GUIDELINES FOR APPLICATION

FOR

SIX MONTHS TRAINING IN ULTRASONOGRAPHY

"FUNDAMENTALS OF ABDOMINO-PELVIC ULTRASONOGRAPHY: LEVEL ONE: FOR MBBS DOCTORS"

&

FOR

COMPETENCY BASED EVALUATION

(FOR EXISTING REGISTERED MEDICAL PRACTITIONERS REGISTERED FOR ULTRASONOGRAPHY UNDER PCPNDT ACT)

IN
GOVT. / ACCREDITED MEDICAL COLLEGES OF ODISHA

(As per the Pre-conception and Pre-Natal Diagnostic Techniques (Prohibition of Sex Selection) (Six months Training) Rules, 2014.)

(Approved by Govt. vide G.O. No. ME-II-M-21/2014- 4313/H Dt. 26.02.2015)

IMPORTANT DATES

Date of publication of prospectus in website	26.02.2015
Last date of receipt of application	14.03.2015
Date of publication of panel list	24.03.2015
Date of admission	31.03.2015
Date of commencement of course	03.04.2015

NB: All the information/intimations/allotment etc. relating to this training will be available in the website of DMET (O) i.e. www.dmetorissa.gov.in. All candidates are requested to be in touch with the website. Authorities are not responsible for any postal delay.

GUIDELINES

FOR SIX MONTHS TRAINING IN ULTRASONOGRAPHY "FUNDAMENTALS OF ABDOMINO-PELVIC ULTRASONOGRAPHY: LEVEL ONE: FOR MBBS DOCTORS"

A. INTRODUCTION:

Applications are invited from eligible MBBS doctors of state, who have qualified the AIPGMEE 2014, but not admitted to any PG course, for six months training in Ultrasonography namely "The Fundamentals of Abdomino-Pelvic Ultrasonography: level one for MBBS doctors", in Govt./accredited Medical Colleges of Odisha.

An Ultrasonography Selection Committee is constituted as under for selection of candidates for training. The members are:

DMET, Odisha - Chairman
 Addl. Secretary to Govt. H & FW, Odisha - Member
 Director Family Welfare, Odisha. - Member
 Dean & Principal, SCB MCH Cuttack. - Member
 Dean & Principal, MKCG MCH Berhampur. - Member
 Dean & Principal, VSS MCH Burla. - Member

Jt. DMET Odisha - Member Convener

Dy. DMET Odisha - Coordinator

The Committee will function in the office of the DMET, Odisha, and will carry out the following works.

- a. The Chairman will be the controlling & supervising authority and must see that the counseling and admission are done in strict conformity with the laws laid down. He will approve the budget of expenditure and will release funds in time for smooth selection and admission.
- b. The Convener is authorized to float advertisements, convene meetings, and conduct selection and allotment of seats strictly as per the guidelines in consultation with the Selection Committee members. He is the custodian of all documents including vouchers of expenditure of counseling process and will produce them as and when required. He will file affidavits in legal matters on behalf of the Chairman, Selection Committee.

B. ELIGIBILITY:

- 1. The candidate must have passed MBBS from any MCI recognized institution and have registered under any State Council of Medical Registration or MCI.
- 2. The candidate must be a permanent resident of Odisha.

C. CATEGORY OF CANDIDATES

There will be two category of candidates namely Direct & in-service. 20% of total seats will be reserved for in-service candidates.

- A Direct Candidate is one who at the time of application is either unemployed or under employment of Government of Odisha/PSU, but not completed 3 years' service which includes all categories of employment like contractual/ temporary / ad-hoc/ regular by 31st December, 2014.
- 2. An In-service candidate is one who at the time of application is under employment in Government of Odisha/Govt. of Orissa Public Sector Undertakings/Govt. of India Public Sector Undertakings located in Odisha and has completed a length of 3 years of service including contractual, temporary, or ad-hoc or regular by 31st December, 2014, excluding at-a-stretch leave of any kind, of 30 days or more. However the maternity leave is exempted from this exclusion and shall be counted towards the length of three years of service.

