THE AGA KHAN UNIVERSITY

Faculty of Health Sciences
Medical College

STUDENT HANDBOOK

(ADDENDUM 2019 – 2020)
Year 2, 3, 4 and 5
Class of 2023, 2022, 2021 & 2020

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1.0 Introduction

The Medical College offers a five-year integrated spiral undergraduate medical education (UGME) programme leading to the degree of Bachelor of Medicine, Bachelor of Surgery (M.B.,B.S). The programme is designed to equip students with the knowledge, skills, values and behaviour necessary to understand and influence the health of individuals and communities.

AKU attaches great emphasis to professional, personal and intellectual development of students, so that AKU medical graduates become contributory members and leaders of society.

**Goals of the MBBS Programme:**

The undergraduate educational objectives are designed to provide a framework of knowledge and experience that would enable a learner to understand concepts of biological and social sciences, and acquire technical skills and professional attributes that are necessary for:

1. Addressing problems of primary health care, including promotion of health, prevention of disease and community-based maternal and child care;

2. Competence in primary clinical care in a community, including care of individuals and families; and clinical care for patients who require the support of a hospital;

3. Gathering, understanding and evaluating new knowledge and applying that knowledge to problems of health and disease encountered in the future;

4. Commencing a programme of specific career training in:
   - basic science research and teaching
   - community health services
   - health services administration
   - general clinical practice in a community
   - any postgraduate clinical specialty
**Professional Attributes for AKU Medical Graduates**

At the end of the five-year curriculum, medical graduates should

1. be problem solvers, dealing effectively with unfamiliar problems; and
   - be continuous learners,
   - direct their own learning and evaluate this activity;
   - reason critically and make justifiable decisions;
   - practice evidence-based-medicine

2. work effectively with colleagues and health care teams; and
   - be able to assess themselves critically (for strengths and limitations); and
   - others in order to manage self and others;

3. initiate, participate in and adapt to change, using scientific evidence and approaches;

4. demonstrate scientific curiosity, and a positive attitude towards research;

5. provide compassionate and concerned care, as the patients’ advocate; and
   - demonstrate honesty and empathy with patients and their families;
   - provide or arrange for the best possible care;
   - communicate effectively;
   - be ethically and culturally sensitive;

6. recognize their duty towards their own families and regulate their professional activities appropriately;

7. provide leadership in issues concerning society.

8. maintain personal and professional integrity and credibility.

To achieve the Medical College curricular goals, students have opportunities to work in clinical settings at the Aga Khan University Hospital (AKUH), as well as in national and community oriented health services operating in urban and rural populations. The undergraduate medical curriculum uses multiple modes of learning with a gradual shift in focus from problem-based learning to problem-solving using best current evidence. Opportunities for broader intellectual development are increased through electives in a wide variety of subjects throughout the curriculum which includes a mandatory Electives, Humanities and Social Sciences.

Curriculum structure and general assessment principles are summarized in SECTION 1 of this document whereas SECTION 2 describes the policies for assessment and promotion during the five year course of study.
SECTION 1: CURRICULUM STRUCTURE AND GENERAL ASSESSMENT PRINCIPLES

2.0 Undergraduate Medical Education (UGME) M.B.,B.S. Curriculum

Students are required to complete all curricular requirements of the M.B.,B.S. programme as planned by the University. The University will not transfer credits for any courses taken in another University to replace grades/marks for any course/rotation in the M.B.,B.S. programme.

Curriculum Structure

a) The curriculum in Years 1 and 2 is modular and integrated; it uses problem-based learning as one of the major learning strategies, while the curriculum in Years 3 to 5 is clerkship based and uses experiential clinical problem-solving as the major learning strategy. Years 1 and 2 are described together while Years 3, 4 and 5 are described individually. In Years 3 to 5, students are attached to different clinical services and learn by being part of the health care team, with increasing patient responsibility over time. Basic Sciences (Anatomy, Biochemistry, and Physiology, basic concepts of General Pathology, Pharmacology and Microbiology) are learned during the first two years. In addition, Basic Science concepts, especially Pathology and Therapeutics are regularly revisited and assessed during years 3, 4, and 5. Community Health Sciences (CHS) run through years 1 and 2.

b) Longitudinal Themes including Communication and Clinical skills, Ethics, Evidence Based Medicine (EBM), Preventive Medicine, Behavioral Sciences, Leadership, Social Aspects of Medicine addressing gender and cultural biases run throughout the five-year curriculum (refer to 6.3d).

c) Humanities and Social Sciences (HASS), comprised of required and elective courses, is placed in Year 1.

2.1 Years 1 and 2

a) The modules in the first two years range from three to eight weeks in duration depending upon the number and complexity of the basic medical sciences (Anatomy, Biochemistry, Pharmacology, Physiology, Pathology and Microbiology) objectives to be achieved in that module.

b) Community Health Sciences are also taught in Years 1 and 2. Students are introduced to determinants of health and disease in the population and concepts of epidemiology, biostatistics, health systems, primary health care and environmental and occupational health.

c) Longitudinal themes are an integral part of both years.

d) In addition, Humanities and Social Sciences courses are offered in Year 1 and an Introduction to Research course in Year 2.

2.2 Year 3

Year 3 consists of clerkships and a course in Forensic Medicine and Toxicology.
a) Students in groups rotate through the following clerkships as members of the respective health care teams:

<table>
<thead>
<tr>
<th>Clerkship</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internal Medicine (including Infectious Diseases &amp; Clinical Microbiology)</td>
<td>6 weeks</td>
</tr>
<tr>
<td>Radiology</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Ophthalmology</td>
<td>4 weeks</td>
</tr>
<tr>
<td>General Surgery</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Orthopedics</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>8 weeks</td>
</tr>
<tr>
<td>Selectives</td>
<td>4 weeks</td>
</tr>
<tr>
<td>MNCH</td>
<td>4 weeks</td>
</tr>
</tbody>
</table>

b) The students learn by active participation in patient care, small group teaching methodology including Problem Solving Integrated Learning sessions (PSIL)\(^1\), and tutorials. Additional learning strategies include presentations, teaching rounds and others.

c) The course in Forensic Medicine and Toxicology runs through the year. It deals with clinical manifestations and pathology of injury, unnatural death and legal aspects of medical practice. Instructions are through lectures at AKU and attendance at other selected hospitals, for medicolegal cases and postmortems.

d) Longitudinal themes are an integral part of the year.

