

**JUBILEE MISSION MEDICAL COLLEGE  
&  
RESEARCH INSTITUTE**

**ACADEMIC CALENDAR &  
HAND BOOK 2026**

**Jubilee Mission Medical College & Research Institute**

Thrissur, Kerala - 680005

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[www.jmmcri.org](http://www.jmmcri.org)



# JUBILEE MISSION MEDICAL COLLEGE & RESEARCH INSTITUTE:

## HISTORY & INTRODUCTION

The Jubilee Mission Hospital, a Christian Minority Institution, was established in the year 1952. Subsequently Medical College has been established and made functional in the year 2003. The Medical College has National Medical Commission (NMC) recognition for 150 MBBS seats, 18 Postgraduate Programme (total 52 seats) and 3 Super speciality (DM) courses (total 9 seats). H.G. Mar Andrews Thazhath, Archbishop of Thrissur is the Patron and Chairman of the Jubilee Mission Medical College and Research Institute.

### OUR MISSION

Transforming Lives With Love

### OUR VISION

“Bearing witness to Christ, the Healer, Jubilee Mission Health Care Institutions strive to be a world leader in clinical outcomes, patient experience, medical education and research, all guided by the principles of catholic ethics and affordability for patients.”

**Motto:** *Service with Love*

**Values:** *Compassion, Integrity, Team work, Excellence*

The first batch of Medical students were admitted to the Jubilee Mission Medical College & Research Institute, Thrissur and the classes commenced on 22/09/2003 after fulfilling the requirements of Medical Council of India. This college was affiliated to the University of Calicut and is housed at the Heart of the city of Thrissur.

The students of 2010 admission onwards are affiliated to the Kerala University of Health Sciences, Mulangunnathukavu, Thrissur.

## Courses Offered

MBBS Seats - 150 nos

Post Graduate Seats:

Sl. No.	Department	P. Graduation	No. of Seats
1	General Medicine	MD	4
2	Paediatrics	MD	4
3	Radio Diagnosis	MD	3
4	Oto rhino laryngology	MS	3
5	Orthopaedics	MS	3
6	Anaesthesiology	MD	4
7	Microbiology	MD	2
8	Pathology	MD	3
9	Obstetrics and Gynaecology	MS	4
10	Ophthalmology	MS	2
11	Emergency Medicine	MD	3
12	Transfusion Medicine	MD	2
13	General Surgery	MS	5
14	Psychiatry	MD	3
15	Physiology	MD	1
16	Community Medicine	MD	2
17	Dermatology, Venereology & Leprosy	MD	2
18	Respiratory Medicine	MD	2
<b>Total</b>			<b>52</b>

## Super Specialty Seats:

Sl No	Department	P. Graduation	No. of Seats
1	Cardiology	DM	3
2	Neurology	DM	4
3	Critical Care	DM	2
<b>Total</b>			<b>9</b>

## Jubilee Mission Medical College & Research Institute: Administration

<b>BOARD OF TRUSTEES</b>		
1	Mar ANDREWS THAZATH	PATRON AND CHAIRMAN
2	Mar TONY NEELANKAVIL	MEMBER
3	Msgr. JOSE KONIKKARA	MEMBER
4	Fr. DOMINIC THALAKKODEN	MEMBER
5	Fr. FRANCIS PALLIKUNNATH	MEMBER
6	Fr. RENNY MUNDENKURIAN	SECRETARY

<b>MANAGEMENT TEAM</b>		
1	Fr. RENNY MUNDENKURIAN	Director
2	Dr. BENNY JOSEPH NEELANKAVIL	CEO
3	Fr. PAUL PERAMANGALATH	Associate Director
4	Fr. THOMAS POOPADI	Assistant Director
5	Fr. TERIN MULLAKKARA	Assistant Director
6	Dr. Fr. DEMIN THARAYIL	Assistant Director
7	Fr. SINTO DAVIS KAREPARAMBAN	Assistant Director
8	Fr. JOYSON CHERUVATHOOR	Assistant Director
9	Fr. JUSTIN POOZHICKUNNEL	Assistant Director
10	Fr. RINTO KIZHAKKEKANNANCHIRA	Assistant Director

## Jubilee Mission Medical College & Research Institute Thrissur

ACADEMIC HEADS	
Director	Fr. Renny Mundenkurian
CEO	Dr. Benny Joseph
Assistant director	Fr. Terin Mullakkara
Principal	Dr. M.A Andrews
Vice Principal	Dr. Padmakumar K
Vice Principal	Dr. Cherish Paul
Medical Superintendent	Dr. Shibu C Kallivalappil
Director Research	Dr. D.M. Vasudevan
Deputy Medical Superintendent	Dr. Harris Paul C
Deputy Medical Superintendent	Dr. Rose Xavier
Deputy Medical Superintendent	Dr. Aswath Kumar R
Deputy Medical Superintendent	Dr. S Ramesh
HOD of Anatomy	Dr. Lekha K.S
HOD of Biochemistry	Dr. Preethi M Shenoy
HOD of Physiology	Dr. Biju Bahuleyan
HOD of Pathology	Dr. Deepthy Vijaya Raghavan
HOD of Pharmacology	Dr. Maria Jose
HOD of Microbiology	Dr. Chithra Valsan
HOD of Forensic Medicine	Dr. Padmakumar K
HOD of Community Medicine	Dr. Joe Thomas
HOD of Otorhinolaryngology	Dr. M.V. George
HOD of Ophthalmology	Dr. P.Sedhu
HOD of General Medicine	Dr. Saju Francis
HOD of General Surgery	Dr. Ashok Ninan Oommen
HOD of OB & Gynaecology	Dr. Bindu Menon

HOD of Paediatrics	Dr. Sanjeev Kumar T M
HOD of Orthopaedics	Dr. Ramesh M
HOD of Anaesthesiology	Dr. Mariam Koshi Thomas
HOD of Dermatology	Dr. Mercy Paul
HOD of Dentistry	Dr. Philip Mathew
HOD of Psychiatry	Dr. Neethi Valsan
HOD of Respiratory Medicine	Dr. Supriya Adiyodi
HOD of Radio diagnosis	Dr. Binoj Varghese
HOD of Transfusion Medicine	Dr. Ramesh Bhaskaran
HOD of Emergency Medicine	Dr. Babu Urumese Palatty
HOD of Cardiology	Dr. Prasanna Kumar
HOD of Neurology	Dr. Fiju Chacko
HOD of Critical Care Medicine	Dr. Cherish Paul
HOD of Physical Medicine & Rehabilitation	Dr. Babu Varghese
HOD of Nephrology	Dr. John A G
HOD of Plastic Surgery	Dr. K M Pradeoth
HOD of Urology	Dr. Srinivas Shenoy
HOD of Cardio Vascular Thoracic Surgery	Dr. Austin Raj
HOD of Medical Oncology	Dr. Midhun Chacko
HOD of Neuro Surgery	Dr. N I Kurian
HOD of Paediatrics Surgery	Dr. Narayanankutty P K
HOD of Surgical Oncology	Dr. Sreekumar Pillai
HOD of Cleft Lip Palate	Dr. P.V.Narayanan
HOD of Gastroenterology	Dr. Joseph T K
HOD of Psychology	Dr. Monsy Edward
Warden, Men's Hostel	Dr. Ranjith S
Assistant Warden, Lady's Hostel	Sr. Lucy Emmanuel

# **Jubilee Mission Medical College & Research Institute Thrissur**

## **General Rules and Student's discipline:**

The general control of students is vested with the Principal.

