

MGM INSTITUTE OF HEALTH SCIENCES

(Deemed to be University u/s 3 of UGC Act, 1956) **Grade 'A' Accredited by NAAC**

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CHOICE BASED CREDIT SYSTEM

(CBCS)

(with effect from 2018-19 Batches)

Curriculum for

M.Sc. Cardiac Care Technology

Amended upto AC-49/2024, Dated 25/04/2024

Amended History

- 1. Approved in BOM-53/2018 [Resolution No. 4.5.2] Dated 19/05/2018.
- 2. As Amended in BOM-55/2018 [Resolution No.4.13)], [Resolution No.4.4.1.2], [Resolution No.4.4.1.3], Dated 27/11/2018.
- 3. As Amended in BOM-57/2019, [Resolution No.3.1.4.2], [Resolution No.3.2.1.6.a], [Resolution No.3.2.1.6.d]; Dated 26/04/2019.
- 4. As Amended in BOM-63/2021[Resolution No.4.3.1.2], [Resolution No.4.3.1.3.], Dated 17/02/2021.
- 5. As Amended in AC-41/2021 [Resolution No. 3.5]; dated 27/08/2021
- 6. As Amended in AC-42/2022 [Resolution No. 10.4.i], Dated 26/04/2022.
- 7. As Amended in AC-49/2024 [Resolution No. 3.10 ii], Dated 25/04/2024.

| | | | OL | JTLINE (| OF COU | RSE CI | JRRICU | LUM | | | | | | |
|-------------|---|----------------|-----------------|---------------|---------------------------------|-------------------------|----------------|-----------------|---------------|---------------------------------|---------------|------------------------|------------------|-------|
| | | | | M.Sc. C | ardiac (| Care T | echnolo | gy | | | | | | |
| | | | | | Semo | ester I | | | | | | | | |
| | | | C | redits/Weel | k | | | Hr | s/Semester | | | | Marks | |
| Code No. | Core Subjects | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation | Total Credits (C) | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation | Total hrs. | Internal Assessment | Semester Exam | Total |
| | Theory | | | | | | | | | | | | | |
| MCCT 101 L | Introduction to Clinical Cardiology | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 | 100 |
| MCCT 102 L | Fundamentals of Cardiac Diagnostic Procedures and Investigations | 3 | 1 | - | - | 4 | 45 | 15 | - | - | 60 | 20 | 80 | 100 |
| MCCT 103 L | Introduction to Pacing and Electrophysiology Study Techniques | 3 | 1 | - | - | 4 | 45 | 15 | - | - | 60 | 20 | 80 | 100 |
| MCCT 104 CP | CCT Directed Clinical Education-I | - | - | - | 21 | 7 | - | - | - | 315 | 315 | 50 | - | 50 |
| | | | | | Pra | ctical | | | | | | | | |
| MCCT 101 P | Introduction to Clinical Cardiology | , | - | 4 | - | 2 | - | - | 60 | - | 60 | 10 | 40 | 50 |
| MCCT 102 P | Fundamentals of Cardiac Diagnostic Procedures and Investigations | - | - | 4 | - | 2 | - | - | 60 | 1 | 60 | 10 | 40 | 50 |
| | Total | 10 | 2 | 8 | 21 | 23 | 150 | 30 | 120 | 315 | 615 | 130 | 320 | 450 |

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|-------------|--|----------------|-----------------|---------------|---------------------------------|-------------------------|----------------|-----------------|------------------|---------------------------------|------------|------------------------|------------------|-------|
| | M.Sc. Cardiac Care Technology | | | | | | | | | | | | | |
| | | | | | Sem | ester I | I | | | | | | | |
| | | | (| redits/Weel | k | | | I | Irs/Semeste | er | | | Marks | |
| Code No. | Core Subjects | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation | Total Credits (C) | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation | Total hrs. | Internal Assessment | Semester Exam | Total |
| | | | | | T | heory | | | | | | | | |
| MCCT 105 L | Introduction to Non-Invasive Techniques in Cardiology | 4 | 0 | - | - | 4 | 60 | 0 | - | - | 60 | 20 | 80 | 100 |
| MCCT 106 L | Invasive Cardiology | 3 | 1 | - | - | 4 | 45 | 15 | - | - | 60 | 20 | 80 | 100 |
| MCCT 107 CP | CCT Directed Clinical Education-II | - | - | - | 33 | 11 | - | - | - | 495 | 495 | 50 | - | 50 |
| CC 001 L | Research Methodology & Biostatistics (Core Course) | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 | 100 |
| | | • | | | Pr | actical | | | | | | • | | |
| MCCT 105 P | Introduction to Non-Invasive Techniques in Cardiology | - | - | 4 | - | 2 | - | - | 60 | 60 | 60 | 10 | 40 | 50 |
| MCCT 106 P | Invasive Cardiology | - | - | 4 | - | 2 | - | - | 60 | 60 | 60 | 10 | 40 | 50 |
| CC 001 P | Research Methodology & Biostatistics (Core Course) | - | - | 4 | - | 2 | 1 | - | 60 | 1 | 60 | 10 | 40 | 50 |
| | | | | | Core Ele | ctive Co | urse | | | | | | | |
| CEC 001 L | Basics of Clinical Skill Learning | 3 | | _ | _ | 3 | 45 | _ | | | 45 | 100 | _ | 100 |
| CEC 002 L | Hospital Operation Management | | _ | _ | | , | 43 | _ | | | 43 | 100 | _ | 100 |
| | Total | 14 | 1 | 12 | 33 | 32 | 210 | 15 | 180 | 615 | 900 | 240 | 360 | 600 |

| | | (| OUTLI | NE OF | COUR | SE C | JRRIC | ULUM | | | | | | |
|-------------|--|----------------|-----------------|------------------|---------------------------------|-------------------------|----------------|-----------------|-------------------|---------------------------------|------------|------------------------|-------------------|-------|
| | | | N. | I.Sc. Ca | rdiac C | are Te | chnolog | y | | | | | | |
| | | | | | Semest | er III | | | | | | | | |
| | | | | redits/Wee | k | | | Н | lrs/Semest | er | | M | larks | |
| Code No. | Core Subjects | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation | Total Credits (C) | Lecture (L) | Tutorial (T) | Practica 1 (P) | Clinical Posing/ Rotation | Total hrs. | Internal Assessment | Semeste r Exam | Total |
| | | | | | Theo | ory | | | | | | | • | |
| MCCT 108 L | Echocardiography- Advanced | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 | 100 |
| MCCT 109 L | Quality Assurance, Standardization & Accreditation (Cardiac Care) | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 | 100 |
| MCCT 110 CP | CCT Directed Clinical Education- III | 1 | - | - | 21 | 7 | - | - | - | 405 | 405 | 50 | - | 50 |
| MCCT 111 | Dissertation / Project* | 10 | - | - | - | 5 | - | - | - | - | - | 50 | - | 50 |
| | | | | | Pract | ical | | | | | | | | |
| MCCT 108 P | Echocardiography- Advanced | - | - | 4 | - | 2 | - | - | 120 | - | 120 | 10 | 40 | 50 |
| | | | | | Semi | nar | | | | | | | | |
| MCCT 112 | Seminars | - | - | - | - | 1 | - | - | - | - | - | 50 | - | 50 |
| | Total | 18 | 0 | 4 | 21 | 23 | 120 | 0 | 120 | 405 | 645 | 200 | 200 | 400 |

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|----------|--|-----------------|-----------------|------------------|---------------------------------|-------------------------|----------------|-----------------|------------------|---------------------------------|---------------|----------------------------|------------------|-------|
| | | | Μ. | Sc. Car | diac Ca | re Tec | hnolog | gy | | | | | | |
| | | | | | Semeste | er IV | | | | | | | | |
| | | | | Credits/W | eek | | | H | rs/Semeste | er | | | Marks | |
| Code No. | Core Subjects | Lectur e (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation | Total Credits (C) | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation | Total hrs. | Internal Assessme nt | Semester Exam | Total |
| | | | | Theory | (General | Electiv | e**) | | | | | | | |
| GE 001 L | Pursuit of Inner self Excellence (POISE) | | | | | | | | | | | | | |
| GE 002 L | Bioethics, Biosafety, IPR and Technology Transfer | 4 | _ | - | - | 4 | 60 | - | _ | - | 60 | 100 | - | 100 |
| GE 003 L | Disaster Management and Mitigation Resources | | | | | | | | | | | | | |
| GE 004 L | Human Rights | | | | | | | | | | | | | |
| | | | | | Practio | al | | | | | | | | |
| MCCT 111 | Dissertation / Project | - | - | 36 | - | 18 | - | - | - | - | - | - | 200 | 200 |
| MCCT 113 | Educational Tour / Field Work/IV/Hospital Visit | _ | _ | - | - | 2 | - | - | _ | _ | _ | 50 | - | 50 |
| | Total | 4 | 0 | 36 | 0 | 24 | 60 | 0 | 0 | 0 | 60 | 150 | 200 | 350 |

DIRECTOR'S MESSAGE

Dear Students,

Greetings!!!!!

I take this opportunity to welcome you on behalf of MGM family to the Masters Degree at MGM School of Biomedical Sciences (MGM SBS).

MGM School of Biomedical Sciences (MGM SBS) established in the year 2007, the MGM School of Biomedical Sciences envisaged building a progressive learning community and is committed to pursuit of excellence in higher education, total development of personality and shaping the students into sensitive, self-reliant citizens of the country imbued with the ideals of secularism and a scientific aptitude. We set global standards to make our students scientifically as well as ethically stronger. The college adopts the national qualification frame work for the post-graduate programs which has adopted Credit Base Choice System (CBCS) so that, we construct a value based system of education that encourages critical thinking and creativity, a research platform as opposed to rote learning.

The P.G (M.Sc.) courses offered are; Medical Anatomy, Medical Physiology, Medical Biochemistry, Medical Microbiology, Medical Pharmacology, Biotechnology, Genetics, Molecular Biology, Masters in Hospital administration and Biostatistics, M.Sc. Cardiac Care Technology, M.Sc. Medical Radiology and Imaging Technology, M. Optometry. Over time, the program has evolved, to meet the challenges of the ever changing field of biomedical education system.

With Best Wishes,

Director
MGM School of Biomedical Sciences

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ABOUT MGM SCHOOL OF BIOMEDICAL SCIENCES

Mission

To improve the quality of life, both at individual and community levels by imparting quality medical education to tomorrow's doctors and medical scientists and by advancing knowledge in all fields of health sciences though meaningful and ethical research.

Vision

By the year 2020, MGM Institute of Health Sciences aims to be top-ranking Centre of Excellence in Medical Education and Research. Students graduating from the Institute will have the required skills to deliver quality health care to all sections of the society with compassion and benevolence, without prejudice or discrimination, at an affordable cost. As a research Centre, it shall focus on finding better, safer and affordable ways of diagnosing, treating and preventing diseases. In doing so, it will maintain the highest ethical standards.

About - School of Biomedical Sciences

MGM School of Biomedical Sciences is formed under the aegis of MGM IHS with the vision of offering basic Allied Science and Medical courses for students who aspire to pursue their career in the Allied Health Sciences, teaching as well as research.

School of Biomedical Sciences is dedicated to the providing the highest quality education in basic medical sciences by offering a dynamic study environment with well equipped labs. The school encompasses 21 courses each with its own distinct, specialized body of knowledge and skill. This includes 7 UG courses and 14 PG courses. The college at its growing years started with mere 100 students has recorded exponential growth and is now a full-fledged educational and research institution with the student strength reaching approximately 581 at present.

Our consistent theme throughout is to encourage students to become engaged, be active learners and to promote medical research so that ultimately they acquire knowledge, skills, and understanding so as to provide well qualified and trained professionals in Allied Health Sciences to improve the quality of life.

As there is increased need to deliver high quality, timely and easily accessible patient care system the collaborative efforts among physicians, nurses and allied health providers become ever more essential for an effective patient care. Thus the role of allied health professionals in ever-evolving medical system is very important in providing high-quality patient care.

Last but by no means least, School of Biomedical Sciences envisions to continuously grow and reform. Reformations are essential to any growing institution as it fulfills our bold aspirations of providing the best for the students, for us to serve long into the future and to get ourselves updated to changing and evolving trends in the health care systems.

Name of the Degree: M.Sc. Cardiac CareTechnology

Duration of Study:

The duration of the study for M.Sc. Cardiac Care Technology will be of 2 years.

Program pattern:

• First Semester: July

Second Semester: JanuaryThird Semester: JulyFourth Semester: January

Eligibility Criteria:

BSc Cardiac Care/Cardiovascular Technology OR 2 years of Diploma in Cardiovascular Technology (post regular general BSc) with minimum of 3 year experience.

Medium of Instruction:

English shall be the Medium of Instruction for all the Subjects of study and for examinations.

For any query visit the website: www.mgmsbsnm.edu.in

Programme Outcome:

• The course aims to provide students with the requisite clinical assessment, decision-making skills and management for a range of cardiology conditions and stroke including pharmacological and non-pharmacological therapeutic interventions.

Programme Specific Outcome:

- This course offers the opportunity to study all aspects of clinical cardiology including expert assessment and management of a range of cardiac conditions, cardiac interventions, interpretation and practical skills.
- Includes hyper acute stroke, thrombolysis, interpretation of cardiac CT and MRI, TIA management, maximising stroke care, rehabilitation and long term.
- The programme can be regarded as vital training for the early stages of cardiology or stroke specialist training with clear learning objectives.

