



MNR MEDICAL COLLEGE & HOSPITAL

**MNR Nagar, Fasalwadi, Sangareddy - 502 294, Sangareddy Dist.
Telangana. India**

**Ph: + 85000 56667, (08455) 230523, 230527, 230524 Fax No. (08455) - 230555,
230533**

**CERTIFIED LIST OF OFFERED VALUE ADDED
COURSES ALONG WITH RELATED DOCUMENTS
FOR THE-A.Y-2020-2021**



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**DOCUMENTS RELATED TO STUDENTS ENROLLED IN
VALUE ADDED COURSES FOR THE A-Y 2020-2021**



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230555, 230533

**DOCUMENTS RELATED TO STUDENTS ENROLLED IN
VALUE ADDED COURSES FOR THE A-Y 2020-2021**

(Signature)
Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

(Signature)
PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



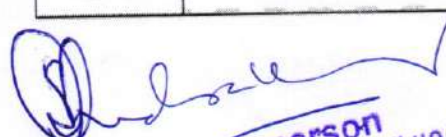
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LIST OF VALUE ADDED COURSES DURING THE ACADEMIC YEAR 2020-2021

S. No	Program Name	Duration	No. of Student attended
1.	ANASTHESIA CPR	22.06.2020 to 27.06.2020	60
2.	General Medicine and Psychiatry	13.07.2020 to 17.07.2020	32
3.	Management of Postpartum Hemorrhage	17.08.2020 to 21.08.2020	30
4.	Biomedical waste Management	21.09.2020 to 25.09.2020	60
5.	Immunization Programme	12.10.2020 to 17.10.2020	30
6.	Antimicrobial Agents and Antibiotic Susceptibility Testing	23.11.2020 to 28.11.2020	60
7.	Legal Aspects of Safe Obstetric and Gynaecology Practice in Current Scenario	14.12.2020 to 18.12.2020	64
8.	Basic Laparoscopic Training	04.01.2021 to 09.01.2021	12
9.	Digital methods in Learning Surgery	01.03.2021 to 06.03.2021	31
10.	Health Education Skills through Community Diagnosis	05.04.2021 to 10.04.2021	60


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Date: 15.06.2020

CIRCULAR

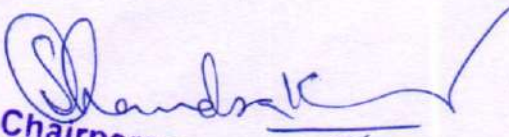
This is to inform all Final Year Students that our department is organizing A Value added course on "ANASTHESIA" by Dr. Adam, Professor / Anesthesia and Dr. Ramachander, Professor and HOD / Anesthesia from 22.06.2020 to 27.06.2020. All Students are requested to attend the Program.


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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards


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Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

REGISTRATION FORM

Name:

Dept. :

Institution:

Address for Communication:

.....

Mobile:

email:

.....
.....
.....
.....

Free:
In-House
Staff & Students

PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr. Syed
SPM
MNR Group of Educational Institutions

Resource Person:

Dr. Adam

Professor / Anasthesia

Dr. Ramachander

Professor & Head
MNR Medical College
Email ID: adam@gmail.com

ADDRESS FOR COMMUNICATION:

Dr. Syed

Coordinator, SPM
syed79@gmail.com
7989594783

MNR Medical College

Fasalwadi, Sangareddy,
Hyderabad

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Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

CPR

C P R.



Dates:

22.06.2020 to 27.06.2020

Organized by:

Dept. of Anaesthesia

Venue:

Lecture Hall - III

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad
Telangana-502 204

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About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

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MNR Medical College & Hospital

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



Objectives of the Programme:

- The aim of basic life support includes preserving life, preventing injury from getting worse, aiding recovery, relieving pain, and protecting the unconscious. The main objective is to save lives.
- The major objective of BLS is to provide oxygen to the heart and the brain and to sustain tissue viability until definitive electrical or medical treatment.
- Basic Life Support (BLS) course provides healthcare providers and public safety professionals the knowledge and skills necessary to respond to breathing and cardiac emergencies in adult, child and infant patients.

Topics to be Covered

- Introduction, Basic Concepts.
- CPR (Cardiopulmonary resuscitation) in adults.
- CPR (Cardiopulmonary resuscitation) in Pediatrics and Infants.
- Cardiac Arrest.
- AED (Automated external defibrillator) for adults and infants.
- Foreign Body.

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LIST OF STUDENT REGISTERED

Name of the Program: A Value added course on Anesthesia

Date: 22.06.2020 to 27.06.2020

S. No	Roll No.	Student name	Signature
1	1401	K GOPISHANKAR REDDY	
2	1402	PASHYA RADHIKA REDDY	
3	1403	DHANUKONDA SRAVYA	
4	1404	GONABOYINA LAKSHMI TANUJA	
5	1405	BANDARU MEGHANA	
6	1406	PULAPALLY RAJ VARDHAN	
7	1407	DEPA VENUGOPAL REDDY	
8	1408	T SUMANA REDDY	
9	1409	RACHURI PRIYANKA	
10	1410	SAJJAPUR SANJANA REDDY	
11	1411	GOLLAPALLI KIRAN CHAITANYA	
12	1412	NARLA ACHYUTH	
13	1413	KOTA ROHIT	
14	1414	P AMBA SWAMY NAIDU	
15	1415	KALLU DEEPTHI	
16	1416	BILLA NITISH REDDY	
17	1417	G S PROKTHA	
18	1418	JUJARE ANKITHA	
19	1419	CONDLALA BHAVANI	
20	1420	B NARASIMHA SWAMY	
21	1421	RAPOLUAISHWARYA LAXMI	
22	1422	'THAIDA SHEKAR	
23	1423	KAVALI SHIVANI	

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24	1424	RAJ KUMARDILIP SAWALE	Raj
25	1425	ENNAM SHROETHI	Shroethi
26	1426	G DHARMA SHIASTRA	Dharmar
27	1427	GOGURLA MANISHA	Manisha
28	1428	POLICE PATIL VISHWAPRASAD	Vishwas
29	1429	GANJI GANESH	Ganesh
30	1430	GUMMULA SAHITITYA	Sahiti
31	1431	EDDU MEGHANA	Meghana
32	1432	VUPPUGALLA GEETHIKA	Geethika
33	1433	KESHETTY CHANDU KUMAR	Chandu
34	1434	MOHAMMED ABDUL MUJEER	Mujeeb
35	1435	ANZILA SHAREEFA	Anzila
36	1436	SHAZIA ALI	Shazia
37	1437	N NEHA	Neha
38	1438	PAGADALA DIVYA	Divya
39	1439	K SANTOSHI	Santoshi
40	1440	E SNIGDHA	Snigdha
41	1441	PRUDHIVI RAJ JALADANKI	Prudhvi
42	1442	MEGAVATH RAJITFIA	Rajitha
43	1443	K SUSHMA	Sushma
44	1444	KAKANI MAMATHA	Mamatha
45	1445	THATIKAYALA CHIDAMBAR	Chidambar
46	1446	K BHARATH KUMAR	Bharath
47	1447	DAMSALAPUDI NEHA	Neha
48	1448	KATTHULA SUPRIYA	Supriya
49	1449	MAAMUDDUNA VEENA	Veena
50	1450	P ANJANA SHABDI RAM	Anjana
51	1451	HYNDHAVIPADARTI	Hyndha
52	1452	SHAIK SAMEER	Sameer
53	1453	REVURI SOUMYA	Soumya
54	1454	P BHAVYA CHARANA	Charana
55	1455	RIA SHERLYN MANDA	Ria Sherlyn

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56	1456	M VENKATA RAMANI	<i>V. Venkata Ramani</i>
57	1457	MOKU DEEPA	<i>Deepa</i>
58	1458	V NAGA VENKATA SREE VALL	<i>Naga Venkata Sree Vall</i>
59	1459	P HARSHA VARDHANA REDDY	<i>Harsha</i>
60	1460	K VENKATA TRIVED	<i>Trived</i>

COORDINATOR

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HOD



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STUDENT ATTENDANCE SHEET

Name of the Program: A Value added course on Anesthesia

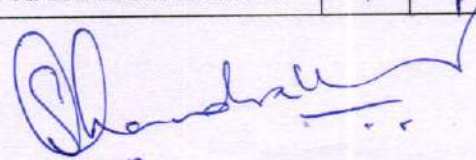
Date: 22.06.2020 to 27.06.2020

S. No	Roll No.	Student name	22.06.20	23.06.20	24.06.20	25.06.20	26.06.20	27.06.20	Feedback
1	1401	K GOPISHANKAR REDDY	P	P	A	P	P	P	good
2	1402	PASHYA RADHIKA REDDY	P	A	P	P	P	P	good
3	1403	DHANUKONDA SRAVYA	P	P	P	P	P	A	good
4	1404	GONABOYINA LAKSHMI TANUJA	P	P	P	A	P	P	Excellent
5	1405	BANDARU MEGHANA	P	A	P	P	P	P	good
6	1406	PULAPALLY RAJ VARDHAN	P	P	P	A	P	P	Excellent
7	1407	DEPA VENUGOPAL REDDY	P	P	A	P	P	P	good
8	1408	T SUMANA REDDY	P	X	P	P	P	P	good
9	1409	RACHURI PRIYANKA	X	P	A	P	P	P	Excellent
10	1410	SAJJAPUR SANJANA REDDY	P	X	P	P	P	P	good
11	1411	GOLLAPALLI KIRAN CHAITANYA	P	P	P	P	A	P	Excellent
12	1412	NARLA ACHYUTH	P	P	A	P	P	P	Excellent
13	1413	KOTA ROHIT	P	P	P	P	P	A	good
14	1414	P AMBA SWAMY NAIDU	P	A	P	P	P	P	good
15	1415	KALLU DEEPTHI	P	P	A	P	P	P	good.
16	1416	BILLA NITISH REDDY	P	P	P	A	P	P	Excellent
17	1417	G S PROKTHIA	A	P	P	P	P	P	Excellent
18	1418	JUJARE ANKITHA	P	P	P	P	A	P	Excellent
19	1419	CONDLALA BHAVANI	A	P	P	P	P	P	good
20	1420	B NARASIMFIA SWAMY	P	P	A	P	P	P	good.

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21	1421	RAPOLUAISHWARYA LAXMI	A	P	P	P	P	P	good
22	1422	'THAIDA SHEKAR	P	P	A	P	P	P	good
23	1423	KAVALI SHIVANI	P	A	P	P	P	P	good.
24	1424	RAJ KUMARDILIP SAWALE	P	P	P	P	P	A	Excellent
25	1425	ENNAM SHROETHI	P	A	P	P	P	P	Excellent
26	1426	G DHARMA SHIASTRA	P	P	A	P	P	P	Excellent
27	1427	GOGURLA MANISHA	P	P	P	A	P	P	good
28	1428	POLICE PATIL VISHWAPRASAD	P	P	P	P	A	P	good
29	1429	GANJI GANESH	P	P	A	P	P	P	good
30	1430	GUMMULA SAHITITYA	P	P	P	P	A	P	Excellent
31	1431	EDDU MEGHANA	P	A	P	P	P	P	good
32	1432	VUPPUGALLA GEETHIKA	A	P	P	P	P	P	Excellent
33	1433	KESHETTY CHANDU KUMAR	P	P	P	P	P	A	good
34	1434	MOHAMMED ABDUL MUJEER	P	P	A	P	P	P	good
35	1435	ANZILA SHAREEFA	P	P	P	A	P	P	Excellent
36	1436	SHAZIA ALI	P	P	P	P	A	P	good
37	1437	N NEHA	A	P	P	P	P	P	good
38	1438	PAGADALA DIVYA	P	P	A	P	P	P	Excellent
39	1439	K SANTOSHI	P	P	P	A	P	P	Excellent
40	1440	E SNIGDHA	P	P	P	P	P	A	good
41	1441	PRUDHIVI RAJ JALADANKI	P	A	P	P	P	P	good
42	1442	MEGAVATH RAJITFIA	P	A	P	P	P	P	Excellent
43	1443	K SUSHMA	P	P	P	P	P	A	good
44	1444	KAKANI MAMATHA	P	P	A	P	P	P	Excellent
45	1445	THATIKAYALA CHIDAMBAR	P	P	P	A	P	P	good
46	1446	K BHARATH KUMAR	P	P	P	P	A	P	Excellent
47	1447	DAMSALAPUDI NEHA	P	A	P	P	P	P	Excellent
48	1448	KATTHULA SUPRIYA	P	P	A	P	P	P	good
49	1449	MAAMUDDUNAVEENA	A	P	P	P	P	P	Excellent
50	1450	P ANJANA SHABDI RAM	P	P	P	A	P	P	Excellent


Chairperson
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51	1451	HYNDHAVIPADARTI	P	P	A	P	P	P	good
52	1452	SHAIK SAMEER	A	P	P	A	P	P	good
53	1453	REVURI SOUMYA	P	A	P	P	P	P	excellent
54	1454	P BHAVYA CHARANA	P	P	P	P	A	P	excellent
55	1455	RIA SHERLYN MANDA	P	P	P	A	P	P	good
56	1456	M VENKATA RAMANI	P	P	P	P	P	A	good
57	1457	MOKU DEEPA	P	P	P	P	P	A	excellent
58	1458	V NAGA VENKATA SREE VALL	P	A	P	P	P	P	good
59	1459	P HARSHA VARDHANA REDDY	P	P	A	P	P	P	excellent
60	1460	K VENKATA TRIVED	P	P	P	A	P	P	good.

COORDINATOR

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A VALUE ADDED COURSE ON ANASTHESIA FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

DATE:

TIME: 30 Minutes

MARKS: 30

Tick the Correct Answer

1. What is the compression to breath ratio in two-person CPR for an adult?
 - a) 20:2
 - b) 30:2
 - c) 15:2
 - d) 25:2
2. How often should rescuers switch roles when performing two-rescuer adult CPR?
 - a) After every cycle of CPR
 - b) After every two cycles of CPR
 - c) After every five cycles of CPR
 - d) After every 10 cycles of CPR
3. Where should you attempt to perform a pulse check in a child who is anywhere from one year to puberty?
 - a) Brachial artery
 - b) Ulnar artery
 - c) Temporal artery
 - d) Carotid
4. You are performing CPR on an adult victim. The second rescuer has arrived with the AED and turned it on. What is their next step?
 - a) Place the pads over the victim's clothes
 - b) Wait for advanced care to arrive before continuing use of the AED
 - c) Place the pads on the victim's bare chest
 - d) Shock the victim

Chairperson

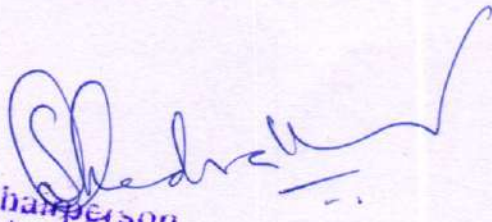
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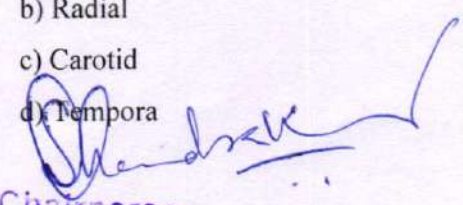
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FASALWADI, SANGAREDDY 502294

5. Rescue Breathing is used for a victim who is unconscious but has a pulse. What is the correct rate for rescue breathing in a child or infant?
- a) 1 breath every 5 to 6 seconds
 - b) 2 breaths every 3 to 5 seconds
 - c) 1 breath every 3 to 5 seconds
 - d) 2 breaths every 5 to 6 seconds
6. What is the correct hand placement for compressions on an infant victim?
- a) Use 2 hands when performing compressions on an infant
 - b) Use two fingers when performing compressions on an infant
 - c) Use one hand when performing compressions on an infant
 - d) Do not give compressions on an infant
7. You are alone and find a potential victim. What is your first step?
- a) Begin Chest Compressions
 - b) Ensure scene safety
 - c) Check for responsiveness
 - d) Open the airway and give 2 breaths
8. What is the correct rate of compressions?
- a) 100
 - b) 40
 - c) 80
 - d) 60
9. During CPR on an adult victim, the compression-to-breath ratio is:
- a) Give 1 breath after every 5 compressions
 - b) Give 2 breaths after every 30 compressions
 - c) Give 3 Breaths after every 15 compressions
 - d) Give 2 breaths after every 100 compressions
10. When should you use the two thumb-encircling hands technique on an infant?
- a) When there are 2 rescuers present for CPR
 - b) When your fingers get tired of compressions
 - c) When you want to produce less blood flow in the infant
 - d) When you are trying to relieve choking in the infant


Champion
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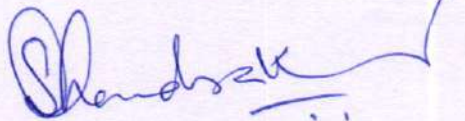

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11. You have noticed a potential victim and ensured the scene is safe. What is your next step?
- a) Provide rescue breathing
 - b) Check for victim's responsiveness
 - c) Begin chest compressions
 - d) Call the victim's doctor
12. Use abdominal thrusts to relieve choking in a conscious adult. State true or false.
- a) True
 - b) False
13. You are giving CPR to a 5-year-old child. A second rescuer comes by and states they know CPR. What happens to your Compression to Breath ratio when you add the second rescuer?
- a) It changes - 15 compressions to 2 breaths
 - b) It changes - 30 compressions to 3 breaths
 - c) It changes - 5 compressions to 1 breath
 - d) It stays the same - 30 compressions to 2 breaths
14. After the AED has delivered the shock you should...
- a) Continue CPR beginning with compressions
 - b) Wait patiently for the AED to reanalyze
 - c) Give 2 breaths
 - d) Turn off the AED
15. The 2015 AHA guidelines for CPR recommended BLS sequence of steps are:
- a) Chest compressions, Airway, Breathing
 - b) None of the above
 - c) Airway, Breathing, Check pulse
 - d) Airway, Breathing, Chest compressions
16. The pulse assessed in an adult cardiac arrest victim is called the _____ pulse?
- a) Groin
 - b) Radial
 - c) Carotid
 - d) Temporal


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17. You find an unresponsive victim without a pulse. You do not have a mask. What is the next step for an untrained lay responder?
- a) Go call 911
 - b) Wait until EMS arrives
 - c) Begin CPR and perform mouth-to-mouth
 - d) Use your shirt over their mouth as a barrier
18. What is the correct compression-to-ventilation ratio for Two-Rescuer Infant BLS?
- a) 30:2
 - b) 30:1
 - c) 15:2
 - d) 15:1
19. You are treating an adult choking victim. They initially can cough, but now are grasping their throat and turning blue. What is the next step?
- a) Heimlich Maneuver
 - b) Begin CPR
 - c) Rescue breathing
 - d) Check pulse
20. The five steps in the Adult Chain of Survival include all of the following EXCEPT:*
- a) Early CPR
 - b) Rapid defibrillation
 - c) Advanced airway placement
 - d) Integrated post-cardiac arrest care
21. Which of the following are signs of airway obstruction?*
- a) Poor air exchange
 - b) High-pitched noise while inhaling
 - c) Inability to speak
 - d) All of the above
22. After delivering a shock with and AED, what is the next step in caring for a person?*
- a) Reassess for a pulse.
 - b) Do chest compressions only.
 - c) Resume CPR.
 - d) Do ventilation only.

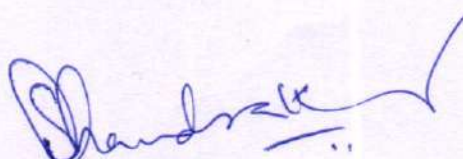


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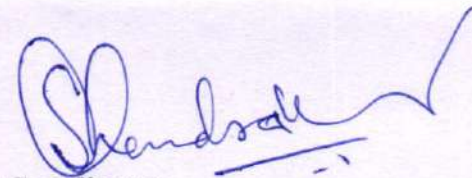
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23. Over what age should you use 'Adult' AED pads?
- a) 8 years old
 - b) 12 years old
 - c) 18 years old
 - d) 21 years old
24. Efforts to relieve choking should be stopped when:
- a) The obstruction is removed
 - b) The victim becomes unresponsive
 - c) The victim begins breathing normally
 - d) Any of the above occurs
25. In 2-rescuer CPR, where the patient is between 1 years old and puberty, the chest compression to breaths ratio is:
- a) 15:1
 - b) 15:2
 - c) 30:1
 - d) 30:2
26. CPR is initiated and the victim's pulse returns but he is not breathing. What ventilation rate should be used for this patient?
- a) 8 per minute
 - b) 12 per minute
 - c) 20 per minute
 - d) Depends on his color
27. What does AED stand for?
- a) Automatic Energy Delivery
 - b) Automated External Device
 - c) Automated External Defibrillator
 - d) Autonomous Energy Defibrillator
28. The 5 links in the adult Chain of Survival include all of the following EXCEPT:
- a) Early CPR
 - b) Rapid Defibrillation
 - c) Use of Cardiovascular Medications
 - d) Integrated Post-Cardiac Arrest Care

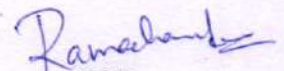

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29. When do you phone the emergency response number if you are alone with an unresponsive infant?
- a) after 5 cycles of CPR
 - b) after 1 cycle of CPR
 - c) immediately
 - d) after you give 2 breaths
30. Which of the following statements best describes the benefit of rescue breathing?
- a) Rescue breathing will help overcome any airway obstruction that may be blocking the airway
 - b) Rescue breathing will maintain completely normal oxygenation for the victim
 - c) Rescue breathing might defibrillate the heart
 - d) Rescue breathing is an effective way to provide oxygen to the victim



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A VALUE ADDED COURSE ON ANASTHESIA FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

DATE:

TIME: 30 Minutes

MARKS: 30

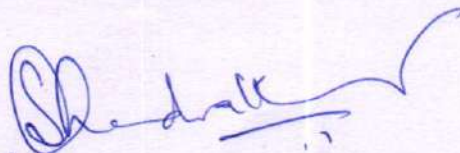
Tick the Correct Answer

1. What is the compression to breath ratio in two-person CPR for an adult?
 - a) 20:2
 - b) 30:2**
 - c) 15:2
 - d) 25:2
2. How often should rescuers switch roles when performing two-rescuer adult CPR?
 - a) After every cycle of CPR
 - b) After every two cycles of CPR**
 - c) After every five cycles of CPR
 - d) After every 10 cycles of CPR
3. Where should you attempt to perform a pulse check in a child who is anywhere from one year to puberty?
 - a) Brachial artery**
 - b) Ulnar artery
 - c) Temporal artery
 - d) Carotid
4. You are performing CPR on an adult victim. The second rescuer has arrived with the AED and turned it on. What is their next step?
 - a) Place the pads over the victim's clothes
 - b) Wait for advanced care to arrive before continuing use of the AED
 - c) Place the pads on the victim's bare chest**
 - d) Shock the victim

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5. Rescue Breathing is used for a victim who is unconscious but has a pulse. What is the correct rate for rescue breathing in a child or infant?
- a) 1 breath every 5 to 6 seconds
 - b) 2 breaths every 3 to 5 seconds
 - c) 1 breath every 3 to 5 seconds**
 - d) 2 breaths every 5 to 6 seconds
6. What is the correct hand placement for compressions on an infant victim?
- a) Use 2 hands when performing compressions on an infant
 - b) Use two fingers when performing compressions on an infant**
 - c) Use one hand when performing compressions on an infant
 - d) Do not give compressions on an infant
7. You are alone and find a potential victim. What is your first step?
- a) Begin Chest Compressions
 - b) Ensure scene safety**
 - c) Check for responsiveness
 - d) Open the airway and give 2 breaths
8. What is the correct rate of compressions?
- a) 100**
 - b) 40
 - c) 80
 - d) 60
9. During CPR on an adult victim, the compression-to-breath ratio is:
- a) Give 1 breath after every 5 compressions
 - b) Give 2 breaths after every 30 compressions**
 - c) Give 3 Breaths after every 15 compressions
 - d) Give 2 breaths after every 100 compressions
10. When should you use the two thumb-encircling hands technique on an infant?
- a) When there are 2 rescuers present for CPR
 - b) When your fingers get tired of compressions
 - c) When you want to produce less blood flow in the infant
 - d) When you are trying to relieve choking in the infant

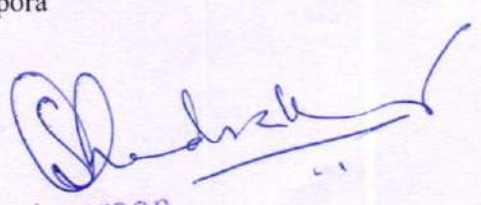


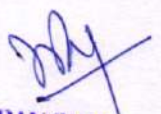
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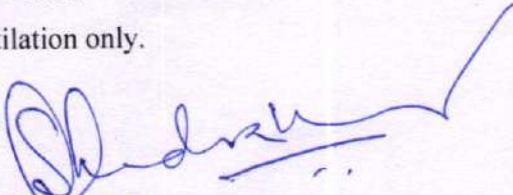
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11. You have noticed a potential victim and ensured the scene is safe. What is your **next** step?
- Provide rescue breathing
 - Check for victim's responsiveness
 - Begin chest compressions
 - Call the victim's doctor
12. Use abdominal thrusts to relieve choking in a conscious adult. State true or false.
- True**
 - False
13. You are giving CPR to a 5-year-old child. A second rescuer comes by and states they know CPR. What happens to your Compression to Breath ratio when you add the second rescuer?
- It changes - 15 compressions to 2 breaths**
 - It changes - 30 compressions to 3 breaths
 - It changes - 5 compressions to 1 breath
 - It stays the same - 30 compressions to 2 breaths
14. After the AED has delivered the shock you should...
- Continue CPR beginning with compressions**
 - Wait patiently for the AED to reanalyze
 - Give 2 breaths
 - Turn off the AED
15. The 2015 AHA guidelines for CPR recommended BLS sequence of steps are:
- Chest compressions, Airway, Breathing
 - None of the above
 - Airway, Breathing, Check pulse
 - Airway, Breathing, Chest compressions**
16. The pulse assessed in an adult cardiac arrest victim is called the _____ pulse?
- Groin
 - Radial
 - Carotid**
 - Tempora


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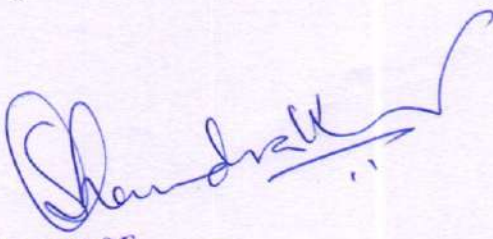

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17. You find an unresponsive victim without a pulse. You do not have a mask. What is the next step for an untrained lay responder?
- a) Go call 911
 - b) Wait until EMS arrives
 - c) Begin CPR and perform mouth-to-mouth**
 - d) Use your shirt over their mouth as a barrier
18. What is the correct compression-to-ventilation ratio for Two-Rescuer Infant BLS?
- a) 30:2
 - b) 30:1
 - c) 15:2**
 - d) 15:1
19. You are treating an adult choking victim. They initially can cough, but now are grasping their throat and turning blue. What is the next step?
- a) Heimlich Maneuver**
 - b) Begin CPR
 - c) Rescue breathing
 - d) Check pulse
20. The five steps in the Adult Chain of Survival include all of the following EXCEPT:*
- a) Early CPR
 - b) Rapid defibrillation
 - c) Advanced airway placement**
 - d) Integrated post-cardiac arrest care
21. Which of the following are signs of airway obstruction?*
- a) Poor air exchange
 - b) High-pitched noise while inhaling
 - c) Inability to speak
 - d) All of the above**
22. After delivering a shock with and AED, what is the next step in caring for a person?*
- a) Reassess for a pulse.
 - b) Do chest compressions only.
 - c) Resume CPR.**
 - d) Do ventilation only.