1. Students must behave in a dignified and courteous manner within the premises of the institution with due respect to teachers, seniors and fellow colleagues. They should speak politely with empathy and respect to patients and their attendants.
2. Students must wear their Identity cards issued by the institute and aprons at all times within the college and hospital premises.
3. Only Institution prescribed uniform should be worn on all days during academic activities. Dress should be neat and clean.
4. Students should attend the lectures punctually. Students are expected to assemble in the classroom five minutes before the appointed hour. Entering or leaving the class during the lecture is not allowed. Students should demonstrate respect to the teachers inside and outside the lecture hall. Students are not permitted to remain in the lecture hall except during the hours of instruction.
5. All properties belonging to the institute should be used with care and students should refrain from damaging the properties.
6. Leave:
  - a. No student shall be absent from class without leave unless such absence is satisfactorily explained.
  - b. If for unavoidable circumstances leave cannot be obtained in advance, the reason should be explained at the earliest opportunity available.

- c. leave application should state clearly the ground to the application, the number of days and the dates for which leave is required.
  - d. Leave for a period of three days and less will be granted by the heads of the departments. Application for leave for more than days shall be submitted to the Principal.
  - e. In case of absence on account of illness, medical leave will be granted on production of medical certificate. Leave application in this regard should be submitted to the principal. Medical leave will not be considered equivalent to attendance. Application for medical leave must be submitted within three days of availing such leave.
  - f. Duty leave: A student may be permitted to participate in sports activities on behalf of the college, university or state and in other competitive, cultural and research activities recognized by authorities. For this, they will be considered to be on duty and attendance will be awarded for such days of absence. Request for duty leave must be submitted to the Principal much in advance after getting recommended by the staff advisor to the students union. Application submitted late after the programme will not be considered.
7. Students are encouraged to convey their grievances/ suggestions to grievance committee constituted for that purpose.
  8. Students should not undertake any independent educational/ recreational tours without permission and approval of Principal.
  9. Possession/ consumption of narcotics, tobacco, drugs/ substance of abuse and alcohol within the institutional premises is strictly prohibited.

10. Wandering in the college campus & unnecessary groupings in academic blocks, hospital and within the campus is not permitted.
11. Coming to college in own vehicles is discouraged. Using two wheelers/ four wheeler
12. Political activities are prohibited in the college campus. Grouping under the banner of religious or political outfits is not permitted.
13. Usage of mobile phones and other electronic gadgets in class rooms, seminar halls, and library is strictly prohibited. If found, the mobile/gadgets will be confiscated and will not be returned.
14. Ragging is strictly prohibited by law. Students shall not indulge in any such activities.

A Student committing any breach of discipline will render himself / herself liable for disciplinary action decided by the Principal. To handle misconduct or discipline against students, a disciplinary committee if required will be constituted by the Principal. The Committee is empowered to consider all disciplinary charges and to recommend penalties. Principal shall finally decide the disciplinary action.

## **Jubilee Mission Medical College & Research Institute library**

The JMMC & RI has an excellent library facility. The whole area is over 1700sq.mt, with reading room facilities for students and faculty. In fact, the spacious reading halls can accommodate over 225 students. The library has more than 11,324 books and various periodicals and journals. It subscribes to most of the National and International Journals required for the undergraduate and post-graduate students and faculty.

1. Library will remain open from 9am to 9 pm on all working days.
2. Identity card is compulsory for all members.
3. Members entering the library shall write their name, status, department and time in & out in the register.
4. Bags & other personal belonging as well as personal books, printed papers, files, note books, overcoats, camera & cellular phone are not allowed inside the library.
5. Silence shall be strictly maintained inside the library & library area.
6. Smoking, drinking, eating etc are strictly prohibited inside the library & outside the reading room.
7. Journals, Project & Thesis are only for reference & will not be issued.
8. Personal CD's are not allowed to use in the library.
9. Library CD's are not allowed to copy or write.
10. Discussions & talking is not allowed in the library.

11. Members are not supposed to replace the books in shelves & keep it in the nearest table.
12. Members have a privilege of open access to stack room & reading room.
13. Members who are using internet facility will have to hand over their ID cards to the library staff & sign in the register.
14. Internet is used only for study purposes (Chatting, Mailing & using pen drive are not allowed).
15. Students are instructed to utilize to the maximum, the reading room facilities provided. The second floor reading room will be open from 9am to 8pm. The ground floor reading room will be open from 7.30am till 11pm.
16. Personal copies of textbooks and notebooks are allowed into the reading rooms, but not into the central library. However, students can take one notebook into the central library for taking down notes.
17. Students may keep their bag or books in the reading room, but the library staff will not be responsible for loss of any personal articles or books.
18. The Second floor reading room is meant only for Individual study purpose. Discussions or combined studies are not allowed there. Strict silence is to be maintained.
19. Group study and individual study are allowed in the ground floor reading room, provided the students make sure that it is not a disturbance for those around them. Do not leave room for complaints.

20. The undergraduate students must refrain from using the Postgraduate and Staff reading rooms. Tress passing way warrant disciplinary action.
21. Use of mobile phones are strictly prohibited in the reading rooms and premises of Library, the mobiles should be switched off.
22. Use of headsets are strictly prohibited within the central library and in the second floor reading room.
23. Do not bring Coffee/ Tea/ Snacks or any food items into the reading rooms and Library.
24. Ensure that your reading space is well lit to avoid eye strain. If there are any lights or fans not working, please bring it to the notice of the library staff, so that it can be rectified as early as possible. Kindly switch off the fans and lights when not in use.

**List of holidays:**

All Sundays Second Saturdays and holidays declared by the state government for professional colleges from time to time.

# **Jubilee Mission Medical College & Research Institute Thrissur**

## **Hostel Rules & Regulations**

1. Principal of Jubilee Mission Medical College & Research Institute, will be the Chief Warden of the Hostels. All Hostels will be under the control of the Chief Warden. The Chief Warden's decision shall be final in the interpretation of rules and all matters connected with the hostel.
2. Hostel will have the following committees to assist the Chief Warden to perform his/her duties as prescribed by Kerala University of Health Sciences.
  - a. Hostel Management Committee.
  - b. Mess committee
3. To look after the welfare of the student inmates and to assist the Chief Warden in performing his/her duties, a warden (who is a faculty) will be appointed for Boys hostel and ladies separately. To assist the warden in his/her routine duties Assistant wardens may be appointed and care takers for each hostel blocks.
4. In case of any emergency, authorities will have the right to enter the rooms at any time.
5. Once in every year re- allotment /Shuffling/ re-admission of room will be done through the office of Chief Warden.
6. Students, who are living in the hostel and wish to reside with their relatives, must produce a letter from their parents or guardian, authorizing them to do so, before leaving the hostel and Students must vacate the hostel room. Application for this purpose must reach the office of chief warden atleast 15 days prior and in case of readmission no claims for same rooms / roommate will be entertained.