FIRST YEAR

M.Sc. Cardiac Care Technology

SEMESTER-I

| Code No. | Core Subjects | | | | | | |
|-------------|--|--|--|--|--|--|--|
| Theory | | | | | | | |
| MCCT 101 L | Introduction to Clinical Cardiology | | | | | | |
| MCCT 102 L | Fundamentals of Cardiac Diagnostic Procedures and Investigations | | | | | | |
| | Introduction to Pacing and Electrophysiology Study | | | | | | |
| MCCT 103 L | Techniques | | | | | | |
| MCCT 104 CP | CCT Directed Clinical Education-I | | | | | | |
| | Practical | | | | | | |
| MCCT 101 P | Introduction to Clinical Cardiology | | | | | | |
| | Fundamentals of Cardiac Diagnostic Procedures and | | | | | | |
| MCCT 102 P | Investigations | | | | | | |

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|-------------------------------------|
| Name of the Course | Introduction to Clinical Cardiology |
| Course Code | MCCT 101 L |

| Teaching Objective | To provide a brief introduction to Echocardiography, its techniques and types of Echocardiography. To provide practically and clinically useful application of Echocardiography. To explain echo techniques available and to put echo into a clinical perspective. |
|--------------------|---|
| Learning Outcomes | To develop an understanding regarding Echocardiography. To train students to perform Echocardiography examinations by explaining the position of transducers. To make students aware of recent advances in Echocardiography. To understand the role of Cardiac Care technician while assisting the Cardiologist as well as when performing individually. |

| Sr. No. | Topics | No. of Hrs. |
|------------|---|----------------|
| 1 | Basic Cardiology: Anatomy of the heart, Conduction system of the heart, Symptoms of the heart diseases, Examination of Cardiovascular diseases | 10 |
| 2 | Cardiac Auscultation: The stethoscope: components, working, uses, Heart sound – Types of heart sounds: normal and abnormal, Prosthetic heart sounds | 6 |
| 3 | Physical Appearance: General appearance, Gestures and gait Detailed Appearance: Face, Eyes—external and internal Mouth—external and internal Hands and feet, Skin, Muscles and tendons, Thorax, Abdomen | 8 |
| 4 | Arterial pulse:Information derived from the arterial pulse, Sites of Arterial Pulse, Methods of measuring Arterial pressure, Physical determinants of Arterial pressure The Jugular and Peripheral Veins: External and Internal Jugular Veins, Techniques of Examination for External and Internal Jugular Veins, Assessment of Jugular Venous Pressure, Anatomic-Hemodynamic Inferences, Electrophysiologic Inferences—Arrhythmias and Conduction Defects | 10 |
| 5 | Investigations in Cardiology: Chest roentgenogram, Electrocardiography, Echocardiography, Cardiac catheterization, Exercise stress testing. | 10 |
| 6 | Heart failure & Cardiomyopathy: Heart failure, Cardiogenic shock, Pulmonary edema, Cardiomyopathy | 6 |
| 7 | Cardiovascular diseases: Hypertension, Ischemic Heart disease, Rheumatic heart disease, Arrhythmias, Pregnancy and heart diseases | 10 |
| | Total | 60 hrs |

MCCT 101 P- Introduction to Clinical Cardiology

| Sr. No. | Topics | No. of Hrs. |
|---------|---|-------------|
| 1 | Cardiac Auscultation | 15 |
| 2 | Physical Examination in Cardiovascular diseases | 15 |
| 3 | Chest roentgenogram | 15 |
| 4 | Electrocardiography | 15 |
| | Total | 60 hrs |

Recommended Learning Resources:

Text Books:

- 1. Physical Examination of the Heart and Circulation Fourth Edition, Joseph K. Perloff, M.D.
- 2. Textbook of Anatomy (Vol.1,2,3): B.D. Chaurasia
- 3. Ross and Wilson Anatomy & Physiology in Health and Illness, 12th Edition by Anne Waugh and Allison Grant
- 4. Principles of Anatomy & Physiology ,12th Edition by Gerard J. Tortora& Bryan Derrickson
- 5. Textbook of Physiology (Vol.1,2): Dr. A.K. Jain

Reference books or related websites: www.osmosis.org

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|--|
| Name of the Course | Fundamentals of Cardiac Diagnostic Procedures and Investigations |
| Course Code | MCCT 102 L |

| Teaching Objective | • | This course provides a basis for the student to develop a systematic and comprehensive understanding of, and skills in, cardiac investigations and diagnostic procedures |
|--------------------|---|--|
| Learning Outcomes | • | To educate and train students to understand, interpret and commission basic and complex diagnostic cardiac investigations. |

| Sr. No. | Topics | No. of Hrs. | | | | |
|------------|--|----------------|--|--|--|--|
| 1 | Cardiac Catheterization in detail: Types of procedures, Hardware used, Vascular access, Conditions for Cardiac Catheterization | 12 | | | | |
| 2 | Physics and Operation of Radiation equipment in Cardiac Cath Lab: X-RAY tube & its design, Image intensifier, Gantry, Exposure factors, Projections used in various procedures | 12 | | | | |
| 3 | Diagnostic Procedures: Coronary Angiography, Peripheral Angiography, Renal Angiography, Cerebral Angiography | 12 | | | | |
| 4 | HEMODYNAMICS: Introduction to Hemodynamics, Pressure Measurement System, Sources of Error and Artifacts: Fluid Artifacts, Electronic and Electrical Artifacts, Human Error: Leveling and Balancing, Slope calibration, Hemodynamic waveforms, Gradient, Valve Area Calculations, Cardiac output formulas- Fick, Ejection fraction | 12 | | | | |
| 5 | Emergencies in the Cardiac Catheterization Laboratory: Major and Minor complications in CCL, Basic Life support and ACLS algorithms in emergencies | 12 | | | | |
| | Total | | | | | |

MCCT 102 P- Fundamentals of Cardiac Diagnostic Procedures and Investigations

| Sr. No. | Topics | No. of Hrs. |
|---------|--------------------------------|-------------|
| 1 | Cardiac Catheterization | 10 |
| 2 | Angiography& its types | 10 |
| 3 | Hemodynamic assessment | 10 |
| 4 | BLS & ACLS algorithm | 10 |
| 5 | Physics of Radiation Equipment | 10 |
| 6 | Hardwares used in CCL | 10 |
| | Total | 60 hrs |

Recommended Learning Resources:

Text Books:

 Invasive Cardiology- A MANUAL FOR CATH LAB PERSONNEL, 3rd Edition by Sandy Watson

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|---|
| Name of the Course | Introduction to Pacing and Electrophysiology Study Techniques |
| Course Code | MCCT 103 L |

| Teaching Objective | To teach students about common pacemaker problems Identify indications for ICD and biventricular pacemaker implantation based on international guidelines |
|--------------------|--|
| Learning Outcomes | Identify indications for cardiac pacing based on international guidelines Identify indications for electrophysiological studies with/ without ablation in cases of complex arrhythmias. |

| Sr. No. | Topics | No. of Hrs. |
|------------|--|----------------|
| 1. | Anatomy of conduction system: SA node, AV node, Intermodal and inter-atrial conduction, AV junctional and inter-ventricular conduction delay, The bundle of His, penetrating portion of the Av bundle, The bundle branches, The branching portion of the AV bundle, Terminal Purkinje fibres, Innervations of the AV node, His bundle & ventricular myocardium | 12 |
| 2. | Nervous & hormonal control of heart: Anatomy of ANS, Various hormones involved in control of heart, Effect of vagal stimulation, Effect of sympathetic stimulation | 8 |
| 3. | Basics of Electrophysiology: History, Equipment used, Personnel, Procedure, Arrhythmias treated, Differences Between Children and Adults for Electrophysiology | 8 |
| 4. | Radiofrequency ablation therapy: Procedure, Arrhythmias treated: Atrioventricular Nodal Reentrant Tachycardia (AVNRT), Atrial Fibrillation, Atrial Flutter and Ventricular Tachycardia | 12 |
| 5. | Introduction to Cardiac Pacing: Normal conduction, NBG codes for pacemaker, Indications for Temporary and Permanent Pacing, Pacemaker Components | 8 |
| 6. | Temporary Pacing (in detail): Myocardial conduction, Pacemaker therapy, Basic terminologies used in Temporary Pacing, Types of Temporary pacemaker, Complications associated | 12 |
| | Total | 60 hrs |

Recommended Learning Resources:

- Text Books:

 1. Invasive Cardiology- A MANUAL FOR CATH LAB PERSONNEL, 3rd Edition by Sandy
- 1. Principles of Anatomy & Physiology ,12th Edition by Gerard J. Tortora& Bryan Derrickson

Course code- MCCT 104 CP: CCT Directed Clinical Education - I

Students will gain additional skills in interventional procedures, cardiac pharmacology and recent advancements. Students apply knowledge from previous clinical learning experience under the supervision of a senior technologist. Students are tested on intermediate pharmacological and invasive techniques.

(Total-315 hrs)

FIRST YEAR

M.Sc. Cardiac Care Technology

SEMESTER-II

| Code No. | Core Subjects | |
|----------------------|---|--|
| | Theory | |
| MCCT 105 L | Introduction to Non-Invasive Techniques in Cardiology | |
| MCCT 106 L | Invasive Cardiology | |
| MCCT 107 L | CCT Directed Clinical Education-II | |
| CC 001 L | Research Methodology & Biostatistics (Core Course) | |
| | Practical | |
| MCCT 105 P | Introduction to Non-Invasive Techniques in Cardiology | |
| MCCT 106 P | Invasive Cardiology | |
| CC 001 P | Research Methodology & Biostatistics (Core Course) | |
| Core Elective Course | | |
| CEC 001 L | Basics of Clinical Skills Learning | |
| CEC 002 L | Hospital Operation Management | |

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|---|
| Name of the Course | Introduction to Non-Invasive Techniques in Cardiology |
| Course Code | MCCT 105 L |

| Teaching Objective | To teach students about common non-invasive techniques, investigations carried out with indications and complications |
|--------------------|---|
| Learning Outcomes | Identify indications for non-invasive techniques based on international guidelines Identify indications for non-invasive techniques. |

| Sr. No. | Topics | No. of Hrs. |
|------------|---|----------------|
| 1 | BASICS OF ELECTRODE PLACEMENT AND LEAD SELECTION AND AXIS DEVIATION: Basics of Electrodes and Leads, ECG deflections: Isoelectric, Upright, Negative and Biphasic, Types of ECG leads- Standard limb leads, Precordial leads and the Wisdom central, Augmented limb leads, Unipolar V/S Bipolar leads, Placement of leads with universal color code, Hexa-axial reference frame and Electrical axis, X axis – time presentation, Y axis – voltage presentation, Right & Left axis in normal ECG, Einthoven's Triangle, Deviation of Axis. | 10 |
| 2 | STRESS TEST: Protocols, lead placement, instruction to the patient, rhythm analysis, Types of Exercise stress tests. | 10 |
| 3 | ECG COMPONENTS-WAVES AND INTERVALS: ECG waveforms: Rate, Rhythm and Normal time intervals-The Normal Electrocardiogram, The Normal P wave & Atrial repolarization, Atrioventricular node conduction and the PR segment, Ventricular activation and the QRS complex, Genesis of QRS complex, Ventricular recovery and ST-T wave, Normal variants and Rotation of the heart, ECG PAPER,Rate measurement: Six second method, Large box method, Small box method | 10 |
| 4 | ECHOCARDIOGRAPHY TECHNIQUES: BASIC PRINCIPLES, INDICATIONS AND USES OF: 2D Transthoracic Echocardiography, M-mode, Echo windows and views used in Transthoracic echocardiography, Doppler echocardiography in detail: Pulsed, Continuous wave and Color flow mapping | 10 |
| 5 | KNOBOLOGY AND INSTRUMENTATION: Transducer: Basic principle and working, Types of Transducers, Piezoelectric crystals and its effect, Various knobs used on Echo machine with its description and application | 10 |
| 6 | BASICS OF TOE, STRESS ECHO & CONTRAST ECHO: Advantages & Disadvantages, Applications, Indications & Contraindications, Complications, Patient positioning and medications used | 10 |
| | Total | 60 hrs |

MCCT 105 P- Introduction to Non-Invasive Techniques in Cardiology

| Sr. No. | Topics | No. of Hrs. |
|---------|---|-------------|
| 1 | Steps to perform an 12 lead ECG | 15 |
| 2 | Patient positioning according to various conditions. | 15 |
| 3 | Proper communication with patient to find out the history | 15 |
| 4 | ECG machine operating and maintenance | 15 |
| | Total | 60 hrs |

Recommended Learning Resources:

Text Books:

- 1. ECG Made Easy -AtulLuthra
- 2. Reference by PGDCC IGNOU Handbooks for ECG, ECHO and Stress Test
- 3. Echo Made Easy: Sam Kaddoura
- 4. Reference by PGDCC IGNOU Handbooks for ECG, ECHO and Stress Test.
- 5. Feigen Baum's EchocardiographyTajik Jamil for Echocardiography.