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23. Over what age should you use 'Adult' AED pads?
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29. When do you phone the emergency response number if you are alone with an unresponsive infant?
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 - b) after 1 cycle of CPR
 - c) **immediately**
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30. Which of the following statements best describes the benefit of rescue breathing?
- a) Rescue breathing will help overcome any airway obstruction that may be blocking the airway
 - b) Rescue breathing will maintain completely normal oxygenation for the victim
 - c) Rescue breathing might defibrillate the heart
 - d) **Rescue breathing is an effective way to provide oxygen to the victim**

Coordinator

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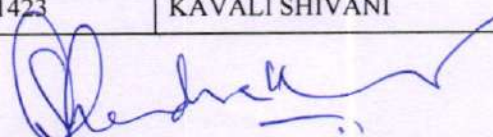
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ASSESSMENT MARKS

Name of the Program: A Value added course on Anasthesia

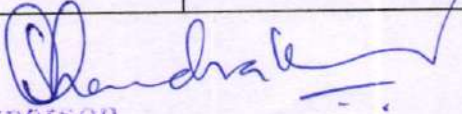
Date: 22.06.2020 to 27.06.2020

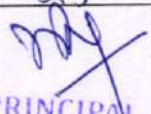
S. No	Roll No.	Student Name	Marks (30)
1	1401	K GOPISHANKAR REDDY	24
2	1402	PASHYA RADHIKA REDDY	24
3	1403	DHANUKONDA SRAVYA	25
4	1404	GONABOYINA LAKSHMI TANUJA	27
5	1405	BANDARU MEGHANA	26
6	1406	PULAPALLY RAJ VARDHAN	25
7	1407	DEPA VENUGOPAL REDDY	24
8	1408	T SUMANA REDDY	24
9	1409	RACHURI PRIYANKA	26
10	1410	SAJJAPUR SANJANA REDDY	25
11	1411	GOLLAPALLI KIRAN CHAITANYA	24
12	1412	NARLA ACHYUTH	24
13	1413	KOTA ROHIT	24
14	1414	P AMBA SWAMY NAIDU	26
15	1415	KALLU DEEPTHI	25
16	1416	BILLA NITISH REDDY	24
17	1417	G S PROKTHA	24
18	1418	JUJARE ANKITHA	25
19	1419	CONDLALA BHAVANI	24
20	1420	B NARASIMHA SWAMY	24
21	1421	RAPOLUAISHWARYA LAXMI	24
22	1422	THAIDA SHEKAR	25
23	1423	KAVALI SHIVANI	26


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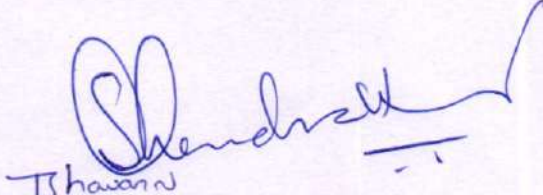

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24	1424	RAJ KUMARDILIP SAWALE	26
25	1425	ENNAM SHROETHI	24
26	1426	G DHARMA SHIASTRA	24
27	1427	GOGURLA MANISHA	25
28	1428	POLICE PATIL VISHWAPRASAD	26
29	1429	GANJI GANESH	24
30	1430	GUMMULA SAHITITYA	24
31	1431	EDDU MEGHANA	25
32	1432	VUPPUGALLA GEETHIKA	24
33	1433	KESHETTY CHANDU KUMAR	26
34	1434	MOHAMMED ABDUL MUJEER	24
35	1435	ANZILA SHAREEFA	25
36	1436	SHAZIA ALI	26
37	1437	N NEHA	24
38	1438	PAGADALA DIVYA	25
39	1439	K SANTOSHI	24
40	1440	E SNIGDHA	26
41	1441	PRUDHIVI RAJ JALADANKI	24
42	1442	MEGAVATH RAJITFIA	25
43	1443	K SUSHMA	26
44	1444	KAKANI MAMATHA	24
45	1445	THATIKAYALA CHIDAMBAR	24
46	1446	K BHARATH KUMAR	25
47	1447	DAMSALAPUDI NEHA	24
48	1448	KATTHULA SUPRIYA	26
49	1449	MAAMUDDUNAVEENA	25
50	1450	P ANJANA SHABDI RAM	24
51	1451	HYNDHAVIPADARTI	24
52	1452	SHAIK SAMEER	25
53	1453	REVURI SOUMYA	26
54	1454	P BHAVYA CHARANA	27
55	1455	RIA SHERLYN MANDA	25

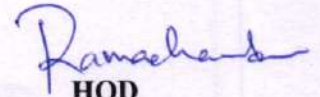

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56	1456	M VENKATA RAMANI	26
57	1457	MOKU DEEPA	25
58	1458	V NAGA VENKATA SREE VALL	24
59	1459	P HARSHA VARDHANA REDDY	24
60	1460	K VENKATA TRIVED	26


Ishwari
COORDINATOR
 Internal Quality Assurance Cell (IQAC)
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Date: 29.06.2020

PROGRAM REPORT

Name of the Event : A Value added course on ANASTHESIA

Date : 22.06.2020 to 27.06.2020

Resource Person : Dr. Adam

Professor / Anesthesia,

Dr. Ramachander,

Professor & Head

MNR Medical College

Email ID: adam@gmail.com

Name of the Coordinator: Dr. Syed

Number of Students attended: 60

Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

- The aim of basic life support includes preserving life, preventing injury from getting worse, aiding recovery, relieving pain, and protecting the unconscious. The main objective is to save lives.
- The major objective of BLS is to provide oxygen to the heart and the brain and to sustain tissue viability until definitive electrical or medical treatment.
- Basic Life Support (BLS) course provides healthcare providers and public safety professionals the knowledge and skills necessary to respond to breathing and cardiac emergencies in adult, child and infant patients.

TOPICS COVERED:

- Introduction, Basic Concepts.
- CPR (Cardiopulmonary resuscitation) in adults.
- CPR (Cardiopulmonary resuscitation) in Pediatrics and Infants.
- Cardiac Arrest.
- AED (Automated external defibrillator) for adults and infants.
- Foreign Body.

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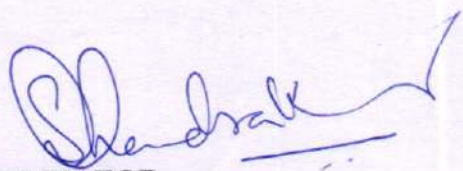
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OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

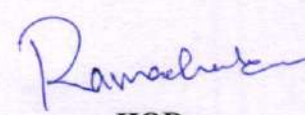
- Improve knowledge and skills related to basic life support practices in students. Periodic basic life support training is very important for competency in this area among students.
- Recognize an emergency situation. Identify, assess and minimize immediate hazards to self and others. Assess the casualty and recognize the need for CPR. Seek assistance from emergency services.


COORDINATOR

Chairperson
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MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Certificate of Participation

This is to certify that

KOTA ROHITH

has participated in A Value added course on

"ANAESTHESIA - CPR"

from 22-06-2020 to 27-06-2020 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener

Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

Principal

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Date: 06.07.2020

CIRCULAR

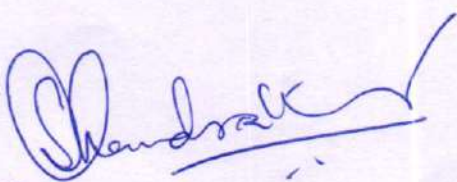
This is to inform all Final Year students that our department is organizing A value added course on “GENERAL MEDICINE AND PSYCHIATRY” by Dr. Lingaraj, Professor from 13.07.2020 to 17.07.2020. All Students are requested to attend the Program.


Principal

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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards


Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

REGISTRATION FORM

Name:

Dept. :

Institution:

Address for Communication:

.....

.....

Mobile:

email:



Chandrasekhar
Chairperson
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PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr.Pavan
SPM
MNR Group of Educational Institutions

Resource Person:

Dr. Lingaraj

Professor / Social and
Preventive Medicine,
Email Id: lingaraj@gmail.com

ADDRESS FOR COMMUNICATION:

Dr.Pavan
Coordinator
SPM
syed79@gmail.com
7989594783

MNR Medical College
Fasalwadi, Sangareddy,
Hyderabad

A VALUE ADDED COURSE
ON

"GENERAL MEDICINE & PSYCHIATRY"



Dates:

13.07.2020 to 17.07.2020

Organized by:

Dept. of General Medicine

Venue:

Lecture Hall - II

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad

Telangana 502 294

INDIA

Principal
Principal
MNR Medical College & Hospital
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About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



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Objectives of the Programme:

- Explain the neural origins of EEG data
- Explain, in basic terms, how EEG is recorded
- Explain the difference between time- and frequency-domain treatments of EEG data
- Explain the rationale for fundamental EEG data preprocessing operations, including:
 - o filtering
 - o event code processing
 - o segmentation (epoching)
 - o artifact removal
 - o averaging

Topics to be Covered

- Introduction and terminology.
- Anatomy and neurological disorders.
- EEG technology
- EEG history & concepts
- EEG pattern recognition
- Conclusion


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LIST OF STUDENT REGISTERED

Name of the Program: A Value added course on General Medicine and Psychiatry

Date: 13.07.2020 to 17.07.2020

S. No	Roll No.	Student name	Signature
1	1461	SABAVAT MOUNIKA	
2	1462	KANDATI UMA	Uma
3	1463	SAHANA RENUKUNTLA	Sahana
4	1464	CHIKOTT SREFIA	SREFIA
5	1465	NARAPUREDDY SUMEDHA REDDY	
6	1466	MADDIBOYINA NAGAJYOTHI	Jyothi
7	1467	KATTA JEEVAN SAI	Jeevan Sai
8	1468	SUGOOR RAGHUVAMSHI REDDY	Raghuvamshi
9	1469	CHITTURI POORNIMA CHOWDARY	POORNIMA
10	1470	BELLAMKONDA SAI PRIYATAM	Priya Tam
11	1471	ALLA NIKITHA CHOWDARY	Nikitha
12	1472	ARURU VYSHNAVI	Vyshnavi
13	1473	N KIRANMAI	Kiranmai
14	1474	MOHAMMED ABDUL RAB	ABDUL
15	1475	D AKHIL KUMAR	AKHIL KUMAR
16	1476	SUBHAM SAHA	
17	1477	MARAMREDDY LAKSHMI MANSI	Lakshmi
18	1478	VENIGALLA VEDA SAMHITHA	Samhitha
19	1479	P SARIKA	Sarika
20	1480	NAMAN GOYAL	Naman
21	1481	K RANACHETAK	
22	1482	GUNUPURU SAI SHARATH	SHARATH
23	1483	PEDDIANILA REDDY	Anila Reddy

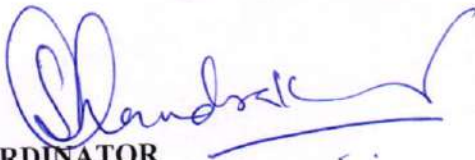
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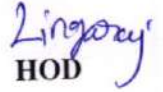
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24	1484	SIGNASANINEETHA	SANINEETHA
25	1485	AKULA RAMYA SRI	Ramya
26	1486	MUNAGALA NAVYA SREE	Navya
27	1487	PANTULA DHAVAL SAI REDDY	Dhaival
28	1488	NUSHRA MIRZA	Nushra
29	1489	PASHIKANTI MADHUMITHA	Madhumitha
30	1490	JAKKULA MANEESH CHANDRA	Maneesh
31	1491	DUVVURI PRAVALLIKA REDDY	Pravallika
32	1492	KASAMRAVALI	Kasamravali


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ATTENDANCE SHEET

Name of the Program: A Value added course on General Medicine and Psychiatry

Date: 13.07.2020 to 17.07.2020

S. No	Roll No.	Student Name	13.07.20	14.07.20	15.07.20	16.07.20	17.07.20	Feedback
1	1461	SABAVAT MOUNIKA	P	P	P	P	A	Good
2	1462	KANDATI UMA	P	P	P	A	P	Excellent
3	1463	SAHANA RENUKUNTLA	P	P	A	P	P	Good
4	1464	CHIKOTT SREFIA	P	A	P	P	P	Good
5	1465	NARAPUREDDY SUMEDHA REDDY	A	P	P	P	P	Good
6	1466	MADDIBOYINA NAGAJYOTHI	A	P	P	P	P	Good
7	1467	KATTA JEEVAN SAI	P	A	P	P	P	Good
8	1468	SUGOOR RAGHUVAMSHI REDDY	P	P	A	P	P	Good
9	1469	CHITTURI POORNIMA CHOWDARY	P	P	P	A	P	Good
10	1470	BELLAMKONDA SAI PRIYATAM	P	P	P	P	A	Good
11	1471	ALLA NIKITHA CHOWDARY	P	P	P	A	P	Very Good
12	1472	ARURU VYSHNAVI	P	P	A	P	P	Very Good
13	1473	N KIRANMAI	P	A	P	P	P	Good
14	1474	MOHAMMED ABDUL RAB	A	P	P	P	P	Good
15	1475	D AKHIL KUMAR	P	P	P	P	A	Good
16	1476	SUBHAM SAHA	A	P	P	P	P	Excellent
17	1477	MARAMREDDY LAKSHMI MANSI	P	A	P	P	P	Good
18	1478	VENIGALLA VEDA SAMHITHA	P	P	A	P	P	Good
19	1479	P SARIKA	P	P	P	A	P	Very Good

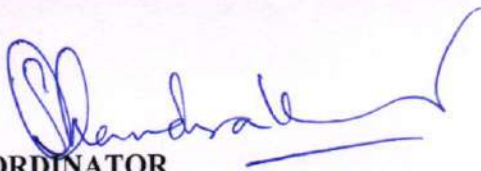
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20	1480	NAMAN GOYAL	A	P	P	P	P	Good
21	1481	K RANACHETAK	P	A	P	P	P	Good
22	1482	GUNUPURU SAI SHARATH	P	P	A	P	P	Good
23	1483	PEDDIANILA REDDY	P	P	P	A	P	Good
24	1484	SIGNASANINEETHA	P	P	A	P	P	Good
25	1485	AKULA RAMYA SRI	P	A	P	P	P	Excellent
26	1486	MUNAGALA NAVYA SREE	P	A	P	P	P	Good
27	1487	PANTULA DHAVAL SAI REDDY	P	P	P	P	A	Excellent
28	1488	NUSHRA MIRZA	P	P	P	A	P	Good
29	1489	PASHIKANTI MADHUMITHA	P	A	P	P	P	Good
30	1490	JAKKULA MANEESH CHANDRA	P	A	P	P	P	Excellent
31	1491	DUVVURI PRAVALLIKA REDDY	P	P	P	P	A	Good
32	1492	KASAMRAVALI	A	P	P	P	P	Good


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A VALUE ADDED COURSE ON GENERAL MEDICINE AND PSYCHIATRY FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

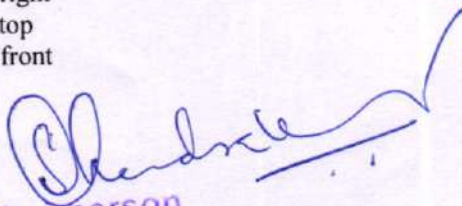
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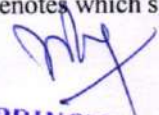
TIME: 30 Minutes

MARKS: 30

Tick the Correct Answer

1. Electrodes to measure EEG are placed on _____
 - a) forehead
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 - c) cheek
 - d) ears
2. According to the international 10/20 system to measure EEG, even number denotes which side of the brain?
 - a) left
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 - c) bottom
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3. Letter F in the EEG electrode placement system denotes?
 - a) front
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 - d) fast
4. Normal EEG frequency range is _____
 - a) 50-500Hz
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 - c) 0.05-5Hz
 - d) 1-200Hz
5. The letter T in the EEG electrode placement system denotes?
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 - b) temper lobe
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 - d) timpanic
6. According to the international 10/20 system to measure EEG, odd number denotes which side of the brain?
 - a) left
 - b) right
 - c) top
 - d) front


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7. The delta wave in EEG ranges from _____
 - a) 0.5-4Hz
 - b) 4-8Hz
 - c) 8-13Hz
 - d) 13-22Hz
8. Disturbance in the EEG pattern resulting from the external stimuli is called _____
 - a) provoked response
 - b) ckoored response
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9. The peak to peak amplitude of the waves that can be picked from the scalp is _____
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10. Which rhythm is the principal component of the EEG that indicates the alertness of the brain?
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 - b) Dutch cap
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16. Microglia are phagocytic in action and are derived from?
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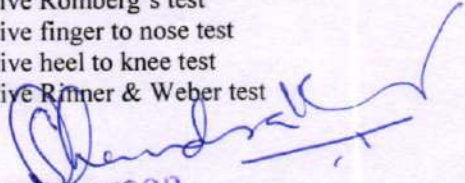
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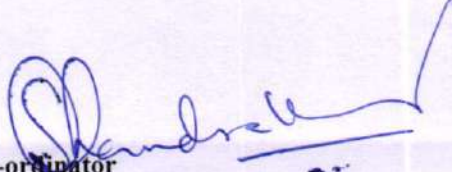
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17. The upper motor neuron impairment produces the following change of muscles tone:
- flaccidity
 - spasticity
 - "cog wheel" rigidity
 - myoclonia
18. The muscular wasting (hypotrophy) usually develops with disease in:
- upper motor neuron
 - lower motor neuron
 - cerebellar
 - caudate
19. The temperature & pin sense loss usually develops with disease in:
- anterior horns of spinal cord
 - posterior horns of spinal cord
 - lateral horns of spinal cord
 - posterior columns of spinal cord
20. A glove-&-stocking pattern of sensory disturbance usually develops with disease in:
- peripheral nerves
 - the spinal cord
 - the brainstem
 - the thalamus
21. Babinsky response usually develops with damage in:
- upper motor neuron
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22. The presence of ataxia suggests damage to any of the following EXCEPT:
- cerebellar
 - thalamus
 - vestibular nucleus
 - vagal nerve
23. The ability to walk along a straight line is most often impaired with:
- cerebellar dysfunction
 - parietal lobe damage
 - temporal lobe damage
 - ocular motor disturbances
24. Parkinsonism includes combination of the following:
- tremor, bradykinesia & muscles rigidity
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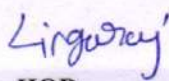

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Co-ordinator

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A VALUE ADDED COURSE ON GENERAL MEDICINE AND PSYCHIATRY FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

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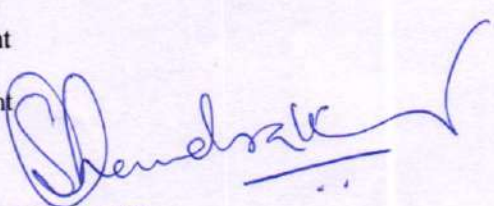
DATE:

TIME: 30 Minutes

MARKS: 30

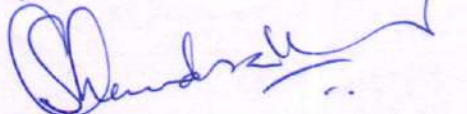
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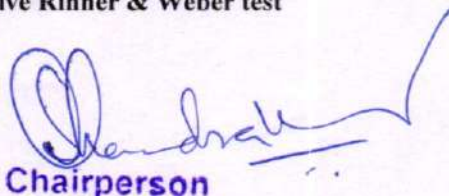


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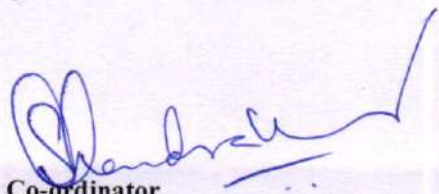
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Co-ordinator

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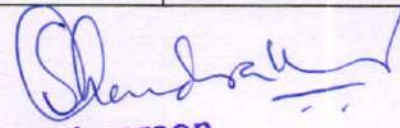
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ASSESSMENT MARKS

Name of the Program: A Value added course on General Medicine and Psychiatry

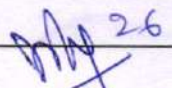
Date: 13.07.2020 to 17.07.2020

S. No	Roll No.	Student Name	Marks (30)
1	1461	SABAVAT MOUNIKA	27
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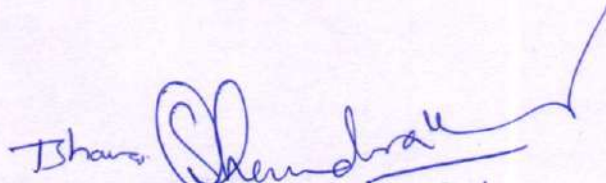
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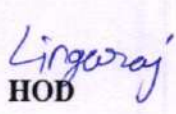
24	1484	SIGNASANINEETHA	27
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Date: 20.07.2020

PROGRAM REPORT

Name of the Event : A Value added course on "General Medicine and Psychiatry "

Date : 13.07.2020 to 17.07.2020

Resource Person : Dr.Lingaraj

Professor / Social and Preventive Medicine,

MNR Medical College

Email Id: lingaraj@gmail.com

Name of the Coordinator: Dr.Pavan

Number of Students attended: 32

Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

- Explain the neural origins of EEG data
- Explain, in basic terms, how EEG is recorded
- Explain the difference between time- and frequency-domain treatments of EEG data
- Explain the rationale for fundamental EEG data preprocessing operations, including:
 - filtering
 - event code processing
 - segmentation (epoching)
 - artifact removal
 - averaging

TOPICS COVERED:

- Introduction and terminology.
- Anatomy and neurological disorders.
- EEG technology
- EEG history & concepts
- EEG pattern recognition
- Conclusion

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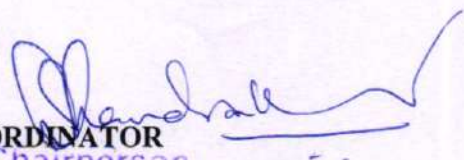
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OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Understand the fundamentals of brain science and EEG
- Acquire EEG data in different montages and extract frequency bands
- Analyze and assess mental states using signal processing approaches.

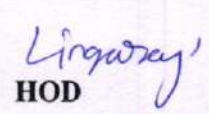

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MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Certificate of Participation

This is to certify that

NAMAN GOYAL

has participated in A Value added course on

"GENERAL MEDICINE AND PSYSHIATRY"

from 13-07-2020 to 17-07-2020 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener


Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital


Principal

PRINCIPAL
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



MNR MEDICAL COLLEGE & HOSPITAL

MNR Nagar, Fasalwadi, Sangareddy - 502 294, Sangareddy Dist. Telangana. India

Ph: + 85000 56667, (08455) 230523, 230527, 230524 Fax No. (08455) - 230555, 230533

Date: 10.08.2020

CIRCULAR

This is to inform all II Year students that our department is organizing A Value added course on "Management of Postpartum Hemorrhage" from 17.08.2020 to 21.08.2020. All Students are requested to attend the Program.

Principal

PRINCIPAL

**MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294**

Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards

Chairperson

Internal Quality Assurance Cell (IQAC)

MNR Medical College & Hospital

REGISTRATION FORM

Name:.....

Dept. :.....

Institution:.....

Address for Communication:

.....

.....

Mobile:.....

email:

Free:
In-House
Staff & Students

PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr. Syed
SPM
MNR Group of Educational Institutions

Resource Person:

Dr. Sopan Malhari Togarikar

Professor

Dr. Sandhya

Professor / Pathology

Email ID: sandhya@gmail.com

ADDRESS FOR COMMUNICATION:

Dr. Syed

Coordinator, SPM

syed79@gmail.com

7989594783

MNR Medical College

Fasalwadi, Sangareddy,

Hyderabad

A VALUE ADDED COURSE
ON

"MANAGEMENT OF POSTPARTUM HEMORRHAGE"



Dates:

17.08.2020 to 21.08.2020

Organized by:

Dept of OBGY

Venue:

Lecture Hall - III

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad

Telangana-502 294

INDIA

About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



Objectives of the Programme:

- Recognize the most common causes and list the four "T's" in the differential diagnosis of acute PPH.
- Outline a systematic approach to emergency treatment of PPH. List commonly available options for pharmacological management. Perform simple procedural and surgical management.
- Outline an approach to management of PPH refractory to simple measures. Manage lower segment bleeding, uterine rupture, and refractory uterine atony that may occur after cesarean delivery. Be able to use laparotomy to address refractory PPH.
- Anticipate and prepare for emergency peripartum hysterectomy (EPH) in a patient with identified risk factors. Identify the team, equipment, and skills required to perform EPH. Outline a technique for rapid subtotal hysterectomy

Topics to be Covered

- Introduction
- Active management of third stage of labour.
- Prevention of Postpartum hemorrhage
- Diagnosis of Postpartum hemorrhage
- Recent advances in management of Postpartum hemorrhage
- Assessment of blood loss



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LIST OF STUDENT REGISTERED

Name of the Program: A Value added course on Management of Postpartum Hemorrhage

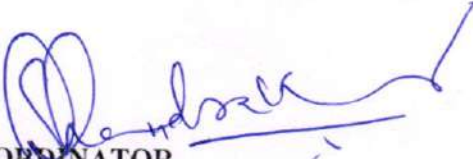
Date: 17.08.2020 to 21.08.2020

S. No	Roll No.	Student Name	Signature
1	1761	SETTI SRI PRABHAS	<i>Prabhas</i>
2	1762	RISHAM MUHAMMED	<i>Risham</i>
3	1763	MEKALA SNEHA SREE	<i>Sneha</i>
4	1764	DAMERACHERLA SAI HARSHA	<i>Sai Harsha</i>
5	1765	SPURTHI CHOUTAKURI	<i>Murthi</i>
6	1766	AITHA SRIVARSHA	<i>Aithe</i>
7	1767	M.PRIYANKA	<i>Priyanka</i>
8	1768	ALLADI R ABHIGNA	<i>R Abhigna</i>
9	1769	MAJETY DEVIKA	<i>Devika</i>
10	1770	SHUBHAM SINGH	<i>Shubham Singh</i>
11	1771	VELDANDA SAI SAHITHI	<i>Sahithi</i>
12	1772	AYYANKI SANJANA	<i>Sanjana</i>
13	1773	S.MAAVYA	<i>Maavya</i>
14	1774	KONDA UDAY KUMAR	<i>Uday Kumar</i>
15	1775	ARIHANT BISWAJIT DAS	<i>Arihant</i>
16	1776	MEDIWAR SHRUTI SHRIKANT	<i>Shrikanth</i>
17	1777	JAYA SINDHURI V	<i>Sindhuri</i>
18	1778	MEDISETTI LAKSHMI BRAMITHA	<i>Brahmi</i>
19	1779	VAJAGOUNI NIKHIL GOUD	<i>Nikhil</i>
20	1780	GUTTEDHAR MADHURI	<i>Madhuri</i>
21	1781	SHETTY TRIBHUVANA SAGAR	<i>Shetty Sagar</i>
22	1782	DEEPIKA GOLLAPALLI	<i>Deepika</i>
23	1783	AHMED BIN MUKHTADER JABRI	<i>Jabri</i>
24	1784	VEERAVALLI SHRUTHI DANIAL	<i>Danial</i>

Chairperson
Internal Quality Assurance Cell (IQAC)
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25	1785	RAHATHUNNISA	Rahathunnisa
26	1786	PAVITHRA M	Pavithra
27	1787	DHULIPALA RIDDHI	Riddhi
28	1788	PANDRAPRAGADA SAI Koushik	Sai koushik
29	1789	SHAHILA BANU J J	Banu
30	1790	APURVA SUBHASH VIGHANE	Apuva Subhash


COORDINATOR
 Chairperson
 Internal Quality Assurance Cell (IQAC)
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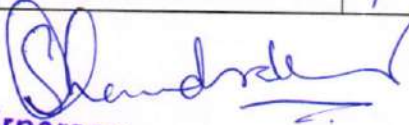
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ATTENDANCE SHEET

