**To be completed on an official letter head of the institute**

**Annexure – RP- MED ONCO**

**ROTATIONAL POSTING OF DrNB TRAINEE(S) IN MEDICAL ONCOLOGY:**

|  |  |  |  |
| --- | --- | --- | --- |
| **Department/Area of Rotation** | **Tentative schedule as per DrNB curriculum** | **Name & Address of the institute/hospital \* where trainees are posted for rotation** | **Supervising Consultant name** |
| Inpatient Posting | 8 – 12 months |  |  |
| Out Patient Department (OPD) Posting | 16 months |  |  |
| Day Care and OPD Procedures (Minor OT) Posting | 4 months |  |  |
| BMT Unit Posting | 2 months |  |  |
| Elective posting | 6 weeks |  |  |
| **Ancillary Posting**: |  |  |  |
| Surgical oncology | 3 weeks |  |  |
| Radiation oncology | 3 weeks |  |  |
| Laboratory | 4 weeks |  |  |
| Rotation to blood bank and Nuclear Medicine department | 1 week each |  |  |
| Radio diagnosis & Nuclear Medicine | 2 weeks |  |  |

*\* A copy of MOU should be submitted with other NBE accredited institute/hospital or medical college where DrNB trainees are posted for any of the above rotations, if the same is not feasible within the institute/hospital*

It is herewith certified that DrNB trainees are/shall be rotated in all of the above disciplines as per the prescribed DrNB Medical Oncology curriculum.

|  |  |
| --- | --- |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |
| **Signatures of Head of the Department/ Course Director with stamp** | **Signature with official stamp of Administrative Head of the Institute/Hospital**  (Authorized signatory on behalf of applicant hospital) |