

INDUCTION POLICY,
FOR FCPS-II TRAINING & 2ND FELLOWSHIP SESSION JULY 2022

- ‘Postgraduate’ study in medical sciences is not an inalienable right of any individual. It is, in fact, a privilege which must be availed after going through the due process of competition, in order to bring out the best of the best individuals for holding the highest qualifications in medical profession.
- The practice of inducting trainees in “General/ session-wise Inductions” for hospitals outside Khyber Pakhtunkhwa and Private Medical Institutions in Khyber Pakhtunkhwa shall cease to exist, except for the UNINHABITED disciplines; provided that training positions already available within Khyber Pakhtunkhwa shall NOT REMAIN VACANT.
- The Executive Council shall identify such uninhabited specialties from time to time which are markedly deficient/ showing downward induction trends and reserve training positions against each accordingly.
- In view of the above, the uninhabited specialties so identified shall be communicated to the Deans of all Public Sector Medical Colleges so that the final year students are counseled for better career options in view of the needs of the province/ job market.

1. UNINHABITED SPECIALTIES LIST

The following is the list of uninhabited specialties as revised and approved by the Executive Council for the Session July 2022.

No.	Uninhabited Specialties List for session July 2022
	1st Fellowship (4 years program)
1.	Emergency Medicine
2.	Radiotherapy
3.	Anesthesiology
4.	Psychiatry
5.	Ophthalmology
6.	ENT
7.	Microbiology
8.	Histopathology
9.	Periodontology
10.	Prosthodontics.
11.	Orthodontics.
12.	Operative Dentistry
13.	Oral Maxillofacial Surgery
14.	Paediatric Dentistry
15.	Nuclear Medicine.
	1st Fellowship Medical Specialty, (Post IMM 3 years)
16.	Nephrology
17.	Neurology
18.	Medical Oncology
19.	Pulmonology
	1st Fellowship Surgical Specialty, (Post IMM 3 years)
20.	Cardiac Surgery
21.	Thoracic Surgery
	2nd Fellowship
22.	ENT Sub-specialties
23.	Ophthalmology Sub-specialties
24.	Pediatrics sub-specialties
25.	Rheumatology

26.	Critical Care Medicine
27.	Vascular Surgery
28.	Infectious Diseases
29.	Surgical Oncology
30.	Orthopedics Sub-specialties
31.	Breast Surgery
32.	Clinical Hematology
33.	All those specialties which are not available in PGMI Affiliated Hospitals.

2. RESERVED SEATS FOR UNINHABITED SPECIALTIES:

Previously a specific number of seats were reserved for these specialties, now unlimited seats are allocated. NOCs based induction will be allowed in these specialties within and outside KP in a way that training slots available in PGMI affiliated hospitals shall not remain vacant. (This NOC based induction is only for KP domicile holders). However, arrangement of NOC will be the responsibility of Applicant.

3. ELIGIBILITY

- a. Only KP domicile holders are eligible for open merit seats including disabled persons and minorities quota and non KP domicile holders can apply only on seats reserved for armed forces spouse quota, civil servant spouse quota, and Gilgit Baltistan and Azad Jammu and Kashmir (Applicants from AJK and GB have to provide sponsorship letter from their relevant governments in advance)
- b. Those who have passed FCPS-I before 30.04.2022 & appear in PGMI entrance test conducted by ETEA for Session July 2022 to be held on 02.06.2022 will be eligible.
- c. Admission fee Rs. 4,000/= non refundable should be deposited online (Jazz cash) or in the MCB bank and original slip must be attached with the form (it is mandatory to upload MCB Bank Challan in the online application form).
- d. Foreign candidates shall apply through their Govt. to Higher Education Commission, Islamabad. If selected they will pay @ 2,000/- U.S. Dollars per annum. They are directed to apply in person after fulfilling all the necessary formalities.

4. DOMICILE POLICY

- a. Female candidates upon marriage shall assume domicile of her husband meaning that after marriage domicile of husband will be considered as domicile of the female candidate. (Post marriage, her own domicile will not be considered as valid).
- b. Permanent address on CNIC (of KPK domicile holder) must be that of Khyber Pakhtunkhwa.
- c. Married female candidates are required to prove their status with CNIC, i.e. husband name mentioned in CNIC, or computerized nikah nama.

5. RESERVED SEATS FOR DIFFERENT QUOTA:

a) KP DOMICILE HOLDERS:

- Disabled Person Quota:

For disable quota eligibility, applicant has to apply to PGMI with all relevant documents. PGMI medical board will declare his/her eligibility for the quota or otherwise. The decision of the PGMI medical board will be final.