Name of the Program: A Value added course on Management of Postpartum Hemorrhage

Date: 17.08.2020 to 21.08.2020

S. No	Roll No.	Student Name	17.08.20	18.08.20	19.08.20	20.08.20	21.08.20	Feedback
1	1761	SETTI SRI PRABHAS	P	A	P	P	P	Good
2	1762	RISHAM MUHAMMED	P	P	A	P	P	Excellent
3	1763	MEKALA SNEHA SREE	P	A	P	P	P	Good
4	1764	DAMERACHERLA SAI HARSHA	A	P	P	P	P	Good
5	1765	SPURTHI CHOUTAKURI	P	P	P	A	P	Good
6	1766	AITHA SRIVARSHA	P	P	P	P	A	Good
7	1767	M.PRIYANKA	P	P	A	P	P	Good
8	1768	ALLADI R ABHIGNA	P	A	P	P	P	Good
9	1769	MAJETY DEVIKA	P	P	P	A	P	Good
10	1770	SHUBHAM SINGH	A	P	P	P	P	Good
11	1771	VELDANDA SAI SAHITHI	P	A	P	P	P	Good
12	1772	AYYANKI SANJANA	A	P	P	P	P	Excellent
13	1773	S.MAAVYA	P	P	P	A	P	Good
14	1774	KONDA UDAY KUMAR	A	P	P	P	P	Good
15	1775	ARIHANT BISWAJIT DAS	P	P	P	P	A	Excellent
16	1776	MEDIWAR SHRUTI SHRIKANT	A	P	P	P	P	Good
17	1777	JAYA SINDHURI V	P	A	P	P	P	Good
18	1778	MEDISETTI LAKSHMI BRAMITHA	P	P	A	P	P	Excellent
19	1779	VAJAGOUNI NIKHIL GOUD	P	P	P	A	P	Good
20	1780	GUTTEDHAR MADHURI	P	P	P	P	A	Good


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21	1781	SHETTY TRIBHUVANA SAGAR	P	A	P	P	P	Good
22	1782	DEEPIKA GOLLAPALLI	A	P	P	P	P	Good
23	1783	AHMED BIN MUKHTADER JABRI	P	P	A	P	P	Good
24	1784	VEERAVALLI SHRUTHI DANIAL	P	P	P	A	P	Excellent
25	1785	RAHATHUNNISA	P	A	P	P	P	Good
26	1786	PAVITHRA M	P	P	P	P	A	Good
27	1787	DHULIPALA RIDDHI	A	P	P	P	P	Good
28	1788	PANDRAPRAGADA SAI Koushik	P	P	A	P	P	Excellent
29	1789	SHAHILA BANU J J	P	P	P	P	A	Good
30	1790	APURVA SUBHASH VIGHANE	P	A	P	P	P	Excellent

[Signature]

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[Signature]
COORDINATOR

Chairperson

Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

[Signature]
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A VALUE ADDED COURSE ON MANAGEMENT OF POSTPARTUM HEMORRHAGE

FINAL ASSESSMENT TEST

NAME:

REG.NO:

TIME: 30 Minutes

YEAR / SEM:

DATE:

MARKS: 30

Tick the Correct Answer

1. The FIRST step in the management of a postpartum haemorrhage (PPH) is:
 - a. Administer 1ml syntometrine
 - b. Rapid intravenous fluid replacement
 - c. Call for help
 - d. Four T's
2. Syntocinon 1 mL ampoules is available in two doses. These are:
 - a. 2IU/mL & 5IU/mL
 - b. 5IU/mL & 10IU/mL
 - c. 10IU/mL & 20IU/mL
 - d. 5 IU/mL & 20IU/mL
3. Syntometrine is NOT given when there is a maternal history of:
 - a. Hypertension
 - b. Large Baby
 - c. Previous PPH
 - d. Hypotension
4. Side effects of Syntometrine include all the below EXCEPT
 - a. Nausea
 - b. Vomiting
 - c. Uterine pain
 - d. Shivering
5. Which statement is the MOST correct regarding monitoring for a potential PPH:
 - a. Maternal observations of temperature, respirations, and colour are a more accurate measure of PPH than estimated blood loss
 - b. Delay in initiating appropriate management is the major factor in maternal mortality and morbidity after a postpartum haemorrhage
 - c. If the woman was to drift into unconsciousness, she will have lost less than 20 % of her circulating volume
 - d. Of the '4 Ts', the main cause for postpartum haemorrhage is 'trauma'
6. A woman experiences a PPH after a precipitous birth at a Primary Birthing unit. When is consultation with an obstetrician recommended in the Referral Guidelines
 - a. When blood loss is over 500 mL after 30 IU of syntocinon

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- b. When blood loss is at 450 mL and not responding to treatment
- c. When blood loss is at 500 mL with no further blood loss
- d. When blood loss is over 500 mL with ongoing blood loss
- 7. Pick the correct answers for syntocinon.
 - a. 5IU or 10IU in 1mL
 - b. 10IU given IM or IV
 - c. 5IU given IV only
 - d. 6IU given IM or IV
- 8. 10-40IU of syntocinon can be infused IV in 500 -1000ml of fluid to treat PPH
 - a. True
 - b. False
- 9. To be considered a PPH, what would the estimated blood loss have to be for a C-section?
 - a. <550ML
 - b. > 600 ML
 - c. > 1000 ML
 - d. < 900 ML
- 10. In which of these cases could you diagnose PPH following vaginal delivery: 1. > 500 blood loss over 24 hrs 2. hypotension 3. tachycardia
 - a. 1&3
 - b. 2
 - c. 3
 - d. 1
- 11. Which of these implantations would most likely cause excessive bleeding?
 - a. Increta & Percreta
 - b. Normal & Accreta
 - c. Accreta & Increta
 - d. None of the above
- 12. The normal blood flow through the placental site each minute is 500-800 mls per minute.
 - a. True
 - b. False
- 13. What types of trauma during labour and birth would lead to PPH risk?
 - a. Instrumental assisted birth (vacuum or forceps)
 - b. C-Section
 - c. Lacerations of the cervix or vaginal wall
 - d. All of the above
- 14. If continued bleeding occurs during the third stage with a contracted uterus, the cause is most likely to be:
 - a. Cervical and perineal Lacerations
 - b. Placental abruption
 - c. Uterine atony
 - d. Cervical Polyp
- 15. What is the main cause of postpartum infections (puerperal infections)?
 - a. Bacteria
 - b. Viruses
 - c. Yeast
 - d. Parasites
- 16. A client, 1 day postpartum (PP), is being monitored carefully after a significant postpartum hemorrhage. Which of the following should the nurse report to the obstetrician?
 - a. Urine output 200 mL for the past 8 hours.
 - b. Weight decrease of 2 pounds since delivery.

Chairperson

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FASALWADI, SANGAREDDY-502794

- c. Drop in hematocrit of 2% since admission.
d. Pulse rate of 68 beats per minute
17. The clinic nurse is caring for a woman who is suspected of developing postpartum psychosis. Which of the following statements characterizes this disorder:
a. Symptoms start within several days of delivery
b. The disorder is common in postpartum women
c. Suicide and infanticide are uncommon in this disorder
d. Delusions and hallucinations accompany this disorder
18. In the fourth stage of labor, a full bladder increases the risk for
a. Hemorrhage
b. Disseminated intravascular coagulation
c. Infection
d. Shock
19. A client with cardiac disease delivers a baby. Afterwards, the nurse assesses the client for signs of cardiac decompensation. During the postpartum period, which condition can cause cardiac decompensation?
a. Increased pain
b. Increased cardiac output
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20. A postpartum client complains of stress incontinence. What information should the nurse suggest to the client to overcome stress incontinence?
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21. Bonding between a mother and her infant can be defined how?
a. An ongoing process in the year after delivery
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22. The process by which the reproductive organs return to the nonpregnant size and function is termed what?
a. Evolution
b. Involution
c. Decrement
d. Progression
23. During a postpartum examination of a client who delivered an 8-pound newborn 6 hours ago, the nurse assesses the following: fundus firm and at the umbilicus, and moderate lochia rubra with a steady trickle of blood noted from the vagina. Which assessment finding requires immediate follow-up?
a. Moderate lochia rubra
b. Steady trickle of blood
c. Fundus at the umbilical level
d. Firm fundus
24. A postpartum client is experiencing pain from an episiotomy. Which actions will the nurse suggest to the client to decrease discomfort? Select all that apply.
a. Washing the area with soap and water every day
b. Tightening the buttocks before sitting

Chandrasekhar

- c. Changing peripads daily
- d. Performing leg scissor kicks several times a day

25. If a woman had a prepregnancy daily requirement of 1800 calories and she decides to breastfeed her newborn, how many calories should the nurse recommend the woman take in each day?

- a. 2300 calories
- b. 2500 calories
- c. 2000 calories
- d. 1800 calories

26. A new mother asks the nurse when the "soft spot" on her son's head will go away. The nurse's answer is based on the knowledge that the anterior fontanel closes after birth by _____ months.

- a. 2
- b. 8
- c. 12
- d. 18

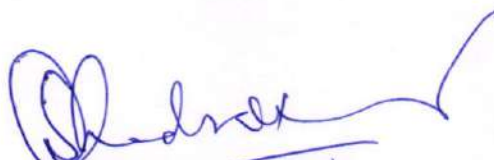
27. A woman with asthma is experiencing a postpartum hemorrhage. Which drug would NOT be used to treat her bleeding because it may exacerbate her asthma?

- a. Pitocin
- b. Nonsteroidal antiinflammatory drugs (NSAIDs)
- c. Hemabate
- d. Fentanyl

28. After birth, the nurse quickly dries and wraps the newborn in a blanket. How does this action prevent heat loss?

29. The nurse palpates the fundus and checks the character of the lochia of a postpartum client who is in the fourth stage of labor. The nurse expects the lochia to be: _____

30. Weight loss from diuresis, diaphoresis, and bleeding is about _____


Coordinator

Chairperson
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 - b. Steady trickle of blood**
 - c. Fundus at the umbilical level
 - d. Firm fundus
- 24. A postpartum client is experiencing pain from an episiotomy. Which actions will the nurse suggest to the client to decrease discomfort? Select all that apply.
 - a. Washing the area with soap and water every day
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- c. Changing peripads daily
- d. Performing leg scissor kicks several times a day

25. If a woman had a prepregnancy daily requirement of 1800 calories and she decides to breastfeed her newborn, how many calories should the nurse recommend the woman take in each day?

- a. **2300 calories**
- b. 2500 calories
- c. 2000 calories
- d. 1800 calories

26. A new mother asks the nurse when the "soft spot" on her son's head will go away. The nurse's answer is based on the knowledge that the anterior fontanel closes after birth by _____ months.

- a. 2
- b. 8
- c. 12
- d. **18**

27. A woman with asthma is experiencing a postpartum hemorrhage. Which drug would NOT be used to treat her bleeding because it may exacerbate her asthma?

- a. Pitocin
- b. Nonsteroidal antiinflammatory drugs (NSAIDs)
- c. **Hemabate**
- d. Fentanyl

28. After birth, the nurse quickly dries and wraps the newborn in a blanket. How does this action prevent heat loss?

Evaporation

29. The nurse palpates the fundus and checks the character of the lochia of a postpartum client who is in the fourth stage of labor. The nurse expects the lochia to be: **RED**

30. Weight loss from diuresis, diaphoresis, and bleeding is about **9lbs**

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Chairperson

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MNR Medical College & Hospital

T. Shamu
HOD

[Signature]

Chairperson

Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

[Signature]

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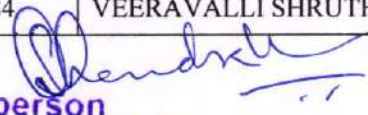
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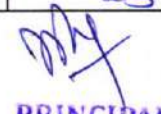
ASSESSMENT MARKS

Name of the Program: A Value added course on Management of Postpartum Hemorrhage

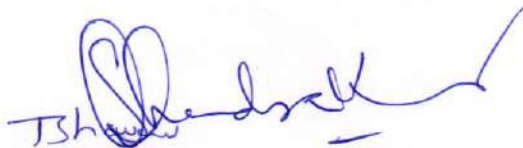
Date: 17.08.2020 to 21.08.2020

S. No	Roll No.	Student Name	Marks (30)
1	1761	SETTI SRI PRABHAS	24
2	1762	RISHAM MUHAMMED	27
3	1763	MEKALA SNEHA SREE	27
4	1764	DAMERACHERLA SAI HARSHA	29
5	1765	SPURTHI CHOUTAKURI	25
6	1766	AITHA SRIVARSHA	26
7	1767	M.PRIYANKA	26
8	1768	ALLADI R ABHIGNA	24
9	1769	MAJETY DEVIKA	25
10	1770	SHUBHAM SINGH	24
11	1771	VELDANDA SAI SAHITHI	24
12	1772	AYYANKI SANJANA	26
13	1773	S.MAAVYA	27
14	1774	KONDA UDAY KUMAR	25
15	1775	ARIHANT BISWAJIT DAS	25
16	1776	MEDIWAR SHRUTI SHRIKANT	27
17	1777	JAYA SINDHURI V	27
18	1778	MEDISETTI LAKSHMI BRAMITHA	27
19	1779	VAJAGOUNI NIKHIL GOUD	27
20	1780	GUTTEDHAR MADHURI	26
21	1781	SHETTY TRIBHUVANA SAGAR	26
22	1782	DEEPIKA GOLLAPALLI	26
23	1783	AHMED BIN MUKHTADER JABRI	26
24	1784	VEERAVALLI SHRUTHI DANIAL	25


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25	1785	RAHATHUNNISA	25
26	1786	PAVITHRA M	24
27	1787	DHULIPALA RIDDHI	25
28	1788	PANDRAPRAGADA SAI KOUSHIK	26
29	1789	SHAHILA BANU J J	27
30	1790	APURVA SUBHASH VIGHANE	25



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Date: 24.08.2020

PROGRAM REPORT

Name of the Event : A Value added course on "Management of Postpartum Hemorrhage"

Date : 17.08.2020 to 21.08.2020

Resource Person : Dr. Sopan Malhari Togarikar,
Professor
Dr. Sandhya
Professor
MNR Medical College
Email ID: sandhya@gmail.com

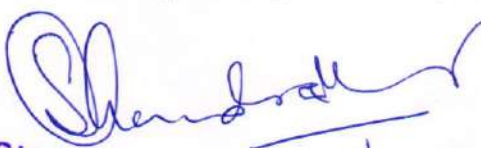
Name of the Coordinator: Dr. Syed

Number of Students attended: 30

Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

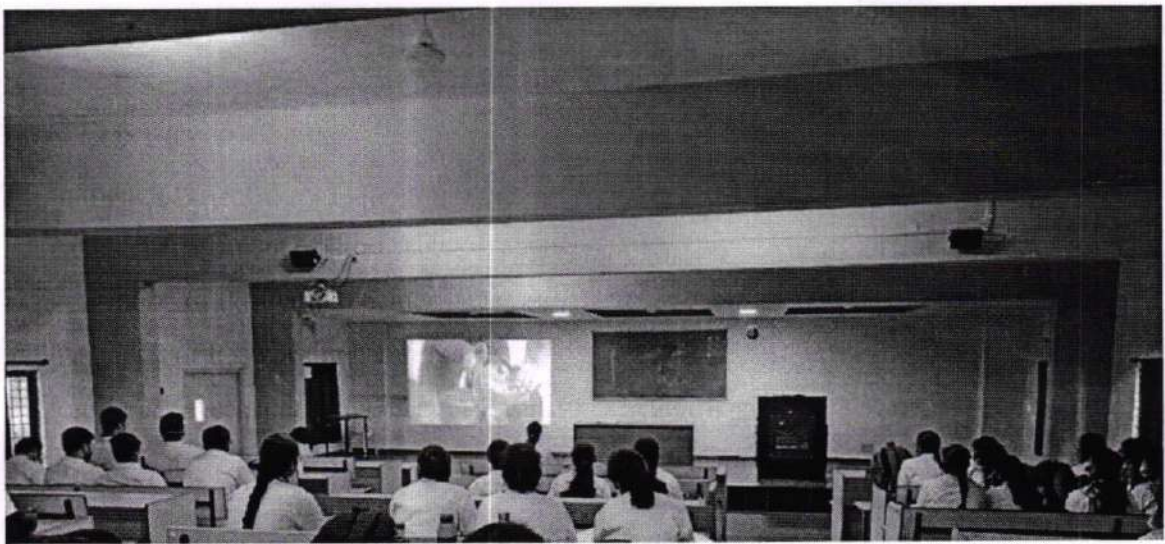
- Recognize the most common causes and list the four "T's" in the differential diagnosis of acute PPH.
- Outline a systematic approach to emergency treatment of PPH. List commonly available options for pharmacological management. Perform simple procedural and surgical management.
- Outline an approach to management of PPH refractory to simple measures. Manage lower segment bleeding, uterine rupture, and refractory uterine atony that may occur after cesarean delivery. Be able to use laparotomy to address refractory PPH.
- Anticipate and prepare for emergency peripartum hysterectomy (EPH) in a patient with identified risk factors. Identify the team, equipment, and skills required to perform EPH. Outline a technique for rapid subtotal hysterectomy.


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TOPICS COVERED:

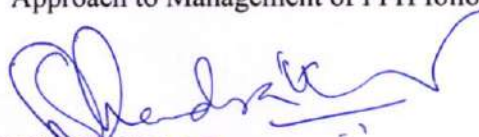
- Introduction
- Active management of third stage of labour.
- Prevention of Postpartum hemorrhage
- Diagnosis of Postpartum hemorrhage
- Recent advances in management of Postpartum hemorrhage
- Assessment of blood loss

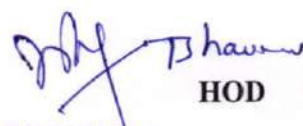


OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Know multiple measures can and should be instituted simultaneously in order to control bleeding and stabilize the patient.
- Approach to Management of PPH following Vaginal Delivery.
- Approach to Management of PPH following Cesarean Section


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MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Certificate of Participation

This is to certify that

K. BHARATH KUMAR

has participated in A Value added course on

"MANAGEMENT OF POSTPARTUM HAEMORRHAGE"

from 17-08-2020 to 21-08-2020 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener

Internal Quality Assurance Cell (IQAC)

MNR Medical College & Hospital

Principal

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Date: 14.09.2020

CIRCULAR

This is to inform all IV Year students that our department is organizing A Valu added course on "Biomedical Waste Management" by Dr. Mustfa, Professor and HOD/ from 21.09.2020 to 25.09.2020. All Students are requested to attend the Program.


Principal

Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards

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Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

REGISTRATION FORM

Name:

Dept. :

Institution:

Address for Communication:

.....

.....

Mobile:

email:

Free:
In-House
Staff & Students

PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr.Pavan
SPM
MNR Group of Educational Institutions

Resource Person:

Dr.Mustfa

Professor / Social and
Preventive Medicine,
MNR Medical College
Email id: musfta@gmail.com

ADDRESS FOR COMMUNICATION:

Dr.Pavan
Coordinator, SPM
syed79@gmail.com
7989594783
MNR Medical College
Fasalwadi, Sangareddy,
Hyderabad

Chandra
Chairperson
Internal Quality Assurance Cell (IQAC)
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A VALUE ADDED COURSE
ON

BIOMEDICAL WASTE MANAGEMENT



Dates:

21.09.2020 to 25.09.2020

Organized by:

Dept. of Microbiology

Venue:

Lecture Hall III

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad

Telangana-502 294

INDIA

Principal
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About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



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Objectives of the Programme:

- o Describe the various types of waste in health care.
- o Outline the sources that result in health-care.
- o Basics of Biomedical waste and Hospital acquired Infections.
- o Segregations and collection of biomedical waste, Treatment, processing and disposal of biomedical waste.
- o Patient and caregiver hygiene

Topics to be Covered

- Definition sources and characteristics of health care waste.
- Health and environmental impacts of health care waste.
- International and National HCWM laws.
- National health care waste management planning.
- HCWM planning in a health care functions.
- Occupational health and safety.



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LIST OF STUDENT REGISTERED

Name of the Program: A Value added course on Microbiology

Date: 21.09.2020 to 25.09.2020

S. No	Roll No.	Student Name	Signature
1	1501	ANAKHA S NAIR	
2	1502	KURELLI PAVAN KALYAN	
3	1503	PATLOLLA BHOOPAL REDDY	
4	1504	MEDI ANUP RAO	
5	1505	NUKALA NIHITHA	
6	1506	YASHASREE PASUPULETI	
7	1507	SOMA NITISH REDDY	
8	1508	ROSHAN KUMAR M	
9	1509	BANDYALA SAIKUMAR	
10	1510	NIKHITA NADIMPALLI	
11	1511	MUSKU NANDINI	
12	1512	AKULA PALLAVI	
13	1513	KONGALA RISHITHA	
14	1514	GOLKONDA KARTHIK	
15	1515	BIRADAR SAIKUMAR	
16	1516	NAIKOTI RAHUL	
17	1517	KOTHURU SUSHANTH	
18	1518	SEVELLA MANOJ KUMAR	
19	1519	DANDYAR SHIVA PRASAD	
20	1520	BURRA JEEVANA	
21	1521	MALELA BHANU PRASAD GOUD	
22	1522	AKKENAPALLY RAJASHEKARACHARY	

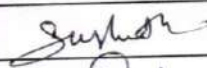
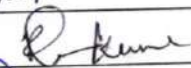
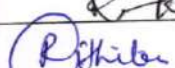
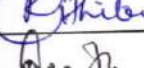
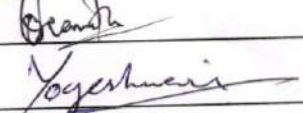
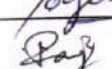
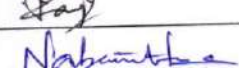
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23	1523	JANGITI MANEESHA	Mani
24	1524	BOLLOJU GURU PRASAD	Puru Prasad
25	1525	P SRILEKHA	Leela
26	1526	MORAM STOTRA PRIYA	Priya
27	1527	RACHANA RAPOLU	Rapsy
28	1528	M MANISHA GOUD	Manisha
29	1529	OGGU SRIKANTH	Srikant
30	1530	EDIGA SAI CHANDANA	Saichandana
31	1531	MARUGONDA SAKETH VARMA	Saketh
32	1532	ANUMALLA MANASWINI	Manaswini
33	1533	BANDI NAVEEN KUMAR	Naveen
34	1534	SHAIK HASNAD BABA	Hasnab
35	1535	MAHEEN SULTANA	Maheen
36	1536	BANOTH VASANTH KUMAR	Vasanth
37	1537	B ANJALI NAIK	Anjali
38	1538	MALAGARI MANEESHA	Manisha
39	1539	CHINMAYEE DESAI	Chinmayee
40	1540	GAJULA SRI HARSHA CHAKRAVARTHY	Harsha
41	1541	MALKA HARSHITHA	Harshitha
42	1542	MENDI DEEKSHITHA	Deeksha
43	1543	YATHAM SRI HARIKA	Harka
44	1544	J AISHWARYA	Aishwarya
45	1545	MUTHERAGALLA PRATHYUSHA	Prathyusha
46	1546	SEELAM LAXMI PRIYA	Priya
47	1547	BANDILA V V S TANMAIYEE	Tanmayee
48	1548	GADDAM SRINIVAS	Srinivas
49	1549	SK AJEETH MUSHRAF	Ajeeth
50	1550	GAJULA CHANDRA HASA	Chandra
51	1551	SALADI SAI VENKATA SOWMYA SARADA	Sowmya
52	1552	SHRUTI BOSE	Shruti
53	1553	DODDIPALLI BHANU PRAKASH REDDY	Bhanu

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54	1554	SABHADU SUSHMITHA	
55	1555	PRIYANKA RAJ KUMAWAT	
56	1556	MUGA RITHIKA	
57	1557	R PRANITH KAMLAY	
58	1558	MARPALIKAR YOGESHWARI CHANDRAKANT	
59	1559	RAJA RAJESWAR REDDY ATTILA	
60	1560	NABAMITA CHAKRABORTY	

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ATTENDANCE SHEET

Name of the Program: A Value added course on Microbiology

Date: 21.09.2020 to 25.09.2020

S. No	Roll No.	Student name	21.09.20	22.09.20	23.09.20	24.09.20	25.09.20	Feedback
1	1501	ANAKHA S NAIR	P	P	P	P	A	Good
2	1502	KURELLI PAVAN KALYAN	A	P	P	P	P	Excellent
3	1503	PATLOLLA BHOOPAL REDDY	P	P	P	P	A	Good
4	1504	MEDI ANUP RAO	A	P	P	P	P	Good
5	1505	NUKALA NIHITHA	P	A	P	P	P	Good
6	1506	YASHASREE PASUPULETI	P	P	A	P	P	Good
7	1507	SOMA NITISH REDDY	P	A	P	P	P	Good
8	1508	ROSHAN KUMAR M	P	P	P	P	A	Excellent
9	1509	BANDYALA SAIKUMAR	P	P	A	P	P	Excellent
10	1510	NIKHITA NADIMPALLI	P	A	P	P	P	Good
11	1511	MUSKU NANDINI	P	P	P	A	P	Good
12	1512	AKULA PALLAVI	P	P	A	P	P	Good
13	1513	KONGALA RISHITHA	A	P	P	P	P	Excellent
14	1514	GOLKONDA KARTHIK	P	A	P	P	P	Excellent
15	1515	BIRADAR SAIKUMAR	A	P	P	P	P	Good
16	1516	NAIKOTI RAHUL	A	P	P	P	P	Good
17	1517	KOTHURU SUSHANTH	P	P	P	P	A	Good
18	1518	SEVELLA MANOJ KUMAR	A	P	P	P	P	Excellent
19	1519	DANDYAR SHIVA PRASAD	P	P	P	P	A	Good
20	1520	BURRA JEEVANA	A	P	P	P		Excellent

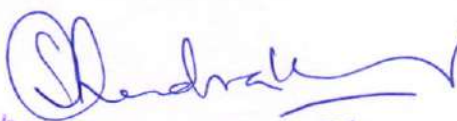
Chairperson

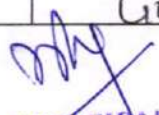
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21	1521	MALELA BHANU PRASAD GOUD	A	P	P	P	P	Good
22	1522	AKKENAPALLY RAJASHEKARACHARY	P	A	P	P	P	Excellent
23	1523	JANGITI MANEESHA	P	P	A	P	P	Good
24	1524	BOLLOJU GURU PRASAD	P	P	P	A	P	Good
25	1525	P SRILEKHA	P	P	P	P	A	Good
26	1526	MORAM STOTRA PRIYA	P	P	P	A	P	Good
27	1527	RACHANA RAPOLU	P	P	A	P	P	Good
28	1528	M MANISHA GOUD	P	A	P	P	P	Good
29	1529	OGGU SRIKANTH	A	P	P	P	P	Good
30	1530	EDIGA SAI CHANDANA	P	A	P	P	P	Good
31	1531	MARUGONDA SAKETH VARMA	P	P	A	P	P	Excellent
32	1532	ANUMALLA MANASWINI	P	P	P	A	P	Excellent
33	1533	BANDI NAVEEN KUMAR	P	P	P	P	A	Good
34	1534	SHAIK HASNAD BABA	P	P	P	A	P	Good
35	1535	MAHEEN SULTANA	P	P	A	P	P	Excellent
36	1536	BANOTH VASANTH KUMAR	P	A	P	P	P	Good
37	1537	B ANJALI NAIK	A	P	P	P	P	Good
38	1538	MALAGARI MANEESHA	P	A	P	P	P	Excellent
39	1539	CHINMAYEE DESAI	P	P	A	P	P	Good
40	1540	GAJULA SRI HARSHA CHAKRAVARTHY	P	P	P	A	P	Good
41	1541	MALKA HARSHITHA	P	P	P	P	A	Good
42	1542	MENDI DEEKSHITHA	P	P	P	A	P	Excellent
43	1543	YATHAM SRI HARIKA	P	P	A	P	P	Excellent
44	1544	J AISHWARYA	P	A	P	P	P	Excellent
45	1545	MUTHERAGALLA PRATHYUSHA	A	P	P	P	P	Good
46	1546	SEELAM LAXMI PRIYA	P	A	P	P	P	Good
47	1547	BANDILA V V S TANMAIYEE	P	P	A	P	P	Good
48	1548	GADDAM SRINIVAS	P	P	P	A	P	Good
49	1549	SK AJEETH MUSHRAF	P	P	P	P	A	Excellent
50	1550	GAJULA CHANDRA HASA	P	P	P	A	P	Good


 Chairperson
 Internal Quality Assurance Cell (IQAC)
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51	1551	SALADI SAI VENKATA SOWMYA SARADA	A	P	P	P	P	Good
52	1552	SHRUTI BOSE	P	A	P	P	P	Excellent
53	1553	DODDIPALLI BHANU PRAKASH REDDY	P	P	A	P	P	Excellent
54	1554	SABHADU SUSHMITHA	P	P	P	A	P	Good
55	1555	PRIYANKA RAJ KUMAWAT	P	P	P	P	A	Good
56	1556	MUGA RITHIKA	P	P	P	A	P	Excellent
57	1557	R PRANITH KAMLAY	P	P	A	P	P	Good
58	1558	MARPALIKAR YOGESHWARI CHANDRAKANT	P	A	P	P	P	Good
59	1559	RAJA RAJESWAR REDDY ATTILA	A	P	P	P	P	Good
60	1560	NABAMITA CHAKRABORTY	P	P	A	P	P	Good