7. The Chief Warden will have the right to refuse admission or to expel any applicant for gross violation of rules or misconduct by the student.
8. It is mandatory for all the inmates to join the mess facility.
9. Timing of mess.

Breakfast: 6.30 am - 8.30 am	Lunch: 12.00 - 2.00 pm
Evening Tea / coffee 4 pm - 5pm	Dinner: 7.00 pm - 8.45 pm

10. Hostel inmates falling sick should inform to the hostel warden/Assistant warden/care taker for further management/ shifting to hospital. Name of such student shall also be recorded in the register maintained for that purpose. Special diet will be provided for members who are ill, at the advice of Asst. director (MES) or Warden or Asst. Warden. Meals should not be taken or sent to the room of the students except for those who are in the sick room.
11. No Student is allowed to have any additional electrical appliances such as induction cooker/ immersion heaters, electric stove/heaters/ coolers without the written permission of the warden.
12. When students go out of their room they should switch off all their electrical appliances and should keep the room locked.
13. All visitors to the Hostel including the parent/ guardian shall make necessary entries in the visitor's Register available at the hostel entrance with the security staff. Inmates are permitted to go out along with parents or persons authorized by them within the hours of permission. Visitors are not permitted to go to the rooms of the students. Visiting time shall be as follows.
  - a. 04.00 pm – 06.00 pm on working days.
  - b. 09.00 am – 06.00 pm on Sundays and holidays

14. Students are expected to behave courteously and fairly with everyone both inside and outside the campus. Strict silence shall be observed after 11.00pm and celebration of any kind should not be conducted after this time. The inmates in the hostel are expected to maintain discipline and decorum. Shouting, loud talking/reading or any other notice making activities which make disturbance to other inmates during hours of study should be avoided.

#### 15. Study Time

- a. 05.00 AM to 06.30 AM in the morning.
  - b. 08.30 PM to 11.00 PM in the evening, except on Sundays and holidays
  - c. All the lights in the rooms shall be switched off by 11.00 PM
  - d. Students shall study in their respective rooms. If any student has to read or write after 11 PM, they can utilize the facility arranged in the common reading room of the Hostel.
16. Students are forbidden from making any personal dealings with the cleaners/part time sweepers /security personnel or other hostel employees. This is applicable to visitors also.
17. The rooms, common areas and surroundings should be kept clean and hygienic. Discarded materials and papers should not be thrown about in rooms, terrace and premises. The rooms, doors etc. should not be disfigured by writing, sticking posters etc. Students should follow green protocol.
18. All members are expected to be in the hostel **before 9.00 PM**, unless they have obtained a late permission from the Asst. director (MES) / Warden / Asst. warden on justifiable grounds. They should sleep in their own rooms.
19. Students are not allowed to remove any articles or furniture, fittings, light etc. belonging to the hostel. Any damage to the hostel property coming to notice shall be immediately reported to the caretaker. The cost of damage will be

recovered from the responsible individual. If the person could not be identified, the members of the room/wing /floor concerned will be held responsible.

20. Unauthorised Meeting / procession in the hostel are prohibited. Students shall not participate in any anti national, anti-social or undesirable activity inside or outside the hostel campus.
21. No Student shall absent herself / himself at any night from the hostel without previous permission of the Asst. director (MES) / Warden/Asst. warden. Everyone should be physically present for night roll call. Students who need to go home on working days have to get permission from the Chief Warden, for which leave letter as email send by parents to the Chief Warden is required. Students are permitted to go home during second Saturday (once a month) and during holidays with the permission of Warden / Asst. warden. Students are requested to report the hostel before 10 PM.
22. Maintain cleanliness in bathrooms and toilets and dispose waste properly.
23. Ragging in the hostel is banned. Any violation of this by students will be dealt very severely. As per legal perspective, ragging is a CRIMINAL AND NON BAILABLE OFFENCE. Display of noisy, disorderly conduct, doing any act which causes or is likely to cause physical or psychological harm or raise apprehension or fear, shame or embarrassment to a student including teasing, abusing, of playing practical jocks on or causing hurt to such student or asking the students to do any act or perform something which such student will not in ordinary course be willing to do will be treated as ragging.
24. Smoking and consumption of alcoholic drinks and/or narcotic drugs in the hostel premises is strictly prohibited.
25. The residents of the hostel are responsible for the safe keeping of their personal belongings. Any case of theft should be reported promptly to the Warden.

26. Vehicle parking in the campus by inmates are not permitted.
27. If any of the above clause is in conflict with regulations of National Medical Commission or Kerala University of Health Sciences, the latter will prevail.
28. Misconduct or violation of any of these rules will render the offenders liable to fine, suspension or dismissal.

### **Grievance Redressal Committee for Students:**

The Grievance Redressal Committee (GRCS) for students of Jubilee Mission Medical College & Research Institute Thrissur aims to resolve the grievance of the students with highest standards of integrity, fairness and confidentiality with following objectives.

#### ***Objectives of GRCS are:***

1. To provide an opportunity for the students to freely express their grievance, with utmost anonymity.
2. To set up a mechanism for speedy and expeditious resolution of the grievance.
3. To provide an appropriate counselling to the students in the process of resolving the grievance.
4. To promote cordial relationship amongst the students.

#### ***Mode of submitting the grievance***

- a. By e-mail (grcs.jmmc@gmail.com)
- b. By surface mail (Secretary, Grievance Redressal Committee for students, Jubilee Mission Medical College & Research Institute, East Fort P.O, Thrissur-680005)
- c. By dropping the compliant at the grievance box. These boxes will be opened by the Secretary of GRCS once a month on first Monday in the presence of at least two members of the SGRC of whom one will be a student representative. If Monday is a holiday, boxes will be opened on next working day.

# CURRICULUM

## Batchelor of Medicine & Batchelor of Surgery (MBBS)

### Competency Based Medical Education (CBME)

#### Curriculum 2024: (For 2024 Admission onwards)

- I. Training period and time distribution: Universities shall organize admission timing and admission process in such a way that teaching in the phase I commences with induction through the Foundation Course at the beginning of academic year. There shall be no admission of students in respect of any academic session beyond dates specified for each academic year. The Universities/ Institutions/colleges shall not register any student (in MBBS course) admitted beyond the said date. Any student identified as having obtained admission after the last date for closure of admission shall be discharged from the course of study, or any medical qualification granted to such a student shall not be a recognized qualification by National Medical Commission. The institution which grants admission to any student after the last date specified from the same shall also be liable to face such action as may be prescribed by National Medical Commission.
- II. Every learner shall undergo a period of certified study extending over 4 ½ academic years, divided into four professional years from the date of commencement of course to the date of completion of examination which shall be followed by one year of compulsory rotating medical internship. Each academic year will have at least 39 teaching weeks with a minimum of 39 hours a week. Large group teaching shall not exceed one third of the total allotted hours for a subject. Two third of the total allotted hours shall include small group teaching, interactive sessions, practicals, clinical, small group teaching, self-directed learning and tutorials etc. The learning process shall include clinical experiences, problem- oriented approach, case studies and community health care activities.

