Residency Program

PROSPECTUS
March 2022

Bangabandhu Sheikh Mujib Medical University
Dhaka, Bangladesh
Residency Program
(MD/MS)

PROSPECTUS

বঙ্গবন্ধু শেখ মুজিব মেডিক্যাল বিশ্ববিদ্যালয়
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জাতির পিতা বঙ্গবন্ধু শেখ মুজিবুর রহমান
মোঃ আব্দুল হামিদ
মহামান্য রাষ্ট্রপতি
গণপ্রজাতন্ত্রী বাংলাদেশ সরকার
শেখ হাসিনা
মাননীয় প্রধানমন্ত্রী
গণপ্রজাতন্ত্রী বাংলাদেশ সরকার
অধ্যাপক ডাঃ মোঃ শারফুদ্দিন আহমেদ
মাননীয় উপাচার্য, বি এস এম এম ইউ
অধ্যাপক ডা. মোঃ জাহিদ হোসেন
উপ-উপাচার্য (গবেষণা ও উন্নয়ন)

অধ্যাপক ডা. একেএম মোশাররফ হোসেন
উপ-উপাচার্য (একাডেমিক)

অধ্যাপক ডা. ছয়েফ উদিন আহমেদ
উপ-উপাচার্য (প্রশাসন)

অধ্যাপক ডা. মোহাম্মদ আতিকুর রহমান
কোষাধ্যক্ষ
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His Excellency President, The People's Republic of Bangladesh

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Faculty of Basic & Paraclinical Sciences
Prof. Dr. Shirin Tarafder

Faculty of Paediatrics
Prof. Dr. Mohammod Ali Asgor Moral

Faculty of Dentistry
Prof. Dr. Shaheen Akhter

Course Directors for Residency Program in BSMMU

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1. Introduction

Chartered in 1998 by the Government of the People’s Republic of Bangladesh as the Country’s first Medical University, Bangabandhu Sheikh Mujib Medical University (BSMMU) is committed to excellence in postgraduate medical and dental education, research and healthcare services through comprehensive team-based approach utilizing modern evidence-based scientific knowledge and technology. The University bears the heritage of the Institute of Postgraduate Medicine and Research (IPGM&R), which was established in 1965 and made a glorious contribution to the development of postgraduate medical and dental education, healthcare and research in the country.

There have been tremendous changes in all the sphere of human civilization. Health system has also evolved enormously. Nowaday’s people expect a ‘good specialist’ as not only as ‘medical expert’ but also having the characteristics of an expert communicator, collaborator, manager, health advocate, scholar and professional. With this vision in mind the University has introduced the Residency Program. The view is to develop specialist human resources in health sector for national and international requirements by imparting postgraduate medical education and training in various fields of medical sciences. It also aims at promoting research appropriate to the development of healthcare services as per national needs as well as for the services of mankind as a whole.

2. Goals and Objectives of the Program

The goal of the Program is to provide an organized education and training program with guidance and supervision of the residents, facilitating the residents’ professional and personal development while ensuring safe and appropriate care for patients.

The primary purpose is to provide the supervised educational experiences that will prepare residents to be independent specialists.
At the completion of Residency training the residents will be:

i) mastered on speciality specific knowledge and skills 
ii) clinically competent 
iii) capable of working in a variety of settings and 
iv) acquiring habits of life-long learning to build their knowledge, skills and professionalism.