COORDINATOR

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A VALUE ADDED COURSE ON MICROBIOLOGY FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

DATE:

TIME: 30 Minutes

MARKS: 30

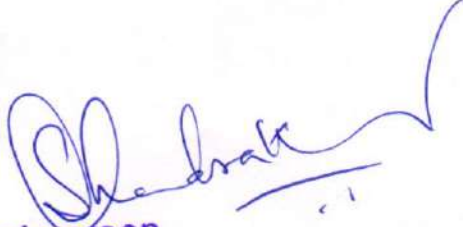
Tick the Correct Answer

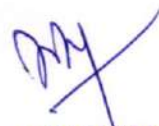
1. What is the main objective of risk assessment?
 - a) To evaluate hazard and minimize the risks
 - b) Remediation of contaminated sites
 - c) Hazard management
 - d) To know source of pollutants
2. The following is indirect cost of accident?
 - a) Money paid for treatment of worker
 - b) Compensation paid to worker
 - c) Cost of lost time of injured worker
 - d) All of the above
3. Risk management is responsibility of the
 - a) Customer
 - b) Investor
 - c) Developer
 - d) Project team
4. What is the main purpose of hazard identification?
 - a) To minimize the effect of a consequence
 - b) For better risk management
 - c) To characterize adverse effect of toxins
 - d) To reduce probability of occurrence
5. The ___ process determines whether exposure to a chemical can increase the incidence of adverse health effect.
 - a) Hazard identification
 - b) Exposure assessment
 - c) Toxicity assessment
 - d) Risk characterization
6. Hazard identification mainly focus on ___.
 - a) Chemical source and concentration
 - b) Chemical exposure
 - c) Chemical analysis
 - d) Chemical pathway

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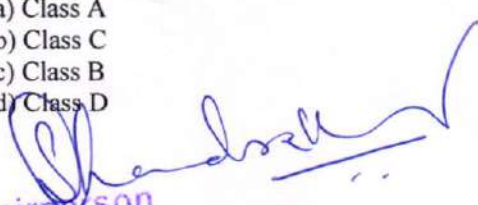
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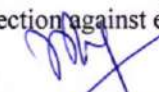
7. Personal Protective Equipment is required when ____.
- Employers suffer an injury
 - The employees suffer an injury
 - An employee asks for it
 - Engineering, work practice, and administrative controls do not provide sufficient protection against hazards
8. What type of protection is needed when you are exposed to hazards from flying particles?
- Eye protection
 - Face protection
 - Head protection
 - Both a and b
9. Which of the following types of gloves should you wear when working with chemicals?
- Butyl rubber gloves
 - Fabric gloves
 - Leather gloves
 - None of these
10. Which of the following hearing protection should be fitted by a professional?
- Single use earplugs
 - Molded earplugs
 - Earmuffs
 - None of these
11. Ergonomic traps, overload, and/or a decision to err lead to human error according to the
- Human factors theory
 - Epidemiological theory
 - Accident/incident theory
 - Domino theory
12. Which three factors lead to human error in the human factors theory?
- Carelessness, training, and management
 - Carelessness, overload, and training
 - Pressure, motivation, and fatigue
 - Overload, inappropriate response, and inappropriate activities
13. The systems theory views a situation in which an accident might occur as a system comprised of
- Person, machine, and motivation
 - Motivation, peer pressure, and overload
 - Person, machine, and environment
 - Attitude, risk, and motivation
14. While transporting hazardous waste, you should?
- Carry a Uniform Hazardous Waste Manifest in the truck
 - Have the word "WASTE" before the name of the material on the bills
 - Sign a uniform Hazardous Waste Manifest
 - All of the above
15. Hazard Class 3 is ____.
- Infectious substance
 - Radioactive
 - Flammable liquid
 - Corrosive


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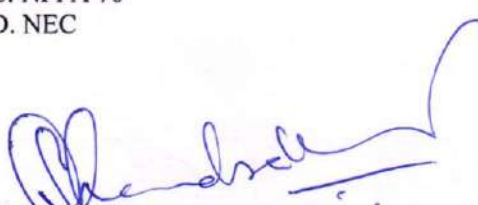

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16. Which of the following words is used to correspond with the most toxic material?
a) Caution
b) Danger
c) Hazard
d) Warning
17. What does SDS stand for?
a) Safety Document Sheet
b) Safety Data Sheet
c) Safety Description Sheet
d) None of the above
18. OSHA assignment is to set standards and conduct _____.
a) Inspections
b) Estimation
c) Analysis
d) Tests
19. What type of protection is needed when you are exposed to hazards from flying particles?
a) Eye protection
b) Face protection
c) Both a and b
d) Head protection
20. When working in areas where there is a potential for head injury from falling objects, you should _____.
a) Ask a colleague to give you a heads up when an object is about to fall
b) Appoint yourself a personal superhero to whisk you away from falling objects
c) Wear head protection
d) Look to the sky every 2 minutes for flying and falling objects
21. If you wear prescription lenses, you do not need additional eye protection against occupational eye hazards.
a) True
b) False
22. Eye protection is required for which of the following hazards?
a) Flying particles
b) Liquid chemicals, acids or caustic liquids
c) Chemical gases or vapors
d) All of the above
23. Welding shields primarily protect against.....
a) Metal splatter
b) Splashes
c) Flying particles
d) Dust
24. Which of the following classes of hard hats DO NOT provide any protection against electric hazards?
a) Class A
b) Class C
c) Class B
d) Class D


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25. Which of the following special purpose footwear should you wear to avoid a buildup of static electricity?
- a) Safety toe shoes
 - b) Foundry shoes
 - c) Electrically conductive shoes
 - d) Metatarsal guards
26. How many workers were killed on the job in 2012?
- A. 46
 - B. 462
 - C. 4,628
 - D. 46,280
27. What violations are most commonly cited by OSHA?
- A. Hazard communications
 - B. Scaffolding
 - C. Fall protection
 - D. Respiratory protection
28. What is the leading cause of death on construction sites?
- A. Struck by object
 - B. Falls
 - C. Caught-in or -between
 - D. Electrocutions
29. _____ contains special electrical requirements for healthcare facilities.
- A. ANSI 70
 - B. OSHA 29
 - C. NFPA 70
 - D. NEC
30. _____ applies to every replacement, installation, or utilization of electrical equipment.
- A. ANSI 70
 - B. OSHA 29
 - C. NFPA 70
 - D. NEC


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ASSESSMENT MARKS

Name of the Program: A Value added course on Microbiology

Date: 21.09.2020 to 25.09.2020

S. No	Roll No.	Student Name	Marks (30)
1	1501	ANAKHA S NAIR	24
2	1502	KURELLI PAVAN KALYAN	26
3	1503	PATLOLLA BHOOPAL REDDY	24
4	1504	MEDI ANUP RAO	24
5	1505	NUKALA NIHITHA	27
6	1506	YASHASREE PASUPULETI	25
7	1507	SOMA NITISH REDDY	27
8	1508	ROSHAN KUMAR M	24
9	1509	BANDYALA SAIKUMAR	24
10	1510	NIKHITA NADIMPALLI	25
11	1511	MUSKU NANDINI	24
12	1512	AKULA PALLAVI	26
13	1513	KONGALA RISHITHA	27
14	1514	GOLKONDA KARTHIK	27
15	1515	BIRADAR SAIKUMAR	24
16	1516	NAIKOTI RAHUL	24
17	1517	KOTHURU SUSHANTH	21
18	1518	SEVELLA MANOJ KUMAR	26
19	1519	DANDYAR SHIVA PRASAD	24
20	1520	BURRA JEEVANA	26
21	1521	MALELA BHANU PRASAD GOUD	24
22	1522	AKKENAPALLY RAJASHEKARACHARY	27

Signature
C. J. Jeyaraj
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23	1523	JANGITI MANEESHA	24
24	1524	BOLLOJU GURU PRASAD	26
25	1525	P SRILEKHA	25
26	1526	MORAM STOTRA PRIYA	27
27	1527	RACHANA RAPOLU	24
28	1528	M MANISHA GOUD	27
29	1529	OGGU SRIKANTH	27
30	1530	EDIGA SAI CHANDANA	26
31	1531	MARUGONDA SAKETH VARMA	24
32	1532	ANUMALLA MANASWINI	24
33	1533	BANDI NAVEEN KUMAR	24
34	1534	SHAIK HASNAD BABA	25
35	1535	MAHEEN SULTANA	25
36	1536	BANOTH VASANTH KUMAR	26
37	1537	B ANJALI NAIK	26
38	1538	MALAGARI MANEESHA	26
39	1539	CHINMAYEE DESAI	25
40	1540	GAJULA SRI HARSHA CHAKRAVARTHY	25
41	1541	MALKA HARSHITHA	24
42	1542	MENDI DEEKSHITHA	25
43	1543	YATHAM SRI HARIKA	26
44	1544	J AISHWARYA	26
45	1545	MUTHERAGALLA PRATHYUSHA	27
46	1546	SEELAM LAXMI PRIYA	28
47	1547	BANDILA V V S TANMAIYEE	27
48	1548	GADDAM SRINIVAS	26
49	1549	SK AJEETH MUSHRAF	24
50	1550	GAJULA CHANDRA HASA	24
51	1551	SALADI SAI VENKATA SOWMYA SARADA	24
52	1552	SHRUTI BOSE	25
53	1553	DODDIPALLI BHANU PRAKASH REDDY	26


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54	1554	SABHADU SUSHMITHA	26
55	1555	PRIYANKA RAJ KUMAWAT	27
56	1556	MUGA RITHIKA	27
57	1557	R PRANITH KAMLAY	25
58	1558	MARPALIKAR YOGESHWARI CHANDRAKANT	25
59	1559	RAJA RAJESWAR REDDY ATTILA	26
60	1560	NABAMITA CHAKRABORTY	27

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Date: 28.09.2020

PROGRAM REPORT

Name of the Event : A value added course on "MICROBIOLOGY"

Date : 21.09.2020 to 25.09.2020

Resource Person : Dr. Mustfa

Professor / Social and Preventive Medicine,

MNR Medical College

Email id: musfta@gmail.com

Name of the Coordinator: Dr. Pavan

Number of Students attended: 60

Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

- Describe the various types of waste in health care.
- Outline the sources that result in health- care.
- Basics of Biomedical waste and Hospital acquired Infections.
- Segregations and collection of biomedical waste, Treatment, processing and disposal of biomedical waste.
- Patient and caregiver hygiene

TOPICS COVERED:

- Definition sources and characteristics of health care waste.
- Health and environmental impacts of health care waste.
- International and National HCWM laws.
- National health care waste management planning.
- HCWM planning in a health care functions.
- Occupational health and safety.

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OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Enhance understanding of biomedical waste management
- Enhance understanding of infection control in hospital setup.
- Describe the components of solid waste management and the laws governing it.
- Discuss the solid waste collection systems, route optimization techniques and processing of solid wastes.
- Outline the design, operation, and maintenance of different methods of treatment.

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Certificate of Participation

This is to certify that

MUGA RITHIKA

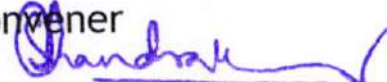
has participated in A Value added course on

"MICROBIOLOGY"

from 21-09-2020 to 25-09-2020 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener


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Date: 05.10.2020

CIRCULAR

This is to inform all IV Year students that our department is organizing A value added course on "**IMMUNIZATION PROGRAMME**" from 12.10.2020 to 17.10.2020.

All Students are requested to attend the Program.

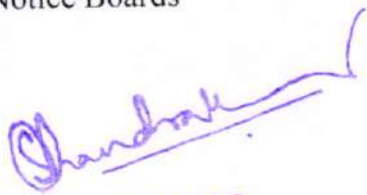

Principal

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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards


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REGISTRATION FORM

Name:

Dept. :

Institution:

Address for Communication:

.....

.....

Mobile:

email:

Free:
In-House
Staff & Students

PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr.Pavan
SPM
MNR Group of Educational Institutions

Resource Person:

Dr.Bhagwanth

Professor/Social and Preventive Medicine

ADDRESS FOR COMMUNICATION:

DR.PAVAN
Coordinator, SPM
syed79@gmail.com
7989594783
MNR Medical College
Fasalwadi, Sangareddy,
Hyderabad

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A VALUE ADDED COURSE ON

"COMMUNITY MEDICINE"

IMMUNIZATION PROGRAMME



Dates:

12.10.2020 to 17.10.2020

Organized by:

Dept. of Community Medicine

Venue:

Lecture Hall - III

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad
Telangana-502 294

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About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



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Objectives of the Programme:

To develop a protective vaccine/ immunization programme for all infectious diseases, although some pathogens are considerably more challenging candidates than others. Whether or not such vaccines are developed and deployed is related to the severity and economic impact of the disease on the community as well as the effects upon the individual. Various factors governing the likelihood of an immunization programme being adopted are discussed below.

1. Disease Severity
2. Vaccine Effectiveness
3. Safety
4. Public Perceptions
5. Cost
6. Longevity of Immunity

Topics to be Covered

- Aims of Immunization.
- Immune system & how vaccines work.
- National Immunization Schedule (NIS)
- Vaccine preventable diseases.
- Different types of vaccines.
- Storing & handling of vaccines.
- Administration of vaccines.

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LIST OF STUDENT REGISTERED

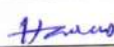
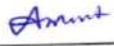
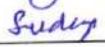
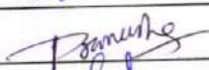
Name of the Program: A Value added program on Community Medicine

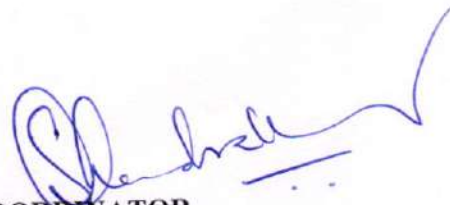
Date: 12.10.2020 to 17.10.2020

S. No	Roll No.	Student Name	Signature
1	1561	SHUBAM DILIP SHINDE	
2	1562	BODDAM CHANDRALEKHA	
3	1563	ROHIT JAJU	
4	1564	NABA KHANAM	
5	1565	JAKAREGARI SOLOMON SUMAHITH SURATHAN	
6	1566	AMBATI SAI KEERTHANA	
7	1567	DAKSHA LONAVATH	
8	1568	ESLAVATH GANESH KUMAR	
9	1569	PANDHIPATI RAMYAPRIYA	
10	1570	GOLAMARI PRANAY PAUL REDDY	
11	1571	CHETANA MAHARANA	
12	1572	RANOO PRIYAMBADA BISWAL	
13	1573	KUKUDALA KEERTHI	
14	1574	HAJIRA NOOREIN	
15	1575	GRUSHA VARMA	
16	1576	DURGAPPAGARI KIRANGOUD	
17	1577	DANUGURI UMA	
18	1578	APPADI DIVYA	
19	1579	GIDDY RAM VARSHITH REDDY	
20	1580	KOTHAPALLI SAICHANDANA	
21	1581	POLE MOUNIKA	
22	1582	ADELLI SRIDHAR	

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23	1583	BHUKYA HARSHA	
24	1584	PERUMANDLA HANISHA	
25	1585	GEENUKUNTA AMRUTH KUMAR	
26	1586	JOGINAPALLY GAYATHRI	
27	1587	GUNTOJU SUDEEP	
28	1588	NUTALAPATI MOHAN KRISHNA	
29	1589	PRANEESHA REDDY KANDI	
30	1590	RAPAKA SHERLY	


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ATTENDANCE SHEET

Name of the Program: A Value added program on Community Medicine

Date: 12.10.2020 to 17.10.2020

S. No	Roll No.	Student name	12.10.20	13.10.20	14.10.20	15.10.20	16.10.20	17.10.20	Feedback
1	1561	SHUBAM DILIP SHINDE	P	P	P	P	A	P	Good
2	1562	BODDAM CHANDRALEKHA	P	P	P	A	P	P	Excellent
3	1563	ROHIT JAJU	P	P	A	P	P	P	Good
4	1564	NABA KHANAM	P	A	P	P	P	P	Good
5	1565	JAKAREGARI SOLOMON SUMAHITH SURATHAN	A	P	P	P	P	P	Good
6	1566	AMBATI SAI KEERTHANA	P	A	P	P	P	P	Good
7	1567	DAKSHA LONAVATH	P	P	A	P	P	P	Good
8	1568	ESLAVATH GANESH KUMAR	P	P	P	A	P	P	Good
9	1569	PANDHIPATI RAMYAPRIYA	P	P	P	P	A	P	Excellent
10	1570	GOLAMARI PRANAY PAUL REDDY	P	P	P	P	P	A	Good
11	1571	CHETANA MAHARANA	P	P	P	P	A	P	Good
12	1572	RANOO PRIYAMBADA BISWAL	P	P	P	A	P	P	Good
13	1573	KUKUDALA KEERTHI	P	P	A	P	P	P	Good
14	1574	HAJIRA NOOREIN	P	A	P	P	P	P	Good
15	1575	GRUSHA VARMA	A	P	P	P	P	P	Excellent
16	1576	DURGAPPAGARI KIRANGOUD	A	P	P	P	P	P	Good
17	1577	DANUGURI UMA	P	A	P	P	P	P	Excellent
18	1578	APPADI DIVYA	P	P	A	P	P	P	Good
19	1579	GIDDY RAM VARSHITH REDDY	P	P	P	A	P	P	Good

[Signature]
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[Signature]
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20	1580	KOTHAPALLI SAICHANDANA	A	P	P	P	P	P	Good
21	1581	POLE MOUNIKA	P	A	P	P	P	P	Good
22	1582	ADELLI SRIDHAR	P	P	A	P	P	P	Good
23	1583	BHUKYA HARSHA	P	P	P	A	P	P	Good
24	1584	PERUMANDLA HANISHA	P	P	P	P	A	P	Excellent
25	1585	GEENUKUNTA AMRUTH KUMAR	P	P	P	P	P	A	Excellent
26	1586	JOGINAPALLY GAYATHRI	P	P	P	P	A	P	Good
27	1587	GUNTOJU SUDEEP	P	P	P	A	P	P	Good
28	1588	NUTALAPATI MOHAN KRISHNA	P	P	A	P	P	P	Good
29	1589	PRANEESHA REDDY KANDI	A	A	P	P	P	P	Good
30	1590	RAPAKA SHERLY	A	P	P	P	P	P	Excellent


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 FASALWADI, SANGAREDDY-502294


HOD



MNR MEDICAL COLLEGE & HOSPITAL

MNR Nagar, Fasalwadi, Sangareddy - 502 294, Sangareddy Dist. Telangana. India

Ph: + 85000 56667, (08455) 230523, 230527, 230524 Fax No. (08455) - 230555, 230533

A VALUE ADDED COURSE ON COMMUNITY MEDICINE FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

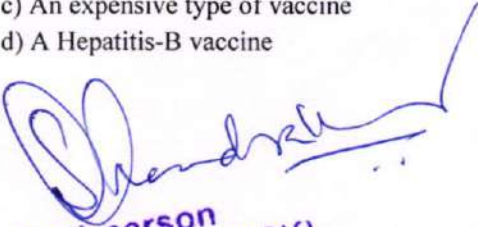
DATE:

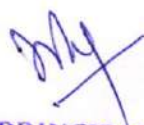
TIME: 30 Minutes

MARKS: 30

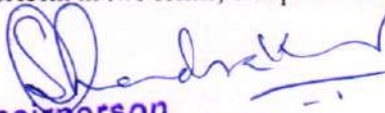
Tick the Correct Answer

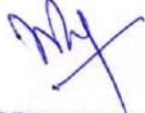
1. When was the smallpox virus first eradicated from the world?
 - a) 1990
 - b) 1960
 - c) 1970
 - d) 1980
2. Name the least commonly used adjuvant used in vaccine development.
 - a) Formaldehyde
 - b) Aluminum sulfate
 - c) Potassium aluminum sulfate
 - d) Aluminum hydroxide
3. All of the following statements are correct about the active and passive immunization process, Except?
 - a) Both can occur naturally as well as artificially
 - b) Active immunization is the inoculation of live, attenuated and dead pathogens
 - c) Both types of immunization may provide long-term protection to the immune system
 - d) Administration of preformed antibodies in the form of passive immunization
4. Which of the following statement is Incorrect about the vaccine development process?
 - a) A vaccine consists of live attenuated or killed germ cells
 - b) Aluminum can be used as an adjuvant in a vaccine
 - c) Animal trials are not necessary for vaccines before going to the human trial
 - d) An effective and safe vaccine production can take up to 10 to 15 years
5. Which of the following is Not an example of a live attenuated vaccine?
 - a) Tetanus vaccine
 - b) MMR vaccine
 - c) Varicella (chickenpox) vaccine
 - d) Influenza vaccine
6. Subunit vaccine is all, Except
 - a) A whole purified virus
 - b) A purified part or pieces of the antigen
 - c) An expensive type of vaccine
 - d) A Hepatitis-B vaccine


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7. World health organization and Centers for disease control and prevention (WHO/CDC) recommends vaccination for children under six years of age to protect them from several infectious diseases.
Which of the following vaccine does not come under the list of mandatory or recommended vaccines that should be administered during childhood?
- Dtap (diphtheria, tetanus, and pertussis)
 - Polio
 - Rabies
 - Hepatitis A and B
8. The first scientifically approved vaccine was.....
- Oral polio vaccine
 - Smallpox vaccine
 - MMR vaccine (measles, mumps, and rubella)
 - Tetanus vaccine
9. Which of the following type of vaccines authorized by the Food and Drug administration, USA (FDA) and WHO are proven to be effective and safe against COVID-19?
- Live attenuated
 - mRNA vaccine
 - Conjugated vaccine
 - Toxoid vaccine
10. Which of the following statement is incorrect about the Live attenuated vaccine?
- It is prepared using whole weakened living bacteria or virus
 - It can generate a long-term immune response with the administration of a single dose
 - Measles, MMR, and oral polio vaccine are live attenuated vaccines
 - It is stable at normal room temperature
11. Which of the following statement is false regarding the important characteristics of the safe and effective vaccine?
- It must be safe and easy to use with low side effects in humans
 - It must provide immunity to at least 15% of the population
 - It must be available at a low cost
 - It must provide long-lasting immunity
12. Numerous biotechnology industries are fast-tracking the development of vaccines for COVID-19. Which of the following statement is true regarding the stages of vaccine development?
- Animal studies are performed to see the safety and effectiveness of vaccine candidate
 - Phase 1/2 clinical studies are conducted to see the safety of the candidate vaccine in humans
 - Phase 3 clinical studies are conducted to see the efficacy of the candidate vaccine in humans
 - All of the above
13. Before the invention of the Polio vaccine in 1955, Poliomyelitis was a serious viral infection, it was a leading cause of death among children.
Select the incorrect statement regarding the polio vaccine.
- It is only present in the form of killed or inactivated vaccine
 - Live virus vaccine against poliovirus can be given orally
 - The doses of vaccines must be given before children turn 6 years of age
 - It is present in two forms, oral polio vaccine and inactivated polio vaccine


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14. Numerous cases of influenza/flu are seen each year around the world, although symptoms of the flu are usually mild, a number of people are hospitalized with serious illness, and thousands of deaths are recorded every year.

The most important preventive measure against the flu is vaccination.

Select all the correct answers about the flu vaccination:

- a) In the USA, it is recommended from 6 months of age, two times every year
 - b) Flu vaccines may contain killed viruses or weakened viruses
 - c) Flu vaccines are mainly available in two forms, shots and nasal spray
 - d) Annual vaccination is recommended due to the mutating nature of the virus
 - e) The immune system gets activated 2-3 weeks after an individual is vaccinated
15. Vaccination at an early age can protect humans from several infectious diseases, including life-threatening infections like smallpox and polio.

Which of the following diseases are prevented by vaccination during childhood?

Select all the correct answers from the options given below:

- a) Polio
 - b) AIDS
 - c) Diphtheria
 - d) COVID-19
16. In December 2020 first vaccine for COVID-19 was approved in Europe and in the USA.
- Name the first biotechnology company which received the emergency authorization to distribute the vaccine.

- a) Moderna
- b) Pfizer-BioNTech
- c) Astrazeneca
- d) Novavax
- e) Johnson and Johnson

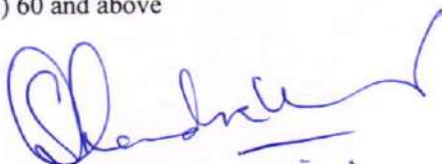
17. Which of the following age group is eligible and are recommended to get the Hepatitis B vaccination?

- a) Infants
 - b) 18 and younger
 - c) Person injecting drugs
 - d) None of the above
18. Which of the following type of vaccine did the Moderna and Pfizer-BioNTech developed for COVID-19?
- a) mRNA vaccine
 - b) Subunit vaccine
 - c) Toxoid vaccine
 - d) Vector-borne vaccine

19. *Human papillomavirus* associated cervical, vaginal and anal cancers occur worldwide.

At what age the first dose of HPV vaccine is recommended?