- III. Learner centered teaching learning methods shall include early clinical exposure, problem/case-based learning, case studies, community-oriented learning, self-directed, integrated learning, experiential learning & electives. Teaching and learning shall be aligned and integrated across specialties both vertically and horizontally for better learner comprehension.
- IV. At the end of each professional year university examination will be conducted. If any student fails to clear the regular university examination, student will appear in supplementary examination.

**Supplementary examinations** and declaration of results shall be processed by universities within 6-8 weeks from the date of declaration of the results of the main examination for every professional year, so that the candidates, who pass, can join the main batch for progression.

If the student fails in the supplementary examination in phase 1 of MBBS, the student goes to the junior batch for teaching learning as well as for university examinations. There shall be no supplementary batches. If a candidate has not appeared for university examination (both theory and practical) for a subject then it shall not be counted as an attempt for that subject. Partial attendance in examination (only theory or only practical) in any subject shall be counted as an attempt. No more than four attempts shall be allowed for a candidate to pass the Phase 1 examination. The total period for successful completion of phase I course shall not exceed four (4) years. A learner shall not be entitled to graduate later than ten (10) years of her/his joining the first MBBS course (including continuous rotatory medical internship)

**Phase wise details are:**

- A candidate, who fails in the Phase-I examination, shall not be allowed to join the Phase-II until the candidate passes all subjects of Phase-I examination.

- A candidate who fails in the Phase-II regular/ supplementary university examination, shall be allowed to join the Phase-III Part I training, however he shall not be allowed appear for the university examination.
- A candidate who fails in the Phase III, Part-I regular/ supplementary university examination, shall be allowed to join the Phase-III Part II training, however he shall not be allowed appear for the university examination.

## **II. The period of 4½ years is divided as follows:**

- i) Phase-I of 12 months including Foundation Course of two weeks and university exams. It shall consist of - Anatomy, Physiology, Biochemistry, Introduction to Community Medicine, Humanities, Attitude, Ethics & Communication (AETCOM) module, family adoption programme through village outreach where-in each student shall adopt minimum of three (03) families and preferably at least five (05) families, simulation-based learning, early clinical exposure, alignment & integration and pandemic module integrated.
- ii) Phase-II of 12 months including university exams. It will consist of Pathology, Pharmacology, Microbiology, family visit under Community Medicine, General Surgery, General Medicine, Obstetrics & Gynecology, AETCOM module, Forensic Medicine & Toxicology, alignment & integration and introduction to clinical subjects. Family Adoption Programme through village outreach where-in each student shall continue to follow up and provide necessary services under the supervision. Pandemic module integration & simulation-based learning to be continued with increasing complexity.

The clinical exposure to learners will be in the form of learner-doctor method of clinical training in all phases. The emphasis will be on primary, preventive and comprehensive health care. A part of training during clinical postings shall

take place at the primary level of health care. It is desirable to provide learning experiences in secondary health care, wherever possible. This will involve: Experience in recognizing and managing common problems seen in outpatient, inpatient and emergency settings, • Involvement in patient care as a team member, • Involvement in patient management and performance of basic procedures.

iii) **Phase III - 30 months**

- a. Phase III Part I (12 months, including University exams) Forensic Medicine and Toxicology, Community Medicine, Medicine & allied subjects, Ophthalmology, Otorhinolaryngology (ENT), Surgery & allied subjects, Pediatrics, Obstetrics & Gynecology, Radiodiagnosis, Anesthesiology, AETCOM, Pandemic module integration, alignment & integration and Clinical postings. Family Adoption Programme through village outreach and simulation-based learning to be continued with increasing complexity.

Electives (1 month) shall be in 2 blocks of 15 days each in Phase III part II. First 15 days block starts after annual exam of Phase III MBBS part 1 and 2nd block after the end of 1st elective.

- b. Phase 3 Part II (18 months, including University exam)-

Subjects include: Medicine and allied specialties (General Medicine, Psychiatry, Dermatology, Venereology and Leprosy (DVL), Surgery and allied specialties (General Surgery, Orthopedics, Anesthesiology and Radiodiagnosis), Obstetrics and Gynecology (including Family Welfare), Pediatrics, AETCOM module, Pandemic module integration, alignment & integration and Clinical postings.

l. **Eligibility to appear for Professional examinations.**

The performance in essential components of training are to be assessed, based on following three components:

## **Attendance:**

- There shall be a minimum of 75% attendance in theory and 80% attendance in practical /clinical for eligibility to appear for the examinations in that subject. In subjects that are taught in more than one phase - the learner must have 75% attendance in theory and 80% attendance in practical in each phase of instruction in that subject. There shall be a minimum of 75% attendance in AETCOM and minimum of 80% attendance in family visits under Family adoption programme. Each student shall adopt minimum 3 families/ households and preferably five families. The details shall be as per Family Adoption Program guidelines.
- If an examination comprises more than one subject (for e.g., General Surgery and allied branches), the candidate must have a minimum of 75% attendance in each subject including its allied branches, and 80% attendance in each clinical posting.

Learners who do not have at least 75% attendance in the electives will not be eligible for the Third Professional - Part II examination/ NExT

## **Internal Assessment (IA):**

Internal assessment shall be based on day-to-day assessment. For subjects taught in more than one phase, there shall be IA in every phase in which the subject is taught.

It shall relate to different ways in which learners participate in the learning process including assignments, preparation for seminar, clinical case presentation, preparation of clinical case for discussion, clinical case study/ problem solving exercise, participation in project for health care in the community, Quiz, Certification of competencies, museum study, log books, SDL skills etc. Internal assessment should have both subjective and objective assessment. Internal assessment shall not be added to summative assessment. However, internal assessment marks in

absolute marks should be displayed under a separate column in a detailed marks card.

The internal assessment marks for each subject will be out of 100 for theory and out of 100 for practical/clinical (except in General Medicine, General Surgery and Obstetrics & Gynaecology, in which theory and practical assessment will be of 200 marks each).

For subjects that teach in more than one phase, cumulative IA to be used as eligibility criteria. The final cumulative marks are to be used for eligibility. The details are:

- I. General medicine: The IA of 200 marks in medicine shall be divided across phases as Phase II - 50 marks, Phase III part 1 - 50 marks.

Phase III part 2 - 100 marks. Phase III part 2 - 100 marks is divided as Medicine - 75 marks, Psychiatry - 13 marks, Dermatology- 12 marks.

- II. General surgery: The IA in surgery shall be divided across phases as:

Phase II - 25 marks

Phase III part 1 - 25 marks

Phase III part 2 - 150 marks

Phase III part 2 - 150 marks shall be divided as General surgery - 75 marks, Orthopedics -50 marks, Anesthesia -13 marks, Radiodiagnosis - 12 marks.

The final cumulative IA for surgery is out of 200 marks for theory and practical each. The final cumulative IA for Medicine is out of 200 marks for theory and practical each.

- III. IA of Forensic Medicine and Toxicology is divided as 25 marks in phase II and 75 marks in Phase III part 1.