2.3 Year 4

Year 4 consists of clerkships and CHS for mandatory research course.

a) Students rotate in groups through the following clerkships as health care team members and CHS for research course:

<table>
<thead>
<tr>
<th>Clerkship</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obstetrics and Gynaecology</td>
<td>8 weeks</td>
</tr>
<tr>
<td>Paediatrics</td>
<td>8 weeks</td>
</tr>
<tr>
<td>Dermatology</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Anesthesia</td>
<td>2 weeks</td>
</tr>
<tr>
<td>Medicine (Pulmonology and Endocrinology)</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>4 weeks</td>
</tr>
<tr>
<td>Community Health Sciences (Research)</td>
<td>8 weeks</td>
</tr>
<tr>
<td>Electives in Pakistan</td>
<td>4 weeks</td>
</tr>
</tbody>
</table>

b) Longitudinal themes are an integral part of the year.

2.4 Year 5

Year 5 consists of clerkships and electives.

a) Students have increased patient care responsibilities under close supervision of residents and faculty, to acquire competence and confidence in managing clinical

\(^1\) Contextually relevant PSIL sessions are held in years 3 and 4 in all clinical clerkships.
problems. Students rotate through the following clinical services as health care team members:

<table>
<thead>
<tr>
<th>Service</th>
<th>Duration</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>11 weeks</td>
</tr>
<tr>
<td>Surgery</td>
<td>11 weeks</td>
</tr>
<tr>
<td>Family Medicine and Emergency Medicine</td>
<td>11 weeks</td>
</tr>
<tr>
<td>Electives</td>
<td>8 weeks</td>
</tr>
<tr>
<td>Selectives &amp; Pain</td>
<td>3 weeks</td>
</tr>
</tbody>
</table>

b) Longitudinal themes are an integral part of the year.

3.0 Principles of Assessment, Procedures & Attendance

3.1 Principles of Assessment

a) The term “Assessment” refers to assessment of student achievement. It is used constructively as a tool for improvement in learning, as well as for promotion and certification.

b) Assessment focuses on understanding of concepts (rather than memorization of facts), application of knowledge, competence in specific practical and clinical skills, and appropriate professional behaviour including the longitudinal themes. Satisfactory performance will be required in each of these areas for progress and promotion.

c) Continuous assessment assists learning through early awareness of students’ strengths and weaknesses in knowledge, skills and attitudes. Students’ performance is reviewed with them to assist in their learning. Assessment consists of formative and summative assessments. Continuous assessment tests are conducted at the end of modules/clinical clerkships and contribute to certifying examination scores at the end of each academic year. Performance in continuous assessment is an eligibility criterion for certifying examinations.

d) The assessment will be criterion referenced.2

e) All required and elective, block and longitudinal courses are part of the curriculum and have to be completed satisfactorily.

f) Satisfactory completion of selective and elective experiences at institutions approved by the Electives Committee, are a pre-requisite for progress and promotion.

g) Any student identified as having academic difficulties will be assessed in depth by the appropriate faculty who will guide, help or take appropriate actions to make student overcome his/her difficulties.

h) The duration and content of remedial work for students not meeting the prescribed requirements is determined by the faculty in accordance with weakness identified in a student’s learning or clinical experience. In the clinical clerkships, failure in Continuous Assessment (CA) requires the student to repeat the clerkship, while failure in the End of Clerkship (EOC) Examination requires remediation of half of the clerkship time and a

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2 Criterion referenced assessment means the students are assessed according to pre-determined criteria and not in comparison to their peers.
minimum of four weeks in Year 5 if the scores are between 50-55%. Score of less than 50% requires the student to repeat the complete clerkship.

i) Only one of electives/selectives/pre-certifying examination leave can be utilized as a single event in a given academic year for remediation. All four weeks of the AKU selectives in Year 3 and electives in Year 4 may be utilized for remedial work. In Year 5 only 4 weeks of the Electives period may be utilized for remedial work.

j) Remediation exceeding 4 weeks may result in delayed graduation.

k) Remediation in the first two years will be arranged by the relevant year committee in consultation with concerned faculty, upon recommendation of the Examination and Promotions Committee (E&P Committee). Remedials in clerkships will only be scheduled during regular rotations, and will be coordinated by the Registrar’s Office, upon recommendation of the E&P Committee. Remedial work is not permitted during holidays.

l) Pass/fail will be determined as per AKU policies outlined in the Examination and Promotions Guidelines.

3.2 General Criteria for Pass, Fail and Promotion

a) Eligibility: The students will be considered eligible for certifying examination according to the following criteria:

i. In Years 1 and 2, the students will be considered eligible to sit in the certifying examinations, if they have an overall aggregate of 55% in relevant summative examinations; an aggregate of 50% in the practical/Alternative to Practical (ATP) examinations (See Appendix 1); and satisfactory Problem-Based Learning (PBL) and Team-Based Learning (TBL) process assessment (see section 4.1C).

Attendance and satisfactory performance in the Longitudinal Themes and HASS courses is mandatory. A student who fails these courses will be required to complete remedial work before being considered eligible to write the respective Certifying Examinations.

ii. Students with incomplete assignments/clerkships will not be allowed to write the end-of-term/course/clerkship examinations.

iii. The examination eligibility lists will be posted on one45 after approval by E&P Committee. Students are responsible for confirming their eligibility before the examination.

iv. Students failing to meet required standards must complete remediation as determined by relevant faculty and approved by E&P Committee. Students must complete remediation and successfully fulfill all assessment criteria of the remedial programme for the course(s) failed to become eligible for respective certifying examinations. Students who are unable to perform satisfactorily in the remedial assignment(s) may be required to repeat the year.

v. Consistent irresponsible behaviour may result in a period of suspension, repeating the year, up to expulsion.

vi. There is zero tolerance for unethical conduct and/or plagiarism.
vii. In clinical clerkships, students must achieve 55% in continuous assessment before being considered eligible to take the End of Clerkship (EOC) test, and must achieve 55% in the EOC test to be declared as having completed that clerkship satisfactorily (see sections 6, 7 and 8).

viii. Specified course requirements for each year will have to be completed for eligibility to write the certifying examinations.

ix. Courses identified for promotion are to be passed before further progress to the next year.

b) Students who fail to pass any of the Certifying Examinations after two attempts will be asked to withdraw from the Medical College. This also applies to individual disciplines being tested in the certifying examinations.

c) A student is allowed a maximum of 6.5 years to graduate. If projected period of study and examination extends beyond the stipulated time, the student will be asked to withdraw.

