Emergency Medicine (EM) is a relatively new specialty that is expanding at a phenomenal pace throughout the globe. Within the international community, leaders in medicine, health economics, public health, and government have recognized the need to develop systems that respond to acute medical and surgical emergencies, and emergency medicine is the unique discipline and independent specialty with a unique body of knowledge to respond to these life-threatening events.

According to the curriculum of the College of Emergency Medicine (CEM) United Kingdom, Emergency medicine is a field of practice based on the knowledge and skills required for the prevention, diagnosis and management of the acute and urgent aspects of illness and injury affecting patients of all age groups with a full spectrum of undifferentiated physical and behavioral disorders. It is a specialty in which time is critical.

Emergency medicine has evolved globally to include added responsibilities in the areas of - Management of medical and administrative aspects of emergency services system, Disaster planning and management for both natural and manmade events, Toxicology and Poison center development,

The Peerless Hospital & BK Roy Research Centre has recognized the need to train highly-skilled physicians to treat patients presenting with acute medical conditions. The Ronald Reagan Institute of Emergency Medicine (RRIEM) at the George Washington University which has extensive experience training health care practitioners throughout the US and across the globe has collaborated with the medical faculty at Peerless Hospital & BK Roy Research Centre to launch a 3-year full time Masters in Emergency Medicine Program, in Emergency Medicine which will train 12 fellows per year with optional elective training at RRIEM.

The Peerless Hospital and B.K. Roy Research Centre is one of the oldest tertiary care hospitals in Kolkata, India. It is a 400 bedded hospital with all major clinical specialties; the National Neurosciences Centre is also housed in the same premises which cover all neurology and neurosurgery cases. The Indian chapter of Royal college of Ireland is housed in the hospital which is
also the examining authority for the royal college. The hospital and the department have also been approved for Medical Training Initiative of the Royal College Of Physicians of England. The hospital is a center for DNB training in multiple specialties like Emergency Medicine, Orthopedics, Gastroenterology etc.

The Institute of Emergency Medicine and Trauma care is a 17 bedded unit with a state of art resuscitation bay and negative pressured isolation room and dedicated Emergency Operation Theatre. The group is also developing Emergency stabilization units in different parts of the city and a citywide EMS. The emergency witnesses 15000-19,000 footfalls in a year. The case mix is varied and Patient care in the department is evidence based and protocol driven. The department is tiered with Emergency Consultants and Registrars working in the hospital round the clock.

The Department of Emergency Medicine at the George Washington University is the seventh largest Academic Emergency Medicine Department in the United States. The Department runs postgraduate programs in Emergency Medicine in 18 countries in addition to USA across the globe. The Department is committed to service excellence in patient care and education, expansion of Emergency Medicine's boundaries through the development of new programs and configurations, research and creation of new knowledge in this field.
The Ronald Reagan Institute of Emergency Medicine at The George Washington University Medical Center was established in 1991, in recognition of both the undisputed excellence of the Medical Center's Department of Emergency Medicine and its role in saving the life of President Reagan after a 1981 assassination attempt. The Institute (RRIEM) seeks to advance the practice of Emergency Medicine worldwide by promoting a global exchange of knowledge and ideas. RRIEM serves as a valued partner to Ministries, universities and organizations in different countries to improve emergency medicine services and practices worldwide by providing emergency department operations assessment, strategic planning, medical education and academic research for health care systems across the globe since 1991. With a comprehensive range of capacity in injury prevention, EMS and disaster medicine, emergency ultrasound and academic research, the institute continues to have a leading role in global emergency medicine development worldwide.

The Program

The Post Graduate Program in Emergency Medicine (PGPEM) will consist of a three year curriculum, divided into 36 clinical modules that will cover the breadth of emergency medicine. RRIEM and Peerless Hospital will provide faculty coverage and program oversight for the fellowship program. At the successful conclusion of the program, the graduating fellows will be able to practice independently within emergency departments as well-trained physicians, and they will receive an "International Certificate of Successful Completion of Three Year Post Graduate Masters Program in Emergency Medicine" from RRIEM at the George Washington University.

The program strives to prepare a new generation of leaders in medicine who will expand the field of Emergency medicine throughout India.

