

NEONATOLOGY

SEPTICO

Residency Training Program Leading to the degree of

MD Neonatology (MD)

SHAHEED ZULFIQAR ALI BHUTTO MEDICAL UNIVERSITY ISLAMABAD

CAL

CURRICULUM

DAR

AL

ERS

MD Neonatology

EDICAL

CURRICULUM DEVELOPMENT COMMITTEE

Curriculum Development Committee

The Curriculum is developed by the following Committee:

• Dr Syeda Shireen Gul

Associate Professor Department of Neonatology Children Hospital, PIMS, SZABMU

• Dr Sadia Riaz

Associate Professor Department of Neonatology Children Hospital, PIMS, SZABMU

Table of Contents

General Information and Program Goals5Course Description5Introduction9Rationale10Need of Program10Purpose of Training10Context of Training10Duration of Training11Aims and Objectives11Aims of Training11Learning Objectives11Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology28Learning Resources30	Road Map of MD Neonatology (A Brief Summary)	1
Introduction9Rationale10Need of Program10Purpose of Training10Context of Training10Duration of Training11Aims and Objectives11Aims of Training11Learning Objectives11Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology28	General Information and Program Goals	5
Rationale10Need of Program10Purpose of Training10Context of Training10Duration of Training11Aims and Objectives11Aims of Training11Learning Objectives11Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology28	Course Description	5
Need of Program10Purpose of Training10Context of Training10Duration of Training11Aims and Objectives11Aims of Training11Learning Objectives11Entry Criteria13Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology28	Introduction	9
Purpose of Training.10Context of Training.10Duration of Training.11Aims and Objectives.11Aims of Training.11Learning Objectives.11Entry Criteria.13Eligibility to Apply for MD Neonatology.13Content of Learning.14Allied Specialties.20Research.20Assessment.21Formative Assessment.21Summative Assessment.21Record of Clinical Cases.22'Table of Specification.23TOS for Midterm Assessment (MTA) MD Neonatology.28	Rationale	10
Context of Training.10Duration of Training.11Aims and Objectives.11Aims of Training.11Learning Objectives.11Entry Criteria.13Eligibility to Apply for MD Neonatology.13Content of Learning.14Allied Specialties.20Research.20Assessment.21Formative Assessment.21Summative Assessment.21Record of Clinical Cases.22'Table of Specification.23TOS for Midterm Assessment (MTA) MD Neonatology.28	Need of Program	10
Duration of Training11Aims and Objectives11Aims of Training11Learning Objectives11Entry Criteria13Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Purpose of Training	10
Aims and Objectives11Aims of Training11Learning Objectives11Entry Criteria13Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Context of Training	10
Aims of Training.11Learning Objectives11Entry Criteria13Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Duration of Training	11
Learning Objectives11Entry Criteria13Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Aims and Objectives	11
Entry Criteria13Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Aims of Training	11
Eligibility to Apply for MD Neonatology13Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Learning Objectives	11
Content of Learning14Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Entry Criteria	13
Allied Specialties20Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Eligibility to Apply for MD Neonatology	13
Research20Assessment21Formative Assessment21Summative Assessment21Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Content of Learning	14
Assessment	Allied Specialties	20
Formative Assessment	Research	20
Summative Assessment	Assessment	21
Record of Clinical Cases22'Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Formative Assessment	21
Table of Specification23TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology28	Summative Assessment	21
TOS for Midterm Assessment (MTA) MD Neonatology24TOS for Final/Exit Examination MD Neonatology		
TOS for Final/Exit Examination MD Neonatology28	Table of Specification	23
	TOS for Midterm Assessment (MTA) MD Neonatology	24
Learning Resources	TOS for Final/Exit Examination MD Neonatology	28
	Learning Resources	30

Road Map of MD Neonatology – A Brief Summary

GENERAL INFORMATION AND PROGRAM GOALS

University offers a 6 years MD Program in the field of MD Neonatology. This program intends to attract candidates having an interest in the practice of neonatal medicine. The curriculum focuses on formal teaching and practical training in the said field.

This MD program aims to train and equip the postgraduate residents with the knowledge and skills essential lead in the field of Neonatology. The candidates, upon graduation, will be expected to demonstrate a high level of expertise in the field of neonatal medicine with specific focus on primary care and inpatient management of the sick newborns with special needs.

COURSE DESCRIPTION

A total of 192 credit hours of instruction and supervised activities are distributed over a six years academic period.

This comprises approximately 2592 contact hours of instruction and approximately 1008 scheduled hours including formal didactic, clinical and research experiences.

