

# **DIPLOMA IN PSYCHOLOGICAL MEDICINE (DPM)**

## **Syllabus**

### **Theory**

General Guidelines. During the training period effort are always made that adequate time is spent in discussing mental health problems of public health importance in the country

- The Patient – Doctor Relationship: Human Development Throughout the Lifecycle

Normality, Embryo, Foetus, Infant, and Child, Adolescence, Adulthood, Late Adulthood (Old Age), Death, Dying and Bereavement.

- The Brain and Behaviour

Functional and Behavioral Neuroanatomy, Neurophysiology and Neurochemistry, Neuroimaging, Electrophysiology, Psychoneuroendocrinology, Psychoneuroimmunology, and Chronobiology, Neurogenetics.

- Contributions of the Psychosocial Sciences

Jean Piaget, Attachment Theory, Learning Theory, Aggression, Sociology and Ethology, Anthropology and Cross-Cultural Psychiatry, Epidemiology and Biostatistics.

- Clinical Neuropsychological Testing

Clinical Neuropsychological Testing of Intelligence in Adults & children  
Personality assessment in adults & children

- Theories of Personality and Psychopathology

Sigmund Freud: Founder of Classic Psychoanalysis, Erik Erikson, Schools derived from Psychoanalysis and Psychology.

- Clinical Examination of the Psychiatric patient

Psychiatric History and Mental Status Examination, Interviewing Techniques with Special Patient Populations, Physical Examination of the Psychiatric Patient, Laboratory tests in Psychiatry. Medical Record and Medical Error.

- Signs and Symptoms in Psychiatry
- Classification in Psychiatry

#### Psychiatric Classification, International Psychiatric Diagnosis

- Delirium, Dementia, and Amnesic and Other Cognitive Disorders and

#### Mental Disorders Due to a General Medical Condition

Cognitive Disorders Introduction and Overview, Delirium, Dementia, Amnesic Disorders Other Cognitive Disorders and Mental Disorders Due to a General Medical Condition

- Substance-Related Disorders

Substance-Related Disorders Introduction and Overview, Alcohol Related Disorders, Amphetamine (or Amphetamine-like) related Disorders, Caffeine-Related Disorders, Cannabis-Related Disorders, Cocaine-Related Disorders, Hallucinogen-Related Disorders, Inhalant-Related Disorders, Nicotine-Related Disorders, Opioid-Related Disorders, Phencyclidine (or Phencyclidine-like) related Disorders, Sedative-, Hypnotic-, or Anxiolytic-Related Disorders, Anabolic-Androgenic steroid abuse

- Schizophrenia and Other Psychotic Disorders

Concept of Schizophrenia, Scope of the Problem, Genetics, Environmental Epidemiology, Developmental Model of Schizophrenia, Neuroimaging in Schizophrenia, Linking Neuropsychiatric Manifestations to Neurobiology Neuropathology, Clinical Features and Psychopathology Concepts Cognition, Sensory Gating Deficits and Translational Research Psychosocial Treatment Somatic Treatment Psychiatric Rehabilitation Integrative Treatment and Functional Outcomes, Spectrum Pathology and Treatment, Other Psychotic Disorders, Acute and Transient Psychotic Disorders and Brief Psychotic Disorder, Schizophreniform Disorder, Delusional Disorder and Shared Psychotic Disorder, Schizoaffective Disorder, Postpartum Psychosis, Culture-Bound Syndromes with Psychotic Features, Psychosis Not Otherwise Specified, Treatment of Other Psychotic Disorders, Schizophrenia and Other Psychotic Disorders Special Issues in Early Detection and Intervention

- Mood Disorders

Historical Introduction and Conceptual Overview, Epidemiology, Genetics, Neurobiology, Intrapsychic and Interpersonal Aspects, Clinical Features treatment of Depression, Treatment of Bipolar Disorders, Psychotherapy

- Anxiety Disorders

Introduction and Overview, Epidemiology, Psychophysiological Aspects, Neurochemical Aspects, Neuroimaging, Psychodynamic Aspects, Clinical Features, Somatic Treatment, Cognitive-Behavioral Therapy

- Somatoform Disorders

- Factitious Disorders

- Dissociative Disorders

- Normal Human Sexuality and Sexual and Gender Identity Disorders

Normal Human Sexuality and Sexual Dysfunctions, Homosexuality, Gay And Lesbian Identities, and Homosexual Behaviour, Paraphilias, Gender Identity Disorders, Sexual Addiction

