



INDUCTION POLICY
FOR FCPS-II TRAINING 1st & 2nd FELLOWSHIP, SESSION JULY 2024

"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.

1. UNINHABITED SPECIALTIES LIST

The Executive Council shall identify such uninhabited specialties from time to time which are markedly deficient/ showing downward induction trends. The uninhabited specialties so identified shall be communicated to the Deans of all The Medical Colleges of the provinces that the final year students are counseled for better career options in view of the needs of the province & job market. The following is the list of uninhabited specialties as revised and approved by the Executive Council for the Session July 2024.

No.	Uninhabited Specialties List for Session July 2024
	1stFellowship (04/05 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
14	Paediatric Dentistry
15	Nuclear Medicine
	1stFellowship Medical Specialty,(Post IMM 3Years)
16	Clinical Hematology
17	Nephrology
18	Neurology
19	Medical Oncology
20	Pulmonology
	1stFellowship Surgical Specialty,(Post IMM 3years)
21	Cardiac Surgery
22	Paediatric Surgery
23	Thoracic Surgery
	2ndFellowship
24	ENT Sub-specialties

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

INDUCTION IN UNINHABITED SPECIALTIES:

NOCs based induction will be allowed in these specialties 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. Provision of NOC is NOT a confirmation of induction and NOCs will be accepted for induction as per merit. NOC issued in these specialties by any institute within KPK will NOT be accepted.

RESERVED SLOTS: As decided by Executive Council PGMI the following specialties have reserved slots and applicants who apply in these specialties will be offered induction on priority basis. Policy for NOC based induction in these specialties shall remain the same as mentioned for uninhabited specialties.

- **First fellowship:**
Emergency Medicine, Radiotherapy, Anesthesia, ENT, Eye, Psychiatry, Microbiology, Chemical Pathology, Histopathology, Periodontology.
- **Subspecialty:**
Nephrology, Neurosurgery, Medical Oncology and Thoracic Surgery.
- **Second Fellowship**
ENT subspecialties, Eye subspecialties, Paediatrics subspecialties, Rheumatology, Critical Care Medicine, Vascular Surgery, Breast Surgery, Orthopaedics subspecialties, Surgical Oncology and Infectious Diseases).

2. 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 & civil servant spouse quota, and Gilgit Baltistan and Azad Jammu & Kashmir quota (Applicants from AJK and GB have to provide sponsorship letter from their relevant governments in advance).
- b. Those who have passed FCPS-I before 30.04.2024 or having FCPS-I exemption letter issued by CPSP on or before closing dates and appeared in PGMI entrance test to be held on 26.05.2024 for the session July 2024 will be eligible.
- c. For 2nd Fellowship, those applicants will be eligible whose FCPS-II results have been announced on or before closing dates. Congratulation letter/election letter/email from CPSP must be attached.
- d. Admission processing fee is Rs.5000/= nonrefundable and should be deposited online (Jazz Cash).
- e. Foreign candidates shall apply through their Govt. to Higher Education Commission, Islamabad. If selected they will pay @ 600/- US Dollars per annum apart from above mentioned application processing fee. The foreign national's stipend will be paid by PGMI as per decision of the PGMI Executive Council.

3. DOMICILE POLICY

- a. Female candidate 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 applicants must be that of Khyber Pakhtunkhwa. In case of married female, the permanent address on CNIC of husband must be that of Khyber Pakhtunkhwa.
- c. Married female candidates are required to prove their marital status with document issued by NADRA i.e. CNIC or computerized Nikah Nama.

4. RESERVED SEATS FOR DIFFERENT QUOTA (FIRST FELLOWSHIP):

(There is no quota in 2nd fellowship)

a) KP DOMICILE HOLDERS:

• Disabled Person Quota:

For disabled Person's 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. Applicants will get the advantage of only induction as mentioned above, allocation of slot of their choice is not mandatory.

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)

Procedure: The Candidates applying for Disabled person quota & Minorities quota will be in open merit by default. The available slots for each specialty will be calculated before slot allocation process. As per merit of applicants who applied for above mentioned two quotas and the number of slots available in their specialties, the applicants eligible on these quotas will be identified and their merit number will be upgraded to ensure slot allocation to them. Their merit number will remain locked at this position during further process of allocation in this induction and sub-specialty induction after Pre-IMM training of this batch if required.

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 and duty certificate (not more than 30 days old) by the competent authority & NADRA Document (CNIC with name of husband or Computerized Nikah Nama) as proof of marriage 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 and duty certificate (not more than 30 days old) by the competent authority & NADRA Document (CNIC with name of husband or Computerized Nikah Nama) as proof of marriage 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 Quota:

Number of Reserved Supervisory Slots AJK 05 (04 for MBBS & 01 for BDS)

Number of Reserved Supervisory Slots Gilgit-Baltistan 05 (04 for MBBS & 01 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.

