



UNIVERSITY OF RUHUNA  
FACULTY OF MEDICINE

GALLE

**HANDBOOK FOR  
MEDICAL STUDENTS**

NOVEMBER 2010

# CONTENTS

01.	Introduction	1
02.	Faculty Aims and Objectives	9
03.	Teachers of the Faculty	11
04.	The Degree of MBBS (Ruhuna)	18
4.1	Syllabuses and Recommended Books	21
4.2	Scheme of Examinations and Allocation of Marks	50
05.	Rules for Students	65
06.	By-Laws and Regulations	
6.1	Examination By-Laws and Regulations	70
6.2	ශිෂ්‍ය විනය පිළිබඳ අතුරු ව්‍යවස්ථාව	79
07.	Examination Offences	84
08.	Fees	85
09.	Higher Degrees	86
10.	The Library	87
11.	Student Services	
11.1	Student Loans	91
11.2	Bursary Scheme	91

11.3	Scholarships	91
11.4	Gold Medals and Awards	92
11.5	Approved Student Unions and Societies in the Medical Faculty	95
11.6	The Student Counsellors	95
11.7	Health Services	96
11.8	Student Accommodation	96
11.9	Other Services	96
11.10	Physical Education	96
12.	Elective Attachments for Foreign Students	97
13.	Guidelines for action to be taken for student absenteeism, unsatisfactory performance and conduct unbecoming during the Professorial Appointment	98
14.	Sri Lanka Medical Council Subject Benchmark Statement in Medicine	101

First Edition compiled and edited by Professor D. E. Wijeratne	1987
Second Edition compiled and edited by Professor Anoja Fernando	1992
Third Edition compiled and edited by Professor Anoja Fernando	1995
Fourth Edition compiled and edited by Professor P.L. Ariyananda & Professor T.R. Weerasooriya	2010

Printed at Upuli Offset Printers. Galle.

# **1. INTRODUCTION**

## **The Vision and Mission of the University**

### ***Vision Statement***

The vision of the University of Ruhuna is to be an outstanding internationally respected academic centre of excellence while affirming Sri Lankan identity and committed to rigorous scholarship, academic freedom, sound moral values and social responsibility.

### ***Mission Statement***

The University of Ruhuna strives to produce outstanding internationally accredited graduates who are innovative, analytical, articulate, adaptable, life-long learners contributing to the educational, cultural, economic and natural environment of the society we serve.

## **The University**

The Ruhuna University College was established on 1<sup>st</sup> January 1979 under section 24 of the University Act No.16 of 1978. The Ruhuna University College was given full University status on 1<sup>st</sup> February 1984. The University of Ruhuna is located on four campuses. The Administrative Headquarters as well as the Faculty of Fisheries and Marine Sciences & Technology, Faculty of Management and Finance, Faculty of Science and the Faculty of Humanities and Social Sciences are situated at Wellamadama in Matara. The Faculty of Agriculture is located at Mapalana, Kamburupitiya, the Faculty of Engineering at Hapugala, Galle and the Faculty of Medicine at Karapitiya, Galle.

## **The Faculty of Medicine**

The Faculty of Medicine was opened in the premises of the General Hospital, Galle, in July 1980. It was then affiliated to the University of Colombo.

The first five batches of medical students were admitted to the Ruhuna University College, but attended the preclinical course at the Faculties of Medicine in Colombo and Peradeniya. Students admitted in 1978 and successful at the Second Examination for Medical Degrees held in Colombo and Peradeniya, commenced their Para-clinical and Clinical training at Galle in 1980.

Construction of buildings for the Faculty at Karapitiya commenced in December, 1980 and the Faculty moved to its new premises in September 1983. From the Academic Year 1983/84, onwards students were admitted direct to the Faculty of Medicine, Galle and the entire course is now conducted at the Faculty.

The Faculty provides academic, research and service functions through its fourteen academic departments and three units that are recognized by the University Grants Commission.

The new Teaching Hospital at Karapitiya is situated just across the road from the Medical Faculty. The Medical Units, Surgical Units, Paediatrics Units, Psychiatry Unit and several finer speciality Units are functioning in this hospital. The University Department of Obstetrics and Gynaecology is situated in the premises of the old hospital at Mahamodera. Teaching in all clinical disciplines is done in these two hospitals. Teaching in Community Medicine is done at the Field Training Area at Bope-Poddala located close to the Faculty of Medicine. The students also spend 4 weeks in Rural Health training at Akuressa District Hospital.

### **Facilities in the Faculty**

The Faculty of Medicine in Galle is the third oldest medical faculty in the country. Situated in an area of about 8 acres, it is one of the most spacious of the medical faculties in the country. Academic activities occur in four large buildings. The largest of which is occupied by the Para-clinical departments and the Department of Physiology, and the pre-clinical block houses the departments of Anatomy and Biochemistry. The Administration block contains the main administrative offices, library, Computer Aided Learning Laboratory, two lecture theatres, the canteen, common rooms for students, academic and non-academic members. In 2003, Clinical Block; a three storied 3000 square meter building was added to the Faculty infrastructure. This modern building includes tutorial rooms, office rooms, laboratories, clinical skills lab, clinics and an air conditioned lecture theatre for use by the five clinical departments.

A 950 seat, 1000 square meter air-conditioned auditorium is the venue for many important academic and cultural activities. An air conditioned conference hall with a seating capacity of 160 and five lecture halls capable of seating between 160 and 385 students are also available. Examinations are conducted by dismantling the temporary partition between two of the larger adjoining lecture halls located in the Administration Block. At present all the lecture halls are fitted with multimedia projectors.

Classrooms for small groups and tutorials are found in all pre-clinical departments and some of the para-clinical departments. They are of moderate size with capacity to accommodate up to 30 to 50 students. All of these classrooms have been provided with whiteboards and overhead projectors. There is a large amount of corridor space and other sparingly used space for student self learning and resting. All departments except Psychiatry have laboratories with some having separate ones for student teaching and for research.

The Faculty Library has a floor area of 1200 square metres and a seating capacity for 250, with sections for periodicals, and rooms for cataloging, local publications and binding. In addition to students and staff, the library caters to the postgraduate trainees attached to the Teaching Hospital, extended faculty staff and hospital medical officers with provision for borrowing. Other facilities such as photocopying and internet facilities are now regularly available. The Computer Aided Learning laboratory (CAL lab) that is adjoining the library is equipped with nearly 100 computers and about 30 of these computers are networked.

The Faculty has a Student Support Service (SSS). It is located in the Para-clinical building and is open from 8.00 am to 4.00 pm. There is a 24-hour hotline for emergencies. Academic staff members who were trained as counsellors provide this service to students.

Students are provided with a number of common facilities. A number of hostels adequate to accommodate both males and female students belonging to the Faculty are situated both inside and outside the Faculty. Kuwait and STEMCOR House hostels which have been recently completed are situated within the Faculty premises and can accommodate 400 and 160 students respectively. The addition of these two hostels has enabled the Faculty to provide residential facilities to all medical students in a very comfortable setting.

There are ten fully furnished double rooms for visitors within the Faculty premises with access to a lounge and a pantry.

The Faculty has a gymnasium, cricket nets and an indoor badminton court. The Faculty has plans to develop a small sports complex to include netball, volleyball and basketball playing areas.

The Faculty has a Medical Exhibition Centre that is open to the public including schoolchildren. It displays many prosected human bodies, body parts and organs as well as two and three-dimensional models of organs and systems of the human body in a viewing area of over 6,000 square feet. It is specially developed and designed to assist G.C.E. Ordinary and Advanced Level students, studying Biological Sciences.

## **Officers of the University**

Chancellor	Ven. Rajakeeya Pandit Attudawe Sri Rahula Thero
Vice Chancellor	Professor Susirith Mendis
Deputy Vice Chancellor	Professor Gamini Senanayake
Deans of Faculties	
Agriculture	Professor Mangala de Soyza
Engineering	Dr. A. M. N. Alagiyawanna
Humanities & Social Sciences	Professor R.M. Ranaweera Banda
Management & Finance	Mrs. M. W. Indrani
Medicine	Professor T. R. Weerasooriya
Science	Professor W. G. D. Dharmaratne
Fisheries and Marine Sciences & Technology	Dr. Thilak P. D. Gamage
Director Graduate Studies	Professor W. G. D. Dharmaratne
Director External Examinations	Professor P. Withanage
Director Career Guidance	Mr. K. H. Nandasiri

Director Staff Development Centre	Professor M.R. Mohideen
Director Centre for International Affairs & CMLC	Professor B.G. Nanayakkara
Director Physical Education	Mr. S. Wijetunge
Registrar	Mrs. P. S. Kalugama
Librarian	Mr. K. Ananda
Bursar	Mr. G. Yaddehige
University Proctor	Professor M. Wijeratne
Actg. Chief Medical Officer	Dr. D.K. Gunawardana
Deputy Bursar	Mrs. D. Dias
Senior Student Counsellor	Mr. E.P.S. Chandana
Director IRQUE Project	Professor D. Attapattu
Coordinator/Cultural Centre	Mr. Shanthasiri Abeywarna
Medical Officer/Faculty of Agriculture	Dr. Sanath Pathirana
Government Auditor	Mr. H.L. Amaratunga
Principal Coordinator/Allied Health Sciences Degree Program	Dr. K.A.C. Wickramarathna

Senior Assistant Registrars	
Legal & Documentation	Mr. G.L. Erathna
Faculty of H & SS	Mr. K. Gunawardena
Examinations	Mrs. S. K. K. Mudalige
Administration	Mrs. C. Senevirathna
Senior Assistant Bursars	
Faculty of Engineering	Mr. A. Gunathilake
Supplies	Mr. A. M. A. Siriwardhane
Assistant Registrars	
Academic Establishments	Mrs. H.G.N. Devika
External Examination	Miss G.G.S. Jayaratne
Student Affairs	Mrs. P.M.S.P. Yapa
Library Service	Mr. C.P.K. Edirisinghe
Non Academic Establishments	Mr. M. Piyathilaka
International Affairs (CINTA)	
&CMLC	Mrs. G.A. Jagathi Hemamali
Faculty of Management & Fin.	Mr. K.G.N. Kumara
Faculty of Medicine	Miss P.L.L.C.P. Alwis
Faculty of Engineering	Mrs. V. Hiroshini Piyadasa
Faculty of Fishers & Marine	Mrs. T.D.G. Pathirana
Faculty of Science	Mr. P.A. Piyal Renuka
Faculty of Agriculture (Acting)	Mr. K.A.A. Kumarasiri
Assistant Bursars	
Faculty of Agriculture	Mr. S. Palliyaguru
External Programmes	Mrs. K.V.R. Vidyarathne
Payments	Mrs. H.V.S.M. Jayasekara
Salaries	Mrs. A. Anusha
Accounts	Mrs. B.H. Chintha

Senior Assistant Librarian	Mr. N. Hettiarachchi
Senior Assistant Librarian	Mr. U.A. Lal
Senior Assistant Librarian	Mrs. A .T. Kuruppuarachchi
Senior Assistant Librarian/Medicine	Mr. K.T.S. Pushpakumara
Senior Assistant Librarian/Agriculture	Mrs S.L. Gammanpila
Senior Assistant Librarian/Engineering	Mr. J.J. Garusingarachchige
Assistant Librarian	Mr. K.H. Ramanayake
Assistant Librarian	Miss. R.A.S.P. Seneviratne
Assistant Librarian	Mr. I.D.K.L. Fernando
Assistant Internal Auditor	Mr. O.L.V.P. Anura
Farm Manager/F. of Agriculture	Mr. K.A.A. Kumarasiri
Director, Physical Education	Mr. Sarath Wijetunge
Works Engineer	Mr. S. Diyunuge
Chief Security Officer	Mr. H.N. Dias

## **2. FACULTY AIMS AND OBJECTIVES**

### **The Aims of the Faculty of Medicine are**

1. To train medical undergraduates to function as basic doctors.
2. To provide facilities for postgraduate training of health personnel.
3. To provide, for the Southern Province of Sri Lanka  
a diagnostic laboratory service  
a clinical investigation unit  
a nuclear medicine unit  
a medical library service  
a museum for health education  
a consultative medico-legal service and  
a comprehensive occupational health service.

### **The objectives of the Faculty are that at the end of the period of undergraduate training, doctors should**

- 1) adopt an empathic and holistic approach to patients and their problems and be motivated to serve the people of Sri Lanka.
- 2) have developed positive attitudes towards patients, the community and members of the health team, and be aware of rights of patients.
- 3) have a perception of the ethical issues relating to individual doctor-patient relationships with other professionals and with society as a whole.
- 4) possess the skills to communicate effectively in both national languages and in English with patients, relatives, carers and the healthcare team
- 5) have the desire and capability to maintain professional standards.
- 6) demonstrate knowledge of structure and function of the human body and their inter-relationships in health and disease.

- 7) demonstrate knowledge & skills to diagnose, treat, follow up and prevent diseases common in Sri Lanka and manage medical emergencies with the available resources.
- 8) be aware of other diseases which illustrate important principles in medical science and demonstrate a basic knowledge of less common diseases.
- 9) be able to recognize serious diseases in the early stages.
- 10) understand and engage in reflective practice, audit and self appraisal, be aware of limitations of their professional skills, available facilities and be able to recognize conditions where referral is necessary.
- 11) be able to carry out basic medico-legal procedures, and comply with legal and administrative responsibilities applying the principles of confidentiality, consent and integrity.
- 12) have a knowledge of the managerial skills required to administer health institutions and health teams and be able to take a leadership role when necessary.
- 13) possess skills to efficiently and effectively manage physical resources, human resources, financial resources and information resources in a healthcare setting, and be able to take a leadership role when necessary.
- 14) have the knowledge to deliver primary health care.
- 15) develop knowledge, attitudes and skills in prevention of diseases and promotion of health taking into consideration social, cultural and economic characteristics of the individual and the society.
- 16) be aware of the principles of behavioural sciences as applied to health and practice of medicine.
- 17) be aware of alternative systems of medicine practiced in the country.
- 18) be capable of continuing self-learning, analytical and critical thinking reasoning and decision making skills.
- 19) be equipped to undergo further post-graduate training.
- 20) recognize the importance of issues such as stress reduction, selfcare and avoiding unhealthy and unethical practices.
- 21) demonstrate the skills of being a life long learner.

### 3. TEACHERS OF THE FACULTY

#### ANATOMY

##### Senior Professor of Anatomy

Prof. T.R.Weerasooriya - MBBS (Cey.), DMSc (Kyushu)

##### Professor in Anatomy

Prof. B.G.Nanayakkara - BDS (Perad.), PhD (Ruhuna)

##### Senior Lecturers

Dr. I.Ilayperuma - BVSc (Perad.), PhD (Otago)  
Dr. P.G.C.L.Nanayakkara - MBBS (Ruhuna), M Phil (Perad.)  
Dr. H.H.L.K.Fernando - MBBS (Ruhuna), MPhil (Ruhuna)  
Dr. P.M.Rodrigo - MBBS (Ruhuna), PhD (Ruhuna)  
Dr. E.I.Waidyarathna - MBBS (Ruhuna), PhD (Ruhuna)

##### Lecturers

Dr. M.B.Samarawickrama - MBBS (Ruhuna), MS (Col.)  
Dr. L.B.L. Praboda - MBBS (Ruhuna)

#### BIOCHEMISTRY

##### Senior Professor of Biochemistry

Prof. Chitra Pathirana - B.Sc (Hon. Perad.), PhD (UK)

##### Senior Lecturer

Dr. K.A.P.W. Jayatilake - B.Sc (SJP), M.Sc (SJP), PhD (Ruhuna)

##### Lecturers

Ms. R.P. Hewawasam - BSc (Hon. Perad.), MPhil (Ruhuna)  
Ms. M.T.Napagoda - BSc (Hon. Col.), MPhil (Perad.)

Dr. C. M. Wickramathilake	-	MBBS (Ruhuna)
Dr. G.E.D. de Zoysa	-	MBBS (Ruhuna)
Ms. A. P. Attanayake	-	BSc (Hon. Perad.)

## PHYSIOLOGY

### Senior Professor of Physiology

Prof. Susirith Mendis	-	MBBS (Col.), PhD (Ruhuna)
-----------------------	---	---------------------------

### Senior Lecturers

Dr. K. G. Somasiri	-	MBBS (Perad.), DCH (Col.), PhD (Ruhuna)
Dr. Sampath Gunawardena	-	MBBS (Ruhuna), PhD (Ruhuna)
Dr. K. D. Mahinda	-	MBBS (Ruhuna), PhD (Uppsala)
Dr. D.C. Wijewickrama	-	MBBS (Ruhuna), MPhil (Ruhuna)
Dr. R.S.J. Lenora	-	MBBS (Ruhuna), MPhil (Ruhuna), PhD (Lund)

### Lecturers

Dr. A. D. Nanayakkara	-	MBBS (Ceylon), Dip. Derm (Thai/Jap), MSc (Lond.)
Dr. S. P. Hewawasam	-	MBBS (Ruhuna), MD (Col.)
Dr. Amaranath Karunanayake	-	MBBS (Ruhuna)

## MICROBIOLOGY

### Professor of Microbiology

Prof. Nelun de Silva	-	MBBS (Patna), Diploma (Med. Micro. Col.), MD (Med. Micro. Col.)
----------------------	---	---

### Senior Lecturers

Dr. A de S Nagahawatte	-	MBBS (Col.), Diploma (Med. Micro. Col.), MD (Med. Micro. Col.)
Dr. P. B. V. Navaratne	-	MBBS (NCMC), BSc (Purdue), Diploma (Med. Micro. Col.), MD (Med. Micro. Col.)

**Lecturers**

Dr. W. M. D. G. B. Wijayaratne - MBBS (Ruhuna), Diploma (Med. Micro. Col.), MD (Med. Micro. Col.)  
Dr. S S Wickramasighe - MBBS (Ruhuna), Diploma (Med. Micro. Col.)

**PARASITOLOGY****Senior Professor of Parasitology**

Prof. Mirani V. Weerasooriya - MBBS (Sri Lanka), DMSc. (Kyushu), FNASSL

**Lecturers**

Dr. T.C.Yahathugoda - MBBS (Ruhuna), PhD (Ruhuna)

**COMMUNITY MEDICINE****Professor in Community Medicine**

Prof. C.E.Liyanage - BSc - Nutrition (Baroda), MSc - Medical Sciences (Perad.),  
PhD (Ruhuna), R. Nutr.(UK)

**Associate Professor**

Prof. S.K.C.Wimalasundera - MBBS (Perad.), DO (Col.), PhD (Ruhuna)

**Senior Lecturer**

Dr. P.B. Perera - BSc (Col.), MSc (Lond., UK), PG Dip. (App. Stat.) (Col.), Ph D (IU, USA)

**Lecturers**

Dr. N.S. Fernando - MBBS (Ruhuna), MSc (Community Medicine)  
MD (Community Medicine)  
Dr. C.J. Wijesinghe - MBBS (Ruhuna), MSc (Community Medicine)  
MD (Community Medicine)  
Dr. P.V. de Silva - MBBS (Ruhuna), MSc (Community Medicine)  
MD (Community Medicine)  
Dr. T.T. Ponnampereuma - MBBS (Ruhuna)

## **FORENSIC MEDICINE**

### **Senior Lecturer**

Dr. U.C.P.Perera - MBBS (Col.), DLM, MD Forensic Med. (Col.),  
MA, LLB, DMJ Path. (Lond.), MFFLM (UK)

### **Lecturer**

Dr. R. H. A. I. Ratnaweera - MBBS (Perad.)

## **PATHOLOGY**

### **Senior Lecturers**

Dr. L.K.B. Mudduwa - MBBS (Col.), Dip. Path. (Col.), MD (Histopathology)  
Dr. A. Lamahewage - MBBS (Ruhuna), Dip. Path. (Col.), MD (Histopathology)  
Dr. I.D. Siriwardhana - MBBS (Col.), Dip. Path. (Col.), MD (Chemical Pathology)  
Dr. K.A.C. Wickramaratne - MBBS (Ruhuna), Dip. Path. (Col.), MD (Haematology)  
Dr. T.G. Liyanage - MBBS (Ruhuna), Dip. Path. (Col.), MD (Histopathology)

### **Lecturer**

Dr. N.G. Ranawaka - MBBS (Ruhuna), Dip.Path. (Col.)

## **PHARMACOLOGY**

### **Senior Professor of Pharmacology**

Prof. A.I. Fernando - MBBS (Cey.), BA (OU), FRCP (Lond.)

### **Senior Lecturer**

Dr. L.M. Hettihewa - MBBS (Perad.), PhD (Ruhuna)

### **Lecturers**

Dr. S. S. Jayasinghe - MBBS (Ruhuna)  
Dr. P. L. G. C. Liyanage - MBBS (Ruhuna)  
Dr. J. Nanayakkara - MBBS (Ruhuna)

## **MEDICINE**

### **Senior Professor of Medicine**

Prof. P.L. Ariyananda - MBBS (Cey.), DCH (Cey.), MD (Col.), FRCP (Lond.), FCCP

### **Senior Professor in Medicine**

Prof. M.R. Mohideen - MBBS (Col.), MD (Col.), FRCP (Lond.), FCCP, FRACP (Hon.)

### **Professors in Medicine**

Prof. S. Lekamwasam - MBBS (Perad.), MD (Col.), FRCP (Lond.) FCCP

Prof. T.P. Weeerathna - MBBS (Ruhunu), MD (Col.)

Prof. K.D. Pathirana - MBBS (Perad), MD (Col.), MRCP (UK), FCCP

### **Senior Lecturer**

Dr. C.K. Bodhinayake - MBBS (Ruhuna), MD (Col.), MRCP (UK)

### **Lecturers**

Dr. A.S. Dissanayaka - MBBS (Col.), MD (Col.), MRCP (UK)

Dr. H.M.M. Herath - MBBS (Ruhuna), MD (Col.), MRCP (Lond), FRACP

## **OBSTETRICS & GYNAECOLOGY**

### **Senior Professor of Obstetrics & Gynaecology**

Prof. I.M.R. Goonewardene - MBBS (Cey.), MS O/G (Col.), FSLCOG, FRCOG (Gt.Brit.)