The final cumulative IA is out of 100 for theory and practical each.

- IV. IA in Community Medicine is divided as 25 marks in phase I, 25 marks in phase II, and 50 marks in Phase III- part 1.

The final cumulative IA for Community Medicine is out of 100 marks for theory and practical each.

- V. IA in ophthalmology and ENT is divided as 25 marks in phase II and 75 marks in Phase III part 1.

The final cumulative IA is out of 100 for theory and practical each for each subject.

### **Remedial measures:**

A student whose has deficiency(s) in any of the 3 criteria that are required to be eligible to appear in university examination, should be put into remedial process as below:

1. During the course: If Internal assessment (IA) or attendance is less or/and certifiable competencies not achieved and marked in log book in quarterly/ six monthly monitoring, the students/parents must be intimated about the possibility of being detained much before the final university examination, so that there is sufficient time for remedial measures. These students should be provided remedial measures as and when needed to improve IA. Any certifiable competency/ IA marks deficiency should be attended with planned teaching/tests for them. Student should complete the remedial measures and it should be documented. **In spite of all above measures, if student is still not meeting the criteria to be eligible for regular exam he shall be offered remedial for the same batch supplementary exam. For attendance, he will be allowed remedial measures ONLY IF attendance is more than 60% for each component**

At the end of phase: If Internal assessment (IA) or attendance is less or/and certifiable competencies not achieved and marked in log book at the end of regular classes in a phase, the student is detained to appear in regular university examination of that batch.

2. Remedial classes can be planned for students missing regular classes on genuine grounds, thus ensuring that all certifiable competencies are achieved.
3. Students who have less than 75% attendance in theory and 80% attendance in practical cannot appear for University examination, however; they may appear for Supplementary examination provided they attend the remedial classes organised between University Sit and Supplementary exam. Students who have attendance 60% or above shall be eligible for such remedial classes.

### **University Examinations:**

Nature of questions in theory examinations shall include different types such as structured essays like Long-Answer Questions (LAQ), Short-Answer Questions (SAQ) and Multiple-Choice Questions (MCQ) shall be accorded minimum 20% weightage of the total marks of each theory paper, Scenario based MCQs shall be accorded more weightage in view of NEXT.

### **University Examinations shall be held as under:**

- a) Phase-I** shall be held at the end of Phase I training (in the 12th month of that training), in the subjects of Anatomy, Physiology and Biochemistry.
- b) Phase-II** examination shall be held at the end of Phase II training (12th month of that training), in the subjects of Pathology, Microbiology, and Pharmacology
- c) Phase III Part 1** examination shall be held at the end of Phase III part 1 of training (12th month of that training) in the subjects of Community Medicine, Forensic Medicine & Toxicology, Ophthalmology and Otorhinolaryngology.
- d) Phase III Part 2 / National Exit Test (NEXT)** as per NEXT regulations- (Final Professional) examination shall be at the end of 17th / 18th month of that training, in the subjects of General Medicine, General Surgery, Obstetrics & Gynecology, Pediatrics, and allied subjects as per NEXT Regulations.

**Criteria for passing in a subject:** A candidate shall obtain a cumulative 50% marks in University conducted examination including theory and practical and not less than 40% separately in Theory and in Practical in order to be declared as passed in that subject. In subjects that have two papers, the learner must secure a minimum 40% marks in aggregate (both theory papers together).

### **COMPETENCY BASED MEDICAL EDUCATION (CBME) CURRICULUM 2023**

1. Every student shall undergo a period of certified study extending over 4 ½ academic years, divided into four professional years from the date of commencement of course to the date of completion of examination which shall be followed by one year of compulsory rotating internship.
2. Each academic year will have at least 39 teaching weeks with a minimum of eight hours of working on each day including one hour as lunch break.
3. At the end of each professional year university examination will be conducted. If any Student fails to clear university examination, he / she will appear in supplementary examination.
4. Supplementary examinations and declaration of results shall be processed within 3-6 weeks from the date of declaration of the results of the main examination for every professional year, so that the candidates, who pass, can join the main batch for progression. If the candidate fails in the supplementary examination of first MBBS, he shall join the batch of next academic /subsequent year.

There shall be no supplementary batches. Partial attendance of examination in any subject shall be counted as an attempt.

5. (a) A candidate, who fails in the First Professional examination, shall not be allowed to join the Second Professional.

(b) A candidate, who fails in the second Professional examination, shall be allowed to join the third Professional Part I training, however he shall not be allowed to appear for the examination unless he has passed second professional examination.

(c) A candidate who fails in the third Professional (Part I) examination shall be allowed to join third Professional part II training, however he shall not be allowed to appear for the examination unless he has passed second professional examination.

6. The period of 4 ½ years is divided as follows:

**1. Phase I — Total 12 months**

**First Professional phase of 12 months including Foundation Course of one week and university exams.**

It shall consist of — Anatomy, Physiology, Biochemistry, Introduction to Community Medicine, Humanities, Professional development including Attitude, Ethics & Communication (AETCOM) module, family adoption programme through village outreach where-in each student shall adopt minimum of three (03) families and preferably at least five (05) families, Pandemic module and early clinical exposure, ensuring alignment & all types of integration and simulation- based learning.

**Phase II- Second Professional (12 months) including**

**university exams.** It will consist of Pathology, Pharmacology, Microbiology, family visit under Community Medicine, General Surgery, General Medicine & Obstetrics & Gynecology Professional development including AETCOM module, simulation-based learning and introduction to clinical subjects ensuring both alignment & all types of integration.

The clinical exposure to learners will be in the form of learner-doctor method of clinical training in all phases. The

emphasis will be on primary, preventive and comprehensive health care. A part of training during clinical postings should take place at the primary level of health care. It is desirable to provide learning experiences in secondary health care, wherever possible. This will involve:

- (a) Experience in recognizing and managing common problems seen in outpatient, inpatient and emergency settings
- (b) Involvement in patient care as a team member
- (c) Involvement in patient management and performance of basic procedures.

### **iii. Phase III (30 months)**

#### **a. Third Professional Part I (12 months, including University exams)**

Forensic Medicine and Toxicology, Community Medicine, Medicine & allied, Surgery & allied, Paediatrics and Obstetrics & Gynaecology including AETCOM, Pandemic module, Clinical teaching in General Medicine, General Surgery, Obstetrics & Gynaecology, Paediatrics, Orthopaedics, Dermatology, Community Medicine, Psychiatry, Respiratory Medicine, Radio-diagnosis (& Radiotherapy) and Anaesthesiology & Professional development.

- b. **Electives** (1 month) shall be included here. These will be in 2 blocks of 15days each in Final first; 1<sup>st</sup> block after annual exam of III MBBS part 1 and 2<sup>nd</sup> block after the end of 1<sup>st</sup> elective.