ID	Title	Credit Hours
Neo-01	Normal Newborn Physiology and Principles of Care	4
Neo-02	Triage of the Sick Neonate	4
Neo-03	Extrauterine Maladaptation and Neonatal Resuscitation	3
Neo-04	Complications and Management of Prematurity/Low Birth Weight	4
Neo-05	Lung Mechanics in Diseased States and Ventilation Strategies	4
Neo-06	Introduction to Surfactant Therapy	3
Neo-07	Hemodynamic Assessment and Care of the Sick Neonate	4
Neo-08	Drug prescription and stewardship in the Neonatal ICU/Nursery	2
Neo-09	Introduction to Pediatrics and Continuum of Care/Pediatric Medicine Rotation	4
Total Credit Hours		32

FIRST YEAR MD

SECOND YEAR MD

	ID	Title	Credit	
--	----	-------	--------	--

		Hours
Neo- 01	Delivery Room Care of Sick Newborns/Perinatology Rotation 4	
Neo- 02	Invasive versus Noninvasive Ventilation Strategies in the Neonate 4	
Neo- 03	Congenital Heart Disease and Clinical Implications4	
Neo- 04	Neonatal Shock and Role of Inotropes 4	
Neo- 05	Diagnosis and Management of Neonatal Infections 4	
Neo- 06	Neonatal Jaundice: Diagnosis and Management 4	
Neo- 07	Pediatrics and Continuum of Clinical Care/Pediatric Medicine Rotation 4	
Neo-	Pre and Post-operative Care of the Neonate/Pediatric Surgery 4	
08	Rotation	
	Total Credit Hours	32
	MTA Examination by the University	

THIRD YEAR MD

ID	Title	Credit Hours
Neo-	Interpretation of Laboratory Data and Clinical Evidence	
01 Neo-	Bedside Neonatal Procedures: Indications and Methodology	4
02 Neo- 03	Prematurity and Principles of Kangroo Mother Care	2
03 Neo- 04	Neonatal Encephalopathy and Role of THerapeutic Cooling	3
04 Neo- 05	Ventilation and Integrated Care of the sick neonate	
05 Neo- 06	Management of Inborn Errors of Metabolism/Genetic Screening	
00 Neo- 07	Antenatal Consultation and Prenatal Diagnosis and Care	
Neo- 08	Pediatric Emergency Continuum of Care/ Pediatric Emergency and OPD Rotation	
Neo- 09	Community Pediatrics and Infectious Diseases/ Pediatric Isolation Ward Rotation	
Neo- 10	Research with emphasis on Evidence Based Medicine	2
	Total Credit Hours	32

FOURTH YEAR MD

ID	Title	Credit Hours
Neo- 01	Triage of the Sick neonate and	3
Neo- 02	Integration of Hierachichal Care of the Neonate	4
Neo- 03	Neonatal Imaging and Diagnostic Implications/Pediatric Radiology Rotation	4
Neo- 04	Bedside Neonatal Procedures and Point of Care Testing	
Neo- 05	Advanced Ventilation Strategies in the Sick Neonate	
Neo- 06	Pain Management in the Neonate	2
Neo- 07	Clinical Audit and Quality Assurance in the NICU 2	
Neo- 08	Didactic teaching and Mentorship of Evidence Based Care3	
Neo- 09	Antenatal Consultation and Prenatal Diagnosis and Care	3
Neo- 10	Research with emphasis on Clinical Outcomes	3
	Total Credit Hours	32

FIFTH YEAR MD

ID	Title	Credit Hours
Neo- 01	Clinical Supervision of Advanced Neonatal Care 5	
Neo- 02	Didactic Teaching and Mentorship of Evidence Based Neonatal Medicine4	
Neo- 03	Advanced bedside procedures and Point of Care testing of the Sick5Neonate5	
Neo- 04	Clinical Audit and Quality Assurance in the NICU 4	
Neo- 05	Antenatal Consultation and Prenatal Diagnosis and Care5	
Neo- 06	Ventilation and Integrated Care of the Sick Neonate	5
Neo- 06	Fulfillment of Roles and Responsibilities assigned by the Faculty for the overall functioning of the Residency Program	4
	Total Credit Hours	32

Note: While the MD Neonatology Program previously comprised 5 years in which fifth year was the final year of the training, an additional year has now been included following which the Residency Program has now become 6 years in duration

Accordingly, Residents enrolled in the 6 years Residency program, shall have additional mandatory internal and/or external rotations in Pediatric Specialties in the Fifth and/or Sixth year of training, as determined by the Supervisor and/or Department Faculty.

