



ರಾಜೀವ್ ಗಾಂಧಿ ಆರೋಗ್ಯ ವಿಜ್ಞಾನಗಳ ವಿಶ್ವವಿದ್ಯಾಲಯ, ಕರ್ನಾಟಕ, ಬೆಂಗಳೂರು
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AUTH/Ilmul Jarahat/048/2015-16

03/08/2015

NOTIFICATION

- Sub: Regulations and Curriculum of Mahire Tib (MD.Unani) Ilmul Jarahat
Ref:1) Minutes of the meeting of Academic Council held on 28/05/2015.
2) Minutes of 113th meeting of Syndicate held on 26/06/2015.

In exercise of the powers conferred by Section 35(2) of RGUHS Act 1994, the Syndicate in its 113th meeting held on 26/06/2015 is pleased to notify the curriculum for Mahire Tib (MD.Unani) Ilmul Jarahat as shown in annexure appended herewith.

This Ordinance shall be applicable for the students admitted during the academic year 2014-15 and onwards.

By Order,


REGISTRAR

To:
The Principals of all Unani colleges affiliated to RGUHS.

Copy to:

1. The Principal Secretary to Governor, Governor's Secretariat, Raj Bhavan, Bangalore – 560 001.
2. Principal Secretary to Government, Health & Family Welfare Department, (Medical Education), Vikasa Soudha, Bangalore –560 001.
3. The Director, Department of Medical Education, Anand Rao Circle, Bangalore – 560 009.
4. PA to Vice-Chancellor / Registrar / Registrar (Eva.) / Finance Officer.
5. Director, Curriculum Development Cell.
6. The RGUHS Website
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**Regulations and Curriculum
Of
Post Graduate Degree in Unani Medicine**

**Mahire Tib
(M.D. Unani)**

**in
Ilmul Jarahat
(Surgery)**

Goals and Objectives of the Course

Goals

The Goals of the Postgraduate course in the Ilmu Jarahat is to train M.S Unani graduate:

- To practice Jarahat efficiently and effectively backed by scientific knowledge and skill.
- Exercise empathy and caring attitude and maintain high ethical standards.
- Continue to evince keen interest in continuing professional education in the speciality and allied specialities irrespective of whether in teaching or practice (Matab).
- Willing to share the knowledge and skill with any learner, junior or a colleague.
- To develop faculty for critical analysis and evaluation of various concepts and views, to adopt the rational approach.

Objectives

- The objective is to train a candidate so as to ensure higher competence in both general and special area of interest in the field of Jarahat and prepare him / her for career in teaching, research and speciality practice. A candidate must have high degree of clinical proficiency in the subject matter and develop competence in research methodology as related to the field of Jarahat.
- The objectives are stated as related to: Knowledge (cognitive domain), Skills (psycho motor domain), Human values, ethical practice and communication abilities (Affective Domain).
- At the end of training a candidate shall be able to:

Knowledge

- Demonstrate understanding of basic sciences – USOOLE TIB relevant to speciality. Describe aetiology, patho-physiology, principles of diagnosis and management of common problems within the speciality in adults and children. Acquire adequate classical and advanced/ progressive knowledge. Identify social, economical, environmental and emotional determinants in a given case and take them into account for planning treatment and to refer to appropriate specialists. Update knowledge through self-study and by attending courses, conferences and seminars relevant to competence. Undertake audit, use information technology and carry out research in both basic and clinical sciences with the aim of publishing the work at various scientific journals.

Skills

- Take a proper clinical history, examine the patient, perform essential diagnostic procedures and other relevant tests and interpret them to come to reasonable diagnosis about the condition (mizaj / sue mizaj / temperaments, akhlat / humours & marz / disease in the light of Unani Medicine).
- Acquire adequate skills and competence in performing various procedures as required.

Human Values, Ethical Practice and Communication Abilities

- Adopt ethical principles in all aspects of practice.
- Foster professional honesty and integrity.
- Deliver patient care irrespective of social status, caste, creed or religion of the patient.
- Develop communication skills in particular skill to explain various options available in management and to obtain a true informed consent from the patient.
- Provide leadership and get best out of his/her team in a congenial working atmosphere.
- Apply high moral and ethical standards while carrying out human or animal research.
- Be humble and accept the limitations in his/her knowledge and skill and to ask for help from the colleagues when needed.