### **Senior Lecturers**

Dr. M.D.C.S. Kularatna - MBBS (Ruhuna), MS O/G (Col.), FSLCOG

Dr. J.A.P. Dhammika - MBBS (Ruhuna), MS O/G (Col.), MRCOG (Gt. Brit.)

Dr. K.A. Gunarathne - MBBS (Ruhuna), MS O/G (Col.)

### **Lecturers**

Dr. M.F.M. Rameez - MBBS (Ruhuna), MD O/G (Col.), MRCOG (Gt. Brit.)

Dr. D.L.W. Dasanayaka - MBBS (Ruhuna), MD O/G (Col.)

Dr. M.A.G. Iresha - MBBS (Ruhuna), MD O/G (Col.)

## **PAEDIATRICS**

### **Professor of Paediatrics**

Prof. U.K. Jayantha - MBBS(Ruhuna), MD (Paed. – Col.), DCH (Col.)

### **Professor in Paediatrics**

Prof. T.S.D. Amarasena - MBBS (Ruhuna), MD (Paed.- Col.), DCH (Col.), DCH (Sydney)

### **Senior Lecturers**

Dr. I.V. Devasiri - MBBS(Ruhuna), MD (Paed. – Col.), DCH (Col.)

Dr. T.P.J. Gunawardena - MBBS(Ruhuna), MD (Paed. – Col.), DCH (Col.)

Dr. N.D. Liyanarachchi - MBBS(Ruhuna), MD (Paed. – Col.), DCH (Col.), MRCP(UK)

Dr. P.P. Jayawardena - MBBS(Ruhuna), MD (Paed. – Col.), DCH (Col.)

### **Lecturers**

Dr. M.H.A.D. De Silva - MBBS(Ruhuna), MD (Paed. – Col.), DCH (Col.)

## **PSYCHIATRY**

### **Senior Lecturer**

Dr G.H.Chandani - MBBS (Ruhuna), MD Psych. (Col.)

### **Lecturers**

Dr G.D. Punchihewa - MBBS (Ruhuna), MD Psych. (Col.)

Ms. S.A.C. Senadheera - BSc (St.Petersburg), MSc (St.Petersburg)

Dr K.M.S.A.K. Jayasekara - MBBS (Ruhuna), MD Psych. (Col.)

Dr I H. Rajapaksha - MBBS (SJP), MD Psych. (Col.)

## **SURGERY**

### **Senior Lecturers**

Dr. M.M.A.J. Kumara	-	MBBS (Perad.), MS (Col.), FRCS (Eng.)
Dr. W.A.S.A. De Silva	-	MBBS (Cey.), FFARCS (Eng.)
Dr. J.P.M. Kumarasinghe	-	MBBS (Ruhuna), MS (Col.)
Dr. R.P. Abeywickrama	-	MBBS (Col.), MS (Col.), MRCS (Eng.)
Dr. R.W. Seneviratne	-	MBBS (Ruhuna), MS (Col.), FRCS (Eng.), MSc (Birmingham)

### **Lecturer**

Dr. U. I. Hapuarachchi	-	MBBS (Ruhuna), MD (Anaesthesiology- Col.),FRCA (UK), FCARCS (Ire.)
------------------------	---	--

## **FILARIASIS RESEARCH, TRAINING AND SERVICE UNIT (FRTSU)**

### **Head**

Prof. Mirani V. Weerasooriya	-	MBBS (Sri Lanka),DMSc. (Kyushu), FNASSL
------------------------------	---	---

### **Lecturer**

Dr. T.C. Yahathugoda	-	MBBS (Ruhuna), PhD (Ruhuna)
----------------------	---	-----------------------------

## **MEDICAL EDUCATION & STAFF DEVELOPMENT UNIT**

### **Head**

Dr. I. V. Devasiri	-	MBBS (Ruhuna), MD (Paed. - Col.), DCH (Col.)
--------------------	---	--

### **Lecturer**

Dr. A.J.P.M. Jayawardena	-	MBBS (Ruhuna)
--------------------------	---	---------------

## **NUCLEAR MEDICINE UNIT**

### **Head**

Prof. C.E. Liyanage	-	BSc - Nutrition (Baroda), MSc - Medical Sciences (Perad.), PhD (Ruhuna), R. Nutr.(UK)
---------------------	---	--

### **Senior Lecturer**

Dr. M. Hettiarachchi	-	MBBS (Ruhuna), PhD (Ruhuna)
----------------------	---	-----------------------------

## 4. THE DEGREE OF MBBS (RUHUNA)

### Outline of Courses of Study

The Faculty of Medicine offers courses leading to the Bachelor of Medicine and Bachelor of Surgery Degree. Instruction in subjects takes the form of lectures, tutorials, practicals, clinicals and ward classes.

The 2<sup>nd</sup> MBBS Course is of five terms duration, at the end of which the student sits the 2<sup>nd</sup> MBBS Examination in Anatomy, Biochemistry and Physiology. This examination is held twice a year. A student may be referred in one or two of these subjects but he shall, in all be allowed only 4 attempts at this examination. There shall be no "grace" chances.

Students commence their clinical training (which continues through the 3<sup>rd</sup>, 4<sup>th</sup> and 5<sup>th</sup> years) after they have passed the 2<sup>nd</sup> MBBS Examination. A record of clinical appointments is made on the students' record book provided. All clinical appointments have to be completed before a student sits the Final MBBS Examination. In the 3<sup>rd</sup> and 4<sup>th</sup> years, students study para-clinical subjects as well. At the end of the 3<sup>rd</sup> year the students sit the 3<sup>rd</sup> MBBS Part I Examination (Microbiology and Parasitology), and at the end of the 4<sup>th</sup> year, the 3<sup>rd</sup> MBBS Part II Examination (Community Medicine, Forensic Medicine, Pathology and Pharmacology). Each part of the 3<sup>rd</sup> MBBS Examination is held twice each year.

A student shall complete his/her Final Examination *either* within 6 years or 12 scheduled attempts after the first scheduled attempt, all periods of exemption granted by the Senate being excluded when computing this six year period, *or* within 10 years after registration as a student of the Faculty of Medicine, which ever is less. (The Final MBBS Examination is held twice a year).

### ***Duration of course***

Approximately 5 years

**Subjects:**

1<sup>st</sup> and 2<sup>nd</sup> Years

Anatomy  
Biochemistry  
Physiology

3<sup>rd</sup> Year

Microbiology  
Parasitology  
Community Medicine  
Forensic Medicine  
Pathology  
Pharmacology

4<sup>th</sup> Year

Community Medicine  
Forensic Medicine  
Pathology  
Pharmacology  
Medicine  
Obstetrics & Gynaecology  
Paediatrics  
Psychiatry  
Surgery

5<sup>th</sup> Year

Medicine  
Obstetrics & Gynaecology  
Paediatrics  
Psychiatry  
Surgery

Special subjects (Short courses in the 4<sup>th</sup> and 5<sup>th</sup> years):

Anaesthesiology  
Cardiology  
Dermatology  
Otorhinolaryngology  
Neurology  
Oncology  
Orthopaedic Surgery  
Ophthalmology  
Radiology  
Rheumatology  
Rural Health  
Sexually Transmitted Diseases  
Tuberculosis

#### 4.1. SYLLABUSES AND RECOMMENDED BOOKS

##### ANATOMY

Course duration – Five terms

##### ACADEMIC PROGRAM

Subject area	Teaching / Learning Methods	Term
Gross Anatomy	Dissections 250 hrs.	1 <sup>st</sup> – 4 <sup>th</sup>
	Lectures 20 hrs.	1 <sup>st</sup> – 4 <sup>th</sup>
	Tutorials 64 hrs.	1 <sup>st</sup> – 4 <sup>th</sup>
Histology	Lectures 30 hrs.	1 <sup>st</sup> – 3 <sup>rd</sup>
	Practicals 48 hrs.	1 <sup>st</sup> – 3 <sup>rd</sup>
Embryology	Lectures 24 hrs.	1 <sup>st</sup> - 3 <sup>rd</sup>
Neuroanatomy	Lectures 15 hrs.	4 <sup>th</sup> – 5 <sup>th</sup>
	Practicals 24 hrs.	4 <sup>th</sup> – 5 <sup>th</sup>
Genetics	Lectures 16 hrs.	5 <sup>th</sup>
Clinical Anatomy	Lectures 20 hrs.	4 <sup>th</sup> – 5 <sup>th</sup>

##### ***Recommended textbooks***

This booklist is not intended to be fully comprehensive and students should consult departmental staff on aspects not covered. Books shown as “Essential reading” are recommended for purchase and books shown as “further reading” are optional. Most of these books are available in the Medical Faculty Library.

##### **Gross Anatomy**

##### ***Essential reading***

- Cunningham's Manual of Practical Anatomy
- Clinical Anatomy – Harold Ellis
- Clinical Anatomy for Medical Students – Richard S. Snell

***Further reading***

Clinical Anatomy for Medical Students – Richard S. Snell  
Grant's Method of Anatomy – John Basmajian, Charles E Slon Ecker  
Clinical Oriented Anatomy – Keith L Moore, Arthur F Dalley  
Last's Anatomy Regional and Applied  
Gray's Anatomy – Peter L Williams & Roger Warwick,  
McMins Colour Atlas of Human Anatomy – C D H Abrahams, S C Marks &  
R T Hutchinson  
Atlas of Human Anatomy – Gosline, Harris, Humpherson, Whitmore & Willan  
Human Anatomy – Regional and Applied – D Chaurasia

**Histology**

***Essential reading***

Wheater's Functional Histology

***Further reading***

Basic Histology – Luiz Carlos Junquiera and Jose Curreiro  
Bailey's Textbook of Histology – Wilfred M Copenhaver, Douglas A Kelly & Richard Wood  
A Textbook of Histology – Roland C Leeson, Thomas S Leeson & Paporo Anthony  
Essential Cell Biology – Christopher C Widnell & Karl H Pfenninger  
Molecular Biology of the Cell – Alberts, Bray, Lewis, Raff, Roberts & Watson

**Embryology**

***Essential reading***

Langman's Medical Embryology

***Further reading***

Human Embryology – Inderbir Singh  
The Developing Human - Clinically Oriented Embryology by Keith L Moore, T V N Persaud

**Neuroanatomy*****Essential reading***

Clinical Neuroanatomy – Richard S. Snell

***Further reading***

Neuroanatomy for Medical Students – J L Wilkinson

Manter & Gatz's Essentials of Clinical Neuroanatomy & Neurophysiology

Principles of Neural Science – Eric R Kendel, James H Schwartz & Thomas N Jessel

**Genetics**

An Introduction to Medical Genetics – Fraser, Roberts & Pembrey

*\* Latest edition is always recommended for books given above.*

## **BIOCHEMISTRY**

Course duration – Five terms

### **ACADEMIC PROGRAM**

<b>Subject area</b>	<b>Teaching / Learning Methods</b>	<b>Term</b>
Cell Biology and Molecular Biology	Lectures - 29 hrs. Tutorials - 12 hrs. Practicals - 30 hrs.	1 <sup>st</sup>
Metabolism	Lectures - 30 hrs. Tutorials - 16 hrs. Practicals / Guided Learning Sessions- 24 hrs.	1 <sup>st</sup> , 2 <sup>nd</sup> & 3 <sup>rd</sup>
Food & Nutrition	Lectures - 27 hrs. Tutorials - 12 hrs. Practicals / Guided Learning Sessions - 18 hrs	2 <sup>nd</sup> , 3 <sup>rd</sup> & 4 <sup>th</sup>
Clinical Biochemistry	Lectures - 36 hrs. Tutorials - 20 hrs. Practicals / Guided Learning Sessions - 30 hrs.	3 <sup>rd</sup> , 4 <sup>th</sup> & 5 <sup>th</sup>

The course is intended as an introduction to Biochemistry and Molecular Biology for the 2<sup>nd</sup> MBBS students. Biochemistry, the chemical basis of life is studied in four major sections.

The first is the molecular design of life which includes the structure of the cell, structure and function of biomolecules, basic concepts and kinetics of enzymes and bioenergetics.

The second section is on cellular metabolism, emphasizing the enzymatic mechanisms, cellular compartmentalization and integration of metabolic systems.

One major prerequisite for the maintenance of health is that there is optimal dietary intake of nutrients. Therefore the third section is on food and nutrition.

The fourth section is an application of the knowledge gained so far in understanding the biochemical basis of health and disease and therapeutic intervention. Biochemical methods used in diagnosis of disease and interpretation of standard chemical pathology reports are also done.

Lectures and practical classes are held throughout the course with tutorial classes in small groups every week. An attendance of 80% is required for the student to be eligible to sit the 2<sup>nd</sup> MBBS examination.

***Recommended textbooks***

Harper's Biochemistry - R.K. Murray, D.K. Granner, P.A. Mayas & V.W. Rodwell

Lippincott's Illustrated Reviews - Pamela C. Champe, Richard A. Harvey

Food & Nutrition - T.W. Wikramanayake

Biochemistry - Lubert Stryer

Principles of Biochemistry - Albert L. Lehninger

Medical Biochemistry - John Bayns & Marek H. Dominiczak

Clinical Chemistry in Diagnosis and Treatment - P. D. Mayne

Textbook of Biochemistry with Clinical Correlations - Thomas M. Devlin

Clinical Chemistry - William J. Marshall

Nutrition Throughout the Life Cycle - T.W. Wikramanayake

*\* Latest edition is always recommended for books given above.*

**PHYSIOLOGY**

Course Duration – 5 terms

**ACADEMIC PROGRAM**

Subject area	Teaching / Learning Methods	Term
Biological Measurements, SI Units, an introduction to statistics	Lectures - 5 hrs. Tutorials - 4 hrs. Practicals - 4 hrs	
Body fluids and concept of homeostasis	Lectures - 7 hrs. Tutorials - 4 hrs. Practicals - 2 hrs	
White blood cells and immune system	Lectures - 5 hrs. Tutorials - 2 hrs. Practicals - 4 hrs	1 <sup>st</sup>
An introduction to autonomic nervous system	Lectures - 1 hr.	
Respiratory Physiology	Lectures - 12 hrs. Tutorials - 3 hrs. Practicals - 3 hrs	
Gastrointestinal Physiology	Lectures - 6 hrs. Tutorials - 2 hrs.	
Cardiovascular Physiology	Lectures - 25 hrs. Tutorials - 8 hrs. Practicals - 6 hrs.	
Component of integrated learning on Blood	Lectures - 21 hrs. Tutorials - 8 hrs. Practicals - 12 hrs.	3 <sup>rd</sup>
Renal Physiology	Lectures - 12 hrs. Tutorials - 4 hrs. Practicals - 2 hrs.	

Endocrine Physiology	Lectures - 19 hrs. Tutorials - 5 hrs. Practicals - 1 hr.	4 <sup>th</sup>
Component of integrated learning on diabetes mellitus*	Lectures - 7 hrs. Tutorials - 2 hrs. Practicals - 3 hrs	
Reproductive Physiology	Lectures - 15 hrs. Tutorials - 3 hrs. Practicals - 1 hr.	
Neuroscience	Lectures - 20 hrs. Tutorials - 9 hrs. Practicals - 11 hrs.	4 <sup>th</sup> & 5 <sup>th</sup>
Miscellaneous Physiology topics	Lectures - 2 hrs.	5 <sup>th</sup>

\* *Component of integrated learning on Blood and Diabetes Mellitus will be conducted as an integrated learning activity of Anatomy, Biochemistry and Physiology Departments.*

\*\* *There are 20 hours of Physiology lectures out of 41 hours of neuroscience lectures.*

### **SEMINAR PROGRAM**

The seminar programme is conducted in the 2<sup>nd</sup>, 3<sup>rd</sup> and 4<sup>th</sup> terms. It involves group work involving 3-4 students per group. This is an integrated learning experience with the participation of academic staff from the departments of Anatomy and Biochemistry as well. The programme is arranged in such a way that each student be a member of a group which prepare a presentation. The topics include the following; Body fluids, Anaemias, Cardiovascular system, Respiratory system, Gastrointestinal system, Kidney, Thyroid, Pancreas, Calcium metabolism, Nervous system and alcohol.

### **SHORT ANALYTICAL ESSAY**

Each student has to write a 3000-4000 word short analytical essay on a topic related to Physiology or Medicine which is assigned to him or her. These topics will be given to them during the 2<sup>nd</sup> term and they will have to complete the assignment and submit the short analytical essay at the end of the 4<sup>th</sup> term. Students will be

provided with inputs on literature search and scientific writing. Staff members are allocated as supervisors. 10% of the continuous assessment marks are allocated for this activity.

**Recommended textbooks**

Review of Medical Physiology by W.F. Ganong\*

Textbook of Medical Physiology by A.C. Guyton and J.E. Hall\*

Hutchison's Clinical Methods by M. Swash and S. Mason\*

The student should learn to browse through any other medical textbook that may have information useful to better understanding of Physiology (*i.e. Davidson's Principles and Practice of Medicine, Oxford Textbook of Medicine, Textbook of Clinical Medicine by Kumar and Clark etc.*)

\* The latest edition is always recommended for the books stated above.

**MICROBIOLOGY**

**ACADEMIC PROGRAM**

Duration – 6<sup>th</sup>, 7<sup>th</sup> & 8<sup>th</sup> Terms

Subject area	Teaching / Learning Methods	Term
General Microbiology	Lectures - 5hrs. Practical Classes/ Fixed Learning Modules (FLM)/ Demonstrations - 7hrs. per student	6 <sup>th</sup>
Immunology	Lectures - 6hrs. FLM/ Demonstrations - 3hrs. per student	6 <sup>th</sup>
Sterilization & Disinfection	Lectures - 2hrs. FLM/ Demonstrations - 1hr. per student	6 <sup>th</sup>
Systemic Bacteriology	Lectures - 17hrs. FLM/ Demonstrations / Tutorials- 4hrs. per student	6 <sup>th</sup> & 7 <sup>th</sup>
Antimicrobials & Antimicrobial Chemotherapy	Lectures - 2hrs.	7 <sup>th</sup>
Systemic Virology & Antiviral Agents	Lectures -17hrs. FLM/ Demonstrations /Tutorials - 4hrs. per student	7 <sup>th</sup>

Mycology	Lectures - 2hrs. FLM/ Demonstrations /Tutorial -1hr. per student	7 <sup>th</sup>
Clinical Microbiology	Lectures - 20hrs. FLM/ Demonstrations /Tutorials /Computer Associated Learning -10hrs. per student	8 <sup>th</sup>

### Theory

Lectures are conducted on the core knowledge pertaining to subject areas.

### Practicals

Performance of Gram stain and acid fast stain and demonstration of culture characteristics to identify bacteria.

Practical demonstrations of collection & transport of specimens, culture media, microscopy and culture characteristics of pathogens related to the lecture topics.

### Self Learning Activities

#### 1. **Fixed Learning Modules (FLM)**

FLM provides extra, 'good to know' and 'nice to know' knowledge regarding topics covered in lectures. These are presented on notice boards. Students in small groups are allowed to discuss amongst the group and to write down the important points and queries, which will be discussed interactively at the end of each session by a tutor.

#### 2. **Small Group Discussions (SGD)**

Students are divided into small groups and a leader and a rapporteur will be appointed. They will be given questions to discuss and answer during the first 30 minutes. These questions will be discussed during the next 30 minutes.

#### 3. **Supervised Directed Self Learning exercise (SDSL)**

Students will be divided into small groups and each one will be given a complete handout on the topic of the day. During the first 20 minutes, they will read and understand the topic individually. During the next 20 minutes they will discuss among a small group any areas they cannot understand or need further clarification. The final 20 minutes will be spent on questioning the lecturer/ tutor on the areas needing further clarification. The students will be supervised throughout.

### **Recommended textbooks**

Medical Microbiology. David Greenwood, Richard Slack, John Peutherer, Mike Barer  
Medical Microbiology. Richard V Goering, Hazel M Dockrell, Mark Zuckerman, Derek Wakelin, Ivan M, Roitt, Cedric Mims, Peter L Chiodini.  
Infectious Disease. Barbara A Banister, Norman T Begg, Stephen T Gillespie.  
Microbiology & Infections. Inglis T J J  
Review of Medical Microbiology. Jawetz E, Melnick JL, Adelberg E A  
A Short Textbook of Medical Microbiology. Turk D C, Porter I A  
Immunology for Students of Medicine and Biology. Weir D M  
Essential Immunology. Roitt I M  
Notes on Medical Virology. Timbury M C

*\* Latest edition is always recommended for books given above.*

### **PARASITOLOGY**

#### **ACADEMIC PROGRAM**

Parasitology is taught to medical undergraduates during their third year, for three terms, at the end of which they sit for the 3<sup>rd</sup> MBBS Part I Examination, which consists of examinations in Microbiology and Parasitology.

<b>Subject area</b>	<b>Teaching / Learning Methods</b>	<b>Term</b>
Protozoology	Lectures (23hrs.) & Practicals (17hrs.) / Tutorials (8hrs.) FLMs (6hrs.) Slide Demonstration classes / Integrated lectures (1hr)	6 <sup>th</sup> – 7 <sup>th</sup>
Helminthology	Lectures (19hrs.) & Practicals (9hrs.) / Tutorials (4hrs.) FLMs / Slide Demonstration classes (1hr.)	6 <sup>th</sup> – 7 <sup>th</sup>
Entomology	Lectures (9hrs.) & Practicals (7hrs.) / Tutorials (4hrs.) FLMs / Slide Demonstration classes (3hrs.) / Integrated lectures (1hr.)	8 <sup>th</sup>
Snakes	Lectures (3hrs.) & Practicals (2hrs.) / Tutorials Integrated lectures (1hr.)	8 <sup>th</sup>
Miscellaneous Zoonoses, Insecticides	Lectures / Tutorials (2hrs.)	8 <sup>th</sup>

Introductory appointment: Two Lectures  
Integrated Lectures with the Departments of Medicine and Paediatrics

***Recommended textbooks***

Manson's Tropical Diseases – Wilcocks & Mansons Bahr.  
Worm's & Disease – Muller R.  
Basic Clinical Parasitology – Brown H.W.  
Entomology for Students of Medicine – Gorden R.M. & Lavoipierre M.W.  
Atlas of Medical Helminthology & Protozoology – Jeffry & Leach R.M.  
Lecture Notes on Medical Entomology – Service M.W.