If a student fails in the continuous assessment of the clerkship, s/he will be required to repeat the entire clerkship. Failure to achieve 55% in the EOC test will require remedial of at least half of the clerkship duration.

Any remediation will be undertaken as prescribed with a scheduled regular rotation of students. Failure in remedial of clerkship will result in repeating the year.

d) Continuous Assessment scores contribute to the final scores of MBBS certifying examinations. Scores of continuous assessment shall be used once only.

3.3 Certifying Examinations

a) The five-year MBBS programme is assessed by four Certifying Examinations. These examinations are conducted according to the guidelines laid down by the Pakistan Medical and Dental Council (PM&DC). External examiners are invited for these examinations. Scores are not disclosed; these are graded as pass/fail, as per AKU policies.

b) MBBS Part I examination is written in two parts, MBBS-IA and MBBS-IB, at the end of years 1 and 2, respectively. The subjects examined include Anatomy, Physiology, Biochemistry, Pharmacology, Pathology, Microbiology and Community Health Sciences.

c) MBBS Part II, III and IV examination are written at the end of Years 3, 4 and 5.

d) Basic science concepts especially Pathology and Therapeutics will be assessed during years 3, 4 and 5 certifying examinations.

e) Students are required to pass 50% of history taking and 50% of physical examination stations in Year-end OSCE.

3.4 Procedures

a) The university expects its students to behave as mature and responsible professionals. They must follow University’s code of conduct. Students’ promotion will be affected adversely by undesirable professional behaviour. Students are the first point of contact
for all University related matters. Parents are informed/contacted subsequent to any discussions and deliberations with students.

b) Each module/course and clerkship will be assessed.

c) Students unsuccessful in module/clerkship tests will be re-assessed after appropriate remediation.

d) Students will be examined by internal and external examiners in all certifying examinations and/or their components.

e) Fractions of scores obtained from summative examinations are taken into consideration up to calculation of the final score. Only the integer of the final score is recorded in the certifying examination.

f) The results of summative and end of clerkship examinations may be challenged within three months of declaration of results. After which request for review will not be entertained.

g) Performance in process assessment is recorded as satisfactory or unsatisfactory and communicated for all modules.

h) The results of certifying examinations (MBBS Parts I-IV) are recorded as fail, pass, or pass with Honours.

i) Re-sit of the certifying examinations are held before the start of the next academic year (except for Years 3, 4 &5).

j) Scores obtained for all assessments are recorded and kept by the Registrar’s Office. Results will be communicated to the students and a copy will be sent to their parents. Transcripts are available on request.

k) Students are advised to report at the examination venue 5 minutes before the start of the exam (formative, summative, certifying, EOT, OSPEs, OSCEs, etc.). No student will be allowed to enter in the examination venue after the scheduled time.

l) Absence from an examination without a valid reason is considered as a failure in the examination.

m) Written examination will normally be of three hours duration. In case of longer examination, a break will be provided.

n) Aggrotat\(^3\) rule may be applied by university, upon the discretion of the University when considered appropriate and approved by Dean or his nominee.

o) In case of exceptional and unforeseen circumstances beyond the scope of the existing guidelines, the University reserves the right to provide case-by-case rulings in the best interest of the student and the institution.

### 3.5 Pass with Honours

a) The Medical College will grant Honours by criterion-referenced assessments, and will require exemplary demonstration of the desired attributes for AKU medical graduates (ref to 1.0). Honours recommended by the examiners and year committees in different

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\(^3\) Aggrotat In special circumstances Year Committees may decide to ignore a particular Summative Examination and calculation of the result is made on the basis of rest of the Summative examinations.
disciplines/subjects, will be conferred after approval by Examinations and Promotions Committee. Any disciplinary action against a student will be considered a disqualifier for Honours.

b) Honours in Basic Health Sciences will be awarded at the end of Year 5. A score of 80% or more in Year 1 and 2 may qualify for Pass with Honours, subject to satisfactory performance in the Basic Health Sciences components in years 3, 4 & 5.

c) Scores of MBBS 1A and MBBS 1B in Community Health Sciences (CHS) will be used as a minimum criterion for progressing with 50% as the cut-off. Final CHS scores will be calculated with 60% contribution from CHS scores obtained in MBBS Part 1 and 40% contribution from Year 4 rotation. Students who achieve a total score of ≥80% will be awarded Honours.

d) In clinical disciplines, students considered for Honours are required to take an oral examination in order to probe their critical thinking and decision-making ability based on best current evidence, ethical and social sensitivity, depth and breadth of their understanding, and any research or community work they may have done. Students securing 80% or more are invited for the Honours viva in the clinical disciplines. If more than 5 students score 80% or more in a discipline, top 5 will be called for Honours.

3.6 Calculation of Student Class Ranking

Merit Awards and the Aga Khan University Scholarships during Years III, IV, and V [see Student Handbook Section II-page 25] are awarded on the bases of student class rankings calculated for a particular year. These rankings are not public knowledge and are not disclosed to students. These are directly communicated to Institutions, if requested, where a student may have applied for scholarships, Selectives, Electives; or Residency programmes after completion of the MBBS programme. Student consent for disbursement of this information to external agencies is required. For calculation of the AKU merit scholarships, no application or consent form is required.

Certifying examination scores are used to calculate student ranking as follows:

I. Years I and II: Ranking is based on the MBBS 1A, 1B Certifying examinations. The contribution of five Summative examinations is 30% and of the Certifying examination [MBBS IA & IB] it is 70%.

II. Years III, IV and V: Student ranking is calculated in year III, IV and V. These are based on MBBS II, MBBS III, and MBBS IV examination results respectively. A cumulative of the Continuous Assessments and End of Clerkship Examinations each contribute to 50% of the total aggregate score of a Certifying examination.

3.7 Attendance

a) Students are expected to attend all scheduled teaching sessions and examinations. Lack of attendance in scheduled teaching learning sessions/clinics and other learning activities reflects unprofessionalism. Professionalism is an essential component of the Medical Student Performance Evaluation (MSPE) letter. Absenteeism will be recorded in the letter as ‘unprofessionalism’. MSPE is a mandatory letter of reference, signed by the
Medical College Dean, that is required when a student is applying for a residency placement in USA.

b) Attendance in PBL, TBL sessions, laboratory sessions, tutorials, presentations, field visits, HASS courses (compulsory and electives), clinical and communication skills sessions, clinics and wards is mandatory. Absence from these sessions may render the students ineligible to write certifying examinations.

c) Where available and required, attendance will be recorded through a log-in/log-out biometrics system. All students must reach the venue at least 5 minutes prior to the start of the session to log-in. Attendance will only be logged in the first 10 minutes. Any student who logs in after this grace period and/or logs out before the conclusion of the session will be considered absent.

d) Absence for illness must be certified appropriately by Student’s physician in Community Health Centre (CHC). Certificates from outside Aga Khan University Hospital (AKUH) must be verified by the Student Health Physician in CHC after counterchecking.

e) Emergency leave may be granted for serious illness or death in the immediate family. Even then, absence exceeding a minimum critical period, specified by individual disciplines, will require completion of rotation/clerkship.

f) A student may apply for a ‘leave of absence’ in order to pursue courses or research activities at this or other Universities, or for any other reason considered valid by the Curriculum Committee. On the recommendation of the Curriculum Committee, the Dean, may award leave of absence for a maximum of one year, or completion of a degree/course based on their academic performance.

