

BROCHURE 2025-26



MATA GUJRI UNIVERSITY, KISHANGANJ

(Established Under Bihar Private Universities Act-2013)

(Established and Administered by)

Mata Gujri Memorial Medical College & L.S.K. Hospital Trust, Kishanganj

Brochure for

Admission of Undergraduate Medical Degree (M.B.B.S.) Course

at



MATA GUJRI MEMORIAL MEDICAL COLLEGE & L.S.K. HOSPITAL, KISHANGANJ

A Postgraduate Institute

(A CONSTITUENT UNIT OF MATA GUJRI UNIVERSITY, KISHANGANJ)
RECOGNISED BY MINISTRY OF HEALTH AND FAMILY WELFARE,
GOVERNMENT OF INDIA AND THE MEDICAL COUNCIL OF INDIA/
NATIONAL MEDICAL COMMISSION

(AN UN-AIDED SIKH MINORITY EDUCATIONAL INSTITUTION)

MBBS COURSE

2025-2026

PURABPALI ROAD, KISHANGANJ, PIN-855107 (BIHAR)

University Website: www.matagujriuniversity.com

College Website: www.mgmmckishanganj.in



**BABA FARID LECTURE THEATRES CUM
CENTRAL EXAMINATION HALL**



CENTRAL REGISTRATION AND CASUALTY

1) Details of seats in MBBS Course:

- | | | |
|--|---|-------------------------|
| a) Total no. of seats | : | 150 (One hundred fifty) |
| b) Total no. of seats under Sikh Minority Category | : | 45 (Forty Five) |
| c) Total no. of seats under General Category | : | 83 (Eighty Three) |
| d) Total no. of seats under NRI Category | : | 22 (Twenty two) |

Note:

1. If sufficient numbers of candidates are not available for Sikh Minority Category, the vacant seats will be filled up by the candidates from the General Category.
2. Similarly, if sufficient numbers of candidates are not available for NRI Category, the vacant seats will be filled up by the candidates from the General Category and in that case NRI fee structure shall be applicable.

2) **Reservation Policy:** Minimum 30% of the total seats are reserved for candidates belonging to the Sikh Minority Category and 15% seats are reserved for candidates belonging to the NRI Category.

3) Fee Structure:

a) **Admission fee:** Rs.50,000/- (Rupees Fifty thousand only)
(One Time)

b) **Annual Tuition fee:**

i) **General Category:** Rs.9,63,000/- (Rupees Nine Lakhs Sixty Three Thousand only) per annum.

ii) **Sikh Minority Category:** Rs.9,63,000/- (Rupees Nine Lakhs Sixty Three Thousand only) per annum.

iii) **For Non Resident Indian / Foreign and other students admitted on seats reserved for NRI the annual college fee shall be \$25,000.00 (US) per annum, Excluding Hostel, Mess and Amenities Fee.**

(The refundable security deposit is payable once at the time of admission and will be refunded after completion of Internship training.)

Note:

- i) The annual tuition fee is charged for Four & Half years for the entire course. First year tuition fee is payable at the time of admission. The selected and admitted students shall be required to deposit the annual tuition fee for the subsequent years (remaining Three & Half year) through Bank draft/RTGS each year on or before in the month of June failing which he/she shall not be allowed to appear at the University Examination and late fee will be charged.
- ii) At the time of the admission while paying the tuition fee for 1st year through Bank Draft, the candidate shall also have to furnish Bank Guarantee/Bond for payment of college fee for the remaining period of the course. During admission process, a student has to sign a bond (against discontinuation of course) of the value of Rs. 33,70,500/- (Rupees Thirty three lakh seventy thousand five hundred only) with his/her parents/guardians as witnesses. The stamp paper necessary for the procedure will be supplied by the student, and must be authorized by a first class magistrate later on and the content of the bond will be supplied by the Institution.
- iii) Candidate must bring Medical Certificate from Registered Medical practitioner at the time of Admission.

4) Hostel fee: The Annual Hostel Fee is Rs. 2,00,000/- (Rupees two lakh only) per annum. Hostel fee is payable for 5 ½ years. Candidates staying in the hostel for more than 5 ½ years either due to failure in examination or extension of Internship or for any other reason will be required to pay additional hostel fee their extended stay. The extended duration shall be divided in a fraction of 6 or 12 months and accordingly fee shall be payable as per scheduled date every year.