They shall function in the capacity of Chief Residents and be responsible for supervision of advanced clinical care in the neonatal units.

They shall also fulfill tasks as assigned by the Supervisor and/or the Department Faculty for the overall functioning of the Residency Program and the Neonatal Units.

For Residents enrolled in the 5 years MD Neonatology Residency Program, the fifth year shall be considered the final year of training. These residents shall follow the scheme of learning as described earlier.

EXIT EXAM

At the end of the duration of the Residency Program, an exit exam shall be conducted, the style and form of which shall be determined by the University from time to time.

REQUIREMENTS OF MD DEGREE FOR GRADUATE STUDENTS ENROLLED IN THE PROGRAM

- Fulfillment of University requirements for postgraduate study
- Six years of consecutive full time advanced study and clinical training
- Complete and approved master's thesis based on original research during the course of study in an area related to specialty, suitable for publication in a reputable Neonatology/Pediatrics/ Scientific journal.
- Must complete all didactic and clinical work in the required curriculum and satisfactorily pass all the University requirements.
- A minimum of 60% marks must be earned in all work/ examinations attempted in the master's program. A grade below this will require re-examination.

A complete roadmap forMS/MD/MDS can be seen on the University website at <u>www.szabmu.edu.pk</u>.

INTRODUCTION

The Residency Program of MD Neonatology is six years in duration and covers all aspects of Neonatal Care leading to the degree of MD Neonatology.

This curriculum has been designed on the basis of SPICES model which is indicative of the competencies required at varying levels of training within the specialty together with the knowledge, skills and attitudes achieved by the trainees in acquiring those competencies. The training has been based on the current thinking and requirements for

- Greater protection of the public interest in providing clear information as to the level of training achieved.
- Improved access to specialty training than general practitioners.
- Greater flexibility of training through the availability of multiple instructors.
- Producing a competent workforce with the appropriate skills and knowledge necessary to meet the varying levels of treatment complexity, as well as considering the relative need and demand of potential patients.
- Acquire the experience to carry out research projects, critically evaluate scientific publications, and communicate clinical and research papers in journals and conferences.

RATIONALE

Need of the Program

The training program has been developed keeping in view the unmet need of the community. Following needs have been identified through formal and informal discussion with various stakeholders.

- Deficiency of quality health care providers to the public especially in remote areas in the field of Neonatology
- Dearth of competent faculty in the field of Neonatology.
- Deficiency of state of the art training sites in the field of Neonatology.

PURPOSE OF TRAINING

The purpose of the curriculum is to guide the training of an individual to the core level of competence required to become a specialist and consultant.

CONTEXT OF TRAINING

To provide an organized educational program with guidance and supervision, a structured training program will be followed so that each trainee is exposed to different aspects of the subject and acquired special knowledge and skills as expected in the program. The training will provide a basis for the candidate to develop into a lifelong learner who is capable of self-reflection and self-directed learning. It will provide a basis for further ongoing development in the field.

DURATION OF TRAINIG

The program leading to MD in Neonatology will be of 6 years full time.

AIMS & OBJECTIVES

Aims of Training

The candidate should acquire and become proficient in the skills required for the practice of Neonatology with an emphasis on multidisciplinary treatment planning, disease prevention, diagnosis and provision of advanced treatment techniques for those clinical cases meriting specialist care.

The candidate should demonstrate attitudes necessary for the achievement of high standards of Neonatal practice both in relation to the needs of sick newborns and for his/her own personal development.

Learning Objectives

On completion of training, the trainee will be able to achieve following aptitudes.

Knowledge

- Demonstrate knowledge of clinical aspects of basic sciences as applied to Neonatal medicine.
- Demonstrate knowledge of the etiology, pathophysiology and clinical presentations of neonatal diseases.
- Demonstrate knowledge of the impact of systemic diseases on the health of neonates.
- Acquire knowledge and comprehend the principles of theory and practice of all the domains of neonatal practice.

Skills

- Take history and conduct clinical examination and investigations that allow collection of information needed to evaluate sick neonates.
- Determine the differential, provisional and definitive diagnosis by interpreting and correlating findings from the history, clinical & radiographic examination together with other diagnostic tests.
- Devise treatment plans specific to the needs of individual neonates. [1]
- Execute conventional and contemporary techniques of all the domains of Neonatal medicine.
- Demonstrate competency in teaching methods, use of information technology, appraisal and assessment techniques and development of appropriate learning methods for lifelong learning.
- Show evidence of ability to undertake research.