#### **c. Third Professional Part II (18 months, including University exam)**

- Medicine and allied specialties (General Medicine, Psychiatry, Dermatology,
- Venereology and Leprosy (DVL), Respiratory Medicine including Tuberculosis)

- Surgery and allied specialties (General Surgery, Otorhinolaryngology,
- Ophthalmology, Orthopedics, Dentistry, Physical Medicine and rehabilitation, Anesthesiology and Radiodiagnosis)
- Obstetrics and Gynecology (including Family Welfare)
- Pediatrics
- AETCOM module

### **Duration permitted for completion of the course**

- a. The maximum total duration of MBBS course permitted to complete the MBBS course (of 4½ years), is nine (9) years.
- b. No student shall be allowed more than four (04) attempts for First Professional MBBS within a period of four consecutive academic years. In these four years, the maximum number of attempts permitted shall be four (04) which shall include supplementary examination also. Partial attendance of examination in any subject shall be counted as an attempt.
- c. The Internship shall be completed within two years of passing the final MBBS or NExT Step-1 examination, whichever in force, or as per regulations stipulated by National Medical Commission, from time to time.

### **Eligibility to appear for Professional examinations:**

1. The performance in essential components of training are to be assessed, based on:

#### **(a) Attendance**

There shall be a minimum of 75% attendance in theory and 80% in practical /clinical for eligibility to appear for the examinations in that subject. In subjects that are taught in more than one phase — the learner must have 75% attendance in theory and 80% in practical in each phase of instruction in that subject. There shall be minimum of 80% attendance

in family visits under Family adoption programme. Each student shall adopt minimum 3 families and preferably five families. The details shall be as per Family Adoption Program guidelines.

Students shall have 75% attendance in the Foundation course to be eligible for the First Professional examination.

The student shall also have 75 % attendance in theory and 80% in practical / clinical of the non-examination going subjects in a phase, to be eligible to appear for the University examinations of that phase. e.g., Attendance for Gen. Medicine in Second Professional MBBS and Third Professional MBBS Part I.

If an examination comprises more than one subject (for e.g., General Surgery and allied branches), the candidate must have a minimum of 75% attendance in each subject including its allied branches, and 80% attendance in each clinical posting.

Learners who do not have at least 75% attendance in the electives will not be eligible for the Third Professional - Part II examination/NEXT.

**(b) Internal assessment:**

Internal assessment shall be based on day-to-day assessment. It shall relate to different ways in which learners participate in learning process including assignments, preparation for seminar, clinical case presentation, preparation of clinical case for discussion, clinical case study/ problem solving exercise, participation in project for health care in the community. Internal assessment shall not be added to summative assessment. However, internal assessment should be displayed under a separate column in detailed marks card

Learners must have completed the required certifiable competencies for that phase of training and completed the log book appropriate for that phase of training to be eligible for appearing at the final university examination of that subject.

Internal assessment shall be one of periodic assessment, and continuous evaluation of the student.

**i. Formative Assessment** shall consist of

- a) Part Completion Tests (PCT)
- b) Prelims

**ii. Continuous Internal Assessment**

Includes home assignments, Continuous Class Tests, Seminars, Museum Study, Library Assignments, Certifiable Skill Based Competencies, AETCOM Competencies, SVL Lab Activity, Journal (Record book / portfolio), Family Adoption Program Competencies, attendance for theory and practical, as applicable to different subjects.

**Continuous Internal Assessment marks** shall be calculated as follows

- a. For Home assignments / Continuous class tests / Seminars / Museum study / Library Assignments, the average of highest two marks obtained for activities of each component shall be taken for calculation. The marks shall be rounded off to 2 decimals.
- b. Logbook / Journal (Record book) / Certifiable skill based competencies / AETCOM Competencies / SVL Lab activity etc., shall be valued according to assessment of the individual competencies specified. The marks shall be rounded off to 2 decimals.
- iii. **The marks for the attendance (10%)** for theory and practical components shall be awarded as follows.

Attendance%	Marks eligible	
	Theory	Practical
100	10	10
95 to 99	9	8
91 to 94	6	5
85 to 90	4	3
81 to 84	2	1
More than 75 & Less than 80	1	-

- c. Internal assessment (IA) marks will not be added to University examination marks. It shall be displayed under a separate head in the mark lists of University Examinations.
- d. There shall be no less than two PCT in a Phase for a subject having University Examination in that Phase. In subjects spread over more than one phase, there shall be minimum one PCT in each phase.
- e. In clinical subjects, the end of posting clinical examination conducted for each clinical posting in each professional year and shall be considered as PCT (Practical).
- f. A Prelim Examination each in Theory and Practical shall be conducted preceding the University Examinations of each subject and shall follow the University Examination pattern
  - Day to day records and log book (including required skill certifications) should be given importance in internal assessment. Internal assessment should be based on competencies and skills.
  - The final internal assessment in a broad clinical specialty (e.g., Surgery and allied specialties etc.) shall comprise of marks from all the constituent specialties. The proportion of the marks for each constituent specialty shall be determined by the time of instruction allotted to each.
  - Learners must secure at least 50% marks of the total marks (combined in theory and practical/ clinical; not less than

40% marks in theory and practical separately) for internal assessment in a particular subject in order to be eligible for appearing at the final University examination of that subject. Internal assessment marks will reflect as separate head of passing at the summative examination.

## **University Examinations**

University examinations are to be designed with a view to ascertain whether the candidate has acquired the necessary knowledge, minimal level of skills, ethical and professional values with clear concepts of the fundamentals which are necessary for him/her to function effectively and appropriately as a physician of first contact. Assessment shall be carried out on an objective basis to the extent possible.

- Nature of questions will include different types such as structured assays (Long-Answer Questions -LAQ), Short-Answer Questions (SAQ) and objective type questions (e.g. Multiple Choice Questions - MCQ). Marks for each part shall be indicated separately. MCQs shall be accorded a weightage of not more than 20% of the total theory marks. Practical/clinical examinations shall be conducted in the laboratories and /or hospital wards. The objective will be to assess proficiency and skills to conduct experiments, interpret data and form logical conclusion. Clinical cases kept in the examination must be common conditions that the learner may encounter as a physician of first contact in the community. Selection of rare syndromes and disorders as examination cases is to be discouraged. Emphasis should be on candidate's capability to elicit history, demonstrate physical signs, write a case record, analyze the case and develop a management plan.
- Viva/oral examination will assess approach to patient management, emergencies, and attitudinal, ethical and professional values. Candidate's skill in interpretation of common investigative data, X-rays, identification of specimens, ECG, etc. is to be also assessed.

## **University examinations will be held as under:**

### **(a) First Professional**

The first Professional examination will be held at the end of first Professional training (in the 12<sup>th</sup> month of that training), in the subjects of Anatomy, Physiology and Biochemistry.

### **(b) Second Professional**

The second Professional examination will be held at the end of second professional training (the 12<sup>th</sup> month of that training), in the subjects of Pathology, Microbiology, and Pharmacology.

### **(c) Third Professional**

- i. Third Professional Part I will be held at end of third Professional part 1 of training (12<sup>th</sup> month of that training) in the subjects of Community Medicine and Forensic Medicine including Toxicology
- ii. Third Professional Part II /National Exit Test (NEXT) as per NEXT regulations- (Final Professional) examination will be at the end of 17<sup>th</sup>/18<sup>th</sup> month of that training, in the subjects of General Medicine, General Surgery, Ophthalmology, Otorhinolaryngology, Obstetrics & Gynaecology and Paediatrics and allied subjects as per NEXT Regulations.

