DEPARTMENT OF PAEDIATRICS
YENEPoya MEDICAL COLLEGE

CERTIFICATE COURSE IN CHILD HEALTH

The Department of Paediatrics, Yenepoya University offers Certificate Course in Child Health (CCCH) for MBBS graduates.
This six months programme commences in April and October every year. It is designed keeping in mind the gaps in the system of teaching and training average MBBS graduates. The course exposes them to the simple affordable and low cost interventions in the child health to bring down the Child mortality in the country.

Students will have 3 months of residency training period which may be completed any time during 6 months course. They will have rotation posting in Paediatrics ward (1 month), Community Paediatrics (1 month), PICU and NICU (1 month). The remaining 3 months will be "Distance Education" pattern with teaching module for the Theory covering the required curriculum.

Modes of evaluation:

Students will be evaluated by continuous appraisal and regular assessment. Personal attitudes and clinical skills by direct observation. Acquisition of knowledge is by ‘Logbook’ which will record participation in various teaching learning activities including home assignments for distance education. During the 3 months rotation Posting the Candidate will have monthly test in the all clinicals by OSCE method. Similarly, there will be monthly MCQ test for theory during remaining 3 months distance education period.

Faculty / Infrastructure:

Dr. Prakash Saldanha
Professor & HOD of Paediatrics,
Course Coordinator.

In addition department has 3 Professors, 3 Associate Professors, 5 Assistant Professors & 5 Senior Residents. Departmental infrastructure as per MCI norms for 150 MBBS students & 4 MD students intake per year.

Possible benefits and opportunities

- Bridge course for fresh MBBS graduate during the waiting period for their Post graduate admission.
- Updating knowledge in Child Health will help Private General Practitioners for better consultation.
- Better delivery of primary health care for children in the rural areas by Government Medical Officers undergoing this course.

Goals & Objectives:

Our goal is to train basic medical MBBS graduates to practice Child Health in Community (Urban or Rural) with appropriate knowledge and skills necessary to care for the normal and sick Child with existing primary health care system. The main objectives are:

- To acquire knowledge in normal and common diseases pattern of Children and implement national health programs
- Train to develop skills to elicit clinical history, physical examination, decide & interpret cost effective investigations, perform essential diagnostic/investigation procedures and manage Paediatrics & Neonatal emergencies.
- Communicate appropriately with guardians and children assisting in their health care decision making and practice child health care at the highest ethical level, protecting Child at all costs

Eligibility

- MBBS graduates with Medical Council registration

Course requirements for Certification:

- 50% average pass marks in 3 OSCE clinical examinations conducted monthly
- 50% average pass marks in 3 MCQ Theory examinations conducted monthly
- Attendance of minimum 80% during 3 months residency period for clinical posting
- Compulsory submission of assignments and projects during distance education learning.

Fees:

DD / Cheque payable at MANGALORE in favour of “YENEPoya UNIVERSITY”
Course Fees: Rs. 12,000/-
Exam Fees: Rs. 2000/-
Application Form Fees: Rs. 1000/-.
This does not cover lodging, conveyance and meals.

For the application form and further details contact
Course coordinator

Dr. Prakash Saldanha
Prof. & HOD,
Dept. of Paediatrics, Yenepoya University
University Road, Deralakatte, Mangalore- 575018.
Cell: +91 99845081567
Email: paeti@yenepoya.edu.in

Application can be downloaded
Web: www.yenepoya.edu.in
APPLICATION FOR ADMISSION TO
CERTIFICATE COURSE IN CHILD HEALTH (CCCH)
(To be filled in by the Applicant in BLOCK letters)
[Incomplete application will not be considered]

1. GENERAL INFORMATION :

1. Name (as appearing in marks card of M.B.B.S. qualifying examination) :

2. Sex  : Male / Female

3. Date of Birth  : Day ______ Month___________Year_______________

4. Place of Birth Place :
    State :
    Country :

5. Marital Status  : Married / Single

6. A. Native Tongue :
   B. Other languages spoken :

7. Nationality
   (Country of Origin) :
   Passport No :
   Valid Until :
   Issued by :

8. If Indian Citizen, whether NRI :

9. Postal Address :
   Pin :
   Fax :
   Contact number :
   Permanent Address :
   Pin :
   Phone :
   Email :

10. Designation & Address of Work place (if working) :

11. References :
   (At least two persons holding responsible positions and not related to the Applicant)
I) Name : 
Address : 
Phone : 
Email : 
Fax :

II) Name : 
Address : 
Phone : 
Email : 
Fax :

II. A. DETAILS OF ACADEMIC QUALIFICATIONS

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<thead>
<tr>
<th>Specialty</th>
<th>Year of passing</th>
<th>Year of Joining</th>
<th>Institution Studied</th>
<th>University</th>
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<tbody>
<tr>
<td>Graduate Degree</td>
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<td>Postgraduate Degree</td>
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<td>Any other Additional Qualification</td>
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(Name and Address of the Institution last Studied / Studying):

II. B. DECLARATION BY THE APPLICANT

I wish to apply for admission to the Certificate Course in Child Health at Department of Paediatrics, Yenepoya University, Mangalore, and I declare that to the best of my knowledge and belief, the above particulars are true. I agree that the admission is at the sole discretion of the management.

Place :
Date :
Applicant’s Signature

III. No objection from the employer

This is to certify that Dr. ..............................................................................................................................................
Is working in our..........................................................................................................................................................
organization as (Designation) ...........................................................................................................................................
I/we have no objection for him/her to apply for this Certificate Course. If selected, he/she will be granted 3 months leave during the residency period to complete the 6 months course.

Place :
Date :
Employer’s Name, Signature with seal

*IMPORTANT*: No objection certificate from the employer (Head of the institute/authorized superior) is compulsory if the candidate is employed in any private/Government institute.
CANDIDATES CHECKLIST BEFORE SUBMISSION

Application + Registration fee Rs. 1000/- DD/ Cheque (Details: DD/Cheque Payable at Mangalore in favour of “YENEPOYA UNIVERSITY”)

1 recent stamp size photo pasted + 1 copy attached : Yes/ No
Attested copy of M.B.B.S degree attached : Yes/ No
Attested copy of Registration certificate from State Medical Council attached : Yes/ No
Attested copy of Passport/Aadhar card attached : Yes/No (Identification and address proof)

FOR OFFICE USE ONLY

Completed application received on : Checked by :
Registration No : Receipt No :

ACKNOWLEDGEMENT SLIP

(Please bring this slip with you if called for interview)

Received one completed application form for admission to Certificate Course in Child Health at Yenepoya University for academic year 2014-15

from Dr. ____________________________________________________________

For Registrar
Yenepoya University