Attitudes [1]

• Demonstrate a professional and ethical approach to patient care.

- Demonstrate a professional attitude to all the members of the team.
- Demonstrate full and clear understanding of equality and diversity see legislation as it applies to the workplace and to professional practice.

ENTRY CRITERIA

Eligibility to apply for MD Neonatology

- Candidate must possess MBBS or equivalent degree and one year house job from PMC recognized Institution.
- Permanent valid registration with PM&DC.
- Declared successful in MD Part-I for University programs.
- In case of foreign candidate, a valid registration with Medical Council Epof the country of origin must be produced.
- [FP]Attested photo copies of the following documents must be attached with application form: [FP]
- Computerized National Identity Card (CNIC) [SFP]
- Domicile certificate **SEP**
- Matric/O Level, FSc/A Level, Certificates or equivalent [1]
- MBBS degree with detailed marks certificates of all professional exams **[17**]
- MBBS Attempts certificates of all professional exams[stp]
- NEB pass certificate (for foreign graduates)
- House Job certificates [1]
- PMC valid permanent registration certificate [1]
- MD Part-I passing certificate
- Experience Certificates (if any)
- Migration Certificate (To be produced at the time of admission) [1]
- Admission Procedure

Details of admission procedure is available on university website at <u>http://www.szabmu.edu.pk/admission/postgraduate-admission</u>

CONTENT OF LEARNING:

The program outline addresses both the knowledge needed in MD Neonatology and allied medical specialties in its scope. A minimum of six years of formal training through a graded system of education as specified will equip the trainee with knowledge, skill and attitude at its completion to be able to practice advanced Neonatal care competently.

FIRST YE	FIRST YEAR MD			
ID	Title	Details of Titles		
Neo-01	Normal Newborn	Complete neonatal examination, principles of early		
	Physiology and	essential newborn care and how these link to the		
	Principles of Care	physiology of the neonate		
Neo-02	Triage of the Sick	Detailed history and clinical assessment of the neonate		
	Neonate	according to a biopsychosocial profile to filter out the sick		
		neonate, and decide level of care accordingly		
Neo-03	Extrauterine	Understanding the concept of extrauterine maladaptation		
	Maladaptation and	in the pathophysiology of neonatal disease processes		
	Neonatal Resuscitation			
Neo-04	Complications and	Recognition of the various complications of prematurity		
	Management of	like Low Birth Weight, Birth Asphyxia, RDS, PDA, ROP,		
	Prematurity/Low Birth	IVH, NEC, Osteopenia of Prematurity, Apnea of		
	Weight	Prematurity, Anemia of Prematurity, Neonatal Jaundice,		
		and various Metabolic disorders, and subsequent		
		management of these		
Neo-05	Lung Mechanics in	Normal physiology and altered dynamics in disease states		
	Diseased States and	like RDS, Pneumonia, Meconium Aspiration, Transient		
	Ventilation Strategies	Tachypnea of Newborn, Bronchopulmonary Dysplasia,		
		Chronic Lung Disease; and individualized ventilation		
		strategies for each according to clinical and diagnostic		
No. 06		evidence.		
Neo-06	Introduction to	Knowing the various types of surfactants, and indications,		
No. 07	Surfactant Therapy	costs, dosing and methods of administration		
Neo-07	Hemodynamic Assessment and Care of	Recognition of early and late signs of compensated and		
	the Sick Neonate	decompensated Shock of various types, and its		
Neo-08		management Principles of stewardship of antibiotic sand/or		
1160-09	Drug prescription and stewardship in the	frequently used drugs in the Neonatal unit		
	Neonatal ICU/Nursery	nequentiy used drugs in the Neonatal unit		
Neo-09	Introduction to	Recognition and in-patient management of diseases		
1100-09	Pediatrics and	commonly manifesting in the Pediatric age group.		
	Continuum of	commonly mannesting in the retractic age group.		
	Care/Pediatric Medicine			
	Rotation			
	Rotation	1		