5) Student Amenities fee: : Rs. 2,00,000/- (Rupees Two Lakh Only) per annum (Sports, Gymnasium, Wi-Fi, Educational and Recreational Tour, LogBook etc.) As per policy of the college

6) Mess Charge: Rs 1,00,000/- (One Lakh Only) Per Annum (Breakfast, Lunch, Dinner)

***Bank draft for Admission fee, Annual Tuition fee, Hostel Fee, Students Amenities Fee & Security money will be in favour of M.G.M. Medical College & L.S.K. Hospital, Kishanganj, payable at Kishanganj.**

7) Refundable Security Deposit Rs. 1,00,000/- (Rupees One Lakh Only) (One time)

8) University Registration Fee and University Examination Fee will be as per University.

Note: For detail information- Mob. No- 9262699908.

9) ELIGIBILITY CRITERIA FOR ADMISSION INTO MBBS COURSE:

Candidate seeking admission in MBBS Course 2025-26 session have to apply for NEET UG examination 2025 directly. No direct application for admission in MBBS course shall be entertained by the University or the College. NEET examination is conducted by the National Testing Agency (NTA) or agency authorized by the Central Govt. / NMC. Candidate must have passed 10+2 / I. Sc. or equivalent examination from recognized Board, Council or University and must have passed in the subject of Physics, Chemistry, Biology/ Biotechnology and English individually and must have obtained a minimum of 50% marks in Physics, Chemistry, Biology/Biotechnology taken together. Candidates should have passed English as a compulsory / core subject. For candidates belonging to SC/ ST or OBC, the minimum qualification marks are 40% and for the candidates with locomotory disability of lower limbs as defined by NMC, the minimum qualifying marks is 45% taken together in the qualifying examination. Prevailing NMC regulations shall apply.

All Admissions in MBBS and Postgraduate courses will be done by BCECE Board, Patna through Central Counselling.

NEET: Candidate must have qualified NEET examination and obtained minimum marks of 50th percentile in 'National Eligibility-cum-Entrance Test' held for the academic year 2025-26. However, in respect of candidates belonging to SC/ST/OBC, the minimum marks shall be 40th percentile. In respect of candidates with locomotory disability of lower limbs as defined by the NMC, the minimum marks shall be 45th percentile. In case, the percentile of marks mentioned above is modified by the Government of India/NMC, the revised percentile shall be applicable for respective categories.

AGE: The age of the applicant should not be below 17 years as on 31st December of the year of admission.

10. ACADEMIC SCHEDULE AND CURRICULUM

A) Overview of the undergraduate (MBBS) curriculum

- 1) The graduate medical curriculum (Competency Based Medical Education) is oriented towards training students to undertake the responsibilities of a "Physician of first contact" who can look after the preventive, promotive, curative and rehabilitative aspect of a medicine while maintaining global standards of care.
- 2) A medical student will undergo a period of certified study extending over a period of four and half academic years from the date of commencement of course to the date of completion of examination, which shall be followed by one year of compulsory rotatory internship training.
- 3) Each academic year will have at least 39 teaching weeks with minimum of 39 hours per week of involvement in teaching learning activities including one hour of lunch.
- 4) No more than four attempts shall be allowed to a candidate to clear the first professional examination. The total period for successful completion of first professional course shall not exceed four years. Partial attendance in examination of any subject will be counted as an attempt. A student shall not be entitled to graduate later than ten years of her/his joining the MBBS course.

B) Internal Assessment (IA): Internal assessment shall be based on day-to-day assessment. For subjects taught in more than one phase, there shall be IA in every phase in which the subject is taught. It shall relate to different ways in which learners participate in the learning process including assignments, preparation for seminar, clinical case presentation, preparation of clinical case for discussion, clinical case study/problem solving exercise, participation in project for health care in the community, Quiz, Certification of competencies, museum study, log books, SDL skills etc. Internal assessment should have both subjective and objective assessment. Internal assessment shall not be added to summative assessment. However, internal assessment marks in absolute marks should be displayed under a separate column in a detailed marks card. The internal assessment marks for each subject will be out of 100 for theory and out of 100 for practical/clinical (except in General Medicine, General Surgery and Obstetrics & Gynaecology, in which theory and practical assessment will be of 200 marks each).

For subjects that teach in more than one phase, cumulative IA to be used as eligibility criteria. The final cumulative marks are to be used for eligibility.