D. NAME OF THE COURSE:

The name of the six months training in Ultrasonography course shall be "The Fundamentals of Abdomino-Pelvic Ultrasonography: level one for MBBS Doctors"

E. DURATION OF THE TRAINING:

The duration of the training shall be six months with minimum of 300 hours. There may be two spells of training per year as per availability of candidates. Training will be done under the supervision HOD Radiology and he/she will be the training coordinator. The theory and practical classes will be taken both in Radiology and O & G Departments.

F. NAME OF ACCREDITED INSTITUTIONS FOR TRAINING:

The following institutions are accredited for such training.

- 1. SCB Medical College & Hospital Cuttack.
- 2. MKCG Medical College & Hospital, Berhampur.
- 3. VSS Medical College & Hospital, Burla.
- 4. IGH, Rourkela

Training will be imparted in the department of Radiology and O & G of above institutions. N.B: Any other institution if subsequently accredited by Govt. will also be included for training.

G. NUMBER OF SEATS

Name of College	Total
SCB Medical College & Hospital Cuttack.	10
MKCG Medical College & Hospital, Berhampur.	10
VSS Medical College & Hospital, Burla.	10
IGH Rourkela.	03
Total	33

NB: Intake of candidates will be on basis of 1:1 student-PG teacher ratio. The PG teachers of department of Radiology and O & G can be the faculty for such type of training. If subsequently the number of PG teacher is reduced due to any reason then the above intake capacity will be reduced.

H. RESERVATION

20% of total seats will be reserved for candidates who are in State Govt./ State Govt. Undertakings service and have completed 3 years of service of any type (regular/ contractual/ adhoc/ temporary) excluding at a stretch leave of 30 days or more (except maternity leave). If seats in in-service category remain vacant, it will be filled up by Direct category candidates and vice versa.

I. FEE STRUCTURE

The training fee shall be, Rs. 20,000/, to be deposited in the office of the Dean & Principal of the concerned institution at the time of joining.

J. SUBMISSION OF APPLICATION

Candidates shall download the application form annexed in this prospectus and apply duly filled in application along with all requisite documents. They have to deposit a sum of Rs. 1000/- in any branch of SBI in the enclosed SBI Challan Form and submit the original DMET' Copy of the challan along with the application form towards application fee. The application fee is not refundable under any circumstances. The envelope containing the application form must be superscribed as "APPLICATION FOR SIX MONTHS USG TRAINING" and should be sent to the "Convener, Jt. Director, DMET, Odisha, HOD Bhubaneswar, 751001" by speed post/courier, so as to reach on or before 14.03.2015. by 5.00 PM. Applications incomplete or received late will be rejected. Multiple applications submitted in a single envelope will not be entertained.

K. SELECTION

Selection shall be made strictly on the basis of marks secured in the AIPGMEE 2014 and the choice of institution opted. A panel list of eligible applicants on merit will be prepared out of which candidates will be given training, batch wise (33 candidates per batch). Such panel list will be valid for one year from the date of publication of panel list.

L. EVALUATION & CERTIFICATE

On completion of six months training the candidates have to appear for a competency based evaluation (final examination). On successful completion of the evaluation a certificate to the effect will be issued by the Dean & Principal of the institution. Such certificates will be applicable for obtaining new registration /renewal under the PC&PNDT Act in all States.

SCHEME OF EXAMINATION:

Theory Assessment (FM 100) – 2 hours written exam. Minimum pass mark - 50

- a. 50 MCQs 1 mark each- 50 marks
- b. 10 short answerer questions of 5 marks each 50 marks

Practical Assessment (FM 100) – minimum pass mark - 60

a. Log book –
b. Demonstration –
c. Viva –
20marks
50 marks
30 marks

(Three case situations on Clinico- sonographic co-relation, video clip, and case studies)

M. SYLLABUS

The detail syllabus will be available in the Radiology Department of the Institution.

N. WEEDING OUT RULE

The documents related to the selection and allotment will be kept reserved till 31.12.2016.

O. MISCELLANEOUS

- a. In all matters relating to eligibility or otherwise of a candidate for undergoing training the decision of the Chairman Selection Committee shall be final.
- b. The candidates who are serving under Govt./Govt. undertakings and will undergo such training, the period of training will be treated as duty and salary will be paid.
- c. No stipend will be paid during the training period.
- d. The candidates are to abide by the rules and regulations of the institution.
- e. During training hours private practice of any kind is strictly prohibited. If anybody is found to be indulged in such activities, legal action as deemed proper will be taken against him/her.
- f. Candidates must have 95% attendance in training for appearing in the final competency bases evaluation.