ID	Title	Details of Titles
Neo- 01	Delivery Room Care of Sick Newborns/Perinatology Rotation	Hands-on practice of the principles of early essential newborn care, and carrying out neonatal resuscitation of sick neonates successfully within the 'golden' minute
Neo- 02	Invasive versus Noninvasive Ventilation Strategies in the Neonate	Compare and contrast invasive versus non-invasive modes of ventilations, and applying these to suitable candidates
Neo- 03	Congenital Heart Disease and Clinical Implications	Reviewing the transition of fetal to neonatal circulation, screening for the presence of cyanotic versus acyanotic congenital heart disease on pulse oximetry and carefully performed neonatal examination, and managing these accordingly
Neo- 04	Neonatal Shock and Role of Inotropes	Hemodynamic assessment and early recognition of signs of compensated and decompensated shock, carrying out an algorithmic approach for shock management using carefully selected inotropes, and employing bedside echocardiography as an effective tool for shock management.
Neo- 05	Diagnosis and Management of Neonatal Infections	Recognizing early signs of neonatal sepsis, interpreting clinical and laboratory data for timely diagnosis, and effective management of neonatal sepsis using carefully selected antimicrobials. Here special emphasis should be laid upon the development of antimicrobial stewardship, giving sensitive antibiotics whenever sensitivity data is available, and when to discontinue antimicrobial use. Possibility of fungal sepsis in preterm neonates and immunocompromised or ventilated neonates must also be stressed upon.
Neo- 06	Neonatal Jaundice: Diagnosis and Management	Determining the etiology, progression, and complications of neonatal jaundice, with emphasis on recognizing the signs of kernicterus, and timely interventions like exchange transfusion to avoid or reverse these complications. Developing the skill to perform a successful exchange transfusion should be emphasized upon,
Neo- 07	Pediatrics and Continuum of Clinical Care/Pediatric Medicine Rotation	Recognition and in patient management of diseases commonly manifesting in the Pediatric age group
Neo- 08	Pre and Post-operative Care of the Neonate/Pediatric Surgery Rotation	Recognizing the special needs of surgical neonates and learning the principles of care of these neonates.
	Total Credit Hours MTA Examination by the University	32

THIRD YEAR MD

ID	Title	Details of Titles
Neo-	Interpretation of Laboratory	Correct correlation of laboratory investigations and
01	Data and Clinical Evidence	clinical assessment for optimal neonatal care.
Neo-	Bedside Neonatal	Performing peripheral IV cannulation, peripheral
02	Procedures: Indications and	arterial blood sampling, PICC line insertion, Umblical
	Methodology	catheterization, Lumbar Puncture, Ventricular Tap,
		Ascitic Tap, Suprapubic Aspiration, Abscess Incision and
		Drainage, Limb immobilization, Chest drain insertion,
		Needle Thoracostomy, NG and Foley's insertion.
Neo-	Prematurity and Principles	Understanding and learning the principles of Kangroo
03	of Kangroo Mother Care	Mother Care (KMC), and how these apply to premature
		neonates. Here, weight assessment of babies on KMC
		must be performed daily and any stressors must be
		identified and removed.
Neo-	Neonatal Encephalopathy	Categorize asphyxiated neonates according to Sarnat
04	and Role of THerapeutic	staging to predict prognosis and clinical outcome.
	Cooling	Recognize subtle seizures, investigate cause and
		institute appropriate management.
Neo-	Ventilation and Integrated	Compare and contrast invasive versus non-invasive
05	Care of the sick neonate	modes of ventilations, and applying these to suitable
		candidates. Integrate clinical findings and laboratory
		evidence to formulate suitable differential diagnosis.
Neo-	Management of Inborn	Recognizing the signs or possibility of inborn errors of
06	Errors of	metabolism in the sick neonate, and advise suitable
	Metabolism/Genetic	workup to delineate etiology. Involve attendants and
	Screening	family of the neonate in genetic counseling and
N		screening where appropriate.
Neo-	Antenatal Consultation and	Reviewing antenatal charts and abnormal scan findings
07	Prenatal Diagnosis and Care	to accurately predict prognosis and advise workup or
Neo-	Dodiatric Emorgon gy	level of care required in the postnatal period.
Neo- 08	Pediatric Emergency	Recognition of common pediatric ailments presenting to
08	Continuum of Care/ Pediatric Emergency and	the outpatient clinics and pediatric emergency unit, and managing these effectively, and responsibly.
	OPD Rotation	managing mese enectively, and responsibly.
	OF D Rotation	
Neo-	Community Pediatrics and	Introduction to principles of care of pediatric infectious
09	Infectious Diseases/	diseases and management of these.
	Pediatric Isolation Ward	
	Rotation	
Neo-	Research with emphasis on	Generating clinical evidence through indigenous
10	Evidence Based Medicine	research to help improve neaonatal care.
	Total Credit Hours	32
10		