Procedure: The merit list of the above-mentioned non-KP 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.

c) POLICY FOR FOREIGN NATIONALS:

All foreign nationals, who have passed FCPS-I and completed step-I to get the NOCs (NOC from Foreign Consulate/Embassy of their respective country in Pakistan, NOC issued by HEC & NOC/Study Visa issued by Interior Ministry of Pakistan) through PGMI are eligible to apply for admission in FCPS-II. They have to appear in PGMI entrance test. The slot allocation will be as per their merit. The Foreign Nationals are directed to consult PGR Section at PGMI office for completion of step-I in time and further guidance.

Number of Reserved Supervisory Seats: 03 (2 for MBBS & 1 for BDS) Step-I can be provided till opening of preference & choices of portal.

5. 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 the DGHS. 0.5 to 2.5 marks for one completed year as per notification No.5327-32/DGHS dated: 14.06.2021, (available on PGMI website). Maximum countable experience shall be two years.	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.

- Less than 12 months or no experience = NO marks.
- 12 months to less than 18 months =01 year.
- 18 months =02 year.

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

These marks will be given to those Medical Officer's (MO/WMO) who are exclusive servants of Provincial Govt.of KP, and those who are working in hospitals managed by public/private partnership will not be awarded these marks.

Professional Marks Calculation:

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

EXAMPLE:

Marks obtained/Total Marks x100 for each prof.

Total aggregate=sum of percentages of all profs/(4 or 5) as the number of profs maybe.

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.	20%	Basic medical subjects: Applied Physiology, Applied Pharmacology, Applied Pathology and Applied Anatomy.	20%
General Principles of Medicine	50%	General Principles of Surgery	50%
English Language	10%	English Language	10%
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.	40%
English language	10%
Bioethics	10%
Basic Bio-Statistics	05%
Communication skills	05%

DIFFICULTYLEVEL:

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

CATEGORYOFTEST:

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 and publications as per following weightage.

- MBBS (50% marks)
- POST FELLOWSHIP EXPERIENCE in CPSP recognized unit: (20% marks)

Relevant to first fellowship or specialty to opted. (Max: marks 20). Experience certificate must be issued by HR Department of institute duly signed by HOD & Associate Dean.

Less than six months will not be considered. 6months to less than 12 months= 05 marks, 12 months to less than 18 months=10 marks, 18 months to less than 24 months= 15 marks, 24 months or more=20 marks.

- ORIGINAL ARTICLES PUBLISHED in HEC recognized journal as first author: (30% marks)

Relevant to first fellowship or specialty to be opted. 04 marks for one publication (Max: marks 20).

6. ALREADY ENROLLED TRAINEES:

A. Enrolled in FCPS/Partial Training:

- a. Enrolled with PGMI Peshawar before January 2024 Session.

They are eligible to apply for this session (July 2024) only if they have resigned and notification of resignation has been issued before the closing date i.e. 13.05.2024. Copy of notification of the resignation must be uploaded with online application form. (Please see clause 8.22).

- b. Enrolled with PGMI Peshawar in January 2024 Session.

Trainees who got a seat allocated in final slot allocation OR in subsequent placement orders (their names included in any placement order) for FCPS/MCPS/Diploma Session January 2024, are not eligible for this session (those applicants who surrendered their slots after due time limit are also not eligible).

B. Enrolled in MCPS/Diploma:

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 want to join FCPS prior to passing MCPS Examination will have to cancel MCPS RTMC. As per PGMI policy if any resident cancels his/her RTMC for any training, he/she shall have to return all amount of stipend (including other financial benefits) received during that training period.

8. TRAINING RELATED MISCELLANEOUS RULES:

1. The selection for FCPS training is the function of the Central Induction Committee (Executive Council) of PGMI. It is completed through software and authenticated by the CIC.
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. In case the interview carries the marks, applicant shall be required to appear in person.
3. If induction is carried out through telephonically, 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. **Academic transcript/DMC** of professional exams attached in online application form for induction must be issued by university or verified by university.
5. **CNIC** and **PMDC certificate** attached in online application form for induction must be valid.
6. An applicant will be offered induction by PGMI up to a maximum of 02 times. He/she will not be allowed to apply for the third time.
7. The PGMI & CPSP rules shall be strictly observed.
8. Rules and regulations of PMC/PMDC for Postgraduate Medical training shall apply.
9. 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 recovered.
10. 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 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.
11. Any trainee who leaves the **training incomplete** shall be liable to pay back the stipend.