*W.H.O. Publications :*

Technical Report Series

- Lymphatic filariasis
- Parasitic zoonoses
- Intestinal protozoans & helminthic infections
- Management of acute malaria
- Control of lymphatic filariasis
- Hookworm infection & anaemia
- Drugs used in Parasitic Diseases
- Basic Laboratory Methods in Medical Parasitology

*\* Latest edition is always recommended for books given above.*

**COMMUNITY MEDICINE**

**ACADEMIC PROGRAM**

**Course**

The teaching programme in Community Medicine extends for six academic terms during the third and fourth years of medical undergraduate course.

**Teaching / Learning sessions**

Lectures - 100hrs.

Tutorials - 20hrs.

Clerkship Programme - 16 weeks per batch

Research project - 9 months

Community Attachment Programme - 2½ years (begins at the 6<sup>th</sup> term and continues up to the end of the Professorial Paediatric Appointment.)Introductory Clinical Appointment – 4 weeks (after the 2<sup>nd</sup> MBBS Part I examination)**Course content, Lectures and Tutorials Schedule (6<sup>th</sup> – 11<sup>th</sup> Terms)**

Subject area	Duration of Lectures	Term	Tutorials 11 <sup>th</sup> Term
Introductory Lectures	10hrs.	6 <sup>th</sup>	1
Health Care Delivery System in Sri Lanka	2hrs.	6 <sup>th</sup>	2
Medical Sociology and Behavioral Science	4hrs.	6 <sup>th</sup>	1
Health Education	4hrs.	7 <sup>th</sup> – 8 <sup>th</sup>	1
Biostatistics	12hrs.	8 <sup>th</sup>	2
Basic Epidemiology	12hrs.	8 <sup>th</sup>	2
Nutrition	10hrs.	8 <sup>th</sup>	1
Communicable Diseases	6hrs.	8 <sup>th</sup>	1
Non Communicable Diseases	4hrs.	8 <sup>th</sup>	1
Clinical Epidemiology	4hrs.	9 <sup>th</sup>	1
Research Methodology	8hrs.	9 <sup>th</sup>	1
Demography and Vital Statistics	6hrs.	9 <sup>th</sup>	2
Environmental Health	6hrs.	10 <sup>th</sup>	1
Maternal and Child Health	6hrs.	10 <sup>th</sup>	2
Occupational Health	6hrs.	10 <sup>th</sup>	1
<b>Total</b>	100hrs.		20

**Seminars and Workshops**

One introductory and two evaluation seminars are held during the Community Medicine clerkship. Four seminars are held during Community Attachment Program. A workshop on Research Methodology is carried out prior to the beginning of student research.

**Clerkship Program**

Duration - 16 weeks. It includes following activities:

Attachment to University Field Training Area, Bope-Poddala which includes visits to Medical Officer of Health (MOH) and other Primary Health Care providers, Maternal and Child Health clinics and poly-clinics and the School Medical Inspections of the area.

Attachment to MOH (Municipality) for learning Environmental Health and Occupational Health.

Attachment for two days to a General Practitioner.

Attachment to various Public Health Institutions to learn on waste expose, providing safe water, safe food.

Attachment to institutions that provide social services such as Elderly Homes and Orphanages.

Attachment to Ayurvedic Hospital to learn on Alternative Medicine in Sri Lanka.

Attachment to factories to learn on Occupational and Environmental Health.

Attachment to Port Health Office to learn trans oceanic transmission of diseases.

**Student Research Projects**

Selection of research project titles and preparation of research proposals are carried out during the 3<sup>rd</sup> year. After obtaining ethical clearance for these research project proposals, data collection, data analysis and report writing to be carried out during the 1<sup>st</sup> and 2<sup>nd</sup> terms of the 4<sup>th</sup> year and the completed research project reports to be submitted during the 3<sup>rd</sup> term of the 4<sup>th</sup> year one month before the scheduled 3<sup>rd</sup> MBBS (Part II) Examination. A viva voce examination is conducted to allocate marks for the Research Component before 3<sup>rd</sup> MBBS Part II Examination.

**Community Attachment Program**

Students are grouped into 12 groups and families are allocated to each student that makes a small community for each group. The groups are given the task of investigating into their social, environmental and health problems and implement the primary health care in their communities. The students are assessed time to time for their activities. Four assessments (quarterly) are conducted for each group throughout the course. Field Assessment is arranged during the Clerkship Program. A final report has to be submitted by each group and a Viva Voce Examination is conducted on the final report to allocate marks. Community Attachment Program for a particular group of student lasts till the end of that student group's Professorial Paediatric appointment. Further, evaluative visits by the academic staff of the Department of Paediatrics are carried out during the Professorial Paediatric appointment.

### ***Recommended textbooks***

Textbook of Preventive and Social Medicine, K. Park  
Family Health – A Manual for Health Workers in Sri Lanka, Family Health Bureau, Colombo.  
Expanded Programme on Immunization, Ministry of Health  
Annual Health Bulletin, Ministry of Health, Sri Lanka.  
WER – Sri Lanka (Weekly Epidemiological Report), Epidemiological Unit, Ministry of Health  
Annual Report on Family Health, Sri Lanka, Evaluation Unit, Family Health Bureau, Colombo  
Statistical Pocket Book – Democratic Socialist Republic of Sri Lanka, Department of Census and Statistics, Sri Lanka  
Statistics at Square One, D.V. Swinscow  
An Introduction to Medical Statistics, Martin Bland  
Teaching Health Statistics – Lesson and Seminar outline, S.K. Lwanga, Cho-Yook Tye, O. Ayeini  
Statistics in Medicine, Theodore Colton  
Basic Statistics and Epidemiology – A practical guide, Antony Stewart  
Basic Epidemiology, R. Beaglehole, R. Bonita  
Epidemiology in Medical Practice, D.J.P. Barker & G. Rose  
Epidemiology in Medicine, Charles H. Hennekens, Julie E. Buring  
Survey Methods in Community Medicine, J.H. Abramson, Z.H. Abramson  
Learning Research – A guide to medical student, junior doctors and related professionals, C. Sivagnanasundaram  
Occupational Health – An Introductory Course for Health Care Workers, H.M.S.S.D. Herath  
A Manual for the Sri Lanka Public Health Inspector, H.M.S.S.D. Herath

*\* Latest edition is always recommended for books given above.*

### **FORENSIC MEDICINE**

#### **ACADEMIC PROGRAM**

##### **Course**

The entire course in Forensic Medicine is completed in 6 terms. It commences in the 6<sup>th</sup> term (3<sup>rd</sup> year) and terminates in the 11<sup>th</sup> term (4<sup>th</sup> year). It consists of lectures, short appointment in Forensic Medicine, demonstration classes on specimens, autopsy demonstrations and revision tutorial classes.

Subject area	Teaching / Learning Methods & Duration	Term
Forensic Pathology	40 hrs.- lectures 5 hrs. -Tutorials	6 <sup>th</sup> – 11 <sup>th</sup>
Forensic Science	20 hrs.- Lectures 5 hrs. -Tutorials	6 <sup>th</sup> – 11 <sup>th</sup>
Toxicology	20hrs.- Lectures 5hrs. -Tutorials	6 <sup>th</sup> – 11 <sup>th</sup>
Law and Ethics	15hrs.- Lectures 5hrs. -Tutorials	6 <sup>th</sup> – 11 <sup>th</sup>
Clinical Forensic Medicine	15hrs.- Lectures 5hrs. - Tutorials Clinical appointment – 2 weeks	6 <sup>th</sup> – 11 <sup>th</sup>

### Syllabus

**Scope of Forensic Medicine** - Judicial Medical Service in Sri Lanka, meaning of legal definitions such as hurt, grievous hurt, murder, culpable homicide not amounting to murder, rash, and negligent acts, suicide, abortion, infanticide, concealment of birth, rape, carnal intercourse with young girls and unnatural sexual practice, inquest procedure in a Magistrate Court and High Court, mechanisms of causation of injuries in the living and dead (surface and internal injuries), documentation of injuries, medico legal classification of injuries, immediate and remote complications of injuries, causation and manner of death (immediate and remote), documentation of medicolegal reports, documentation of an autopsy report, mechanism and identification of injuries in road accidents, reconstructions of road accidents from interpretation of injuries, mechanisms and identification of injuries caused by firearms, fires, acids corrosives, lightning, electricity, explosives, various commonly available weapons in Sri Lanka, hanging, manual strangulation of the neck with a ligature, suffocation, blows on the neck, mugging, garroting, examination and documentation of sexual assault (rape), examination for virginity, recent and remote delivery, poisoning by common poisons in Sri Lanka, homicidal poisonings, prescription, storage and accounting of dangerous drugs, certification for mental illness, mechanism and causation of sudden deaths, autopsy procedures in sudden death, conduct of a judicial autopsy, examination of a crime scene, collection of body fluids at autopsy, postmortem changes, determination of time since death, consent for treatment, medical negligence, medical ethics, structure and functions of the Sri Lanka Medical Council, disciplinary procedures of the Sri Lanka Medical Council, certification of fitness to drive a motor vehicle and issue of statutory certificates, historical development and sustenance of human rights with special reference to human rights in medical practice.

**Recommended textbooks**

The Pathology of Trauma by J.K.Mason & B.N.Purdue  
 Forensic Pathology by Bernard Knight  
 Forensic Pathology by VJM Di Maio & D J Di Maio  
 Handbook of Forensic Pathology by V.J.M.Di Maio & S.E.Dana  
 Clinical Forensic Medicine by WDS McLay  
 The Pathology of Drug Abuse by SB Karch  
 Management of Poisoning by Ravindra Fernando

*\* Latest edition is always recommended for books given above.*

**PATHOLOGY****ACADEMIC PROGRAM**

Subject area	Teaching / Learning Methods			Term
	Lectures	Practicals	Tutorials	
General Pathology	20hrs.	8hrs.	1hr.	6 <sup>th</sup> & 7 <sup>th</sup>
Tumour Pathology	10hrs.	8hrs.	1hr.	7 <sup>th</sup> & 8 <sup>th</sup>
Systemic Pathology	50hrs.	16hrs.	6hrs.	9 <sup>th</sup> – 11 <sup>th</sup>
Chemical Pathology	10hrs.	4hrs.	1hr.	7 <sup>th</sup> – 11 <sup>th</sup>
Haematology	10hrs.	4 hrs.	1hr.	7 <sup>th</sup> – 11 <sup>th</sup>

**Clinicals**

One month Clinical Pathology Appointment – Pathology Laboratory, Teaching Hospital, Karapitiya.

**Recommended textbooks****Histopathology**

- Muirs Textbook of Pathology -14<sup>th</sup> edition - David A Levison, Robin Reid, Alastair D Burt, David J Harrison and Stewart Fleming
- Basic Pathology – 7<sup>th</sup> edition - Ramzy Cotron, Vinay Kumar, Stanely L Robbins

### **Chemical Pathology**

Clinical Chemistry - 6<sup>th</sup> edition – William J Marshall,  
Stephen K Bangert

### **Haematology**

- Essential Haematology – 4<sup>th</sup> edition - A V Hoffbrand, J E Pettit and P A H Moss
- Haematology for the Medical Student - Alvin H Schmaier,  
Lilli M Petruzzelli

*\* Latest edition is always recommended for books given above.*

## **PHARMACOLOGY**

### **ACADEMIC PROGRAM**

The course consists of six terms of lectures and tutorials in Pharmacology and Therapeutics, starting from the 6<sup>th</sup> term of the medical course.

<b>Subject area</b>	<b>Teaching / Learning Methods &amp; Duration</b>	<b>Term</b>
Pharmacology	Lectures – 101 hrs.	6 <sup>th</sup> – 11 <sup>th</sup>
	Tutorials – 20 hrs.	10 <sup>th</sup> – 11 <sup>th</sup>
	Laboratory sessions – 18 hrs.	6 <sup>th</sup> – 11 <sup>th</sup>

The lectures will be given under the following sections:-

1. General Pharmacology
2. Systemic Pharmacology
3. Applied Pharmacology (consist of therapeutics and some new topics relevant to the clinical application)

**Tutorials** – Tutorials will be conducted at the end of the each term.

***Recommended books & Journals***

Clinical Pharmacology- D.R.Laurance and P.N.Bennett  
Oxford Textbook of Clinical Pharmacology – Aronson and Grahame Smith  
Basic and Clinical Pharmacology – Bertram G.Kartzung  
British National Formulary  
Sri Lanka National Formulary  
The Pharmacological Basis of Therapeutics- A. Goodman Gilman,L.S.Goodman & A.Gilman (reference only)  
Australian Prescriber  
Sri Lanka Prescriber  
Essentials of Medical Pharmacology – K D Tripathy

*\*Latest edition is always recommended for books given above*

**MEDICINE**

**ACADEMIC PROGRAM**

The programme of teaching in Medicine includes clinical appointments, ward classes, lectures, clinical demonstrations and tutorials. The objectives of Introductory, First, Second & Professorial Appointment are given at the Department web site.

Academic Activity	Duration	Teaching/ Learning Methods	Term	
<b>3<sup>rd</sup> Year</b>				
Introductory appointment	2 weeks	Ward teaching		
1 <sup>st</sup> Appointment in Medicine	8 weeks			
Short Appointments Dermatology Neurology Rheumatology STD Pulmonology Cardiology Clinical Pathology Skills lab – Practicals Rural Health Appointment Introductory Lectures	2 weeks 2 weeks 2 weeks 2 weeks 2 weeks 2 weeks 2 weeks 4 weeks 2 hrs	Ward teaching & lectures		6 <sup>th</sup> – 8 <sup>th</sup>
<b>4<sup>th</sup> Year</b>				
2 <sup>nd</sup> Appointment in Medicine	8 weeks	Ward teaching		
<b>Lectures</b> Cardiology 4 Renal 3 Dermatology 2 Endocrinology 4 Gastroenterology 3 Pulmonology 4 Neurology 4 Rheumatology 3 Tropical Medicine 2 Geriatrics 1	30 hrs.	Lectures		9 <sup>th</sup> – 11 <sup>th</sup>

Academic Activity	Duration	Teaching/ Learning Methods	Term
<b>5<sup>th</sup> Year</b>			
Professorial Appointment	8 weeks	Ward Teaching	
Ward Classes	6hrs. / week (8 weeks) 48 hrs.	Lectures	
<b>Lectures</b> Cardiology            8 Renal                    5 Dermatology          4 Endocrinology        5 Gastroenterology    3 Pulmonology          6 Neurology             5 Haematology          7 Rheumatology         3 Tropical Medicine    2 Geriatrics             2 CLD *                  10  * Clinical Lecture Demonstrations	60 lectures	Lectures	12 <sup>th</sup> – 14 <sup>th</sup>

***Recommended textbooks***

Clinical Medicine by Kumar & Clark  
 Davidson's Principles and Practice of Medicine  
 Hutchison's Clinical Methods  
 Clinical Examination by John Macleod

*\* Latest edition is always recommended for books given above.*

**OBSTETRIC & GYNAECOLOGY**

**ACADEMIC PROGRAM**

<b>Academic Activity</b>	<b>Duration</b>	<b>Teaching / Learning Methods</b>	<b>Term</b>
<b>3<sup>rd</sup> Year</b> Introductory Lectures Introductory Clinical Appointment Clinical Appointment Skills Lab Rural Health Appointment Computer Based Tutorials	2 weeks 2 weeks x 4 Grps. 4 weeks x 12 Grps. 2 weeks x 12 Grps. 4 weeks x 3 Grps. Flexible, at students' convenience	Lectures Ward Teaching Ward Teaching Practical Ward Teaching Self Directed Learning	6 <sup>th</sup> - 8 <sup>th</sup>
<b>4<sup>th</sup> year</b> 1 Lecture / week Clinical Appointment Computer Based Tutorials	10 weeks / term 4 weeks x 12 Grps. Flexible, at students' convenience	Lectures Ward Teaching Self Directed Learning	9 <sup>th</sup> -11 <sup>th</sup>
<b>5<sup>th</sup> Year</b> 2 Lectures / week Professorial Appointment Ward Classes - 3hrs. / week  WHO RHL Projects Computer Based Tutorials	10 weeks / term 8 weeks 8 weeks  Flexible, at students' convenience	Lectures Ward Teaching Ward Teaching  On line and CD ROM Self Directed Learning	12 <sup>th</sup> – 14 <sup>th</sup>

- A. General Objectives  
(Please Refer Department of Obstetrics & Gynaecology Web Site)
- B. The students are expected to acquire certain Basic & Critical Clinical Skills  
(Please Refer Department of Obstetrics & Gynaecology Web Site)
- C. The students are expected to acquire certain Core Knowledge & Skills and be able to carry out certain specified tasks  
(Please Refer Department of Obstetrics & Gynaecology Web Site)
- D. The students are expected to maintain a Log Book  
The students are expected to record certain compulsory tasks which they have personally carried out under supervision  
(Please Refer Department of Obstetrics & Gynaecology Web Site)
- E. Lectures
  - Introductory lectures on Basic Obstetrics & Gynaecology - 7 (7hrs.)
  - Obstetrics lectures - 25 (25hrs.)
  - Gynaecology lectures - 20 (20hrs.)
 (Please Refer Department of Obstetrics & Gynaecology Web Site)

**Recommended textbooks**

Basic Textbooks

- Obstetrics Illustrated by K P Hanretty
- Gynaecology Illustrated by David McKay
- Obstetrics by Ten Teachers by Stuart Campbell, Christoph Lees
- Gynaecology by Ten Teachers by D.Scott Jones et al
- Oxford Handbook of Obstetrics & Gynaecology by S. Arulkumaran, IM Symonds A Fowlie
- Basic Science in Obstetrics & Gynaecology by Michael de Swiet & Geoffrey Chamberlain

**Basic Reference**

WHO Reproductive Health Library A Metin Gulmezoglu(Ed) WHO

\* Latest edition is always recommended for books given above

**PAEDIATRICS****ACADEMIC PROGRAM**

The programme of teaching in Paediatrics includes clinical appointments, ward classes, lectures, clinical demonstrations and tutorials.

<b>Academic Activity</b>	<b>Duration</b>	<b>Teaching/ Learning Methods</b>	<b>Term</b>
<b>2<sup>nd</sup> year (after 2<sup>nd</sup> MBBS exam.)</b> Introductory lectures on Paediatrics Introductory clinical appointment in Paediatrics	2 hrs. 2 weeks (afternoon session)	Lectures Ward teaching	6 <sup>th</sup> – 8 <sup>th</sup>
<b>3<sup>rd</sup> year</b> 1 <sup>st</sup> appointment in Paediatrics Rural Health appointment Skills lab teaching	4 weeks 4 weeks 2 days	Ward teaching Ward teaching Practical	
<b>4<sup>th</sup> year</b> 2 <sup>nd</sup> appointment in Paediatrics Skills lab teaching	4 weeks 2 weeks	Ward teaching Lectures & demonstrations	9 <sup>th</sup> – 11 <sup>th</sup>
<b>Lectures</b> Infections 8 Immunization 1 Nutrition 4 Neonatology 8 Renal 5 Endocrine 4	30 hrs.	Lectures	

<b>5<sup>th</sup> Year</b> Professorial appointment Ward classes	8 weeks 6 hrs. / week (48 hrs - 8 weeks)	Ward teaching	
<b>Lectures</b>			
Respiratory	5		
Cardiovascular	5		
Central nervous system	6		
Haematology	5		
Rheumatic fever and Juvenile Idiopathic Arthritis	2		
Growth and Development	2	60 hrs.	Lectures
GI System	4		
Malignancies	4		
Genetic disorders	1		
Child abuse, Poisoning, Paediatric surgical problems	4		
Revision and clinical lecture demonstrations	22		12 <sup>th</sup> – 14 <sup>th</sup>

**Recommended textbooks**

The Illustrated Textbook of Paediatrics – T Lissauer, G. Clayden  
 Essential Paediatrics – David Hull  
 Hospital Paediatrics – David Hull  
 Community Paediatrics – David Hull  
 Children's Medicine and Surgery – Forrester Cockburn  
 Paediatric Vade Mecum – J. Insley  
 Forfar & Arneils Textbook of Paediatrics  
 Nelson's Textbook of Paediatrics  
 Manual of Neonatal Intensive Care – NRC Robertson  
 Paediatric Practice in Developing Countries – E.J.Ebrahm  
 The Normal Child – Illingworth  
 Common Symptoms & Signs of Diseases of Children – Illingworth  
 Paediatric Cardiology - Scott  
 Manual of Neonatal Care – John P Cloherty

\* Latest edition is always recommended for books given above.