- a) Infants
- b) 5 year old
- c) 10 year old
- d) 60 and above

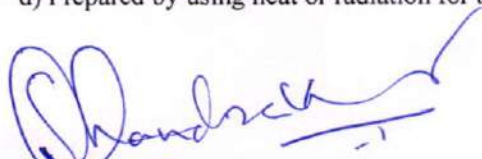


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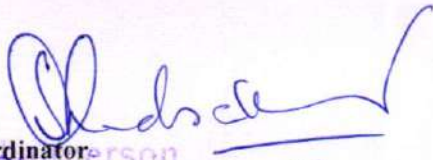
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20. Louis Pasteur first studied the efficacy of the 'anthrax' vaccine by treating the virus with carbolic acid and administering it in.....
- a) A pregnant woman
 - b) Rats
 - c) Livestock
 - d) A healthy boy
21. "Spanish flu" (Influenza) was first reported in 1918, when was the vaccine for influenza discovered?
- a) 1940s
 - b) 1950s
 - c) 1920s
 - d) 2000s
22. Which of the following vaccines comes under the list of vaccines that are recommended by health agencies and medical centers for pregnant women?
Select all the correct answers:
- a) Oral polio vaccine
 - b) Influenza vaccine during flu season
 - c) Tdap vaccine (tetanus, diphtheria and pertussis)
 - d) Hepatitis A and B vaccine for those who are at risk
23. All of the following vaccines are examples of the recombinant type vaccines that are currently used in developed countries, Except?
- a) Vaccine for hepatitis B
 - b) Vaccine for human *papillomavirus*
 - c) Vaccine against *Haemophilus influenza b*
 - d) Vaccine against hepatitis A
24. Choose the correct answer, and name all the important vaccines which help to protect against major infectious diseases?
- a) MMR vaccine
 - b) Hepatitis B vaccine
 - c) Flu vaccine
 - d) Polio vaccine
25. All of the following vaccines are recommended and required by the CDC/WHO before traveling to countries like India, Nepal, Bangladesh, and Africa, Except?
- a) Hepatitis A and B
 - b) Typhoid vaccine
 - c) COVID-19
 - d) Malaria
26. Select the incorrect statement regarding the inactivated type of vaccines:
- a) Prepared by using heat or radiation for the inactivation of toxins of the microbe
 - b) Most effective against bacterial pathogens but less on viral pathogens
 - c) Poliovirus and Hepatitis A are common inactivated vaccines
 - d) Prepared by using heat or radiation for the inactivation of the microbe

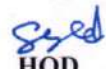

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27. The BCG vaccine used for the prevention of tuberculosis is derived from which of the following microorganism?
- a) Bordetella pertussis
 - b) Bacillus subtilis
 - c) Mycobacterium bovis
 - d) Saccharomyces cerevisiae
28. Name the vaccine which is in the first phase of the developmental process.
- a) Recombinant Na-GST-1
 - b) Recombinant gp120
 - c) Marburg DNA plasmid
 - d) Live attenuated HIV
29. When was the first vaccine against the Ebola virus authorized and approved by the Food and Drug administration, USA (FDA)?
- a) 2021
 - b) 2018
 - c) 2010
 - d) 2019
30. Most widely used vaccines for 'cholera' and 'typhoid' are the killed type of vaccines. When was the first vaccine for cholera and typhoid available to the public?
- a) the 1790s
 - b) the 1890s
 - c) the 1920s
 - d) the 1970s


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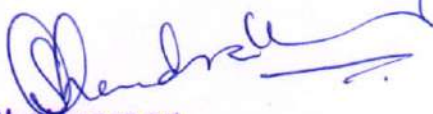
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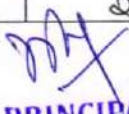
ASSESSMENT MARKS

Name of the Program: A Value added program on Community Medicine

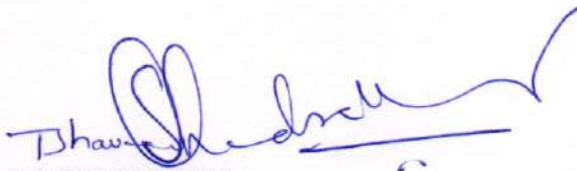
Date: 12.10.2020 to 17.10.2020

S. No	Roll No.	Student Name	Marks (30)
1	1561	SHUBAM DILIP SHINDE	24
2	1562	BODDAM CHANDRALEKHA	24
3	1563	ROHIT JAJU	25
4	1564	NABA KHANAM	25
5	1565	JAKAREGARI SOLOMON SUMAHITH SURATHAN	26
6	1566	AMBATI SAI KEERTHANA	26
7	1567	DAKSHA LONAVATH	22
8	1568	ESLAVATH GANESH KUMAR	24
9	1569	PANDHIPATI RAMYAPRIYA	25
10	1570	GOLAMARI PRANAY PAUL REDDY	26
11	1571	CHETANA MAHARANA	27
12	1572	RANOO PRIYAMBADA BISWAL	27
13	1573	KUKUDALA KEERTHI	26
14	1574	HAJIRA NOOREIN	25
15	1575	GRUSHA VARMA	25
16	1576	DURGAPPAGARI KIRANGOUD	24
17	1577	DANUGURI UMA	24
18	1578	APPADI DIVYA	26
19	1579	GIDDY RAM VARSHITH REDDY	26
20	1580	KOTHAPALLI SAICHANDANA	26
21	1581	POLE MOUNIKA	27
22	1582	ADELLI SRIDHAR	24


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23	1583	BHUKYA HARSHA	24
24	1584	PERUMANDLA HANISHA	24
25	1585	GEENUKUNTA AMRUTH KUMAR	25
26	1586	JOGINAPALLY GAYATHRI	25
27	1587	GUNTOJU SUDEEP	26
28	1588	NUTALAPATI MOHAN KRISHNA	26
29	1589	PRANEESHA REDDY KANDI	27
30	1590	RAPAKA SHERLY	24


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Date: 19.10.2020

PROGRAM REPORT

Name of the Event : A Value added course on "Community Medicine"

Date : 12.10.2020 to 17.10.2020

Resource Person : Dr.Pavan

Professor / Social and Preventive Medicine,

Dr. Narsimha Rao,

Professor / Social and Preventive Medicine,

MNR Medical College

Email Id: narsimhara0@gmail.com

Name of the Coordinator: Dr.Pavan

Number of Students attended: 30

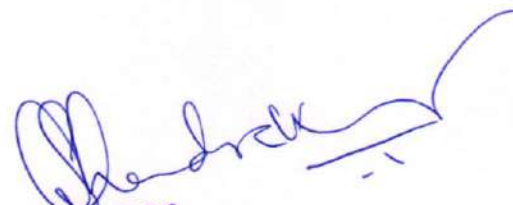
Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

To develop a protective vaccine/ immunization programme for all infectious diseases, although some pathogens are considerably more challenging candidates than others. Whether or not such vaccines are developed and deployed is related to the severity and economic impact of the disease on the community as well as the effects upon the individual. Various factors governing the likelihood of an immunization programme being adopted are discussed below.

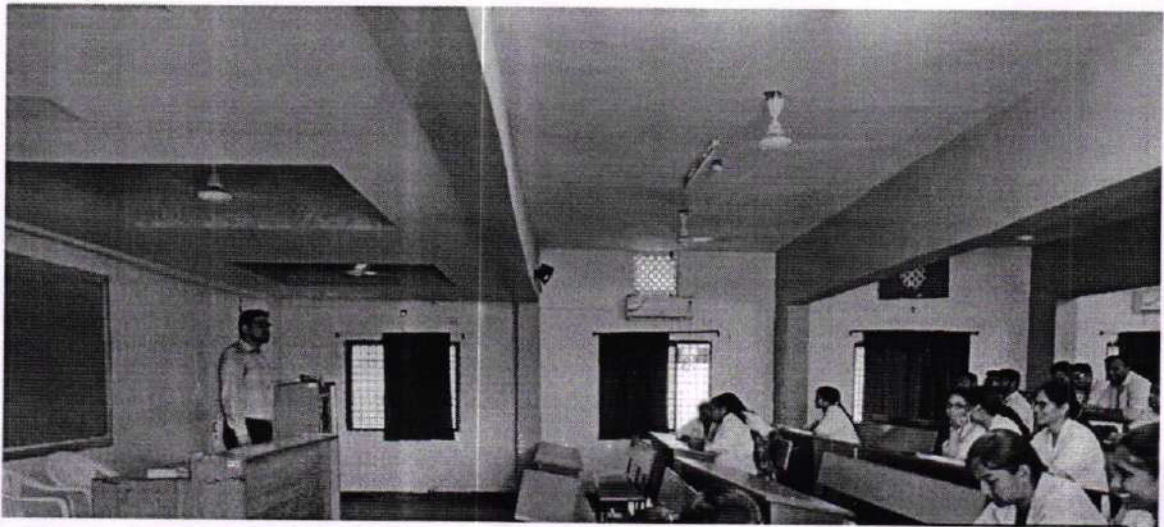
1. Disease Severity
2. Vaccine Effectiveness
3. Safety
4. Public Perceptions
5. Cost
6. Longevity of Immunity


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TOPICS COVERED:

- Aims of Immunization.
- Immune system & how vaccines work.
- National Immunization Schedule (NIS)
- Vaccine preventable diseases.
- Different types of vaccines.
- Storing & handling of vaccines.
- Administration of vaccines.



OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Define immunity, immunization, vaccines, and vaccination.
- Differentiate innate, passive and active immunity.
- Identify vaccine types and components.
- Know prospects for developing a vaccine against a named infectious disease, given information on its biology and epidemiology, and on the immune response in human hosts.
- Know about significance of critical antigens, immunogens and adjuvants in developing effective vaccines

COORDINATOR

[Signature]
Chairperson
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[Signature]

Syed
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MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Certificate of Participation

This is to certify that

BHUKYA HARSHA

has participated in A Value added course on

"COMMUNITY MEDICINE"

from 12-10-2020 to 17-10-2020 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener

Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

Principal

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Date: 16.11.2020

CIRCULAR

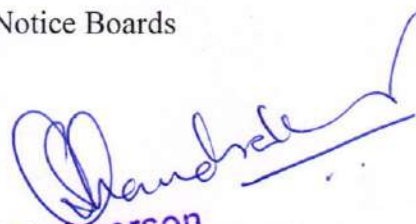
This is to inform all III Year students that our department is organizing A value added course on "Antimicrobial agents and Antibiotic Susceptibility Testing" by Dr. Mustfa, Professor and HOD from 23.11.2020 to 28.11.2020. All Students are requested to attend the Program.


Principal

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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards


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REGISTRATION FORM

Name:

Dept. :

Institution:

Address for Communication:

.....

.....

Mobile:

email:

“ Free:
In-House
Staff & Students ”

Chandra

Chairperson
Internal Quality Assurance (IQA)
MNR Medical College &
MNR Medical College
Fasalwadi, Sangareddy,
Hyderabad

PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr.Pavan
SPM
MNR Group of Educational Institutions

Resource Person:

Dr.Shobha Pal

MNR Medical College
Email id: musfta@gmail.com

ADDRESS FOR COMMUNICATION:

Dr.Pavan

Coordinator, SPM
syed79@gmail.com
7989594783

A VALUE ADDED COURSE ON

“ANTIMICROBIAL AGENTS
AND ANTIBIOTIC
SUSCEPTIBILITY TESTING”



Dates:

23.11.2020 to 28.11.2020

Organized by:

Dept. of Microbiology

Venue:

Lecture Hall - III

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad

Telangana-502 294

INDIA

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About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



Shanmugan
Internal Quality Assurance Cell (IQAC)
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Objectives of the Programme:

- o Describe the various types of waste in health care.
- o Outline the sources that result in health-care.
- o Basics of Biomedical waste and Hospital acquired Infections.
- o Segregations and collection of biomedical waste, Treatment, processing and disposal of biomedical waste.
- o Patient and caregiver hygiene

Topics to be Covered

- Definition sources and characteristics of health care waste.
- Health and environmental impacts of health care waste.
- International and National HCWM laws.
- National health care waste management planning.
- HCWM planning in a health care functions
- Occupational health and safety



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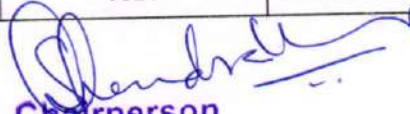
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LIST OF STUDENT REGISTERED

Name of the Program: A value added course on "Antimicrobial Agents and Antibiotic Susceptibility Testing"

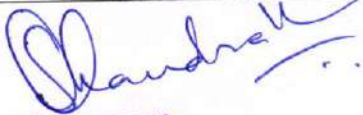
Date: 23.11.2020 to 27.11.2020

S. No	Roll No.	Student Name	Signature
1	1601	A. HARI PRIYA	Hari priya
2	1602	PANDARABOYINA SAI KRISHNA TEJA	Sai krishna
3	1603	INTI MOUNIKA	mounika
4	1604	BHEEMAVARAPU SAI SIVANI REDDY	Sivani
5	1605	VEMURI MOHANCHANDRA BALAJI	Ves
6	1606	TATIKONDA MEGHANA MANI CHANDANA	manu
7	1607	KANCHARLA SAMVEDA	Samu
8	1608	D R NIHARIKA	Niharika
9	1609	THOTA SUHARSHITHA	Suharshita
10	1610	MEDASANI CHINMAI	chinmai
11	1611	SUGOOR VAISHNAVI REDDY	Vaishnavi
12	1612	H PRITHVI	Prithvi
13	1613	KATUKURI AKHIL REDDY	Akhil
14	1614	P.PRAVALIKA	Pravali
15	1615	ILLENDULA NAGALALITYA	Nagala
16	1616	P.ALEKYA CHOUDARY	Alekya
17	1617	CHELLOJU MAHESH	Mahesh
18	1618	G MEDHA	Medha
19	1619	KASULA LIKHITHA	Likhitha
20	1620	KONDRAJU JAYASRI MAHESHWARI	Jayasri
21	1621	KIRTY BATTULA	Kerty


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22	1622	BOMMANAPALLY INDIRA PRIYA DARSHINI	Indira
23	1623	MALLEKHEDI BHAVANA SRAVANTHI	Bhava
24	1624	KONDA KEERTHANA	Keethana
25	1625	SIRIPURAPU CHANDRAHAAS	Chandra
26	1626	JAHNAVI PAKALAPATI	Jani
27	1627	DOOSA KEERTHANA	Kanta
28	1628	KOLAGATLA BHAGYASRI	Bhagyasri
29	1629	AKSHAY KULKARNI	Akshay
30	1630	JANGITI SHIVANI	Shi
31	1631	DORNALA SAI TEJA	Sai teja
32	1632	NIMMAKURI SOWMYASRI	Sowmya
33	1633	MOHD MOHSIN	Mohd
34	1634	M VIGNESWARI	Vignu
35	1635	VALLOORI SRUSTI GRISELDA	Sruti
36	1636	AMTUL BASEER WAHEED	Wahid
37	1637	SOMASANI VISHAL	Vishal
38	1638	KATHERVATH TARUN	Tarun
39	1639	RATHLA PARLAL	Ratho
40	1640	AOUDARI AKSHITH	Akshu
41	1641	SAMMETA SRAVANI	Sru
42	1642	LAVUDI SANDHYA	Sandhya
43	1643	G.SPANDANA	Spandana
44	1644	CHANTI TEJA	Teja
45	1645	NADIMPALLY HARSHITH REDDY	Harshith
46	1646	BHARATH CHANDRA KONDRU	Chandra
47	1647	MOGURAM VAMSHI	Vamshi
48	1648	PAGIDI VANI	Vani
49	1649	SEELAM SUYUKTHA	Suyuktha
50	1650	TALAKAYALA AISHWARYA	Aishwarya
51	1651	ESHIKA DEVINENI	Devini
52	1652	DEEKSHITHA OBIREDDY	Obireddy


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53	1653	LEBAKA VYSHNAVI	Vishnavi
54	1654	HIMA M	Hima
55	1655	JAY KISHAN BHATI	Bhati
56	1656	KATLA VINAY KUMAR	Vinay
57	1657	DASARI RITHIKA REDDY	Rithika
58	1658	TIPPARAJU NITHINSREE	Nithinsree
59	1659	CHINTA CHANDRA SEKHAR REDDY	Chandra
60	1660	YERVA MYTHILI	Mythili


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ATTENDANCE SHEET

Name of the Program: A value added course on "Antimicrobial Agents and Antibiotic Susceptibility Testing"

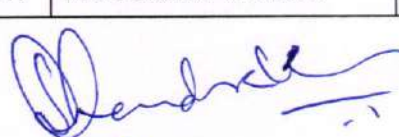
Date: 23.11.2020 to 27.11.2020

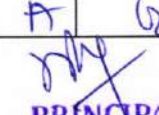
S. No	Roll No.	Student name	23.11.20	24.11.20	25.11.20	26.11.20	27.11.20	Feedback
1	1601	A. HARI PRIYA	A	P	P	P	P	Good
2	1602	PANDARABOYINA SAI KRISHNA TEJA	P	A	P	P	P	Good
3	1603	INTI MOUNIKA	P	P	P	A	P	Excellent
4	1604	BHEEMAVARAPU SAI SIVANI REDDY	P	P	A	P	P	Good
5	1605	VEMURI MOHANCHANDRA BALAJI	P	P	P	P	A	Excellent
6	1606	TATIKONDA MEGHANA MANI CHANDANA	A	P	P	P	P	Good
7	1607	KANCHARLA SAMVEDA	P	A	P	P	P	Good
8	1608	D R NIHARIKA	P	P	A	P	P	Good
9	1609	THOTA SUHARSHITHA	P	P	P	P	A	Good
10	1610	MEDASANI CHINMAI	P	P	P	A	P	Excellent
11	1611	SUGOOR VAISHNAVI REDDY	P	A	P	P	P	Good
12	1612	H PRITHVI	P	P	A	P	P	Good
13	1613	KATUKURI AKHIL REDDY	A	P	P	P	P	Good
14	1614	P.PRAVALIKA	P	P	A	P	P	Good
15	1615	ILLENDULA NAGALALITYA	P	P	P	A	P	Good
16	1616	P.ALEKYA CHOUDARY	P	P	P	P	A	Excellent
17	1617	CHELLOJU MAHESH	P	A	P	P	P	Good
18	1618	G MEDHA	A	P	P	P	P	Good

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19	1619	KASULA LIKHITHA	P	A	P	P	P	Good
20	1620	KONDRAJU JAYASRI MAHESHWARI	A	P	P	P	P	Good
21	1621	KIRTY BATTULA	P	P	A	P	P	Good
22	1622	BOMMANAPALLY INDIRA PRIYA DARSHINI	P	P	P	A	P	Excellent
23	1623	MALLEKHEDI BHAVANA SRAVANTHI	P	A	P	P	P	Good
24	1624	KONDA KEERTHANA	P	P	P	P	A	Good
25	1625	SIRIPURAPU CHANDRAHAAS	P	P	A	P	P	Good
26	1626	JAHNAVI PAKALAPATI	A	P	P	P	P	Good
27	1627	DOOSA KEERTHANA	P	P	A	P	P	Good
28	1628	KOLAGATLA BHAGYASRI	P	A	P	P	P	Good
29	1629	AKSHAY KULKARNI	P	P	P	P	A	Excellent
30	1630	JANGITI SHIVANI	P	P	A	P	P	Excellent
31	1631	DORNALA SAI TEJA	A	P	P	P	P	Good
32	1632	NIMMAKURI SOWMYASRI	P	P	A	P	P	Good
33	1633	MOHD MOHSIN	P	P	P	P	A	Good
34	1634	M VIGNESWARI	P	A	P	P	P	Good
35	1635	VALLOORI SRUSTI GRISELDA	P	P	P	A	P	Excellent
36	1636	AMTUL BASEER WAHEED	P	A	P	P	P	Good
37	1637	SOMASANI VISHAL	A	P	P	P	P	Excellent
38	1638	KATHERVATH TARUN	P	P	A	P	P	Good
39	1639	RATHLA PARLAL	P	P	P	P	A	Good
40	1640	AOUDARI AKSHITH	P	A	P	P	P	Good
41	1641	SAMMETA SRAVANI	A	P	P	P	P	Good
42	1642	LAVUDI SANDHYA	P	P	A	P	P	Excellent
43	1643	G.SPANDANA	P	P	P	A	P	Excellent
44	1644	CHANTI TEJA	P	A	P	P	P	Good
45	1645	NADIMPALLY HARSHITH REDDY	A	P	P	P	P	Good
46	1646	BHARATH CHANDRA KONDRU	P	P	A	P	P	Good
47	1647	MOGURAM VAMSHI	P	P	P	P	A	Good


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48	1648	PAGIDI VANI	P	A	P	P	P	Good
49	1649	SEELAM SUYUKTHA	P	P	A	P	P	Excellent
50	1650	TALAKAYALA AISHWARYA	A	P	P	P	P	Excellent
51	1651	ESHIKA DEVINENI	P	P	P	A	P	Good
52	1652	DEEKSHITHA OBIREDDY	P	P	P	P	A	Good
53	1653	LEBAKA VYSHNAVI	P	P	A	P	P	Good
54	1654	HIMA M	A	P	P	P	P	Excellent
55	1655	JAY KISHAN BHATI	P	P	P	A	P	Good
56	1656	KATLA VINAY KUMAR	P	P	P	P	A	Good
57	1657	DASARI RITHIKA REDDY	P	A	P	P	P	Good
58	1658	TIPPARAJU NITHINSREE	P	P	P	A	P	Excellent
59	1659	CHINTA CHANDRA SEKHAR REDDY	P	P	A	P	P	Good
60	1660	YERVA MYTHILI	A	P	P	P	P	Good

Mly

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[Signature]
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A VALUE ADDED COURSE ON ANTIMICROBIAL AGENTS AND ANTIBIOTIC SUSCEPTIBILITY TESTING FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

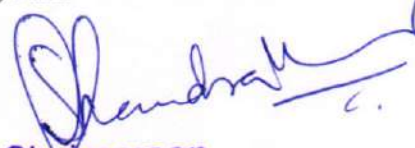
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TIME: 30 Minutes

MARKS: 30

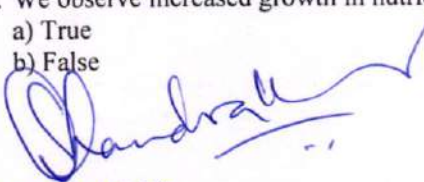
Tick the Correct Answer

- How much percentage of the aqueous solution of phenol rapidly kills the vegetative cells of microorganisms?
 - 1%
 - 2%
 - 5%
 - 10%
- The antimicrobial activity of phenolics is not reduced at which of the following conditions?
 - acidic pH
 - alkaline pH
 - low temperatures
 - presence of soap
- Alcohol concentrations above 60% are effective against _____
 - bacteria
 - fungi
 - germs
 - viruses
- Polyvinylpyrrolidone (PVP) is a complex belonging to which group?
 - Phenolic compounds
 - Iodophors
 - Metals
 - Aldehyde
- Which of the following agents irreversibly oxidize and inactivate proteins with sulphydryl groups?
 - Alcohol
 - Phenol
 - Iodine
 - Chlorine
- Chlorinated lime is the alternative name for _____
 - Calcium hypochlorite
 - Sodium hypochlorite
 - Chloramine-T
 - Azochloramide
- Chloramines are more stable than than hypochlorites.
 - True
 - False


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8. Solutions of sodium hypochlorite of a 1% concentration are used for _____
 - a) sanitizing dairy equipment
 - b) personal hygiene and a household disinfectant
 - c) household bleaches
 - d) disinfecting open wounds
9. Which among the following is an example of an organic compound of mercury?
 - a) Mercuric chloride
 - b) Mercuric oxide
 - c) Mercurochrome
 - d) Ammoniated mercury
10. Which of the following agents cause death to the cell by coagulation of cytoplasmic proteins?
 - a) Alcohol
 - b) Dyes
 - c) Chlorine
 - d) Heavy metals
11. Gram-negative organisms are more susceptible to higher concentrations of triphenylmethane dyes.
 - a) True
 - b) False
12. Which of the following is an acridine dye?
 - a) crystal violet
 - b) malachite green
 - c) tryptoflavine
 - d) brilliant green
13. Gonococci are inhibited by tryptoflavine in dilutions of _____
 - a) 1:200,000
 - b) 1:300,000
 - c) 1:1,000,000
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14. Ceepryn belongs to which of the following categories?
 - a) Anionic detergents
 - b) Cationic detergents
 - c) Nonionic detergents
 - d) Ammonium salts
15. Which of the following agents are used as a preservative in ophthalmic solutions?
 - a) alcohol
 - b) quaternary ammonium salts
 - c) phenol
 - d) aldehydes
16. Which of the following methods is used for determining the decrease in the amount of growth?
 - a) test done on agar medium plate
 - b) test done into an agar medium or broth
 - c) test done by transferring water-soluble substances to sterile media
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17. Liquid water-soluble substances appropriately diluted are dispensed into sterile test tubes, to which are added a measured amount of the test organism and then this is transferred into tubes of sterile media. This method helps in determining _____
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18. We observe increased growth in nutrient agar plates as concentration of chemical agent is decreased.
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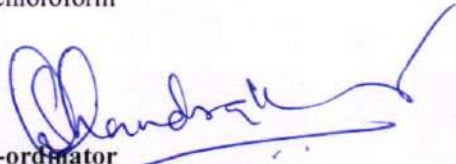

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19. Which of the following acts as a test organism in the procedure of phenol-coefficient method?
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 - b) Streptococcus faecalis
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20. Which of the following chemical agents lack penetrating power?
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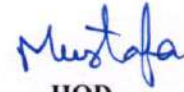
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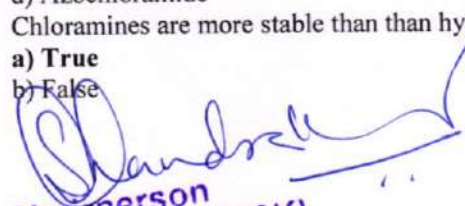
DATE:

TIME: 30 Minutes

MARKS: 30

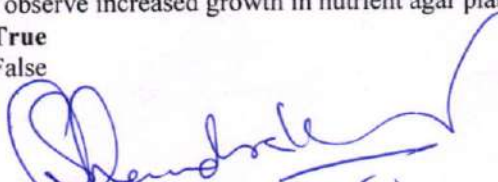
Tick the Correct Answer

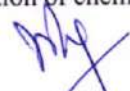
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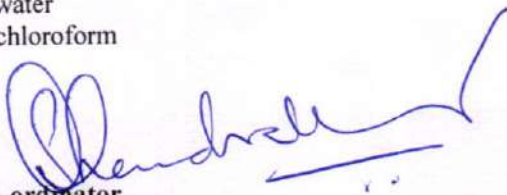
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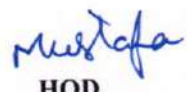
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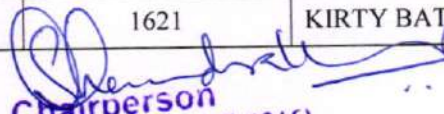
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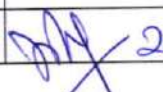
ASSESSMENT MARKS

Name of the Program: A value added course on "Antimicrobial Agents and Antibiotic Susceptibility Testing"

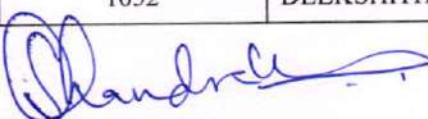
Date: 23.11.2020 to 27.11.2020

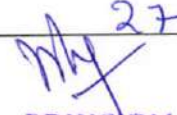
S. No	Roll No.	Student Name	Marks (30)
1	1601	A. HARI PRIYA	27
2	1602	PANDARABOYINA SAI KRISHNA TEJA	26
3	1603	INTI MOUNIKA	26
4	1604	BHEEMAVARAPU SAI SIVANI REDDY	25
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13	1613	KATUKURI AKHIL REDDY	27
14	1614	P.PRAVALIKA	27
15	1615	ILLENDULA NAGALALITYA	27
16	1616	P.ALEKYA CHOUDARY	26
17	1617	CHELLOJU MAHESH	25
18	1618	G MEDHA	24
19	1619	KASULA LIKHITHA	24
20	1620	KONDRAJU JAYASRI MAHESHWARI	25
21	1621	KIRTY BATTULA	26


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22	1622	BOMMANAPALLY INDIRA PRIYA DARSHINI	26
23	1623	MALLEKHEDI BHAVANA SRAVANTHI	26
24	1624	KONDA KEERTHANA	24
25	1625	SIRIPURAPU CHANDRAHAAS	24
26	1626	JAHNAVI PAKALAPATI	25
27	1627	DOOSA KEERTHANA	26
28	1628	KOLAGATLA BHAGYASRI	24
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33	1633	MOHD MOHSIN	25
34	1634	M VIGNESWARI	26
35	1635	VALLOORI SRUSTI GRISELDA	27
36	1636	AMTUL BASEER WAHEED	25
37	1637	SOMASANI VISHAL	25
38	1638	KATHERVATH TARUN	26
39	1639	RATHLA PARLAL	24
40	1640	AOUDARI AKSHITH	24
41	1641	SAMMETA SRAVANI	25
42	1642	LAVUDI SANDHYA	24
43	1643	G.SPANDANA	26
44	1644	CHANTI TEJA	27
45	1645	NADIMPALLY HARSHITH REDDY	27
46	1646	BHARATH CHANDRA KONDRU	27
47	1647	MOGURAM VAMSHI	26
48	1648	PAGIDI VANI	27
49	1649	SEELAM SUYUKTHA	27
50	1650	TALAKAYALA AISHWARYA	25
51	1651	ESHIKA DEVINENI	26
52	1652	DEEKSHITHA OBIREDY	27


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53	1653	LEBAKA VYSHNAVI	26
54	1654	HIMA M	27
55	1655	JAY KISHAN BHATI	24
56	1656	KATLA VINAY KUMAR	24
57	1657	DASARI RITHIKA REDDY	25
58	1658	TIPPARAJU NITHINSREE	26
59	1659	CHINTA CHANDRA SEKHAR REDDY	27
60	1660	YERVA MYTHILI	26


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Date: 30.11.2020

PROGRAM REPORT

Name of the Event : A value added course on "Antimicrobial Agents and Antibiotic Susceptibility Testing"

Date : 23.11.2020 to 28.11.2020

Resource Person : Dr. Mustfa

Professor / Social and Preventive Medicine,
MNR Medical College

Email id: musfta@gmail.com

Name of the Coordinator: Dr. Pavan

Number of Students attended: 60

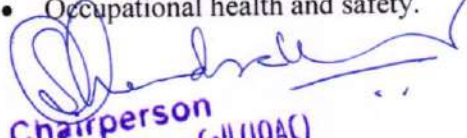
Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

- Describe the various types of waste in health care.
- Outline the sources that result in health-care.
- Basics of Biomedical waste and Hospital acquired Infections.
- Segregations and collection of biomedical waste, Treatment, processing and disposal of biomedical waste.
- Patient and caregiver hygiene

TOPICS COVERED:

- Definition sources and characteristics of health care waste.
- Health and environmental impacts of health care waste.
- International and National HCWM laws.
- National health care waste management planning.
- HCWM planning in a health care functions.
- Occupational health and safety.


