health (Post MBBS)</li><li>• Professional experience of 5 years after post graduation or 3 years of teaching experience after Post graduation</li></ul>
Hospital	<ul style="list-style-type: none"><li>• Should have 50 beds with 20 beds dedicated for HIV positive patients' care</li><li>• The clinical load shall be not less than 50 inpatients per month and not less than 50 outpatients per month</li><li>• Should be providing at least the following 5 specialty services either full time or on visiting viz, Medicine, Obstetrics and Gynecology, Microbiology or Pathology, Pediatrics, Dermatology. Out of these at least 2 should be full time.</li><li>• Should have a functioning Integrated Counseling and Testing Centre</li><li>• Should be implementing Prevention of Parent to Child Transmission of HIV program including institutional delivery care</li><li>• Should have a functioning Anti retroviral Treatment (ART) Centre or Link ART centre</li><li>• Should be offering Services for Sexually Transmitted Infections</li><li>• Should be implementing Revised National Tuberculosis Program</li></ul>



	<ul style="list-style-type: none"><li>• Should have laboratory facilities for diagnosing Opportunistic infections and monitoring treatment</li><li>• Should have functioning Blood Bank or Blood Storage Centre</li><li>• Should be undertaking community extension program in HIV sector</li><li>• Should be undertaking Research activities in HIV sector</li><li>• Should have established practices of waste management systems and standard precautions in the hospital for all patients irrespective of their HIV status</li></ul>
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*The academic training programme should be held in the institution itself. Only institutions fulfilling all the requirements shall be allowed to conduct the programme and no relaxation in the requirements will be made.*

The Rajiv Gandhi University will arrange for inspection of the institution/department by a duly constituted registration committee for validation of the facilities, staff etc and will accord recognition based on the recommendation.

The applications received only on or before 31<sup>st</sup> March each year will be processed.

#### VII. REGISTRATION COMMITTEE:

The Registration Committee will have members as follows.

1. One Syndicate member of RGUHS nominated by the Vice Chancellor, Chairman of the Committee.
2. One or more subject specialist nominated by the Vice Chancellor.

#### VIII. INTAKE OF STUDENTS:

The ratio of the number of candidates per bed related to the Speciality shall be 1:5. The intake for each programme shall be not more than 10 in an accredited institution. The number of candidates shall be decided by the Registration Committee in consultation with the Head of the Department and Head of the Institution.



**IX. ELIGIBILITY FOR ADMISSION:**

- Candidates with MBBS, BDS degree or its equivalent recognized by the Medical Council of India/Dental Council of India and completed one year compulsory rotating internship in a teaching institution or other institution recognized by the Medical Council of India/Dental Council of India, and has obtained permanent registration of any State Medical/Dental Council shall be eligible for admission.
- Candidates sponsored by an institution or Government shall be given preference

**X. OBTAINING ELIGIBILITY CERTIFICATE BY THE UNIVERSITY BEFORE MAKING ADMISSION:**

No candidate shall be admitted for the course unless the candidate has obtained and produced the eligibility certificate issued by the university. The candidate has to make an application to the university with the following documents along with the prescribed fee:

- 1) MBBS Pass / degree Certificate issued by the university.
- 2) Marks card of all the university examinations passed MBBS Course.
- 3) Attempt Certificate issued by the Principal.
- 4) Certificate regarding the recognition of the medical college by the Medical Council of India.
- 5) Completion of Internship certificate.
- 6) In case internship was done in a non-teaching hospital, certificate from the medical council of India that the hospital has been recognised for internship.
- 7) Registration by any state medical council.

Candidates should obtain the Eligibility Certificate before the last date for admission as notified by the University.

A candidate who has been admitted to fellowship should register his/her name in the University within a month of admission.