FORM-1

APPLICATION FORM FOR SIX MONTHS TRAINING IN ABDOMINO-PELVIC ULTRASONOGRAPHY: LEVEL ONE: FOR MBBS DOCTORS

1.	Name	
2.	Fathers Name	
3.	Date of Birth	
4.	Medical Council Registration Number	
5.	Present address for correspondence	
6.	Mobile No	
7.	E-mail	
8.	AIPGMEE 2014 Roll No	
9.	Mark secured in AIPGMEE 2014	
10.	Rank in State Merit list for PG 2014	
11.	Category (Direct/in- service)	
12.	If in-service, name and address of present station.	

13.	State Bank of India	
	Challan No.	
	For Rs. 1000/- towards	
	application fee (non-	
	refundable)	
14.	Choice of Institution in	1.
	order of preference.	
	(Allotment will be made	2.
	strictly on basis of this	
	preference & merit. See	3.
	Clause F above.	

Declaration

I Dr.do hereby declare that the facts and figures stated above are true to the best of my knowledge and belief. If subsequently any of above information is/are found to be false/forged, necessary legal action as deemed proper may be initiated against me and I will be discharged from training.

Full signature of the candidate. Date.

DOCUMENTS REQUIRED

Self attested photocopy of documents to be submitted along with the application form:

- 1. 10th/11th pass Certificate.
- 2. MBBS Registration Certificate.
- 3. AIPGMEE 2014 rank card
- 4. Service certificate from competent authority (if in service)
- 5. Caste certificate
- 6. Bank Challan (Original copy)

GUIDELINES

FOR COMPETENCY BASED EVALUATION

FOR EXISTING REGISTERED MEDICAL PRACTITIONERS REGISTERED FOR ULTRASONOGRAPHY UNDER PCPNDT ACT

A. INTRODUCTION/ELIGIBILITY:

Registered medical practitioners, registered for Ultrasonography under the PCPNDT ACT, and are conducting ultrasound procedure in a Genetic Clinic or Ultrasound Clinic or Imaging Centre on the basis of one year experience or six months training, are required to clear the competency based evaluation for consideration of renewal of their registration.

In case the candidates are unable to clear the examination they have to apply afresh in Form- 1, for six months training course and clear the competency based evaluation (final examination) on or before 1st January 2017.

Applications are invited from such candidates in prescribed proforma (Form - 2) to appear in the competency based evaluation along with an application fee of Rs.1000/- . On successful completion of the examination they will be considered for renewal of their registration.

B. SUBMISSION OF APPLICATION

Candidates shall download the application form annexed in this prospectus and apply duly filled in application along with all requisite documents. They have to deposit a sum of Rs. 1000/- in any branch of SBI in the enclosed SBI Challan Form and submit the original DMET' Copy of the challan along with the application form towards application fee. The application fee is not refundable under any circumstances. The envelope containing the application form must be superscribed as "APPLICATION FOR COMPETENCY BASED EVALUATION" and should be sent to the "Convener, Jt. Director, DMET, Odisha, HOD Building, Bhubaneswar, 751001" by speed post/courier, so as to reach on or before 14.03.2015. Applications incomplete or received late will be rejected. Multiple applications submitted in a single envelope will not be entertained.

C. SELECTION

A list of eligible applicants will be prepared after proper scrutiny from the district records who will be allowed to appear in the examination. They must produce the valid registration certificate from the Collector-cum-DAA. The detail schedule and venue etc of examination will be notified later in the website of DMET(O).

D. FEE

The training fee of Rs. 10,000/- is to be deposited in the office of the DMET(O) in shape of Bank Draft from any SBI, drawn in favor of "DMET, Orissa, Selection Fees".

E. EVALUATION & CERTIFICATE

On successful completion of the evaluation a certificate to the effect will be issued by the Dean & Principal of the institution. Such certificates will be applicable for obtaining new registration /renewal under the PC&PNDT Act in all States.

SCHEME OF EXAMINATION:

Theory Assessment (FM 100) – 2 hours written exam.