| Name of the Programme M.Sc. Cardiac Care Technology | |
|---|---------------------|
| Name of the Course | Invasive Cardiology |
| Course Code | MCCT 106 L |

| Teaching Objective | To enable students, understand new techniques for procedures in and around the heart emerge that again need expert knowledge and manual dexterity. To understand such interventions which include diagnostic and therapeutic electrophysiology; implantation or exchange of complex pacemaker systems or percutaneous cardioverter-defibrillator-pacers; percutaneous valve repairs or replacements etc. |
|--------------------|---|
| Learning Outcomes | • To enable students to not only be a helping hand to those just starting out in the specialty but also to serve as a reference for those who have been working in Invasive field for some time |

| Sr. No. | Topics | No. of Hrs. |
|------------|---|----------------|
| 1 | CONTRAST MEDIA: Basics, Definition of Hydrophilicity, Osmolarity, and Viscosity, Contrast Agents used in the CCL, Uses, Complications, Contrast medium reactions: Mild, Moderate, Severe, Allergies: Anaphylactic and Anaphylactoid Reaction, Contrast-Induced Nephropathy (CIN) | 8 |
| 2 | IVUS: History, Angiography vs. IVUS, IVUS systems, Diagnostic Applications of IVUS, Complications of IVUS, Optical Coherence Tomography (OCT) | 8 |
| 3 | FUNCTIONAL ASSESSMENT OF CORONARY DISEASE: Intravascular Pressure Measurement: Coronary Pressures and Fractional Flow Reserve | 8 |
| 4 | PTCA: History, Indications, Materials used, Types of Angioplasty balloons (OTW, SOE, Fixed-wire balloons, Perfusion balloons, Compliant and Non-Compliant balloons, Stent Implantation, Contraindications, Complications | 8 |
| 5 | IC HARDWARES: Stents: Composition, Types, Guidewires: Composition, Types, Catheters: Diagnostic and Guiding | 8 |
| 6 | IABP AND OTHER CARDIAC ASSIST DEVICES: IABP- Physiologic Principles of Counter pulsation, Indications, Contraindications, Insertion, Timing: Timing errors, Troubleshooting, Weaning and Balloon Removal, Complications, Basics of Percutaneous ventricular assist devices: Tandem Heart, Impella, Percutaneous Coronary Bypass | 8 |
| 7 | PERIPHERAL CAROTID ANGIOGRAPHY: Introduction, Cerebrovascular Anatomy and pathology, Diagnosis and patient selection, Patient preparation, Diagnostic procedure, Post procedure Care | 6 |
| 8 | CARDIAC PHARMACOLOGY: Local Anesthetics, Analgesics And Sedatives: Opioids, Morphine, Fentanyl, Diazepam, Midazolam, Lorazepam, Vasodilators: Nitroglycerine, Sodium Nitroprusside, Beta receptor blockers: Metoprolol, Propranolol, Esmolol, Labetalol, Calcium Channel Blockers: Diltiazem, Verapamil, Nicardipine, Anticoagulation Agents: Platelet Aggregation Inhibitors, Aspirin, Clopidogrel, Glycoprotein IIb/IIIa Inhibitors, Tirofiban, Heparin, Warfarin, Thrombolytics: Streptokinase, Urokinase, Anistreplase, rTPA, Reteplase, Tenecteplase | 6 |
| | Total | 60 hrs |

MCCT 106 P- Invasive Cardiology

| Sr. No. | Topics | No. of Hrs. |
|---------|--|-------------|
| 1 | Learn about Probe and Scanner settings. | 15 |
| 2 | Learn about Structural and Functional assessment of the heart. | 15 |
| 3 | Learn about various windows and views used in Echocardiography. | 15 |
| 4 | Learn about qualitative reporting system along with various software's associated with Echo reporting. | 15 |
| | Total | 60 hrs |

Recommended Text Books:1. Invasive Cardiology, 3rd Edition by Sandy Watson.

Reference books or related websites:

1. THE INTERVENTIONAL CARDIAC CATHETERIZATION HANDBOOK, 3rd Edition by Morton J. Kern

<u>Course code- MCCT 107 CP: CCT Directed Clinical Education – II</u>

Students will gain additional skills in interventional procedures, cardiac pharmacology and recent advancements. Students apply knowledge from previous clinical learning experience under the supervision of a senior technologist. Students are tested on intermediate pharmacological and invasive techniques.

(Total- 495 hrs)

| Name of the Programme | M.Sc. Medical Radiology & Imaging Technology |
|-----------------------|--|
| Name of the Course | Research Methodology & Biostatistics (Core Course) |
| Course Code | CC 001 L |

| Teaching Objective | The course is intended to give an overview of research andstatistical models commonly used in medical and bio-medical sciences. Thegoal is to impart an intuitive understanding and working knowledge offesearch designs and statistical analysis. The strategy would be tosimplify, analyse the treatment of statistical inference and to focus primarily onhow to specify and interpret the outcome of research. | |
|--------------------|--|--|
| Learning Outcomes | Student will be able to understand develop statistical models, researchdesigns with the understating of background theory of various commonly usedstatistical techniques as well as analysis interpretation & reporting of results and use of statistical software. | |

| Sr. No. | Topics | No. of Hrs. |
|------------|---|----------------|
| A | Research Methodology: | |
| 1 | Scientific Methods of Research: Definition of Research, Assumptions, Operations and Aims of Scientific Research. Research Process, Significance and Criteria of Good Research, Research Methods versus Methodology, Different Steps in Writing Report, Technique of Interpretation, Precaution in interpretation, Significance of Report Writing, Layout of the Research Report | 5 |
| 2 | Research Designs: Observational Studies: Descriptive, explanatory, and exploratory, Experimental Studies: Pre-test design, post-test design, Follow-up or longitudinal design, Cohort Studies, Case Control Studies, Cross sectional studies, Intervention studies, Panel Studies. | 5 |
| 3 | Sampling Designs: Census and Sample Survey, Implications of a Sample Design, Steps in Sampling Design Criteria of Selecting a Sampling Procedure, Characteristics of a Good Sample Design, Different Types of Sample Designs (Probability sampling and non probability sampling), How to Select a Random Sample?, Systematic sampling, Stratified sampling, Cluster sampling, Area sampling, Multi-stage sampling, Sampling with probability proportional to size, Sequential sampling. | 5 |
| 4 | Measurement in research: Measurement Scales, Sources of Error in Measurement, Tests of Sound Measurement, Technique of Developing Measurement Tools, Scaling Meaning of Scaling, Scale Classification Bases, Important Scaling Techniques, Scale Construction Techniques, Possible sources of error in measurement, Tests of sound measurement | 5 |
| 5 | Methods of Data Collection: Types of data, Collection of Primary Data, Observation Method, Interview Method, Collection of Primary Data | 5 |
| 6 | Sampling Fundamentals: Need and importance for Sampling, Central Limit Theorem, | 5 |

| | Sampling Theory, Concept of Standard Error, Estimation, Estimating the Population Mean Estimating Population Proportion, Sample Size and its Determination, | |
|----|---|--------|
| | Determination of Sample Size through the Approach Based on Precision Rate and | |
| | Confidence Level. | |
| В | Biostatistics | |
| 7 | Data Presentation: Types of numerical data: Nominal, Ordinal, Ranked, Discrete and continuous. Tables: Frequency distributions, Relative frequency, Graph: Bar charts, Histograms, Frequency polygons, one way scatter plots, Box plots, two way scatter plots, line graphs | 3 |
| 8 | Measures of Central Tendency and Dispersion: Mean, Median, Mode Range, Inter quartile range, variance and Standard Deviation, Coefficient of variation, grouped mean and grouped standard deviation (including merits and demerits). | 3 |
| 9 | Testing of Hypotheses: Definition, Basic Concepts, Procedure for Hypothesis Testing, Measuring the Power of a Hypothesis Test, Normal distribution, data transformationImportant Parametric Tests, Hypothesis Testing of Means, Hypothesis Testing for Differences between Means, Hypothesis Testing for Comparing Two Related Samples, Hypothesis Testing of Proportions, Hypothesis Testing for Difference between Proportions, Hypothesis Testing for Comparing a Variance to Some Hypothesized Population Variance, Testing the Equality of Variances of Two Normal Populations. | 6 |
| 10 | Chi-square Test: Chi-square as a Non-parametric Test, Conditions for the Application Chi-square test, Steps Involved in Applying Chi-square Test, Alternative Formula, Yates' Correction, and Coefficient by Contingency. | 2 |
| 11 | Measures of Relationship: Need and meaning, Correlation and Simple Regression Analysis | 2 |
| 12 | Analysis of Variance and Covariance: Analysis of Variance (ANOVA):Concept and technique of ANOVA, One-way ANOVA, Two-way ANOVA, ANOVA in Latin-Square Design Analysis of Co-variance (ANOCOVA), ANOCOVA Technique. | 4 |
| 13 | Nonparametric or Distribution-free Tests: Important Nonparametric or Distribution-free Test Sign test, Wilcoxon signed-Rank Test, Wilcoxon Rank Sum Test: Mann-Whitney U test KruskalWalli's test, Friedman's test, and Spearman Correlation test. | 3 |
| 14 | Vital Health Statistics: Measurement of Population: rate, crude rate, specific rate, Measurement of fertility: specific fertility rate, Total fertility rate, Reproduction rate, Gross Reproduction Rate, Net Reproduction Rate, Measures related to mortality: Crude Death Rate (CDR), Age-specific death Rate, Infant and child mortality rate, Measures related to morbidity. | 4 |
| 15 | Computer Application Use of Computer in data analysis and research, Use of Software and Statistical package. Introduction to SPSS. Importing data from excel, access, tab and comma separated files. Entering data, labeling a variable, coding and recoding a categorical and continuous variable. Converting data from string to numeric variables, sorting & filtering, merging, appending data sets. Frequencies, descriptive statistics, cross tabulations. Diagrammatic presentation include histogram, bar chart, pie chart, scatter diagram, box plot, line chart. Parametric test of hypothesis-one sample, Independent and paired sample t test, one way ANOVA& post HOC test. Testing for normality, Chi-square test with measures of association. Pearson correlation. Non parametric test. | 3 |
| | Total | 60 hrs |
| | | |

CC 001P –Research Methodology & Biostatistics

| Sr. No. | Topics | No. of Hrs |
|---------|--|------------|
| A | Research Methodology | |
| 1 | Sampling Designs | 4 |
| 2 | Measurement in research | 5 |
| 3 | Methods of Data Collection | 3 |
| 4 | Sampling Fundamentals | 3 |
| В | Biostatistics | |
| 5 | Data Presentation | 4 |
| 6 | Measures of Central Tendency and Dispersion | 4 |
| 7 | Testing of Hypotheses | 12 |
| 8 | Chi-square Test | 2 |
| 9 | Measures of Relationship | 3 |
| 10 | Analysis of Variance and Covariance | 4 |
| 11 | Nonparametric or Distribution-free Tests | 4 |
| 12 | Vital Health Statistics: Measurement of Population | 6 |
| 13 | Computer Application Using Statistical Software | 6 |
| | Total | 60 hrs |

CORE ELECTIVE COURSES

| Name of the Programme M.Sc. Cardiac Care Technology | |
|---|------------------------------------|
| Name of the Course | Basics of Clinical Skills Learning |
| Course Code | CEC 001 L |

| Teaching Objective | To Understand the basic ideas on how to check for Vital Signs of the Patient In this course the Student will learn how to handle the patients and their positioning They will also learn on the Basics of Nasal-Gastric Tube The Students will learn on Administration of IV, IV and Medication Also they will know about Cleanliness in the Asepsis |
|--------------------|--|
| Learning Outcomes | After successful accomplishment of the course, the students would be able to Measure Vital Signs, do basic physical Examination of the patients, NG tube basics, Administration of Medicines The students will learn about Asepsis, and the Cleanliness related to asepsis and on mobility of the patients |

| Sr. No. | Topics | No. of Hrs. |
|------------|---|----------------|
| 1 | MEASURING VITAL SIGNS: Temperature: Axillaries Temperature, Pulse: Sites of pulse, Measurement, Respiratory, Blood Pressure, Pain: Pain Scale | 5 |
| 2 | PHYSICAL EXAMINATION: Observation, Auscultation(Chest), Palpation, Percussion, History Taking | 10 |
| 3 | FEEDING: ENTRAL FEEDING, NG TUBE: Measurement, Procedure, Care, Removal of Nasal-Gastric Tube, Nasal-Gastric Tube Feeding, and Parenteral Nutrition. | 10 |
| 4 | ADMINISTRATIONS: Oral, Intravenous, Intramuscular, Subcutaneous, Recapping of Syringe, Loading of Drugs, Calculation of Drugs, Venipuncture, IV Infusion, Cannula, Attachment of IV infusion Set, Fluid Collection, Heparin Lock, Maintenance of IV set, Performing Nebulizer Therapy, Inhaler, Oxygen Therapy (Nasal, prongs, nasal Catheter, Venturi Mask, face mask) | 10 |
| 5 | ASEPSIS: Hand wash Techniques, (Medical, Surgical) Universal Precaution, Protecting Equipment: Using Sterile Gloves, Opening a Sterile package and Establishing a Sterile Field, Sterile Dressing Changes, Surgical Attire, Wound Dressing, Suture Removal, Cleaning and Application of Sterile Dressing, Wearing and Removal of personal protective Equipment | 5 |
| 6 | 6 MOBILITY AND SUPPORT: Moving and Positioning, range of Motion exercises (Active & Passive) Assisting for Transfer, Application of Restraints | |
| | Total | 45 hrs |

| Name of the Programme M.Sc. Cardiac Care Technology | |
|---|-------------------------------|
| Name of the Course | Hospital Operation Management |
| Course Code | CEC 002 L |

| Teaching Objective | To promote scientific management of hospital and advancement of health care systems so as to make it rational, responsive and cost efficient To promote the development of high quality of hospital care in the community and the country. It has to provide a satisfactory environment to the patient and also to the doctors for clinical research. |
|--------------------|--|
| Learning Outcomes | Understand and apply resource management concepts (personnel, finance, and material resources) and the processes and strategies needed in specific hospital sectors Communicate effectively and develop their leadership and teambuilding abilities Apply modern change management and innovation management concepts to optimize structures Analyze existing hospital service policies and enhance their alignment within the local and national context |

| Sr. No. | Topics | No. of Hrs. |
|------------|--|----------------|
| 1 | MEDICO-LEGAL CASES: Introduction, Laws associated with Medico-Legal Cases, Three Core Contents in Medico-legal cases w.r.t Doctors, Patient & Profession, | 5 |
| 2 | CONSIDERATIONS OF ETHICS: Consent Confidentiality Mental Health End of life and | |
| 3 | HOSPITAL INFORMATION SYSTEM(HIS): Hospital Information System Management, software applications in registration, billing, investigations, reporting, medical records management, Security and ethical challenges | 10 |
| 4 | EQUIPMENT OPERATIONS MANAGEMENT: Hospital equipment repair and maintenance, types of maintenance, job orders, equipment maintenance log books, AMCS | 10 |
| 5 | ROLE OF MEDICAL RECORDS IN HEALTH CARE MANAGEMENT: Computers for Medical records, Developments of computerized medical record information processing system(EMR's), Computer stored (Vs) Manual hand written record, Advantages of EMR (Vs) Manual | 10 |
| | Total | 45 hrs |