Details of Teaching and Clinical hours

Subjects	Theory Hrs.	Clinical Hrs.
Paper I – Usool-e-Tahqeeqat-e-Ilaje Tadbeeri wa Hayati Shumariyat (Research Methodology and Biostatistics)	100	50
Paper II - Tashreeh wa Manafe-ul Aza (Anatomy & Physiology)	100	50
Paper III – Ilaj Bit Tadbeer-I (Ilaj Bit Tadbeer Umoomi)	100	50
Paper IV – Usoole Tashkhees wa Ilaj (Principles of Diagnosis and Treatment)	100	50

Scheme of Examination

First year - MS Jarahat

Shall consist of three (03) theory papers and one (01) practical / viva examination

Each theory paper shall be of 100 marks and three hours duration, and Practical / viva voce will carry 100 marks. The pattern of paper is as follows.

Type of questions	No of questions	Marks for each questions	Total
Long Essay	02	20	40
Short Essay	06	10	60

Ilmul Jarahat

First Year

No. of Papers	Name of the paper	Theory marks	Sub Total	Practical marks	Viva voce	Sub Total	Grand Total
Paper -I	Usool-e-Tahqeeq wa Hayati Shumariyat (Research Methodology and Biostatistics)	100	300	75	25	100	400
Paper – II	Basic Principles of diagnosis and management & Unani drugs used in Surgical practical	100					
Paper – III	Takhdeere Umoomi wa Muqami (General and Local Anesthesia)	100					

**First Year – Paper I- Usool-e-Tahqeeq wa Hayati Shumariyat
(Research Methodology and Biostatistics)**

- **Types of research**
 - (a) Literary research
 - (b) Clinical research
 - (i) Phases of Clinical Trails
 - (c) Experimental research
 - (d) Observation and field studies
- **Trends and possibilities of research in Ilaj Bit Tadbeer**
- **Recent research and developments in Ilaj Bit Tadbeer**
- **Research problems**
 - (a) Definition
 - (b) Selection and sources of research problems
- **Hypothesis**
 - (a) Types: Null and alternate hypothesis
- **Research designs**
 - (a) Types of research designs
- **Controls in research designs**
 - (a) Selection criteria
 - (b) Placebo and plain control
 - (c) Randomization
 - (d) Balancing and matching
- **Factors effecting research results**
- **Tools and techniques in research**
 - (a) Interview, questionnaire, inventories, scales
 - (b) Rating scales
 - (c) Analytical tools for experimental research-introduction
- **Computer programme used in research**
 - (a) Minitab
 - (b) SPSS
- **Protocols for research and report writing**
 - (a) Protocols for experimental, clinical and community based research
 - (b) Writing research report
 - (c) References in research report
 - (i) Books
 - (ii) Journals
 - (iii) Compendia
 - (iv) Bulletins
 - (v) WHO Report
 - (vi) Internet sites
- **Guide lines for research**
 - (a) WHO
 - (b) ICMR

- (c) CPCSEA
- **Clinical Research and Trials**
- **Bias in Clinical Trials**
 - (a) Form Bias
 - (b) Source Bias
 - (c) Methods of Correcting the Bias
- **Issues and Prospects of Clinical research in Unani Medicine**
- **Regulatory and Ethical issues in Clinical trails**
 - (a) Declaration of Helsinki
 - (b) Ethical principles
 - (c) Constituting ethical committee
 - (d) Informed consent
 - (e) Patient information sheet (Modular CRF)
 - (f) Ethical issues pertaining to Leech therapy and Venesection
- Bio-Statistics**
- **Scope and utility of Biostatistics**
- **Descriptive statistics**
 - (a) Analysis of Data
 - (i) Data collection, tabulation and presentation of data
 - (ii) Measure of central tendency—Mean, Median and Mode
 - (iii) Measures of dispersion: Range, quatratile deviation, standard deviation
 - (b) Probability
 - (i) Definition and laws of probability
 - (ii) Types of probability distribution
 - (iii) NPC and its application size
 - (iv) Randomized sampling
 - (c) Sampling
 - (i) Types and sample size
 - (ii) Randomized sampling
- **Inferential statistics**
 - (a) Correlation and linear regression
 - (i) Karl Pearson correlation coefficient
 - (ii) Linear regression equations
 - (b) Test of significance
 - (i) 't' test
 - (ii) 'z' test
 - (c) Test of variance
 - (i) ANOVA one way (ii) ANOVA two way X2
 - (d) Non-parametric tests
 - (i) Median test, Mann Whitney U test
 - (ii) Kruskall Wallis test, Fried test
- **Vital statistics**
 - (a) Rate and Ratios
 - (b) standardization of population
 - (c) Risk factors