FOURTH YEAR MD

ID	Title	Details of Titles
XI		

Neo- 01	Triage of the Sick neonate	Detailed history and clinical assessment of the neonate according to a biopsychosocial profile to filter out the sick neonate, and decide level of care accordingly
Neo- 02	Integration of Hierachichal Care of the Neonate	Recognizing the importance of multidisciplinary team in the care of a sick neonate, and the perpetual need to 'step-up' or 'step down' clinical care of neonates. Here special emphasis must be laid upon shortest appropriate duration of stay in the NICU and criteria for discharge.
Neo- 03	Neonatal Imaging and Diagnostic Implications/Pediatric Radiology Rotation	Performing focused ultrasound of the neonatal brain and recognizing common pathologies like intraventricular /parenchymal hemorrhage, hydrocephalus, infectious etiology, brain malformation. Also learning to recognize other common radiological diagnoses afflicting the neonate.
Neo- 04	Bedside Neonatal Procedures and Point of Care Testing	Performing peripheral IV cannulation, peripheral arterial blood sampling, PICC line insertion, Umblical catheterization, Lumbar Puncture, Ventricular Tap, Ascitic Tap, Suprapubic Aspiration, Abscess Incision and Drainage, Limb immobilization, Chest drain insertion, Needle Thoracostomy, NG and Foley's insertion.
Neo- 05	Advanced Ventilation Strategies and Integrated Clinical Care in the Sick Neonate	Compare and contrast invasive versus non-invasive modes of ventilations, and applying these to suitable candidates. Integrate clinical findings and laboratory evidence to formulate suitable differential diagnosis.
Neo-	Pain Management in the	Applying pharmacological and non-pharmacological
06 Neo- 07	Neonate Clinical Audit and Quality Assurance in the NICU	interventions for pain relief in neonates. Participating as an effective member of a clinical audit team in neonatal units, and carrying out regular audits, and removing anomalies of care in a timely fashion
Neo- 08	Didactic teaching and Mentorship of Evidence Based Care	Teaching of students, junior residents and nurses according to a structured curriculum, with emphasis on neonates currently admitted to neonatal units.
Neo- 09	Antenatal Consultation and Prenatal Diagnosis and Care	Reviewing antenatal charts and abnormal scan findings to accurately predict prognosis and advise workup or level of care required in the postnatal period.
Neo- 10	Research with emphasis on Clinical Outcomes	Enrollment in research of choice and developing skills to critically appraise literature for translation of evidence to neonatal practice.
	Total Credit Hours	32

FIFTH YEAR MD

Neo- Clinical Supervision of 01 Advanced Neonatal Care	ID	Title	Details of Titles
	Neo-	Clinical Supervision of	
	01	Advanced Neonatal Care	
Neo- Didactic Teaching and Teaching of students, junior residents and nurses	Neo-	Didactic Teaching and	Teaching of students, junior residents and nurses

02	Mentorship of Evidence Based Neonatal Medicine	according to a structured curriculum, with emphasis on neonates currently admitted to neonatal units.
Neo-	Advanced bedside	Performing peripheral IV cannulation, peripheral
03	procedures and Point of Care	arterial blood sampling, PICC line insertion, Umblical
	testing of the Sick Neonate	catheterization, Lumbar Puncture, Ventricular Tap,
		Ascitic Tap, Suprapubic Aspiration, Abscess Incision
		and Drainage, Limb immobilization, Chest drain
		insertion, Needle Thoracostomy, NG and Foley's
		insertion.
Neo-	Clinical Audit and Quality	Participating as an effective member of a clinical audit
04	Assurance in the NICU	team in neonatal units, and carrying out regular audits,
		and removing anomalies of care in a timely fashion
Neo-	Antenatal Consultation and	Reviewing antenatal charts and abnormal scan findings
05	Prenatal Diagnosis and Care	to accurately predict prognosis and advise workup or
		level of care required in the postnatal period.
Neo-	Ventilation and Integrated	Compare and contrast invasive versus non-invasive
06	Care of the Sick Neonate	modes of ventilations, and applying these to suitable
		candidates. Integrate clinical findings and laboratory
		evidence to formulate suitable differential diagnosis.
Neo-	Fulfillment of Roles and	Be a dynamic team member and fully participate in the
06	Responsibilities assigned by	running of the Neoanatology Department.
	the Faculty for the overall	
	functioning of the Residency	
	Program	22
	Total Credit Hours	32

ALLIED SPECIALTIES

Trainee will be rotating in the following department for the clear understanding of the basic concepts. Mandatory rotations for MD Neonatology will be as follows:

- Department of Pediatric Medicine: 6 months
- Outpatient Department and Pediatric ER: 3 months
- Department of Pediatric Infectious Diseases: 3 months
- Department of Pediatric Surgery: 3 months
- Department of Perinatology: 3 months
- Department of Pediatric Radiology: 2 months
- Department of Pediatric Cardiology: 2 months

RESEARCH

The resident would be required to undertake a research project and to present the result for examination in the form of a thesis.