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Certificate of Participation

This is to certify that

M. HIMA

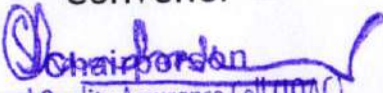
has participated in A Value added course on

"ANTIMICROBIAL AGENTS AND ANTIBIOTIC SUSCEPTIBILITY TESTING"

from 23-11-2020 to 28-11-2020 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener


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Date: 07.12.2020

CIRCULAR

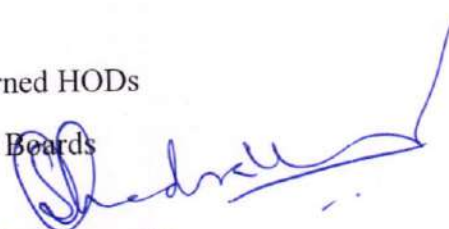
This is to inform all III Year students that our department is organizing A value added course on **"LEGAL ASPECTS OF SAFE OBSTETRIC AND GYNAECOLOGY PRACTICE IN CURRENT SCENARIO"** by Dr. Mustafa, Professor and HOD from 14.12.2020 to 19.12.2020. All Students are requested to attend the Program.


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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards


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REGISTRATION FORM

Name:.....

Dept. :.....

Institution:.....

Address for Communication:

Mobile:.....

email:



PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr.Pavan
SPM
MNR Group of Educational Institutions

Resource Person:

Dr.Bhavani

Professor and Head of Department

ADDRESS FOR COMMUNICATION:

DR.PAVAN
Coordinator, SPM
syed79@gmail.com
7989594783

MNR Medical College
Fasalwadi, Sangareddy,
Hyderabad

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**A VALUE ADDED COURSE
ON**

**"LEGAL ASPECTS OF SAFE
OBSTETRIC AND GYNAECOLOGY
PRACTICE IN CURRENT SCENARIO"**



Dates:

14.12.2020 to 18.12.2020

Organized by:

Dept of OBGY

Venue:

Lecture Hall - III

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad
Telangana-502 294

INDIA

Principal
MNR Medical College & Hospital
Fasalwadi, Sangareddy, Hyderabad



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About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



Chandrasekhar
Chairperson
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LIST OF STUDENT REGISTERED

Name of the Program: A Value added course on Legal Aspects of Safe Obstetric and Gynaecology
Practice in Current Scenario

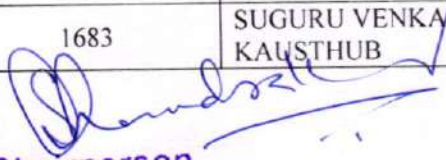
Date: 14.12.2020 to 19.12.2020

S. No	Roll No.	Student Name	Signature
1	1631	DORNALA SAI TEJA	D. Sai Teja
2	1632	NIMMAKURI SOWMYASRI	Sowmya Sri
3	1633	MOHD MOHSIN	Mohsin
4	1634	M VIGNESWARI	Vigneswari
5	1635	VALLOORI SRUSTI GRISELDA	Srusti
6	1636	AMTUL BASEER WAHEED	Amtul Baseer
7	1637	SOMASANI VISHAL	Vishal
8	1638	KATHERVATH TARUN	Tarun
9	1639	RATHLA PARLAL	Parth
10	1640	AODARI AKSHITH	Akshith
11	1641	SAMMETA SRAVANI	Sravani
12	1642	LAVUDI SANDHYA	Sandhya
13	1643	G.SPANDANA	Spandana
14	1644	CHANTI TEJA	Teja
15	1645	NADIMPALLY HARSHITH REDDY	Harshith
16	1646	BHARATH CHANDRA KONDRU	Chandra
17	1647	MOGURAM VAMSHI	Vamshi
18	1648	PAGIDI VANI	Vani
19	1649	SEELAM SUYUKTHA	Suyuktha
20	1650	TALAKAYALA AISHWARYA	Aish
21	1651	ESHIKA DEVINENI	Eshika
22	1652	DEEKSHITHA OBIREDDY	Deekshitha

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23	1653	LEBAKA VYSHNAVI	<u>Vysha</u>
24	1654	HIMA M	<u>Hima</u>
25	1655	JAY KISHAN BHATI	<u>Kishan</u>
26	1656	KATLA VINAY KUMAR	<u>Vinay</u>
27	1657	DASARI RITHIKA REDDY	<u>Rithika</u>
28	1658	TIPPARAJU NITHINSREE	<u>Nithinsree</u>
29	1659	CHINTA CHANDRA SEKHAR REDDY	<u>Chandra</u>
30	1660	YERVA MYTHILI	<u>Mythili</u>
31	1661	SIRUPA LAHARI	<u>Lahari</u>
32	1662	SANKET RAJENDRA BHISE	<u>Sanket</u>
33	1663	D. JAHNAVI	<u>Jahnavi</u>
34	1664	GODAS RAJESH	<u>Rajesh</u>
35	1665	VANKAMAMIDI BALA KEERTHANA	<u>Karthana</u>
36	1666	K NANDIKA	<u>Nandika</u>
37	1667	SANDEEP REDDY PUCHAKAYALA	<u>Sandeep</u>
38	1668	JINCY MOHAN M.G.	<u>M.</u>
39	1669	KORIVI AKSHARA PREETHI	<u>Preethi</u>
40	1670	K. SHARATH KUMAR	<u>Sharath</u>
41	1671	AASHRITHA VANGARI	<u>Aashritha</u>
42	1672	BERI RITHVIKA	<u>Rithvika</u>
43	1673	PADMAJA SAI GATIGANTI	<u>Padmaja</u>
44	1674	PUPPALA HARSHINI	<u>P. Harshini</u>
45	1675	BHARGAVA REDDY PALLAKI	<u>Bhargava</u>
46	1676	GUTTEDAR MEGHA VERONICA	<u>Megha</u>
47	1677	VELAGAPUDI SAI KISHAN	<u>Sai Kishan</u>
48	1678	ANGIREKULA SREEJA	<u>Sreeja</u>
49	1679	JARUPULA GREESHMA	<u>Greeshma</u>
50	1680	SAJJANAPU AISHWARYA	<u>Aishwarya</u>
51	1681	GUGULOTH NEETU CHARAN	<u>Neetu Charan</u>
52	1682	EDALA NIKESH KUMAR	<u>Nikesh</u>
53	1683	SUGURU VENKATA SATHYA KAUSTHUB	<u>Sathya Kausthub</u>


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54	1684	KATAKAM PRIYESH REDDY	Priyesh
55	1685	T. AKANKSHA	Akanksha
56	1686	MUDUTHANAPALLI NAGA PRIYA	Priya
57	1687	BONAGIRI SINDHU	Sindhu
58	1688	GOLLA MANASA	Manasa
59	1689	SRIRAM K CHAKRAVARTHY	Nandan
60	1690	NANDANI NANDAN	Nandini
61	1691	DUGGINA RAMYA	Ramya
62	1692	NAGAMALLA MANISHA	Manisha
63	1693	KUKKUNOORI DHARANI	Dharani
64	1694	BANDARU LALASA SWETHA	Swetha

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ATTENDANCE SHEET

Name of the Program: A Value added course on Legal Aspects of Safe Obstetric and Gynaecology
Practice in Current Scenario

Date: 14.12.2020 to 19.12.2020

S. No	Roll No.	Student name	14.12.20	15.12.20	16.12.20	17.12.20	18.12.20	19.12.20	Feedback
1	1631	DORNALA SAI TEJA	P	P	A	P	P	P	Good
2	1632	NIMMAKURI SOWMYASRI	A	P	P	P	P	P	Good
3	1633	MOHD MOHSIN	P	A	P	P	P	P	Excellent
4	1634	M VIGNESWARI	P	P	A	P	P	P	Excellent
5	1635	VALLOORI SRUSTI GRISELDA	P	A	P	P	P	P	Good
6	1636	AMTUL BASEER WAHEED	P	P	A	P	P	P	Good
7	1637	SOMASANI VISHAL	P	P	P	A	P	P	Good
8	1638	KATHERVATH TARUN	P	P	P	P	P	A	Good
9	1639	RATHLA PARLAL	P	P	A	P	P	P	Excellent
10	1640	AOUDARI AKSHITH	P	A	P	P	P	P	Excellent
11	1641	SAMMETA SRAVANI	P	P	A	P	P	P	Good
12	1642	LAVUDI SANDHYA	A	P	P	P	P	P	Good
13	1643	G.SPANDANA	P	A	P	P	P	P	Excellent
14	1644	CHANTI TEJA	P	P	P	A	P	P	Excellent
15	1645	NADIMPALLY HARSHITH REDDY	P	P	P	P	A	P	Excellent
16	1646	BHARATH CHANDRA KONDRU	P	P	P	P	A	P	Good
17	1647	MOGURAM VAMSHI	P	P	A	P	P	P	Excellent
18	1648	PAGIDI VANI	A	P	P	P	P	P	Good
19	1649	SEELAM SUYUKTHA	P	A	P	P	P	P	Good

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20	1650	TALAKAYALA AISHWARYA	A	P	P	P	P	P	Good
21	1651	ESHKA DEVINENI	P	A	P	P	P	P	Good
22	1652	DEEKSHITHA OBIREDY	A	P	P	P	P	P	Excellent
23	1653	LEBAKA VYSHNAVI	P	P	P	P	P	A	Excellent
24	1654	HIMA M	P	P	P	P	P	A	Excellent
25	1655	JAY KISHAN BHATI	P	P	P	A	P	P	Good
26	1656	KATLA VINAY KUMAR	P	A	P	P	P	P	Good
27	1657	DASARI RITHIKA REDDY	P	A	P	P	P	P	Good
28	1658	TIPPARAJU NITHINSREE	P	P	P	P	P	A	Excellent
29	1659	CHINTA CHANDRA SEKHAR REDDY	P	P	P	A	P	P	Excellent
30	1660	YERVA MYTHILI	P	A	P	P	P	P	Good
31	1661	SIRUPA LAHARI	P	P	A	P	P	P	Good
32	1662	SANKET RAJENDRA BHISE	P	P	P	A	P	P	Excellent
33	1663	D. JAHNAVI	P	P	P	P	A	P	Excellent
34	1664	GODAS RAJESH	P	P	P	P	A	P	Good
35	1665	VANKAMAMIDI BALA KEERTHANA	A	P	P	P	P	P	Good
36	1666	K NANDIKA	P	A	P	P	P	P	Good
37	1667	SANDEEP REDDY PUCHAKAYALA	A	P	P	P	P	P	Excellent
38	1668	JINCY MOHAN M.G.	P	A	P	P	P	P	Excellent
39	1669	KORIVI AKSHARA PREETHI	P	A	P	P	P	P	Good
40	1670	K. SHARATH KUMAR	P	P	A	P	P	P	Good
41	1671	AASHRITHA VANGARI	A	P	P	P	P	P	Excellent
42	1672	BERI RITHVIKA	P	A	P	P	P	P	Excellent
43	1673	PADMAJA SAI GATIGANTI	P	A	P	P	P	P	Good
44	1674	PUPPALA HARSHINI	P	P	A	P	P	P	Excellent
45	1675	BHARGAVA REDDY PALLAKI	P	P	P	A	P	P	Good
46	1676	GUTTEDAR MEGHA VERONICA	P	P	A	P	P	P	Good
47	1677	VELAGAPUDI SAI KISHAN	A	P	P	P	P	P	Excellent
48	1678	ANGIREKULA SREEJA	P	P	P	P	P	A	Excellent
49	1679	JARUPULA GREESHMA	P	P	P	A	P	P	Excellent

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50	1680	SAJJANAPU AISHWARYA	P	P	P	A	P	P	Good
51	1681	GUGULOTH NEETU CHARAN	P	P	P	P	A	P	Excellent
52	1682	EDALA NIKESH KUMAR	A	P	P	P	P	P	Good
53	1683	SUGURU VENKATA SATHYA KAUSTHUB	P	A	P	P	P	P	Good
54	1684	KATAKAM PRIYESH REDDY	A	P	P	P	P	P	Excellent
55	1685	T. AKANKSHA	P	A	P	P	P	P	Excellent
56	1686	MUDUTHANAPALLI NAGA PRIYA	P	P	A	P	P	P	Good
57	1687	BONAGIRI SINDHU	P	P	P	A	P	P	Good
58	1688	GOLLA MANASA	P	A	P	P	P	P	Excellent
59	1689	SRIRAM K CHAKRAVARTHY	P	A	P	P	P	P	Excellent
60	1690	NANDANI NANDAN	P	P	P	P	A	P	Good
61	1691	DUGGINA RAMYA	P	P	P	A	P	P	Good
62	1692	NAGAMALLA MANISHA	P	P	A	P	P	P	Good
63	1693	KUKKUNOORI DHARANI	P	A	P	P	P	P	Excellent
64	1694	BANDARU LALASA SWETHA	P	P	A	P	P	P	Excellent


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A VALUE ADDED COURSE ON LEGAL ASPECTS OF SAFE OBSTETRIC AND GYNAECOLOGY PRACTICE IN CURRENT SCENARIO FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

DATE:

TIME: 30 Minutes

MARKS: 30

Tick the Correct Answer

1. Which structure provides the major support to the uterus and cervix?
 - a) Round ligaments
 - b) Broad ligaments
 - c) Cardinal ligaments
 - d) Uterosacral ligaments
2. Which nerve provides sensation to the skin over the suprapubic area?
 - a) Superior hypogastric plexus
 - b) Iliohypogastric nerve
 - c) Ilioinguinal nerve
 - d) Pudendal nerve
3. Premenstrual syndrome (PMS) has a constellation of possible symptoms. Which of the following would NOT be expected?
 - a) Abdominal bloating
 - b) Weight loss
 - c) Constipation
 - d) Anxiety
4. Which structure produces gonadotropins?
 - a) Hypothalamus
 - b) Anterior pituitary
 - c) Posterior pituitary
 - d) Ovaries
5. A 46-year-old, non-pregnant, morbidly obese woman presents with irregular periods over the past 6 months. Which of the following represents the most appropriate initial management in this setting?
 - a) Oral contraceptives
 - b) Endometrial ablation
 - c) Office hysteroscopy
 - d) Endometrial biopsy
6. Which of the following is NOT a risk factor for ectopic pregnancy?
 - a) Prior history of uterine fibroids
 - b) Prior history of infertility
 - c) Prior history of ectopic pregnancy
 - d) Prior history of tubal surgery
7. A 24-year-old G₁P₀ presents to the office at 6 weeks gestation with a β human chorionic gonadotropin (β hCG) 16,000 mIU/mL and mild left lower quadrant pain. Transvaginal sonogram confirms the presence of an unruptured 3-cm ectopic pregnancy without fetal cardiac motion. Which of the following is the best management option?

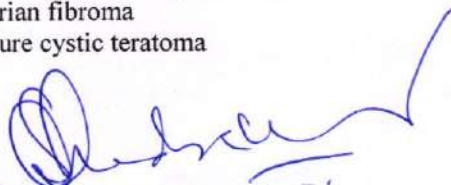
Chairperson

Internal Quality Assurance Cell (IQAC)

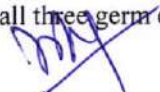
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- a) Methotrexate 30 mg/m² intramuscularly
 - b) Culdocentesis
 - c) Laparoscopic salpingostomy
 - d) Repeat β hCG in 48 hours
8. An 18-year-old G₂P₁ received intramuscular (IM) methotrexate on Monday for a confirmed ectopic pregnancy with β hCG of 3,500 mIU/mL. She returns on Thursday with additional pelvic discomfort and a β hCG of 4,100 mIU/mL. Which of the following management options is most appropriate?
- a) Second dose of methotrexate
 - b) Transvaginal sonogram
 - c) Laparoscopic salpingostomy
 - d) Repeat β hCG in 72 hours
9. A 48-year-old woman presents to the office with a several year history of low pelvic pain. Which of the following is the LEAST likely cause?
- a) Interstitial cystitis
 - b) Adenomyosis
 - c) Ectopic pregnancy
 - d) Herniated disc
10. A patient presents with vulvar irritation and pruritis. Speculum examination reveals a hyperemic, edematous, vaginal vault with odorless discharge. The pH is 4.0. What is the MOST likely diagnosis?
- a) Bacterial vaginosis (BV)
 - b) Candidiasis
 - c) Trichomoniasis
 - d) Gonococcal vaginitis
11. A 16-year-old girl presents with a fever (39°C), nausea, pelvic pain, and generalized malaise a few days after unprotected intercourse. What is the MOST likely diagnosis?
- a) Primary herpes simplex infection
 - b) Trichomoniasis
 - c) Syphilis
 - d) Bartholin gland abscess
12. Which of the following is NOT a risk factor for pelvic inflammatory disease (PID)?
- a) Use of a diaphragm for contraception
 - b) Frequent vaginal douching
 - c) Multiple partners
 - d) Prior episode of PID
13. A 23-year-old woman with confirmed pelvic inflammatory disease (PID) presents with right upper quadrant pain. What is the MOST likely etiology?
- a) Cholecystitis
 - b) Nephrolithiasis
 - c) Asherman syndrome
 - d) Fitz-Hugh-Curtis syndrome
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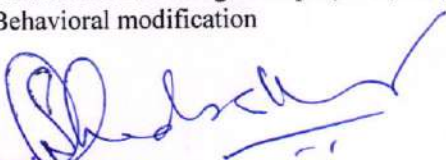


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- c) Paratubal cyst
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T. Sharmila
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A VALUE ADDED COURSE ON LEGAL ASPECTS OF SAFE OBSTETRIC AND GYNAECOLOGY PRACTICE IN CURRENT SCENARIO FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

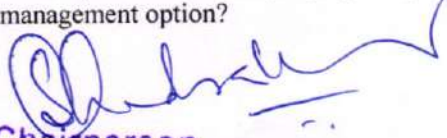
DATE:

TIME: 30 Minutes

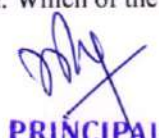
MARKS: 30

Tick the Correct Answer

- Which structure provides the major support to the uterus and cervix?
a) Round ligaments
b) Broad ligaments
c) **Cardinal ligaments**
d) Uterosacral ligaments
- Which nerve provides sensation to the skin over the suprapubic area?
a) Superior hypogastric plexus
b) **Iliohypogastric nerve**
c) Ilioinguinal nerve
d) Pudendal nerve
- Premenstrual syndrome (PMS) has a constellation of possible symptoms. Which of the following would NOT be expected?
a) Abdominal bloating
b) **Weight loss**
c) Constipation
d) Anxiety
- Which structure produces gonadotropins?
a) Hypothalamus
b) **Anterior pituitary**
c) Posterior pituitary
d) Ovaries
- A 46-year-old, non-pregnant, morbidly obese woman presents with irregular periods over the past 6 months. Which of the following represents the most appropriate initial management in this setting?
a) Oral contraceptives
b) Endometrial ablation
c) Office hysteroscopy
d) **Endometrial biopsy**
- Which of the following is NOT a risk factor for ectopic pregnancy?
a) **Prior history of uterine fibroids**
b) Prior history of infertility
c) Prior history of ectopic pregnancy
d) Prior history of tubal surgery
- A 24-year-old G₁P₀ presents to the office at 6 weeks gestation with a β human chorionic gonadotropin (β hCG) 16,000 mIU/mL and mild left lower quadrant pain. Transvaginal sonogram confirms the presence of an unruptured 3-cm ectopic pregnancy without fetal cardiac motion. Which of the following is the best management option?


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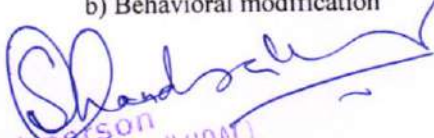
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- a) Methotrexate 30 mg/m² intramuscularly
 - b) Culdocentesis
 - c) Laparoscopic salpingostomy**
 - d) Repeat β hCG in 48 hours
8. An 18-year-old G₂P₁ received intramuscular (IM) methotrexate on Monday for a confirmed ectopic pregnancy with β hCG of 3,500 mIU/mL. She returns on Thursday with additional pelvic discomfort and a β hCG of 4,100 mIU/mL. Which of the following management options is most appropriate?
- a) Second dose of methotrexate
 - b) Transvaginal sonogram
 - c) Laparoscopic salpingostomy
 - d) Repeat β hCG in 72 hours**
9. A 48-year-old woman presents to the office with a several year history of low pelvic pain. Which of the following is the LEAST likely cause?
- a) Interstitial cystitis
 - b) Adenomyosis
 - c) Ectopic pregnancy**
 - d) Herniated disc
10. A patient presents with vulvar irritation and pruritis. Speculum examination reveals a hyperemic, edematous, vaginal vault with odorless discharge. The pH is 4.0. What is the MOST likely diagnosis?
- a) Bacterial vaginosis (BV)
 - b) Candidiasis**
 - c) Trichomoniasis
 - d) Gonococcal vaginitis
11. A 16-year-old girl presents with a fever (39°C), nausea, pelvic pain, and generalized malaise a few days after unprotected intercourse. What is the MOST likely diagnosis?
- a) Primary herpes simplex infection**
 - b) Trichomoniasis
 - c) Syphilis
 - d) Bartholin gland abscess
12. Which of the following is NOT a risk factor for pelvic inflammatory disease (PID)?
- a) Use of a diaphragm for contraception**
 - b) Frequent vaginal douching
 - c) Multiple partners
 - d) Prior episode of PID
13. A 23-year-old woman with confirmed pelvic inflammatory disease (PID) presents with right upper quadrant pain. What is the MOST likely etiology?
- a) Cholecystitis
 - b) Nephrolithiasis
 - c) Asherman syndrome
 - d) Fitz-Hugh-Curtis syndrome**
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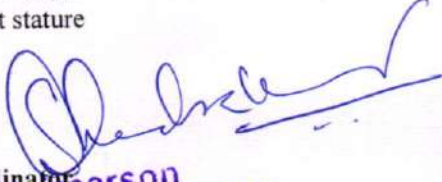

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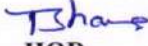
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ASSESSMENT MARKS

Name of the Program: A Value added course on Legal Aspects of Safe Obstetric and Gynaecology
Practice in Current Scenario

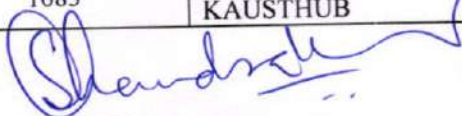
Date: 14.12.2020 to 19.12.2020

S. No	Roll No.	Student Name	Marks (30)
1	1631	DORNALA SAI TEJA	25
2	1632	NIMMAKURI SOWMYASRI	26
3	1633	MOHD MOHSIN	27
4	1634	M VIGNESWARI	24
5	1635	VALLOORI SRUSTI GRISELDA	26
6	1636	AMTUL BASEER WAHEED	25
7	1637	SOMASANI VISHAL	24
8	1638	KATHERVATH TARUN	25
9	1639	RATHLA PARLAL	26
10	1640	AOUDARI AKSHITH	24
11	1641	SAMMETA SRAVANI	27
12	1642	LAVUDI SANDHYA	27
13	1643	G.SPANDANA	24
14	1644	CHANTI TEJA	26
15	1645	NADIMPALLY HARSHITH REDDY	25
16	1646	BHARATH CHANDRA KONDRU	25
17	1647	MOGURAM VAMSHI	26
18	1648	PAGIDI VANI	27
19	1649	SEELAM SUYUKTHA	26
20	1650	TALAKAYALA AISHWARYA	26
21	1651	ESHIKA DEVINENI	26
22	1652	DEEKSHITHA OBIREDY	27

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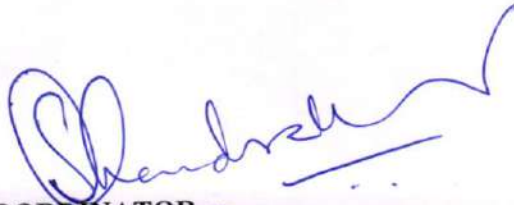
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23	1653	LEBAKA VYSHNAVI	27
24	1654	HIMA M	26
25	1655	JAY KISHAN BHATI	26
26	1656	KATLA VINAY KUMAR	26
27	1657	DASARI RITHIKA REDDY	24
28	1658	TIPPARAJU NITHINSREE	25
29	1659	CHINTA CHANDRA SEKHAR REDDY	25
30	1660	YERVA MYTHILI	24
31	1661	SIRUPA LAHARI	24
32	1662	SANKET RAJENDRA BHISE	25
33	1663	D. JAHNAVI	25
34	1664	GODAS RAJESH	26
35	1665	VANKAMAMIDI BALA KEERTHANA	26
36	1666	K NANDIKA	27
37	1667	SANDEEP REDDY PUCHAKAYALA	27
38	1668	JINCY MOHAN M.G.	26
39	1669	KORIVI AKSHARA PREETHI	26
40	1670	K. SHARATH KUMAR	25
41	1671	AASHRITHA VANGARI	24
42	1672	BERI RITHVIKA	27
43	1673	PADMAJA SAI GATIGANTI	26
44	1674	PUPPALA HARSHINI	26
45	1675	BHARGAVA REDDY PALLAKI	27
46	1676	GUTTEDAR MEGHA VERONICA	24
47	1677	VELAGAPUDI SAI KISHAN	24
48	1678	ANGIREKULA SREEJA	24
49	1679	JARUPULA GREESHMA	26
50	1680	SAJJANAPU AISHWARYA	26
51	1681	GUGULOTH NEETU CHARAN	26
52	1682	EDALA NIKESH KUMAR	27
53	1683	SUGURU VENKATA SATHYA KAUSTHUB	26


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54	1684	KATAKAM PRIYESH REDDY	26
55	1685	T. AKANKSHA	27
56	1686	MUDUTHANAPALLI NAGA PRIYA	27
57	1687	BONAGIRI SINDHU	26
58	1688	GOLLA MANASA	26
59	1689	SRIRAM K CHAKRAVARTHY	26
60	1690	NANDANI NANDAN	27
61	1691	DUGGINA RAMYA	27
62	1692	NAGAMALLA MANISHA	26
63	1693	KUKKUNOORI DHARANI	26
64	1694	BANDARU LALASA SWETHA	26


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Date: 21.12.2020

PROGRAM REPORT

Name of the Event : A value added course on "Legal Aspects of Safe Obstetric and Gynaecology Practice in Current Scenario"

Date : 14.12.2020 to 18.12.2020

Resource Person : Dr. Mustfa
Professor / Social and Preventive Medicine,
MNR Medical College
Email id: musfta@gmail.com

Name of the Coordinator: Dr. Pavan

Number of Students attended: 64

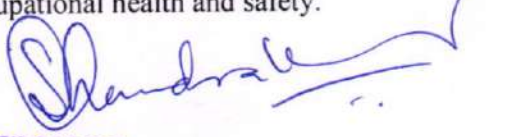
Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

- Describe the various types of waste in health care.
- Outline the sources that result in health- care.
- Basics of Biomedical waste and Hospital acquired Infections.
- Segregations and collection of biomedical waste, Treatment, processing and disposal of biomedical waste.
- Patient and caregiver hygiene

TOPICS COVERED:

- Definition sources and characteristics of health care waste.
- Health and environmental impacts of health care waste.
- International and National HCWM laws.
- National health care waste management planning.
- HCWM planning in a health care functions.
- Occupational health and safety.


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OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Enhance understanding of biomedical waste management
- Enhance understanding of infection control in hospital setup.
- Describe the components of solid waste management and the laws governing it.
- Discuss the solid waste collection systems, route optimization techniques and processing of solid wastes.
- Outline the design, operation, and maintenance of different methods of treatment.

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MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Certificate of Participation

This is to certify that

PAGIDI VANI

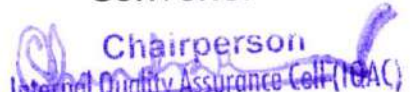
has participated in A Value added course on

**"LEGAL ASPECTS OF SAFE OBSTETRICS AND GYNECOLOGY
PRACTICE IN CURRENT SCENARIO"**

from 14-12-2020 to 18-12-2020 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener


Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital


Principal
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Date: 28.12.2020

CIRCULAR

This is to inform all Final Year students that our department is organizing A value added course on "**BASIC LAPAROSCOPIC TRAINING**" by Dr. Mustfa, Professor and HOD from 04.01.2021 to 09.01.2021. All Students are requested to attend the Program.