#### XI. SELECTION/ ADMISSION PROCEDURE

- The candidates will be selected on the basis of merit and aptitude
- A selection committee appointed by Rajiv Gandhi University of Health Sciences, Karnataka with members drawn from multiple stakeholders would finalize the list of selected candidates based on predetermined objective criteria.
- The Committee shall include Head of Institution conducting the programme, Head of the Department or Coordinator of the Programme, One subject specialist from another institution, a representative of the Rajiv Gandhi University of Health Sciences nominated by the Vice Chancellor, One representative of Karnataka State AIDS Prevention Society nominated by the Project Director. The Chairman and Convener of the Committee would be designated by the University while constituting the committee.

#### XII. DURATION OF THE COURSE:

The course of study shall be for a period of 12 months.

#### XIII. ATTENDANCE, PROGRESS AND CONDUCT:

- a) A candidate pursuing Fellowship should work in the institution for the full period as a full time student. No candidate is permitted to run a clinic / laboratory / nursing home during the course.
- b) Every candidate is required to attend a minimum of 80% of the training during academic year of the Fellowship course. Each month shall be taken as a unit for the purpose of calculating attendance.
- c) Every student shall attend symposia, seminars, conferences, journal review meetings, grand rounds, CPC, case presentation, clinics and lectures during each month as prescribed by the institution and not absent himself/herself from work without valid reasons.
- d) Leave of absence with permission of the Head of the Department up to a maximum of 12 days in a year is permitted
- e) Any student who fails to complete the course in the manner stated above shall not be permitted to appear for the University examination.



#### XIV. FEE:

- A Registration fee per candidate of Rs.10,000 shall be paid by the candidate or the sponsoring institution to the University. No capitation fee or donation shall be taken by the institution
- A tuition fee of Rs. 20,000/- shall be paid by selected candidate to the affiliated Institution where the candidate posted and notified to the university well in advance. It shall be fully utilized by the Institution for the management and upkeep of said Institution with all facilities and good infrastructure thus maintaining quality and excellence in higher education.

#### XV. MONITORING PROGRESS OF STUDIES:

- a) Work diary/Log Book:- Every candidate shall maintain a work diary and record his/her participation in the training programmes conducted by the centre such as journal reviews, seminars etc. Special mentioned may be made by the presentations by the candidate as well as details of clinical or laboratory procedures, if any, conducted by the candidate. The work diary shall be scrutinized and certified by the Head of the course and Head of the Institution, and presented in the university practical/clinical examination.
- b) Periodic tests:- Minimum of three tests to be held at the interval of three months before the final examination to be conducted at the end of 12 months. The test may include written papers, practicals / clinical and viva voce. Records and marks obtained in such tests will be maintained by the Head of the course and sent to the university, when called for.
- c) Records:- Records and marks obtained in tests will be maintained by the Head of the course and will be made available to the university.



XVI. TEACHING HOURS and POSTINGS for academic duration of 12 Months

<b>Method</b>	
Theory	250 hours
Clinicals	400 hours
Journal Club/Seminars	128 hours including 24 presentations by each fellow
Counseling	60 hours
Research Work	60 hours
Field Visit	60 hours

The candidate has to be posted to the following departments/sectors in order to be eligible for appearing in the University Examination.

- a. Community Care Centre for People living with HIV – 2 months
- b. Antiretroviral Treatment Centre – 2months
- c. Unit implementing Revised National Tuberculosis Control Programme – 7 days.
- d. Outreach programme with focus on Diagnosis and Treatment of Reproductive Tract and Sexually Transmitted Infections – 15 days
- e. Unit implementing programme on PMTCT of HIV – 7 days
- f. Unit implementing programme on Targeted interventions – 7 days
- g. Laboratory and Blood Bank – 15 days



h. Counseling Department – 15 days

**XVII. MEDIUM OF INSTRUCTION:**

The Medium of Instruction shall be English.