3.8 University requirement for USMLE registration

Upon completion of MBBS Part II examination (Year 3) with a cumulative score $\geq 70\%$ (Certifying Examination scores comprise of End of Clerkship and Professional Examination), the University will verify USMLE registration form on web portal. However, the eligibility is not required in Year 5.

3.9 University requirement for participation in additional research (other than curricular requirements)

The students will be allowed to participate in additional research if they secure cumulative score of $\geq 65\%$ in the last Certifying Examination. Eligibility will be reconfirmed each academic year.
SECTION 2: ASSESSMENT AND PROMOTION POLICIES

Curricular and Examination Framework

Year 1

1. Humanities and Social Sciences
   Assignments and presentations
2. Introductory Module: Cells and Tissues
   Formative Assessment
3. Blood
   Summative Examination I (will include content of Introductory Module)
4. Inflammation and Neoplasia Module
   Summative Examination II
5. GIT, Nutrition and Metabolism Module
   Summative Examination III
6. Respiration and Circulation Module
   Summative Examination IV
7. Renal Module
   Summative Examination V
8. Multisystem I Module

   Formative Objective Structured Clinical Examination (OSCE)
   MBBS Part IA Certifying Examination

Year 2

1. Musculoskeletal System Module
   Summative Examination I
2. Neurosciences Module
   Summative Examination II
3. Head and Neck Module
   Summative Examination III
4. Introduction to Research
   Project and assignments
5. Endocrine & Reproduction Module
   Summative Examination IV
6. Immunity & Infectious Diseases Module
   Summative examination V
7. Neoplasia & Multisystem II

   Objective Structured Clinical Examination (OSCE)
   MBBS Part IB Certifying Examination
4.0 Years 1 and 2 - Assessment Structure

4.1 Continuous Assessment

a) Formative Assessment Test

At the end of Introductory Module, a mandatory ‘Formative Examination’\(^4\) is held on the pattern of a Summative examination. Students failing to appear in this examination without a valid reason will not be allowed to continue the academic year. The content examined will be included in end of the module Summative Examination I.

a) Summative Assessment Tests

Content Assessment will comprise of written and practical/ATP examination.

i) Written assessment: The written examination test will have questions from Anatomy, Biochemistry, Community Health Sciences, Physiology, Pharmacology, Pathology and Microbiology. Summative assessment tests scores of Years 1 and 2 will contribute 30% to the MBBS 1A and 1B examinations respectively.

ii) Practical/ATP Examination:

a. Practical/ATP examination will be held at the end of relevant modules. A minimum score of 50% is required to pass the practical/ATP examination. Failure will require remediation and resit practical/ATP examination. Students successful in resit practical/ATP examination will be awarded a score of 50%. By the end of the year, a minimum aggregate score of 50% is an eligibility criterion for MBBS IA & B examinations. Failure to achieve this score will require remediation and resit practical/ATP examination. Successful completion will make the student eligible for certifying examination.

Practical/ATP component shall contribute 10% to the summative assessment test scores (see appendix 1).

b. Additionally, essential psychomotor, problem-solving and application skills must be signed off in pre-identified laboratory and tutorial sessions. Students who miss these essential skills sign-off sessions due to approved leave will be responsible for contacting the respective faculty for a remedial sign-off session to ensure eligibility for the certifying exam. Students who miss a session due to unapproved absence will be ineligible for the certifying examination and will write the re-sit exam as first attempt following remediation.

c. For other/non-sign-off laboratory sessions, a student who is absent in more than one session in a module of \(<4\) weeks and more than two sessions in a module of \(>4\) weeks,

\(^4\) The objective of Formative assessment is to provide feedback to the students about their level of preparation and to introduce them to the pattern of examination. Marks from this exam are not used in the continuous assessment scores. Aggrotat when applied means that the mean score for eligibility will be calculated from the number of examinations actually taken by the student.
in more than one module, will be ineligible to write the certifying examination and will write the re-sit exam as first attempt.

b) **Process Assessment**

This includes PBL, TBL tutorial sessions and longitudinal themes. Failure in process assessment will be recorded on transcripts.

i. **PBL/TBL Tutorial Sessions:** Process Assessment is based on assessment in terms of regularity, punctuality, contribution, group dynamics and communication skills.

ii. **Attendance in PBL/TBL sessions:** Attendance in PBL/TBL sessions is mandatory. Unapproved absence from a PBL/TBL session (even one) will result in failure of process assessment in that module.

iii. In a short module (up to 4 weeks) if a student is awarded ‘unsatisfactory’ in more than one PBL session s/he will fail the module. However, in a module of more than 4 weeks duration, award of ‘unsatisfactory’ in more than two PBL sessions will lead to failure in the module. ‘Satisfactory’ performance in process assessment will contribute toward consideration for awarding honours.

iv. If a student fails to achieve ‘satisfactory’ Process Assessment in any one module, s/he will be counseled and corrective measures will be suggested. If a student fails to achieve ‘satisfactory’ Process Assessment in any two modules s/he will not be considered eligible to write the MBBS I-A and IB examinations and will be asked to take this exam with the re-sit students before the next academic year. If the student fails to achieve satisfactory Process Assessment in three or more modules, he/she will be asked to repeat the year.

c) **Longitudinal Themes**

i) **Longitudinal themes comprise of Communication Skills, Clinical Skills, Ethics, Behavioural Sciences, Evidence Based Medicine (EBM), Leadership, Social Aspects of Medicine and Preventive Medicine.** Attendance and satisfactory completion of these sessions/courses, based on class participation, presentations, assignments and assessments is mandatory for eligibility to sit in the certifying exams. Failure to achieve overall satisfactory performance in any Longitudinal theme in Years 1 and 2 may result in ineligibility to write the MBBS-1A or 1B exam, respectively. Remedial assignments will be given to those students who have unsatisfactory attendance and/or performance and will write the MBBS IA – IB resit examination as a first attempt.

ii) **Students must pass all the HASS courses to be eligible for the MBBS1A exam.** If a student fails any HASS course(s) or misses more than 25% of the module for any reason, s/he will be required to complete structured remediation during the summer vacations and successfully fulfill all assessment criteria of the HASS course(s) failed/missed to become eligible for the MBBS1A exam. For students who do not perform satisfactorily in the remedial coursework/assessment see section 3.2 (iii) and (iv). Students who miss more than 25% of HASS due to late joining will also be required
to complete the coursework and assessment in the summer vacations to become eligible for the MBBS1A exam.

iii) Satisfactory performance in language courses in spoken Urdu and written and spoken English will be required by those students who are assessed to have deficiency in these areas.