Number of Seats Reserved 03 (2 for MBBS & 1 for BDS).

- Minorities Quota:

For minorities quota eligibility, applicant has to produce NADRA form B.

Number of Seats Reserved 03 (2 for MBBS & 1 for BDS)

Candidates applying for Disabled person quota & Minorities quota will be in open merit by default. Once the open merit seats are filled the quota seats will be offered to the quota seat applicants out of leftovers. They will be placed on the merit list as per their aggregate marks for the purpose of hospital/Visit/specialty allocation.

b) NON KP DOMICILE HOLDERS:

- Armed Forces Spouse Quota:

The spouse of armed forces personnel (non KP domiciled) who are posted in KP on state duty will be allowed to apply for induction. They have to provide posting order of the spouse by the competent authority & NADRA Nikah Nama for eligibility. Stipend will be paid by the Govt. of KP.

Number of Reserved Seats 08 (7 for MBBS & 1 for BDS)

- Civil Servant Spouse Quota:

The spouse of civil servant (non KP domiciled) who is posted in KP on official duty will be allowed to apply for induction. They have to provide posting order of the spouse by the competent authority & NADRA Nikah Nama for eligibility. Stipend will be paid by the Govt. of KP.

Number of Reserved Seats 03 (2 for MBBS & 1 for BDS)

- Gilgit Baltistan and Azad Jammu Kashmir:

Number of Reserved Supervisory Seats AJK 05 (4 for MBBS & 1 for BDS)

Number of Reserved Supervisory Seats Gilgit-Baltistan 05(4 for MBBS & 1 for BDS)

Stipend will be the responsibility of their respective governments. If sponsorship letter from their respective governments is not received at PGMI office before final merit list, their names will be excluded from the process.

The merit list of the above-mentioned quotas will be prepared separately and top position applicants as per number fixed for the quota will be selected and will be put in to the general merit list as per their aggregate percentage for the purpose of hospital/unit/specialty allocation.

6. CRITERIA FOR AWARD OF MERIT MARKS:

a) FOR FCPS-II INDUCTION (First Fellowship)

No	Academics/Experience	Weightage%
1	Experience of periphery health service hard area as per certificate by DGHS. Maximum 2.5 marks for one complete year as per notification No. 5327-32/DGHS dated: 14.06.2021, (available on PGMI website).	05

	Maximum marks 05.	
2	MBBS/BDS or equivalent professional examination Marks	20
3	PGMI entrance test (ETEA) marks	75
	Total marks	100

* The health department/DGHS will notify periphery health service/hard area for this purpose and issue the experience certificate. The certificate issued by other than health department/DGHS (e.g. MS/DMS/DHO etc) will not be accepted.

The candidates who secure equal marks and fall on same merit position, preference will be given to the candidate whose age is more than that of another candidate.

Professional Marks Calculation:

The academic marks shall be taken as an aggregate percentage of all professional examinations comprising the MBBS degree.

EXAMPLE:

Marks obtained /Total Marks x 100 for each prof.

Total aggregate =sum of percentages of all profs / 4 or 5 as the number of profs may be.

FORMAT OF PGMI ENTRANCE TEST FOR FCPS-II

PAPER DISTRIBUTION			
FCPS (MBBS) Medical specialties applicants. Anesthesia, Community Medicine, Medicine & Allied, Pathology, Psychiatry, Pharmacology, Biochemistry and Physiology, Family Medicine		FCPS (MBBS) Surgical specialties applicants. Anatomy, Diagnostic Radiology, ENT, Obst:& Gynae, Surgery & Allied, Ophthalmology	
Basic medical subjects: Applied Physiology, applied Pharmacology, applied Pathology and applied anatomy.	10%	Basic medical subjects: Applied Physiology, applied Pharmacology, applied Pathology and applied anatomy.	10%
General Principle of Medicine	50%	General Principle of Surgery	50%
English Language	20%	English Language	20%
Bioethics	10%	Bioethics	10%
Basic Biostatistics	05%	Basic Biostatistics	05%
Communication skills	05%	Communication skills	05%

FCPS (BDS)	
Basic medical subjects: Applied Physiology, applied Dental materials, applied Oral Biology, Community Dentistry, oral Pathology.	30%
Clinical subjects of final year BDS: Oral & Maxillofacial Surgery, Prosthodontics, Orthodontics Operative dentistry, Periodontology / oral medicine.	30%
English language	20%
Bioethics	10%
Basic bio-statistics	05%
Communication skills	05%

DIFFICULTY LEVEL:

75% questions **MEDIUM** difficulty level and 25% **HARD** difficulty level. It will cover all important parts of the course.