The resident would be encouraged to present and publish the result of the project in referred journals

The guideline for synopsis and thesis writing is available on the university website at www.szabmu.edu.pk

ASSESSMENT

Assessment of trainees will cover the cognitive, psychomotor and affective domains. It will take two forms :

- Formative Assessment
- Summative Assessment

Formative Assessment

- It is the continuous assessment of progress and competence.
- It will be conducted through workplace based assessment throughout the trainig
- Assessment will be undertaken by a range of assessors who will be assessing for a range of procedures appropriate to the stage of training.

Formative assessment will include [1]

- Directly observed practical skills (DOPS)
- Case based discussion (CbD)
- Mini clinical examination exercises (Mini-CEX) [SEP]
- Multiple source feedback (MSF) [SEP

Summative Assessment

Summative assessment will be held twice

Mid Term Assessment (MTA) Examination [SEP]

• Final/Exit Examination

The level of performance required for passing the exam will depend on the knowledge and skills necessary for acceptable performance and will not be adjusted to regulate the number or proportion of persons passing the examination. The pass point will be determined by careful analysis and judgment of acceptable performance.

Record of Clinical Cases

The trainees will be required to keep a record of the allocated clinical work in a log book. It will be the responsibility of trainee to keep the log book up to date with the signature of the faculty certifying the work.

TABLE OF SPECIFICATION

Table of Specification for Mid Term Assessment (MTA) and Final (Exit) examination is here as under:

FOR MTA: Paper A: Pediatric Medicine , MCQ's only, 50 marks

Paper B: Neonatology, MCQ's only, 50 marks

For FINAL (Exit) Exam

Theory Paper: Neonatology, MCQ"s only, 100 marks

Long cases: 30 marks

Short cases : 40 marks

Viva Voce: 30 marks

TOS FOR MTA EXAM

First Year MD

ID	Title	Knowledge	Skill	Attitude	%	MCQ's
Neo-01	Normal Newborn Physiology and Principles of Care	2	1	1	4	4
Neo-02	Triage of the Sick Neonate	2	2	0	4	4
Neo-03	Extrauterine Maladaptation and Neonatal Resuscitation	2	1	1	4	4
Neo-04	Complications and Management of Prematurity/Low Birth Weight	6	2	2	10	10
Neo-05	Lung Mechanics in Diseased States and Ventilation Strategies	3	1	1	5	5
Neo-06	Introduction to Surfactant Therapy	2	2	1	5	5
Neo-07	Hemodynamic Assessment and Care of the Sick Neonate	5	3	2	10	10
Neo-08	Drug prescription and stewardship in the Neonatal ICU/Nursery	2	1	2	5	5
Neo-09	Introduction to Pediatrics and Continuum of Care/Pediatric Medicine Rotation	8	4	3	15	15

Second Year MD

ID	Title	Knowledge	Skill	Attitude	%	MCQ;s
Neo-	Delivery Room Care of Sick	1	2	0	3	3
01	Newborns/Perinatology Rotation					
Neo-	Invasive versus Noninvasive Ventilation	3	1	1	5	5
02	Strategies in the Neonate					
Neo-	Congenital Heart Disease and Clinical	3	1	1	5	5
03	Implications					
Neo-	Neonatal Shock and Role of Inotropes	3	1	0	4	4
04						
Neo-	Diagnosis and Management of Neonatal	3	1	1	5	5
05	Infections					
Neo-	Neonatal Jaundice: Diagnosis and	2	1	0	3	3
06	Management					
Neo-	Pediatrics and Continuum of Clinical	5	3	2	10	10
07	Care/Pediatric Medicine Rotation					
Neo-	Pre and Post-operative Care of the	1	1	1	3	3
08	Neonate/Pediatric Surgery Rotation					

TOS for Final (Exit) EXAM

Final Examination (After completion of 6 years)

The student shall submit :

- Completion of Training Certificate
- Log Book
- Mandatory Workshop attendance
- Thesis on research topic approved by supervisor

through the Dean to the Controller of Examination.