4.2 Eligibility

Summative examinations will be held after all the modules except Multisystem modules. By the end of the year, to be eligible to sit for MBBS IA and B examinations, each student must achieve an aggregate score of:

- 55% in summative examinations;
- 50% in practical examination/ATP examination;
- Satisfactory Process assessment and attendance and
- Satisfactory assessment in all Longitudinal themes, HASS courses and Introduction to Research course.

4.2.1 Student failing and/or having approved leave for a summative examination, in two modules, will not be eligible to write the final MBBS IA/IB examination; even s/he achieves an aggregate score of 55%. S/he will be offered remediation followed by re-sit summative examinations for both modules. Upon passing both resit exams. S/he will be eligible to write the MBBS re-sit examination as a first attempt.

4.2.2 Student failing or having approved leave in more than two summative examinations held at the end of modules, will not be eligible for M.B.BS IA and B examinations, even if they achieve an aggregate score of 55% (at the end of Year 1 and 2 as applicable). In this case, student will be required to repeat the year. If the aggregate score is less than 55% the student will be asked to withdraw from the Medical College.

4.2.3 Student repeating the year without appearing in the MBBS IA/IB in the previous year, because of not being eligible will take certifying examination at the end of repeat year as a first attempt.

4.2.4 In the repeat year, if a student fails in three modules, s/he will be asked to withdraw from the Medical College.

4.2.5 In cases where a student secures <50% in a re-sit module examination, and in repeating the year will be asked to withdraw from the Medical College.

4.2.6 If a student fails in one module or has approved leave for more than 25% of the module duration or the day of the examination, s/he will be required to remediate. In the case of failure, deficiencies will be identified based on performance related to objectives of the module and remedial assistance will be provided by faculty/teaching assistants. Students will be re-assessed by faculty using (assignment, viva, etc.). No new score will be generated. The original score
will be included in calculating aggregate score at the end of year for determining eligibility.

4.2.7 In accordance with 3.1(g), faculty may recommend appropriate corrective action for any student identified as having major academic difficulties or unproven academic track record to ensure that they do not proceed with gaps in their knowledge.

4.2.8 **Module re-sit examination:**

a) Student failing in both modules in the re-sit summative examination will be required to repeat the year.

b) If a student passes one module but fails the other, s/he will be allowed to take the MBBS re-sit examination provided the score is ≥ 50% in the failed module and the student has not already failed that particular module during the year. No more than two attempts are allowed in a year to pass a single module.

4.2.9 **End of the Year Skills Assessment:**

a) Mandatory formative and summative Objective Structured Clinical Examinations (OSCEs) are held at the end of Years 1 and 2 respectively. In order to be eligible for OSCEs, students must have satisfactorily completed and signed-off all clinical and communication skills sessions held during the year. Submission of log book, completed over Years 1 and 2 is an eligibility criterion to appear in the end of Year 2 OSCE. The passing score for each examination will be determined by standard setting. This examination will include clinically relevant basic sciences psychomotor skills stations; students will be required to pass 50% of these stations separately.

b) Formative end of year OSCEs: Formative OSCE is held at the end of Year 1. It is mandatory for each student to take the examination and obtain feedback in order to be promoted to Year 2.

c) Summative end of year OSCEs: Summative end of year OSCE is held at the end of Year 2 and assess clinical and communication skills learned in Years 1 and 2. The students are required to pass this OSCE for promotion to Year 3.

4.3 **M.B;B.S. IA and IB Examinations**

M.B;B.S. IA – B are composite of 30% scores from summative examinations, 50% of from end of the year written examination and 20% from oral structured multidisciplinary examination.

Process assessment of the PBL/TBL sessions does not contribute any scores towards MBBS examination, but will be recorded on the transcripts.

a) Students are required to pass both the MBBS 1A & 1B examinations separately, with a minimum score of 50% in individual disciplines and an overall aggregate score of 55%, before being allowed to progress to the next year.

b) If the overall aggregate score is 55% or greater, but the score in up to two disciplines is less than 50%, then student will be given a choice either to repeat
the year or undertake remedial work and be re-examined in those area(s) with integrated questions focusing on the required discipline(s). Student failing to achieve the passing grade in the M.B.,B.S 1A & 1B re-sit examination will be asked to withdraw from the Medical College.

c) If the overall aggregate score is 55% or greater, but the score in more than two disciplines is less than 50%, then the student will be given an option of repeating the year or undertake remedial work and appear in full re-sit examination, student failing to achieve a passing grade in the M.B.,B.S 1A & 1B re-sit examination will be asked to withdraw from the Medical College.

d) If the overall aggregate score is between 50 and 55% in MBBS I-A the student will not be promoted to Year 2 and will be required to repeat Year 1. The second attempt at MBBS IA will be final attempt, failing student will be asked to withdraw from the Medical College.

e) If the overall aggregate score is below 50%, the student will be asked to withdraw from the Medical College.

f) A Summative Objective Structured Clinical Examination (OSCE) will be held at the end of Year 2 to assess the clinical skills, clinically relevant basic sciences psychomotor skills and longitudinal themes. Without passing the OSCE, students cannot proceed to Year 3. Those failing to comply with the above for a valid reason will be provided with an opportunity for remediation before the start of Year 3.

g) Students who were not able to appear in the examination for an acceptable reason (refer to the Student’s Handbook) will be offered an opportunity to appear in the re-sit examination as a first attempt.

h) Transcript will reflect whether the student passed in the first attempt or the re-sit.