Note:

- At least one question in each paper of each PHASE will test the knowledge and competencies acquired during the professional development programme (AETCOM module).
- Skills competencies acquired during the Professional Development Programme (AETCOM module) will be tested during clinical, practical and viva.

**In subjects that have two papers, the learner must secure minimum 40% of marks in aggregate (both papers together) to pass in the said subject.**

**Criteria for passing in a subject:** A candidate shall obtain 50% marks in aggregate and 60:40 (minimum) or 40:60 (minimum) in uUniversity conducted examination separately in Theory and in Practical (practical includes: practical/ clinical and viva voce) in order to be declared as passed in that subject.

**Pass criteria:**

- The aggregate or sum-total of theory and practical for a given subject shall be at least 50% to declare a student as having successfully cleared a subject, i.e. passed in a subject. However, the minimum score in Theory/ Practical examination shall be 40% of the maximum marks for Theory or Practical for that subject.
- In subjects that have two Theory papers, there is no separate minimum for individual Papers of the subjects but the learner must secure minimum 40% of marks in aggregate (both papers together) for that subject as given in (a)
- A candidate failing in one or more subject(s) shall appear for the subject(s) as a whole in the subsequent appearance (i.e., theory, practical and viva-voce together).

**Time Distribution of MBBS Programme and Examination Schedule( As per NMC)**

Proposed Academic Calendar for CBME 2023-24 Batch : 2023

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC
2023									1	2	3	4
2024	5	6	7	8	9	10	11	12-1st Prof exam, result	13- 2 <sup>nd</sup> MBBS	14	15	16
2025	17	18	19	20	21	22	23	24- 2 <sup>nd</sup> Prof exam, result	25- Final 1st	26	27	28
2026	29	30	31	32	33	34	35	36- Final 1 <sup>st</sup> exam, result	37- Final 2 <sup>nd</sup>	38	39	40
2027	41	42	43	44	45	46	47	48	49	50	51	52
2028	53	54 NEXT-1	1-CRIM	2	3	4	5- 2 <sup>nd</sup> proposed NEXT	6	7	8	9	10
2029	11	12-NEXT-Step 2										

**Legends:**

**AETCOM:** Attitude, Ethics and Communication skills

**FAP:** Family Adoption Programme (village outreach)

**SDL:** Self Directed Learning

**SGL:** Small Group Learning (tutorials/ Seminars/ Integrated Learning)

**PCT (mentioned in Assessments):** Part Completion Test

## Distribution of Subjects In Each Professional Phase

Phase & year of MBBS training	Subjects & Teaching Elements	Duration (months)	University Examination
First Professional MBBS	(i) Foundation course -1 week, remaining spread over 6 months at the discretion of college (ii) Anatomy, Physiology & Biochemistry, Introduction to Community Medicine, including Family adoption programme (FAP) through village outreach (iii) Early Clinical Exposure (iv) Attitude, Ethics, and communication Module (AETCOM) including Humanities	12 months	1 <sup>st</sup> professional
Second Professional MBBS	(i) Pathology, Microbiology, Pharmacology (ii) Introduction to clinical subjects (iii) Clinical postings, Family visits for FAP (iv) AETCOM	12 months	2 <sup>nd</sup> professional
Third Professional part 1, MBBS, including Electives 1 month	(i) Community Medicine, Forensic Medicine and Toxicology, Medicine & allied, Surgery & allied, Pediatrics, Obstetrics & Gynecology (ii) Family visits for FAP (iii) Clinical postings (iv) AETCOM (v) Electives- 1 month, 2 blocks, 15 days each	12 months	Final professional - Part I
Third Professional part 2, MBBS	(i) General Medicine, Dermatology, Psychiatry, Respiratory medicine, Pediatrics, General Surgery, Orthopedics, Oto-rhinolaryngology, Ophthalmology, Radiodiagnosis, Anesthesiology, Obstetrics & Gynecology (ii) Clinical postings (iii) AETCOM	18 months	Final Professional - Part II

## Mark Distribution for various subjects for University Annual Examinations

Phase of Course	Theory	Practicals	Passing criteria
<b>1<sup>st</sup> MBBS</b>			
Anatomy- 2 papers	Paper 1- 100	100	Mandatory to get 40% marks separately in theory and in practicals; and totally 50% for theory plus practicals.
	Paper 2 -100		
Physiology- 2 papers	Paper 1- 100	100	
	Paper 2 -100		
Biochemistry- 2 papers	Paper 1- 100	100	
	Paper 2- 100		
<b>2<sup>nd</sup> MBBS</b>			
Pathology - 2 papers	Paper 1- 100	100	
	Paper 2 -100		
Microbiology- 2 papers	Paper 1- 100	100	
	Paper 2- 100		
Pharmacology- 2 papers	Paper 1 -100	100	
	Paper 2- 100		
<b>Final MBBS part 1</b>			
Forensic Med. Tox.- 1 paper	Paper 1 - 100	50	
Community Med- 2 papers	Paper 1 -100	100	
	Paper 2- 100		

**For NEXT, as per NEXT regulations.**

**JANUARY 2026**

1	Thu		
2	Fr	Mannam Jayanthi	Holiday
3	Sa		
4	Su	Sunday	Holiday
5	Mo		
6	Tu		
7	Wed		
8	thu		
9	Fr		
10	Sat	Second Saturday	Holiday
11	Su	Sunday	Holiday
12	Mo		
13	Tu		
14	Wed		
15	Thu		
16	Fr		
17	Sat		
18	Su	Sunday	Holiday
19	Mo		
20	Tu		
21	Wed		
22	Thu		
23	Fr		
24	Sat		
25	Su	Sunday	Holiday
26	Mo	Republic Day	Holiday
27	Tu		
28	Wed		
29	Thu		
30	Fr		
31	Sat		

**FEBRUARY 2026**

1	Su	Sunday	Holiday
2	Mon		
3	Tu		
4	Wed		
5	Thu		
6	Fri		
7	Sat		
8	Su	Sunday	Holiday
9	Mon		
10	Tu		
11	Wed		
12	Thu		
13	Fri		
14	Sat	Second Saturday	Holiday
15	Su	Sunday	Holiday
16	Mo		
17	Tu		
18	Wed		
19	Thu		
20	Fri		
21	Sat		
22	Su	Sunday	Holiday
23	Mo		
24	Tu		
25	Wed		
26	Thu		
27	Fri		
28	Sat		

**MARCH 2026**

1	Su	Sunday	Holiday
2	Mo		
3	Tu		
4	Wed		
5	Thu		
6	Fri		
7	Sat		
8	Su	Sunday	Holiday
9	Mo		
10	Tu		
11	Wed		
12	Thu		
13	Fri		
14	Sat		
15	Sun	Sunday	Holiday
16	Mon		
17	Tu		
18	Wed		
19	Thu		
20	Fri	Id-ul-fithur	Holiday
21	Sat	Saturday	Holiday
22	Sun	Sunday	Holiday
23	Mo		
24	Tu		
25	Wed		
26	Thu		
27	Fri		
28	Sa		
29	Su	Sunday	Holiday
30	Mon		
31	Tu		