The Faculty

Faculty from the RRIEM & MFA/GWU, Washington DC, USA

1. Jeffrey Smith, MD, MPH, FACEP
   Director - Emergency Medicine (EM)
2. Katherine Douglas, MD, MPH
   Director - International Emergency Medicine
3. Robert F. Shesser, MD, MPH, FACEP
   Professor - Emergency Medicine
4. Janice C. Blanchard, MD, MPH, PhD
   Assistant Professor - Emergency Medicine
5. Keith S. Boniface, MD, RDMS, RDCS
Associate Professor - Emergency Medicine
5. Neal K. Sikka, MD
   Assistant Professor – Emergency Medicine
6. Amelia Pousson, MD
   Assistant Professor of Emergency Medicine
7. Dan Hanfling, MD
   Clinical Instructor, Emergency Medicine
8. Brijal Patel, MD
   Clinical Instructor, Emergency Medicine
9. Michael Pirri, MD
   Clinical Instructor, Emergency Medicine
10. Leslie Hardware, MD
11. Shweta Gidwani, FCEM, MCEM, MRCP
12. Heather A. Brown, MD
13. Brandon Cole, MD

Faculty at Peerless Hospital and B.K. Roy Research Centre, Kolkata, India

Institute of Emergency Medicine and Trauma care
1. Dr. Indraneel Dasgupta, MRCS, MCEM
   Clinical Director,
2. Dr. Saptarshi Saha, FEM, MEM
   Associate Consultant,
3. Dr. Ranjan Dutta, PGFEM, MEM
   Associate Consultant,
4. Dr. Indranil Mitra, MEM
   Associate Consultant,
5. Dr. Subhendu Das, MEM
   Associate Consultant,
6. Dr. Sudip Chakraborty, MEM
   Associate Consultant,
7. Dr. Amit Bhowmik, MEM
   Associate Consultant,
8. Dr. Sambit Maiti, MEM
   Sr. Registrar,
9. Dr. Shyamanga Lahkar MEM
   Sr. Registrar,

Faculties from Other Allied Specialties:
1. Dr. A. K. Sarkar MD, MRCP(UK)
Clinical Director, Department of Critical Care Medicine

2. Dr. Rimita Dey, MD, FNS(Critical care)
   In-charge Department of Critical Care Medicine

3. Dr. Chandramouli Bhattacharya MD(Trop. Med.,) MRCP (Irelend)
   Consultant, Department of Internal Medicine

4. Dr. Subhayan Bera MS, FRCS(Eng & Edin)
   Consultant Department of General Surgery

5. Dr. Amitabha Chakraborty MS
   Consultant Department of General Surgery

6. Dr. Souvik Sural MD. DM(Nephro), DNB
   Head, Department of Nephrology

7. Prof. Dr. A.L. Dutta MD, DM, FCCP (USA)
   Consultant Department of Cardiology

8. Dr. M. N. Bhattacharya DLO,DOHNS(Eng), MRCS(Edin), MRCS (ENT and Head neck surgery)
   Consultant, Department of ENT

9. Dr. S. Kar Purkayastha MD, FRCP(London), FRCP(Glasgow)
   Joint Managing Director, Peerless Hospital and Consultant Department of Gastroenterology

10. Dr. A. Konar MD, MRCP(UK), FRCP(London)
    Consultant Department of Gastroenterology

11. Dr. Sanjukta Dey DCH(Cal), DNB (Paed), DCH (Lond),
    Consultant, Department of Pediatrics

12. Dr. A.K. Bhattacharjee, MS, Mch, Fellow, Neuro-Oncology( Canada)
    Consultant, Department of Neurosurgery

13. Dr. Prasad Krishnan MS, Mch
    Consultant, Department of Neurosurgery

The Curriculum

The Program will focus on a specific clinical module topic each month. Each day the fellows will receive a clinical presentation with a case-based education classes that will last approximately two hours each morning, and during clinical shifts the fellows will round on patients in the emergency department with faculty. Each week there will be at least 10 hours of educational time, focusing on the month's modular topics and core literature in Emergency Medicine. This will include didactic presentations, journal club article reviews, simulation exercises, and guest speakers from senior consultants. In addition to the overall curriculum structure, each fellow will receive a monthly set of clinical and educational assignments and responsibilities. Faculties will also provide clinical teaching through bedside clinical rounds of specific patients.
**Fundamental components** of the education program include:

- Lectures on the modular topic of the month – classroom and online from GWU
- Evidence-based medicine
- Journal article discussions
- Grand rounds and guest speakers
- Morbidity and mortality (M&M) conferences
- Follow up case discussions on patients admitted through the emergency department
- Procedures and skills seminars
- Presentations by the residents
- Multidisciplinary case discussions

The following table gives an overview of the **Modules and Procedures of the Program**:

<table>
<thead>
<tr>
<th>MODULES</th>
<th>PROCEDURES</th>
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<tbody>
<tr>
<td>Orientation</td>
<td>Toxicology I</td>
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<tr>
<td></td>
<td>BLS, ACLS &amp; PALS</td>
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<tr>
<td>Cardiovascular I</td>
<td>Neurology</td>
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<tr>
<td></td>
<td>Transthoracic/Transvenous Pacing</td>
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<tr>
<td>Airway</td>
<td>Psychosocial/Violence</td>
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<td></td>
<td>ET Intubation/RSI</td>
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<tr>
<td>Peds I</td>
<td>Ophthalmology</td>
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<tr>
<td></td>
<td>Lumbar Puncture</td>
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<tr>
<td>Shock</td>
<td>Cardiovascular II</td>
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<td></td>
<td>CVC</td>
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<tr>
<td>Infectious Disease</td>
<td>Trauma II</td>
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<td></td>
<td>I&amp;D</td>
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<tr>
<td>Trauma I</td>
<td>Peds II</td>
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<tr>
<td></td>
<td>Trauma resus -Adult &amp; pediatric</td>
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<tr>
<td>Gastrointestinal I</td>
<td>Pulmonary</td>
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<tr>
<td></td>
<td>G-Tube Replacement, Hernia Reduction</td>
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<tr>
<td>Ortho I Traumatic</td>
<td>Soft Tissue/Wound Care</td>
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<tr>
<td></td>
<td>Fracture Reduction/Splinting</td>
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<tr>
<td>OB/GYN</td>
<td>Neonatology</td>
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<td></td>
<td>Arterial -Line</td>
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<tr>
<td>Gastrointestinal II</td>
<td>Procedures</td>
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<td></td>
<td>Regional Anesthesia</td>
</tr>
<tr>
<td></td>
<td>Arthrocentesis</td>
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</tbody>
</table>
Fellows will also have the opportunity to prepare presentations for their colleagues, and each month the fellows will give a prepared lecture on a specific subject. These presentations will improve the fellows speaking and presentations skills. The Emergency Medicine faculty will also invite experts from other fields such as Cardiology, Surgery, Orthopedics and Pediatrics to give guest lectures on important topics that are related to emergency medicine. Fellows will be expected to read assigned chapters in their textbooks and to read relevant journal articles.

In addition, fellows will be encouraged to initiate and conduct research projects pertinent to Emergency Medicine, and they will be required to write a scholarly article that is worthy of publication. The fellows will be expected to work on a research project with the faculty, and they will be required to submit one abstract or oral presentation at a medical conference. The fellows should also each submit one paper to a journal for potential publication. Finally, successful graduation for each fellow will require the completion of a thesis paper that may be based on the fellow’s prior research presentations or published articles.

At the end of the second year of training, fellows will have the option of spending 4 weeks at George Washington University Hospital working with the faculty in Washington, D.C. as an elective. These
fellows will be responsible for their airfare, housing, and meals during the elective. RRIEM faculty will also provide remote educational resources such as evidence based medicine articles and lecture presentations.

The primary textbook will be *Emergency Medicine: A Comprehensive Study Guide 8th edition* edited by Judith E. Tintinalli. In addition, *Rosen's Emergency Medicine: Concepts and Clinical Practice* will serve as a supporting textbook, and *Clinical Procedures in Emergency Medicine* by James R. Roberts and Jerris Hedges will be used to teach necessary procedures in the emergency department. Each module will begin with a pre-test to gauge the fellows’ academic knowledge on the clinical topics, and each module will end with a post-test to measure the fellows’ level of comprehension and mastery of the materials during the module session. The full three year curriculum can be found in [http://www.peerlesshospital.com/academic/mem.html](http://www.peerlesshospital.com/academic/mem.html). The curriculum will continue in the same manner in coordination with other MEM Programs in India to allow for streamlining and coordination.

**Clinical Rotations**

The fellows will rotate through both the Emergency Department and other important clinical services. The fellows will spend 6/12 months each year in the Emergency Department and of the remainders of the time rotating through other services. The rotations in the other departments will provide the fellows with opportunities to develop important knowledge and skills in core subjects.