## **PSYCHIATRY**

### **ACADEMIC PROGRAM**

<b>Academic Activity</b>	<b>Duration</b>	<b>Teaching/Learning Methods</b>	<b>Term</b>
<b>2<sup>nd</sup> year</b> Introductory clinical lectures	5hrs.	Lectures	6 <sup>th</sup>
<b>3<sup>rd</sup> year</b> Clinical skills training	8hrs.	Role play Case discussions Exercises on communications	6 <sup>th</sup> – 8 <sup>th</sup>
<b>4<sup>th</sup> year</b> Clinical appointment  Lectures	4 weeks  30hrs.	Clerkship Case discussions /presentations Teaching ward rounds Assignments  Lectures	9 <sup>th</sup> – 11 <sup>th</sup>
<b>5<sup>th</sup> year</b> Lectures Tutorials	30hrs. 5hrs.	Lectures Tutorials	12 <sup>th</sup> – 14 <sup>th</sup>

#### ***Recommended textbooks***

Davidson's principles and Practice of Medicine

Textbook of Psychiatry – BK Puri, PJ Laking, IH Treasaden

Core Oxford text book of Psychiatry - Michael Gelder, R.Mayou, J.Geddes

*\* Latest edition is always recommended for books given above.*

**SURGERY****ACADEMIC PROGRAM**

<b>Academic Activity</b>	<b>Duration</b>	<b>Teaching / Learning Methods</b>	<b>Term</b>
<b>2<sup>nd</sup> Year</b> Introductory Lectures Introductory Clinical Appointment	4 - 8 weeks 1 – 2 weeks	Lectures Clerkship / ward teaching	6 <sup>th</sup>
<b>3<sup>rd</sup> Year</b> 1 <sup>st</sup> Appointment Surgery Orthopaedic Appointment  <i>Short Appointments</i> Ophthalmology Otolaryngology Anaesthesiology Oncology Radiology	8 weeks 4 weeks  2 weeks each	Clerkship / ward teaching  Clerkship / ward teaching	7 <sup>th</sup> – 11 <sup>th</sup>
<b>4<sup>th</sup> Year</b> 2 <sup>nd</sup> Appointment Surgery  <b>Lectures</b> Orthopaedic Surgery Otolaryngology Ophthalmology Anaesthesiology Neurosurgery Thoracic Surgery Paediatric Surgery	8 weeks  35hrs.	Lectures	9 <sup>th</sup> – 11 <sup>th</sup>
<b>5<sup>th</sup> Year</b> <b>Lectures</b> Tutorial Classes Professorial Appointment  Ward Classes	30hrs. 30hrs 8 Weeks  32hrs.	Lectures Case discussions Clerkship/clinic & ward teaching  Case discussions	12 <sup>th</sup> – 14 <sup>th</sup>

**Recommended textbooks**

Short Practice of Surgery (21<sup>st</sup> Ed.) – Bailey & Love  
An Introduction to Symptoms & Signs of Surgical Diseases – Norman Browse  
Demonstration of Physical Signs in Clinical Surgery – Hamilton Bailey  
Principles & Practice of Surgery – Scott  
Aids to Clinical Surgery – Forrest, Carter, Macleod  
Lecture Notes in General Surgery – Harold Ellis  
Outline of Fractures – Adams  
Outline of Orthopaedics – Adams

*\* Latest edition is always recommended for books given above.*

**FILARIASIS RESEARCH, TRAINING AND SERVICE UNIT**

The unit was established in August 2005 with the approval of the University Grants Commission (UGC) in recognition of continuous field and laboratory research on lymphatic filariasis (LF) carried out by the Department of Parasitology, for a period of seventeen years headed by Professor Mirani V. Weerasooriya. This is the only research unit in LF established in the university system in Sri Lanka and the first UGC approved research unit established in University of Ruhuna.

**Functions of the unit****(a) Research:**

The research activities during the last seventeen years, included epidemiology, vector biology and transmission, diagnosis including development of newer diagnostic techniques and treatment trials using new drug regimens and control studies including vector control.

Since the initiation of the national Program for the Elimination of Lymphatic Filariasis (PELF) the unit has carried out research on delimitation of endemic areas by Rapid Assessment Procedures (RAP) using standard questionnaires and preparing GIS maps and confirming the results with recently developed urine ELISA, evaluation, monitoring of Mass Drug Administration Program (MDAs) with emphasis on health education in relation to LF and studies on lymphoedema management using a Home Based Care Program.

Professor Eisaku Kimura and his team from the Aichi Medical University, Japan have collaborated with the unit since 1995.

**(b) Training:** undergraduates, postgraduates and health personnel.

**(c) Service:** The unit provides a diagnostic service to the hospitals in the south. A filariasis clinic is also conducted with major emphasis on Home Based Care Programme on lymphoedema management.

**(d) Electives:** Laboratory and field appointments for local and foreign graduate students.

### **NUCLEAR MEDICINE UNIT (NMU)**

#### **Course**

The short course in Nuclear Medicine is completed in 4 lecture hours in the final year.

#### **Objectives**

At the end of the short course on Nuclear Medicine the student should be able to

- recognize the application of radioisotopic technology in clinical situations
- identify the basic concepts in radioimmunoassay and immunoradiometric assay
- identify the basic theory of static and dynamic in-vivo imaging
- interpret laboratory results in clinical application
- relate the biological effects of radiation in Radiation Protection

#### **Functions of the Unit**

**a) Training**

Undergraduates, post-graduates and health personnel

**b) Research**

The academic members of the Unit are involved in research using stable isotopic technology, enzyme linked immunosorbant assay and radioimmunoassay methods in the field of human nutrition, endocrinology and oncology. These research programmes are being conducted in collaboration with local (BMD Unit and Departments of Anatomy and Pharmacology) as well as foreign (Children Nutrition Research Center, Baylor College of Medicine, USA Centers) collaborators.

**c) Service function**

The NMU is the only public sector immunodiagnostic service provider in the Southern Province. It has been providing a diagnostic service to the hospitals in the South on different hormones, namely: thyroid profile, sex and reproductive hormones, pituitary profile and tumour & nutritional markers. This Unit serves as regional center for 'Screening Newborns for Congenital Hypothyroidism'.

**d) Electives**

Laboratory appointments for local and foreign post-MD trainees.

***Recommended textbooks***

Comprehensive Clinical Endocrinology by Michael Besser & Michael Thorner

Radionuclides in Biomedical Science: An introduction by Chandrani Liyanage & Manjula Hettiarachchi

*\* Latest edition is always recommended for books given above.*

**MEDICAL EDUCATION AND STAFF DEVELOPMENT UNIT (ME& SDU)**

The Medical Education and Staff Development Unit (ME&SDU) of the Faculty of Medicine, Galle was established in December 2000.

The goal of the unit is to enable and empower members of the Staff of the Faculty of Medicine, in enhancing their knowledge, skills and attitudes in areas of teaching and evaluation, research and management, so that they can contribute positively and meaningfully, towards the development of the Faculty, University of Ruhuna and the nation and also to provide consultancy & advisory services in educational technology. In seeking to address its mission the ME & SDU has sought many ways of enhancing the knowledge base of its staff through various training programs.

The unit is managed by a committee which comprises senior members of the academic staff. Dr Vasantha Devasiri is the present Chairperson of the Committee and the Head of the Unit. The Staff comprise one lecturer, Dr Avindra Jayawardena.

## 4.2 SCHEME OF EXAMINATION AND ALLOCATION OF MARKS

### 2<sup>ND</sup> MBBS EXAMINATION – At the end of 5<sup>th</sup> Term

#### ANATOMY

##### *Theory*

- Paper I – 48 MCQ & 12 BRQ – Time allocated – 180 mins.
- Paper II – 5 Essay type questions – Time allocated – 180 mins.

##### *Practical*

- Gross Anatomy & Neuroanatomy Practical – 40 Spot Questions – 40 mins.
- Histology – 20 Spot Questions – 20 mins.
- Viva voce – 10 mins.

##### *First attempt*

	<b>Theory</b>		<b>Practical</b>	
Paper I	40%	Gross Anatomy & Neuroanatomy	40%	
Paper II	40%	Histology	20%	
Theory Assessment tests	20%	Viva voce	20%	
		Practical Assessment Test	20%	
	-----		-----	
	100%		100%	
	=====		=====	

##### *Second and subsequent attempts*

	<b>Theory</b>		<b>Practical</b>	
Paper I	50%	Gross Anatomy & Neuroanatomy	40%	
Paper II	50%	Histology	30%	
		Viva voce	30%	
	-----		-----	
	100%		100%	
	=====		=====	

The final aggregate of 100 marks for Anatomy will be derived by adding 50% of theory marks and 50% of practical marks.

The pass mark for Anatomy will be 50%. The candidate will, in addition, have to obtain a minimum of 40% in theory. A candidate may be referred in Anatomy if he/she has passed Physiology and/or Biochemistry and minimum of 25% in Anatomy. A candidate will be awarded a distinction in Anatomy if he/she obtained an aggregate mark of 70% or more in Anatomy, in the first attempt.

## **BIOCHEMISTRY**

### **Continuous Assessments**

<b>Team</b>		<b>Mark</b>		<b>Mark</b>
1 <sup>st</sup>	<b>Part 1</b>	75	12 MCQs	60
			03 single/best response questions	15
	<b>Part II</b>	25	Two structured essay questions	25
2 <sup>nd</sup>	<b>Part 1</b>	75	12 MCQs	60
			03 single/best response questions	15
	<b>Part II</b>	25	Two structured essay questions	25
3 <sup>rd</sup>	<b>Part 1</b>	75	12 MCQs	60
			03 single/best response questions	15
	<b>Part II</b>	25	Two structured essay questions	25
4 <sup>th</sup>	<b>Part 1</b>	75	12 MCQs	60
			03 single/best response questions	15
	<b>Part II</b>	25	10 OSPE	25
Total of the assessment marks		400		400

The total of 400 marks at the end of four continuous assessments will be converted to 20 marks of the 2<sup>nd</sup> MBBS examination.

**End of course assessment - 2<sup>ND</sup> MBBS EXAMINATION – At the end of 5<sup>th</sup> Term**

***First attempt***

<b>Paper 1</b> 25 marks (3hrs.)	48 MCQs	20
	12 single/best response questions	5
<b>Paper 11</b> (3hrs.)	Six essay questions (Time - 3 hrs.)	25
OSPE (Objective structured practical examination)	20 questions	20
Viva voce examination		10
Continuous Assessments		20
Total		100

***Second and subsequent attempts***

Paper 1 (Time - 3 hrs.)	48 MCQs	28 marks
	12 single/best response questions	07 marks
Paper 11 (Time - 3 hrs.)	Six essay questions	35 marks
OSPE (Objective structured practical examination)	20 questions	20 marks
Viva voce examination		10 marks
Total		100 marks

The pass mark for Biochemistry will be 50%. The candidate will in addition, have to obtain a minimum of 40% in theory. In order to obtain a distinction a candidate must obtain a minimum aggregate mark of 70%, in the first attempt.

## PHYSIOLOGY

### Continuous Assessments

These are conducted at the end of each term for the first four terms. The last week of each term is reserved as 'assessment week' where assessments of all three pre-clinical departments take place. No formal teaching is conducted during that week. Each of the 4 end-of-term (terms 1 to 4) assessments takes the following form;

10 Multiple Choice Questions (true/false type)	- 30 %
15 Best Response Questions	- 45 %
10 Objective structured practical examination (OSPE) questions	- 25 %
	-----
	100 %
	=====

*Duration of the in-course assessment: MCQ paper for each of the first 4 terms is 75 min. and OSPE is 20 min.*

At the end of the **Neuroscience Course** a joint assessment with the Department of Anatomy will be held. It consists of 10 MCQs in Neurophysiology and 10 MCQs in Neuroanatomy (30 mins.) - 50 marks

The short analytical essay will be evaluated by an academic staff member of the department other than the supervisor. Critical thinking, ability to gather information from medical literature and to analyze them, essay construction and presentation will be assessed. Short Analytical Essay - 50 marks

The marks from the 4 end-of-term assessments (400 marks), 10 MCQs in Neurophysiology (50 marks) and Short Analytical Essay (50 marks), all taken together (a total of 500 marks) will make **30% of the final mark at the 2<sup>nd</sup> MBBS Examination in Physiology.**

### **2<sup>ND</sup> MBBS EXAMINATION – At the end of 5<sup>th</sup> Term**

#### ***First attempt***

This will be held at the end of the 5<sup>th</sup> term. Minimum of six weeks' notice will be given for the dates of the examination. Physiology subject of the 2<sup>nd</sup> MBBS examination consists of:

15 Multiple Choice Questions (True/False type)*	-	10 %
30 Best Response Questions*	-	15 %
5 Essay questions (3 hrs.)	-	20 %
20 OSPE questions (40 mins.)	-	15 %
Viva voce (10 mins.)	-	10 %
In-Course Assessment	-	30 %
		<u>100 %</u>
		=====

*\*Length of the MCQ paper [15 MCQs (True/False type) + 30 Best Response Questions (BRQs)] will be 2 hrs and 30 minutes.*

50% mark is the pass mark for the whole examination in Physiology. Student should obtain a minimum mark of 40% (18 marks) in the "Theory" component (MCQ + Essay) to pass the examination in Physiology. The students who obtain 70% or over in the total mark in Physiology will be awarded a Distinction in Physiology.

Those who are not successful in Physiology at the first attempt will have to re-sit the subject of Physiology at the next scheduled 2<sup>nd</sup> MBBS examination. The in-course assessment mark will not be included in the calculation of the total mark. The 30% mark allocated for the in-course assessment will therefore be allocated among the other components of the examination. Therefore, the allocation of marks for the second attempt and thereafter will be as follows.

**Second and subsequent attempts**

15 Multiple Choice Questions (True/False type)	-	15 %
30 Best Response Questions	-	20 %
5 Essay questions (180 mins.)	-	25 %
20 OSPE questions (40 mins.)	-	30 %
Viva voce (10 mins.)	-	10 %
		<u>100 %</u>
		=====

*\*Length of the MCQ paper [15 Multiple Choice Questions (True/False type) + 30 Best Response Questions] will be 2 hours and 30 minutes.*

50% mark is the pass mark for the whole examination in Physiology. Student should obtain a minimum mark of 40% (24 marks) in the "Theory" component (MCQ + Essay) to pass the examination in Physiology in the second attempt and thereafter.

Whenever a student physically sits first for the Physiology examination at the 2<sup>nd</sup> MBBS examination, his/her continuous assessment marks will be taken into account for the calculation of the marks for the Physiology paper of the 2<sup>nd</sup> MBBS examination.

**SCHEME OF EXAMINATION AND ALLOCATION OF MARKS  
3<sup>rd</sup> MBBS EXAMINATION – PART I**

**MICROBIOLOGY**

**Continuous Assessments (CA I & CA II)**

**CA I - At the end of the 6<sup>th</sup> Term of study**

20 MCQs	85%
[15 MCQs (True/False type) + 5 Best Response Questions (BRQs)]	
Gram stain Assessment	<u>15%</u>
	100%
	====

10% of the total marks will be taken for the 3<sup>rd</sup> MBBS Part 1 Examination (first attempt only)

**CA II - At the end of the 7<sup>th</sup> Term of study**

20 MCQs [15 MCQs (True/False type) + 5 Best Response Questions (BRQs)]

10% of the total marks will be taken for the 3<sup>rd</sup> MBBS Part 1 Examination (first attempt only)

**3<sup>rd</sup> MBBS Part I Examination – At the end of 8<sup>th</sup> Term**

	First attempt	Second & subsequent attempts
<b>Theory</b>		
Paper I - MCQ (25% of BRQ)	20%	20%
Paper II - Essay	30%	40%
OSPE	20%	30%
Viva Voce	10%	10%
Continuous Assessment (CA I +CA II)	20%	0%
Total Marks	100%	100%

To pass the examination, students should score a minimum of 40 % in theory papers and obtain a minimum aggregate of 50%. A candidate obtaining of 70% or more in the first attempt will be awarded a Distinction.

**PARASITOLOGY**

**3<sup>rd</sup> MBBS Part I Examination – At the end of 8<sup>th</sup> Term**

***First attempt***

a) Theory examination	
4 Structured Essay Questions - 2hrs.	30%
20 MCQs* - 1hrs.	20%
<i>[*15 MCQs (True/False type) + 5 Best Response Questions (BRQs)]</i>	
b) Practical examination will consist of three components	
1) Continuous Assessment Term 1 - Examination of faeces	10%
2) Continuous Assessment Term 2 – Examination of blood film	10%
3) OSPE - 30 mins.	20%
a) Viva Voce - 8 mins.	10%
Total	<u>100%</u> =====

***Second and subsequent attempts***

4 Structured Essay Questions	40%
20 MCQs*	30%
<i>[*15 MCQs (True/False type) + 5 Best Response Questions (BRQs)]</i>	
OSPE - 30 mins.	20%
Viva Voce - 8 mins.	10%
Total	<u>100%</u> =====

*To pass the examination students should score a minimum of 40% in theory and obtain a minimum aggregate of 50%. A candidate obtaining an aggregate of 70% or more in the first attempt will be awarded a Distinction.*

**SCHEME OF EXAMINATION AND ALLOCATION OF MARKS  
3<sup>rd</sup> MBBS EXAMINATION – PART II**

**COMMUNITY MEDICINE**

**3<sup>rd</sup> MBBS Part II Examination – At the end of 11<sup>th</sup> Term**

***First attempt***

Theory:	
○ Paper I (Essay – 5 questions)	20%
○ Paper II (MCQs – 32 true/false type + 8 BRQs)	25%
Viva voce	10%
Continuous Assessment	15%
Research Project	10%
Clerkship	10%
Community Attachment	10%
Aggregate	<u>100%</u> =====

Pass mark - 50% or more of the aggregate with minimum of 45% for theory (Paper I & II)

Distinction - 70% or more of the aggregate with minimum of 60% for theory

***Second and subsequent attempts***

At the second and subsequent attempts marks obtained by a candidate for Continuous Assessment, Research Project, Clerkship and Community Attachment will not be taken into account and marking scheme will be adjusted as follows:

Theory:	
○ Paper I (Essay – 5 questions)	40%
○ Paper II (MCQ – 32 true/false type + 8 BRQ)	40%
Viva voce	20%
Aggregate	<u>100%</u> =====

Pass mark - 50% or more of the aggregate with minimum of 45% in theory (Paper I & II)

## **FORENSIC MEDICINE**

### **3<sup>rd</sup> MBBS Part II Examination – At the end of 11<sup>th</sup> Term**

#### ***First attempt***

	<b>Marks</b>
End of Clinical Appointment Assessment	10%
Paper 1 - Five Structured Essay Questions (3hrs.)	40%
Paper II - 48 True/False MCQs + 12 BRQs* (3hrs.)	20%
OSPE – Examination with 10 stations (5mins/station)	20%
Viva Voce (7-10 mins.)	10%

#### ***Second and subsequent attempts***

Paper 1 - Five Structured Essay Questions (3hrs.)	40%
Paper II - 48 True/False MCQs + 12 BRQs* (3hrs.)	20%
OSPE – same as in 1 <sup>st</sup> attempt	30%
Viva Voce (7-10 mins.)	10%

*\*BRQs – Best Response Questions*

Minimum of 40% is required in theory (paper 1 and II) and an aggregate of 50% is required to pass the examination. Distinction is 70% and above, in the first attempt.

## **PATHOLOGY**

### **3<sup>rd</sup> MBBS Part II Examination – At the end of 11<sup>th</sup> Term**

#### ***First attempt***

Theory Paper - 2 hrs.	40%
4 compulsory Structured Essay Questions (SEQs) are given. One out of the 4 is on Clinical Pathology (Chemical Pathology and Haematology). There will be 1-2 case scenarios which will test the student's ability to interpret a clinical situation and relate to Pathology.	
MCQ Paper - 2 hrs.	20%
32 MCQs (True/False type) & 8 BRQs	

Practical Examination (15 stations)		15%
Chemical Pathology	4	
Haematology	4	
Histopathology – slides (systemic)	4	
Museum specimens	3	

This will take the form of an Objective Structured Practical Examination (OSPE)

Viva voce		10%
Continuous assessment		15%
16 MCQs (True/False type) and 4 BRQs to check mostly the General Pathology and tumour pathology knowledge – to be answered within 60mins (10%), OSPE on General Pathology and Tumour Pathology 10 stations (5%)]		

***Second and subsequent attempts***

Theory		40%
MCQ		20%
Practical		30%
Viva Voce		10%

To pass the examination, students should score the minimum of 40% in theory papers and obtain a minimum aggregate of 50%. A candidate obtaining an aggregate of 70% or more in the first attempt will be awarded a Distinction.

**PHARMACOLOGY**

The following scheme of assessment will be effective from the 30<sup>th</sup> Batch onwards.

***Continuous Assessments (3 Term tests)***

6 <sup>th</sup> term -	Best Response Questions (8)	40 marks
	Multiple Choice Questions (12)	60 marks
7 <sup>th</sup> term -	Best Response Questions (8)	30 marks
	Multiple Choice Questions (12)	40 marks
	OSCE (5)	30 marks

8 <sup>th</sup> term -	No test	
	9 <sup>th</sup> term	No test
	10 <sup>th</sup> term -	Best Response Questions (8) 30 marks
		Multiple Choice Questions (12) 40 marks
		OSCE (5) 30 marks
		-----
	Aggregate of Term Test	300 marks
		=====
	11 <sup>th</sup> term - Main Examination	

*One tenth of the aggregate of marks from the three Term Tests (the amount scored out of a total of 300 marks as shown above) will be added to Part I, Part II & Part III marks as given below.*

***First attempt***

<i>Continuous Assessments (3 Term tests)</i>	30%
<i>End of Course Examination</i>	
Part I (written papers)	
(a) Paper I	25%
5 Modified Essay Questions (2 ½hrs.)	
(b) Paper II – 40 questions	20%
MCQs 20 + BRQs 20 (2 hrs.)	
Part II	
(c) OSCE	15%
Part III	
(d) Viva voce	10%
	-----
	100%
	=====

**Second or subsequent attempts**

Continuous Assessments (3 Term tests)	0%
Part I (written papers)	
(a) Paper I 5 Modified Essay Questions (2 ½hrs)	40%
(b) Paper II – 40 questions MCQ 20 + BRQ 20 (2 hrs)	30%
Part II	
(c) OSCE	15%
Part III	
(d) Viva voce	15%
	-----
	100%
	=====

The above scheme of marking will be effective from the 30<sup>th</sup> Batch onwards.