**APRIL 2026**

1	Wed		
2	Thu	Mondy Thursday	Holiday
3	Fri	Good Friday	Holiday
4	Sat		Holiday
5	Su	Sunday / Easter	Holiday
6	Mon	Monday	Holiday
7	Tue		
8	Wed		
9	Thu		
10	Fri		
11	Sat		
12	Su	Sunday	Holiday
13	Mon	Monday	Holiday
14	Tu	Ambedkar Jayanti	Holiday
15	Wed	Vishu	Holiday
16	Thu		
17	Fri		
18	Sat		
19	Sun	Sunday	Holiday
20	Mo		
21	Tu		
22	Wed		
23	Thu		
24	Fri		
25	Sat		
26	Sun	Sunday	Holiday
27	Mon		
28	Tue		
29	Wed		
30	Thu		

**MAY 2026**

1	Fri	May Day	Holiday
2	Sat		
3	Sun	Sunday	Holiday
4	Mon		
5	Tu		
6	Wed		
7	Thu		
8	Fri		
9	Sat		
10	Sun	Sunday	Holiday
11	Mon		
12	Tu		
13	Wed		
14	Thu		
15	Fri		
16	Sat		
17	Sun	Sunday	Holiday
18	Mon		
19	Tu		
20	Wed		
21	Thu		
22	Fri		
23	Sat		
24	Sun	Sunday	Holiday
25	Mon		
26	Tu		
27	Wed	Bakrid	Holiday
28	Thu		
29	Fri		
30	Sat		
31	Sun	Sunday	Holiday

**JUNE 2026**

1	Mon	3rd MBBS Part II KUHS Exam 2021 Admission	
2	Tu		
3	Wed		
4	Thu		
5	Fri		
6	Sat		
7	Su	Sunday	Holiday
8	Mon		
9	Tu		
10	Wed		
11	Thu		
12	Fri		
13	Sat	Second Saturday	Holiday
14	Su	Sunday	Holiday
15	Mon		
16	Tu		
17	Wed		
18	Thu		
19	Fri		
20	Sat		
21	Su	Sunday	Holiday
22	Mon		
23	Tu		
24	Wed		
25	Thu	Muharam	Holiday
26	Fri		
27	Sat		
28	Su	Sunday	Holiday
29	Mon		
30	Thu		

**JULY 2026**

1	Wed		
2	Thu		
3	Fri	St.Thomas Day	Holiday
4	Sat		
5	Su	Sunday	Holiday
6	Mo		
7	Tu		
8	Wed		
9	Thu		
10	Fri		
11	Sat		
12	Su	Sunday	Holiday
13	Mo		
14	Tu		
15	Wed		
16	Thu		
17	Fri	3rd MBBS Part II KUHS Exam 2021 Admission	
18	Sat		
19	Su	Sunday	Holiday
20	Mo		
21	Tu		
22	Wed		
23	Thu		
24	Fri		
25	Sat		
26	Su	Sunday	Holiday
27	Mo		
28	Tu		
29	Wed		
30	Thu		
31	Fri		

**AUGUST 2026**

1	Sa		
2	Su	Sunday	Holiday
3	Mo		
4	Tu		
5	Wed	1st MBBS KUHS Exam 2025 Admission	
6	Thu		
7	Fri		
8	Sa		
9	Su	Sunday	Holiday
10	Mo		
11	Tu		
12	Wed	Karkidakavavu	Holiday
13	Thu		
14	Fri		
15	Sat	Independence Day	Holiday
16	Su	Sunday	Holiday
17	Mo		
18	Tu		
19	Wed		
20	Thu		
21	Fri		
22	Sa		
23	Su	Onam/Sunday	Holiday
24	Mo	Onam	Holiday
25	Tu	First Onam	Holiday
26	Wed	Thiruvonam	Holiday
27	Thu	Third Onam	Holiday
28	Fri	Ayyankali Jayanthi	Holiday
29	Sa		Holiday
30	Su	Sunday	Holiday
31	Mo		

**SEPTEMBER 2026**

1	Tu		
2	We	2nd MBBS KUHS Exam 2024 Admission	
3	Th		
4	Fri	Sreekrishnajayanti	Holiday
5	Sa		
6	Su	Sunday	Holiday
7	Mo		
8	Tu		
9	We		
10	Th		
11	Fr		
12	Sa		
13	Su	Sunday	Holiday
14	Mo		
15	Tu		
16	We		
17	Th		
18	Fr		
19	Sa		
20	Su	Sunday	Holiday
21	Mo	Sree Narayana Guru Samadhi	Holiday
22	Tu		
23	We		
24	Th		
25	Fr		
26	Sa		
27	Su	Sunday	Holiday
28	Mo		
29	Tu		
30	We		

**OCOBER 2026**

1	Th		
2	Fr	Gandhijayanthi	Holiday
3	Sa		
4	Su	Sunday	Holiday
5	Mo		
6	Tu	3rd MBBS Part I KUHS Exam 2023 Admission	
7	We		
8	Th		
9	Fr		
10	Sa		
11	Su	Sunday	Holiday
12	Mo		
13	Tu		
14	We		
15	Th		
16	Fr		
17	Sa	Hospital Holiday	
18	Su	Sunday	Holiday
19	Mo		Holiday
20	Tu	Mahanavami	Holiday
21	We	Vijayadasami	Holiday
22	Th		
23	Fr		
24	Sa		
25	Su	Sunday	Holiday
26	Mo		
27	Tu		
28	We		
29	Th		
30	Fr		
31	Sa		

**NOVEMBER 2026**

1	Su	Sunday	Holiday
2	Mo	All Souls day	Holiday
3	Tu		
4	We		
5	Th		
6	Fr		
7	Sa		
8	Su	Deepavali / Sunday	Holiday
9	Mo		
10	Tu		
11	We		
12	Th		
13	Fr		
14	Sa		
15	Su	Sunday	Holiday
16	Mo		
17	Tu		
18	We		
19	Th		
20	Fr		
21	Sa		
22	Su	Sunday	Holiday
23	Mo		
24	Tu		
25	We		
26	Th		
27	Fr		
28	Sa		
29	Su	Sunday	Holiday
30	Mo		

**DECEMBER 2026**

1	Tu		
2	We		
3	Th		
4	Fr		
5	Sa		
6	Su	Sunday	Holiday
7	Mo		
8	Tu		
9	We		
10	Th		
11	Fr		
12	Sa		
13	Su	Sunday	Holiday
14	Mo		
15	Tu		
16	Ws		
17	Th		
18	Fr		
19	Sa		
20	Su	Sunday	Holiday
21	Mo		
22	Tu		
23	We		
24	Th		Holiday
25	Fr	Christmas	Holiday
26	Sa		Holiday
27	Su	Sunday	Holiday
28	Mo		Holiday
29	Tu		
30	We		
31	Th		









**Note**

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**Note**

**Note**

# JUBILEE MISSION MEDICAL COLLEGE