Reference Books

S. No	Title of the book	Publisher	Year of publication
1	INSA Guidelines for care and use of animals in Research		2000
2	CPCSEA Guidelines		2001
3	Ethical Guidelines for Biomedical research in human subjects	ICMR New Delhi	2000
4	ICMR Guidelines on animal use	ICMR New Delhi	2001
5	Clinical Research in Traditional Medicine	Dr. Ghazala Javed	-

Text Books

S. No	Title of the book	Edition & Volume	Name of the author	Publisher	Year of publication
1	Medical Ethics	2 nd Edition	Francis CM	Jay Pee brothers, Medical Publishers, New Delhi	2004
2	Practical approach to PG Dissertation	1 st Edition	Raveendran R and Gitanjali	Jay Pee brothers, Medical Publishers, New Delhi	1997
3	Research Methodology and Biostatics in Pharmacology	1 st Edition	Mohd Aslam and Dr. Surender Singh	Academic Publisher New Delhi	2006

PAPER-II - Basic principles of diagnosis and management & Unani drugs used in Surgical practical

Theory Part A: Basic principles of diagnosis and management

1. History taking
2. Clinical Physical Examination of patient in General Surgery. 3. Examination of
 - a. Swelling/Tumour (Awram)
 - b. Ulcer/wounds – (Qarah & Zakhm)
 - c. Lymphnodes – (Ghudoode lymphawia)
 - d. Peripheral Arteries (Mukhtalif Nabz)

4. Preoperative assessment

5. Postoperative management

Diagnostic Techniques

1. Radiography/contrast Imaging
2. Ultrasonography
3. Magnetic Resonance Imaging
4. Computerized Tomography
5. Radio nucleotide scanning

Part B: Unani Drugs used in Surgical Practice. Drugs

1. Mane Jaraseem Advia (Antibiotics)
2. Mane Afoonat advia (Antiseptics)
3. Mane Waja/ Dafe Alam (Analgesics)
4. Mane Muhallil (Anti Inflammatory)
5. Habissuddam (Haemostasis)
6. Qabiz Advia (Astringent)

Paper III - Takhdeere Umoomi wa Muqami (General & Local Anaesthesia)

Part A: Takhdeer-e-Umoomi & drugs used Theory

1. History of Anaesthesia
2. Definition and Scope of Anaesthesia
3. Pre-Anaesthetic Assessment
4. Pre-Anaesthetic Medication (Unani & Modern)
5. Anaesthetic agents
 - a. Inhalational Anaesthetic Agents
 - b. Intravenous Anaesthetic Agents.
 - c. Local Anaesthetic Drugs
 - d. Mukhaddir Adviat (Unani)
6. Stages of General Anaesthesia and their signs
7. Anatomy and physiology of Respiratory Tract in relation to Anaesthesia.
8. Respiratory Function Tests
9. Anaesthetic Breathing System
10. Endotracheal Anaesthesia
11. Muscle Relaxants
12. Blood gases analysis-Oxygen and Carbon Dioxide
13. A brief idea of Artificial Ventilation
14. Anaesthetic Equipments

Part B: Takhdeere muqami & Nuqai & Drugs used

1. Spinal Anaesthesia/Analgesia
2. Epidural Anaesthesia/Analgesia
3. Brachial Plexus Block
4. Other Local Blocks
5. Methods of Post-Operative Pain Relief
6. Methods of Relief of Labour Pain
7. Environmental hazards in Operation Room-Fires,
8. Intensive Theraphy-
9. Shock – Classification with special reference to hypovolumic shock
10. Immediate Management of Trauma