3. Residency Program Overview

The postgraduate medical education and training is an important segment along the continuum of learning in the field of medicine. It is an important phase of medical education in which doctors go on to develop their competencies and capabilities following the completion of their basic medical qualification. A key trend in postgraduate medical education is a move to a model in which the emphasis has changed to focus on the expected learning outcomes. A competency-based curriculum has become to a large extent the standard in postgraduate medical education. Competencies are defined as the ability to use knowledge, skills and appropriate attitudes and personal qualities to solve clinical problems in professional, ethical and proficient way to meet the personal, social and community needs.
The Residency Program in BSMMU is a competency-based program emphasizing integration and contextualization in the curriculum. The program is of 5 years duration in clinical faculties leading to the degree of Doctor of Medicine (MD)/Master of Surgery (MS), whereas it is of 3-4 years duration in Basic & Para clinical sciences faculty leading to Doctor of Medicine (MD)/Master of Surgery (MS). All candidates joining the residency program shall work as fulltime residents during the period of training and be given fulltime responsibilities, assignments and participation in all facets of educational and training process.

3.1 Academic year

The academic year is from first March to last day of February of the next year. Phase final examinations and publishing results will be completed by the end of February of each academic year.

3.2 Admission Requirement

3.2.1 Pre-requisites for admission in Phase-A Program

1. MBBS/BDS/Equivalent degree as recognized by the BMDC

2. One year internship

3. Completion of one year after internship

4. BMDC registration
3.2.2 The applicants should not be above 45 years of age on enrollment.

3.2.3 All Govt. and Autonomous Candidates should know deputation/ study leave rules of their employer.

3.2.4 Candidates have to sit for a written MCQ based admission test on basic medical sciences (Anatomy, Physiology, Biochemistry, Pharmacology, Microbiology, Pathology etc.) and respective faculty based subjects. Exam Time: 180 Minutes, Full Marks: 200

3.2.5 Direct Enrollment in Phase-B program: Candidates with FCPS/MD/MS in major subjects can be enrolled in Phase-B MD/MS residency program of sub-speciality in BSMMU. However candidates with FCPS/MD/MS or equivalent degree will not be eligible for Phase-B program in the same subjects in which the above qualification was obtained.

Thus, candidates having FCPS / MD in Medicine can be enrolled in Phase-B MD course in any of the following subjects-Neurology, Cardiology, Gastroenterology, Psychiatry, Oncology, Physical Medicine or similar courses approved by the Academic Council.

Similarly, FCPS/MD in Paediatrics can be enrolled in Phase-B MD course in any of the following subjects: Paediatric Gastroenterology, Paediatric Haematology, Paediatric Nephrology or similar courses approved by the Academic Council.

FCPS/MS Surgery can be enrolled in Phase-B MS course in any of the following subjects: Neurosurgery, Paediatric surgery, Urology, Colorectal surgery, Orthopaedic surgery, Cardio-vascular surgery or similar courses approved by the Academic Council.
3.2.6 Eligibility criteria for foreign candidates

1. Foreign candidate must have-
   i. MBBS/BDS or equivalent medical graduation (as determined by the University).
   ii. Two years after passing MBBS/BDS or equivalent degree with completion of one year internship.
   iii. Permanent Registration Certificate from the Medical and or Dental Council of respective countries (recognized by BMDC).
   iv. IELTS score of minimum 5.0 in each component, with an average.
   v. IELTS Certificate is to be submitted during enrollment. It will also be reserved to obtain Visa from Bangladesh Embassy/High Commission.
   vi. Maximum age 45 years as on the date of enrollment.

   **Note:** If there is any lacking of information and or document, the application will not be accepted.

2. Other Information:
   i. Candidate should apply through their respective High Commission/Embassy in Bangladesh.
   ii. Candidate should submit the application along with the following documents.
      a) Two Copies of recent passport size photograph.
      b) Photocopies of the following documents duly attested by the respective Ministry of Foreign Affairs or their Embassy/High Commission in Bangladesh.

1. SSC and MBBS/BDS Certificate
2. Internship Certificate
3. Registration Certificates from their Medical/ Dental Council
4. Photocopy of valid Passport

iii. Students already in any course can not apply, but they are eligible to apply one year after passing or withdrawal from the course (copy of withdrawal letter is to be enclosed with the application).
iv. Eligible candidate will be selected by a board of respective department on merit basis.
3.3 Teaching and Learning

A Good learning environment is to be fostered to ensure residents’ learning opportunities. This includes environment for self-directed learning as well as recognizing the learning potential in all aspects of day-to-day work. The major part of learning in the residency program occurs as on-the-job learning and self-directed learning. Positive interactions with peers, faculties and support staff are endured.

