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

**Annexure – RP-GIS**

**ROTATIONAL POSTING OF DrNB TRAINEE(S) IN SURGICAL GASTROENTEROLOGY TO ALLIED SPECIALTIES**

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| **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** |
| **FIRST YEAR** | | | |
| GIS OPD/IPD Care  Assisting surgery  Introduction to Clinical trials & research | 10 Months |  |  |
| Gastro-intestinal Endoscopy | 1 Month |  |  |
| Intensive Care | 1 Month |  |  |
| **SECOND YEAR** | | | |
| GIS OPD/IPD Care  Assisting surgery  Under supervision | 91/2 Months |  |  |
| Gastroenterology | 1 Month |  |  |
| Radiology | 15 Days |  |  |
| Nuclear Medicine | 15 Days |  |  |
| Pathology | 15 Days |  |  |
| **THIRD YEAR** | | | |
| GIS OPD/IPD Care  Assisting and performing surgery independently | 9-11 Months |  |  |
| Elective posting at NBE accredited/ MCI recognized Gastro-intestinal center other than the parent unit | 1-3 Months |  |  |

\* *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 Surgical Gastroenterology curriculum.

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| **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) |