11. Cardiopulmonary Resuscitation

12. Resuscitation of the New born

13. Blood Transfusion

14. Post anaesthesia complications & their management

15. ASA Grading

B. FINAL YEAR MD/MS [Doctor Of Medicine/Master of Surgery] EXAMINATION.

Passing the Preliminary exam will be essential to appear in the final exam

Final examination shall consist of :

- I. Dissertation.
- II. Theory – written papers.
- III. Clinical /practical and viva voce examination as the case may be.

a) Theory – written papers: There shall be three theory papers of the speciality. Each paper shall carry 100 Marks and will be of three hours duration. There shall be two Long Essay questions of 20 marks each and six Short Essay Questions of 10 marks each.

There shall be separate practical/viva exams for each of the four subjects.

The distribution of papers in the different subjects is as follows:

Ilmul Jarahat

- Paper –I - Jarahate Umoomi (General Surgery)
Paper – II – Jarahate Nizami (Systemic Surgery)
Paper – III - Amalyate Jarahiyat (Operative Surgery)

Final Year

No. of Papers	Name of the paper	Theory marks	Sub Total	Practical marks	Viva voce	Sub Total	Grand Total
Paper -I	Jarahate Umoomi (General Surgery)	100	300	75	25	100	400
Paper –II	Jarahate Nizami (Systemic Surgery)	100					
Paper –III	Amalyate Jarahiyat (Operative Surgery)	100					

Final Year

Paper –I - Jarahate Umoomi (General Surgery)

Part A: Jarahate Umoomi (General Surgery)

1. Jiryauddam wa Sadma (Haemorrhage and Shock)
2. Tadiya makhsosa (Specific infections)
 - a. Kazaz (Tetanus)
 - b. Ghanqarana (Gangrene)
 - c. Atashak (Syphilis)
 - d. Juzam (Leprosy)
 - e. Diq (Tuberculosis)
 - f. Suzak (Gonorrhoea)
 - g. AIDS
3. Sila-e- mehmooda wa khabisa & Rasouli (Neoplastic growth & cysts)
4. Qarah (Ulcer), Sinus, Nasoor (Fistula), Iltihab-e-Khulvi (Cellulitis)
5. Harq (Burns)
6. Amraze –e Sadeen wa Sartan (Breast Diseases including carcinoma of Breast)
7. Amraze-e-Ghudoode-e-Lymphawiya wa Urooq (Disease of Lymphatics , Arteries & Vein)

Part B: Amraze- Ezam –o-mafasil including Physiotherapy (Old & recent concepts in orthopedic surgery)

1. Development of bone and congenital anomalies
2. Details of fractures and Dislocations of bones around shoulders and Hand, wrist, fore arm, arm, ankle, leg and femur & Neck of femur
3. Arthritis- Osteoarthritis – Rheumatoid Arthritis –Gout
4. Infections
 - a. Osteomyelitis
 - b. Tuberculous Arthritis
 - c. Spine
5. Tumours of Bone
6. Sciatic syndrome
7. Diseases of Spine , injury including Spondylitis / Spondylolisthesis
8. Frozen Shoulder
9. Diseases of tendons & Ligaments
10. Trauma Management

Practical & viva voce

1. Case history and presentation of clinical cases
2. Ilaj bil yad
3. Amal-e kai
4. Takmid'
5. Amal-e-Fasd
6. Hijamat
7. Irasl-e-Alaq (Leech therapy)
8. Huqna
9. Reduction & Immobilisation including Plaster Application

10. Instruments used indifferent common Operation.
11. Physio-Therapy – (old and rescent Methods).
12. Dalak & Riyazat
13. Hammam
14. Rehabilitation

PAPER-II - Jarahate Nizami (Systemic Surgery)

Part A– Jarahate Khusoosi (Systemic Surgery)