4.4 Promotion from Year 1 to Year 2

a) MBBS – IA: Students are required to pass the MBBS I-A examination, with a minimum score of 50% in individual disciplines and an overall aggregate score of 55% before proceeding to the Year 2.

b) Formative end of year OSCE: Formative OSCE is held at the end of Year 1. It is mandatory for each student to take the examination and obtain feedback in order to be promoted to Year 2.

c) Longitudinal Themes: Satisfactory completion of all longitudinal themes courses will be required.

d) HASS: Satisfactory completion of all courses will be required.

4.5 Promotion from Year 2 to Year 3

a) MBBS-IB:
Students are required to pass the MBBS I-B examination, with a minimum score of 50% in individual disciplines and an overall aggregate score of 55% before proceeding to the Year 3.

b) **End of Year 2 OSCE:**

i. An Objective Structured Clinical Examination (OSCE) is held at the end of Year 2 to assess the clinical skills of students. Students must demonstrate satisfactory skills to be promoted to Year 3.

ii. Students will be required to achieve satisfactory performance in:

1. at least 50% of the history-taking stations
2. at least 50% of the physical examination and procedural skills stations.
3. at least 50% of the functional anatomy/anatomical skills stations

iii. And an overall pass in 50% of all OSCE stations, which may include stations on ethics, communication and counseling skills. Students who fail to perform satisfactorily in OSCE will be offered remediation followed by re-sit OSCE.

c) **Longitudinal Themes:** Satisfactory completion of all longitudinal themes will be required.

d) **Introduction to Research:** Students are required to complete the requirements of this course satisfactorily to be promoted to Year 3.

e) **On campus Clinics:** Students are required to achieve satisfactory completion of on-campus clinics and the elective experiences to be promoted to Year 3. Failure to perform satisfactorily in on campus and electives experiences will require satisfactory completion in elective/selective period in Year 3.

f) If a student separately achieves between 55 – 59.9% in 2 out of 4 summative examinations (II – V) in Year 1, and 3 out of 5 summative examinations in Year 2, s/he will be considered as consistently borderline. Consistently borderline students will be promoted to Year 3, but will remain on probation for the first two rotations during which period they will be provided additional academic counseling. A student who has continued unsatisfactory/borderline performance i.e. either fails or has scores between 55 – 59.9% during the probationary period will be asked to withdraw from the University.
Curricular and Examination Framework

Year 3

1. Internal Medicine (including Infectious Diseases, & Clinical Microbiology)  
   End of Clerkship Examination  
   6 weeks

2. Radiology  
   End of Clerkship Examination  
   2 weeks

3. Otolaryngology  
   4 weeks

4. Ophthalmology  
   4 weeks

5. General Surgery  
   End of Clerkship Examination  
   4 weeks

6. Orthopedics  
   End of Clerkship Examination  
   4 weeks

7. Family Medicine  
   End of Clerkship Examination  
   8 weeks

8. Forensic Medicine Course  
   runs throughout the year

9. Selectives  
   4 weeks

10. Maternal and Neonatal Child Health (MNCH)  
   End of Clerkship Examination  
   4 weeks

End of Year OSCE in Otolaryngology and Ophthalmology  
End of Year 3 Objective Structured Clinical Examination (OSCE)

MBBS Part II Certifying Examination in Ophthalmology, Otolaryngology and Forensic Medicine
5.0 Year 3 – Assessment Structure

5.1 Continuous Assessment in Year 3

a) Students will be continuously assessed throughout the clerkships. A minimum score of 55% is required in Continuous Assessment (CA) in order to be eligible to take the End of Clerkship test (EOC).

b) In Ophthalmology and Otolaryngology, 70% of the clerkship score will be contributed by CA and 30% by End of Year OSCE.

c) For Non-Certifying disciplines, 70% of the clerkship score will be contributed by CA and 30% by the EOC test.

d) If a student is unable to achieve 55% in the CA, s/he will repeat the entire clerkship during a scheduled regular clerkship and will be eligible to take the EOC test after satisfactorily completing the rotation.

e) Successful completion of an End of Clerkship/Course test requires a minimum of 55% scores.

f) If a student is unable to achieve 55% or more in the EOC test s/he will be required to do at least 50% remedial of the total clerkship, followed by next scheduled EOC test.

g) In case of failure in remedial rotation, student will have to repeat the entire year. Such student will be asked to withdraw from the University if s/he does not have the maximum time allotted of 6.5 years for completing the MBBS programme.

h) From the Maternal and Neonatal Child Health (MNCH) rotation (CA and EOC Exam) scores 33% weightage each will be added to the Year 4 Ob/Gyn and Paediatrics rotation (CA and EOC Exam) scores. Students are required to pass the CA and EOC examination in each rotation separately.

i) Students are required to pass 50% of history taking and 50% of physical examination stations in clerkship and year end OSCE.

5.2 End of Year 3 OSCE

a) Minimum score of 55% is required in Family Medicine, Medicine and Surgery clerkships individually to be eligible to attempt the OSCE.

b) This examination assesses clinical skills and longitudinal themes. Students are required to pass 50% of history taking and 50% of physical examination stations; in addition the Abdominal examination station is a MUST PASS station for successful completion of the OSCE. Students, who fail OSCE, will be offered remediation followed by re-sit OSCE.

5.3 End of Year 3 OSCE (Otolaryngology, Ophthalmology)

a) Minimum score of 55% is required in Otolaryngology and Ophthalmology clerkships individually to be eligible to attempt the OSCE.

b) This examination assesses clinical skills and concepts of relevant Systemic Pathology concepts.

c) Students, who fail OSCE, will be offered remediation followed by re-sit OSCE.

d) Any further failure would require student to repeat the year.
5.4 **Forensic Medicine**

Continuous Assessment will contribute 50% towards the final score. 40% of this Continuous Assessment will be derived from Continuous Assessment Tests (conducted throughout the year). The Journal will contribute 10% to continuous assessment score.

To be eligible for the MBBS Part II certifying examination students will be required:

- to achieve aggregate 55% in five out of seven Continuous Assessment Tests (CATs) which make up the continuous assessment.
- a minimum of 50% in the Journal.

5.5 **Selectives**

a) Satisfactory completion of Selectives is mandatory.

b) Performance during selective experience is assessed by the supervisors, which are approved by the Electives Committee. Submission of selective assessment is to be done within two months of completion of the rotation.

c) Students are required to commence the next clerkship on schedule, upon completion of the Selectives rotation, failing which; students will be required to complete their clerkship according to recommendations of the department.

d) The entire AKU Selectives period may be utilised for remedial work.

e) The selective evaluation MUST be submitted by the end of the next rotation but within the following two months of the Selectives. Failure to submit timely evaluation may result in professional exam ineligibility.