If the thesis is not approved by the supervisor, application for extension may be recommended by supervisor through Registrar to the AS&RB. The final examination of major subject, thesis evaluation and viva voce examination will be conducted by board of Six (06) examiners in major subjects. The candidate will be examined in major subject and thesis as under: supervisor will not be paper setter /Examiner of his/her candidate as per PMDC regulation 2001.

FINAL (EXIT) EXAM

Theory Paper	100 MARKS
Viva Voce/Practical	100 MARKS
A) LONG CASE (ONE)	30 MARKS
B) SHORT CASE (FOUR)	40 MARKS
C) VIVA VOCE	30 MARKS

TOS FOR THEORY PAPER 1 AND 2 FINAL (EXIT) EXAM

THIRD YEAR MD

ID	Title	Knowledge	Skill	Attitude	%	MCQ's
Neo-	Interpretation of Laboratory Data and	3	2	0	5	5
01	Clinical Evidence					
Neo-	Bedside Neonatal Procedures: Indications	2	2	0	4	4
02	and Methodology					
Neo-	Prematurity and Principles of Kangroo	1	1	0	2	2
03	Mother Care					
Neo-	Neonatal Encephalopathy and Role of	2	1	1	4	4
04	THerapeutic Cooling					
Neo-	Ventilation and Integrated Care of the sick	4	1	0	5	5
05	neonate					
Neo-	Management of Inborn Errors of	3	0	0	3	3
06	Metabolism/Genetic Screening					
Neo-	Antenatal Consultation and Prenatal	1	1	1	3	3
07	Diagnosis and Care					
Neo-	Pediatric Emergency Continuum of Care/	1	1	1	3	3
08	Pediatric Emergency and OPD Rotation					
Neo-	Community Pediatrics and Infectious	3	2	0	5	5
09	Diseases/ Pediatric Isolation Ward Rotation					
Neo-	Research with emphasis on Evidence Based	1	0	1		2
10	Medicine					
	Total					36

FOURTH YEAR MD

ID	Title	Knowledge	Skill	Attitude	%	MCQ's
Neo-	Triage of the Sick neonate and	2	2	1	5	5
01						
Neo-	Integration of Hierachichal	2	1	0	2	3
02	Care of the Neonate					
Neo-	Neonatal Imaging and	2	2	0	2	4
03	Diagnostic					
	Implications/Pediatric					
	Radiology Rotation					
Neo-	Bedside Neonatal Procedures	2	1	1	4	4
04	and Point of Care Testing					
Neo-	Advanced Ventilation	3	1	0	4	4
05	Strategies in the Sick Neonate					
Neo-	Pain Management in the	2	0	1	3	3
06	Neonate					
Neo-	Clinical Audit and Quality	2	1	1	4	4
07	Assurance in the NICU					
Neo-	Didactic teaching and	2	1	1	4	4
08	Mentorship of Evidence Based					
	Care					

Neo-	Antenatal Consultation and	1	1	1	3	3
09	Prenatal Diagnosis and Care					
Neo-	Research with emphasis on	1	1	0	2	2
10	Clinical Outcomes					
	Total					36

FIFTH YEAR MD

ID	Title	Knowledge	Skill	Attitude	%	MCQ's
Neo-	Clinical Supervision and	5	1	1	7	7
01	Advanced Neonatal Care					
Neo-	Didactic Teaching and	2	1	1	4	4
02	Mentorship of Evidence Based					
	Neonatal Medicine					
Neo-	Advanced bedside procedures	2	2	1	5	5
03	and Point of Care testing of the					
	Sick Neonate					
Neo-	Clinical Audit and Quality	1	1	1	3	3
04	Assurance in the NICU					
Neo-	Antenatal Consultation and	1	1	0	2	2
05	Prenatal Diagnosis and Care					
Neo-	Ventilation and Integrated	4	2	1	7	7
06	Care of the Sick Neonate					
Neo-	Fulfillment of Roles and	0	0	0	0	0
06	Responsibilities assigned by					
	the Faculty for the overall					
	functioning of the Residency					
	Program					
	Total					28

LEARNING RESOURCES

List of Essential Readings :

Latest edition of the all of the following books are recommended:

- 1) Neonatology by Tricia Lacy Gomella
- 2) Essential of Neonatal Medicine by Khalid N Haque/Talal Waqar
- 3) Protocols of Neonahtology by Khawaja Ahmed Irfan WAheed