In order to pass the examination, a candidate has to obtain a minimum aggregate of 50% with minimum of 50% in Part I, Part II and Part III (SEQs - 20/40, MCQs – 15/30 and OSCE 7.5/15). A candidate obtaining an aggregate of 70% or above at the first attempt, will be awarded a Distinction.

**SCHEME OF EXAMINATION AND ALLOCATION OF MARKS  
FINAL MBBS EXAMINATION**

**MEDICINE**

***First attempt***

Theory: Paper 1 - Structured essay	15%
Paper 11- MCQ	20%
Clinical: Long Case	17%
Short Cases	20%
Psychiatry OSCE	3%
In-course assessment	15%
End of appointment assessment	10%
	-----
Total	100%
	=====

**Second and subsequent attempts**

Theory: Paper 1 - Structured essay	20%
Paper 11- MCQ	28%
Clinical: Long Case	22%
Short Cases	25%
Psychiatry OSCE	5%
In-course assessment	0%
End of appointment assessment	0%
	-----
Total	100%
	=====

Pass mark in Medicine is 50%. In addition, a candidate has to obtain a minimum of 40% in theory and a minimum of 50% in the clinical component to pass. A candidate obtaining an aggregate of 70% or more in the first attempt will be awarded a Distinction.

**OBSTETRICS & GYNAECOLOGY**

***First attempt***

Continuous Assessment (Professorial Appointment)	10%
OSCE / SOE* (end of Professorial Appointment)	10%
Theory paper I (6 Written questions) 3hrs.	20%
Theory paper II (40 MCQs) 2hrs.	20%
Obstetric Case 20mins. with patient, 20 mins. with examiners	15%
Gynaecology case 20mins. with patient, 20 mins. with examiners	15%
OSCE / SOE* at Final Examination	10%
	-----
Total	100%
	=====

\*Structured Oral Examination (SOE)

***Second and subsequent attempts***

Theory paper I (6 Written questions) 3hrs.	25%
Theory paper II (40 MCQs) 2hrs.	25%
Obstetric Case 20 mins. with patient, 20 mins. with examiners	20%
Gynaecology case 20 mins. with patient, 20 mins. with examiners	20%
OSCE / SOE* at Final Examination	10%
	-----
Total	100%
	=====

Pass mark in Obstetrics & Gynaecology is 50%. In addition, a candidate has to obtain a minimum of 40% in theory and a minimum of 50% in the clinical component to pass. A candidate obtaining an aggregate of 70% or more in the first attempt will be awarded a Distinction.

**PAEDIATRICS**

Evaluation of the training will be done in order to assess the success in achieving objectives given in the departmental web site. Evaluation is by 1) in-course assessments 2) end of course assessments.

***First attempt***

**In-course assessment**

Clinicals	10%
MCQ	10%
OSCE	05%
Social Paediatric Viva voce	05%

Final MBBS examination (End of course)

**Theory**

Essay	20%
MCQ	15%
OSCE	05%

**Clinicals**

Long case	15%
Short cases	15%

Total 100%  
=====

***Second and subsequent attempts***

**In-course assessment**

0%

**End of course**

*Theory*

Essay	25%
MCQ	20%

*Clinicals*

Long case	20%
Short cases	20%
OSCE	15%

Total 100%  
=====

The overall pass mark in Paediatrics is 50%. In addition the candidate has to obtain a minimum of 45% in theory and a minimum of 50% in the clinical component to pass. A candidate obtaining an aggregate of 70% or above at the first attempt, will be awarded a Distinction.

**PSYCHIATRY**

Psychiatry is examined in the final MBBS examination, as part of Medicine at present. Multiple Choice Questions and Structured Essay Questions are included in the Medicine question papers. MCQ papers in Paediatrics also contain questions on Child Psychiatry. OSCE is included with Medicine.

*There is a plan to make Psychiatry a final year appointment and a separate final year subject in future.*

**SURGERY**

***Theory***

Consist of two papers, essay and MCQ. Minimum of 40% should be obtained in this section.

***Clinicals***

Consist of one long and several short cases. Minimum 50% should be obtained in this section.

***Viva voce***

In-course assessments – End of Professorial Appointment

***Allocation of marks***

	<b><i>First attempt</i></b>	<b><i>2<sup>nd</sup> &amp; subsequent attempts</i></b>
Professorial Appointment	10%	Nil
<i>Final MBBS Examination</i>		
Theory	40%	45%
Clinicals	40%	45%
Viva voce	<u>10%</u>	<u>10%</u>
Total	<u>100%</u>	<u>100%</u>
	====	====

Pass mark in Surgery is 50%. In addition, a candidate has to obtain a minimum of 40% in theory and a minimum of 50% in the clinical component to pass. A candidate obtaining an aggregate of 70% or more in the first attempt will be awarded a Distinction.

## 5. RULES FOR STUDENTS

### 5.1 GENERAL RULES

Some general rules applicable to students of the Faculty of Medicine are given below. A more comprehensive list of rules issued by the University of Ruhuna is given separately.

Any change of address must be immediately brought to the notice of the Dean.

Students are not permitted to leave their registered address during term time without prior permission from the Dean.

No student is permitted to be absent from work for more than 7 days without informing the Dean.

Students doing clinical appointments are expected to work in the wards during public holidays unless they have obtained prior leave from the Consultant to whom they are attached.

#### **In case of illness**

- (a) *Illness during term time*  
If student is taken ill during term time he/she should inform one of the UMO designates as early as possible. If the student is unable to do so, he/she should inform the Dean in writing by registered post as early as possible, AND submit within SEVEN DAYS of falling ill, a valid medical certificate issued by one of the persons listed under (c) below.
- (b) *Illness at examination time (including continuous assessment)*  
  
If a student is taken ill just before or during any part of an Examination he/she should inform one of the UMO designates as early as possible. If the student is unable to do so for a valid reason, he/she should inform the Dean in writing by registered post as early as possible AND submit a valid medical certificate from one of the persons listed under (c) below, within SEVEN DAYS of falling ill.
- (c) *Persons entitled to issue valid medical certificates for the above purposes*
  - (i) One of the UMO designates.
  - (ii) A consultant in any government hospital.
  - (iii) A District Medical Officer (DMO) in a government hospital.

- (d) PLEASE NOTE that medical certificates from medical officers other than those listed will NOT BE ACCEPTED.
- (e) A medical certificate is not valid unless it has been submitted within ONE WEEK of the illness.

Students are expected at all times to dress neatly and behave with decorum. Gathering together and talking in loud tones whether in hospital, clinic or in the vicinity of the offices, library or lecture halls should always be avoided. Smoking is prohibited in the premises of the Faculty of Medicine and in the Teaching Hospitals.

No students or student body shall collect monies for any purpose without written permission from the Dean and the Vice Chancellor.

Batches of students or student bodies who plan to go on trips must obtain permission to do so from the Deputy Senior Student Counselor, Dean and the Vice Chancellor.

Students or student bodies who intend to hold meetings or socials in the Faculty premises should obtain permission from the Dean and the Vice Chancellor.

## **5.2 CODE OF CONDUCT FOR CLINICAL STUDENTS OF THE FACULTY OF MEDICINE, UNIVERSITY OF RUHUNA**

### **1. Clinical Groups and appointments**

No student shall change the clinical group or the clinical appointment allocated to him / her without the prior permission of the Clinical Coordinator.

### **2. Attendance and punctuality**

Attendance at clinical work is compulsory. The student should obtain prior leave from the clinical teacher concerned before he absents himself from clinical work. The student should spend the full amount of time scheduled on the time table in the wards. The Consultant will specify the days when the student will be given leave from work.

### **3. The student's dress should be neat and clean. Males should wear longs with shirt and covered shoes. Wearing of overcoats is desirable. Hair should be combed neatly.**

### **4. In the corridors and public areas of the hospital, the students should not talk loudly and should not block corridors.**

5. On entering the wards the students should identify themselves to the ward staff and obtain permission to see patients. Do not obstruct the working of ward staff.
6. The students should not smoke or chew betel in the hospital premises and the breath should not smell of alcohol.
7. The students should obtain consent of the patient/guardian before examining a patient. Do not disturb the patient if he/she is asleep, while having a meal or if he/she is uncomfortable. In the examination of a patient of the opposite sex it is desirable to have a member of the same sex as the patient. Expose only the part that is examined and have adequate screening around the patient. Do not examine the patient during visiting hours if the patient is having or expecting visitors.
8. **Conduct with the patients**
  - (a) The student should introduce himself/herself to the patient and address the patient suitably with respect. The student should be courteous and considerate to the patient.
  - (b) No student should give any patient any treatment, medicine, money, tobacco, drug, alcohol or any article of food without the authority of the ward staff.
  - (c) The student should maintain strict professional secrecy with regard to information obtained from the patient.
  - (d) The student should not discuss the patient's condition and prognosis in the presence of the patient.
  - (e) The student should educate the patient about management and prevention of the disease. The student should develop competence in giving such information.
  - (f) The relationship of the students with patient's visitors should be at a professional level.
9. **Hospitals records**

The student should not remove hospital records, radiographs, ultrasound scans, echocardiograms, CT scans, MRI scans, ECG or laboratory reports of patients. Strict confidentiality should be maintained with regard to information obtained from records.
10. **Hospital equipment**

Student should use hospital equipment like sphygmomanometers, glassware, thermometers, gloves etc. with utmost care. Accidental breakages of such equipment should be brought to the immediate notice of ward staff.

**11. Out of bounds period**

When clinical examinations are in progress the hospital is made out of bounds for medical students. During such periods students are expected to keep away from the wards and the doctors' quarters. However, if a student wishes to visit a close relative in the ward, he/she shall visit the ward during visiting hours after obtaining prior permission from the consultant in charge and the Dean.

**12. Communicable diseases**

Students who are suffering from a communicable disease should not visit the wards. If in doubt they should consult the University Medical Officer or a person appointed by the Faculty to act in that capacity. In addition they should inform the clinical teacher.

**13. Consulting specialists and other medical staff**

The student should always obtain prior permission and make an appointment when he/she, a relative or a friend of the student wishes to consult a specialist or any other doctor in the hospital.

**14. Treatment and advice by students**

The student should refrain from prescribing and treating patients until they are qualified. No surgical procedure should be done without approval of the ward staff.

**5.3 ATTENDANCE, EXAMINATIONS**

**Attendance at classes**

An attendance of 80% or 65% with medical certificate is required for signing up student Appointment Books. The medical certificate has to conform to the regulations given under General Rules for Students.

**Hospital and clinical work**

For clinical training, students are grouped into batches. Students are expected to follow the schedules drawn up for this purpose by the Dean's Office/Clinical Coordinator. Any unauthorized changes of appointments may result in the cancellation of the appointments with the possible consequence of postponement of the Final Examination.

Clinical appointments which are changed without written permission from the Dean will not be recognized for the course.

Students are reminded that they have to conform to the rules of medical institutions they work in. Students should also be particularly mindful of the human rights of patients and be aware that students have no inherent right to interrogate or examine patients.

**Eligibility to sit examinations**

No student will be eligible to sit an examination of the Faculty if he/she has not obtained the signature of the relevant teachers for satisfactory attendance at tutorials, practical classes, ward classes, demonstrations and clinical attachments. The signature should be obtained on the last day of the respective clinical classes.

Students who have defaulted in respect of University dues, even though they may have satisfied stipulated academic requirements, will not be permitted to sit any examination.

## **6. BY-LAWS AND REGULATIONS**

### **6.1 EXAMINATION BY- LAWS AND REGULATIONS, UNIVERSITY OF RUHUNA**

BY-LAWS MADE BY THE COUNCIL OF THE UNIVERSITY OF RUHUNA UNDER SECTION 135 OF THE UNIVERSITIES ACT NO.16 OF 1978

#### **By-Laws**

1. These By-laws may be cited as the Bachelor of Medicine and Bachelor of Surgery (MBBS) Degree By-law No.03 of 1984
2. Subject to these By-laws a student may be admitted to the Degree of Bachelor of Medicine and Bachelor of Surgery if he/she,
  - a. has been duly admitted as an internal student of the University and
  - b. has been registered as a student of the University for a period not less than 4 years and 9 months, and
  - c. has completed to the satisfaction of the Vice-Chancellor courses of study as prescribed by these By-Laws and Rules and Regulations made thereunder, and
  - d. has passed the Second Examination for Medical Degrees, and
  - e. has passed the Third Examination for Medical Degrees, and
  - f. has passed the Final Examination for Medical Degrees and
  - g. has paid such fees or other dues as may be prescribed by the University ,and
  - h. has fulfilled any other conditions or requirements as may be prescribed by the University.
3. The courses of study and syllabuses for the Examinations leading to the Degree of Bachelor of Medicine and Bachelor of Surgery and the number of papers, oral examinations and other forms of evaluation in each subject, examination criteria and schemes of award of Honours shall be prescribed by the Regulations made by the Senate.
4. The Examinations prescribed by these By-Laws and the Regulations thereunder shall be conducted by a Board of Examiners in accordance with this By-Law.
5. For the Degree of Bachelor of Medicine and Bachelor of Surgery there shall be three Examinations referred to in this By-Laws and the Regulations thereunder as the 2<sup>nd</sup> Examination for Medical Degrees, 3<sup>rd</sup> Examination for Medical Degrees and the Final Examination for Medical Degrees respectively.

### **Second Examination for Medical Degrees**

6. The Second Examination for Medical Degrees consists of examinations in Anatomy, Biochemistry and Physiology. A candidate for the Examination shall have followed to the satisfaction of the Vice-Chancellor the prescribed course of study in each of these three subjects.
7. The course shall be of 5 terms duration and the Examination will be held at the end of the 5<sup>th</sup> term, and a repeat examination held not less than 6 weeks after the publication of the results of the previous examination.
8. The examination immediately following the completion of the Course shall be deemed to be the first due or scheduled attempt.
9. A candidate shall be deemed to have sat the first scheduled examination, irrespective of whether it has been actually attempted or not, unless a valid excuse has been submitted and accepted by the Senate. This attempt shall be considered the candidate's first attempt at the examination.
10. If the excuse has been accepted, the examination immediately following on the expiry of the period of postponement recommended by the Faculty of Medicine shall be the candidate's first attempt.
11. In the absence of an accepted excuse, failure to sit any due or scheduled examination will be considered as an unsuccessful attempt at the Examination.
12. A student shall not be a candidate for this Examination if a period of 3 years or more has elapsed since his/her registration as a medical undergraduate. Provided that a period of 3 years has elapsed, a student may be a candidate with the special consent of the Senate given on the recommendation of the Faculty of Medicine.
13. A candidate shall be deemed to have passed the Second Examination for Medical Degrees if he/she has, at one and the same examination, satisfied the Board of Examiners in each of the three subjects, Anatomy, Biochemistry and Physiology. Provided that a candidate may be referred in one or two of the three subjects at the Second Examination, and shall be deemed to have passed the Examination when he/she has passed the referred subject or subjects.
14. A candidate who has been unsuccessful in all three subjects in the first three scheduled attempts shall not be permitted to sit again for the Examination.

15. A candidate who has passed one to two subjects in the first 3 scheduled attempts may be permitted a fourth attempt at the Examination. Should he/she be unable to complete the Examination at the fourth attempt, he/she shall not be permitted to sit again for the Examination.

**Third Examination for Medical Degrees**

16. A student shall not be competent to enter the Course for the Third Examination for Medical Degrees unless and until he/she has passed the Second Examination for Medical Degrees.

17. A candidate for the Third Examination for Medical Degrees shall have

- (i) passed the Second Examination for Medical Degrees
- (ii) thereafter completed to the satisfaction of the Vice-Chancellor prescribed courses of study in each of the subjects specified for the Third Examination.

18. The Third Examination shall be divided into two parts, as follows:

Part 1 - Microbiology and Parasitology

Part II - Community Medicine, Forensic Medicine, Pathology and Pharmacology

19. The Course for Part I of the Examination shall be of 3 terms' duration from the 6<sup>th</sup> to the 8<sup>th</sup> term. The Examination will be held at the end of the 8<sup>th</sup> term and a repeat examination held not less than 6 weeks after the publication of the results of the previous examination.

20. The Course for Part II of the Third Examination shall be of 6 terms' duration from the 6<sup>th</sup> to the 11<sup>th</sup> term. The Examination will be held at the end of the 11<sup>th</sup> term and a repeat examination held not less than 6 weeks after the publication of the results of the previous examination.

21. The Examination immediately following the completion of the Course for each Part of the Third Examination for Medical Degrees shall be deemed to be the first due or scheduled attempt.

22. A candidate shall be deemed to have sat the first scheduled examination, irrespective of whether it has been actually attempted or not unless a valid excuse has been submitted and accepted by the Senate. This attempt shall be considered as the candidate's first attempt at the examination.

23. If the excuse has been accepted, the examination immediately following on the expiry of the period of postponement recommended by the Faculty of Medicine shall be the candidate's first attempt.

24. In the absence of an accepted excuse, failure to sit any due or scheduled examination will be considered as an unsuccessful attempt at the examination
25. A candidate shall be deemed to have passed each Part of the Third Examination for Medical Degrees if he/she has, at one and the same examination, satisfied the Board of Examiners in each subject of that part, provided that a candidate may be referred in one or more of the subjects in that Part, and shall be deemed to have passed that Part of the Examination when he/she has passed the referred subject or subjects.
26. Deleted.
27. A candidate shall be deemed to have passed the Third Examination for Medical Degrees when he/she has passed each Part of the Examination taken at one and the same time or at more than one attempt.

**Final Examination for Medical Degrees**

28. The course for the Final Examination for Medical Degrees shall be of 9 terms' duration, from the 6<sup>th</sup> to the 14<sup>th</sup> term, and a student shall not be competent to enter the course unless and until he/she has passed the Second Examination for Medical Degrees.
29. The Final Examination for Medical Degrees shall consist of an examination in Medicine (including Psychiatry), in Obstetrics & Gynaecology, in Paediatrics and in Surgery.
30. A candidate for the Final Examination for Medical Degrees shall have
  - (i) been registered as a medical student for a period not less than 4 years and 9 months, and
  - (ii) completed 9 academic terms after passing the Second Examination for Medical Degrees, and
  - (iii) passed the third Examination for Medical Degrees, and
  - (iv) completed to the satisfaction of the Vice Chancellor the prescribed course of study in each of the subjects, Medicine, Obstetrics & Gynaecology, Paediatrics, Psychiatry and Surgery.
31. The Final Examination immediately following the completion of the above qualifications shall be deemed to be the first due or scheduled attempt.
32. A candidate shall be deemed to have sat the first scheduled examination irrespective of whether it has been actually attempted or not, unless a valid excuse has been submitted and accepted by the Senate. This attempt shall be considered as the candidate's first attempt at the whole Final Examination.

33. If an excuse has been accepted, the Final Examination immediately following the expiry of the period of postponement recommended by the Faculty of Medicine shall be considered the candidate's first attempt.
34. In the absence of an accepted excuse, failure to sit any due or scheduled examination will be considered as an unsuccessful attempt at the examination.
35. A candidate shall be deemed to have passed the Final Examination for Medical Degrees if he/she has, at one and the same examination, satisfied the Board of Examiners in each of the subjects prescribed, provided he/she has passed the Second and Third Examinations for Medical Degrees. A candidate can be referred in one or more subjects at the Final Examination.
36. A candidate passing any one subject at the Final Examination shall pass at least one other subject within the next 3 scheduled attempts. Failing this, he/she will have to re-sit the whole Examination.
37. A candidate who has passed any two subjects shall pass at least one other subject during the next 3 scheduled attempts. Failing this, he/she will have to re-sit the whole Examination.
38. A candidate who has passed any 3 subjects shall pass the fourth subject in the next 3 scheduled attempts. Failing this, he/she will have to re-sit the whole Examination.
39. A student may be granted permission to postpone a scheduled attempt on the basis of a valid excuse submitted to and accepted by the Senate. Each period of exemption granted will be considered by the Senate on the basis of individual merit.
40. A student shall complete his/her Final Examination **either** within 6 years or 12 scheduled attempts after the first scheduled attempt, all periods of exemption granted by the Senate being excluded when computing this six year period, or within 10 years after registration as a student of the Faculty of Medicine, whichever is less.

### **Award of Honours and Distinctions**

41. (a) A candidate who has been successful at the Second Examination for Medical Degrees may be awarded First Class Honours or Second Class Honours (Upper Division) or Second Class Honours (Lower Division) or a pass, as the case may be.
- (b) A Candidate shall not be eligible for Honours unless he/she has taken the Examination on the earliest occasion on which he/she is qualified to do so, provided that it shall be within the power of the Senate to declare, for some specified reason, that he/she is eligible for Honours at a subsequent occasion.
- (c) A candidate shall not be eligible for Honours unless he/she has passed the Examination at his/her first scheduled attempt.
42. (a) A candidate who has been successful at the Third Examination for Medical Degrees as a whole may be awarded First Class Honours or Second Class Honours (Upper Division) or Second Class Honours (Lower Division) or a pass, as the case may be.
- (b) A candidate shall not be eligible for Honours unless he/she has taken each Part of the Examination on the earliest occasion on which he/she is qualified to do so, provided that it shall be within the power of the Senate to declare, for some specified reason, that he/she is eligible for Honours at a subsequent occasion.
- (c) A candidate shall not be eligible for Honours unless he/she has passed each part of the Examination at the first scheduled attempt.
43. (a) A candidate who has been successful at the Final Examination for Medical Degrees may be awarded First Class Honours or Second Class Honours (Upper Division) or Second Class Honours (Lower Division) or a pass, as the case may be.
- (b) A candidate shall not be eligible for Honours unless he/she has taken each Part of the Examination on the earliest occasion on which he/she is qualified to do so, provided that it shall be within the power of the Senate to declare, for some specified reason, that he/she is eligible for Honours at a subsequent occasion.
- (c) A candidate shall not be eligible for Honours unless he/she has passed the whole Examination at the first scheduled attempt.