5.6 **Eligibility Criteria for MBBS Part II Certifying Examination**

a) A score of 55% is required in the Year End OSCE in Ophthalmology and Otolaryngology.

b) If the clerkship score is less than 55% in no more than two disciplines, other than Ophthalmology and Otolaryngology, and the aggregate score is 55% or greater, the student may be allowed to take the MBBS Part II certifying examination and complete remedial work later.

c) Cumulative clerkship remediation of 12 weeks will render the student ineligible to attempt MBBS II certifying examination and will require repeating the year.

d) Satisfactory completion of selectives rotations according to the approved criteria by the Elective committee. Unsatisfactory performance will require remediation and satisfactory completion of these experiences.

e) Forensic Medicine: Minimum 55% score in the continuous assessment tests and a minimum of 50% in the journal will be required (ref to 5.4) to be eligible to take the MBBS Part II certifying examination.

f) Satisfactory completion of the mandatory longitudinal themes and selectives is required.
5.7 MBBS Part II Certifying Examination

a) MBBS Part II certifying examinations are held in Ophthalmology, Otolaryngology, and Forensic Medicine, which include relevant aspects of clinical microbiology, pathology, pharmacology and therapeutics.

b) Clerkship scores and the written examination each contribute 50% to the final MBBS Part II scores. Clerkship scores include continuous assessment and EOC tests scores.

c) Students must pass written examination of each discipline separately with a minimum score of 50%.

5.8 Re-sit MBBS Part II Certifying Examination

a) Students, who either were ineligible to take the examination or were not able to appear in the examination for an acceptable reason (refer to the Student’s Handbook) will be offered an opportunity to appear in the re-sit examination as a first attempt.

b) Students, who failed the examination, will be offered an opportunity to appear in the re-sit examination as a second attempt. Students will be asked to withdraw after failure in the second attempt.

c) Transcripts will state clearly any re-sit second attempt.

d) Failure to achieve the required aggregate will require satisfactory completion of remedial assignments followed by the re-sit as a first attempt. In case the student fails to achieve the 55% of remediation s/he will be asked to repeat the year.

5.9 Promotion from Year 3 to Year 4

a) Promotion to Year 4 requires passing in all Year 3 certifying examinations.

b) Promotion to Year 4 also requires satisfactory completion and performance in clinical clerkships, Selectives, Longitudinal themes and year end OSCE.
Curricular and Examination Framework

Year 4

1. Obstetrics and Gynaecology  
   End of Clerkship Examination  
   8 weeks

2. Paediatrics  
   End of Clerkship Examination  
   8 weeks

3. Community Health Sciences (CHS)  
   Satisfactory completion/defense of mandatory research work  
   End of Clerkship Examination  
   8 weeks

4. Medicine (Endocrinology & Pulmonology)  
   End of Clerkship Examination  
   4 weeks

5. Dermatology  
   End of Clerkship Examination  
   2 weeks

6. Anesthesia  
   End of Clerkship Examination  
   2 weeks

7. Psychiatry  
   End of Clerkship Examination  
   4 weeks

8. Electives in Pakistan  
   4 weeks

MBBS Part III Certifying Examination in OB/GYN, Paediatrics and Psychiatry
6.0 Year 4 - Assessment Structure

6.1 Assessment of Year 4

a) Students will be continuously assessed throughout the clerkships. A minimum score of 55% is required in Continuous Assessment (CA) in order to be eligible to take the End of Clerkship test (EOC). 70% of the clerkship score will be contributed by CA and 30% by the EOC test.

b) If a student is unable to achieve 55% in the CA, s/he will repeat the entire clerkship during a scheduled regular clerkship and will be eligible to take the EOC test after satisfactorily completing the rotation.

c) Successful completion of an (EOC) test requires a minimum of 55% scores.

d) If a student is unable to achieve 55% or more in the EOC test s/he will be required to do at least 50% remedial of the total clerkship, followed by next scheduled EOC test.

e) Students are required to pass Hospital-Based- Paediatrics and Maternal and Neonatal Child Health (this should now be called Just Paediatrics) separately. Eligibility for certifying examinations will be based on cumulative scores of both the components.

f) Scores from the Year 3 Maternal and Neonatal Child Health rotation (CA and EOC Exam) will be carried over to Year 4. 33% weightage each will be added to the Year 4 Ob/Gyn and Paediatrics rotation (CA and EOC Exam) scores.

g) 50% of rotation scores from Ob/Gyn and Paediatrics will contribute to the Year 4 professional examination. The written end of year examination will contribute the other 50%.

h) Students are required to pass the CA and EOC examination in each rotation separately.

6.2 Mandatory Community Health Sciences Research Course

a) Students have to obtain 55 % in continuous assessment and 55% in the end of course defense of the project and proposal. Final CHS scores will be calculated with 60% contribution from CHS scores obtained in MBBS Part 1 and 40% contribution from Year 4 rotation.

6.3 Eligibility Criteria for MBBS Part III Certifying Examination

a) A score of 55% is required in the EOC scores in all disciplines.

b) If the clerkship score is less than 55% in no more than two disciplines, other than Obstetrics and Gynaecology, Paediatrics and Psychiatry, and the aggregate score is 55% or greater, the student may be allowed to take the MBBS Part III certifying examination and complete remedial work later.

c) Cumulative clerkship remediation of 12 weeks will render the student ineligible to attempt MBBS III certifying examination and will require repeating the year.
d) Satisfactory completion of the mandatory longitudinal themes and electives in Pakistan is required.

6.4 **MBBS Part III Certifying Examination**

a) MBBS Part III certifying examinations are held in Obstetrics and Gynaecology, Paediatrics and Psychiatry, which include relevant aspects of clinical microbiology, pathology, pharmacology and therapeutics.

b) Clerkship scores and the written examination each contribute 50% to the final MBBS Part III scores. Clerkship scores include continuous assessment and EOC tests scores.

c) Students must pass written examination of each discipline separately with a minimum score of 50%.

6.5 **Re-sit MBBS Part III Certifying Examination**

a) Students, who either were ineligible to take the examination or were not able to appear in the examination for an acceptable reason (refer to the Student’s Handbook) will be offered an opportunity to appear in the re-sit examination as a first attempt.

b) Students who fail the first attempt of the examination will be offered an opportunity to appear in the re-sit examination. This will be considered as a second attempt. Students will be asked to withdraw after failure in the second attempt.

c) Transcripts will carry only a mention of any re-sit second attempt.

