SYLLABUS OF MD PSYCHIATRY

OBJECTIVES

1) Therapeutic:
   a) To examine, diagnose and treat psychiatric disorders.
   b) Consultation – Liason psychiatry in general hospital.

2) Preventive and Promotive
   a. Prevention of relapses and complication of psychiatric disorders addictive
      behaviour.
   b. Rehabilitation of mentally ill patients.
   c. Promotion of mental health in the population in terms of improving mental well
      being & Quality of life.

3) To inculcate an empathic attitude that allows an integration of humanistic and Ethical
   approach in medicine.

4) To Apply Research Methodology in the field of psychiatry

5) To be aware of Knowledge of recent advance in psychiatry.

CONTENT / SYLLABUS

- a) Knowledge
- b) Skills
- c) Attitudes
a) **KNOWLEDGE:**

**1. BASIC SCIENCES AS APPLIED TO PSYCHIATRY**

- **NEUROANATOMY**
  - Developmental
  - Central peripheral autonomic
  - Principles of Brain imaging

- **NEUROPHYSIOLOGY**
  - Normal sleep
  - Basic cell
  - Of thought, cognition mood and Motor function

- **NEUROCHEMISTRY**
  - Neurotransmitters
  - In emotion, memory, behaviour

- Applied Neurophysiology, Neurochemistry, Neuroanatomy in relation to physical factors affecting psychiatric disorders.

**PSYCHOLOGY**

- Basic principles e.g. learning, memory, motivation, emotion and stress etc.
- Applied psychology – behaviour science
- Sensory processes and perception
- Thinking and language
- Social perception Influences and relationships
- Attitudes and beliefs
- Developmental psychology child development
- Personality structure
- Psychological assessment and testing (IQ and cognition)
- EEG
- Genetics

**Clinical Neurology**

1. Theory paper – 100 marks
2. 1 Long case.
2. PSYCHIATRY, NEUROLOGY, NEUROPSYCHIATRY AND BEHAVIOURAL MEDICINE

PSYCHIATRY
• Introduction to mental health and psychiatric disorders
• History taking and clinical examination in psychiatry
• Classificatory systems.
• History of Psychiatry
• Schizophrenia and other psychotic disorders.
• Mood Disorders
• Anxiety and Somatoform and dissociative disorders
• Substance related disorders
• Sexual disorders
• Sleep disorders
• Eating disorders
• Psychiatric disorders due to General Medical Consumption including HIV
• Disaster and Psychiatry
• Special population in psychiatry
• Personality disorders
• Impulse control disorders
• Adjustment disorders
• Relational problems
• Psychiatric emergencies
• Deliberate self harm / Suicide
• Transcultural psychiatry
• Child and adolescent psychiatry
• Family psychiatry
• Geriatric psychiatry
• Community psychiatry in relation to India (NMHP)
• Forensic psychiatry (Mental Health Act)
• Ethics
• Human rights
• Rehabilitation.
• Psychosomatic disorders including stress
• Therapies
  a) Biological - ECT and Psychopharmacology
  b) Psychosocial interventions
  c) Psychotherapy
  d) Behaviour therapy
  e) Therapies based on Indian philosophy

NEUROLOGY, NEUROPSYCHIATRY

• Clinical history and CNS examination
• Head injuries
• Alcohol and substance
• Toxic & metabolic & endocrine Disorders
• Nutritional
• Dementias
• Delirium
• SOL
• Infections and inflammatory diseases including HIV
• Movement disorders
• Epilepsy
• CVA
• Investigations

MEDICINE AS RELATED TO PSYCHIATRY
Consultation liaison psychiatry
Medicine and allied
Surgery and allied
Gynecology and Obstetrics and allied
Pediatrics

**b. SKILLS**

- Communication skills
- History taking and interview
- Mental status evaluation & Physical Examination with neurological examination
- Diagnostic formulation and comprehensive plan of management
- Appraisal of Psychometry i.e. Intelligence, personality
- Handling emergencies and liaison services
- Psycho-education skills
- Ethical discharge of duties
- Tackling medicolegal issues
- Psychotherapy and counseling
- Behavior Therapy
- Interpretation of EEG, C T, MRI
- Biological therapies including ECT & Psychopharmacology

**c. ATTITUDES AND VALUES**

- For professional and ethical conduct
- Humanistic and empathic relationship with patients, relatives and colleagues.

**d. TEACHING LEARNING METHODS**

**Cognitive:**

- Lectures
- Tutorials
- Seminars
- Symposium
- Didactic Small group teaching
- Workshop
• Self study
• Inter disciplinary conference
• Research forum

Skills:
• Demonstrations
• Case conference
• Research project
• Workshops
• Bedside clinics
• Journal review
• Psychotherapy and Behavior Therapy session

Attitude:
• Role play
• Audio-visual
• Workshops
• Demonstration

EVALUATION:
Knowledge: Theory
MCQ
Short Answer
Long Answer

Four Theory papers of 100 marks each
Paper I Basic sciences (50 marks) and applications (50 Marks)
Paper II Neuro Psychiatry (50 marks) Liaison Psychiatry (50 Marks)
Paper III Clinical Psychiatry Part I (100 marks)
Paper IV Clinical Psychiatry Part II (50 marks) Recent advances (50 Marks)

Skills: Practical evaluation
Viva Voce 100 marks
FOUR cases –

2 psychiatry -------------------------- 100 marks
1 Neuropsychiatry ---------------------- 50 marks
1 case specialty child/geriatric etc ------ 50 marks

Dissertation/Thesis
- Time spent should be one year
- Supervision
- Evaluation Mandatory