12. Those who want to switch or **change specialty** during training will have to refund the stipend received for training in the previous specialty training. This policy is also applicable to those trainees who opt for change of track through CPSP exchange program.
13. 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.
14. Postgraduate Residents shall be selected for clinical units in all public sector 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.
15. 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 the given 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. Moreover, the candidate will not be eligible for next induction.
16. 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/penalties and that will be un-paid.
17. The Trainees shall not be allowed to engage in any sort of Govt./Private Job or Private practice. If found involved in such practices, strict disciplinary action will be taken and will be reported to CPSP, which may result in termination of training.
18. The 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. If any trainee receives any pay/financial benefits during the training period in addition to the 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 that may lead to cancellation of that period of training/full training.
20. 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.
21. Foreign graduates who do not have detailed marks certificate (DMC) shall be given only 60% marks in the merit list.
22. For conversion of CGPA/GPA in to percentage, HEC formula will be used.
23. PGRs should attend the "Orientation Session" at the start of their training if arranged by the institution.
24. PGR shall not be awarded Course Completion Certificate unless he/she has successfully completed mandatory workshops as prescribed by CPSP.
25. Those FCPS PGRs who are **already working with PGMI** and registered with CPSP cannot resign before completing 06 months of training as per PGMI/CPSP rules. In case a trainee resigns before completing 06 months he/she will not be eligible for next induction. Furthermore, if a trainee resigns after 06 months & wants to re-apply, 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.
26. **Resignation Policy:** If 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/cancellation of the training already done.

Provided further that resignation once notified by the competent authority shall be final and irrevocable. The Trainees who want to resign are liable to refund the received stipend to PGMI Peshawar, if they opt not to continue the training. The exit order (NOC to cancel the RTMC) as per standard policy will be issued only if the stipend received during the training is refunded to PGMI Peshawar.

27. Those applicants who get slot allotted in the final slot 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.
28. No waiting list will be maintained.
29. Rules of service cannot be applied on the postgraduate resident until approved or adopted by the Executive Council.
30. **Concealment of information /submission of fake documents or incorrect entry** of information will lead to rejection of application and if identified after induction, termination / reporting to CPSP/ PMC/ PMDC/debarring from future inductions in PGMI, Peshawar at any stage and will also be liable to refund stipend.
31. **Termination:** Once a trainee is terminated by the competent authority, he/she shall be banned for two successive inductions, and shall be banned for life if the same lapse is repeated after availing 2nd induction opportunity.
32. The residents 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.
33. Any type of **misconduct or violence** during induction process will lead to debarring, blacklisting of the candidate and appropriate legal action.

9. POLICY/GUIDELINES FOR MANDATORY ROTATIONAL TRAINING:-

- i. Mandatory rotational training is allowed only in CPSP recognized Units/Departments and with approved supervisors of CPSP.
- ii. Rotation is allowed to PGRs in CPSP recognized Unit/Department in the same hospital. If the unit/specialty of rotation is not available in the same hospital, then the PGR shall be allowed rotation in the CPSP recognized Unit/Department of some other training institute. In this regard, CPSP guidelines will be followed. "Rotation should be in the same institute. If not available within the institute, then within the same city and if not available within the same city, then outside the city is allowed".
- iii. **Policy for rotation outside Province:** The rotation outside the Province is only allowed if that specialty is not available in whole Province. Prior permission from PGMI and DNRP is mandatory.
- iv. The application should reach PGMI at least seven days before date of commencement of rotation.
- v. If a PGR proceeds on rotational training before approval from the competent authority, he/she will be considered as absent and immediately disciplinary action would be taken as per policy. If that period is accepted as part of training, this period will be considered without stipend.

a) ROTATION GUIDELINES FOR MTIs Residents:

- i. Associate Dean can allow rotation within the institute. If desired specialty is not available in the institute, then he can refer the case to PGMI for permission to do rotation outside the institute. He has to certify in his forwarding note that the desired specialty is not available within the institute.
- ii. **Requirement of application for rotation outside parent institute:** The application must be recommended and forwarded by the supervisor and Associate Dean with certificate of non-availability of that specialty in the institute. It is also required that he/she (the resident) has to get NOC from rotational supervisor and the Associate Dean/the Dean/Head of Institute/the Training Director (anyone nominated by the Head of Institute) of the institute where rotation is desired

b) ROTATION GUIDELINES FOR NON-MTIs Residents:

- i. The Dean/Head of Institute/the Training Director of the institution can allow rotation within the institute. If desired specialty is not available in the institute, then he can refer the case to PGMI for permission to do rotation outside the institute. He has to certify in his forwarding note that desired specialty is not available within the institute.
- ii. **Requirement of application for rotation outside parent institute:** The application must be recommended and forwarded by the supervisor and the Dean/Head of Institute/the Training Director (anyone nominated by the Head of Institute) with certificate of non-availability of that specialty in the institute. It is also required that he/she (the resident) has to get NOC from rotational supervisor and the Associate Dean/the Dean/Head of Institute/the Training Director (any one nominated by the Head of Institute) of the institute where rotation is desired.