1. Amraz-e-Raas wa unuq (Diseases of Head and Neck)
 - a. Development of Face
 - b. Cleftlip and plate
 - c. Dermoid Cysts
 - d. Minigocoele
 - e. Hydrocephalplous
 - f. Head Injury
 - g. Oral Ulcers and Cancer
 - h. Diseases of Parotids
 - i. Thyroid, parathyroid, thyroglossal cyst and other swelling of Neck.
 - j. Diseases of Salivary Glands
2. Amraz-e- Batan wa nizam-e-Hazm (Disease of Abdomen and GIT).
 - (a) Miree (Oesophagus):
 - (i) Atresia and Structure
 - (ii) Foreign bodies
 - (iii) Cancer
 - (iv) GERD
 - (v) Reflux Oesophagitis
 - (b) Meda wa asna ashri (Stomach and Duodenum):
 - (i) APD
 - (ii) Peptic Ulcer and Complications
 - (iii) Carcinoma of Stomach
 - (iv) Hitatus Hernia
 - (v) Gastric outlet obstruction
 - (c) Jigar wa Mirara (Liver and Gall Bladder):
 - (i) Liver Abscess
 - (ii) Hydatid Disease
 - (iii) Malignancy & Surgical Jaundice
 - (iv) Cholecystitis and Gall Stones
 - (d) Banqras (Pancreas):
 - (i) Acute Pancreatitis
 - (ii) Chronic Pancreatitis
 - (iii) Carcinoma of pancreas
 - (e) Tihal (Spleen):

- i) Injury
 - (ii) Portal Hyper tension
- (f) Nizam-e-Hazm(GIT)
- (g) Intestines and colon injuries
 - (i) Peritonitis
 - (ii) Obstruction
 - (iii) Koch's Abdomen
 - (iv) Carcinoma Small intestine & colon
 - (v) GIT bleeding
 - a) Haematemesis
 - b) Malaena
 - c) Per rectal bleeding
- (h) Zaida Awar (Appendix):
 - (i) Appendicitis in detail
- (j) Meqad (Rectum & Anal canal):
 - (i) Haemorrhoid
 - (ii) Rectal Prolapse & Fistula in ano
 - (iii) Perianal Abscess/ Ischiorectal abscess
 - (iv) Bleeding /P/R (v) Fissure in Ano.
 - (vi) Carcinoma of rectum
- (k) Fataq (Hernia):
 - (i) Definition and Classification
 - (ii) Inguinal & Femoral
 - (iii) Umbilical and paraumbilical and incisional, epigastric.

3. Amraz-e-Nizam-e-Kulliya aur taulid wa tanasuliya (Disease of Genitourinary System)

- (a) Disease of Kidney and Ureter:
 - (i) Congenital Disease
 - (ii) Injuries
 - (iv) Nephritis - Classification, Complications & its management
 - (iii) Calculi
 - (iv) Infections
 - (v) Tumours
 - (vi) Hydronephrosis
- (b) Urinary Bladder:
 - (i) Stones
 - (ii) Tumours

(iii) Injuries.

(c) Prostate

(i) BPH

(ii) Carcinoma of Prostate

(iii) Prostatitis

(d). Urethra Congenital Disease

a. Hypospedias

b. Epispedias

(i) urethritis

(ii) Gonorrhoea

(iii) Stricture

(iv) Injuries.

5. Penis:

(i) Ulcers

(ii) Tumours

(iii) Phimosis

(iv) Paraphimosis

6. Scrotum and Testis.

(a) Hydrocele, Haematocele & pyocele

(b) Congenital Diseases- Incomplete descend of testis, Ectopic testis

(c) Tumours

(d) Epididimo-orchitis

(e) Orchitis

(f) Torsion of Testis

(g) Varicocele

Part B: Jarahiyat ki Jadeed Tahqiqat (Recent Advances in Surgery)

1. New Publications in Books and Journals.

2. New Techniques used in General Surgery.

3. Laparoscopic Procedures

4. Endoscopic Procedures

5. Laser and its application in Surgery

6. Nanosurgery

PAPER –III - Amalyate Jarahiyat (Operative Surgery)

Part A:

a. Amaliyate Jarahiyat Saghira (Minor operative procedures)

1. Circumcision under Local Anesthesia
2. Drainage of Abscesses
3. FNAC
4. Major dressings
5. Minor Anorectal Procedures (Haemorrhoids -Banding, Cryosurgery, suturing etc.
6. Anal dilatation and Fissures), Fistulectomy
7. Minor Biopsies - Lymph node, ulcer, swellings etc.,
8. Reduction and plaster application of simple fractures and dislocations
9. Removal of simple subcutaneous swellings
10. Sigmoidoscopy and Upper OJ. Endoscopy
11. Suturing Techniques
12. Vasectomy
13. Wound debridement

b. Amaliyate Jarahiyat kabira (Major operative procedures)