44. In any examination, a candidate may be awarded a mark of Distinction in any subject in which he/she shows special merit, provided that he/she is sitting that examination for the first time, and that he/she passes the whole examination or in the case of the Third Examination for Medical Degrees, the Part of the Examination, at one and the same Examination.
45. Any question regarding the interpretation of the By-Laws shall be referred to the Council of the University of Ruhuna whose decision thereon shall be final.

**REGULATIONS MADE BY THE SENATE UNDER SECTION 136 OF THE UNIVERSITIES ACT, NO. 16 OF 1978**

1. These Regulations may be cited as the Bachelor of Medicine and Bachelor of Surgery Regulations No. 1 of 1984.
2. Regulations applicable to 2<sup>nd</sup> MBBS, 3<sup>rd</sup> MBBS and Final MBBS Examinations.
  - 2.1 A candidate who obtains 40% marks\* in theory and an overall average of 50% marks in a subject shall be deemed to have passed in that subject.  
(\* Some departments have raised the minimum pass mark in theory to 45% as given in this Handbook under the scheme examination and allocation of marks).
  - 2.2 A candidate who obtains an overall average of 70% marks in a subject shall be deemed to have obtained a distinction in that subject provided that he/she is sitting that examination for the first time and that he/she passes the whole examination or in the case of the Third Examination for Medical Degrees, the part of the examination, at one and the same Examination.
  - 2.3 A candidate who has passed in at least one subject but has obtained a minimum of 25% marks in the other subject/s shall be considered to be referred in the latter subject/s.
  - 2.4 A candidate who passes an examination at the first scheduled attempt and obtained an overall average mark of 70% or above at that examination shall be eligible for First Class (Honours).
  - 2.5 A candidate who passes an examination at the first scheduled attempt and obtained an overall average mark of 65% to 69% at that examination shall be eligible for Second Class Upper Division (Honours).

2.6 A candidate who passes an examination at the first scheduled attempt and obtained an overall average mark of 60% to 64% at that examination shall be eligible for Second Class Lower Division (Honours).

**3. Additional Regulations applicable to the Third MBBS Examination**

In addition to Regulations 2.1, 2.2, 2.3, 2.4, 2.5 and 2.6, Regulation 3.1 is applicable to the 3<sup>rd</sup> MBBS Examination.

3.1 In the 3<sup>rd</sup> MBBS Examination a candidate will be eligible for Honours only if he/she passes both part I and Part II at the first scheduled attempt.

**4. Additional Regulations applicable to the Final MBBS Examination**

In addition to Regulations 2.1, 2.2, 2.3, 2.4, 2.5 and 2.6, Regulation 4.1, 4.2, 4.3, and 4.4 are applicable to the Final MBBS Examination.

4.1 Should a student be unable to take the examination at the first scheduled attempt due to his/her being repeated in a clinical appointment on account of unsatisfactory work, he/she may be allowed to sit the repeat Examination following the first scheduled attempt, and will be eligible for Honours on the results of that Examination.

4.2 A Candidate should obtain a minimum of 50% marks for the clinicals in each subject to pass in that subject.

4.3 A candidate who has passed the Final MBBS Examination at the first scheduled attempted and obtained an average of 64% marks at the Final MBBS Examination shall be eligible for Second class Upper Division (Honours) provided he/she

a) has obtained Second Class Upper or First Class Honours in both the Second and Third MBBS Examination, and

b) has a cumulative average mark of 65% or above at the Second, Third and Final MBBS Examinations.

4.4 A candidate who has passed the Final MBBS Examination at the first scheduled attempted and obtained an average of 58% or 59% marks at the Final MBBS Examination shall be eligible for Second Class Lower Division (Honours) provided he/she

- a) has obtained Honours in both Second and Third MBBS Examinations, and
  - b) has a cumulative average mark of 60% or above at the Second, Third and final MBBS Examinations.
5. The first scheduled attempt in this context shall be determined by the By-Laws.
6. These Regulations shall be effective from the Academic year 1983/84.

**Verification of grade/marks for undergraduate examinations**

The Senate has approved to give the opportunity for undergraduate students to verify their examination grades in order to maintain the transparency of the evaluation system. Guidelines are available in the Dean's office for the implementation of verification of examination grades in the University of Ruhuna and all Faculties have agreed to adopt a common procedure.

## 6.2 ශිෂ්‍ය විනය පිළිබඳ අතුරු ව්‍යවස්ථාව

1995 අංක 01 දරණ විශ්වවිද්‍යාල (සංශෝධන) පනතින් සංශෝධිත 1978 අංක 16 දරණ විශ්වවිද්‍යාල පනතේ 34(6) ණී9(ග) සහ 135 (1) (ඇ) වගන්තිය සමඟ කියවෙන 45 (x) වගන්තිය යටතේ රුහුණ විශ්වවිද්‍යාලයේ පාලක සභාව විසින් සාදන ලද අතුරු ව්‍යවස්ථා මාලාව.

මෙම අතුරු ව්‍යවස්ථාව මගින් 1986 අංක 01 දරණ ශිෂ්‍ය විනය සම්බන්ධ අතුරු ව්‍යවස්ථාව 2000.02.05 දින සිට බල රහිත වන අතර මෙම නව අතුරු ව්‍යවස්ථාව 2000.02.25 දින සිට බල සහිත වන්නේය.

### 1 වන කොටස

#### සාමාන්‍ය විධි විධාන

01. 1995 අංක 01 දරණ විශ්වවිද්‍යාල (සංශෝධන) පනතින් සංශෝධනය වූ 1978 අංක 16 දරණ විශ්වවිද්‍යාල පනතේ 34(6) වගන්තිය යටතේ හෝ විනය පවත්වා ගැනීම ගැන උපකුලපතිවරයා වගකිව යුතුය. එම වගන්තිය යටතේ හෝ වෙනයම් සාධන පත්‍රයක් මගින් උපකුලපතිවරයා වෙත පැවරී ඇති බලය පහත දැක්වෙන අතුරු ව්‍යවස්ථාව මගින් සීමා කිරීමක් හෝ බාධා කිරීමක් කිසිම ආකාරයකින් සිදු නොවන්නේය.
02. රුහුණ විශ්වවිද්‍යාලය තුළ ශිෂ්‍ය විනය පවත්වාගෙන යාමේ ප්‍රධාන බලධරයා වන උපකුලපතිවරයාට ඒ ඒ පිටිය තුළ විනය පවත්වාගෙන යාමේ කාර්යය සඳහා පීඩාධිපති හා අධ්‍යක්ෂ කාර්ය මණ්ඩලයේ සෑම ආචාර්යවරයෙකුගේම පූර්ණ සහයෝගය ලබා දීම පරම යුතුකම වන්නේය.
03. සෑම විශ්වවිද්‍යාල ශිෂ්‍යයෙක්ම විශ්වවිද්‍යාලය තුළදී මෙන්ම ඉන් පිටතදී ද විශ්වවිද්‍යාලයේ ගරුත්වයට හා කීර්ති නාමයට කැළලක් නොවන සේ ද ස්වකීය සහෝදර ශිෂ්‍යයින්ගේ නිදහස හා ගරුත්වය රැකෙන සේ ද ක්‍රියා කළ යුතු වන්නේය.
04. සෑම විශ්වවිද්‍යාල ශිෂ්‍යයෙක්ම මනා පැවැත්මෙන් යුක්ත විය යුතු අතර උපාධි අපේක්ෂකයෙකුගේ තත්ත්වයට සරිලන ආකාරයෙන් විනිතව හැසිරිය යුතුය. ආචාර්ය මණ්ඩලයේ සාමාජිකයින්ට ආචාරශීලීව ඔවුන්ගේ විධානවලට ගරු කරමින් අනධ්‍යයන කාර්ය මණ්ඩලය හා සුභද්‍රව ක්‍රියා කළ යුතුය.
05. සෑම ශිෂ්‍යයෙක් විසින්ම විශ්වවිද්‍යාලය තුළදී මෙන්ම විශ්වවිද්‍යාලය හා සම්බන්ධ කාර්යයකට සහභාගි වන අවස්ථාවකදී විශ්වවිද්‍යාලය මගින් නිකුත් කරන ශිෂ්‍ය හැඳුනුම්පත ළඟ තබාගත යුතුය.
06. ශිෂ්‍යයා වෙත නිකුත් කරනු ලැබූ ශිෂ්‍ය හැඳුනුම්පත හෝ ශිෂ්‍ය වාර්තා පොත උපකුලපති හෝ විශ්වවිද්‍යාලයේ ආචාර්ය මණ්ඩලයේ සාමාජිකයෙක් හෝ පරිපාලන සේවයට සම්බන්ධ අයෙකු හෝ උපකුලපතිතුමා විසින් බලය පවරා ඇති යම් තැනැත්තෙකු පරීක්ෂාවට ඉල්ලූ විට එය ඉදිරිපත් කිරීමට බැඳී සිටින්නේය.

11 කොටස

07. විෂමාවාර හා විනය විරෝධී ක්‍රියා

- (i) 1998 අංක 20 දරණ අධ්‍යාපන ආයතනවල නවක වදය සහ වෙනත් ස්වරූපයේ සාහසික ක්‍රියා තහනම් කිරීමේ පනතේ දක්වා ඇති නවක වදය හා ඒ හා සම්බන්ධ ක්‍රියා ද විශ්වවිද්‍යාල භූමිය හා නේවාසිකාගාර භූමිය තුළ හෝ ඒ ආශ්‍රිත භූමිය තුළ හෝ ඉන් පරිබාහිරව විශ්වවිද්‍යාලය හා සම්බන්ධ කිසියම් කායභීයක් කරන ස්ථානයක අවිනිතව හැසිරීම, කලබල කිරීම, සොරකම් කිරීම, අන් අයට හිටිහැර වන සේ ක්‍රියා කිරීම, හිංසා කිරීම, තර්ජනාත්මකව ප්‍රකාශ කිරීම, බිමත්ව සිටීම, මත්ද්‍රව්‍ය ප්‍රභව ගැනීම, අන් අයට පහර දීම, තුවාල කිරීම, ආවායභීවරයෙකුගේ හෝ කායභී මණ්ඩලයේ රාජකාරී කටයුතුවලට අවහිර කිරීම, දේශණ හා අනෙකුත් කටයුතු පැවැත්වීමට අවහිර වන සේ ක්‍රියා කිරීම, අයුතු බලපෑම් කිරීම, වාචිකව හෝ ලිඛිතව අපහාස කිරීම, නීති විරෝධී රැස්වීම් සංවිධානය කිරීම හා පැවැත්වීම, එවැනි රැස්වීම්කඳි කතා කිරීම, ශිෂ්‍යයින් ප්‍රකෝප කිරීම, විශ්වවිද්‍යාලය තුළ අනවසරයෙන් සඟරා, පත්‍රිකා විකිණීම හෝ බෙදා හැරීම ද, විශ්වවිද්‍යාලය හා සම්බන්ධ අසත්‍ය ප්‍රකාශ නිකුත් කිරීමද, අනවසරයෙන් විශ්වවිද්‍යාලය තුළදී මුදල් එකතු කිරීම හා විශ්වවිද්‍යාලයෙන් පිටතදී විශ්වවිද්‍යාලයේ නාමයෙන් මුදල් එකතු කිරීම, අනුමැතියකින් තොරව බිත්තිවල ලිවීම හා අවලක්ෂණ කිරීම, පෝස්ටර් ඇලවීම, විශ්වවිද්‍යාලයේ දේපලවලට හානි පැමිණවීම, නේවාසිකාගාර නීති උල්ලංඝනය කිරීම, විභාග නීති උල්ලංඝනය කිරීම හා විභාග වංචාවල යෙදීම, විශ්වවිද්‍යාලය මගින් පනවනු ලැබූ ශිෂ්‍ය කටයුතු හා සම්බන්ධ නීතිරීති උල්ලංඝනය කිරීම හා එවැනිනකට අන් අය පෙළඹවීම, විශ්වවිද්‍යාල බලධරයකු හෝ සේවකයකු බලහත්කාරයෙන් රඳවා ගැනීම හෝ ඊට උත්සාහ කිරීම, එවැනිනක් සඳහා අන් අය පෙළඹවීම, විශ්වවිද්‍යාලය විසින් ඉල්ලා සිටින විට විශ්වවිද්‍යාලයට සැපයිය යුතු තොරතුරු නොසැපයීම, විකෘති කළ තොරතුරු සැපයීම හා පරීක්ෂණයකදී පරීක්ෂකයින් නොමඟ යැවෙන අසත්‍ය ප්‍රකාශ කිරීම මෙම අතුරු ව්‍යවස්ථාව යටතේ දැඹුවම් ලැබිය හැකි වැරදි වන්නේය.

යටෝක්ත විෂමාවාරී ක්‍රියාවන් දුටු විට ඒ ගැන උපකුලපතිවරයාට සෘජුව හෝ පීඩාධිපති මාර්ගයෙන් දැනුම් දීම විශ්වවිද්‍යාලයට සම්බන්ධ ශිෂ්‍ය, සේවක, ආරක්ෂක හා ආවායභී මණ්ඩලයේ සෑම අයෙකුගේම යුතුකමක් වන්නේය.

- (ii) විෂමාවාරී ක්‍රියාවන් පිළිබඳව පවත්වන මොනෙයම් අන්දමේ පරීක්ෂණයකට වුවද ඉදිරිපත් වී තමන් දුටු දේ ප්‍රකාශ කිරීම විශ්වවිද්‍යාලයට සම්බන්ධ සෑම අයෙකුගේම යුතුකමක් හා වගකීමක් වන්නේය.

111 කොටස

08. මූලික පරීක්ෂණ පැවැත්වීම

- (i) විනය කඩ කිරීමක් හෝ විෂමාවාරී ක්‍රියාවක් පිළිබඳ විශ්වවිද්‍යාලයේ ශිෂ්‍යයෙකු ආවායභී මණ්ඩලයේ සාමාජිකයෙකු ආරක්ෂක අංශයේ අයෙකු හෝ අනධ්‍යයන කායභී මණ්ඩලයේ අයෙකු විසින් ලිඛිතව හෝ වාචිකව දැන්වීමක් කළ විට උපකුලපතිවරයා වහාම ඒ ගැන ක්‍රියාත්මක විය යුතුය. එවැනි සිදුවීමක් පීඩාධිපතිවරයාට වාර්තා වූයේ නම් පීඩාධිපතිවරයා විසින් වහාම උපකුලපතිවරයාට ඒ බව දැන්විය යුතුය. පීඩාධිපතිවරයා විසින් හෝ ඔහු විසින් බලය පවරනු ලැබූ අයෙකු හෝ කමිටුවක් මගින් සිද්ධිය පිළිබඳව වහාම මූලික පරීක්ෂණයක් පැවැත්විය යුතුය. සිද්ධිය පිළිබඳ පරීක්ෂා කිරීම පීඩය මගින් කළ නොහැකි යැයි පීඩාධිපතිවරයාට හැඟී යන්නේ නම් ඒ සඳහා සුදුසු අයෙකු පත් කිරීමට උපකුලපතිතුමාගෙන් ඉල්ලා සිටීමට පීඩාධිපතිට හැකිය. එවැනි අවස්ථාවක ඒ සඳහා සුදුසු අයෙකු හෝ මණ්ඩලයක් උපකුලපති විසින් වහාම පත් කළ යුතුය.

- (ii) විශ්වවිද්‍යාලයේ සාමය පවත්වාගෙන යාම සඳහා එවැනි වෛද්‍යවකට ලක්වුවකු/ වුවන් විශ්වවිද්‍යාල භූමිය තුළ සිටීම ඔහුට විරුද්ධව ඇති වෛද්‍යවේ ඛරපතලකම මත උපකුලපතිවරයාගේ මතය අනුව නුසුදුසු වන අවස්ථාවකදී වූදිතයාට කරුණු ඉදිරිපත් කිරීමට අවස්ථාවක් ලබා දී උපකුලපතිවරයාගේ අත්සන යටතේ ලිපියක් මගින් ඒ තැනැත්තාට/ තැනැත්තන්ට එම භූමි භාගයට ඇතුල්වීම හා නතරව සිටීම තහනම් කළ හැකිය. එය උපකුලපතිවරයා විසින් අවලංගු කරනු ලබන තෙක් බලාත්මක වන්නේය. විනය කඩ කිරීමක් හෝ විෂමාචාරී ක්‍රියාවක් සම්බන්ධ දැන්වීම පිටිබසිවරයෙකු මාර්ගයෙන් උපකුලපතිවරයාට ලැබී නම් අදාල පිටිබසිවරයා හෝ පිටිබසිවරයා විසින් නම් කළ අයෙකු වනාම ඒ සිද්ධිය පිළිබඳව පරීක්ෂා කර බලා වාර්තාවක් සැපයිය යුතුය.
- (iii) මෙම මූලික පරීක්ෂණය සාධාරණ කාලයක් ඇතුළත නිම කොට භාර දිය යුතුය. තවද එම වාර්තාවට සිද්ධිය ඇසින් දුටු හෝ සිද්ධියට මුහුණ පෑ අයගේ ද ලබාගත හැකි සාක්ෂි ඇතුළත් විය යුතුය.
- (iv) පිටිබසිවරයා මුල් වී මූලික පරීක්ෂණය සිදු කළේ නම් හා අදාල සිද්ධිය ඛරපතල එකක් නොවේ නම් අවස්ථාවේවිචිතව ගන්නා සරල ක්‍රියාමාර්ගයක් තුළින් ප්‍රශ්නය විසඳිය හැකි යැයි පිටිබසිවරයාට හැඟේ නම් දෙපාර්ශවයේ කැමැත්ත ද ඊට ලබාගෙන සුදුසු ක්‍රියාමාර්ගයක් ගෙන ඒ පිළිබඳව උපකුලපතිවරයාට වාර්තා කළ හැක.
- (v) උපකුලපතිවරයා මුල් වීමෙන් පරීක්ෂක නිලධාරියෙකු පත් කළේ නම් පරීක්ෂක නිලධාරියා විසින් ප්‍රශ්නයට අදාල පාර්ශවවල සාක්ෂි සටහන් කර තම නිර්දේශ සහිතව මූලික පරීක්ෂණ වාර්තාව සාධාරණ කාලයක් ඇතුළත උපකුලපතිවරයාට භාර දිය යුතුය.
- (vi) මූලික පරීක්ෂණ වාර්තාව අනුව විශ්වවිද්‍යාලයේ සාමය හා මනා පැවැත්ම සහතික සහතික කෙරෙන ක්‍රියාමාර්ගයක් ගැනීමට උපකුලපතිවරයාට හැකිවන අතර එය ඉදිරිපත් වී ඇති වාර්තාවේ නිර්දේශවලට අනුකූලව විය යුතුය.
- (vii) මූලික පරීක්ෂණ වාර්තාවට අනුව ඉදිරිපත් වී ඇති වෛද්‍යවලට වූදිතයා වරද පිළිගන්නා අවස්ථාවලදී වරදට අනුරූපව වූදිතයාට අවවාද කිරීමක් හෝ සුළු දඬුවමක් පැවරීම හෝ දඩයක් නියම කිරීමට උපකුලපතිවරයාට බලය ඇත්තේය.
- (viii) මූලික පරීක්ෂණ වාර්තාවෙන් ඉස්මතු වී ඇති වෛද්‍යා ඛරපතල වේ නම් හෝ ඉහත 111 කොටසෙහි 08 (vi) අනුව ගැටලු නිරාකරණය නොවූයේ නම් එකී වෛද්‍යා විධිමත් පරීක්ෂණයක් සඳහා විනය මණ්ඩලය වෙත යොමු කළ යුතු වන්නේය.

**IV කොටස**

09. උපකුලපතිවරයා විසින් ජ්‍යෙෂ්ඨ කථිකාචාර්ය 11 ශ්‍රේණියේ හෝ ඊට ඉහළ අධ්‍යයන කාර්ය මණ්ඩලයේ තිදෙනෙකු විනය මණ්ඩලයේ සාමාජිකයන් වශයෙන් පත් කළ යුතුය. ඔවුන්ගේ සේවා කාලය වර්ෂ තුනකට බල පවත්වන අතර නැවත පත් කිරීමට සුදුසුකම් ඇත්තේය. සේවා කාලය අවසන් වීමට පෙර කිසියම් හේතුවක් මත විනය මණ්ඩලයේ කටයුතු කරගෙන යාමට නොහැකි වුවහොත් ඔහුගේ/ ඇයගේ ඉතිරි සේවා කාලය සඳහා අනුප්‍රාප්තිකයෙකු උපකුලපතිවරයා විසින් පත් කළ යුතුය. තවද කිසියම් හේතුවක් හෙයින් විනය මණ්ඩලයක තාවකාලිකව කටයුතු කිරීමට නොහැකි වුවහොත් ඔහුගේ/ඇයගේ එම කටයුතු ආවරණය කිරීම සඳහා තාවකාලික අනුප්‍රාප්තිකයෙකු උපකුලපතිවරයා විසින් පත් කළ යුතුය.

විනය මණ්ඩලයේ ලේකම්වරයා වශයෙන් ජ්‍යෙෂ්ඨ සහකාර ලේකාධිකාරී නීති හා ලේඛණ උපකුලපතිවරයා විසින් පත් කළ යුතුය.

10. විනය පරීක්ෂණ

මූලික පරීක්ෂණය පවත්වා සාධාරණ කාලයක් ඇතුළත විධිමත් පරීක්ෂණ කටයුතු ආරම්භ කිරීමට පියවර ගත යුතුය.