- Eating Disorders

- Sleep Disorders

- Impulse-Control Disorders Not Elsewhere Classified

- Adjustment Disorders

- Personality Disorders

- Psychological Factors Affecting Medical Conditions

History of Psychosomatic Medicine, Gastrointestinal Disorders, Obesity, Cardiovascular Disorders, Respiratory Disorders, Endocrine And Metabolic Disorders, Psychocutaneous Disorders, Musculoskeletal Disorders, Stress and Psychiatry, Psycho-Oncology, Consultation- Liaison Psychiatry

- Relational Problems

- Additional Conditions That May Be a Focus of Clinical Attention

Malingering, Adult Antisocial Behaviour, Criminality, and Violence, Borderline Intellectual Functioning and Academic Problem, Other Additional Conditions That May Be a Focus of Clinical Attention

- Culture-Bound Syndromes

- Special Areas of Interest

Psychiatry and Reproductive Medicine, Premenstrual Dysphoric Disorder, Genetic Counselling, End-of-Life and Palliative Care, Death, Dying, and

Bereavement, Physical and Sexual Abuse of Adults, Survivors of Torture, Alternative and Complementary Health Practices, Military and Disaster Psychiatry, Famous Named Cases in Psychiatry

- Psychiatric Emergencies

Suicide, Other Psychiatric Emergencies

- Psychotherapies

Psychoanalysis and Psychoanalytic Psychotherapy, Behaviour Therapy, Hypnosis, Group Psychotherapy and Combined Individual and Group Psychotherapy, Family Therapy and Couple Therapy, Cognitive Therapy, Interpersonal Psychotherapy, Dialectical Behavior Therapy, Intensive Short-Term, Dynamic Psychotherapy, Other Methods of Psychotherapy, Evaluation of Psychotherapy, Combined Psychotherapy and Pharmacology

- Biological Therapies

General Principles of Psychopharmacology, Pharmacokinetics and Drug Interactions, Drug Development and Approval Process in the United States, Medication-Induced Movement Disorders,  $\alpha$ -2-Adrenergic Receptor Agonists Conidine and Guanfacine,  $\alpha$ -Adrenergic Receptor Antagonists, Anticholinergics and Amantadine, Anticonvulsants, Antihistamines, Barbiturates and Similarly Acting Substances, Benzodiazepine Receptor Agonists and Antagonists, Bupropion, Buspirone, Calcium Channel Inhibitors, Cholinesterase Inhibitors and Similarly Acting Compounds, Dopamine Receptor Antagonists (Typical Antipsychotics), Lithium, Mirtazapine, Monoamine Oxidase Inhibitors, Nefazodone, Opioid Receptor Agonists Methadone, Levomethadyl, and Buprenorphine, Opioid Receptor Antagonists Naltrexone and Nalmefene, Selective Serotonin Norepinephrine Reuptake Inhibitors, Selective Serotonin Reuptake Inhibitors, Serotonin-Dopamine Antagonists (Atypical or Second-Generation Antipsychotics), Sympathomimetics and Dopamine Receptor Agonists, Thyroid Hormones, Trazodone, Tricyclics and Tetracyclics, Electroconvulsive Therapy, Neurosurgical Treatments and Deep Brain Stimulation, Other Pharmacological and Biological Therapies, Drug Augmentation, Reproductive Hormonal Therapy Theory and Practice

- Child Psychiatry

Introduction and Overview, Normal Child Development, Normal Adolescence

- Psychiatric Examination of the Infant, Child, and Adolescent

- Mental Retardation

- Learning Disorders

Reading Disorder, Mathematics Disorder, Disorder of Written Expression and Learning Disorder Not Otherwise Specified

- Motor Skills Disorder Developmental Coordination Disorder

- Communication Disorders

Expressive Language Disorder, Mixed Receptive-Expressive Disorder, Phonological Disorder, Stuttering, Communication Disorder Not Otherwise Specified

- Pervasive Developmental Disorders

- Attention-Deficit Disorders

Attention-Deficit/Hyperactivity Disorder, Adult Manifestations of Attention-Deficit/Hyperactivity Disorder