SECOND YEAR

M.Sc. Cardiac Care Technology

SEMESTER-III

| Code No. | Core Subjects | |
|-------------|---|--|
| | Theory | |
| MCCT 108 L | Echocardiography- Advanced | |
| MCCT 109 L | Quality Assurance, Standardization & Accreditation (Cardiac Care) | |
| MCCT 110 CP | CCT Directed Clinical Education-III | |
| MCCT 111 | Dissertation/Project* | |
| Practical | | |
| MCCT 108 P | Echocardiography- Advanced | |
| Seminar | | |
| MCCT 112 | Seminars | |

| Name of the Programme M.Sc. Cardiac Care Technology | |
|---|----------------------------|
| Name of the Course | Echocardiography- Advanced |
| Course Code | MCCT 108 L |

| Teachin | ng Objective | •To provide practically and clinically useful application of Echocardiography. •To explain echo techniques available and to put echo into a clinical |
|---------|--------------|---|
| | | perspective. |
| Learnin | ng Outcomes | To develop an understanding regarding Echocardiography. To train students to perform Echocardiography examinations by explaining the position of transducers. To make students aware of recent advances in Echocardiography. To understand the role of Cardiac Care technician while assisting the Cardiologist as well as when performing individually. |

| Sr. No. | Topics | No. of Hrs. |
|------------|---|----------------|
| | Topics ECHOCARDIOGRAPHY FOR CORONARY ARTERY DISEASE: a. Understanding coronary circulation: Coronary anatomy and physiology, pathogenesis of atherosclerotic plaques, abnormalities of coronary perfusion, wall thickening b. Wall motion segmentation, analysis and scoring: Segmental analysis for wall motion defects, coronary artery territories, detection and quantitation of Ischemic muscle-wall motion scoring, Ischemic Cardiomyopathy c. Myocardial infarction: Detecting and assessing MI, co-relation with coronary anatomy, prognostication following MI. Complications of MI: Aneurysm, pseudo aneurysm, Ventricular Septal Defect, thrombi-embolic potential, right ventricular involvement d. Stress echocardiography: Protocols for stress echocardiography, detection of reversible Ischemic, detecting inducible ischaemia/viability, specificity and | |
| | sensitivity e. Newer echo techniques and their application in CAD: Tissue Doppler, Speckle echo & Contrast echo - indications , contraindications, drug dosage, delivery of contrast, interpretation with study of myocardial perfusion and LV opacification | |
| | f. Role of CT Angiography, MRI and Nuclear perfusion & myocardial viability in CAD g. LVAD: indications, technique and post-op evaluation | |

| | ЕСНО | OCARDIOGRAPHY FOR VALVULAR HEART DISEASE: | |
|---|------|--|----|
| | a. | Haemodynamic information derived from Normal Echocardiography | |
| | b. | Mitral stenosis: Etiopathogeneisis, pathophysiology and haemodynamics, | |
| | | diagnosis, assessing severity, secondary effects, assessment for balloon mitral | |
| | | valvotomy- Transesophageal echocardiography and its uses | |
| | c. | Mitral regurgitation: Mitral valve prolapse and analysis of segments, | |
| | | Haemodynamics of MR, diagnosis of MR, assessing severity and secondary | |
| | | effects, pre-op, intra-op and postoperative, assessment for mitral valve repair, | |
| | | use of three dimensional echocardiography for mitral valve surgery, flail | |
| | | mitral valve, papillary muscle dysfunction. mitral annular calcium. | |
| | d. | Aortic stenosis: Etiopathogenesis and haemodynamics, sub-valvar, valvar and | |
| | | supravalvar lesions, cuspal morphology, diagnosis and assessment of | |
| | | secondary effects, time course and prognostication, pre-operative and post- | |
| 2 | | operative assessment | 20 |
| | e. | Aortic regurgitation: Etiopathogenesis and haemodynamics, diagnosis, | |
| | | assessing severity, secondary effects, relevant aspects of left ventricular | |
| | | function, timing of surgery, preoperative and post-operative assessment. | |
| | f. | Tricuspid & Pulmonary valve disease: Anatomy and physiology of the | |
| | | healthy valve, structural and functional changes in various disease states | |
| | | organic and functional involvement, tricuspid stenosis, tricuspid regurgitation | |
| | | and assessment of severity, infundibular, valvar, supra valvar and peripheral | |
| | | pulmonic stenosis, approach to pulmonary artery hypertension. | |
| | g. | Prosthetic valves: Types and normal function of mechanical valves, stenosis | |
| | | regurgitation, use of transsophageal echo for prosthetic valves, endocarditis: | |
| | | and its sequelae in native and prosthetic heart valves. | |
| | ЕСНО | OCARDIOGRAPHY IN MYO-PERICARDIAL, AORTIC, SYSTEMIC | |
| | | RDERS & CARDIAC MASSES: | |
| | a. | Hypertrophic Cardiomyopathy: Morphological variants, diagnosis, | |
| | | hemodynamics, assessing intracavitary and outflow tract gradients, evaluation | |
| | _ | of therapy, pre and postprocedural evaluation. | |
| | b. | Idiopathic dilated cardiomyopathy: Diagnosis and differentiation from other | |
| | | disorders such as IHD, ventricular functions and secondary effects, pre and | |
| | | post-procedural evaluation for cardiac re-synchronization therapy. Overview | |
| 3 | | of cardiac transplantation | 20 |
| | c. | Restrictive Cardiomyopathy: Diagnosis and haemodynamics, infiltrative | |
| | | cardiomyopathies, miscellaneous- myocardial diseases in neuromuscular | |
| | | disorders, infectious agents and toxins. | |
| | d. | Diseases of the pericardium: Pericardial effusion: Detection of fluid, | |
| | | diagnosis-pleural versus pericardial fluid, quantitation, loculated effusions, | |
| | | cardiac tamponade-diagnosis, haemodynamicsetiology, pericardiocentesis | |
| | | Constrictive pericarditits: Diagnosis and haemodynamics. Differentiation | |
| | | from restrictive Cardiomyopathy, pre and post-surgical evaluation. | |

Miscellaneous: acute pericarditis, pericardial thickening, pericardial cysts, absent pericardium.

e. Diseases of the Aorta: Aortic dilatation and aneurysms, Aortic dissection-diagnosis and classification, false aneurysms, aneurysms of the aortic sinuses-rupture, haemodynamics, pre-and post surgical evaluation. Miscellaneoustrauma, infections, aorta-left-ventricular tunnel, atherosclerosis, Role of transesophageal echocardiography.

f. Echocardiography in systemic disorders

g. Cardiac masses: Normal variants, primary cardiac neoplasms and secondaries involving the heart, secondary effects, extra cardiac masses, intra cardiac thrombi, ultrasonic typing, manmade objects in the heart

h. Electrophysiology: echo in bundle branch blocks and Wolf-Parkinson-White syndrome, Atrial fibrillation, ectopic rhythm-ventricular and supra-ventricular, pacemakers, CRT & ICD

i. Use of TEE in intensive care setup

MCCT 108 P- Echocardiography- Advanced

Total

60 hrs

| Sr. No. | Topics | No. of Hrs. | |
|---------|---|-------------|--|
| 1 | i. Linear measurements: indirect M-Mode markers of leftventricular function. ii. Assessing global LV function. iii. Regional left ventricular function: wall motion scoring, relationship to vascular supply, use of tissue Doppler where indicated. iv. Evaluation of diastolic function: Methods for evaluating diastolic function, Doppler evaluation of diastolic function, Evaluation of mitral inflow, determination of isovolumic relaxation time, Evaluation of pulmonary vein flow, Doppler tissue imaging. v. Complications of IHD such as aneurysms, VSD, clots & MR especially from a surgical perspective. | 40 | |
| 2 | Intensive care setup, protocols to follow in emergency situations & CPR, IV line insertion | | |
| 3 | Administrative issues – maintenance of quality & standards in hospitals, record maintenance, stocks & purchase, medico legal issues | | |
| 4 | How to prepare a report in various procedure - Routine trans-thoracic echo: adult and congenital/pediatric, TEE, contrast echo, vascular study & advanced echo | | |
| 5 | Archiving of clinical data and images & research: Basics 20 | | |
| | Total | 120 hrs | |

Recommended Learning Resources:

Text Books:

- 1. Echocardiography by Feigenbaum (Latest Edition)
- **2.** Echo manuals by Mayo Clinic Lecture notes.
- 3. Text book of Clinical Echocardiography, Catherine M. Otto (Hardcover International)
- 4. Cardiology by Braunwald and Hurst (Latest edition)
- 5. Journal articles Cardiology by Braunwald and Hurst (Latest edition)
- **6.** Echo made easy by Sam Kaudora

| Name of the Programme | M.Sc. Cardiac Care Technology | |
|-----------------------|--|--|
| Name of the Course | QualityAssurance,Standardization& Accreditation(CardiacCare) | |
| Course Code | MCCT 109 L | |

| Teaching Objective | • The course enables the students understand the concept of quality, its dimensions, methodology to assess it, implement quality control, understand what is quality assurance and its process, health care audits, patients a care, total quality management and continues quality improvement as applicable to health care. |
|-----------------------|---|
| Learning Outcomes | Students will learn the concept of Quality Assurance and its applications. To understand, implement and follow standard methods of Quality Assurance |

| Sr. No. | Title | Details | No. of Hrs. |
|------------|----------------------------|--|----------------|
| 1 | Concept of Quality | Introduction Qualitymanagementphilosophies Theleadingedgeofthemodernapproachtoquality inhealthcare Performance Evaluation | 15 |
| 2 | Quality Indicators | Quality Audits of QC and caliberation performed | 10 |
| 3 | Standardization of quality | QualityAssuranceinMedicalImaging: Implementation&operation ,Evaluationand implementationofAERBguidelines | 10 |
| 4 | Accreditation of Center | Quality Accrediation in Echocardiography Laboratory NABH Rules and Regulations AERB Rules and Regulations BARC Rules and Regulations Joint Commission International(JCI) | 15 |
| 5 | Accreditation of Personnel | Americanregistry, Canadian Registry, European Registry, Australianregistry | 10 |
| Total | | | 60 hrs |

Recommended Learning Resources:

Recommended textbooks:

1. Hospitals & Health service Accreditation –Principles & Practices S.A tatrish-2010 edition.

Reference books or related websites:

- 1. Quality Management in the Imaging Sciences Jeffrey Papp
- 2. Continuous Quality Improvement in Health Care, TheoryImplementation and applications: Second edition, Curtis P. McLaughlin, Arnold D. Kaluzny.

Additional readings: Details of journal/Magazine articles, Whitepapers, Case-Studies, Web-casts, Podcasts etc. supporting the topics of the course.

<u>Course code- MCCT 110 CP: CCT Directed Clinical Education – III</u>

Students will gain additional skills in interventional procedures, cardiac pharmacology and recent advancements. Students apply knowledge from previous clinical learning experience under the supervision of a senior technologist. Students are tested on intermediate pharmacological and invasive techniques. (Total-405 hrs)

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|-------------------------------|
| Course Code | MCCT 111 |
| Name of the Course | DISSERTATION/PROJECT |

^{*}The Dissertation work will begin from 3rd Semester, and will continue through the 4th Semester.

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|-------------------------------|
| Course Code | MCCT 112 |
| Name of the Course | Seminar |

For Seminar/Presentations there will be a maximum of 50 marks. Seminar / presentations will be evaluated by the teachers of the dept. The marks obtained in the same will be kept confidentially with the Head of the Dept. and will be submitted along with the internal assessment marks.