- (i) වූදිනට/වූදිනට වරෙහිව විධිමත් වෛද්‍යා පත්‍රයක් උපකුලපතිගේ අත්සනින් යුතුව භාර දී සති දෙකක් ඇතුළත වූදිනටගේ නිදහසට කරුණු ලිඛිතව ලබාගත යුතුය. වූදිනටගේ නිර්දෝෂිතාවය තහවුරු කිරීමට ඉදිරිපත් කළ හැකි සාක්ෂිකරුවන්ගේ ලැයිස්තුවක් ද ඊට අමුණා එවිය යුතුය.
- (ii) ඉන්පසු සාධාරණ කාලයක් ඇතුළත විධිමත් පරීක්ෂණය ආරම්භ කළ යුතුය. විනය මණ්ඩලයේ සෑම සාමාජිකයෙකුටම පරීක්ෂණයට දින තුනකටවත් කලින් අවශ්‍ය ලිපිගොනු ලබාදිය යුතුය.
- (iii) පැමිණිල්ල තහවුරු කිරීම සඳහා කැඳවන සාක්ෂිකරුවන්ගේ නාම ලේඛණයක්ද, විත්තියේ සාක්ෂිකරුවන්ගේ නාම ලේඛණයක්ද පරීක්ෂකවරුන්ට ලබා දිය යුතුය.
- (iv) පරීක්ෂණය සාධාරණ කාලයක් තුළ පවත්වා අවසන් කළ යුතුය. දෙපාර්ශවයේම සාක්ෂි විභාග කිරීමෙන් අනතුරුව පරීක්ෂක මණ්ඩලයේ වාර්තාව සිය නිර්දේශ සහිතව උපකුලපතිවරයාට භාර දිය යුතුය.

11. දඬුවම්

- (i) මෙම අතරු ව්‍යවස්ථාව යටතේ පවත්වනු ලබන විධිමත් විනය පරීක්ෂණයකදී වූදිනට/වූදිනටගේ වැරදි කර ඇති බවට සාක්ෂිවලින් තහවුරු වන්නේද නොවන්නේද යන්න පරීක්ෂකවරුන් උපකුලපතිවරයාට වාර්තා කළ යුතුය.
- (ii) විනය මණ්ඩලය වූදිනට/ වූදිනටගේ වැරදිකරු බවට තීරණය කරන්නේ නම් පහත සඳහන් දඬුවමක් හෝ ඊට වැඩි ගණනක් නිර්දේශ කිරීමට විනය මණ්ඩලය වූදිනට/ වූදිනටගේ වැරදිකරු බවට තීරණය කරන්නේ නම් පහත සඳහන් දඬුවමක් හෝ ඊට වැඩි ගණනක් නිර්දේශ කිරීමට විනය මණ්ඩලයට බලය ඇත්තේය.
  - i. විශ්වවිද්‍යාලයෙන් නෙරපීම.
  - ii. නිශ්චිත කාලයකට ශිෂ්‍යභාවය අහෝසි කිරීම.
  - iii. නේවාසික පහසුකම් ලබා ඇතිනම් එම පහසුකම් ඉවත් කිරීම හෝ කිසියම් කාලසීමාවකට අත්හිටුවීම.
  - iv. නිශ්චිත කාලයකට වාර්ෂික විභාගවලට පෙනී සිටීමට අවසර නොදීම.
  - v. විභාග ප්‍රතිඵල නිශ්චිත කාලයකට අත්හිටුවීම.
  - vi. මූල්‍යමය දඩයකට යටත් කිරීම.
  - vii. තදබල ලෙස අවවාදයකට ලක් කිරීම.
  - viii. වරදට ගැලපෙන වෙනත් සුදුසු දඬුවමක් පැනවීම.

12. අභියාචනා

- (i) විනය මණ්ඩලයේ නිර්දේශ මත උපකුලපතිවරයා විසින් පමුණුවන දඬුවම සම්බන්ධයෙන් සැකිමකට පත් නොවන අයෙකුට එකී දඬුවමට එරෙහිව පිළිගත හැකි හේතු දක්වා පීඩාධිපතිවරයා මගින් උපකුලපතිවරයා වෙත අභියාචනාවක් ඉදිරිපත් කළ හැක.

(ii) අභියාචනාවක් සලකා බැලීම සඳහා ජ්‍යෙෂ්ඨ කථිකාචාර්යවරු හෝ ඊට ඉහළ අධ්‍යයනික සාමාජිකයින් අතුරින් තිදෙනෙක් අභියාචනා මණ්ඩලයක් වශයෙන් පත් කිරීමට උපකුලපතිවරයාට බලය පැවරෙන්නේය. එවැනි සාමාජිකයින් නැවත පත් කළ හැක.

උපකුලපතිවරයා විසින් ජ්‍යෙෂ්ඨ කථිකාචාර්ය 1 ශ්‍රේණියේ හෝ ඊට ඉහළ අධ්‍යයන කාර්ය මණ්ඩලයේ තිදෙනෙකු අභියාචනා මණ්ඩලයේ සාමාජිකයින් වශයෙන් පත් කළ යුතුය. ඔවුන්ගේ සේවා කාලය වර්ෂයක කාලයක් සඳහා බල පවත්වන අතර නැවත පත්කිරීමට සුදුසුකම් ඇත්තේය. සේවා කාලය අවසන් වීමට පෙර කිසියම් හේතුවක් මත අභියාචනා මණ්ඩලයේ කටයුතු කරගෙන යාමට නොහැකි වුවහොත් ඔහුගේ/ඇයගේ ඉතිරි සේවා කාලය සඳහා අනුප්‍රාප්තිකයෙකු උපකුලපතිවරයා විසින් පත් කළ යුතුය. තවද කිසියම් හේතුවක් හෙයින් අභියාචනා මණ්ඩලයක තාවකාලිකව කටයුතු කිරීමට නොහැකි වුවහොත් ඔහුගේ/ ඇයගේ එම කටයුතු ආවරණය කිරීම සඳහා තාවකාලික අනුප්‍රාප්තිකයෙකු උපකුලපතිවරයා විසින් පත් කළ යුතුය.

(iii) විධිමත් පරීක්ෂණ වාර්තාව ද දැඬුවම් පිළිබඳ විස්තර ද අභියාචනා මණ්ඩලය වෙත ඉදිරිපත් කළ යුතුය. ඒවා පරීක්ෂා කිරීමෙන් පසු අභියාචනා මණ්ඩලයට පනවා ඇති දැඬුවම් අනුමත කිරීම ලිහිල් කිරීම හෝ වෙනයම් දැඬුවමක් නිර්දේශ කිරීම හෝ දැඬුවමින් නිදහස් කිරීමට නිර්දේශ කිරීමට බලය ඇත්තේය.

(iv) අභියාචනා මණ්ඩලය මගින් සිය නිර්දේශ උපකුලපතිවරයා වෙත ලිඛිතව ඉදිරිපත් කළ යුතුය.

(v) එම නිර්දේශ මත උපකුලපතිවරයා ගනු ලබන තීරණය අවසන් තීරණය වන්නේය.

13. සීමා කිරීම්

(i) මෙම ගිණුම් විනය කටයුතුවලදී විශ්වවිද්‍යාල ගිණුමක් සම්බන්ධයෙන් විශ්වවිද්‍යාලය මගින් හෝ විශ්වවිද්‍යාල පනත ආශ්‍රයෙන් පනවන විධිවිධාන පමණක් වලංගු වන්නේය.

(ii) විශ්වවිද්‍යාල විනය කඩ කිරීම සම්බන්ධ පරීක්ෂණයකදී නියෝජ්‍ය උපකුලපති, ජ්‍යෙෂ්ඨ ගිණුම් උපදේශක හා ගිණුම් උපදේශකයන් පරීක්ෂණයේ නිලධාරීන් වශයෙන් යොදා නොගත යුතුය. ඔවුන් ගිණුමක් වෙනුවෙන් ක්‍රියා කළ යුතු අය නිසා විනය කටයුතු පරීක්ෂාවෙන් ඔවුන් ඉවත් කර තබනු ඇත. එතෙකුදු වුවද ඔවුන්ට සාක්ෂිකරුවන් වශයෙන් ඉදිරිපත් වීමට තහනමක් නැත්තේය.

අර්ථකථනය

“විශ්වවිද්‍යාලය” යන්නෙන් රුහුණ විශ්වවිද්‍යාලය අදහස් වේ.

“ගිණුම” යන්නෙන් යම් පාඨමාලාවක් හැඳැරීම සඳහා රුහුණ විශ්වවිද්‍යාලයේ ලියාපදිංචි වූ අයෙක් අදහස් කෙරේ.

## **7. EXAMINATION OFFENCES**

The following are deemed to be Examination Offences.

- a. Possession of documents, notes or other unauthorized material;
- b. Copying or exchange of notes or answer scripts;
- c. Attempting to obtain or obtaining improper assistance from any other person or cheating or speaking to any person other than an authorized person;
- d. Impersonating;
- e. Continuing to write after the announcement to stop writing by the Supervisor;
- f. Aiding and abetting in the commission of any of these offences;
- g. Disorderly conduct that may disturb the conduct of the Examination.

## 8. FEES

Registration Fees	-	Rs.200 per year
Medical Fee	-	Rs.50 per year
Science Deposit Fee	-	Rs.100 to be paid on admission
Library Fee	-	Rs.100 to be paid on admission
Repeat Examinations	-	A fee of Rs. 60 per subject is charged at all repeat examinations. If the whole examination is repeated the charge are as follows:
		2 <sup>nd</sup> MBBS Rs. 180
		3 <sup>rd</sup> MBBS Part I Rs. 120
		3 <sup>rd</sup> MBBS Part II Rs. 240
		Final MBBS Rs. 240
Issue of certificates to Graduates		
		Academic Record Rs.100
		Dean's letter Rs. 50
		Academic Transcript Rs.200

## **9. HIGHER DEGREES**

The Faculty has provision for graduates to read for the Doctor of Medicine (DM), Doctor of Philosophy (PhD) and Master of Philosophy (MPhil) degrees.

Details are available with the Director of Graduates Studies, University of Ruhuna.

Several other postgraduate medical degrees in a number of clinical disciplines are awarded by the Postgraduate Institute of Medicine.

## 10. THE LIBRARY

The Medical Library is housed on the first and second floors of the Administration Building.

The library contains approximately 19,000 books in the two sections of reference and lending. The majority of textbooks are in multiple copies. The newly established Computer Aided Learning Centre (CALC) in the library includes 95 Computers to the medical students.

### **Library hours**

Weekdays	-	8.30 a.m.- 7.00 p.m.
Saturdays	-	8.30 a.m.- 7.00 p.m.
Sundays	-	8.30 a.m.- 6.00 p.m.
Public holidays	-	Closed

### **Borrowing of books by students**

#### ***Registrations***

Students who wish to use the library are required to register themselves at the library and to obtain their loan tickets.

#### ***Loan tickets***

Loan Tickets could be obtained by filling an application form available at the library office and handing it over to the library authorities together with the student's University Identity Card. After registration each student will receive two loan tickets in two different colours. The white ticket will entitle the student to borrow a book belonging to category 4, and the yellow ticket will entitle the student to borrow a book in category 3 (see below). A book will be loaned only on production of the Loan Ticket and Student Identity Card. Tickets issued to students are not transferable. If a Ticket is lost the loss should be informed in writing, to the library authorities with immediate effect. A duplicate of the ticket will be issued one month after the loss is reported. The second issue is allowed only after a thorough verification of the loss and on payment of twenty five rupees.

### ***Period of Loan***

The books are divided into four categories.

1. Permanent Reference                      These books are labeled red R on the spine of the book and are not permitted to be removed from the library under any circumstance.
2. Staff Permanent Reference                These books are labeled red S and red R on the spine of the book. These books can be borrowed by the academic staff members of the Faculty only.
3. Overnight Reference                        These books are labeled blue R on its spine.
4. Lending                                        All other books that do not come under any of the above categories are available for readers to borrow on loan basis for one week.

### ***Issue of books to students***

Lending books may be borrowed and returned during the normal library hours. The books borrowed must be returned on or before the date stamped on the date slip attached to the fly leaf or the end of the book.

Overnight reference books may be borrowed two hours before the closing of the library. They must be returned not later than 1.00 p.m. on the following library opening day.

The required book must be handed over at the counter together with the appropriate Loan Ticket and Student Identity Card. The Loan Ticket will be retained and the book will be handed over to the borrower with the returnable date stamped on the date slip. When the book is returned, it is the responsibility of the borrower to obtain the Loan Ticket at the time of returning the book. Please do not leave the book at the counter to collect the Loan Ticket later. Until the book is discharged by obtaining the Loan Ticket, that book will be the responsibility of the borrower. PGIM Trainees should pay a refundable deposit of Rs. 2000/=.

*Long term lending facility to students:* Two types of services are provided under this facility. a) Provision of books for new entrants from low income background on a long-term basis. b) Provision of books for medical students to be used in the hospital during clinical training.

### ***Issuing of books and periodicals to the staff of the faculty***

Books and periodicals will be issued according to the category of staff and type of materials.

<b>Category of the staff</b>	<b>Type &amp; duration of library loan</b>
Permanent academic staff	Three books for one month Three Journals for three weeks
Registrars Assistant Lecturers Demonstrators Scientific Assistants Hospital Consultants Visiting Lecturers	Two books for one month Three Journals for three weeks
Head of a Department	10 books for one year as Departmental issues
PGIM Trainees	One book for one month and two journals for two weeks
Medical officers	Reference facility only

### ***Periodicals***

Periodicals will not be issued to students. Periodicals are issued to staff members according to the following system.

Periodicals which are on display (current) will not be issued within one month of arrival. Periodicals may be borrowed after one month for a period of two to three weeks.

The current issues of periodicals are displayed on racks and the bound volumes of the back issues of periodicals are in the stacks.

### ***Fines for overdue lending books***

A fine of Rs. 5/= will be charged per day for a book returned after the due date. Only library working days will be considered.

### ***Fines for overdue overnight reference books***

A fine of Rs. 2/= will be charged per hour for a book returned after the due date. Only library working days will be considered.

### **Damage to and loss of library books**

No books or other material of the library may be marked by the users. Borrowers will be held responsible for the condition of books returned by them. They should, therefore, examine them on issue and if any pages are missing or damaged they should point this out to the issuing assistant. In the absence of such a report, the book issued will be considered a perfect copy. If a book is damaged or lost, the borrower should replace it or will be liable to pay twice the current value of the book and Rs.5/= as department charges and binding charge if the lost or damaged book is already bound by the library.

### **Library discipline**

- a) Silence should be observed in all parts of the library
- b) Smoking and consumption of food or drink are forbidden in the library
- c) No brief or attached-cases, files, umbrellas, raincoats etc. should be brought into the library
- d) Ink bottles and ink wells should not be taken to any part of the library
- e) Readers are particularly requested to conduct themselves with decorum and consideration for other, and refrain from any action that could embarrass or disturb other users of the library eg: placing feet on the tables and arms of chairs etc.
- f) Readers must always carry their identification cards or record books and produce them for inspection, if required. Library facilities may be refused to readers who do not comply with this rule.
- g) Students should not bring into the library any of their own textbooks.
- h) The librarian will report to the Dean any person whose conduct in the library is disorderly, and pending the Dean's decision, such a person will be excluded from all further use of the library

Any other information regarding the library may be obtained from the library staff.

## **11. STUDENT SERVICES**

### **11.1 Student Loans**

No scheme available at present.

### **11.2 Bursary Scheme**

The University Grants Commission implemented the New Bursary Scheme in place of Bank Loans from the academic year 1984/85. Bursaries are provided to students who are entering the University, based on parents' income, distance from residence to University and the number of school going brothers and sisters.

The annual value of a full Bursary is Rs.20,000

The annual value of a half Bursary is Rs.19,000

Bursary monies are paid in ten installments in each academic year. The Bursary may be stopped for the following reasons.

- 1) If bursary holders fail to pass any examination
- 2) If students' work, conduct and attendance are unsatisfactory.
- 3) If he/she conducts himself/herself in an indisciplined manner.

Application forms for Bursaries can be obtained from the Student Welfare Branch of the University of Ruhuna, Wellamadama, Matara.

### 11.3 Scholarship

The following scholarships are available to students of the Medical Faculty.

- a) Government Scholarships;  
Granted to student who are eligible to extend their 5<sup>th</sup> and 8<sup>th</sup> Standard Scholarships.
- b) Mahapola Scholarships;

Mahapola Scholarships are awarded by the Mahapola Trust Fund of the Ministry of Trade and Shipping to the students who are entering the University. Two categories of Mahapola Scholarships are awarded.

- a) *Merit Scholarship*;  
Selections are made on the performance at the G.C.E. (A/L) Examination on the results of which admissions to University are based. A merit Scholarship is Rs. 25,500 per year.
- ii) *Ordinary Scholarship*;  
Selections are made on the basis of incomes and need. An Ordinary Scholarship is Rs.25,00/- per year.  
  
Conditions
- i) Scholarship monies are paid in ten installments in each Academic year. Scholarship may be cancelled if student's work, conduct and attendance are found to be unsatisfactory or if the student fails to obtain a pass at each examination in the University.
- ii) Endowed Scholarship  
Endowed Scholarships are awarded to students who have not obtained Mahapola Scholarships, Bursaries or other Scholarships. Selections are made for each Scholarship, by calling for applications based on the conditions of each scholarship.

### 11.4 Gold Medals and Awards

*Dr. A.M. Kulathilleke Award for Anatomy.*

A cash award is made to the student who scores the highest mark over 70% in Anatomy and passes the 2<sup>nd</sup> MBBS Examination with 1<sup>st</sup> or 2<sup>nd</sup> class Honours. The award was made in 1983 by Mrs. Lena Kulathilleke in memory of her husband Dr. A.M. Kulathilleke, former Visiting Surgeon, Galle.

*Mr. and Mrs. M.G. Fonseka Prize for Anatomy*

This award was established in 1994 and consists of a cash award in twelve monthly installments awarded to the student obtaining the highest mark in Anatomy at the main 2<sup>nd</sup> MBBS Examination held every year.

*C.I.C. Awards for the 2<sup>nd</sup> MBBS Examination*

The Chemical Industries (Colombo) Ltd. gives two cash awards for the 2<sup>nd</sup> MBBS Examination from 1985. The first award is given to the student who scores the highest aggregate at the 2<sup>nd</sup> MBBS Examination. The second award is given to the two most deserving students from among the first ten students at the 2<sup>nd</sup> MBBS Examination.

*Jayanthi Sriya Rasaputhram Memorial Award for the 3<sup>rd</sup> MBBS Part I Examination*

This is awarded by Mr. Warnasena Rasaputhram, former Governor of the Central Bank of Ceylon, in memory of his late wife, to a Student from the Southern Province who scores the highest aggregate at the 3<sup>rd</sup> MBBS Part I Examination.

*Lionel Memorial Award for Pharmacology*

This is awarded by the Ceylon College of Physicians from 1983 in memory of late Professor N.D.W.Lionel, Professor of Pharmacology, Faculty of Medicine Colombo, to the student who scores the highest mark in Pharmacology at the 3<sup>rd</sup> MBBS Part II Examination.

*Illesinghe Memorial Scholarship by RUMSAA member Dr. Dushantha Illesinghe*

This is awarded based on extracurricular activities of students performed during the first 4 years in the Faculty and only students who have successfully completed 2<sup>nd</sup> and 3<sup>rd</sup> MBBS in the first attempts will be eligible to apply for the scholarship.

*L.A.D.Sirisena Memorial Gold Medal for Community Medicine*

This is awarded by Dr. L.A.W. Sirisena, in memory of his late father, to the student who scores the highest mark over the 70% in Community Medicine at the 3<sup>rd</sup> MBBS Part II Examination.

*C.I.C. Awards for the 3<sup>rd</sup> MBBS Part II Examinaitons*

The Chemical Industries (Colombo) Ltd. gives two cash awards for the 3<sup>rd</sup> MBBS Part II Examination. The first award is given to the student who scores the highest aggregate at the 3<sup>rd</sup> MBBS Part II Examinaiton. The second award is given to the two most deserving students from the first ten students at the 3<sup>rd</sup> MBBS Part II Examiantion.

*Gold Medal for Paediatrics awarded in memory of Mr. & Mrs. C.R. de Silva*

This Gold Medal is awarded to the student who obtains First or Second Class Honours at the Final MBBS Examination and scores the highest mark of 70% or above in Paediatrics. This Gold Medal was donated in 1983 by Dr. (Miss) Stella de Silva, Consultant Paediatrician, in memory of her parents, the late Proctor and Mrs.C.R.de Silva.

*Miss Sadha Perera Memorial Gold Medal for Obstetrics & Gynaecology*

A Gold Medal donated by Dr. and Mrs. Wilfred S.E. Perera in 1983 in memory of their late daughter to the student who pass the Final MBBS Examination with First or Second Class Honours and scores the highest mark (70% or more) in Obstetrics & Gynaecology.

*Dr. P.R.Anthonis Gold Medal for Surgery*

A Gold Medal donated in 1983 by Dr. P.R.Anthonis, Consultant Surgeon, to the student who pass the Final MBBS Examination with First or Second Class Honours and scores the highest mark (70% or more) in Surgery.

*Wijayawardhana Gold Medal for Medicine*

A Gold Medal Donated in 1986 by Dr. U.D. Wijayawardhana, Consultant Cardiologist, in memory of his parents Mr. Justin and Mrs.Jinaseeli Wijayawardhana, to the student who scores the highest mark (70% or more) in Medicine at the Final MBBS Examination .

*Caroline Mohhotti Gold Medal*

A gold medal donated by Dr. J.E. Mohotti, in memory of his late mother, to the student who scores the highest aggregate at the Final MBBS Examination.

*Sir Ernest and Lady de Silva Memorial Gold Medal*

A Gold Medal donated in memory of Sir Ernest and Lady de Silva by Dr. and Mrs. O.R. Medonza, is awarded to the student who passes the Final MBBS Examination with First or Second Class Honours and who has the highest mean score when Medical Examinations (2<sup>nd</sup>, 3<sup>rd</sup> and Final MBBS) are considered together.

*Christie Dias Perera Memorial Gold Medal for Pathology*

Awarded to the student who obtains the highest marks with Distinction in Pathology at 3<sup>rd</sup> MBBS Part II Examination.