- Disruptive Behavior Disorders

- Feeding and Eating Disorders of Infancy and Early Childhood

- Tic Disorders

- Elimination Disorders

- Other Disorders of Infancy, Childhood, and Adolescence

Reactive Attachment Disorder of Infancy and Early Childhood, Stereotypic Movement Disorder of Infancy, Disorders of Infancy and Early Childhood Not Otherwise Specified

- Mood Disorders in Children and Adolescents

Depressive Disorders and Suicide in Children and Adolescents, Early-Onset Bipolar Disorders

- Anxiety Disorders in Children

Obsessive-Compulsive Disorder in Children, Posttraumatic Stress Disorder in Children and Adolescents, Separation Anxiety Disorder and Other Anxiety Disorders, Selective Mutism

- Early-Onset Schizophrenia

- Psychiatric Treatment of children

The Treatment of Child and Adolescent Disorders, Cognitive Behavioural

Psychotherapy for Children and Adolescents, Group Psychotherapy, Family Therapy, Pediatric Psychopharmacology, Partial Hospital and Ambulatory Behavioural Health Services, Residential And Inpatient Treatment, Community- Based Treatment, Psychiatric Treatment of Adolescents

- Child Psychiatry Special Areas of Interest

Psychiatric Aspects of Day Care, Adoption and Foster Care, Child Maltreatment, Children's Reaction to Illness and Hospitalization, Psychiatric Sequelae of HIV and AIDS, Child or Adolescent Antisocial Behaviour, Dissociative Disorders in Children and Adolescents, Identity Problem and Borderline Disorders in Children and Adolescents, Adolescent Substance Abuse, Forensic Child and Adolescent Psychiatry Ethical Issues in Child and Adolescent Psychiatry, School Consultation, Prevention of Psychiatric Disorders in Children and Adolescents Neuroimaging in Child and Adolescent Psychiatry, Child Mental Health Services Research, Impact of Terrorism on Children

- Adulthood

- Geriatric Psychiatry

Overview, Assessment, Psychiatric Disorders of Late Life, Treatment of Psychiatric Disorders, Health Care Delivery Systems, Special Areas of Interest

- Hospital and Community Psychiatry

Public and Community Psychiatry, Health Care Reform, Role of the Psychiatric Hospital in the Treatment of Mental Illness, Psychiatric Rehabilitation

- Psychiatric Education.

Graduate Psychiatric Education, Examining Psychiatrists and Other Professionals, an Anthropological View of Psychiatry

- Ethics and Forensic Psychiatry

Clinical-Legal Issues in Psychiatry, Ethics in Psychiatry, Correctional Psychiatry

- Psychiatry Past and Future

History of Psychiatry, World Aspects of Psychiatry, Future of Psychiatry

## **Practical**

### **Diagnostic Work up**

- Detailed history, MSE & administration of rating scales to diagnose to patient along with management plan.
- Modified ECT
- Psychological Testing
- I.Q Test
- Memory Test
- Personality Test
- Neuropsychological tests
- Psychological Treatment
- Psychotherapy
- Behaviour Therapy
- Cognitive behaviour therapy
- Neurological assessment
- Detailed Neurological Examination
- Findings of CT, MRI
- E.E.G.

### **Skills**

- History and examination.

History taking including present history, past, family, personal, psychosocial history, physical and mental status examination and application of the relevant psychiatry rating scales, Psychohdiagnostic & psychodynamic formulations

- Bedside investigations.

Hemoglobin, TLC, ESR, peripheral smear staining and examination, urine: routine and microscopic examination, Viral markers, urine for screening for substances of abuse.

- Interpretation of ECG, EEG, MRI findings; CT scan.
- Understanding of common EEG patterns,

### **Teaching Program**

#### **General Principles**

Acquisition of practical competencies being the keystone of postgraduate medical education, postgraduate training is skills oriented. Learning in postgraduate program is essentially self-directed and primarily emanating from clinical and academic work. The formal sessions are merely meant to supplement this core effort.

### Teaching Sessions

- Clinical case discussions
- PG bed side
- Examination
- Seminars/Journal club
- Interdepartmental Meetings
- Others – Guest lectures/vertical seminars/Central Stat meets.