6.6 **Promotion from Year 4 to Year 5**

a) Promotion to Year 5 requires passing in all (MBBS III) Year 4 certifying examinations.

   Failure in clerkships:

   ➢ For remedial study up to 4 weeks; the Year 4 electives may be used.

   ➢ If Year 4 electives are not available, the student will be promoted provisionally to Year 5. Student will be required to start Year 5 in the Group C. The first 4 weeks of Year 5 elective will be used for remedials.

   ➢ The student will write the relevant End of Clerkship examination with the next available End of Clerkship exam. If the student fails the remedial s/he will not be promoted and will be required to repeat the clerkship and will write the examination with the next class.

   ➢ Students who need remedial may use 4 week of the electives only once in the year. Applicable to students moving from Year 3 – Year 4 and Year 4 – Year 5. Students who fail after Year 5 electives are concluded, pre-professional examination leave may be used for this purpose.

b) **Failure in certifying examination:** If a student fails the certifying examination s/he will write the certifying examination with the next class as a second and final attempt. A
student who fails MBBS Part III examination in the first attempt will write the relevant examination as a re-sit examination with the next available clinical exam.

c) Promotion to Year 5 also requires satisfactory completion and performance in clinical clerkships; CHS research course, electives and Longitudinal Themes.
Curricular and Examination Framework

Year 5

1. Medicine
   End of Clerkship Examination

2. Surgery
   End of Clerkship Examination

3. Family Medicine + Emergency Medicine
   End of Clerkship Examination

4. Electives

5. Selectives & Pain Rotation

   MBBS Part IV Certifying Examination
   ECOES Examination
7.0 Year 5 – Assessment Structure

7.1 Assessment of Year 5

a) Students will be continuously assessed throughout the clerkships. A minimum score of 55% is required in Continuous Assessment (CA) in order to be eligible to take the End of Clerkship test (EOC).

b) 70% of the clerkship score will be contributed by CA and 30% by the EOC test.

c) If a student is unable to achieve 55% in the CA, s/he will repeat the entire clerkship during a scheduled regular clerkship and will be eligible to take the EOC test after satisfactorily completing the rotation.

d) Successful completion of an (EOC) test requires a minimum of 55% scores.

e) If a student is unable to achieve 55% or more in the EOC test s/he will be required to do at least 50% remedial of the total clerkship, followed by next scheduled EOC test.

f) Satisfactory continuous assessment score of 55% in the Ambulatory Care rotation will be used as eligibility criterion for the Part IV Professional examination.

g) In case of unsatisfactory scores in the Selectives and Pain rotation, remediation of the entire three week rotation will be required to be eligible for Part IV professional examination. Remediation time may be used from electives or pre-prof leave in case Ambulatory Care rotation takes place after completion of electives.

7.2 Electives

a) Satisfactory completion of Electives is mandatory.

b) Performance during elective experience is assessed by the supervisors, who are approved by the Electives Committee.

c) Electives can be taken anywhere in Pakistan or overseas at approved sites with approved supervisors. Adherence to laid out process of Electives application and timely approval by Electives office, including submission of evaluation forms, is mandatory.

d) After the Electives, students are required to commence the next clerkship on schedule, failing which; students will be required to complete their clerkship according to the recommendations of the department.

e) Students are expected to provide completed elective evaluations within 2 months of completion of their electives. Failure to do so may result in an unsatisfactory elective performance and declare the student ineligible for certifying examination.

7.3 Eligibility Criteria for MBBS Part IV Certifying Examination

a) A score of 55% is required in the EOC scores in Family Medicine, Surgery, Medicine, Emergency Medicine and Selectives and Pain Rotation.

b) Satisfactory completion of electives rotation according to the approved criteria by the Electives Committee. Unsatisfactory performance will require remediation and satisfactory completion of these experiences.
c) Satisfactory completion of the mandatory longitudinal themes is required.

7.4 MBBS Part IV Certifying Examination

a) MBBS Part IV certifying examinations consist of Family Medicine, Surgery and Medicine in combined/integrated paper/s. The examination will include relevant aspects of clinical microbiology, pathology, pharmacology and therapeutics.

b) Clerkship scores and the written examination each contribute 50% to the final MBBS Part IV scores. Clerkship scores include continuous assessment and EOC tests scores.

c) **Students must pass written examination with a minimum score of 55%.**

d) Students will be required to pass the exit OSCE, which is an eligibility criterion for appearing in the MBBS Part IV professional examination. In the event of failure despite two on-the-spot remediation attempts during the exit OSCE, students will be asked to reappear in the re-sit exit OSCE.

7.5 Re-sit MBBS Part IV Certifying Examination

a) The Re-sit MBBS Part IV Examination will be held six months after the certifying examination.

b) Students, who either were ineligible to take the examination or were not able to appear in the examination for an acceptable reason (refer to the Student’s Handbook) will be offered an opportunity to appear in the re-sit examination as a first attempt in all three subjects.

c) Students, who fail the examination, will be offered an opportunity to appear in the re-sit examination as a second attempt. Transcripts will mention the re-sit as a second attempt. Students will be asked to withdraw after failure in the second attempt.

7.6 Criteria for Pass and Fail in the MBBS Part IV Examination

Students must attain 55% score in written examination.
Appendix 1

Guidelines for Assessment of Practical Sessions: Years 1 and 2

I. Practical/Alternate to Practical (ATP) Examinations:

1. These are held at the end of a module for assessment of Anatomy, Physiology, Biochemistry, Pharmacology, Pathology and Microbiology practicals as applicable. Students should pass the modular examinations (50% score) at the end of each module.

2. ATP is one component of the end-of-module examination. The other, separate component is the SAQ/MCQ written examination. If a student does not appear in the SAQ/MCQ written summative exam for a module, s/he will still be allowed to appear for the ATP examination of the same module, and vice versa.

II. Pass/Fail Decision:

Each student is required to pass the practical/ATP examination by securing at least 50% score. In case of failure opportunities will be provided for remediation (under faculty guidance) and a resit examination will be conducted.

If a student should fail again in the resit practical/ATP examination, s/he will be required to achieve an overall 50% cumulative score from all practical examinations at the end of that year.

III. Eligibility to sit the end of year certifying MBBS I-A or I-B examination:

1. Each student should achieve an overall 50% score in the practical/ATP examinations assessment scores of all modules of that year.

2. Any student with less than an overall 50% in practical/ATP assessments after remediation and resit will not be eligible to sit in the certifying examination and will be asked to write the resit of certifying examination.