According to the sequence set in the respective curriculum, residents are placed for specific time periods in the parent department and in other relevant departments in ‘Blocks’ for specific learning experiences according to fulfill the objectives. The appropriate learning include: large group learning sessions, small group learning sessions including training sessions on practical procedures, bedside and laboratory teaching, grand rounds, ambulatory care teaching, community-based learning including learning physician’s practice-settings, learning through teaching and assessment and journal clubs, seminars/symposiums, clinical meetings, assignments like reflective essay writing, drawing-labeling and lab activities, self-study etc. However, large group sessions make up a comparatively small part of the program.

3.4 Supervision and Training Monitoring

Course Supervisors in the parent department and other relevant departments are responsible for supervision of learning throughout the program to ensure patient and/or laboratory safety, service delivery as well as the progress of the resident with learning and performance. The lesson plans are based on the curriculum; undertake appraisal, review progress against the curriculum, give feedback on both the formative and summative assessment as well as assess the logbook and portfolio. The residents are made aware of their limitations and encouraged to seek advice and receive help from their supervisors at any time.
The Course Coordinator of each department coordinates all training and academic activities of the program in collaboration with the Course Manager. The Course Director of each Faculty directs, guides and manages curricular activities under his / her jurisdiction and is the person to be reported to for all events and performances of the residents and the supervisors.

3.5 Assessment

Formative assessments including on-the-job assessments in workplace settings, in classroom and examination settings as well as global assessment of different competencies are carried out.

Summative assessments follow at the end of blocks/phases. Multiple methods of assessment are applied. These methods are made as structured and objective as feasible by using specific customized test matrices, instructions, checklists, rating scales etc. A criterion-referenced approach is adopted in different aspects of assessment.
3.6 Residency Agreement

Residents must abide by the legislation governing the residency program of the University. Every resident must sign a ‘Residency Agreement’ accepting the legislation of the program at the time of enrollment.

4. Programs under Faculties of Medicine, Surgery, Paediatrics and Dentistry

4.1 Faculty of Medicine

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Program</th>
<th>Discipline</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>A) Allied Subjects:</td>
<td>MD</td>
<td>B) Non-Allied Subjects:</td>
<td>MD</td>
</tr>
<tr>
<td>01. Cardiology</td>
<td>MD 01.</td>
<td>Child &amp; Adolescent Psychiatry</td>
<td>MD 01.</td>
</tr>
<tr>
<td>02. Endocrinology</td>
<td>MD 02.</td>
<td>Dermatology &amp; Venereology</td>
<td>MD 02.</td>
</tr>
<tr>
<td>03. Gastroenterology</td>
<td>MD 03.</td>
<td>Nuclear Medicine</td>
<td>MD 03.</td>
</tr>
<tr>
<td>04. Haematology</td>
<td>MD 04.</td>
<td>Oncology</td>
<td>MD 04.</td>
</tr>
<tr>
<td>05. Hepatology</td>
<td>MD 05.</td>
<td>Physical Medicine &amp; Rehabilitation</td>
<td>MD 05.</td>
</tr>
<tr>
<td>06. Internal Medicine</td>
<td>MD 06.</td>
<td>Psychiatry</td>
<td>MD 06.</td>
</tr>
<tr>
<td>07. Medical Oncology</td>
<td>MD 07.</td>
<td>Radiation Oncology</td>
<td>MD 07.</td>
</tr>
<tr>
<td>08. Nephrology</td>
<td>MD 08.</td>
<td>Transfusion Medicine</td>
<td>MD 08.</td>
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<tr>
<td>09. Neurology</td>
<td>MD 09.</td>
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<tr>
<td>11. Pulmonology</td>
<td>MD 11.</td>
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<tr>
<td>12. Rheumatology</td>
<td>MD 12.</td>
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</table>
### 4.2. Faculty of Surgery

