# HEMWATI NANDAN BAHUGUNA UTTARAKHANDMEDICAL EDUCATION UNIVERSITY, DEHRADUN



# **B. Sc. OPERATION THEATRE TECHNOLOGY (BOTT)**

(w.e.f. Academic Session 2020-21)

(Based on model curriculum handbook of Operation Theatre technology by Ministry of Health and Family Welfare Allied Health Section 2015-16)

#### **B. Sc. in Operation Theater Technology**

#### Introduction:

Learning Objectives: At the completion of this course, the student should be -

- 1. Able to help the anesthesiologist in administering anesthesia, assist in various procedures and also help in continuous monitoring of patients during surgery.
- 2. Able to train and develop an individual to independently handle the latest technology and high end biomedical equipment in Operation Theatre
- 3. Able to assist anesthesiologists in developing and plummeting patient anesthesia care plans, including preoperative, surgical theater, recovery room, and post-operative intensive care procedures.
- 4. Able to do- patient data collection, catheter insertion, airway management, assisting the administration and monitoring of regional and peripheral nerve blockades, support therapy, adjusting anesthetic levels during surgery, inter-operative monitoring, postoperative procedures, pain clinics and patient education, and administrative tasks.
- 5. Able to manage medical gases and pipeline system
- 6. Able to assist in Intensive care unit
- 7. Able to manage Central sterile supply department
- 8. Able to assist during Disaster and emergency situations.

# Expectation from the future graduate in the providing patient care.

- 1. The Course prepares the operating theatre technologist to work as a competent, reliable member of the health care team under the guidance and supervision of doctors in their delivery of patient care, training also focuses on the knowledge and skills of monitoring infection control policy and procedures in the operating theatre.
- 2. Employment opportunities can be found in hospitals in both private and public sectors as well as in independent trauma centres.
- 3. OTT graduate is encouraged to pursue further qualification to attain senior position in the professional field, also to keep abreast with the advance and new technology, the professional should opt for continuous professional education credits offered by national and international institutes.

### **Duration of the course**

Duration of the course: 3 years 6 months (970 hours of Theory & 2270 hours of Practical Classes) and 720 hours (minimum) of internship

Total hours - 3960 hours

#### **Medium of instruction:**

English shall be the medium of instruction for all the subjects of study and for examination of the course.

#### Attendance:

A candidate has to secure minimum-

- 1. 75% attendance in theoretical
- 2. 80% in Skills training (practical) for qualifying to appear for the final examination.

No relaxation, whatsoever, will be permissible to this rule under any ground including indisposition etc.

# Assessment:

Assessments should be completed by the academic staff, based on the compilation of the student's theoretical &clinical performance throughout the training programme. To achieve this, all assessment forms and feedback should be included and evaluated.

# **Curriculum Outline:**

# First year

SR. NO.CODE	SUBJECT	THEORY	THEORY INTERNAL	TOTAL	PRACTICAL	INTERNAL	TOTAL	
1.	Anatomy	70	30	100	70	30	100	
2	Physiology	70	30	100	70	30	100	
3	Forensic medicine. Medical law and ethics. Professionalism and values	70	30	100	-	-	-	
4.	Pathology/Microbiology/Biochemistry.	70	30	100	70	30	100	
5.	Preventive Social Medicine	70	30	100	-	-	-	
Non- University Examination								
1	ENGLISH	70	30	100	-	-	-	
2	COMPUTER	70	30	100	-	-	-	

# **Human anatomy**

# PAPER I<sup>ST</sup> HUMAN ANATOMY

# **UNIT-I**

Introduction Scope of Anatomy.

Organization of Tissue.
Organs and systems.

Anatomical position of the body.

Axis and planes.

Bones- Classification development, parts of long bones and blood supply of bones.

Joints- Definition, classification, movements of different joint.

# **UNIT-II**

# **UPPER EXTREMITY**

Osteology- Clavicle, scapula, Humerus, Radius, ulna, carpals, metacarpals & Phalanges

Soft tissue- (Only Outline)

Breast, pectoral region, axilla, front & back of arm, front of forearm, back of forearm, Palm, dorsum aspect of Hand.

Joints- Shoulder girdle, Shoulder joint, elbow joint, radio-ulnar joint, wrist joint and joints of

hand.

Surface measuring and Radiological Anatomy of upper limb.

#### UNIT -III

#### LOWER EXTREMITY

Osteology- Hipbone, Femur, Tibia, Fibula, Patella, Tarsals, Metarsals and Phalanges.

Soft tissue parts: Only outline.

Glutela region, front and back of the thigh (femoral triangle, femoral canal and inguinal canal) medial side of the thigh (adductor canal). Lateral side of the thigh, popliteal fossa, Anterior and posterior compartment of leg, sole of the foot.

Joints- Hip joint, knee joint, ankle joints of the foot.