### Teaching Schedule

The suggested teaching schedule is as follows:

Item	Frequency
1. Case discussion	once a week
2. Seminar	once a week
3. Psychology seminar	once a week
4. Research forum & Journal Club	once a week
5. Central session (Telemedicine/, guest lectures, sessions on basic sciences, biostatistics, research methodology, teaching methodology, health economics, medical ethics and legal issues)	Once a week

### Note:

- All sessions to be supervised by the faculty members. All PGs should attend the sessions except the ones posted in emergency.
- All the teaching sessions to be assessed by the consultants at the end of session and marks considered for internal assessment.
- Attendance of the Residents at various sessions has to be at least 80%.

### Postings

The postgraduate student rotates through emergency, O.P.D. and Ward Postings & Consultation - Liaison Psychiatry. In addition, following special rotations are also undertaken:

Neurology:	1 month
Psychology:	2 months
Child & adolescent Psychiatry:	1 month
Community & legal Psychiatry:	1 month
Dead diction:	1 month

During first year the resident will work under direct supervision of the 2/3 year

Resident /senior resident and consultant on call. He/She will be responsible for taking detailed history, examination of patients as per the file record and send appropriate investigations as advised by seniors. Initially all procedures are to be observed and then done under supervision of seniors and during 2/3 year can do procedures independently. In 2nd year, resident should be posted in special clinics also.



## Job Responsibilities

**OPD:** History and work up of all cases and presentation to the consultants

**Indoors:** Sending investigations and filling investigation forms and performing procedures as Narco- analysis, Aversion therapy and E.C.T.

**Ward:** History and work up of all cases

- Examination of all patients and documentation the files.
- Daily Mental Status Examination of the patients
- Applying relevant psychiatry rating scales
- Completion of files
- Preparation of discharge summary

## Assessment

All the PG residents will be assessed daily for their academic activities and also periodically.

## General Principles

- The assessment is valid, objective, and reliable.
- It covers cognitive, psychomotor and affective domains.
- Formative, continuing and summative (final) assessment is also conducted in theory as well as practicals/clinicals. In addition, thesis is also assessed separately.

## Formative Assessment

The formative assessment is continuous as well as end-of-term. The former is based on the feedback from the senior residents and the consultants concerned. End-of-term assessment is held at the end of each semester (upto the 5th semester). Formative assessment will not count towards pass/fail at the end of the program, but will provide feedback to the candidate.

## Internal Assessment

Items	Marks
1. Personal attributes*	20
2. Clinical skills and performance	20
3. Academic activities (Journal club, seminars, case discussion)	
4. End of term theory examination (I year, 1 year and 9 months)	20
5. End of term practical exam/Oral	20

- The record of Internal assessment will be presented to the board of Examiners for consideration at the time of final examination.

\* Personal attributes

- Availability: Punctual, available continuously on duty, responds promptly to calls, takes proper permission for leave.
- Sincerity and motivation: Dependable, honest, admits mistakes, does not falsify information, exhibits good moral values, loyal to institution, has initiative, takes on responsibilities, goes beyond routine work, exhibits keen desire to learn.
- Diligence and performance: Dedicated, hardworking, does not shirk duties, leaves no work pending, does not sit idle, competent in clinical case work up and management (where applicable), skilled in procedures, proficient in record keeping and file work.
- Academic ability: Intelligent, shows sound knowledge and skills, participates adequately in academic activities, and performs well in oral presentation and departmental tests.
- Inter-personal skills: Has compassionate attitude towards patients, gets on well with colleagues and paramedical staff, respectful to seniors.

### **Suggested Reading**

#### Core Books

- Synopsis of clinical psychiatry Kaplan & Sadock
- Shorter Oxford Text Book of psychiatry- Gelder
- Psychopharmacology by Stephen M. Stahl
- Fish's clinical psychology/ Symptoms in mind- Andrew Sim
- Psychology by Morgan and King.

#### Reference books

- Comprehensive Text book of Psychiatry by Kaplan & Sadock
- New Oxford Text Book of psychiatry- Gelder & Andreasen
- Social Psychology by David G. Myers
- Organic Psychiatry by Leishman
- Technique of Psychotherapy by Wolberg
- General Psychopathology- Jasper

#### Journals

- Indian J Psychiatry

- British Journal of Psychiatry
- American J. Psychiatry
- Archives Journal of Psychiatry
- Journal of Clinical Psychiatry
- Psychiatry Clinics of North America

Internet resources

- ermed gateway
- ovid
- science direct

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