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Program</th>
<th>Discipline</th>
<th>Program</th>
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</thead>
<tbody>
<tr>
<td><strong>A) Allied Subjects:</strong></td>
<td></td>
<td><strong>B) Non-Allied Subjects:</strong></td>
<td></td>
</tr>
<tr>
<td>01. Cardiovascular &amp; Thoracic Surgery</td>
<td>MS 01.</td>
<td>Anaesthesiology</td>
<td>MD</td>
</tr>
<tr>
<td>02. Colorectal Surgery</td>
<td>MS 02.</td>
<td>Critical Care Medicine</td>
<td>MD</td>
</tr>
<tr>
<td>03. General Surgery</td>
<td>MS 03.</td>
<td>Community Ophthalmology</td>
<td>MS</td>
</tr>
<tr>
<td>04. Hepatobiliary, Pancreatic &amp; Liver Transplant Surgery</td>
<td>MS 04.</td>
<td>Feto-maternal Medicine</td>
<td>MS</td>
</tr>
<tr>
<td>05. Neurosurgery</td>
<td>MS 05.</td>
<td>Gynaecological Oncology</td>
<td>MS</td>
</tr>
<tr>
<td>06. Orthopaedic Surgery</td>
<td>MS 06.</td>
<td>Obstetrics &amp; Gynaecology</td>
<td>MS</td>
</tr>
<tr>
<td>07. Otolaryngology</td>
<td>MS 07.</td>
<td>Ophthalmology</td>
<td>MS</td>
</tr>
<tr>
<td>08. Urology</td>
<td>MS 08.</td>
<td>Radiology &amp; Imaging</td>
<td>MD</td>
</tr>
<tr>
<td>09. Paediatric Surgery</td>
<td>MS 09.</td>
<td>Reproductive Endocrinology &amp; Infertility</td>
<td>MS</td>
</tr>
<tr>
<td>10. Plastic Surgery</td>
<td>MS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11. Surgical Oncology</td>
<td>MS</td>
<td></td>
<td></td>
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<tr>
<td>12. Thoracic Surgery</td>
<td>MS</td>
<td></td>
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<tr>
<td>13. Vascular Surgery</td>
<td>MS</td>
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### 4.3. Faculty of Paediatrics

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Program</th>
<th>Discipline</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>01. Neonatology</td>
<td>MD 05.</td>
<td>Paediatric Haematology &amp; Oncology</td>
<td>MD</td>
</tr>
<tr>
<td>02. Paediatrics</td>
<td>MD 06.</td>
<td>Paediatric Nephrology</td>
<td>MD</td>
</tr>
<tr>
<td>03. Paediatrics Cardiology</td>
<td>MD 07.</td>
<td>Paediatric Neurology &amp; Neuro-Development</td>
<td>MD</td>
</tr>
<tr>
<td>04. Paediatric Gastroenterology</td>
<td>MD</td>
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</table>
4.4. Faculty of Dentistry

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Program</th>
<th>Discipline</th>
<th>Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>01. Conservative Dentistry</td>
<td>MD 06.</td>
<td>Dental Materials</td>
<td>MD</td>
</tr>
<tr>
<td>&amp; Endodontology</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>02. Oral &amp; Maxillofacial</td>
<td>MD 07.</td>
<td>Dental Pharmacology</td>
<td>MD</td>
</tr>
<tr>
<td>Surgery</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>03. Orthodontics</td>
<td>MD 08.</td>
<td>Oral Anatomy</td>
<td>MD</td>
</tr>
<tr>
<td>04. Pedodontics</td>
<td>MD 09.</td>
<td>Oral &amp; Maxillofacial Pathology</td>
<td>MD</td>
</tr>
<tr>
<td>05. Prosthodontics</td>
<td>MD 10.</td>
<td>Periodontology</td>
<td>MD</td>
</tr>
</tbody>
</table>

4.5. Program Outline

4.5.1. Phase A: Broad Based Specialty (Medical/Surgical/ Paediatric) Trainings (2 Years)
Provides foundation training in respected general specialties. Includes components of educational and clinical training programs in relevant fields of Medicine/Surgery and other Basic Medical Sciences.