**Evaluation and Assessment**

Fellows will be evaluated using the evaluation forms every month by at least one Attending Consultant and either an Overseas Emergency Medicine Faculty or the Clinical Director. At least one evaluation per year will be completed by members of the Emergency Department non-faculty staff (nurses, patient care staff) in regard to professionalism and interpersonal skills. Residents will be scheduled to review their evaluations, procedure logs, tests, and overall progress with the Program Director every three months. During this session, residents will be given feedback on performance in the program, pointers on how to improve their performance, and an opportunity to discuss program-related issues with the Program Director. This will also be an opportunity to review procedure logs and research projects. Residents will be expected to fill-out an evaluation form for
each monthly rotation. These evaluations will be reviewed by the Program Director as a way to continuously improve the program. Any feedback from residents regarding faculty or outside rotations will be provided to the faculty or outside rotations in an anonymous and constructive manner at the Program Director’s discretion. Residents will be able to review their own files and past evaluations at any point during the program by appointment with the program director. Either the resident or the program director can arrange a meeting at any point in the program to address issues pertinent to the resident’s education.

### Application Details

**Eligibility**: M.B.B.S. or Equivalent Overseas Qualification.  
BLS, ACLS, PALS, ATLS certification desirable.

**Application starts from** – **15th December 2018**

The application forms should be accompanied with photocopies of the following documents:

1. 2x passport size photographs
2. M.B.B.S. Pass Certificate
3. BLS, ACLS, PALS, ATLS certification if any
4. Medical Registration Certificate
5. Age And Address Proof Documentation
6. Rs 500 for the application form
7. The application forms duly filled can be submitted in the Office of The Clinical Director by hand or to: Dr. Subhendu Das, Associate Consultant, Department of Emergency Medicine, Peerless Hospital & B. K. Roy Research Centre, 360, Panchasayar, Kolkata: 700094, West Bengal, India by email, electronic application or post. You are strongly advised to submit your application using Registered Post. If you do not receive an acknowledgement letter within two weeks after sending your application, you are advised to contact Dr.Subhendu Das (ph. No.: +91-8017486313) to ensure that your form has been received.

**Last Date of Submission of application forms** – **18th May, 2019**

**Date of Written assessment** - **31st May, 2019** at Seminar Hall, Peerless Hospital, between 9.30am-11.30am. Result of the Written Examination will be displayed in the notice board of Department of Emergency Medicine, Peerless Hospital and in the hospital website after 2 pm. All successful candidates should attend the interview on the specified dates and time.
Date of Interview- 31st May, 2019 from 2pm onwards and 1st June, 2019, 9am onwards at The Institute of Emergency Medicine and Trauma care, Peerless Hospital.

Course Fees – Rs 12lakh INR to be paid in 3 installments. Successful candidates are required to submit an initial deposit of Rs 3 lakh INR by 5th June, or the seat will be allotted to the waiting list candidates on merit basis. Rs 4 lac INR is payable during the time of admission (on or before 15th June 2019). Rs 3 lac INR is payable on or before 15th June 2020 and the last installment of Rs 2 lac INR is payable on or before 15th June 2021.

Successful candidates are required to submit Rs 7 lac INR and all relevant documents for admission as advised on or before 15th June 2019.

Classes commence on 1st July, 2019,

For any queries regarding application please ring:

- Ms. Soma Mitra (ED Coordinator): ph:8697188718 / 8981092091 email: mitra.soma14@gmail.com
- Dr Subhendu Das: ph: 8017486313, email: apu_cancer@yahoo.com
- Dr. Indranil Mitra: ph: 9903806730 email: drimitra@gmail.com

SYLLABUS FOR MEM ENTRANCE EXAMINATION 2013 BATCH

1. The MCQ book prescribed for the entrance is PRE – TEST SELF ASSESSMENT AND REVIEW ON EMERGENCY MEDICINE, 2ND EDITION by KRISTI L. KOENIG. This book can be downloaded from: http://www.4shared.com/document/MBr_TrK ... DERMIS.htm

2. OXFORD HANDBOOK OF EMERGENCY MEDICINE

3. 2010 AMERICAN HEART ASSOCIATION CPR ALGORITHMS

4. In the interview, candidates will be given clinical scenarios on the following topics:

- Chest pain
- Abdominal pain
- Shortness of breath
- Major trauma
- ACLS 2016 guidelines
- ED Rx of Unconscious patient
- Common Arrhythmia
- ECGs
- Management of seizure
- Diabetic ketoacidosis
Some of the above materials are provided in portal.php

5. Please read sections:
1. Laboratory Tests
2. Chest x-ray appearance

From OXFORD AMERICAN HANDBOOK OF CLINICAL DIAGNOSIS that can be downloaded from: http://www.4shared.com/document/gH_khMX ... _Clini.htm