CATEGORY OF TEST:

There will be three categories of test: Medical Specialties, Surgical Specialties and Dentistry.

b) FOR 2ND FELLOWSHIP INDUCTION:

It will be based on MBBS marks, experience, publications and interview as per following weightage.

- MBBS 50% marks
- Post fellowship experience in relevant specialty in CPSP recognized unit:
 - a) Relevant experience in specialty to be opted: 05 Marks for one year (Maximum 20 Marks).
 - b) Experience relevant to first FCPS Specialty: 02 Marks for one year (Maximum 08 Marks).More than six months will be considered as one year. Less than six months will not be considered.
- Original articles published in PMC (formerly PMDC)/HEC recognized journal as first author in relevant specialty:
 - a) Article relevant to specialty to be opted: 05 Marks for one publication (Maximum 20 Marks).
 - b) Article relevant to specialty of first FCPS: 02 Marks for one publication (Maximum 08 Marks).
- Interview by the Panel: Maximum 10 Marks

7. ALREADY ENROLLED TRAINEES:

1. Enrolled in FCPS / Partial Training:

- a. Enrolled with PGMI Peshawar before January 2022 session.

They are eligible to apply for this session (July 2022) only if they have resigned and notification of resignation is issued before the closing date i.e. 27th May 2022. Copy of notification of the resignation must be uploaded with online application form and also attached with hard copy (please see resignation policy on PGMI website for details).

- b. Enrolled with PGMI Peshawar in January 2022 session.

Trainees who got a seat allocated in final slot allocation or in subsequent placement orders (their names included in any placement order issued for session January 2022), are not eligible for this session(those applicants who surrendered their slots after due time limit are also in-eligible).

2. Enrolled in MCPS/Diploma:

- a. All those trainees who are enrolled in MCPS / DIPLOMA programs are eligible if;
 - I. They have successfully completed the training i.e., have passed Exit Exam.
 - II. They have completed the training but have not passed Exit exam, can apply for the FCPS training but stipend will be paid from the date they pass the exit exam or after deduction of stipend equal to the amount of stipend they received in previous training, whichever comes first.

As per recent notification by the CPSP (No. F-a/Exam-21/CPSP/1102 dated: 15.02.2021, available on PGMI website as well), FCPS and MCPS trainees in all the disciplines are not allowed to join both the program simultaneously. Therefore, MCPS trainees who wants to join FCPS prior to passing MCPS Examination will have to cancel MCPS registration. As per PGMI policy if any resident cancels his/her

registration for any training, he/she shall have to return all amount of stipend (including other financial benefits) received during that training period.

8. SELECTION RELATED MATTERS

1. The selection will be done by the Central Induction Committee of PGMI through software.
2. If induction is carried out through interview, a candidate will not be considered in absentia until he/she is represented by a person who holds an authority letter duly signed by the candidate.
3. If induction is carried out through telephone call, response from the registered mobile number (or guardian number if applicant's number is non-responsive) will be taken as final choice of the applicant. In case the given phone is switched off or out of service area or non-responsive, applicant will not get any slot and PGMI will not be responsible.
4. The PGMI & CPSP rules shall be strictly observed.
5. Rules and regulations of PMC/PMDC for postgraduate medical training shall apply.
6. Those trainees who have **already availed a stipendiary program** of PGMI Peshawar have to successfully qualify the final examination of the CPSP or KMU as the case may be, otherwise equal to the amount of stipend received during previous training will be deducted.
7. It is pertinent to mention that Stipend is given for the training period that is recognized by the Degree/Diploma awarding Institute. Any part of training that is not recognized/accepted by the that institute will not be paid. If already paid, trainee shall be liable to pay it back to PGMI. In the same way, any training left incomplete (complete means to pass EXIT Exam), trainee shall be liable to refund all the stipend received during that training period along with other financial benefits availed.
8. Those who want to switch or **change specialty** during training will have to refund the stipend received for training in previous specialty.
9. A candidate having completed his training in one specialty (FCPS-II) shall be allowed to join training in another specialty only after passing the FCPS-II examination in the previous specialty.
10. Any trainee who leaves the **training incomplete** shall be liable to pay back the stipend.
11. Postgraduate Residents shall be selected for clinical units in all public teaching hospitals of KP and other PGMI affiliated institutions on merit. The list of Hospitals / clinical units affiliated with PGMI is available on official website of PGMI.
12. Joining time (to submit arrival in the allotted institutes and to do step-I & II with the CPSP) will be notified in the placement order. If the candidate fails to join in time, the seat shall be declared as vacant and applicants who have not been allotted any slot, will be allowed to avail this slot as per merit.
13. The period of training will not be extended beyond the normal period of the course as decided by the CPSP, except for the purpose of completion of deficiencies and that will be un-paid.
14. The Trainees shall not be allowed to engage in any sort of Govt./Private Job or Private practice. If found involved in such practice, strict disciplinary action will be taken which may result in termination of training.