The details are:

1. General Medicine: The IA of 200 marks in medicine shall be divided across phases

- as Phase II - 50 marks,
- Phase III (part 1) - 50 marks,
- Phase III part 2 - 100 marks.

Phase III part 2 - 100 marks is divided as

- Medicine - 75 marks,
- Psychiatry - 13 marks,
- Dermatology - 12 marks.

The final cumulative IA for Medicine is out of 200 marks for theory and practical each.

II. General Surgery: The IA in surgery shall be divided across phases as:

- Phase II** - 25 marks,
- Phase III part 1** - 25 marks,
- Phase III part 2** - 150 marks.

Phase III part 2 - 150 marks shall be divided as

- General Surgery** - 75 marks,
- Orthopedics** - 50 marks,
- Anesthesia** - 13 marks,
- Radiodiagnosis** - 12 marks.

The final cumulative IA for surgery is out of 200 marks for theory and practical each.

III. IA of Forensic Medicine and Toxicology is divided as 25 marks in phase II and 75 marks in Phase III part 1. The final cumulative IA is out of 100 for theory and practical each.

IV. IA in Community Medicine is divided as 25 marks in phase I, 25 marks in phase II, and 50 marks in Phase III-part 1.

The final cumulative IA for Community Medicine is out of 100 marks for theory and practical each.

V. IA in ophthalmology and ENT is divided as 25 marks in phase II and 75 marks in Phase III part 1. The final cumulative

IA is out of 100 for theory and practical each for each subject.

C) Attendance: 75% attendance is mandatory in different sessions of foundation course held at the commencement of first professional phase to be eligible to sit at First professional phase university examination. Attendance in the any other subjects cannot be compensated for absence in foundation course. 75% attendance in theory classes and 80% attendance in practical/ clinical is mandatory for all the subjects at all the phases. 80% attendance in electives and maintenance of logbook is mandatory to sit at final professional phase part II examination.

D. University Examinations: University examinations are to be designed with a view to ascertain whether the candidate has acquired the necessary knowledge, minimal level of skills, ethical and professional values with clear concepts of the fundamentals which are necessary for him to function effectively and appropriately as a physician of the first contact.

Nature of questions in theory examinations shall include different types such as structured essays like Long-Answer Questions (LAQ), Short-Answer Questions (SAQ) and Multiple-Choice Questions (MCQ) shall be accorded 15% weightage of the total marks of each theory paper, Scenario based MCQs shall be accorded 15% more weightage in view of NEXT. Blueprint may be used for theory question papers.

Practical/clinical examinations shall be conducted in the laboratories and/or hospital wards and a blueprint must be used. The objective will be to assess proficiency and skills to conduct experiments, interpret data and form logical conclusion. Clinical cases kept in the examination must be common conditions that the learner may encounter as a physician of first contact in the community. Selection of rare syndromes and disorders as examination cases is to be discouraged. Emphasis should be on candidate's capability to elicit history, demonstrate physical signs, write a case record, analyze the case and develop a management plan. Viva/oral examination should assess approach to patient

management, emergencies and attitudinal, ethical and professional values. Candidate's skill in interpretation of common investigative data like X-rays, identification of specimens, ECG, etc. is to be also assessed. Application based questions should be included for newer CBME components like foundation course, ECE, AETCOM, Integrated topics, student-learner methods etc. in all theory, practical and clinical examinations of all internal assessments and university assessments.

University Examinations shall be held as under:

- a) **Phase-I** shall be held at the end of Phase I training (in the 12th month of that training), in the subjects of Anatomy, Physiology and Biochemistry.
- b) **Phase-II** examination shall be held at the end of Phase II training (12th month of that training), in the subjects of Pathology, Microbiology, and Pharmacology
- c) **Phase III Part I** examination shall be held at the end of Phase III part I of training (12th month of that training) in the subjects of Community Medicine, Forensic Medicine & Toxicology, Ophthalmology and Otorhinolaryngology.
- d) **Phase III Part 2/ National Exit Test (NEXT)** as per NEXT regulations- (Final Professional) examination shall be at the end of 17th/18th month of that training, in the subjects of General Medicine, General Surgery, Obstetrics & Gynecology, Pediatrics, and allied subjects as per NEXT Regulations.