SECOND YEAR

M.Sc. Cardiac Care Technology

SEMESTER-IV

| Code No. | Core Subjects | | |
|----------|---|--|--|
| | Theory | | |
| | General Elective** | | |
| GE 001 L | Pursuit of Inner Self Excellence (POISE) | | |
| GE 002 L | Bioethics, Biosafety, IPR & Technology transfer | | |
| GE 003 L | Disaster Management and Mitigation Resources | | |
| GE 004 L | Human Rights | | |
| MCCT 111 | Dissertation / Project | | |
| | Practical | | |
| MCCT 113 | Educational Tour / Field Work/IV/Hospital Visit | | |

- *(a) Dissertation / Project Course commences in III Semester
- (b) **Educational Tour / Field Work/ IV/ Hospital Visit:** Course may be carried out in any Semester or all Semesters but evaluated and Grade Points are to be added in 4th Semester.

(Elective): Any one subject is to be chosen from the following (Subjects offered may change from time to time depending on the availability of expertise)

▲ Multidisciplinary / Interdisciplinary

Educational Tour / Field Work/ IV/ Hospital Visit:

Industrial visit has its own importance in building a career of a student which is pursuing a professional degree. Objections of industrial visit are to provide students an insight regarding internal working of reputed hospitals and labs. Industrial visits provides students an opportunity to learn practically thoughts interactions, working methods and employment practices as theoretical knowledge is not enough for making a competent and skilful professionals.

ACADEMIC SYLLABUS FOR SEMESTER - IV ELECTIVE COURSE

^{**}Elective courses may or may not have practical and/or field work.

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|--|
| Course Code | GE 001 L |
| Name of the Course | PURSUIT OF INNER SELF EXCELLENCE (POISE) |

| | 1. To inculcate moral values in students – Self-Discipline, Time |
|------------------|---|
| Course objective | Management, Develop attitude of Service with humility, Empathy, Compassion, brotherhood, Respect for teachers, colleagues & society members. |
| | 2. Develop Effective means of communication & presentation skills in students |
| | 3. To develop wisdom in students for deciding their career based on their areas of interest and inner skills. |
| | 4. Introduce techniques for Relaxation, Meditation & Connecting with innerself. |
| | 5. Rejuvenation Techniques which can be used by students to distress themselves |
| | 6. To improve performance of students during various assignments, projects, elocutions, events, quiz, interviews. |
| | Students will become self dependent, more decisive and develop intuitive ability for their study and career related matter. |
| | 2. Students ability to present their ideas will be developed. |
| | 3. Enhanced communication skills, public speaking & improved Presentation ability. |
| Course outcomes | Students will be able to explore their inner potential and inner ability to become a successful researcher or technician & hence become more focused. |
| | 5. Students will observe significant reduction in stress level. |
| | With the development of personal attributes like Empathy, Compassion, Service, Love &brotherhood, students will serve the society and industry in better way with teamwork and thus grow professionally. |
| Course outcomes | Enhanced communication skills, public speaking & improved Presentation ability. Students will be able to explore their inner potential and inner ability to become a successful researcher or technician & hence become more focused. Students will observe significant reduction in stress level. With the development of personal attributes like Empathy, Compassion, Service, Love & brotherhood, students will serve t society and industry in better way with teamwork and thus grow |

| Unit no. | Topics | No. of Hrs |
|----------|--|------------|
| 1 | Spiritual Values for human excellence: The value of human integration; Compassion, universal love and brotherhood (Universal Prayer); Heart based living; Silence and its values, Peace and non-violence in thought, word and deed; Ancient treasure of values - Shatsampatti, Patanjali's Ashtanga Yoga, Vedic education - The role of the Acharya, values drawn from various cultures and religious practices - Ubuntu, Buddism, etc.; Why spirituality? Concept – significance; Thought culture | 15 |
| 2 | Ways and Means: Correlation between the values and the subjects; Different teaching techniques to impart value education; Introduction to Brighter Minds initiative; Principles of Communication; Inspiration from the lives of Masters for spiritual values - Role of the living Master | 15 |
| 3 | Integrating spiritual values and life: Relevance of VBSE (Value Based Spiritual Education) in contemporary life; Significant spiritual values; Spiritual destiny; Principles of Self-management; Designing destiny | 15 |
| 4 | Experiencing through the heart for self-transformation (Heartfulness Meditation): Who am I?; Introduction to Relaxation; Why, what and how HFN Meditation?; Journal writing for Self-Observation; Why, what and how HFN Rejuvenation (Cleaning)?; Why, what and how HFN connect to Self (Prayer)?; Pursuit of inner self excellence; Collective Consciousness-concept of egregore effect; | 15 |
| Total | | 60hrs |

- 1. <u>www.pdfdrive.net</u>
- 2. www.khanacademy.org
- 3. www.acadeicearths.org
- 4. www.edx.org
- 5. <u>www.open2study.com</u>
- 6. www.academicjournals.org

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|---|
| Course Code | GE 002 L |
| Name of the Course | BIOETHICS, BIOSAFETY, IPR & TECHNOLOGY TRANSFER |

| | The students will gain structural knowledge on: | | |
|------------------|--|--|--|
| | 1. To list the routes of exposure for a pathogen to a human being. | | |
| | | | |
| | 2. To demonstrate and assess the proper use of PPE, best practices, biological | | |
| | containment, and be prepared to safely conduct research | | |
| | | | |
| | 3. To identify the role of the Biosafety Professional inBiomedical Research Laboratories | | |
| | Laudiatories | | |
| Course objective | | | |
| course objective | 4. To appreciate the importance of assertion in interpersonal communication | | |
| | and beintroduced to some key assertion strategies | | |
| | | | |
| | 5. To understand the interpersonal nature of giving feedback, receiving criticism | | |
| | and resolving conflicts. | | |
| | | | |
| | | | |
| | 6. To establish attentive listening as an assertion strategy | | |
| | Students will learn to: | | |
| | 1. Effectively manage the health and safety aspects of a biological laboratory. | | |
| | | | |
| | 2. Give reliable, professional and informed advice and information to | | |
| | colleagues and managers. | | |
| | | | |
| | 3. Help to ensure that their institution complies with relevant legislation, liaise effectively with enforcing authorities and be aware of the penalties for failing | | |
| | to comply. | | |
| Course outcomes | to compry. | | |
| course outcomes | 4. Build a context of understanding through communication. | | |
| | | | |
| | 5. Mediate between other conflicting parties. | | |
| | | | |
| | 6. Exhibit de-escalatory behaviors in situations of conflict. | | |
| | 7. Demonstrate acknowledgment and validation of the feelings, opinions, | | |
| | and contributions of others. | | |
| | and of an end of the of | | |
| | | | |

| Unit no. | Topics | No of Hrs |
|----------|---|-----------|
| 1 | Ethics : Benefits of Allied Health Sciences, ELSI of Bioscience, recombinant therapeutic products for human health care, genetic modifications and food consumption, release of genetically engineered organisms, applications of human genetic rDNA research, human embryonic stem cell research. | 15 |
| 2 | Patenting: Patent and Trademark, Bioscience products and processes, Intellectual property rights, Plant breeders rights, trademarks, industrial designs, copyright biotechnology in developing countries. Biosafety and its implementation, Quality <i>control in</i> Biotechnology. | 15 |
| | Introduction to quality assurance, accreditation & SOP writing: Concept of ISO standards and certification, National regulatory body for accreditation, Quality parameters, GMP & GLP, Standard operating procedures, Application of QA in field of genetics, Data management of clonical and testing laboratory. | 15 |
| 3 | Funding Agencies (Financing alternatives, VC funding, funding for Bioscience in India, Existrategy, licensing strategies, valuation), support mechanisms for entrepreneurship (Bioentrepreneurship efforts in India, difficulties in India experienced, organizations supporting growth, areas of scope, funding agencies in India, policy initiatives), Role of knowledge centers and R&D (knowledge centers like universities and research institutions, role of technology and up gradation) | 15 |
| | Total | 60hrs |

- 1. www.pdfdrive.net
- 2. www.khanacademy.org
- 3. www.acadeicearths.org
- 4. www.edx.org
- 5. <u>www.open2study.com</u>
- 6. www.academicjournals.org

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|--|
| Course Code | GE 003 L |
| Name of the Course | DISASTER MANAGEMENT AND MITIGATION RESOURCES |

| | The course will uplift about: 1. Understand and appreciate the specific contributions of the Red Cross/Red Crescent movement to the practice and conceptual understanding of disaster management and humanitarian response and their significance in the current context. |
|------------------|--|
| Course objective | Recognize issues, debates and challenges arising from the nexus between paradigm of development and disasters. |
| | Critically evaluate disaster risk reduction and humanitarian response policy and practice from multiple perspectives. Respond to disaster risk reduction initiatives and disasters in an effective, humane and sustainable manner. |
| | At the successful completion of course the student will gain: 1. knowledge and understanding of the disaster phenomenon, its different contextual aspects, impacts and public health consequences. |
| Course outcomes | Knowledge and understanding of the International Strategy for Disaster Reduction (UN-ISDR) and to increase skills and abilities for implementing the Disaster Risk Reduction (DRR) Strategy. |
| | Ensure skills and abilities to analyse potential effects of disasters and of the strategies and methods to deliver public health response to avert these effects. |

| Unit no. | Topics | No of Hrs. |
|----------|---|------------|
| 1 | Introduction: Definition of Disaster, hazard, global and Indian scenario, general perspective, importance of study in human life, Direct and indirect effects of disasters, long term effects of disasters. Introduction to global warming and climate change. | 08 |
| 2 | Natural Disaster and Manmade disasters: Natural Disaster: Meaning and nature of natural disaster, Flood, Flash flood, drought, cloud burst, Earthquake, Landslides, Avalanches, Volcanic eruptions, Mudflow, Cyclone, Storm, Storm Surge, climate change, global warming, sea level rise, ozone depletion Manmade Disasters: Chemical, Industrial, Nuclear and Fire Hazards. Role of growing population and subsequent industrialization, urbanization and changing lifestyle of human beings in frequent occurrences of manmade disasters. | 15 |
| 3 | Disaster Management, Policy and Administration: Disaster management: meaning, concept, importance, objective of disaster management policy, disaster risks in India, Paradigm shift in disaster management. Policy and administration: Importance and principles of disaster management policies, command and co-ordination of in disaster management, rescue operations-how to start with and how to proceed in due course of time, study of flowchart showing the entire process. | 12 |
| 4 | Financing Relief Measures: Ways to raise finance for relief expenditure, role of government agencies and NGO's in this process, Legal aspects related to finance raising as well as overall management of disasters. Various NGO's and the works they have carried out in the past on the occurrence of various disasters, Ways to approach these teams. International relief aid agencies and their role in extreme events. | 13 |
| 5 | Preventive and Mitigation Measures: Pre-disaster, during disaster and post-disaster measures in some events in general structural mapping: Risk mapping, assessment and analysis, sea walls and embankments, Bio shield, shelters, early warning and communication Non Structural Mitigation: Community based disaster preparedness, risk transfer and risk financing, capacity development and training, awareness and education, contingency plans. Do's and don'ts in case of disasters and effective implementation of relief aids. | 12 |
| | Total | 60hrs |

- 1. ShailendraK.Singh: Safety & Risk Management, Mittal Publishers
- 2. J.H.Diwan: Safety, Security & Risk Management, APH
- 3. Stephen Ayers & Garmvik: Text Book of Critical Care, Holbook and Shoemaker
- 4. www.pdfdrive.net
- 5. www.khanacademy.org
- 6. www.acadeicearths.org
- 7. www.edx.org
- 8. www.open2study.com
- 9. www.academicjournals.org

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|-------------------------------|
| Course Code | GE 004 L |
| Name of the Course | HUMAN RIGHTS |

| Course objective | Students will comprehend on: 1. A branch of public international law, and relevant juridical mechanisms at global as well as regional levels, 2. Human rights as an object of study in history, philosophy and the social sciences, as well as a practical reality in national and international politics. 3. Different forms of promoting and implementing human rights, domestically as well as on the international level. 4. The role of human rights in contemporary issues relating to terrorism, religion, ethnicity, gender and development. 5. Cholarly values such as transparency, impartiality, clarity, reliance and the importance of sound reasoning and empirical inference. |
|------------------|---|
| Course outcomes | Student will be able to virtue: 1. identify, contextualise and use information about the human rights situation in a given country 2. critically appraise source material, including cases from human rights committees and tribunals and reports and summary records from treaty bodies 3. analyse a country's situation or an international situation in terms of human rights and formulate human rights-based initiatives and policies 4. Promote human rights through legal as well as non-legal means. 5. Participate in legal, political and other debates involving human rights in a knowledgeable and constructive way |

| Unit no. | Topics | No. of Hrs |
|----------|---|------------|
| 1 | Background: Introduction, Meaning, Nature and Scope, Development of Human Rights, Theories of Rights, Types of Rights | 08 |
| 2 | Human rights at various level: Human Rights at Global Level UNO, Human Rights – UDHR 1948 – UN Conventions on Human Rights: International Covenant on civil and Political Rights 1966, International Convent on Economic, Social and Cultural Right, Racial Discrimination -1966 International, Instruments: U.N. Commission for Human Rights, European Convention on Human Rights. | 15 |
| 3 | Human rights in India: Development of Human Rights in India, Human Rights and the Constitution of India, Protection of Human Rights Act 1993- National Human Rights Commission, State Human Rights Commission, Composition Powers and Functions, National Commission for Minorities, SC/ST and Woman | 12 |
| 4 | Human Rights Violations: Human Rights Violations against Women, Human Rights Violations against Children, 35 Human Rights Violations against Minorities SC/ST and Trans-genders, Preventive Measures. | 13 |
| 5 | Political issues: Political Economic and Health Issues, Poverty, Unemployment, Corruption and Human Rights, Terrorism and Human Rights, Environment and Human Rights, Health and Human Rights | 12 |
| | Total | 60hrs |