15. Foreign candidates who do not have detailed marks certificate (DMC) shall be given only 60% marks in the merit list.
16. For conversion of CGPA/GPA into percentage, HEC formula will be used.
17. All selected applicants who are **Govt. Servants**, have to submit approved EOL from Health Department, Govt. of KP apart from other required documents along with arrival report. Their arrival will not be accepted without approved EOL as per Govt. Notification No. SO (E) H-II/4-1/2020 dated the 25th August 2020.
18. All trainees are directed that postgraduate training offered by PGMI is on full-time basis, and no trainee of PGMI is allowed to engage in any sort of job/clinical/working relationship with any other institute/organization/person during the tenure of postgraduate training.

In case any trainee is found to have been on job on regular/contractual basis, contractual, project position, autonomous health institution, running private clinic or doing job at any hospital of provincial or federal government and drawing salary there from, his/her training shall be terminated immediately and shall be liable to refund the stipend back to PGMI.

19. PGRs should attend the “Orientation Session” at the start of their training.
20. PGR shall not be awarded Course Completion Certificate unless he/she has successfully completed mandatory workshops as prescribed by CPSP.
21. Those FCPS PGRs who are **already working with PGMI** and registered with CPSP cannot resign before completing 6 months of training as per PGMI/CPSP rules. In case a trainee resigns before completing 6 months he/she will not be eligible for next induction. Furthermore, if a trainee resigns to re-apply after 6 months, his/her notified resignation by the PGMI / Associate Dean must be submitted to PGMI along with the application form before the due date. Resignation once given & notified cannot be revoked / taken back.
22. Those applicants who get allotted a seat in the final seat allocation process and order is issued; if they do not join within the prescribed time or resign before 06 months training, they will not be eligible for next induction.
23. No waiting list will be maintained.
24. Rules of service cannot be applied on trainee medical officers until approved or adopted by Executive Council.
25. **Concealment of information /submission of fake documents or incorrect entry** of information will lead to termination / reporting to CPSP/PMC/PMDC/debarring from future inductions in PGMI, Peshawar at any stage and will also be liable to refund stipend.
26. **Resignation Policy:** As per Executive Council decision, a trainee intended to resign shall do so by tendering the resign application one month prior to the effective (resign) date, otherwise, one month stipend shall be forfeited in lieu of prior notice. Such postgraduate resident shall be eligible for re-induction if otherwise allowed as per induction policy.

Provided that no trainee is allowed to leave the place of duty prior to clearance from the department concern and subsequent acceptance/notification of resignation. If trainee leave place of duty prior to issue of the notification by the competent authority, his resignation process will

be stopped and he will be considered as absent. The disciplinary action will be initiated as per policy and it may result in termination of the trainee.

Provided further that resignation once notified by the competent authority shall be final and irrevocable.

27. **Termination:** Once a trainee is terminated by the competent authority, he/she shall be banned for successive two inductions, and shall be banned for life if the same lapse is repeated after availing 2nd induction opportunity.
28. The trainees shall have to abide by the **rules/regulation of the institutions** where they are inducted. If biometric attendance is mandatory in the institution, they have to follow rules/regulation by the institution.
29. If any trainee receives any pay/financial benefits during the training period in addition to stipend from the PGMI, (**double pay withdrawal**) he/she shall be liable to refund both amounts to PGMI (stipend received from the PGMI and Pay/Financial benefits from other employer). It means this period will be without stipend as penalty and disciplinary action will also be initiated against him/her.
30. Any type of **misconduct or violence** during induction process will lead to debarring, blacklisting of the candidate and appropriate legal action.
31. Executive Council can **amend rules/regulations** from time to time as and when ever needed. All these amended/new rules/regulations approved by Executive Council will be applicable to the previous sessions as well.

CHIEF EXECUTIVE OFFICER

Postgraduate Medical Institute

Hayatabad, Peshawar