**Educational Program:**
Broad-based clinical sciences
Customized basic medical sciences with meaningful integration

**Clinical Training Program:**
The training period of Phase A will be divided into Blocks (three months each).

4.5.2. Phase B: Advanced specialty trainings (3 years)
In-depth specialty-specific educational and training program in this phase will make the resident competent and prepare them for the specialty qualification

**Educational Program:**
Specialty-specific clinical sciences
Customized applied basic medical sciences with meaningful integration

**Clinical Training Program:**
Training period may be divided into blocks of 3 to 6 months duration (as per requirements of the disciplines).
Mandatory courses:
1. Biostatistics and Research methodology
2. Basics of Medical education

4.5.3 Generic Skills
The program emphasizes on generic skills of the Residents which focuses on the medical humanities and covers the following curricular elements for all residents: ethical issues, socio-economic issues, medicolegal issues, cost containment issues, communication skills and skills of critical review of the literature.

All teaching, learning and assessment associated with the generic skills will be undertaken within the context of the Resident’s every day clinical practice and will accommodate discipline-specific contexts and practices as required.

4.6 Assessment and Certification
The assessment for certification of MD/MS degree of the University will be comprehensive, integrated and phase-centered attempting to identify attributes expected of specialist for independent practice and lifelong learning. The assessment shall keep strict reference to the components, the contents, the competencies and the criteria laid down in the curriculum. Assessment includes: both the formative assessment and summative (Phase finals) assessments.

4.6.1 Formative Assessment are conducted throughout the training phases.
Continuous (Day-to-day) formative assessment in classroom and workplace setting will provide guide to residents’ learning and faculties teaching/learning strategies to ensure formative lesson/training outcomes.

Periodic formative assessment are quasi-formal directed to assessing the outcome of a block placement or academic module completion. It is held at the end of block placement and academic module completion. The contents of such examinations include: block unit of the training program and module unit of the academic syllabus. The periodic formative assessment is termed as End of Block Assessment (EBA).
End of Block Assessment (EBA). End of block assessment is undertaken after completion of each block, assessing knowledge, skills and attitude of the residents.

Components of EBA are written and clinical (Long and short cases and SCA), medical record review, logbook and portfolio assessment. Incomplete block training must be satisfactorily completed by undergoing further training for the block to be eligible for appearing the next phase completion examination.

4.6.2 Assessment of the course contents of Biostatistics, Research methodology and Medical education are done by the end of the first year of Phase B. Residents getting unsatisfactory grade must achieve satisfactory grade by appearing the re-evaluation examination before appearing the Phase B Final.

4.6.3 Summative assessments are carried out after completion of each phase and will be called Phase final. Phase A final can be undertaken after satisfactory completion of Phase A training. Phase B Finals are undertaken only after successful completion of Phase B training after passing Phase A Final. Phase B Final is considered as the exit examination.

Phase Final Examinations have the following components: written, clinical/SCA, oral and Logbook evaluation as per respective curriculum. After getting qualification marks in written examination (both Phase-A and Phase-B Final) residents will appears in SCA and clinical examination. Every Resident must complete a thesis which is assessed at least 3 months prior to Phase B Final.

Phase final examinations are held twice in a year (January and July).