*Professor Neil Fonseka Memorial Gold Medal for Pharmacology*

Awarded to the student who obtains highest marks in Pharmacology at the first attempt at the main 3<sup>rd</sup> MBBS Part II Examination.

### **11.5 Approved Student Unions and Societies in the Faculty of Medicine**

Faculty of Medicine Students Council  
Arts Circle (Faculty of Medicine)  
Buddhist Brotherhood (Faculty of Medicine)  
Muslim Majlis (Faculty of Medicine)  
Explorers Club  
Medical Student's Self-Help Fund Society  
Study Group on Food and Drugs  
Dancing Club  
Air Rifle Shooting Club

### **11.6 The Student Counsellors**

Apart from academic staff members who have over the years, made themselves available for advice on academic matters as well as personal problems in the capacity of mentors, there are eight Student Counsellors. They are Drs. Sampath Gunawardena (Deputy Senior Student Counsellor), K D Mahinda, K A C Wickramarathna, R. H. A. I. Ratnaweera, I D Siriwardena, D C Wijewickrama and T G Liyanage.

### **11.7 Health Services**

The University Medical Centre was started at the University in December 1985. A medical examination for all new entrants is an admission requirement for the simple reason that a new entrant may suffer in silence. Medical student can seek assistance on health matters from members of the clinical academic staff as well as from the medical staff of the Teaching Hospitals, Karapitiya and Mahamodara. The UMO designate for the Faculty of Medicine is Dr. C K Bodinayake.

### **11.8 Student Accommodation**

Accommodation is available for medical students on the site of the Faculty of Medicine in Karapitiya. Applications should be made to the Assistant Registrar, Faculty of Medicine, Galle or to the Senior Assistant Registrar (Student Welfare) at Matara.

### **11.9 Other Services**

#### *Canteens*

Canteens are provided for medical students at the Faculty of Medicine at Karapitiya.

### **11.10 Physical Education**

The Faculty of Medicine provides facilities for netball, badminton, table tennis, carom, draughts, chess, weight training and strength development. Particulars of other services afforded to students can be obtained from the Senior Assistant Registrar (Student Welfare Services) at Matara.

## **12. ELECTIVE ATTACHMENTS FOR FOREIGN STUDENTS**

Medical students from many developed countries have spent periods up to 16 weeks in elective appointments at the Faculty of Medicine, benefiting richly from the abundant clinical material available at the Teaching Hospitals of the Faculty and from the experience of working in different departments of the Faculty and in the Faculty's field practice area in Bope-Poddala. The clinical attachments are arranged by the Dean's Office and fees are levied for the elective appointments.

### ***Eligibility***

Applicants must be bona-fide students of a medical school. Applications should be made through the Dean of that Medical School to the Dean of this Faculty and not to individual members of the Faculty, on the prescribed form. This form could be obtained from the Dean's Office or can be downloaded from the University of Ruhuna Web Site.

### ***Postings***

The students may apply for postings in any discipline. Postings are counted in weeks commencing on a Monday. The exact date for any particular posting should be supplied as admission depends on whether the Head of the Department concerned is able to provide necessary facilities and supervision.

### ***Fees***

50 US dollars per week. Fees could be paid on arrival in Sri Lanka.

### ***Definition of sponsorship for South East Asian Region***

Sponsorship means full support of the candidate for the attachment by a UN Agency, a bilateral aid agency such as USAID, C-Plan or by a national government.

### ***Immigration***

Immigration laws of Sri Lanka require from visitors evidence of the possession of sufficient funds for their maintenance during their stay in Sri Lanka.

## **GUIDELINES FOR ACTION TO BE TAKEN FOR STUDENT ABSENTEEISM, UNSATISFACTORY PERFORMANCE AND CONDUCT UNBECOMING DURING THE PROFESSORIAL APPOINTMENT.**

### ***SECTIONS***

1. Action for absenting for a period of time
2. Action for unsatisfactory performance
3. Action regarding students for conduct unbecoming
4. Reporting to Dean
5. Nature of extension of training (directives and punitive actions)
6. Confirmation of extension of training and informing students

### ***SECTION ONE: Action regarding students for Absenting for a period.***

- 1.1 Of over 4 weeks with or without a medical certificate:
  - 1.1.1 To repeat the entire appointment.
  - 1.1.2 Should not be allowed to appear for the End of Appointment Test scheduled with the group.
- 1.2 Between one and four weeks with or without medical certificate:
  - 1.2.1 Extension of Training for an equivalent period lost.
    - 1.2.1.1 May be allowed to appear for the End of Appointment Test as determined by the Head depending on the progress of work.
- 1.3 Less than one week without a medical certificate or prior approval:
  - 1.3.1 Extension of training for one week as stipulated by the Head.
  - 1.3.2 May be allowed to sit the End of Appointment Test.
- 1.4 Less than one week with a medical certificate or prior approved leave:
  - 1.4.1 May be excused if performance is satisfactory.
  - 1.4.2 Allowed to sit the End of Appointment Test

***SECTION TWO: Action regarding students for Unsatisfactory Performance***

- 2.1 The Head to take suitable action (such as Extension of Training) after discussion with other members of the department staff considering the seriousness of the lapse in relation to the objectives of the course.
- 2.2 The student should be allowed to take the End of Appointment Test on schedule.
- 2.3 The maximum extension should be eight weeks.

***SECTION THREE: Action regarding students for Conduct Unbecoming***

These acts shall be classed as major for suitable action.

- 3.1 Minor (such as late arrival or early departure, absenting during organized teaching activities, not performing allotted tasks etc.)
  - 3.1.1 Head to take appropriate action considering the nature of the offence. A warning may be given in the first instance prior to considering any Extension of Training.
- 3.2 Major (disruptive behavior, copying, unethical behavior, dishonesty, being under influence of liquor etc.)
  - 3.2.1 Head or Senior Teacher to take immediate suitable action pending formal inquiry.
  - 3.2.2. Should be reported to the Dean for formal inquiry and disciplinary action.
  - 3.2.3 Any punishments given by Senior Teachers to be reported to the Head.

***SECTION FOUR: Reporting to Dean***

Head to report to the Dean in the following instances:

- 4.1 Major offences
- 4.2 Extension of training beyond a period when the student is unable to sit the scheduled Final MBBS.

4.3 For periods of extension beyond two weeks.

***SECTION FIVE: Nature of Extension of training***

5.1 For period of four weeks and over

5.1.1 The student should fulfill this requirement during a formally arranged appointment by the Clinical Coordinator. The student should follow all aspects of training.

5.1.2 Head to inform the Clinical Coordinator for Extension of Training over four weeks to include student(s) in the group.

5.2 For period of less than four weeks

The student should fulfill this requirement during the available time in concurrence with the Head. The Head to determine the nature of work to be carried out during this period.

***SECTION SIX: Confirmation of Extension of Training and informing students***

6.1 All decisions regarding extension of training should be discussed and approved at a departmental meeting.

6.2 The student concerned should preferably be given a letter stating the reason for extension of training and the tasks that should be fulfilled during this period.

## 14. SRI LANKA MEDICAL COUNCIL SUBJECT BENCHMARK STATEMENT IN MEDICINE

### 1. Introduction

- |                        |  |
|------------------------|--|
| Scope of SBS           | <p>1. Subject benchmarking is an essential component of quality assurance in the university system. This Subject Benchmark Statement (SBS) in Medicine provides guidelines and an academic reference point for courses leading to the award of medical degrees in Sri Lanka. It describes the characteristics of a graduate in medicine, which will enable him to function effectively, initially as an intern house officer, and on satisfactory completion of internship, as a basic doctor providing independent primary care, or as a medical officer in state or private sector institutions, or as a trainee in a postgraduate programme leading to further specialisation (i.e., general professional practice). The SBS is meant to be used as a guideline and is not meant to be prescriptive.</p>  |
| Authors                | <p>2. This SBS has been prepared on the authority of the University Grants Commission by a group of senior medical teachers representing all the Faculties of Medicine in Sri Lanka, in consultation with representatives from the Sri Lanka Medical Council (SLMC). Similar benchmark statements are being prepared in respect of other subjects (courses) leading to the award of a degree within the Sri Lankan university system.</p>  |
| Degrees covered by SBS | <p>3. This statement is concerned with professional degree courses leading to <b>award of the M.B.B.S. (Bachelor of Medicine &amp; Bachelor of Surgery) degree. This is the undergraduate degree in Medicine awarded by all the Faculties of Medicine in Sri Lanka. All universities award subject distinctions and classes in different parts of the course, but terminology may differ.</b> Faculties of Medicine are encouraged to develop their own innovative approaches in designing and delivering their courses within the broad framework described here.</p>   |
| Role of SLMC           | <p>4. The Medical Ordinance (Chapter 105) of 1988 empowers the SLMC to formulate regulations for the maintenance of minimum standards of medical education including standards relating to courses of study, examinations, staff, equipment, accommodation, training and other facilities at the universities and other institutions which grant or confer any qualification which entitles a person to obtain registration under the Ordinance. The Council has appointed an Education Committee, which advises the Council on such matters and visits the medical faculties of the universities to assess their standards. In the year 2000, on the advice of its Education Committee in consultation with the Sri Lankan medical faculties, and on advice from the World Health Organization, the Council specified standards for medical schools</p> |

seeking its accreditation. This SBS will complement the SLMC document as another external reference point for courses leading to the MBBS degree. The SLMC recognizes courses of study leading to a medical degree with a minimum duration of four years and nine months, following which graduates are provisionally registered to undertake a period of internship of twelve months, in specified specialties in medicine, in recognized hospitals. On successful completion of internship, they are qualified to obtain full registration to practise.

5. At present the MBBS degree is awarded on passing the Final MBBS examination. However, in the future, with the concurrence of the SLMC, all medical faculties, and the Ministry of Health, it may be awarded only after satisfactory completion of internship.
6. None of the Faculties provide an opportunity for an intercalated degree by coursework or research, at present. Some faculties may decide to introduce this option in the future. However, this should not in any way compromise the duration or quality of the training leading to the MBBS degree. At least one year of additional study or research would be required for award of an intercalated degree.
7. Very few options are available at present to undergraduates who are unable or unwilling to complete the MBBS course. The University of Jaffna offers a Bachelor of Medical Sciences degree to those who have completed the 3<sup>rd</sup> MBBS examination and an additional term of project work. The University of Kelaniya offers a Diploma in Health Sciences to those who have satisfactorily completed certain specified courses but are unable to pass the Final MBBS examination within ten years. The University of Sri Jayawardenepura provides the opportunity for students who have completed the pre-clinical stage of the course, the option of changing to a B.Sc. course in Human Biology, provided that they have fulfilled certain minimum academic criteria. It is desirable for all Faculties of Medicine to develop such 'fall back' options for students who are unable or unwilling to complete the MBBS course. However, such qualifications are not equivalent to the professional degree of MBBS and will not entitle them to register with the SLMC as a medical practitioner.
8. The medical course leads to a professional degree where the core curriculum is compulsory. However, opportunities for student choice should be encouraged through periods of elective study.

Internship

Intercalated  
degrees

Fall-back  
qualifications

Electives

9. Medical faculty admissions The undergraduate medical course should consist of least five academic years. Entry qualifications should match the high academic standards which are maintained throughout the medical degree courses. At present the entry criteria are determined by the University Grants Commission. However, these criteria should be reviewed periodically in consultation with the medical faculties.
10. Professional development A graduate is entitled to independent practice after successful completion of one year's internship and full registration with the SLMC. Continuing professional development is essential for all graduates regardless of specialisation. If they wish to specialise, graduates will have to undertake further study in order to achieve the final professional status in their chosen field.
11. Extended faculty Medicine is characterized by the need for students to acquire not only knowledge and understanding but also clinical skills and appropriate attitudes. Professional standards are of great importance as is the ability to work together with other healthcare professionals. The acquisition of clinical skills involves access to patients under the supervision of clinical teachers, usually medical practitioners, in state hospitals and in the community. While universities are responsible for the core organization and assessment of training programmes in medical education, the clinical training is arranged and provided with the active participation, guidance and co-operation of those specialist clinicians that constitute the extended faculty.
12. Curriculum structure Undergraduate medical training provides an academic education in the basic and clinical sciences, behavioural sciences, community health and medical jurisprudence. The training also prepares undergraduates for professional practice as doctors. The course provides the undergraduate with intellectual skills such as analysis and reflection, problem solving and clinical reasoning, and has vocational, ethical and legal components. Medical schools in Sri Lanka have pre-clinical, para-clinical and clinical components in their MBBS courses. All faculties have a separate unit dealing in medical education. In keeping with global and regional trends, elements of vertical and horizontal integration amongst subjects have been introduced to varying degrees by all faculties. This has generated teaching in modules and emphasis is now on problem-oriented learning. Aspects of behavioural sciences, ethics, community care and research are also given increasing importance.
13. Curriculum content The medical course consists of a core curriculum which provides the essential knowledge, understanding, clinical skills and professional attitudes which are required by any medical graduate in order that he may practise as a basic doctor. In addition, the curriculum should be designed in such a way that undergraduates can develop competencies in English and Information Technology so that they are able to develop professionally. Assessment strategies and methods should ensure that the knowledge, understanding, skills and attitudes set out in the curriculum are sufficiently covered. Clinical competencies should be rigorously assessed so as to identify those who are not yet fit for practice.

14. Graduates should be prepared to approach medical practice:  
with the appropriate intellectual skills of enquiry, clinical reasoning, critical thinking and decision making;  
possessing sufficient knowledge of the basic and clinical sciences, and an understanding of the underlying principles of scientific method;  
with developed clinical, interpersonal and practical skills;  
understanding and accepting their professional, ethical and legal responsibilities, and their limitations.
- Professional skills

## **2. Professional values, attitudes, behaviour and ethics**

1. A medical degree is a vocational qualification as well as an academic award. As such, it must prepare graduates for professional activities across widely differing fields. In particular, graduates must possess all the professional skills and attributes necessary to function as an intern house officer.
2. Graduates must adhere to the professional standards defined by the SLMC.
3. Graduates must:
  - a. be aware of the importance of the doctor patient relationship in all aspects of patient care;
  - b. adopt an empathic and holistic approach to patients and the problems they present with;
  - c. respect patient autonomy and involve patients, or where appropriate, relatives or carers as partners in therapeutic and management decisions;
  - d. be aware of and respect different cultures, values, views and beliefs;
  - e. be aware of the use of alternative medical practices, and be sympathetic and understanding if patients choose to use these practices;
  - f. remain non-judgemental in all aspects of their work and avoid stigmatizing any category of patient;
  - g. understand and engage in reflective practice, audit and appraisal of their own work, as well as that of others.
4. Graduates should demonstrate their ability to work effectively within a team by:
  - a. practising in a manner that promotes effective inter-professional activity, including shared learning;
  - b. working within the limits of their responsibility and capability;
  - c. making decisions in partnership with colleagues and patients;
  - d. giving leadership.

5. Graduates should be able to:
  - a. prioritise the care of ill patients;
  - b. prioritise their time with regard to duties and responsibilities;
  - c. maintain complete and effective medical records;
  - d. keep up to date with current medical practice.
  
6. Graduates need to apply ethical and legal knowledge to their practice, particularly in:
  - a. applying the principles of confidentiality, consent, honesty and integrity;
  - b. dealing effectively with complaints about their own practice or behaviour or that of colleagues;
  - c. being aware of and complying with legal and professional responsibilities, with respect to the issue of medical certificates, notification of infectious diseases, death and dying, drug prescribing, mental health, physical and sexual abuse of children and adults and abortion;
  - d. considering the rights of patients.
  
7. Outcomes for graduates' personal development include:
  - a. self-awareness and reflection in evaluating their performance and personal capability and recognizing the limits of their competence;
  - b. the ability to manage their learning with respect to continuing professional development;
  - c. recognizing the pressures on themselves and colleagues created by a busy professional career, and being aware of important issues in self-care, eg stress reduction, avoidance of unhealthy practices such as alcohol misuse, substance abuse and self-medication.

### **3. Scientific foundation of medicine**

1. The primary concern of medicine is to promote good health. In order to achieve this it is important to have a knowledge of the aetiology, diagnosis, management (treatment, rehabilitation, supportive and palliative care), prognosis, prevention of diseases and injury and promotion of health. The impact of such conditions on patients, their families, and on the community should be understood.
  
2. Graduates should demonstrate knowledge and understanding of:
  - a. the normal structure and function of the human body, the different organ systems and their inter-relationships;
  - b. changes occurring during the life cycle;

- c. regulation of body functions, homeostasis and biochemical aspects;
- d. the pathogenesis and pathology, risk factors, and natural history of diseases;
- e. signs and symptoms of diseases, investigation and diagnosis, differential diagnosis, non-pharmacological and pharmacological management of diseases;
- f. management of emergencies;
- g. therapeutics, adverse reactions of therapy, curative and palliative therapy;
- h. disability, rehabilitation and handicap;
- i. the importance of record keeping;
- j. other systems of medicine and their limitations.
- k. behavioural sciences and relationships to medical anthropology, sociology, basic psychology;
- l. the educational principles underlying learning and continuing education;
- m. ethics and legal aspects in relation to practice of medicine in Sri Lanka;
- n. the role of the family and extended family, inter-relationships and interactions with the society;
- o. cultural and ethnic differences about perception and response to illnesses;
- p. communication with the patients, families, colleagues and the society.

#### **4. Communication skills**

1. In relation to interpersonal skills, the graduate should be competent in the following areas of communication:
  - a. listening to patients, relatives, carers and other healthcare professionals;
  - b. explaining and providing adequate information to patients and carers;
  
  - a. mediating and negotiating with patients, carers and colleagues;
  - b. handling complaints appropriately;
  - c. liaising with other members of the healthcare team.
  
2. It is desirable that graduates are able to communicate in the languages commonly used in Sri Lanka: both national languages and English.

#### **5. Clinical skills**

All medical graduates should be competent in core clinical, interpersonal, practical and technical skills relevant to general professional practice in Sri Lanka. In relation to all aspects of clinical practice, graduates should demonstrate appropriate professional behaviours, safeguarding confidentiality, understanding the need for informed consent, recognising their own limitations. They should be prepared to seek help from more experienced health care professionals when necessary.

1. In relation to clinical skills, the graduate should be able to:
  - a. take a history which is patient-centred, sensitive, structured and relevant;
  - b. undertake a relevant and systematic physical and mental state examination in a sensitive manner, appropriate for age, gender, culture and clinical condition;
  - c. define problems and formulate a diagnosis or differential diagnosis based on history and examination;
  - d. select appropriate investigations and interpret their results;
  - e. make clinical decisions based upon evidence and findings;
  - f. plan patient management, recognising the:
    - importance of discussing the management plan with the patient, or if appropriate, a relative or carer;
    - effect on the patient;
    - relevance of age and social circumstances;
    - requirements for informed consent;
    - need for team work;
    - need for appropriate referrals;
    - economic constraints with regard to individuals as well as in the healthcare system in a developing country.
  - g. carry out those practical and technical procedures, including investigative and therapeutic measures, which are relevant to general professional practice in Sri Lanka, taking into account risks and hazards.
2. Graduates should be able to:
  - a. recognise emergency situations which require immediate action and be able to carry out the initial treatment of such conditions.
  - b. recognise conditions which require early or immediate intervention by the healthcare team, and under appropriate supervision, undertake tasks to initiate and be involved in the care of acutely ill patients.
  - c. evaluate the health needs of patients with chronic illness and disability, initiate relevant medical investigations and interventions, and plan management including referral.
  - d. give appropriate input to the multi-disciplinary and multi-professional teams involved in the management of patients in need of rehabilitation or palliative care, including care of the dying.

## **6. Population health and health systems**

It is important to recognize the interactions between the patient, family, society and environment.

1. Graduates should demonstrate understanding of:
  - a. demography and vital statistics;
  - b. basic and applied epidemiology;
  - c. epidemiological methods;
  - d. health promotion and prevention;
  - e. needs assessment and healthcare planning;
  - f. healthcare management and economics;
  - g. the organisation of curative and preventive health services in the country;
  - h. healthcare provision in disaster situations;
  - i. international health.
2. The graduate should be able to give advice on health promotion and disease prevention, including advice on promoting
  - a. a healthy environment and safe food;
  - a. the quality of life;
  - b. quality of healthcare provision;
  - c. community care, particularly with regard to mental health, geriatric care, maternal and child health, and care of the disabled.
3. The graduate should possess the knowledge, attitudes and skills necessary to deliver primary care.
4. The graduate should be able to liaise with different sectors of the health and social care systems and be able to manage those components relevant to the care of the patient.

## **7. Management of information**

Medical graduates should possess a range of generic (transferable) skills in relation to management of information, which are expected of all university graduates. Thus the graduate should be able to:

- a. display proficiency in the English language necessary for their professional activities;
- b. retrieve and manage information of all types, including electronic information;
- c. present information clearly in written, electronic and oral forms, and communicate ideas and arguments effectively;
- d. produce and maintain contemporaneous, legible, accurate and pertinent records for patients under their care.

## **8. Critical thinking and research**

The intellectual attributes possessed by a graduate of medicine in Sri Lanka should include:

1. the ability to critically evaluate information and use reasoning and personal judgement in:
  - a. identifying and prioritising clinical problems;
  - b. arriving at a diagnostic hypothesis;
  - c. drawing up a management plan;
  - d. planning preventive and health promotive action.
  
2. understanding and appreciation of the scientific method and its limitations in:
  - a. formulating relevant research questions or hypotheses;
  - b. understanding of basic statistical concepts and their application in clinical practice and research;
  - c. use of appropriate methods in collecting, analysing and interpreting data;
  - d. critical reading of the medical literature and determining its relevance to practice within one's own working environment.
  
3. coping with uncertainty and error in decision making by:
  - a. seeking out information when needed;
  - b. continuous self-audit and reflective practice;
  - c. acceptance of peer review.
  
4. Creativity, resourcefulness and adaptability in:
  - a. Professional development;
  - b. Clinical practice;
  - c. Institutional and infrastructural development;
  - d. research

February 2004