- 1. JagannathMohanty Teaching of Human sRights New Trends and Innovations Deep & Deep Publications Pvt. Ltd. New Delhi2009
- 2. Ram Ahuja: Violence Against Women Rawat Publications JewaharNager Jaipur.1998.
- 3. SivagamiParmasivam Human Rights Salem 2008
- 4. Hingorani R.C.: Human Rights in India: Oxford and IBA New Delhi.

| Name of the Programm | e M.Sc. Cardiac Care Technology |
|----------------------|---------------------------------|
| Course Code | MCCT111 |
| Name of the Course | DISSERTATION / PROJECT WORK |

- 1. Dissertation/Project work should be carried out as an individual Dissertation and actual bench work.
- 2. The students will carry independent project work under the supervision of the staff of Department on an advanced topic assigned to him/her. Inhouse projects are encouraged. Students may be allowed to carry out the project work in other Departmental laboratories /Research institutes /Industries as per the availability of Infrastructure.
- 3. Co guides from the other institutions may be allowed.
- 4. The Dissertation/Project work will begin from 3rd Semester, and will continue through the 4th Semester.
- 5. The Dissertation/Project report (also work book shall be presented at the time of presentation and viva voce) will be submitted at the end of the 4th Semester and evaluated.
- 6. Five copies of the project report shall be submitted to the Director, SBS.
- 7. For the conduct of the End Semester Examination and evaluation of Dissertation/Project work the University will appoint External Examiners.
- 8. Since the dissertation is by research, Dissertation/Project work carries a total of 250 marks and evaluation will be carried out by both internal and external evaluators.
- 9. The student has to defend his/her Dissertation/Project Work in a seminar which will be evaluated by a internal and external experts appointed by the University.
- 10. The assignment of marks for Project/Dissertation is as follows:

Part I-

Topic Selection, Review of Literature, Novelty of works-50 marks

Part-II-

- a. Continuous Internal Assessment, Novelty, Overall Lab Work Culture 100 Marks
- b. Dissertation/Project work book: 50 Marks
- c. Viva-Voce: 50 Marks
- d. However, a student in 4th semester will have to opt for general elective course from other related disciplines in addition to his Dissertation/Project work in the parent department.

MONITORING LEARNING PROGRESS

It is essential to monitor the learning progress of each candidate through continuous appraisal and regular assessment. It not only also helps teachers to evaluate students, but also students to evaluate themselves. The monitoring be done by the staff of the department based on participation of students in various teaching / learning activities. It may be structured and assessment be done using checklists that assess various aspects. Model Checklists are attached

The learning out comes to be assessed should include:

- i) **Journal Review Meeting (Journal Club):** The ability to do literature search, in depth study, presentation skills, and use of audio- visual aids are to be assessed. The assessment is made by faculty members and peers attending the meeting using a checklist (see Model Checklist -I)
- ii) **Seminars / Symposia**: The topics should be assigned to the student well in advance to facilitate in depth study. The ability to do literature search, in depth study, presentation skills and use of audio- visual aids are to be assessed using a checklist (see Model Checklist-II)
- iii) **Teaching skills**: Candidates should be encouraged to teach undergraduate medical students and paramedical students, if any. This performance should be based on assessment by the faculty members of the department and from feedback from the undergraduate students (See Model checklist III,)
- iv) **Work diary / Log Book** Every candidate shall maintain a work diary and record his/her participation in the training programmes conducted by the department such as journal, reviews, seminars, etc. Special mention may be made of the presentations by the candidate as well as details of experiments or laboratory procedures, if any conducted by the candidate.
- v) **Records**: Records, log books and marks obtained in tests will be maintained by the Head of the Department.

Checklist - I Model Checklist for Evaluation of Journal Review Presentations

| Name of the student: | Date: |
|--------------------------------|-------|
| Name of the Faculty/ Observer: | |

| S No. | Items for observation during presentation | | Belowavera ge | Average | Cood | Very Good |
|-------|---|---|------------------|---------|------|-----------|
| | | 0 | 1 | 2 | 3 | 4 |
| 1 | Article chosen was | | | | | |
| 2 | Extent of understanding of scope & objectives of the paper by the candidate | | | | | |
| 3 | Whether cross- references have been consulted | | | | | |
| 4 | Whether other relevant references have been Consulted | | | | | |
| 5 | Ability to respond to questions on the paper /subject | | | | | |
| 6 | Audio-visuals aids used | | | | | |
| 7 | Ability to defend the paper | | | | | |
| 8 | Clarity of presentation | | | | | |
| 9 | Any other observation | | | | | |
| | Total score | | | | | |

Checklist - II Model Checklist for Evaluation of the Seminar Presentations

| Name of the student: | Date: |
|--------------------------------|-------|
| Name of the Faculty/ Observer: | |

| S No. | Items for observation during presentation | | Belowavera ge | Average | Cood | Very Good |
|-------|---|---|------------------|---------|------|-----------|
| | | 0 | 1 | 2 | 3 | 4 |
| 1 | Article chosen was | | | | | |
| 2 | Extent of understanding of scope & objectives of the paper by the candidate | | | | | |
| 3 | Whether cross- references have been consulted | | | | | |
| 4 | Whether other relevant references have been Consulted | | | | | |
| 5 | Ability to respond to questions on the paper /subject | | | | | |
| 6 | Audio-visuals aids used | | | | | |
| 7 | Ability to defend the paper | | | | | |
| 8 | Clarity of presentation | | | | | |
| 9 | Any other observation | | | | | |
| | Total score | | | | | |

Checklist - III Model Checklist for Evaluation of Teaching Skill

| Name of the student: | Date: |
|--------------------------------|-------|
| | |
| Name of the Faculty/ Observer: | |

| S. No. | | Strong Point | Weak point |
|--------|---|--------------|------------|
| 1 | Communication of the purpose of the talk | | |
| 2 | Evokes audience interest in the subject | | |
| 3 | The introduction | | |
| 4 | The sequence of ideas | | |
| 5 | The use of practical examples and /or illustrations | | |
| 6 | Speaking style (enjoyable, monotonous, etc., specify) | | |
| 7 | Summary of the main points at the end | | |
| 8 | Ask questions | | |
| 9 | Answer questions asked by the audience | | |
| 10 | Rapport of speaker with his audience | | |
| 11 | Effectiveness of the talk | | |
| 12 | Uses of AV aids appropriately | | |

Curriculum for M.Sc. Cardiac Care Technology

MGM Institute of Health Sciences

Checklist - IV Model Check list for Dissertation / Project Work Presentations

| Name of the student: | Date: | | |
|--------------------------------|-------|--|--|
| | | | |
| Name of the faculty/ Observer: | | | |

| S No. | Points to be covered | | Belowavera ge | Average | Good | Very Good |
|-------|---|---|------------------|---------|------|-----------|
| | | 0 | 1 | 2 | 3 | 4 |
| 1 | Interest shown in selecting topic | | | | | |
| 2 | Appropriate review | | | | | |
| 3 | Discussion with guide and other faculty | | | | | |
| 4 | Quality of protocol | | | | | |
| 5 | Preparation of proforma | | | | | |
| | Total score | | | | | |

Curriculum for M.Sc. Cardiac Care Technology

MGM Institute of Health Sciences

Checklist - V

Continuous Evaluation of dissertation / project work by Guide/ Co-Guide

| Name of the student: | Date: | | |
|--------------------------------|-------|--|--|
| N. C.I. C. I. / O.I. | | | |
| Name of the faculty/ Observer: | | | |

| S No. | Points to be covered | | Belowavera ge | Average | Good | Very Good |
|-------|---|---|------------------|---------|------|-----------|
| | | 0 | 1 | 2 | 3 | 4 |
| 1 | Interest shown in selecting topic | | | | | |
| 2 | Appropriate review | | | | | |
| 3 | Discussion with guide and other faculty | | | | | |
| 4 | Quality of protocol | | | | | |
| 5 | Preparation of proforma | | | | | |
| | Total score | | | | | |

Checklist -VI

| Continuous Evaluation charge | of Directed Clinical Education (Clinical | al Posting) by Faculty in |
|------------------------------|--|---------------------------|
| Name of the student: _ | | Date: |
| Semester: | Name of the faculty/Observer: | |

| Core Competencies | 0 1 |
|---|--------------------------------|
| | Grade |
| Students will begin to develop critical thinking abilities utilizing the allied health personnel | Write a grade 1-4 in the boxes |
| roles of communicator and caregiver. Students will learn principles of professional allied | below |
| health personnel practice and provide direct care to individuals within a medical surgical setting while recognizing the diverse uniqueness of individuals with health alterations. | 3610 11 |
| | |
| I. Clinical Teaching | |
| a. Demonstrate beginning competency in technical skills. | |
| II. Independent Work by Student guided by faculty | |
| a. Develop effective communication skills (verbally and through charting) with patients, team members, and family | |
| b. Identify relevant data for communication in pre and post conferences | |
| c. Identify intra and inter-professional team member roles and scopes of practice. | |
| Establish appropriate relationships with team members. | |
| d. Identify need for help when appropriate to situation. Delegates level specific skills to | |
| appropriate team member. | |
| III. Hands on practical work by students | |
| a. Navigate and document clear and concise responses to care in the electronic health | |
| record for patient, where appropriate for clinical setting | |
| b. Protect confidentiality of electronic health records data, information, and knowledge of technology in an ethical manner | |
| IV. Independent work by student | |
| a. Maintain a positive attitude and interact with inter-professional team members, | |
| faculty, and fellow students in a positive, professional manner. Accept constructive | |
| feedback and develop plan of action for improvement. | |
| b. Demonstrate expected behaviours and complete tasks in a timely manner. Arrive to clinical experiences at assigned times. Maintain professional behaviour and | |
| appearance. | |
| c. Accept individual responsibility and accountability for nursing interventions, | |
| outcomes, and other actions. Engage in self evaluation & assumes responsibility for | |
| learning. | |

*Clinical evaluation tool guidelines for full descriptions of grades 1-4.
4-exceeds expectations (range of marks -40-50 marks)

3-meets expectations (range of marks –30-40 marks)

2-below expectations (range of marks –25-30 marks)

1-does not meet expectations (range of marks -no marks)

Curriculum for M.Sc. Cardiac Care Technology

MGM Institute of Health Sciences

| Name of the Programme | M.Sc. Cardiac Care Technology |
|-----------------------|--|
| Course Code | MCCT113 |
| Name of the Course | EDUCATIONAL TOUR /FIELD WORK/IV/HOSPITAL VISIT |

Resolution No. 4.4.1.3 of BOM-55/2018: Resolved to approve the revised syllabus of 'Research Methodology and Biostatistics' subject for all the PG courses (including 3 years) and to shift it in 2nd semester with effective from the batch admitted in the Academic Year 2018-19 onwards under MGM School of Biomedical Sciences. [Annexure-13]



Mansee Thakur <mansibiotech79@gmail.com>

Annexure-13

To compulsorily include in the BOS agenda

1 message

Registrar <registrar@mgmuhs.com>
6 September 2018 at 14:17
To: drravindrai@gmail.com, inamdar123456@gmail.com, ipseetamohanty@yahoo.co.in, jaishreeghanekar@gmail.com, drspravin22@gmail.com, dr_spravin@hotmail.com, sudhirkul1979@gmail.com, mansibiotech79@gmail.com, sbsnm@mgmuhs.com, rajani.kanade@gmail.com, mgmschoolofphyslotherapy@gmail.com, prabhadasila@gmail.com, mgmnewbombaycollegeofnursing@gmail.com, gashroff2006@gmail.com, rupalgshroff@yahoo.com, manjushreeb@yahoo.com, drshobhasalve@gmail.com, spdubhashi@gmail.com, javantkarbhase@gmail.com, veenashatolkar@gmail.com, sharathcrisp@gmail.com, mgmlpth@themgmgroup.com, anuradhamhaske@hotmail.com, principalconabad@gmail.com
Cc: registrarmgmihs@gmail.com, mgmihsaurangabad@gmail.com, dr.rajeshkadam07@gmail.com;

Dear Sir/Madam,

aradmin@mgmuhs.com

Please find attached herewith request from Dr. Rita Abbi, Professor, Biostatistics regarding Modification in the syllabus of 'Research Methodology and Biostatistics' subject and Proposal to make this subject compulsory in all the PG courses. You are requested go through this and include it in your agenda for forthcoming BOS in September, 2018.

Thanks and regards,

Dr. Rajesh B. Goel

Registrar

MGM Institute of Health Sciences, Navi Mumbai

(Deemed University u/s 3 of UGC act, 1956)

3rd Floor, MGM Educational Campus,

Plot No. 1 & 2, Sector -1, Kamothe,

Navi Mumbai - 410 209

Tel.; 022 - 27432471 / 27432994

Fax: 022 - 27431094

Email: registrar@mgmuhs.com

Website: www.mgmuhs.com

Modification in the syllabus of Research Methodology and Biosta.pdf 2261K

MGM SCHOOL OF BIOMEDICAL SCIENCES, NAVI MUMBAI

(A constituent unit of MGM INSTITUTE OF HEALTH SCIENCES)

(Deemed University u/s 3 of UGC Act 1956)

Grade "A" Accredited by NAAC

Sector 1, Kamothe Navi Mumbai-410209, Tel.No.:022-27437631,27432890

Email. sbsnm@mgmuhs.com / Website: www.mgmsbsnm.edu.in

To.