Principal

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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards



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MNR Medical College & Hospital

REGISTRATION FORM

Name:

Dept. :

Institution:

Address for Communication:

Mobile:

Email:

Free:
In-House
Staff & Students

PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr.Pavan
SPM
MNR Group of Educational Institutions

Resource Person:

Dr.Rudra Prasad
(Professor and Head)

ADDRESS FOR COMMUNICATION:

DR.PAVAN

Coordinator, SPM
syed79@gmail.com
7989594783

MNR Medical College

Fasalwadi, Sangareddy,

Hyderabad

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A VALUE ADDED COURSE
ON

"BASIC LAPAROSCOPIC TRAINING"



Dates:

04.01.2021 to 09.01.2021

Organized by:

Dept. of General Surgery

Venue:

Lecture Hall - III

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad

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FASALWADI, SANGAREDDY-502294
INDIA

About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



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Ph: + 85000 56667, (08455) 230523, 230527, 230524 Fax No. (08455) - 230555, 230533

LIST OF STUDENT REGISTERED

Name of the Program: A Value added course on Basic Laparoscopic Training

Date: 04.01.2021 to 09.01.2021

S. No	Roll No.	Student Name	Signature
1	1605	VEMURI MOHANCHANDRA BALAJI	Balaji
2	1612	H PRITHVI	Prithvi
3	1613	KATUKURI AKHIL REDDY	AKHIL
4	1617	CHELLOJU MAHESH	maheesh
5	1625	SIRIPURAPU CHANDRAHAAS	Chandrabhai
6	1633	MOHD MOHSIN	Mohsin
7	1637	SOMASANI VISHAL	Vishal
8	1640	AOUDARI AKSHITH	Akshith
9	1647	MOGURAM VAMSHI	vamshi
10	1656	KATLA VINAY KUMAR	Vinay
11	1662	SANKET RAJENDRA BHISE	Sanket
12	1677	VELAGAPUDI SAI KISHAN	sai kishan

COORDINATOR

Chairperson
Internal Quality Assurance Cell (IQAC)
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ATTENDANCE SHEET

Name of the Program: A Value added course on Basic Laparoscopic Training

Date: 04.01.2021 to 09.01.2021

S. No	Roll No.	Student name	04.01.21	05.01.21	06.01.21	07.01.21	08.01.21	09.01.21	Feedback
1	1605	VEMURI MOHANCHANDRA BALAJI	A	P	P	P	P	P	Good
2	1612	H PRITHVI	P	P	A	P	P	P	Excellent
3	1613	KATUKURI AKHIL REDDY	P	A	P	P	P	P	Good
4	1617	CHELLOJU MAHESH	P	P	P	A	P	P	Good
5	1625	SIRIPURAPU CHANDRAHAAS	P	P	A	P	P	P	Excellent
6	1633	MOHD MOHSIN	P	P	P	P	A	P	Good
7	1637	SOMASANI VISHAL	A	P	P	P	P	P	Good
8	1640	AOUDARI AKSHITH	P	P	P	P	P	A	Good
9	1647	MOGURAM VAMSHI	P	P	P	P	P	A	Good
10	1656	KATLA VINAY KUMAR	P	P	P	A	P	P	Excellent
11	1662	SANKET RAJENDRA BHISE	P	A	P	P	P	P	Good
12	1677	VELAGAPUDI SAI KISHAN	P	P	P	P	A	P	Good

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A VALUE ADDED COURSE ON BASIC LAPAROSCOPIC TRAINING FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

DATE:

TIME: 30 Minutes

MARKS: 30

Tick the Correct Answer

1. False statement regarding intraop hypoxemia during laparoscopy
 - A. It may be due to gastric aspiration
 - B. It is uncommon in healthy patients
 - C. Increased IAP caused a decrease in chest wall mechanical impedance
 - D. It may be due to decreased lung compliance, decreased FRC and V/Q mismatch
2. Effects of pneumoperitoneum, EXCEPT
 - A. Subcutaneous emphysema
 - B. No change in plasma concentration of dopamine, epinephrine and vasopressin
 - C. Decreased cardiac index, increased MAP and increased SVR
 - D. Right sided pneumothorax
3. True regarding laparoscopic cholecystectomy in pregnant patients, EXCEPT
 - A. The incidence is approximately 0.05%
 - B. The need for surgery is approximately 40%
 - C. Intraabdominal pressure should be limited
 - D. It should not be performed during the 2nd trimester
4. Potential complication/s associated with trocar insertion
 - A. GI perforations
 - B. Major vascular trauma
 - C. Hepatic and splenic tears
 - D. All
5. True of regional anesthesia during laparoscopy
 - A. T2 level is required
 - B. Occasional shoulder pain due to diaphragmatic irritation
 - C. All
 - D. None
6. Position used during laparoscopic cholecystectomy, EXCEPT
 - A. Trendelenburg
 - B. Steep headup
 - C. Left lateral decubitus
 - D. Right lateral decubitus

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7. Treatment of CO₂ gas embolism, EXCEPT
 - A. Immediate release of pneumoperitoneum
 - B. Insertion of central venous catheter
 - C. Place patient in headup left lateral decubitus position
 - D. Increased minute ventilation by 12-16%
8. False statement during laparoscopy
 - A. Controlled ventilation is preferred
 - B. Cuffed ETT is recommended
 - C. Bladder decompression is recommended
 - D. LMA can be used in laparoscopic cholecystectomy
9. True about gas insufflation during laparoscopy
 - A. Nitrous oxide does not support combustion
 - B. Extra peritoneal insufflation may cause a sudden decrease in EtCO₂
 - C. CO₂ is rapidly excreted via the lungs
 - D. Helium is not blood insoluble and easy to extract when gas embolization occurs
10. Possible causes of acute hypotension or hypoxemia during laparoscopy, EXCEPT
 - A. Inadvertent extra peritoneal insufflation
 - B. Venous gas embolism
 - C. Reflex increased vagal tone
 - D. Pneumothorax
11. Pulmonary changes during pneumoperitoneum
 - A. Increased peak inspiratory pressure
 - B. Decreased PaCO₂
 - C. Increased vital capacity
 - D. Increased FRC
12. True of complications of laparoscopic cholecystectomy a
 - A. Bile duct injuries are more common
 - B. Bile duct injuries are more extensive and higher in the ductal system
 - C. Misidentification of the CBD and subsequent clamping or resection is the most common form of injury
 - D. All
13. False statement regarding positioning during laparoscopic procedures
 - A. Left main bronchus intubation and hypoxemia in the head down position is the most common form of injury
 - B. Extent of physiologic changes is associated with the extent of tilt, patient's age and volume status
 - C. Trendelenburg position of 10-20deg result in an increased central blood volume
 - D. Positioning is required to produce a gravitational displacement of the abdominal viscera
14. Potential intraop complications of pneumoperitoneum, EXCEPT
 - A. Pneumomediastinum
 - B. Subcutaneous emphysema
 - C. Cardiac arrhythmia
 - D. None
15. IAP threshold that is recommended to avoid cardiovascular compromise
 - A. <7 mmHg
 - B. <12 mmHg
 - C. <16 mmHg
 - D. <20 mmHg

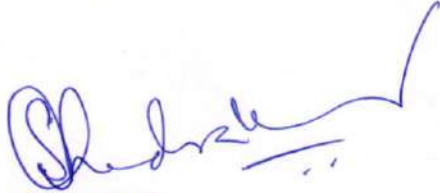


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16. Thromboembolism of the lower legs is due to
 - A. Increased intraabdominal pressure
 - B. Headup position
 - C. Both
 - D. None
17. Not associated with narcotic induced spasm of sphincter of Oddi
 - A. Tramadol
 - B. Morphine
 - C. Demerol
 - D. Fentanyl
18. Hypoxemia due to decreased FRC is uncommon in healthy patients during laparoscopy
 - A. True
 - B. False
19. Urine output decreases significantly following pneumoperitoneal deflation
 - A. True
 - B. False
20. In medicines management, the extent to which patients take medication as prescribed by healthcare professionals is termed
 - A. Concordance
 - B. Adherence
 - C. Holistic care
 - D. Paternalism
21. Pressure volume loop monitors can help in the diagnosis of possible bronchospasm, pneumothorax and endobronchial intubation
 - A. True
 - B. False
22. Which non-musculoskeletal pain can be referred to the angle of the scapula?
 - A. Pain arising from the diaphragm
 - B. Pain arising from the gallbladder
 - C. Pain arising from foregut structures
 - D. Pain arising from midgut structures
23. There is conclusive evidence that nitrous oxide is associated with increased incidence of PONV
 - A. True
 - B. False
24. What is the best rationale for intubation during a surgical procedure?
 - A. The tube provides an airway for ventilation.
 - B. The tube protects the esophagus.
 - C. The patient may receive an anti-emetic through the tube.
 - D. The patient's heart rate can be monitored with the tube.
25. You are the circulating nurse in an outpatient surgery center. Your patient is scheduled to receive moderate sedation. You know that a patient receiving this form of anesthesia should what?
 - A. Never be left unattended by the nurse
 - B. Receive an anti-emetic
 - C. Remember most of the procedure
 - D. Be able to maintain his or her own airway


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26. A nurse is caring for a patient following surgery under a spinal anesthetic. What interventions can the nurse implement to prevent a spinal headache?
- A. Have the patient sit in a chair
 - B. Ambulate the patient
 - C. Limit fluids
 - D. Keep the patient lying flat
27. You are the nurse caring for a patient who will receive a transsacral block. In what surgeries would a transsacral block be useful for pain control?
- A. Thoracotomy
 - B. Inguinal hernia repair
 - C. Breast reduction
 - D. Closed reduction of a right humerus
28. Which of the following events subjects the surgical patient to possible injury in the intraoperative phase of the surgical experience?
- A. Reflexes
 - B. Increase of pain sense
 - C. Consciousness
 - D. Normal vital signs
29. You are a circulating nurse in the day surgery center. You know that each patient has the potential for complications intraoperatively. What are these complications?
- A. Malignant hypothermia
 - B. Pain
 - C. Hypothermia
 - D. Asthma
30. You are preparing to take your patient into the operating room. As the circulating nurse, one of your responsibilities is to review the patient's record. What are you reviewing the record for?
- A. Progress notes
 - B. History and physical
 - C. Admission papers signed by patient
 - D. Intake and output record


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ASSESSMENT MARKS

Name of the Program: A Value added course on Basic Laparoscopic Training

Date: 04.01.2021 to 09.01.2021

S. No	Roll No.	Student Name	Marks (30)
1	1605	VEMURI MOHANCHANDRA BALAJI	27
2	1612	H PRITHVI	24
3	1613	KATUKURI AKHIL REDDY	26
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9	1647	MOGURAM VAMSHI	25
10	1656	KATLA VINAY KUMAR	24
11	1662	SANKET RAJENDRA BHISE	25
12	1677	VELAGAPUDI SAI KISHAN	27

COORDINATOR

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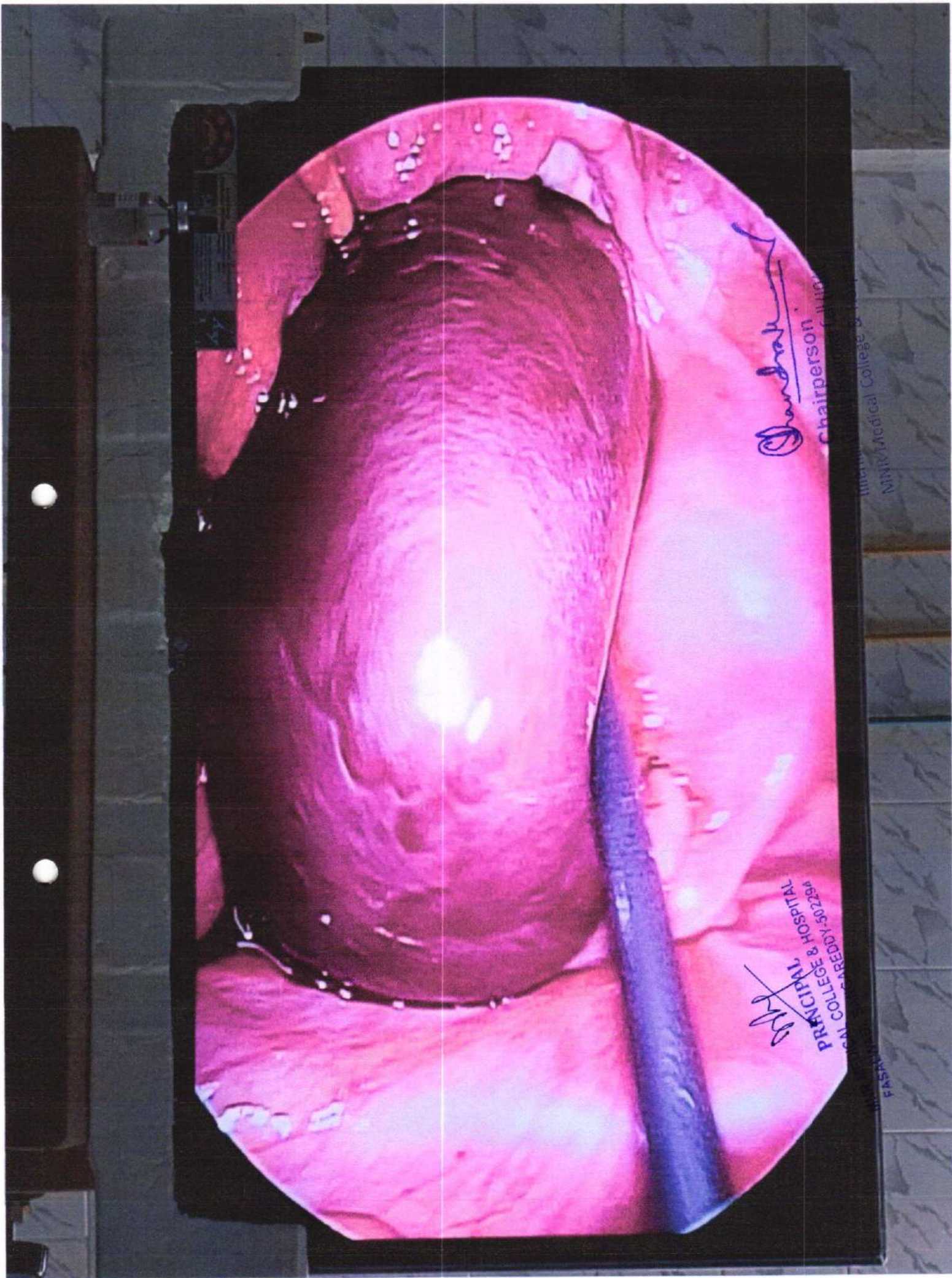


Chandrasekhar

Chairperson

Medical Quality Assurance Cell (MQAC)
Sri Ram Medical College & Hospital

Sri Ram Medical College & Hospital
FASALNADI, SANGAREDDY-502204



Dandekar
Chairperson

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Medical College & Hospital
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MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Certificate of Participation

This is to certify that

MOHD MOHSIN

has participated in A Value added course on

"BASIC LAPROSCOPIC TRAINING"

from 04-01-2021 to 09-01-2021 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Convener

Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

Principal

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MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY-502294



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Date: 22.02.2021

CIRCULAR

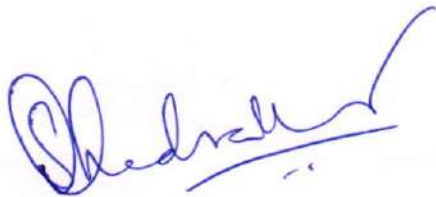
This is to inform all IV Year students that our department is organizing A Value added course on “**DIGITAL METHODS IN LEARNING SURGERY**” from 01.03.2021 to 06.03.2021. All Students are requested to attend the Program.


Principal

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MNR MEDICAL COLLEGE & HOSPITAL
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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards



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Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

REGISTRATION FORM

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Dept. :.....

Institution:.....

Address for Communication:

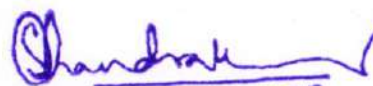
.....

.....

Mobile:.....

email:

Free:
In-House
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Chairperson
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MNR Medical College & Hospital

PROGRAM COMMITTEE:

CHIEF PATRON
Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON
Sri. M. Ravi Varma
Vive-Chairman,
MNR Group of Educational Institutions

COORDINATOR
Dr. Syed
SPM
MNR Group of Educational Institutions

RESOURCE PERSON:
Dr.Rudra Prasad
Professor

ADDRESS FOR COMMUNICATION:

Dr. Syed
Coordinator, SPM
syed79@gmail.com
7989594783
MNR Medical College
Fasalwadi, Sangareddy,
Hyderabad

A VALUE ADDED COURSE
on

DIGITAL METHODS IN
LEARNING SURGERY"



asad Dates:
01.03.2021 to 06.03.2021

Organized by:
Dept of General Surgery

Venue:
Lecture Hall - III
MNR Medical College
Fasalwadi, Sangareddy, Hyderabad
Telangana-502 294
INDIA


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FASALWADI, SANGAREDDY-502294

About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



Shanika
Chairperson
Internal Quality Assurance
MNR Medical College

Objectives of the Programme:

- Demonstrate knowledge and understanding of common surgical problems
- Understand the indications for, and the limitations of, essential diagnostic studies used to evaluate patients with surgical problems
- Demonstrate an understanding of surgical treatments, and alternatives to surgical treatment
- To become familiar with various surgical procedures and know their expected outcomes and complications
- Develop cost/risk/benefit appreciation as it applies to patient care

Topics to be Covered

- Introduction
- Suturing methods
- Wound care with dressing
- Suture materials and surgical equipment
- Skills-Foley's catheter, cannula, venesection, ryles tube
- Local anaesthesia

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LIST OF STUDENT REGISTERED

Name of the Program: A Value added course Digital Methods in Learning Surgery

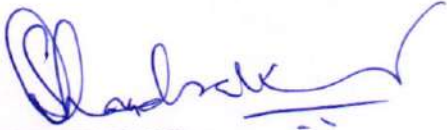
Date: 01.03.2021 to 06.03.2021

S. No	Roll No.	Student name	Signature
1	1570	GOLAMARI PRANAY PAUL REDDY	
2	1571	CHETANA MAHARANA	
3	1572	RANOO PRIYAMBADA BISWAL	
4	1573	KUKUDALA KEERTHI	
5	1574	HAJIRA NOOREIN	
6	1575	GRUSHA VARMA	
7	1576	DURGAPPAGARI KIRANGOUD	
8	1577	DANUGURI UMA	
9	1578	APPADI DIVYA	
10	1579	GIDDY RAM VARSHITH REDDY	
11	1580	KOTHAPALLI SAICHANDANA	
12	1581	POLE MOUNIKA	
13	1582	ADELLI SRIDHAR	
14	1583	BHUKYA HARSHA	
15	1584	PERUMANDLA HANISHA	
16	1585	GEENUKUNTA AMRUTH KUMAR	
17	1586	JOGINAPALLY GAYATHRI	
18	1587	GUNTOJU SUDEEP	
19	1588	NUTALAPATI MOHAN KRISHNA	
20	1589	PRANEESHA REDDY KANDI	
21	1590	RAPAKA SHERLY	
22	1591	SHIVDUTT S KANDI	
23	1592	KADIYALA LIKHITHAA	
24	1593	YEDIVALLY PRASHANTH REDDY	

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25	1594	NITIN SHARMA	Nithin
26	1595	SAGGIDI NIKITHA	Nikitha
27	1596	PR RAJA RAMA CHANDRA REDDY	Chandra.
28	1597	ONTEDDU SHIRISHA	Shirisha
29	1598	GUMMI LOKSAINATH REDDY	Sainath.
30	1599	SHAIK MD FAYAZ SHAHRUKH	Shahrugh
31	1600	KUMILI SAI NIKHIL	Nikhil


COORDINATOR
 Chairperson
 Internal Quality Assurance Cell (IQAC)
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Name of the Program: A Value added course Digital Methods in Learning Surgery

Date: 01.03.2021 to 06.03.2021

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1	1570	GOLAMARI PRANAY PAUL REDDY	A	P	P	P	P	P	Good
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3	1572	RANOO PRIYAMBADA BISWAL	P	P	P	A	P	P	Excellent
4	1573	KUKUDALA KEERTHI	P	P	A	P	P	P	Good
5	1574	HAJIRA NOOREIN	P	P	P	P	P	A	Good
6	1575	GRUSHA VARMA	P	P	A	P	P	P	Good
7	1576	DURGAPPAGARI KIRANGOUD	P	P	A	P	P	P	Excellent
8	1577	DANUGURI UMA	P	A	P	P	P	P	Excellent
9	1578	APPADI DIVYA	P	P	P	A	P	P	Good
10	1579	GIDDY RAM VARSHITH REDDY	A	P	P	P	P	P	Good
11	1580	KOTHAPALLI SAICHANDANA	P	A	P	P	P	P	Good
12	1581	POLE MOUNIKA	A	P	P	P	P	P	Good
13	1582	ADELLI SRIDHAR	P	P	A	P	P	P	Excellent
14	1583	BHUKYA HARSHA	P	P	P	A	P	P	Good
15	1584	PERUMANDLA HANISHA	P	P	P	P	A	P	Good
16	1585	GEENUKUNTA AMRUTH KUMAR	P	P	P	A	P	P	Good
17	1586	JOGINAPALLY GAYATHRI	P	P	P	P	A	P	Good
18	1587	GUNTOJU SUDEEP	P	P	A	P	P	P	Good
19	1588	NUTALAPATI MOHAN KRISHNA	P	P	P	P	A	P	Excellent

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20	1589	PRANEESHA REDDY KANDI	A	P	P	P	P	P	Good
21	1590	RAPAKA SHERLY	P	P	P	A	P	P	Excellent
22	1591	SHIVDUTT S KANDI	P	A	P	P	P	P	Excellent
23	1592	KADIYALA LIKHITHAA	P	P	P	P	A	P	Good
24	1593	YEDIVALLY PRASHANTH REDDY	P	P	A	P	P	P	Good
25	1594	NITIN SHARMA	A	P	P	P	P	P	Good
26	1595	SAGGIDI NIKITHA	P	P	P	P	A	P	Good
27	1596	PR RAJA RAMA CHANDRA REDDY	P	A	P	P	P	P	Good
28	1597	ONTEDDU SHIRISHA	P	P	P	A	P	P	Excellent
29	1598	GUMMI LOKSAINATH REDDY	P	A	P	P	P	P	Good
30	1599	SHAIK MD FAYAZ SHAHRUKH	P	P	P	A	P	P	Good
31	1600	KUMILI SAI NIKHIL	P	P	P	P	P	A	Good

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A VALUE ADDED COURSE ON DIGITAL METHODS IN LEARNING SURGERY

FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

DATE:

TIME: 30 Minutes

MARKS: 30

Tick the Correct Answer

1. The nursing student is preparing an elderly patient for surgery. The patient is scheduled for a general anesthetic. Which side effect should the nurse monitor the patient for?
 - a) Hypothermia
 - b) Pulmonary edema
 - c) Cerebral ischemia
 - d) Increased ability to resist stress
2. You are the circulating nurse. Which task are you solely responsible for?
 - a) Monitoring the patient and documents
 - b) Estimating the patient's blood loss
 - c) Setting up the sterile tables
 - d) Keeping track of drains and sponges
3. A 21-year-old patient is positioned on the OR bed prior to knee surgery. The anesthesiologist administers the anesthetic. What is the next step in the care of this patient?
 - a) Grounding
 - b) Hanging IV fluids
 - c) Giving blood
 - d) Intubating
4. You are the circulating nurse in an operating room that has several surgeries scheduled. You would know to monitor which patient during the intraoperative period because he or she is at increased risk for hypothermia?
 - a) A 72-year-old woman
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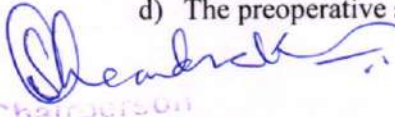
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MNR Medical College & Hospital

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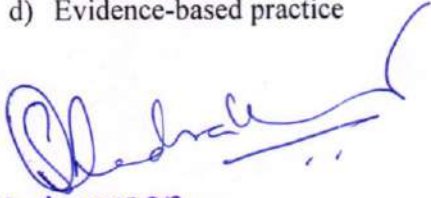
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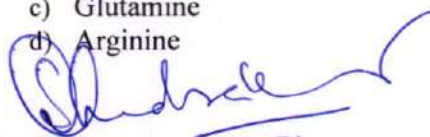

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14. The operating room nurse is taking the patient into the OR when the patient informs the operating nurse that his grandmother spiked a 104°F temperature in the operating room and nearly died 15 years ago. What relevance does this information have regarding your patient?
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- Hypotension
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- Apply povidone-iodine (Betadine) to that section of the gauze and continue packing the wound.
 - Pick up the gauze and continue packing the wound after irrigating the abdominal wound with Betadine solution.
 - Continue packing the wound and inform the physician that an antibiotic is needed.
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18. You are the nurse performing wound care on a 68-year-old male patient. Which of the following practices violates surgical asepsis?
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21. Which of the following events subjects the surgical patient to possible injury in the intraoperative phase of the surgical experience? A.
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 - Increase of pain sense
 - Consciousness
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A VALUE ADDED COURSE ON DIGITAL METHODS IN LEARNING SURGERY

FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

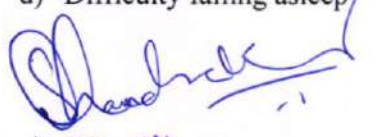
DATE:

TIME: 30 Minutes

MARKS: 30

Tick the Correct Answer

1. The nursing student is preparing an elderly patient for surgery. The patient is scheduled for a general anesthetic. Which side effect should the nurse monitor the patient for?
 - a) **Hypothermia**
 - b) Pulmonary edema
 - c) Cerebral ischemia
 - d) Increased ability to resist stress
2. You are the circulating nurse. Which task are you solely responsible for?
 - a) **Monitoring the patient and documents**
 - b) Estimating the patient's blood loss
 - c) Setting up the sterile tables
 - d) Keeping track of drains and sponges
3. A 21-year-old patient is positioned on the OR bed prior to knee surgery. The anesthesiologist administers the anesthetic. What is the next step in the care of this patient?
 - a) Grounding
 - b) Hanging IV fluids
 - c) Giving blood
 - d) **Intubating**
4. You are the circulating nurse in an operating room that has several surgeries scheduled. You would know to monitor which patient during the intraoperative period because he or she is at increased risk for hypothermia?
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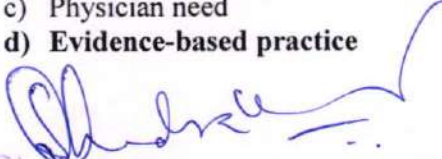


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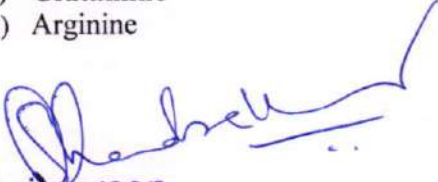
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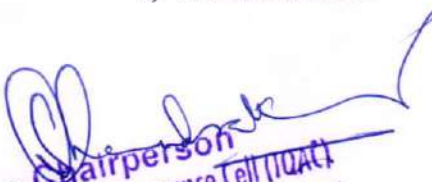

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ASSESSMENT MARKS

Name of the Program: A Value added course Digital Methods in Learning Surgery

Date: 01.03.2021 to 06.03.2021

S. No	Roll No.	Student Name	Marks (30)
1	1570	GOLAMARI PRANAY PAUL REDDY	24
2	1571	CHETANA MAHARANA	25
3	1572	RANOO PRIYAMBADA BISWAL	27
4	1573	KUKUDALA KEERTHI	24
5	1574	HAJIRA NOOREIN	26
6	1575	GRUSHA VARMA	25
7	1576	DURGAPPAGARI KIRANGOUD	27
8	1577	DANUGURI UMA	24
9	1578	APPADI DIVYA	26
10	1579	GIDDY RAM VARSHITH REDDY	27
11	1580	KOTHAPALLI SAICHANDANA	24
12	1581	POLE MOUNIKA	25
13	1582	ADELLI SRIDHAR	26
14	1583	BHUKYA HARSHA	27
15	1584	PERUMANDLA HANISHA	24
16	1585	GEENUKUNTA AMRUTH KUMAR	26
17	1586	JOGINAPALLY GAYATHRI	25
18	1587	GUNTOJU SUDEEP	24
19	1588	NUTALAPATI MOHAN KRISHNA	25
20	1589	PRANEESHA REDDY KANDI	26
21	1590	RAPAKA SHERLY	27
22	1591	SHIVDUTT S KANDI	26
23	1592	KADIYALA LIKHITHAA	25
24	1593	YEDIVALLY PRASHANTH REDDY	24

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25	1594	NITIN SHARMA	24
26	1595	SAGGIDI NIKITHA	25
27	1596	PR RAJA RAMA CHANDRA REDDY	26
28	1597	ONTEDDU SHIRISHA	27
29	1598	GUMMI LOKSAINATH REDDY	27
30	1599	SHAIK MD FAYAZ SHAHRUKH	26
31	1600	KUMILI SAI NIKHIL	25

COORDINATOR

Chairperson
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[Signature]

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Date: 22.02.2021

PROGRAM REPORT

Name of the Event : A Value added course on Digital methods in Learning Surgery"

Date : 01.03.2021 to 06.03.2021

Resource Person : Dr.Mugdha

Professor / Pathology

Dr.Prasad

Professor / Pathology

Name of the Coordinator: Dr.Syed

Number of Students attended: 31

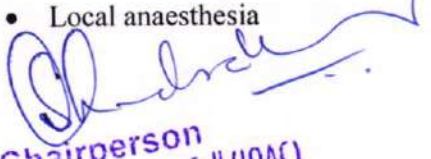
Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

- Demonstrate knowledge and understanding of common surgical problems
- Understand the indications for, and the limitations of, essential diagnostic studies used to evaluate patients with surgical problems
- Demonstrate an understanding of surgical treatments, and alternatives to surgical treatment
- To become familiar with various surgical procedures and know their expected outcomes and complications
- Develop cost/risk/benefit appreciation as it applies to patient care

TOPICS COVERED:

- Introduction
- Suturing methods
- Wound care with dressing
- Suture materials and surgical equipment
- Skills-Foley's catheter, cannula, venesection, ryles tube
- Local anaesthesia


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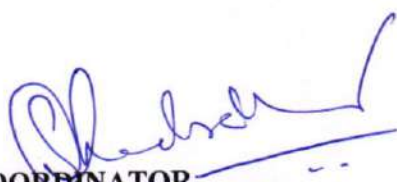

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OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Communicate effectively with patients and other professionals in the surgical setting.
- Perform common technical skills in the surgical setting
- Perform and document the pre operative visit/consultation of a patient with an acute surgical condition and describe the procedure in a way the patient can understand.
- Communicate effectively to all health professionals in the intraoperative setting (operating room)
- Perform common technical skills in the post operative surgical setting in an adult patient.