Log book of all the academic activities of students

Attitude:
- Structured evaluation and Scales
- Group Discussion
- Log Book
- Clinical – patient relationship

RECOMMENDED BOOKS AND JOURNALS:
- Psychology – Morgan King
- Anatomy – Snelles
- Physiology – Guyton
- Symptoms in the mind – Sims
- Comprehensive Textbook of psychiatry – Kaplan
- Postgraduate psychiatry – Niraj Ahuja (Indian text book)
- Oxford Text book of Psychiatry
- Organic psychiatry – Lishmann
- Indian Journal of Psychiatry
- Journal of Clinical Psychiatry
- Psychiatric Clinics of North America
UNIVERSITY EXAMINATIONS
After successful completion 3 Years’ residency

Theory Examination: Each paper 100 marks – 3 hrs duration

<table>
<thead>
<tr>
<th>Sections with marks</th>
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<tbody>
<tr>
<td>Paper I  Basic sciences (50 marks) and applications (50 Marks)</td>
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<tr>
<td>4 Sections, each having two questions: with emphasis on Neurology</td>
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<td>‘A’ (13 marks), and ‘B’ (12 marks)</td>
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<td>Total = 100 marks</td>
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<tr>
<td>Paper II Neuro psychiatry (50 marks) Liaison Psychiatry (50 marks)</td>
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<tr>
<td>4 Sections, each having two questions: ‘A’ (13 marks), and ‘B’ (12 marks)</td>
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<tr>
<td>Paper III Clinical Psychiatry Part I (100 marks)</td>
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<td>4 Sections, each having two questions: ‘A’ (13 marks), and ‘B’ (12 marks)</td>
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<tr>
<td>Total = 100 marks</td>
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<tr>
<td>Paper IV Clinical Psychiatry Part II (50 marks) Recent advances (50 marks)</td>
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<tr>
<td>5 Questions of 25 marks each, out of which 4 questions have to be attempted</td>
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<td>Total = 100 marks</td>
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TOTAL THEORY = 400

Minimum passing marks in each head 40% and aggregate: 50% in all papers

Practical Examination:

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<tr>
<th>Description</th>
<th>Marks</th>
<th>Preparation time</th>
<th>Assessment time</th>
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<tbody>
<tr>
<td>Long Cases (Two)</td>
<td>200</td>
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<tr>
<td>2 long cases 100 marks each Psychiatry</td>
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<tr>
<td>Short Case</td>
<td>50</td>
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<tr>
<td>Short case Neuropsychiatry / Neurology</td>
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<tr>
<td>1 case specialty child / geriatric etc.</td>
<td>50</td>
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<tr>
<td>Viva (Four Tables)</td>
<td>80</td>
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<tr>
<td>PEDAGOGUE</td>
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<td>TOTAL PRACTICAL</td>
<td>400</td>
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Minimum passing marks: 50% separate in clinicals and viva
Knowledge:  
Theory
- MCQ
- Short answer
- Long answer

Four Theory papers of 100 marks each

Skills: Practical evaluation
Viva Voce 100 marks

FOUR cases –
- 2 psychiatry -----------------------------100 marks
- 1 Neuropsychiatry------------------------50 marks / Neurology
- 1 case specialty child / geriatric etc-------50 MARKS

Dissertation /Thesis
- Time spent should be two years
- Supervision
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Log book of all the academic activities of students

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- Oxford Text book of Psychiatry
- Organic psychiatry – Lishmann
In Objectives

1. Psychiatric History taking and interview skills training shall be there
2. In preventive & promotive appechn words like mental healthy, and community psychiatry be there
3. Consultation Liaison Psychiatry literally means frequent interaction between basis therapist and Psychiatrist i.e. basic medical team and Psychiatric team and joint conclusion on approach to details of treatment. This is rarely practiced there for other term like Gen. Hospital Psychiatry, PHC Psychiatry may be used

II Knowledge –
To add endocrinology & Behaviour and neuropsychology.

III Psychiatry
1) Normal sexualits
2) Forensic Psychiatry, Certification in Psychiatry, Mental Health Act – 1987
   Management of “dangerous” patient
3) Biological Psychiatry
4) Non- Pharmacological treatments in Psychiatry can be separate lead.

IV Neurology
   Neuroplasitcity Immunology & Psychiatry
   Nemo imaging
   Role of EEG in Psychiatry
   Role of CT scan in Psychiatry

V T add
   Psychosomatic medicine
   Ward rounds
   Grand round or Psychiatry Audit
VI a) Rotational postings in
   1) Medicine
   2) Neuromedicine
   3) State mental hospital posting
   4) Clinical Psychology posting (or supervised counselling and Psychotherapy felson)
   5) Paediatrics

b) Integrated teaching

VII Recent advances in all branches of Psychiatry to be included.

VIII University examinations suggested
   1) Long case - Psychiatry
   1) Short case - Psychiatry
   1) Short case - Menopsychiatry
   1) Short cap - Specialits child geniatric

   Marks as per Uni. Guidelines

IX Internal marks

   Qualifying work compulsory work be to permission for appears for find exe

X Dissertation committee at Psychiatry dept be periodicals evaluation each candidate dissertation work.

XI Recommended books & journals
   1) Essentials of post graduate Psychiatry by Vyal, Gada & Nathova Pevar publications – Hydrebad
   2) Ethis clinical Psychopathology
   3) APA – Practice Guidelines
   4) ICD – 10th revision & DSM-IV R classification system
   5) Indian Journal of Medical Research
   6) British Journal of Psychiatry
   7) American Journal of Psychiatry
   8) Acta Psychiatraca scardinavica
   9) Aechiever of Psychiatry.