**XVIII. SCHEME OF EXAMINATION:**

**a) Internal assessment ( 100 marks)**

- Monthly objective/Problem based Tests – aggregate of 2 best performances in tests each valued at 15 marks (total 30 marks)
- Monthly bedside Clinical Case discussions - aggregate of 2 best performances in case discussions each valued at 15 marks (total 30 marks)
- Log book of activities (10 marks)
- Fellow led Seminars and teaching sessions (30 marks)

A student should score at least 50% of the total marks fixed for internal assessment in order to be eligible for the University examination. Proper record of the work should be maintained which will be the basis of all candidates' internal assessment and the same should be available for scrutiny by appropriate authorities. The internal assessment marks of the candidates shall be sent to the University at least one week prior to the commencement of the University examination.

**b) University Examination**

**Eligibility For Examination**

*To be eligible to appear for University examination a candidate:*

- Shall have undergone satisfactorily the approved course of study in the approved institutions for the prescribed duration
- Shall have attended at least 80% of the total number of classes in Theory, practical, Clinical, seminars and other curricular activities jointly
- Shall secure at least 50% of the total marks fixed for internal assessment in both Theory and Practicals
- Shall fulfill any other requirement that may be prescribed by the University from time to time



### Examination components and distribution of marks

	Particulars	Marks
A	THEORY	
1	Theory – 2 papers	50x2=100
2	Internal Assessment (Theory)	30
3	Structured Viva Voce	25
4	PROJECT WORK – <i>Presentation cum Viva Voce</i>	25
	Total Theory	180
B	PRACTICAL/CLINICAL	
1	Clinical Examination ( <i>1 long case for 40 marks, 2 short cases for 25 marks each and 10 marks for spotters</i> )	100
2	Internal Assessment (Practical)– <i>including Log book, Fellow led seminars, teaching sessions and Clinical Case discussions</i>	70
	Total Practical/Clinical	170
	GRAND TOTAL	350

### Types, number of questions and distribution of marks for EACH of the written papers.

All questions should preferably be problem based.

Type of questions	Number of questions	Marks for each question	Total marks
Objective type	10	1	10
Short answer	05	2	10
Short Essay type	03	5	15
Essay type	01	15	15
TOTAL MARKS			50

- Each paper shall be for a duration of 2 hours and recent advances may be asked in or all of the papers
- Registrar(Evaluation) shall recommend the names of the paper setters to the Hon'ble Vice Chancellor from the panel suggested by the Head of the Institution in consultation with the Programme Coordinator.
- The Written assessment shall be conducted at the place and on the dates notified by the Registrar (Evaluation) RGUHS





- The papers shall be valued by the examiners appointed for practical assessment who also will be notified by the Registrar (Evaluation)

#### **Examiners:**

- There shall be one Internal Examiner generally the Programme Coordinator and an external examiner appointed by the RGUHS. The appointment of the external examiner is by invitation based on a panel of three names given by the Programme Coordinator. The external examiner shall be paid TA and DA by the University as per RGUHS rules.

#### **CRITERIA FOR PASS**

For declaration of 'PASS' in the Programme in the University examination, a candidate shall pass both in Theory and Practical/Clinical Examinations components separately as stipulated below

For a pass in the Theory, a candidate shall secure not less than 50% in aggregate i.e., marks obtained in University written examination, Structured Viva Voce, Project work presentation cum viva-voce and internal assessment (theory).

For a pass in Practical/Clinical examination, a candidate shall secure not less than 50% in aggregate, i.e., marks obtained in University Practical/Clinical Examination and internal assessment (practical) added together.

A candidate not securing 50% marks in aggregate in Theory or Practical/Clinical examination shall be declared to have 'Failed' and is required to appear for both Theory and Practical/Clinical examination again in the subsequent examination period.

#### **DECLARATION OF CLASS**

- a. A candidate having appeared in the examination and passed the examination in first attempt and securing 75% of marks or more of grand total marks shall be declared to have passed the examination with Distinction
- b. A candidate having appeared in the examination and passed the examination in first attempt and securing 65% of marks or more but less than 75% of grand total marks shall be declared to have passed the examination in First Class
- c. A candidate having appeared in the examination and passed the examination in first attempt and securing 50% of marks or more but less than 65% of grand total marks shall be declared to have passed the examination in Second Class