Phase Final examinations are conducted centrally by office of the Controller of Examinations and are coordinated by office of the Deans of the respective Faculties. Certificate and mark sheets are issued by the office of the controller of examinations.
5. Programs under the Faculty of Basic and Para clinical Sciences:
5.1. List of Programs

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Program</th>
<th>Course Duration (Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Phase-A</td>
</tr>
<tr>
<td>01. Anatomy</td>
<td>MS</td>
<td></td>
</tr>
<tr>
<td>02. Biochemistry</td>
<td>MD</td>
<td>2</td>
</tr>
<tr>
<td>03. Laboratory Medicine</td>
<td>MD</td>
<td>2</td>
</tr>
<tr>
<td>04. Microbiology</td>
<td>MD</td>
<td>2</td>
</tr>
<tr>
<td>05. Pathology</td>
<td>MD</td>
<td>2</td>
</tr>
<tr>
<td>06. Pharmacology</td>
<td>MD</td>
<td>2</td>
</tr>
<tr>
<td>07. Physiology</td>
<td>MD</td>
<td>1.5</td>
</tr>
<tr>
<td>08. Virology</td>
<td>MD</td>
<td>2</td>
</tr>
<tr>
<td>09. Immunology</td>
<td>MD</td>
<td>2</td>
</tr>
<tr>
<td>10. Forensic Medicine</td>
<td>MD</td>
<td>2</td>
</tr>
</tbody>
</table>

5.2. Program Outline
Phase-A of the residency programs of the faculty of Basic & Para clinical Sciences deals with the educational and training course contents of individual disciplines. Some generic issues and subjects important for all disciplines are also covered in this phase. These issues and subjects, which do not comprise individual blocks by themselves, include common induction topics as well as Medical Education and Research Methodology and Biostatistics. This phase is divided into Year-1 and Year-2 excepting in MD Pharmacology, where Phase-A is of 2 years. Each Part comprises of Blocks and divided in Modules.

Residents have to go through mandatory course of:
(1) Basics of Medical Education and
(2) Biostatistics and Research Methodology.

In Phase-B every resident has to carry out a research work that culminates in a thesis. Phase-B is of 1 year. In pharmacology, Phase-B is of 1.5 years and in pathology it is of 2 years. MD pathology residents also go through some Blocks dealing with educational and training programs in this phase.
Every discipline has a detailed curriculum for its Residency Program. Residents of each program are guided and supervised by the supervisors and course coordinators.

In addition to the educational and training programs, Phase-B residents are involved in departmental administrative, academic (including teaching), laboratory reporting and other activities as assigned by the department from time to time. All these activities are supervised and monitored and documentation and assessment of relevant activities are carried out using structured formats.

5.3. Assessment and Certification

5.3.1. Formative assessment

Formative assessment of knowledge, skills and attitude of residents are made throughout the course in classroom and workplace settings. Periodic formative assessments are also done at the end of a Block. A logbook for residents’ activities is maintained which also carries the records of global rating attained by the residents through multifaceted evaluation.

Formative assessments throughout the program are carried out by the department in specified formats using specific checklists and rating scales. The End of Block Assessment (EBA) is conducted by the respective departmental examination committee.
5.3.2. Summative assessment

Summative assessments are held at the end of each year (or at the end of phase-A in case of MD Pharmacology). These exams are called ‘Year Final’ and ‘Phase Final’ respectively. Phase Final examinations are held every six months. There is ‘carry on’ system from Year-1 to Year-2, but not from Phase-A to Phase-B.

The Residency Program of each discipline ends with a Thesis defense and comprehensive oral examination.

5.3.3. Phase Final examinations are conducted centrally by the office of the Controller of Examinations and coordinated by the office of the Dean. Certificates and Mark Sheets are issued by the office of the Controller of Examinations.

6. Qualifying for MD/MS Degree

On completion of training and passing both the Phase A and Phase B final examinations, the residents are conferred with the degree of MD/MS in the respective discipline.
Bangabandhu Sheikh Mujib Medical University