

Sr. No.	Issue	Revised GME 2012	Suggestion	Remarks
1.	<b>Competencies</b>	Very brief & not categorical (P.31 -10.6.1)	Goal, Objective, ( Knowledge & skill) & Integration may be made exhaustive and categorical	P.29 & 30 of Regulation on Graduate medical Education , 1997 may be considered
2.	<b>Total Teaching hours</b>	125	<b>200</b>	38 + 40 hours for sports & extracurricular activities may be allotted
	<b>Phase –II</b>	50	<b>100</b>	
	<b>Phase-III</b>	75	<b>100</b>	
3.	<b>Attending ML PME</b>	Silent	10 compulsory	All Pvt. Medical colleges may be instructed to start the same following authorisation from state authorities. Meanwhile In Pvt. Medical College not conducting PM – Tie up with nearest Govt Medical College ( <b>Not</b> PHC/ CHC / Dist Hospital) may be suggested. ( <b>Only interim basis for short duration</b> )

4.	<b>Assessment &amp; Examination</b>	Theory- 1 paper-100 marks	Paper-1= 100 marks Paper-2= 100 marks <b>Total=200 marks</b>	Scheme of assessment shall ensure inclusion of all topics taught in consonance with Goal & Objective of the course.
		Practicals-100 marks. Silent on break up	<b>Practical= 100marks</b> <b>Spotting: 30 marks</b> (15X 2marks) <b>Exercise: 30 marks</b> 10-PM 20(5 marks X4) ( Injury report, age estimation, victim of sexual offence, drunkenness each) <b>Viva-I : 20 marks</b> <b>Viva-II: 20 marks</b>	
5.	<b>Staff requirement</b>	Silent	<b>For 150</b> -At least : Professor-1 Associate Professor-2 Assistant professor-3 Tutor-4 ( For more than 500 PM per anum additional 1 Assistant professor & 1 tutor) <b>Since Second renewal Onwards for newly established colleges &amp; same may be applicable to all recognised medical colleges.</b>	<b>For 150 :</b> At present at second renewal onwards Professor/ Associate Professor-1, Assistant Professor-1 & Tutor-1 Is inadequate to manage three batches per year ( Two major batch + 1 minor batch). For 50/100/200/250 respectively. <b>Shortage of FM experts is not a factor.</b>