Criteria for passing in a subject: A candidate shall obtain a cumulative 50% marks in University conducted examination including theory and practical and not less than 40% separately in Theory and in Practical in order to be declared as passed in that subject. **In subjects that have two papers, the learner must secure a minimum 40% marks in aggregate (both theory papers together).**

E. Hostel Rules :

- ❖ Students are not allowed to leave the hostel without prior intimation to Hostel warden and permission of the Principal. It is compulsory to make entry in the register kept for the purpose with the security guard on duty.
- ❖ Parents and relatives are not allowed to stay in the hostel during day or night with their wards.
- ❖ Valuable articles like gold rings, gold chains and cash are to be always kept in locked cupboards. Any excess cash amount should be deposited in the bank. Students are responsible for their valuable articles in the hostel premises.

F. Dress code for students : This is a professional medical school and therefore, the management and the general public expect them to conduct themselves in a manner that is expected of this noble profession. This also applies to personal grooming and the dress worn in classes and in public places on campus and while in hospitals and other health facilities. The intention of a dress code is to contribute to the overall professional development. All students of MBBS Batches that the following dress code (as applicable to boys and girls) has to be followed while within the college/hospital premises: 1. Formal shirts/Polo neck T-shirts/Kurti/Top: neatly ironed, should be tucked in. 2. Formal trousers/Jeans/Churidar/Leggings: Full Length 3. Covered and clean shoes 4. Apron (Mandatory)- White, cleanly washed and neatly ironed. Round neck T-shirts/Sleeveless tops/Chappals/Sandals/Flip-flops are strictly banned for the students in College and Hospital premises. The student is bound by the above rules from the day of entry to the day of exit. In case of violation of the above rules, strict action shall be taken by the higher management.

COMPETENCY BASED CURRICULUM OF THE INDIAN MEDICAL GRADUATE PROGRAMME

PHASE WISE TRAINING AND TIME DISTRIBUTION FOR PROFESSIONAL DEVELOPMENT

II. The period of 4½ years is divided as follows :

Phase-1 of 12 months including Foundation Course of two weeks and university exams.

It shall consist of Anatomy, Physiology, Biochemistry, Introduction to Community Medicine, Humanities, Attitude, Ethics & Communication (AETCOM) module, family adoption programme through village outreach where-in each student shall adopt minimum of three (03) families and preferably at least five (05) families, simulation-based learning, early clinical exposure, alignment & integration and pandemic module integrated.

ii) Phase-II of 12 months including university exams.

It will consist of Pathology, Pharmacology, Microbiology, family visit under Community Medicine, General Surgery, General Medicine, Obstetrics & Gynecology, AETCOM module, Forensic Medicine & Toxicology, alignment & integration and introduction to clinical subjects. Family Adoption Programme through village outreach where-in each student shall continue to follow up and provide necessary services under the supervision. Pandemic module integration & simulation-based learning to be continued with increasing complexity.

The clinical exposure to learners will be in the form of learner-doctor method of clinical training in all phases. The emphasis will be on primary, preventive and comprehensive health care. A part of training during clinical postings shall take place at the primary level of health care. It is desirable to provide learning experiences in secondary health care, wherever possible. This will involve: Experience in recognizing and managing common 1 problems seen in outpatient, inpatient and emergency settings,

- ❖ Involvement in patient care as a team member,
- ❖ Involvement in patient management and performance of basic procedures.

iii) Phase III-30 months.

Phase III Part 1 (12 months, including University exams)

Forensic Medicine and Toxicology, Community Medicine, Medicine & allied subjects, Ophthalmology, Otorhinolaryngology (ENT), Surgery & allied subjects, Pediatrics, Obstetrics & Gynecology, Radiodiagnosis, Anesthesiology, AETCOM, Pandemic module integration, alignment & integration and Clinical postings. Family Adoption Programme through village outreach and simulation-based learning to be continued with increasing complexity.

Electives (1 month) shall be in 2 blocks of 15 days each in Phase III part II. First 15days block starts after annual exam of Phase III MBBS part 1 and 2nd block after the end of 1" elective.

b. Phase 3 Part II (18 months, including University exam)-

Subjects include: Medicine and allied specialties (General Medicine, Psychiatry, Dermatology, Venereology and Leprosy (DVL), Surgery and allied specialties (General Surgery, Orthopedics, Anesthesiology and Radiodiagnosis), Obstetrics and Gynecology (including Family Welfare), Pediatrics, AETCOM module, Pandemic module integration, alignment & integration and Clinical postings.