Minimum pass mark - 50

- c. 50 MCQs 1 mark each-50 marks
- d. 10 short answerer questions of 5 marks each 50 marks

Practical Assessment (FM 100) – minimum pass mark - 60

- d. Log book 20marks
- e. Demonstration 50 marks
- f. Viva 30 marks

(Three case situations on Clinico-sonographic co-relation, video clip, and case studies)

F. SYLLABUS

The detail syllabus will be available in the Department Radiology of the Institution. They have to follow the Schedule II of the syllabus.

G. MISCELLANEOUS

- a. In all matters relating to eligibility or otherwise of a candidate for undergoing training, the decision of the Chairman Selection Committee shall be final.
- b. No TA/DA will be paid during the training period/examination.
- c. The candidates are to abide by the rules and regulations of the institution.
- d. Candidates must comply as per the Schedule II of the syllabus for appearing in the final competency bases evaluation.

FORM-2

APPLICATION FORM

TO APPEAR IN COMPETENCY BASED EVALUATION

ADOMINO-PELVIC ULTRASONOGRAPHY: LEVEL ONE: FOR MBBS DOCTORS

(For candidates who are already registered under the Act.)

1.	Name	Paste a passport size
2.	Fathers Name	recent photo here
3.	Date of Birth	
4.	Medical Council	
	Registration Number	
5.	Present address for correspondence	
6.	Mobile No	
7.	E-mail	
8.	Name & address of Genetic Clinic/USG Clinic/Immaging Centre in which working	
9.	Particulars of earlier registration for USG under the ACT. Date of permission of DAA with valid registration number	
10.	Details of work experience in USG in an ultrasound clinic, period of engagement.	

11.	State Bank of India Challan No. For Rs. 1000/- towards application fee (non- refundable)	
12.	State Bank of India Bank Draft No. & date for Rs. 10,000/- towards training fee (non-refundable)	
13.	If in-service, name and address of present station.	

Declaration

I Dr.do hereby declare that the facts and figures stated above are true to the best of my knowledge and belief. If subsequently any of above information is/are found to be false/forged, necessary legal action as deemed proper may be initiated against me and my candidature will be rejected.

Full signature of the candidate.

Date.

DOCUMENTS REQUIRED

Self attested photocopy of documents to be submitted along with the application form:

- 1. 10th/11th pass Certificate.
- 2. MBBS Registration Certificate.
- 3. Valid registration for USG/PNDT from appropriate authority.
- 4. Service certificate from competent authority (if in service)
- 5. Bank Challan (Original copy) towards application fee.

SBI CHALLAN

E	BANK'S SLIP	CA	NDIDATE'S SLIP		DMET'S SLIP	
STATE BANK OF IN	DIA	STATE BANK OF INDIA		STATE BANK OF I	NDIA	
(POWER JYOTI ACC	COUNT)	(POWER JYOTI ACCOUNT)		(POWER JYOTI AC	CCOUNT)	
TRAINING IN ULTRASONOGRAPHY NAME OF ACCOUNT- "DMET, ORISSA, SELECTION FEES"				NAME OF ACCOUNT SELECTION FEES	TRAINING IN ULTRASONOGRAPHY NAME OF ACCOUNT- "DMET, ORISSA, SELECTION FEES"	
ACCOUNT No. 3436	3474090	ACCOUNT No. 34363474090		ACCOUNT No. 343	ACCOUNT No. 34363474090	
Name of candidate-	:	Name of candidate	Name of candidate-:)-:	
Branch Name		Branch Name		Branch Name		
Branch Code	Branch Code		Branch Code	Branch Code		
Amount. Rs.1000/-		Amount. Rs.1000/- Amount. Rs.1000/-				
In words (Rupees o	ne thousand) only	In words (Rupees one thousand) only		In words (Rupees	In words (Rupees one thousand) only	
Journal No		Journal No		Journal No	Journal No	
(To be filled by Ban	k)	(To be filled by Bank)		(To be filled by Bank)		
Sign.	Sign.	Sign.	Sign.	Sign.	Sign.	
9	g	9	2.3	7.9	2.3	

Fees remitting Branch may collect Rs.50/- (Rupees Fifty) only towards non-home charges from the remitter SEPARATELY.