10. POLICY/GUIDELINES FOR LEAVE/BREAK IN TRAINING

- i. As per CPSP & PGMI rules, a total of **fifteen days** leave with stipend is allowed over a period of six months and it's not accumulative.
- ii. Absence from training without prior permission of the competent authority will be considered as absent period and as a policy every absent period will be considered as unpaid. Moreover, if it is declared as deficiency in training, will complete it at the end of training without stipend. The AD/training director may refer the case to Institutional Disciplinary Committee for further action.
- iii. Residents applying for long leave/break i.e. Hajj leave, Umrah leave, freezing of training, wedding leave or maternity leave, should submit their application at least fifteen (15) days before the commencement of leave, for approval. If a PGR leave his institution without approval of competent authority and DNRP, then that period will be considered as absent.
- iv. In case of **maternity leave**, it is mandatory to provide original Medical Certificate issued by Consultant Gynecologist from parent training institution (if Gynae Department is not available in parent institution, then from a public sector hospital) along with ultrasound report and application. As per CPSP & PGMI's rules, maximum of ninety (90) days leave is allowed. It will be approved as break in training without stipend and this deficiency in training shall be completed at the end of training with stipend. Maternity leave is allowed once in the entire FCPS training, therefore, if a PGR applies for another one, only 45 days leave shall be granted without stipend and the deficiency period of the second maternity leave shall be completed at the end of training without stipend.
- v. **Medical leave** should be submitted for approval along with a medical certificate from public sector hospital and documentary proof of illness. The sick leave shall be considered break in training without stipend and the deficient period shall be completed at the end of the training with stipend. In case of medical leave, it can be started without prior permission of competent authority provided medical grounds and documents are correct.
- vi. **Break/freeze in training** is allowed once in the entire FCPS training. A PGR is eligible to apply for break/freeze in training on genuine grounds as per CPSP policy. As per CPSP policy no candidate is allowed to avail break in training before completion of 02 years of training. After 02 years of training a break of 06 months is allowed.
- vii. Departure & Arrival by the concerned PGR shall be submitted to PGMI duly forwarded by the Supervisor & Associate dean/ head of institution. The arrival report must accompany CPSP approval for the availed Leave/Break otherwise it will be considered as absent period. It will be responsibility of resident to inform and get approval of CPSP in time.

a) FOR NON MTI RESIDENTS:

- i. The competent authority for sanction of paid leave up to 7 days at a stretch (15 days in total every six month) is Dean/Head of Institution/Training Director.
- ii. The competent authority for sanction of all other leaves/unpaid Leave/Break/Freezing/leave more than 07days/Medical leave is the Chief Executive Officer

PGMI.

- iii. All applications submitted to PGMI by residents for leave/ break in training should be duly forwarded by the supervisor & Dean/Head of Institution/Training Director. The CPSP approval/consent will be required.

b) FOR MTI RESIDENTS:

- i. All applications submitted by residents to PGMI regarding any issue, must be forwarded by their supervisor & Associate Dean of concerned MTI (duly signed, stamped and dated).
- ii. The competent authority to sanction all leaves up to 03 months is Associate Dean of respective MTI.
- iii. The competent authority to sanction Break/freezing in training is the Chief Executive Officer PGMI

11. MISCELLANEOUS:

- i. Application submitted in PGMI for any purpose, must be forwarded by the supervisor & the Associate Dean/Training Director/Head of Institution (duly signed, stamped and dated)
- ii. 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 except it is mentioned differently.
- iii. This policy is issued in supersession of previous Induction Policies and shall come into force with immediate effect.

12. PGMI affiliated institutions:

MTI institutions: MTI/LRH, MTI/KTH/KMC, MTI/HMC/KGMC/IKD, MTI/ATH/ACD, MTI/MMC, MTI/GMC, MTI/QHAMC, MTI/GKMC/BKMC, MTI/KCD, MTI/Bannu & MTI/PIC. The STH, SCD & DHQTH/KIDS/LMH Kohat are also considered as MTI for the purpose of PGMI rules.

NON MTI institutions: CMH Peshawar, CMH Abbottabad, CMH Nowshera, CMH Kohat, RMI, NWGH, PMC, AIMC & WMDC.

(Approved by the 46th PGMI Executive Council)

CHIEF EXECUTIVE OFFICER

Postgraduate Medical Institute

Hayatabad, Peshawar