III. Distribution of teaching hours phase wise

a. First, second and third Professional part-I, teaching hours :

Time allotted	: 12 months (approx 52 weeks)
Time available	: Approx. 39 weeks (excluding 13 weeks) (39 hours/week)
Prelim/University Exam & Results	: 9 weeks
Vacation	: 2 weeks
Public Holidays	: 2 weeks
Time distribution in weeks : 39 weeks x 39 hours = 1521 hours for Teaching - Learning.	

b. Final MBBS part-2, teaching hours :

Time allotted	: 18 months (approx 78 weeks)
Time available	: Approx. 62 weeks (excluding 16 weeks) (39 hours/week)
Prelim/University Exam & Results	: 10 weeks
Vacation	: 3 weeks
Public Holidays	: 3 weeks
Time distribution in weeks : 62 weeks x 39 hours = 2418 hours for Teaching - Learning.	
(Clinical Postings : 15 hours/week II MBBS onwards included in academic schedule)	

These are attached in separate annexure with all relevant tables.

Distribution of subjects for Professional Phase-wise training is given in Table -1 .

Minimum teaching hours prescribed in various disciplines are given in Table 2-6.

Distribution and duration of clinical postings is given in Table 7.

Marks distribution for various subjects for University Annual Examination (Table-8)

Time allotted excludes time reserved for Internal / University examinations, and vacation.

Second professional clinical postings shall commence before / after declaration of results of the first professional phase examinations, as decided by the Institution/University.

Third professional parts I and part II clinical postings shall start no later than two weeks after the completion of the previous professional examination.

A total of 25% of allotted time of third Professional shall be utilized for integrated learning with Phase I and II subjects. This will be included in the assessment of clinical subjects.

Legends :

AETCOM: Attitude, Ethics and Communication skills

FAP: Family Adoption Programme (village outreach)

SDL: Self Directed Learning

SGL : Small Group Learning (Tutorials/ Seminars / Intergrated Learning)

PCT (mentioned in Assessments) : Part Completion Test

Table 1: Distribution of subjects in each Professional Phase

Phase & year of MBBS training	Subjects & Teaching Elements	Duration (months)	University Examination
Phase-1	<ol style="list-style-type: none"> 1. Foundation course of 2 weeks at start of course 2. Anatomy, Physiology & Biochemistry, Introduction to Community Medicine, including Family adoption programme (FAP) through village outreach 3. Early Clinical Exposure 4. Attitude, Ethics, and communication Module (AETCOM) including Humanities 	12 months	Phase-1
Phase-2	<ol style="list-style-type: none"> 1. Pathology, Microbiology, Pharmacology 2. Community Medicine (including FAP) 3. Forensic Medicine and Toxicology 4. Introduction to clinical subjects 5. Clinical postings, Family visits for FAP 6. AETCOM 	12 months	Phase-2
Phase-3, Part-I	<ol style="list-style-type: none"> 1. Community Medicine, Forensic Medicine and Toxicology, Medicine & allied, Surgery & allied, Pediatrics, Obstetrics & Gynecology 2. Family visits for FAP 3. Oto-rhinolaryngology, 4. Ophthalmology 5. Clinical postings 6. AETCOM 	12 months	Phase-3, Part I
Electives	2 blocks, 15 days each (after the annual exams are over, irrespective of result outcome)	1 month	Phase-3, Part II
Part-3, Part-II, MBBS	<ol style="list-style-type: none"> 1. General Medicine, Dermatology, Psychiatry, Pediatrics, General Surgery, Orthopedics, Radiodiagnosis, Anesthesiology, Obstetrics & Gynecology 2. Clinical postings 3. AETCOM 	18 months (Including electives)	Phase-3, Part II

**Table 2: Foundation Course :
(2 weeks at start of course)**

Subjects / Contents	Teaching hours
Orientation Module including History of Indian Medicine	15
Skills Module	15
Community orientation module	5
Professional Development and Ethics Module (P&E) including Mental health	20
Enhancement of Language and Computer Skills Module including clinico-laboratory communication	10
Sports and Extra curricular activities	15
Total	80