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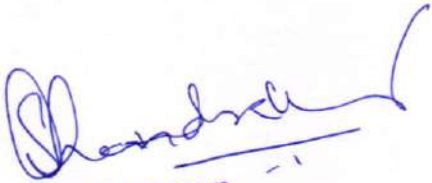
HOD



OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Enhance understanding of biomedical waste management
- Enhance understanding of infection control in hospital setup.
- Describe the components of solid waste management and the laws governing it.
- Discuss the solid waste collection systems, route optimization techniques and processing of solid wastes.
- Outline the design, operation, and maintenance of different methods of treatment.


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MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294

Certificate of Participation

This is to certify that

POLE MOUNIKA

has participated in A Value added course on

“DIGITAL METHODS IN LEARNING SURGERY”

from 01-03-2021 to 06-03-2021 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294


Convener
Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital


Principal

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Date: 29.03.2021

CIRCULAR

This is to inform all II Year students that our department is organizing A Value added course on "**HEALTH EDUCATION SKILLS THROUGH COMMUNITY DIAGNOSIS**" from 05.04.2021 to 10.04.2021. All Students are requested to attend the Program.

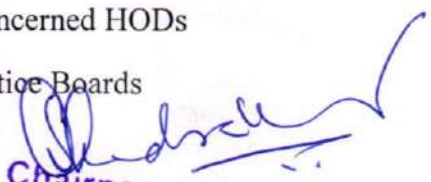

Principal

PRINCIPAL

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Copy to

- Medical Superintendent
- CEO
- Assistant Director
- Chief Academic Officer
- IQAC
- Concerned HODs
- Notice Boards


Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

REGISTRATION FORM

Name:.....

Dept. :.....

Institution:.....

Address for Communication:

.....

Mobile:.....

email:

Free:
In-House
Staff & Students

Chandrasekhar
Chairperson
Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

PROGRAM COMMITTEE:

CHIEF PATRON

Sri.M. Narayana Raju
Chairman,
MNR Group of Educational Institutions

PATRON

Sri. M. Ravi Varma
Vice-Chairman,
MNR Group of Educational Institutions

COORDINATOR

Dr. Syed
SPM
MNR Group of Educational Institutions

RESOURCE PERSON

Dr. Bhagwanth

Professor

ADDRESS FOR COMMUNICATION:

Dr. Syed
Coordinator, SPM
syed79@gmail.com
7989594783

MNR Medical College

Fasalwadi, Sangareddy,
Hyderabad

A VALUE ADDED COURSE ON

**"HEALTH EDUCATION
SKILLS THROUGH COMMUNITY
DIAGNOSIS"**



✓ Dates:

05.04.2021 to 10.04.2021

Organized by:

Dept. of Community Medicine

Venue:

Lecture Hall - 117

MNR Medical College

Fasalwadi, Sangareddy, Hyderabad

Telangana - 502 294

Principal
MNR MEDICAL COLLEGE & HOSPITAL
FASALWADI, SANGAREDDY, HYDERABAD



About the Institute

MNR Medical College and its allied institutions have been progressing steadily since its formation in the year 2001. It has started with an initial intake of 100 students however, MNR is very proud to enroll around 5000 students till date. It gives an immense satisfaction that we have produced so many competent professionals who are serving the nation in better ways. College provides the best of facilities to its students, giving them a lasting memorable impression which they can cherish all through their lives. It offers undergraduate, post-graduate, and diploma programs in Medicine & Health Sciences. It is affiliated with the KNR University of Health Sciences and is recognized by the National Medical Commission (NMC), Govt. of India. College building is housed in an ultramodern structure. It houses department-wise lecture galleries, laboratories, research labs, demo rooms, and libraries. The campus also has a full-fledged communication center, conference hall, 1400-seat auditorium, vast playgrounds, an administration block and a canteen with separate dining halls for students, faculty, guests, and VIPs.

MNR Hospital is a 760 bedded multispecialty hospital well-equipped with quality infrastructure aligned with international standards, skilled & experienced staff, with 24-hour emergency health-care services. All its departments are computerized and linked to a campus-wide LAN. The usage of the latest technology is immensely benefiting the patients, doctors, and students, as data saved can be shared seamlessly for clinical and administrative purposes. All Departments such as General Medicine, Surgery, Cardiology, ENT, Pediatrics, Gynecology, Orthopedics, Ophthalmology, TB and Chest, Gastroenterology, Psychiatry, Dermatology, Urology, Neurology, along with Diagnostic and all other medical facilities are available under the same hospital roof.



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Internal Quality Assurance Cell (IQAC)
MNR Medical College & Hospital

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MNR Nagar, Fasalwadi, Sangareddy - 502 294, Sangareddy Dist. Telangana. India

Ph: + 85000 56667, (08455) 230523, 230527, 230524 Fax No. (08455) - 230555, 230533

LIST OF STUDENT REGISTERED

Name of the Program: A Value added course on Health Education Skills through Community Diagnosis

Date: 05.04.2021 to 10.04.2021

S. No	Roll No.	Student Name	Signature
1	1701	DOPPALAPUDI NIHARIKA	Niharika
2	1702	VALETI HARSHITHA	V. Harshitha
3	1703	SALADI SRI RAJESWARI	Raj
4	1704	NELLUTLA MILIND	Milind
5	1705	BOYAPALLY KIRANMAI	B. Kiranmai
6	1706	RAAVI GUNA SAI RAM	R. Guna
7	1707	MENGJI NITISHA	Nitisha
8	1708	GANJI VARSHA	Varsha
9	1709	BADDAM SUCHARITH REDDY	Sucharitha
10	1710	PALAGIRI SAI KEERTHANA REDDY	Keerthana
11	1711	COMALESHWARAMPET ANJALI	Anjali
12	1712	YEDLAPALLEY SRIVALLI	Srivalli
13	1713	NARRA DIVYASREE	Divya
14	1714	SATYA ABHISHEK VARMA VEGESNA	Abhishek
15	1715	SRISHTI PANDEY	Srishti
16	1716	MAVILLA VENKATA SAI GOUD	Vsk
17	1717	POPPADI MOUNICA	Mounica
18	1718	KANUKUNTA SAI PRIYA	Saipriya
19	1719	K.RAMYA	Ramya
20	1720	CHINTALA VANAJA RANI	V. Rani
21	1721	THOOTIPALLI MANICHANDANA	Manichandana
22	1722	VUSKEMALLA ABHIRAM	Abhiram
23	1723	AKULA AKSHITHA	A. Akshitha
24	1724	DHANCHETTI KAVERI	D. Kaveri

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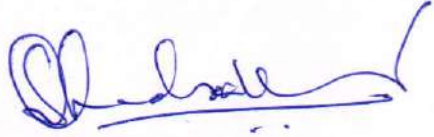
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25	1725	CHOUTIPELLE AKHILESH	Akhilesh
26	1726	AKULA SURAJ	Suraj
27	1727	HONSHETTE SINNI	Sinni
28	1728	BOYINA VIJAY KUMAR	Vijay
29	1729	GODUGU AJAY KUMAR YADAV	Ajay
30	1730	ROYYALA ARUNKUMAR	Arunkumar
31	1731	GATLA SUMA	G. Suma
32	1732	SAIKAM SAI KRISHNA	Sai. Krishna
33	1733	NOOREEN FATIMA	Fatima
34	1734	MAGULURI SUNIDHI	Sunidhi
35	1735	SHAIK JUVERIYA MAHI	Mahi
36	1736	MALOTHU SANDHYA	Sandhya
37	1737	BOGAM MANOHAR	Manohar
38	1738	BANOTH PRAVEEN	Praveen.B.
39	1739	DASARI SUDESHNA	Sudeshna
40	1740	TANAKAM YASHWANTHI	Yashanti
41	1741	PAMBALLA ANUSHA	Anusha
42	1742	KAVALI SUPRIYA	Supriya
43	1743	BONAGIRI SRINIJA	B. Srinija
44	1744	MYAKALA RAMESH	Ramesh
45	1745	DASARI SWATHI	Swathi
46	1746	REYA ROY	Reya
47	1747	KANDHUKURI BHUMIKA	Bhumika
48	1748	YALAMANJULA NIKHITHA	Nikhitha
49	1749	UTTEKAR RUSHIKESH DIPAK	Rushikesh
50	1750	DHAWALE AMAN SURESH	Aman
51	1751	KONKATHI SHRUTHI	Shruthi
52	1752	ADITI ASTHANA	Aditi
53	1753	KHEDKAR POONAM BHUJANGRAO	Poonam
54	1754	SANNIDHYA SHARMA	Sannidhya Sharma
55	1755	DEVANSH PARLAWAR	Devansh
56	1756	DBAHNBHAR PRAJWAL VINOD	Prajwal
57	1757	ZERIKUNTHE SHIVANI	Shivani

Internal Person
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58	1758	RAUT AKASH DATTATRAY	Akash D
59	1759	M.SOUMYA SREE	Soumya
60	1760	MUKUL SANER	Mukul



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ATTENDANCE SHEET

Name of the Program: A Value added course on Health Education Skills through Community Diagnosis

Date: 05.04.2021 to 10.04.2021

S. No	Roll No.	Student name	05.04.21	06.04.21	07.04.21	08.04.21	09.04.21	10.04.21	Feedback
1	1701	DOPPALAPUDI NIHARIKA	P	A	P	P	P	P	Good
2	1702	VALETI HARSHITHA	P	P	A	P	P	P	Excellent
3	1703	SALADI SRI RAJESWARI	A	P	P	P	P	P	Good
4	1704	NELLUTLA MILIND	P	P	A	P	P	P	Good
5	1705	BOYAPALLY KIRANMAI	P	P	P	A	P	P	Good
6	1706	RAAVI GUNA SAI RAM	P	P	P	P	A	P	Good
7	1707	MENGJI NITISHA	P	P	P	P	P	A	Excellent
8	1708	GANJI VARSHA	P	P	P	A	P	P	Good
9	1709	BADDAM SUCHARITH REDDY	A	A	P	P	P	P	Good
10	1710	PALAGIRI SAI KEERTHANA REDDY	P	P	P	P	A	P	Good
11	1711	COMALESHWARAMPET ANJALI	A	P	P	P	P	P	Good
12	1712	YEDLAPALLEY SRIVALLI	P	P	A	P	P	P	Good
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14	1714	SATYA ABHISHEK VARMA VEGESNA	P	P	P	P	P	A	Good
15	1715	SRISHTI PANDEY	P	P	P	P	A	P	Good
16	1716	MAVILLA VENKATA SAI GOUD	P	P	A	P	P	P	Excellent
17	1717	POPPADI MOUNICA	A	P	P	P	P	P	Good.
18	1718	KANUKUNTA SAI PRIYA	P	P	P	A	P	P	Good
19	1719	K.RAMYA	P	P	P	P	A	P	Excellent
20	1720	CHINTALA VANAJA RANI	P	A	P	P	P	P	Good

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21	1721	THOOTIPALLI MANICHANDANA	A	P	P	P	P	P	Good
22	1722	VUSKEMALLA ABHIRAM	P	A	P	P	P	P	Good
23	1723	AKULA AKSHITHA	P	P	A	P	P	P	Excellent
24	1724	DHANCHETTI KAVERI	P	P	P	A	P	P	Good
25	1725	CHOUTIPELLY AKHILESH	P	P	P	P	A	P	Good
26	1726	AKULA SURAJ	P	P	P	P	P	A	Good
27	1727	HONSHETTE SINNI	P	P	P	P	A	P	Good
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29	1729	GODUGU AJAY KUMAR YADAV	P	P	A	P	P	P	Excellent
30	1730	ROYVALA ARUNKUMAR	P	A	P	P	P	P	Good
31	1731	GATLA SUMA	A	P	P	P	P	P	Good
32	1732	SAIKAM SAI KRISHNA		A	P	P	P	P	Good
33	1733	NOOREEN FATIMA	P	P	A	P	P	P	Good
34	1734	MAGULURI SUNIDHI	P	P	P	A	P	P	Excellent
35	1735	SHAIK JUVERIYA MAHI	P	P	P	P	A	P	Good
36	1736	MALOTHU SANDHYA	P	P	P	P	P	A	Excellent
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38	1738	BANOTH PRAVEEN	P	P	P	A	P	P	Good
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50	1750	DHAWALE AMAN SURESH	P	A	P	P	P	P	Good

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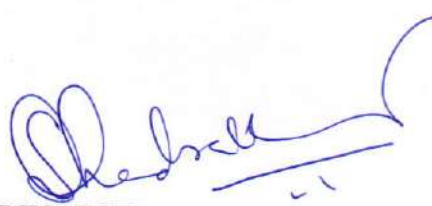
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51	1751	KONKATHI SHRUTHI	A	P	P	P	P	P	Good
52	1752	ADITI ASTHANA	P	A	P	P	P	P	Excellent
53	1753	KHEDKAR POONAM BHUJANGRAO	A	P	P	P	P	P	Good
54	1754	SANNIDHYA SHARMA	A	P	P	P	P	P	Good
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57	1757	ZERIKUNTHE SHIVANI	P	P	P	P	A	P	Excellent
58	1758	RAUT AKASH DATTATRAY	P	P	A	P	P	P	Good
59	1759	M.SOUMYA SREE	P	A	P	P	P	D	Excellent
60	1760	MUKUL SANER	P	P	P	P	P	A	Good


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A VALUE ADDED COURSE ON HEALTH EDUCATION SKILLS THROUGH COMMUNITY DIAGNOSIS

FINAL ASSESSMENT TEST

NAME:

YEAR / SEM:

REG.NO:

DATE:

TIME: 30 Minutes

MARKS: 30

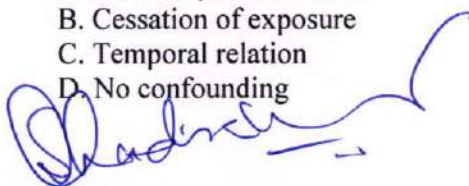
Tick the Correct Answer

1. The purpose is to limit the incidence of disease by controlling causes and risk factors
 - A. Primordial prevention
 - B. Primary prevention
 - C. Secondary prevention
 - D. Tertiary prevention
2. The property of a test to identify the proportion of truly ill persons in a population who are identified as ill by a screening test
 - A. Sensitivity
 - B. Specificity
 - C. Positive predictive value
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 - A. Reliability
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5. A study that measures the number of persons with influenza in a calendar year
 - A. Cohort study
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6. Stage by which the presence of factors favors the occurrence of disease
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7. Modes of horizontal transmission of disease, except
 - A. Contact
 - B. Vector
 - C. Common Vehicle
 - D. Genetic
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16. A study that measures the incidence of a disease
 - A. Case report
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 - A. The likelihood that the study groups will be comparable is increased
 - B. Self-selection for a particular treatment is eliminated
 - C. External validity of the study is increased
 - D. Assignment of the next subject cannot be predicted
20. Recall is an example of what type of bias
 - A. Selection bias
 - B. Information bias
 - C. Confounding
 - D. Systematic
21. Type of design where both exposure and disease are determined simultaneously for each subject
 - A. Case study
 - B. Cross sectional study
 - C. Case control study
 - D. Cohort study
22. A study is conducted to determine the proportion of persons in the population with PTB using AFB sputum for diagnosis
 - A. Case study
 - B. Cross sectional study
 - C. Case control study
 - D. Cohort study
23. Randomization is the best approach in designing a clinical trial in order to
 - A. Achieve predictability
 - B. Achieve unpredictability
 - C. Achieve blinding
 - D. Limit confounding
24. Type of sampling whereby subjects are assigned according to a factor that would influence the outcome of a study
 - A. Simple random sampling
 - B. Systematic sampling
 - C. Stratified random sampling
 - D. Cluster sampling

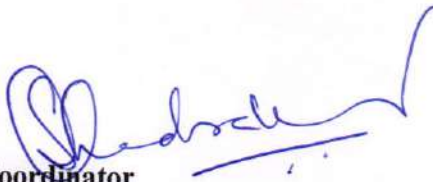


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25. The extent to which a specific health care treatment, service, procedure, program, or other intervention produces a beneficial result under ideal controlled conditions is its
- A. Effectiveness
 - B. Efficacy
 - C. Efficiency
 - D. Effect modification
26. Leading cause of Diarrheal disease
- A. Enterotoxigenic Escherichia coli
 - B. Salmonella (non-typhoid)
 - C. Rotavirus
 - D. Campylobacter jejuni
27. Mammography should be done annually in women of what age?
- A. 50 years old. and above
 - B. 60 years old and above
 - C. 45 years old and above
 - D. 30 years old and above
28. APGAR family assessment is interpreted by means of
- A. Scoring
 - B. Comparing with a standard table
 - C. Using a scale of wellness
 - D. Consultation with a family psychologist
29. All the following provides evidence of fecal pollution, Except?
- A. Fecal streptococci
 - B. Coliform
 - C. Cl. Tetani
 - D. Enteropathogenic virus
30. Most desired temperature range of drinking water?
- A. 0 – 5 degrees C
 - B. 5 – 10 degrees C
 - C. 10 – 15 degrees C
 - D. 15 – 20 degrees C



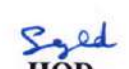
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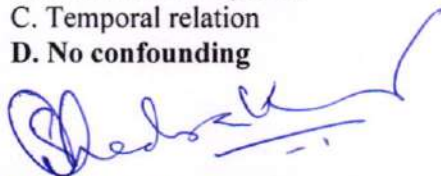
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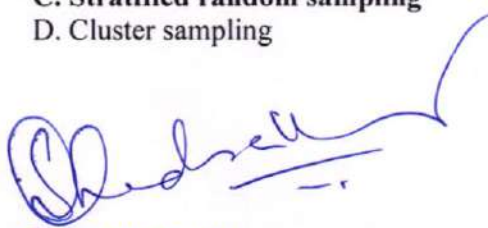
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 - C. Confounding
 - D. Systematic
21. Type of design where both exposure and disease are determined simultaneously for each subject
 - A. Case study
 - B. Cross sectional study**
 - C. Case control study
 - D. Cohort study
22. A study is conducted to determine the proportion of persons in the population with PTB using AFB sputum for diagnosis
 - A. Case study
 - B. Cross sectional study**
 - C. Case control study
 - D. Cohort study
23. Randomization is the best approach in designing a clinical trial in order to
 - A. Achieve predictability
 - B. Achieve unpredictability**
 - C. Achieve blinding
 - D. Limit confounding
24. Type of sampling whereby subjects are assigned according to a factor that would influence the outcome of a study
 - A. Simple random sampling
 - B. Systematic sampling
 - C. Stratified random sampling**
 - D. Cluster sampling

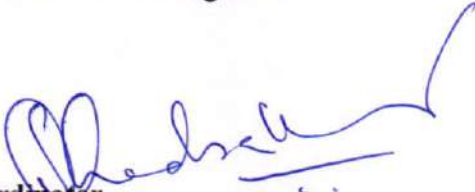


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25. The extent to which a specific health care treatment, service, procedure, program, or other intervention produces a beneficial result under ideal controlled conditions is its
A. Effectiveness
B. Efficacy
C. Efficiency
D. Effect modification
26. Leading cause of Diarrheal disease
A. Enterotoxigenic Escherichia coli
B. Salmonella (non-typhoid)
C. Rotavirus
D. Campylobacter jejuni
27. Mammography should be done annually in women of what age?
A. 50 years old. and above
B. 60 years old and above
C. 45 years old and above
D. 30 years old and above
28. APGAR family assessment is interpreted by means of
A. Scoring
B. Comparing with a standard table
C. Using a scale of wellness
D. Consultation with a family psychologist
29. All the following provides evidence of fecal pollution, Except?
A. Fecal streptococci
B. Coliform
C. Cl. Tetani
D. Enteropathogenic virus
30. Most desired temperature range of drinking water?
A. 0 – 5 degrees C
B. 5 – 10 degrees C
C. 10 – 15 degrees C
D. 15 – 20 degrees C



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ASSESSMENT MARKS

Name of the Program: A Value added course on Health Education Skills through Community Diagnosis

Date: 05.04.2021 to 10.04.2021

S. No	Roll No.	Student Name	Marks (30)
1	1701	DOPPALAPUDI NIHARIKA	24
2	1702	VALETI HARSHITHA	26
3	1703	SALADI SRI RAJESWARI	26
4	1704	NELLUTLA MILIND	27
5	1705	BOYAPALLY KIRANMAI	24
6	1706	RAAVI GUNA SAI RAM	24
7	1707	MENGJI NITISHA	25
8	1708	GANJI VARSHA	26
9	1709	BADDAM SUCHARITH REDDY	27
10	1710	PALAGIRI SAI KEERTHANA REDDY	27
11	1711	COMALESHWARAMPET ANJALI	26
12	1712	YEDLAPALLEY SRIVALLI	25
13	1713	NARRA DIVYASREE	24
14	1714	SATYA ABHISHEK VARMA VEGESNA	25
15	1715	SRISHTI PANDEY	26
16	1716	MAVILLA VENKATA SAI GOUD	27
17	1717	POPPADI MOUNICA	27
18	1718	KANUKUNTA SAI PRIYA	26
19	1719	K.RAMYA	25
20	1720	CHINTALA VANAJA RANI	25
21	1721	THOOTIPALLI MANICHANDANA	24
22	1722	VUSKEMALLA ABHIRAM	26
23	1723	AKULA AKSHITHA	24
24	1724	DHANCHETTI KAVERI	27

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25	1725	CHOUTIPELLY AKHILESH	27
26	1726	AKULA SURAJ	24
27	1727	HONSHETTE SINNI	25
28	1728	BOYINA VIJAY KUMAR	27
29	1729	GODUGU AJAY KUMAR YADAV	27
30	1730	ROYVALA ARUNKUMAR	26
31	1731	GATLA SUMA	26
32	1732	SAIKAM SAI KRISHNA	25
33	1733	NOOREEN FATIMA	24
34	1734	MAGULURI SUNIDHI	24
35	1735	SHAIK JUVERIYA MAHI	26
36	1736	MALOTHU SANDHYA	27
37	1737	BOGAM MANOHAR	25
38	1738	BANOTH PRAVEEN	24
39	1739	DASARI SUDESHNA	27
40	1740	TANAKAM YASHWANTHI	26
41	1741	PAMBALLA ANUSHA	27
42	1742	KAVALI SUPRIYA	26
43	1743	BONAGIRI SRINIJA	26
44	1744	MYAKALA RAMESH	27
45	1745	DASARI SWATHI	26
46	1746	REYA ROY	25
47	1747	KANDHUKURI BHUMIKA	24
48	1748	YALAMANJULA NIKHITHA	26
49	1749	UTTEKAR RUSHIKESH DIPAK	26
50	1750	DHAWALE AMAN SURESH	26
51	1751	KONKATHI SHRUTHI	27
52	1752	ADITI ASTHANA	27
53	1753	KHEDKAR POONAM BHUJANGRAO	24
54	1754	SANNIDHYA SHARMA	24
55	1755	DEVANSH PARLAWAR	25
56	1756	DBAHNBHAR PRAJWAL VINOD	25
57	1757	ZERIKUNTHE SHIVANI	27

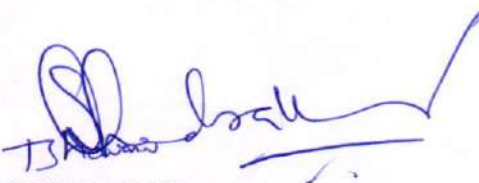
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58	1758	RAUT AKASH DATTATRAY	26
59	1759	M.SOUMYA SREE	24
60	1760	MUKUL SANER	25


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Date: 12.04.2021

PROGRAM REPORT

Name of the Event : A Value added course on "Health Education Skills through Community Diagnosis"

Date : 05.04.2021 to 10.04.2021

Resource Person : Dr.Mugdha

Professor / Pathology

Dr.Prasad

Professor / Pathology

Name of the Coordinator: Dr.Syed

Number of Students attended: 60

Venue: Lecture Hall

OBJECTIVE OF THE PROGRAM:

- Demonstrate knowledge and understanding of common surgical problems
- Understand the indications for, and the limitations of, essential diagnostic studies used to evaluate patients with surgical problems
- Demonstrate an understanding of surgical treatments, and alternatives to surgical treatment
- To become familiar with various surgical procedures and know their expected outcomes and complications
- Develop cost/risk/benefit appreciation as it applies to patient care

TOPICS COVERED:

- Introduction
- Suturing methods
- Wound care with dressing
- Suture materials and surgical equipment
- Skills-Foley's catheter, cannula, venesection, ryles tube
- Local anaesthesia

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OUTCOME OF THE PROGRAM:

At the end of the program, the student will be able to

- Communicate effectively with patients and other professionals in the surgical setting.
- Perform common technical skills in the surgical setting
- Perform and document the pre operative visit/consultation of a patient with an acute surgical condition and describe the procedure in a way the patient can understand.
- Communicate effectively to all health professionals in the intraoperative setting (operating room)
- Perform common technical skills in the post operative surgical setting in an adult patient.

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Certificate of Participation

This is to certify that

ADITI ASTHANA

has participated in A Value added course on

“HEALTH EDUCATION SKILLS THROUGH COMMUNITY”

from 05-04-2021 to 10-04-2021 held at MNR Medical College

Fasalwadi, Sangareddy, Hyderabad, Telangana- 502 294


Convener
Chairperson
Internal Quality Assurance Cell (IQAC)
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Principal
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