7-6-2018

The Director MGM School of Biomedical Sciences Kamothe.

Navi Mumbai - 410 209

Subject: Modification in the syllabus of 'Research Methodology and Biostatistics'
Subject and Proposal to make this subject compulsory in all the PG courses

Dear Madam,

Research Methodology and Biostatistics subject is a significant tool for academic research. It has been observed that majority of post graduate courses have this subject as a part of their course work. There is a need to modify the curriculum of 'Research Methodology and Biostatistics subject' due to the following reasons:

- 1. While going through the Research Methodology and Biostatistics syllabus it was found that in some courses more weightage was given to computer hardware e.g. History and development of computers(old pattern) which may not be needed now as we have witnessed the revolution in Information Technology, Students should be taught latest technology and software.
- 2. Secondly, in most of the syllabi 'Vital Statistic' is missing which is an important topic for healthcare field. Some of the essential topics like 'Normal distribution' etc are missing.
- 3. By streamlining the syllabus it will save teacher's teaching time, paper setting time. Moreover, Exam section need not call multiple examiners for the same subject, this will be economical for exam section.

This subject is well recognized as an essential tool in medical research, clinical decision making, and health management. It is recommended to streamline the syllabus and make Research Methodology and Biostatistics' compulsory in all the post graduate courses of School Biomedical Sciences. The modified syllabus is enclosed.

This is for your kind perusal and necessary action please.

With regards,

Dr. Rita Abbi

Professor, Biostatistics

Copy for information to

Registrar MGMIHS Navi Mumbai;

Hon'ble Vice Chancellor, MGMIHS Navi Mumbai

Hon'ble Medical Director, MGM Medical College

MI chair persons 50 all brown 31

BOS -> Faculty >> Academic

Commiss.

27/6

MGM Institute Of Health Sciences
NWARD NO. 5720

DATE: 25/6/1/8

2716

MGM INSTITUTE OF HEALTH SCIENCES

M. Sc. Students

Syllabus for Research Methodology and Biostatistics

| | | No. of | Hours |
|---|---|--------|---|
| | I. Research Methodology: | Theory | Practical |
| 1 | Scientific Methods of Research: Definition of Research, Assumptions, Operations and Aims of Scientific Research. Research Process, Significance and Criteria of Good Research, Research Methods versus Methodology, Different Steps in Writing Report, Technique of Interpretation, Precaution in interpretation, Significance of Report Writing, Layout of the Research Report | 5 | N. A. |
| 2 | Research Designs: Observational Studies: Descriptive, explanatory, and exploratory, Experimental Studies: Pre-test design, post-test design, Follow-up or longitudinal design, Cohort Studies, Case Control Studies, Cross sectional studies, Intervention studies, Panel Studies. | 5 | |
| 3 | Sampling Designs: Census and Sample Survey, Implications of a Sample Design, Steps in Sampling Design Criteria of Selecting a Sampling Procedure, Characteristics of a Good Sample Design, Different Types of Sample Designs (Probability sampling and non probability sampling), How to Select a Random Sample?, Systematic sampling, Stratified sampling, Cluster sampling, Area sampling, Multi-stage sampling, Sampling with probability proportional to size, Sequential sampling. | 5 | 4 |
| 4 | Measurement in research: Measurement Scales, Sources of Error in Measurement, Tests of Sound Measurement, Technique of Developing Measurement Tools, Scaling Meaning of Scaling, Scale Classification Bases, Important Scaling Techniques, Scale Construction Techniques, Possible sources of error in measurement, Tests of sound measurement | 5 | 5 |
| 5 | Methods of Data Collection: Types of data, Collection of Primary Data, Observation Method, Interview Method, Collection of Primary Data | 5 | 3 |
| 6 | Sampling Fundamentals : Need and importance for Sampling, Central Limit Theorem, Sampling Theory, Concept of Standard Error, Estimation, Estimating the Population Mean Estimating Population Proportion, Sample Size and its Determination, Determination of Sample Size through the Approach Based on Precision Rate and Confidence Level. | 5 | 3 |
| | II. Biostatistics | | |
| | Data Presentation : Types of numerical data: Nominal, Ordinal, Ranked, Discrete and continuous. Tables: Frequency distributions, Relative frequency, Graph: Bar charts, Histograms, Frequency polygons, one way scatter plots, Box plots, two way scatter plots, line graphs | 3 | 4 |
| 2 | Measures of Central Tendency and Dispersion: Mean, Median, Mode Range, Inter quartile range, variance and Standard Deviation, Coefficient of variation, grouped mean and grouped standard deviation (including merits and demerits). | 3 | 4 |

| | Total hours | 60 | 60 |
|--|---|----|----|
| Importing data from excel, access, take coding and recoding a categorical and variables, sorting & filtering, merging Frequencies, descriptive statistics, crobar chart, pie chart, scatter diagram, be hypothesis-one sample, Independent a | ss tabulations Diagrammatic procentation in the Later | 3 | 6 |
| Gross Reproduction Rate, Net R Death Rate (CDR), Age-specific related to morbidity. | rement of Population: rate, crude rate, specific rate, c fertility rate, Total fertility rate, Reproduction rate, eproduction Rate, Measures related to mortality: Crude death Rate, Infant and child mortality rate, Measures | 4 | |
| U test Kruskal Walli's test, Fried | Rank Test, Wilcoxon Rank Sum Test: Mann-Whitney lman's test, and Spearman Correlation test. | 3 | |
| Square Design Analysis of Co-v | ariance: Analysis of Variance (ANOVA):Concept and ANOVA, Two-way ANOVA, ANOVA in Latingrariance (ANOCOVA), ANOCOVA Technique. | 4 | 1 |
| Yates' Correction, and Coeffici Measures of Relationship: No Analysis | ed and meaning, Correlation and Simple Regression | | 2 |
| transformationImportant Paran Testing for Differences betwee Related Samples, Hypothesis T between Proportions, Hypothes Hypothesized Population Varia Populations. | nition, Basic Concepts, Procedure for Hypothesis Testing, othesis Test, Normal distribution, data netric Tests, Hypothesis Testing of Means, Hypothesis in Means, Hypothesis Testing for Comparing Two festing of Proportions, Hypothesis Testing for Difference his Testing for Comparing a Variance to Some ince, Testing the Equality of Variances of Two Normal | | 6 |

 $\mathcal{L}_{\mathrm{constant}}$

trong on

Resolution No. 4.13 of BOM-55/2018: Resolved as follows:-

- (i) Slow learners must be re-designated as potential learners.
- (ii) Students scoring less than 35% marks in a particular subjects/course in the 1st formative exam are to be listed as potential learners. These learners must be constantly encouraged to perform better with the help of various remedial measures.
- (iii) Students scoring more than 75% marks in a particular subjects/course in the 1st formative exam are to be listed as advanced learners. These learners must be constantly encouraged to participate in various scholarly activities.

Resolution No. 3.1.4.2 of BOM-57/2019:

- i. Resolved to include "Gender Sensitization" into UG (from new batch 2019-2020) and PG (from existing batches) curricula. [Annexure-21]
- **ii.** Resolved to align the module of "Gender Sensitization" with MCI CBME pattern for MBBS students.
- iii. Resolved that Dr. Swati Shiradkar, Prof., Dept. of OBGY., MGM Medical College, Aurangabad will coordinate this activity at both campuses.

Annexure - 21

Gender sensitization for UG (2nd, 3rd, 8th semesters) and PG (3 hours)

INCLUSION OF "GENDER SENSATIZATION" IN CURRICULUM

Introduction:

The health care provider should have a healthy gender attitude, so that discrimination, stigmatization, bias while providing health care will be avoided. The health care provider should also be aware of certain medico legal issues related with sex & gender.

Society particularly youth & adolescents need medically accurate, culturally & agewise appropriate knowledge about sex, gender & sexuality. So we can train the trainers for the same. It is need of the hour to prevent sexual harassment & abuse .

To fulfill these objectives, some suggestions are there for approval of BOS.

Outline

- 1)For undergraduates :- Three sessions of two hours each, one in 2nd term, one in 3rd term & one in 8th term.
- 2) For Faculties and postgraduates: One session of two hrs.
- 3)For those want to be trainers or interested for their ownself, value added course, which is optional about sex, gender, sexuality & related issues.

Responsibility

ICC of MGM, MCHA , with necessary support from IQAC & respective departments.

Details of undergraduate sessions

1)First session in 2nd term

Aim - To make Students aware about the concept of sexuality & gender.

To check accuracy of knowledge they have,

To make them comfortable with their own gender identify & related issues.

To make them aware about ICC & it is functioning.

Mode – Brain storming, Interactive power point presentation experience sharing.

Duration – Around two hours

Evaluation – Feedback from participants.

2)Second session in 3rd / 4th term

Aim – To ensure healthy gender attitude in these students as now they start interacting with patients.

To ensure that the maintain dignity privacy while interacting with patients and relatives, particularly gender related.

To make them aware about importance of confidentiality related with gender issues.

To encourage them to note gender related issues affecting health care & seek solutions.

Mode – focused group discussions on case studies, Role plays & discussion.

--3--

Duration – Around two hours.

Evaluation – Feedback from participants.

Third session in 8th term.

Aim – To understand effect of gender attitudes on health care in various subjects.

To develop healthy gender attitude while dealing with these issues.

Mode – Suggested PBL by departments individually. (In collaboration with ICC till faculty sensitization is complete)

Evaluation – Feedback

FOR POSTGRADUATES

Session of 2-3 hrs preferably in induction program.

Aim – To introduce medically accurate concept of gender, sex, gender role & sex role.

To ensure healthy gender attitude at workplace.

To understand gender associated concepts on health related issues & avoid such bias wile providing health care.

To make them aware about ICC & it's functioning.

Mode – Interactive PPT

Role plays & discussion

Duration – 2 to 3 hrs

Evaluation – Feedback.

FOR FACULTIES

Session of 2 hours may be during combined activities.

Aim – To ensure clarity of concept abut gender & sex.

To discuss effect of these concept on health related issues.

To identify such gender & sex related issues in indivual subject specialties.

To discuss methodology like PBL for under graduate students when whey are in 7^{th} - 8^{th} semester.

Mode – Role play

Focused group discussion

Case studies

Evaluation – Feed back.

Sdp-Pimple/joshi-obgy

Resolution No. 3.2.1.6.a of BOM-57/2019: Resolved to allot 50 marks for Internal Assessment in Industrial Visit for all the batches under CBCS pattern - M.Sc. (2 year) & MHA program.

Resolution No. 3.2.1.6.d of BOM-57/2019: Resolved that in "Rules & Regulation of Exam for PG Student (CBCS)" to keep "10 marks for Viva instead of 5 marks and no marks for journal" in the final university exam for PG students (M.Sc. 02 years CBCS pattern) admitted from Academic Year 2019-20 onwards.

Resolution No. 4.3.1.2 of BOM-63/2021: Resolved to include topics related to COVID 19 in UG {B.Sc. AT & OT (BOTAT 108L), B.Sc. MLT(BMLT 108 L), B.Sc. MRIT (BMRIT 108L), B.Sc. MDT-(BMDT 108L), B.Sc. CCT (BCCT 108L), B.Sc.PT (BPT 108L), B.Optometry (BOPTOM 108L) Programs for Batch AY 2020-21 (Semester II)} & B.Sc. Medical Laboratory Technology SEMESTER-VI in subject of Medical Microbiology-II (BMLT 125 L) & Medical Microbiology-II (BMLT 125 P) for Batch AY 2020-21. [Annexure-7] Further Dr. N.N. Kadam, Hon'ble Pro Vice Chancellor suggested to add topics under "Newer Infectious Diseases" as the main topic.