Table no. 3: Distribution of Subject Wise Teaching Hours for Phase-1 MBBS

Subject	Large Group Teaching	SGT/ Practical/ Tutorials/ Seminars	SDL	Total
Foundation Course	-	-	-	80
Anatomy	180	430	10	620
Physiology	130	305	10	445
Biochemistry*	82	157	10	249
Early Clinical Exposure (ECE) **	-	27	-	27
Community Medicine	20	20	-	40
Family Adoption Program (FAP)	-	24	-	24
(AETCOM)***	-	26	-	26
Sports and extra-curricular activities	-	-	-	10
TOTAL	412	989	30	1521

SGT: Small group teaching, SDL: Self-directed learning

*Including Molecular Biology

**Minimum ECE hours. These hours are to be divided equally by anatomy, physiology & biochemistry.

***AETCOM module is a longitudinal programme.

Table no. 4: Distribution of Subject Wise Teaching Hours for Phase-2 MBBS

Subject	Large Group Teaching	SGT/ Practical/ Tutorials/ Seminars	Clinical Postings*	SDL	Total
Pathology	80	170	-	10	260
Pharmacology	80	170	-	10	260
Microbiology	75	143	-	10	228
Community Medicine (including FAP)	25	0	24	10	59
Forensic Medicine and Toxicology	12	25	-	08	45
Clinical Subjects	60	-	540	-	600
AETCOM	-	29	-	8	37
Sports, Yoga ,Extra-curricular activities	-	-	-	32	32
FINAL TOTAL	332	537	564	88	1521

SGT : Small group teaching SDL : Self-directed learning

Pl. note : *Clinical postings shall be for 3 hours per day, Monday to Friday.

There will be 15 hours per week for all clinical postings.

Table no. 5: Distribution of Subject Wise Teaching Hours for MBBS Phase-3, Part-1

Subject	Large Group Teaching	SGT/Practical/ Tutorials/ Seminars	SDL	Total
Electives	0	156	0	156
Gen. Medicine	20	30	10	60
Gen. Surgery	20	30	10	60
Obstetrics & Gynecology	20	30	10	60
Pediatrics	20	30	05	55
Forensic Medicine & Toxicology	35	65	20*	120
Community Medicine	50	80	20	150
FAP (Visits + log book submission)	-	26	10	36
Otorhinolaryngology (ENT)	30	50	20	100
Ophthalmology	30	50	20	100
Clinical posting*	-	-	-	593
AETCOM	0	19	12	31
TOTAL	225	566	137	1521

*Out of this, 21 Hours (07 days x 03 hours) must be utilised for demonstration of post mortem examinations

Pl. note: *Clinical postings shall be for 3 hours per day, Monday to Saturday.

There will be 18 hours per week for all clinical postings.

Table no. 6: Distribution of Subject Wise Teaching Hours for Phase-3 Part-2 MBBS

Subject	Lectures	SGL	SDL	Total
General Medicine	110	185	40	335
General Surgery	90	153	30	273
Obstetrics and Gynecology	80	150	30	260
Pediatrics	20	35	10	65
Orthopedics	30	50	20	100
AETCOM	30	0	22	52
Dermatology, Venereology & Leprosy	13	17	10	40
Psychiatry	13	17	10	40
Radiodiagnosis	8	10	8	26
Anesthesiology	8	10	8	26
Clinical postings*	-	-	-	1201
TOTAL	402	627	188	2418

Pl. note: *Clinical postings shall be for 3 hours per day, Monday to Saturday.

There will be 18 hours per week for all clinical postings.

Extra hours may be used for preparation of NExT or SDL.

Table no. 7: Clinical Posting Schedules in weeks phasewise

Subjects	PERIOD OF TRAINING IN WEEKS			Total Weeks
	Phase 2	Phase 3, Part 1	Phase 3, Part 2	
Electives	0	4	0	4
General Medicine	8	3	13	24
General Surgery	6	5	13	24
Obstetrics and Gynecology	6	3	13	22
Pediatrics	4	2	6	12
Community Medicine	4	4	0	8
Orthopedics	0	2	6	8
Otorhinolaryngology	4	4	0	8
Ophthalmology	4	4	0	8
Psychiatry	0	2	4	6
Radiodiagnosis	0	0	2	2
Dermatology, Venereology & Leprosy	0	0	6	6
Anaesthesiology	0	0	2	2
TOTAL	36	33	65	134

Table 8: Marks distribution for various subjects for University Annual Examinations