1. Appendectomy
2. Cholecystectomy
3. Closure of Colostomy
4. Closure of peptic ulcer / under-running bleeding ulcer / vagotomy drainage
5. Colostomy
6. Cysts and sinuses of the neck
7. Diagnostic laparoscopy
8. Drainage of breast abscess / Excision of breast lump
9. Groin Hernia repair
10. Gynaecomastia
11. Haemorrhoidectomy / Fissurectomy / simple fistulectomy
12. Hemicolectomy
13. Herniotomy / Orchidopexy in children
14. Laparotomy for abdominal trauma / splenectomy
15. Laparotomy for intestinal obstruction / bowel resections / bowel anastomosis
16. Management of complex wounds
17. Mastectomy
18. Opening and closing the abdomen
19. Opening and closing the chest
20. Parotidectomy
21. Release of bands and simple adhesive obstruction
22. Thyroid lobectomy
23. UGI endoscopy / Flexible Sigmoidoscopy
24. Ventilation
25. Wide excision of breast tumours / mastectomy / microdochectomy
26. Gastrostomy / Feeding jejunostomy

Part B: Amaliyate Jarahiya Makhsoosa (Speciality Procedures)

There will be repetition of the procedures listed under this category and those listed under General surgical procedures.

Laparoscopy and GI Endoscopy

- Diagnostic and therapeutic Upper and Lower GI endoscopy
- Diagnostic laparoscopy
- Diagnostic Upper GI endoscopy
- Laparoscopic Cholecystectomy

Neurosurgery

- Craniotomy
- Management of paraplegia
- Peripheral nerve repair
- Treatment of nerve injury specific operations
- Suturing complex scalp wounds
- Trephining

Urology

- Carcinoma penis
- Diagnostic cystoscopy
- Inguinal Block Dissection
- Meatotomy
- Nephrectomy - partial & total
- Nephrolithotomy
- Orchidectomy
- Orchidopexy
- Retroperitoneal lymph node dissection
- Supra pubic cystostomy
- Total amputation of penis
- TURP / Open prostatectomy
- Ureterolithotomy
- Urethral J Urogenital injuries
- Urethral dilatation
- Varicocele
- Vasectomy
- Oncology
- All radical operations- Breast, Thyroid, GI and Facio- maxillary malignancies
- Breast lumpectomy
- Functional neck node dissection
- Gastrectomy / Bowel resection
- Metastatic workup

Plastic Surgery

- Burn resuscitation
- Lip surgery
- Local blocks in anaesthesia

Minor hand injuries
Nerve repair
Post excision reconstruction
Reimplantation of digits
Skin flap surgery
Stitch craft
Tendon repair PA
Wound debridement

Paediatric Surgery

Anorectal anomalies
Circumcision I meatoplasty
Herniotomy
Intercostal aspiration
Laparotomy for peritonitis Lymph node biopsy
Non operative treatment of volvulus
Orchidopexy
Ostomies
Paediatric emergencies
Pyloromyotomy

Clinical skills

1. **Day to day work:** Skills in Out Patients and ward work should be assessed periodically. The assessment should include the candidate's sincerity & punctuality, analytical ability and communication skill.
2. **Clinical meetings:** Candidate should periodically present cases to his/her peers & faculty members. This should be assessed using a checklist.
3. **Journal Club Presentation:** P.G. Scholars should periodically present research papers of various journals related to Ilmu Jarahat .
4. **Practical Training:** P.G. Scholars should be posted in Jarahat unit of the hospital for the practical training of various operative procedures and techniques.
5. **Clinical and procedural:** The candidate should be given graded responsibility to enable learning by apprentice ship. The performance is assessed by the guide direct observation. Particulars are recorded by the students in the log book.

Research work:

1. PG Scholars should submit the synopsis of Research work within Six month after completion of admission.
2. PG Scholars shall be posted in IPD/OPD section of Hospital during the period of Course.
3. The Thesis must be submitted six month before the completion of Course.