Annexure-07 of BOM-63/2021 dt 17.02.2021

To include Covid-19 topics in health professional curriculum as per the BOM Resolution No. 3.7 of BOM-62/2020

 a) M.Sc. (PG Program), (M.Sc. Medical Biotechnology, M.Sc. Medical Genetics, M.Sc. Biostatistics, M.Sc. Molecular Biology, M.Sc. MRIT, M.Sc. CCT, M.Sc. Clinical Nutrition, M.Sc. Clinical Embryology, Master in Hospital Administration, Master of Public Health, and M.Optometry)

| Approved syllabus | Name of the | Existing content | Proposed changes |
|----------------------|-------------|-------------------------|--------------------------|
| | subject | | |
| Common Syllabus | BIOETHICS, | Sr. no. 2 | Sr. no. 2 |
| for Semester IV – | BIOSAFETY, | Introduction to | Introduction to quality |
| 2 year M.Sc. | IPR & | quality assurance, | assurance, accreditation |
| programs (M.Sc. | TECHNOLOGY | accreditation & | & SOP writing |
| Medical | TRANSFER | SOP writing | :Concept of ISO |
| Biotechnology, | | :Concept of ISO | standards and |
| M.Sc. Medical | GE 002 L | standards and | certification, National |
| Genetics, M.Sc. | | certification, | regulatory body for |
| Biostatistics, M.Sc. | | National | accreditation, Quality |
| Molecular Biology, | | regulatory body | parameters, GMP & |
| M.Sc. MRIT, M.Sc. | | for accreditation, | GLP, Standard |
| CCT, M.Sc. | | Quality | operating procedures, |
| Clinical Nutrition, | | parameters, GMP | Application of QA in |
| M.Sc. Clinical | | & GLP, Standard | field of genetics, Data |
| Embryology, | | operating | management of clinical |
| Master in Hospital | | procedures, | and testing laboratory, |
| Administration, | | Application of QA | WHO & CDC, ICMR |
| Master of Public | | in field of | guidelines for |
| Health, and | | genetics, Data | Biosafety and |
| M.Optometry) | | management of | Vaccines with regards |
| | | clinical and testing | COVID 19 |
| | | laboratory | |

Resolution No. 4.3.1.3 of BOM-63/2021: Accorded post facto approval for changes in the index of UG (B.Sc. AT & OT, B.Sc. MLT, B.Sc. MRIT, B.Sc. MDT, B.Sc. CCT, B.Sc.PT, B. Optometry) and PG 2 year (M.Sc. Medical Biotechnology, M.Sc. Medical Genetics, M.Sc. Biostatistics, M.Sc. Molecular Biology, M.Sc. MRIT, M.Sc. CCT, M.Sc. Clinical Nutrition, M.Sc. Clinical Embryology, Master in Hospital Administration, Master of Public Health, and M.Optometry). **[Annexure-8A, 8B]**

OUTLINE OF COURSE CURRICULUM M.Sc.Cardiac Care Technology

| | | | | | Seme | ster I | | | | | | | | |
|-------------|--|----------------|-----------------|---------------|---|----------------------|----------------|-----------------|------------------|---|-----------------|------------------------------|---|-------|
| | | | | Credits/W | eek | | | I | Hrs/Semester | Marks | | | | |
| Code No. | Core Subjects | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total Credits (C) | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total (hrs.) | Internal Assement (IA) | University semester Exam (UEX)/ Internal Semester Exam (INT) | Total |
| | | | | | The | ory | | | | | | | | |
| MCCT 101 L | Introduction to Clinical Cardiology | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 (UEX) | 100 |
| MCCT 102 L | Fundamentals of Cardiac Diagnostic Procedures and Investigations | 3 | 1 | - | - | 4 | 45 | 15 | - | - | 60 | 20 | 80 (UEX) | 100 |
| MCCT 103 L | Introduction to Pacing and Electrophysiology Study Techniques | 3 | 1 | - | - | 4 | 45 | 15 | - | - | 60 | 20 | 80 (UEX) | 100 |
| MCCT 104 CP | CCT Directed Clinical Education-I | - | - | - | 21 | 7 | - | - | - | 315 | 315 | - | 50 (INT) | 50 |
| | | | | | Prac | tical | | | | | | | | |
| MCCT 101 P | Introduction to Clinical Cardiology | , | - | 4 | - | 2 | - | - | 60 | - | 60 | 10 | 40 (UEX) | 50 |
| MCCT 102 P | Fundamentals of Cardiac Diagnostic Procedures and Investigations | - | - | 4 | - | 2 | - | - | 60 | - | 60 | 10 | 40 (UEX) | 50 |
| | Total | 10 | 2 | 8 | 21 | 23 | 150 | 30 | 120 | 315 | 615 | 80 | 370 | 450 |

| | | | OUTI | LINE O | F COU | RSE CUR | RICUI | LUM | | | | | | |
|------------|--|----------------|-----------------|------------------|---|----------------------|----------------|-----------------|------------------|---|-----------------|------------------------------|--|-------|
| | | | | M.Sc.C | ardiac C | are Techn | ology | | | | | | | |
| | | | | | Seme | ster II | | | | | | | | |
| | | | | Credits/V | Veek | | |] | Hrs/Semeste | r | | | Marks | |
| Code No. | Core Subjects | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total Credits (C) | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total (hrs.) | Internal Assement (IA) | University semester Exam (UEX)/ Internal Semester Exam (INT) | Total |
| | | | | | Th | eory | | | | | | | | |
| MCCT 105 L | Introduction to Non-Invasive Techniques in Cardiology | 4 | - | - | - | 4 | 60 | 0 | - | - | 60 | 20 | 80 (UEX) | 100 |
| MCCT 106 L | Invasive Cardiology | 3 | 1 | - | - | 4 | 45 | 15 | - | - | 60 | 20 | 80 (UEX) | 100 |
| MCCT 107 L | CCT Directed Clinical Education-II | | - | - | 33 | 11 | 0 | - | - | 495 | 495 | - | 50 (INT) | 50 |
| CC 001 L | Research Methodology & Biostatistics (Core Course) | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 (UEX) | 100 |
| | | | | | Pra | ctical | | | | | | | | |
| MCCT 105 P | Introduction to Non-Invasive Techniques in Cardiology | - | - | 4 | - | 2 | - | - | 60 | 60 | 60 | 10 | 40 (UEX) | 50 |
| MCCT 106 P | Invasive Cardiology | - | - | 4 | - | 2 | - | - | 60 | 60 | 60 | 10 | 40 (UEX) | 50 |
| CC 001 P | Research Methodology & Biostatistics (Core Course) | • | - | 4 | - | 2 | - | - | 60 | - | 60 | 10 | 40 (UEX) | 50 |
| | | | | | Core Elec | tive Course | | | | | | | | |
| CEC 001 L | Basics of Clinical Skill Learning | 3 | | | | 3 | 45 | | | | 45 | | 100 (INT) | 100 |
| CEC 002 L | Hospital Operation Management | 3 | - | - | - | 3 | 43 | - | | - | 45 | - | 100 (1111) | 100 |
| | Total | 14 | 1 | 12 | 33 | 32 | 210 | 15 | 180 | 615 | 900 | 90 | 510 | 600 |

OUTLINE OF COURSE CURRICULUM

M.Sc. Cardiac Care Technology

| | | | | | Se | emester III | | | | | | | | |
|-------------|--|----------------|-----------------|------------------|---|----------------------|----------------|-----------------|---------------|---|-----------------|------------------------------|---|-------|
| | | | | Credits/W | eek | | |] | Irs/Semeste | r | | | Marks | |
| Code No. | Core Subjects | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total Credits (C) | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total (hrs.) | Internal Assement (IA) | University semester Exam (UEX)/ Internal Semester Exam (INT) | Total |
| | Theory | | | | | | | | | | | | | |
| MCCT 108 L | Echocardiography- Advanced | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 (UEX) | 100 |
| MCCT 109 L | Quality Assurance, Standardization & Accreditation (Cardiac Care) | 4 | - | - | - | 4 | 60 | - | - | - | 60 | 20 | 80 (UEX) | 100 |
| MCCT 110 CP | CCT Directed Clinical Education-III | - | - | - | 21 | 7 | - | - | - | 405 | 405 | - | 50 (INT) | 50 |
| MCCT 111 | Dissertation / Project* | 10 | - | - | - | 5 | - | - | - | • | - | - | 50 (INT) | 50 |
| | Practical | | | | | | | | | | | | | |
| MCCT 108 P | Echocardiography- Advanced | - | - | 4 | - | 2 | - | - | 120 | - | 120 | 10 | 40 (UEX) | 50 |
| | Seminar | | | | | | | | | | | | | |
| MCCT 112 | Seminars | - | - | - | - | 1 | - | - | - | - | - | - | 50 (INT) | 50 |
| | Total | 18 | 0 | 4 | 21 | 23 | 120 | 0 | 120 | 405 | 645 | 50 | 350 | 400 |

OUTLINE OF COURSE CURRICULUM

| | M.Sc. Cardiac Care Technology | | | | | | | | | | | | | |
|----------|--|----------------|-----------------|---------------|---|----------------------|----------------|-----------------|---------------|---|-----------------|------------------------------|--|-------|
| | | | | | Se | mester IV | | | | | | | | |
| | | | | Credits/W | eek | | | I | Irs/Semeste | er | | | Marks | |
| Code No. | Core Subjects | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total Credits (C) | Lecture (L) | Tutorial (T) | Practical (P) | Clinical Posing/ Rotation (CP) | Total (hrs.) | Internal Assement (IA) | University semester Exam (UEX)/ Internal Semester Exam (INT) | Total |
| | Theory (General Elective) | | | | | | | | | | | | | |
| GE 001 L | Pursuit of Inner self Excellence (POISE) | | | | | | | | | | | | | |
| GE 002 L | Bioethics, Biosafety, IPR and Technology Transfer | , | | | | 4 | 60 | | | | 60 | | 100 (TNTT) | 100 |
| GE 003 L | Disaster Management and Mitigation Resources | * | - | - | - | 4 | 00 | - | - | - | 00 | - | 100 (INT) | 100 |
| GE 004 L | Human Rights | | | | | | | | | | | | | |
| | Practical | | | | | | | | | | | | | |
| MCCT 111 | Dissertation / Project | - | - | 36 | - | 18 | - | - | - | - | - | - | 200 (UEX) | 200 |
| MCCT 113 | Educational Tour / Field Work/IV/Hospital Visit | - | - | - | - | 2 | - | - | - | - | - | - | 50 (INT) | 50 |
| | Total | 4 | 0 | 36 | 0 | 24 | 60 | 0 | 0 | 0 | 60 | 0 | 350 | 350 |

Resolution No. 3.5 of AC-41/2021: Resolved to incorporate the changes as per the decision of the CBCS committee in PG M.Sc. Cardiac Care Technology with effect from the batch admitted in 2020-21 onwards

| 12.1 : Minutes of CBCS meeting | Decision taken by CBCS Committee: |
|---|---|
| held on 3.02.2021 | Members agreed that all courses (core, elective, seminar, clinical |
| | posting etc) in all programs with CBCS curriculum under MGM |
| I. Courses titled as elective, seminar, | School of Biomedical Sciences (MGMSBS-UG & PG), MSc |
| clinical posting etc. will be evaluated | Medical Programme under MGM Medical College and MGM |
| at university level, only: | School of Physiotherapy (MGMSOP) (BPT & MPT) will be |
| | evaluated at the level of the University at the end during semester |
| | examination. (Detailed included as 1, 2,3,4 points) |
| 1. Courses which were evaluated at | MGM School of Biomedical Sciences (MGMSBS-UG) :First year |
| constituent units titled as elective, | B.Sc. (Semester I & Semester II) (core-1.1 & 1.2) and (elective-1.3) |
| seminar, clinical posting etc. will be | common for all seven programs (B.Sc. DT, B.Sc. AT & OT, B.Sc. |
| 1 | CCT, B.Optometry, B.Sc. PT, B.Sc. MRIT, B.Sc. MLT) which |
| evaluated at university level for UG | were having 100 marks previously will be changed to 50 marks (40 |
| & PG of MGMSBS, Navi Mumbai: | marks university Semester End Exam-(SEE) and 10 marks Internal |
| | Assessment – (IA) as per below format - 1.4) w.e.f AY 20-21. |
| | (Annexure 1) |
| | Clinical Directed posting allotted 50 marks will be assessed as |
| | university end semester exam w.e.f AY 20-21. (Annexure 1.1) |
| | (request to add |
| | a) evaluation pattern of seminar - 50 marks– BSc Dialysis- sem |
| | IV |
| | b) Boptometrysem III – course : geometrical optics and visual |
| | optics I/II |
| | sem IV – optometric instrumentation |
| | 10 IA + 40 SEE – format submitted) |
| | 2.1 Courses which were evaluated at constituent units titled as |
| | elective, seminar, clinical posting etc. will be evaluated at |
| | university level. |
| | Members agreed that all courses (core, elective, seminar, clinical |
| | posting etc) in all programs with CBCS curriculum under MGM |
| | School of Biomedical Sciences (MGMSBS- PG), will be evaluated |
| | at the level of the University end semester examination w.e.f. AY |
| | 2020-21. |
| | * For PG program (M.Sc. 2 year including allied program, MHA, |
| | MPH) having courses like seminar/education tour & Industrial visit |
| | which were allotted 50 marks will be assessed as university end |
| | semester exam. |
| | a. Amended 10 marks in seminar (Annexure-2.1A) |
| | b. Amended 20 marks for Educational Tour/Field Work/Hospital |
| | Visit/ Industrial Visit (Annexure-2.1B) |
| | c. 50 marks for Clinical Directed Posting (no change) (Annexure- |
| | 2.1C) |
| | (request to add the evaluation pattern for MPH – sem I,II, III) |
| | MOptometry – Sem I – evaluation pattern to be added) |
| | |
| | 2.2 PG Courses which were evaluated at constituent units titled as |
| | elective carrying 100 marks as only similar to that of core courses, |
| | will be evaluated at university level. Similar pattern which is being |
| 1 | |
| | followed for core Subjects (IA - 20 Marks + university exam - 80 |
| | followed for core Subjects (IA - 20 Marks + university exam - 80 marks) will be followed.(Annexure-2.2) |

Resolution No. 10.4 of Academic Council (AC-42/2022):

i) "Resolved to accept "50% eligibility in internal assessment" pattern for all the CBCS programs (UG & PG) running under the constituent units of MGMIHS.(MGM School of Biomedical Sciences, MGM School of Physiotherapy, MGM Medical College (M.Sc. Medical 3 year courses).

This will be applicable to all existing batches (for remaining regular examinations) and forthcoming batches from June 2022 onwards"

Resolution No. 3.10 of Academic Council (AC-49/2024):

Resolved and approved to collect the Dissertations/Projects 60 days before the University examination for all 2-year M.Sc. programs under MGM School of Biomedical Sciences to fulfil the credit allotted for project work, to be effective from batch 2023-24 onwards.



MGM INSTITUTE OF HEALTH SCIENCES

(Deemed to be University u/s 3 of UGC Act, 1956)

Grade 'A' Accredited by NAAC

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