Phase of Course	Theory	Practicals	Passing Criteria
Phase-I MBBS			Mandatory to get 40% marks separately in theory and in practicals; and totally 50% for theory plus practicals.
Anatomy-2 papers	Paper 1 - 100	100	
	Paper 2 - 100		
Physiology-2 papers	Paper 1 - 100	100	
	Paper 2 - 100		
Biochemistry-2 papers	Paper 1 - 100	100	
	Paper 2 - 100		
Phase-II MBBS			
Pathology-2 papers	Paper 1 - 100	100	
	Paper 2 - 100		
Microbiology-2 papers	Paper 1 - 100	100	
	Paper 2 - 100		
Pharmacology-2 papers	Paper 1 - 100	100	
	Paper 2 - 100		
Phase-III MBBS part 1			
Forensic Medicine and Toxicology - 1 Paper	Paper 1 - 100	100	
Community Medicine - 2 Papers	Paper 1 - 100	100	
	Paper 2 - 100		
Otorhinolaryngology	Paper 1 - 100	100	
Ophthalmology	Paper 1 - 100	100	
Phase-III MBBS part 2			
Medicine & Allied	Paper 1 - 100	100	
	Paper 2 - 100		
Surgery & Allied	Paper 1 - 100	100	
	Paper 2 - 100		
Obstetrics and Gynecology	Paper 1 - 100	100	
	Paper 2 - 100		
Pediatrics	Paper 1 - 100	100	

Medicine & allied Paper-2 to have Medicine 50%, Psychiatry 25% and Dermatology 25% questions.
Surgery & allied Paper-2 to have General Surgery 40%, Orthopedics 40%, Anesthesia 10% and Radiodiagnosis 10%.

Any further updates as per NEXT regulations.



MODULAR GYNAE O.T.



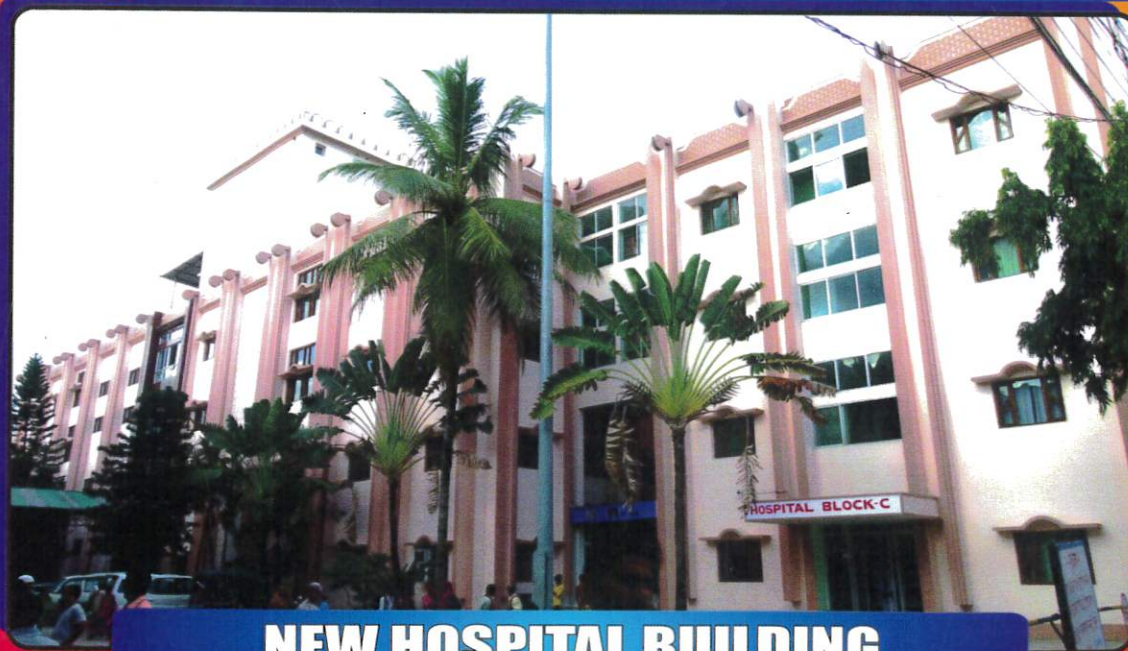
MODULAR GYNAE O.T. COMPLEX



M.R.I.



MODERN NEONATAL INTENSIVE CARE UNIT



NEW HOSPITAL BUILDING