Surface Anatomy and Radiological Anatomy of Lower Limb.

# **UNIT-IV**

# **TRUNK**

a) Osteology- Vertebra and ribs, sternum.

b) Soft tissue- Vertebral muscles & intercostals muscles

c) Joints- Costochondral, Costo vertebral, Intervertebral Joints.

#### **HEAD AND NECK**

a) –

b) Osteology- Mandible and bones of skull.

c) Joints- Temporomandibular Joints.

Surface and Radiological Anatomy of the Head & Neck.

# UNIT -V

#### **THORAX**

- a) Pleura
- b) Lungs
- c) Mediastinum
- d) Pericardium
- e) Heart
- f) Trachea
- g) Oesophagus

Surface measuring and Radiological Anatomy of Thorax.

**UNIT-VI** 

# **ABDOMEN**

Soft Tissue- Only Outline

- a) Abdominal cavity & Peritoneum
- b) Stomach
- c) Intestine
- d) Spleen
- e) Pancreas
- f) Liver & Gall Bladder
- g) Kidney & Ureter, Urinary Bladder & Urethra
- h) Diaphgram
- i) Male & Female reproductive organs.
- j) Rectum & Anal Canal.

# II- Surface measuring and Radiological Procedure Used in the study of Abdominal Organs.

# **NEURO ANATOMY**

- a) Meninges & C.S.F.
- b) Sulcuss & Gyrus and various areas of Cerebral Hemispheres.
- c) Thalamus, Hypothalamus and basal Ganglia.
- d) Cerebellum.
- e) Pons Medulla.
- f) Spinal Cord.
- g) IIIrd, IVth & Lateral Ventricles.

h) Blood Supply of Spinal Cord & Brain.Surface and Radiological Anatomy of Brain.

- a) Surface measuring
- b) Ostiology.
- c) Identification of Anatomical structures with help of models, charts, CD Rom etc.

# Paper 2<sup>nd</sup> HUMAN PHYSIOLOGY

**PRACTICALS** 

# **UNIT-I**

#### PHYSIOLOGY OF BLOOD AND CVS

- a) Composition of Blood
- b) Function of RBC WBC
- c) BLOOD groups
- d) Circulation-General Principles
- e) Cardiac cycle and output
- f) E.C.G.

# **UNIT-II**

# RESPIRATORY SYSTEM

- a) Mechanism of respiration- internal and external.
- b) Capacity and lung volumes.

# **DIGESTIVE SYSTEM**

- a) Introduction to digestive system, Alimentary functional anatomy
- b) The Salivary glands
- c) The stomach and its secretion
- d) Intestine & its secretion
- e) Function of liver

# **UNIT-III**

# **ENDOCRINAL SYSTEM**

General Principle of endocrinology

Thyroid

# Parathyroid

# **SKIN**

Structure & function of Skin.

# **UROGENITAL SYSTEM**

- a) Physiology of Kidney and Urine formation
- b) Constituent of normal urine etc.
- c) Kidney function tests
- d) Physiology of Male and Female reproductive system.

# **UNIT-IV**

- a) Reflex are.
- b) Physiology of the central nervous system.
- c) Physiology of the sympathetic and Parasympathetic nervous system.
- d) Function of Cerebrum, Cerebellum, basal ganglia, thalamus
- e) Hypothalamus, CSF and Blood brain barrier.

# **Practicals**

TLC

DLC

RBC

**Blood Pressure** 

Reflexes- Superficial & Deep

Test for functions of cerebrum

Test for function of cerebellum

# Paper 3<sup>rd</sup> Forensic Medicine/ Medical law and ethics & Professionalism and Values

#### Medical law and ethics

Legal and ethical considerations are firmly believed to be an integral part of medical practice in planning patient care. Advances in medical sciences, growing sophistication of the modern society's legal framework, increasing awareness of human rights and changing moral principles of the community at large, now result in frequent occurrences of healthcare professionals being caught in dilemmas over aspects arising from daily practice.

Medical ethics has developed into a well based discipline which acts as a "bridge" between theoretical bioethics and the bedside. The goal is "to improve the quality of patient care by identifying, analyzing, and attempting to resolve the ethical problems that arise in practice".28 Doctors are bound by, not just moral obligations, but also by laws and official regulations that form the legal framework to regulate medical practice. Hence, it is now a universal consensus that legal and ethical considerations are inherent and inseparable parts of good medical practice across the whole spectrum. Few of the important and relevant topics that need to focus on are as follows:

- 1. Medical ethics Definition Goal Scope
- 2. Introduction to Code of conduct
- 3. Basic principles of medical ethics Confidentiality
- 4. Malpractice and negligence Rational and irrational drug therapy
- 5. Autonomy and informed consent Right of patients
- 6. Care of the terminally ill- Euthanasia
- 7. Organ transplantation
- 8. Medico legal aspects of medical records Medico legal case and type- Records and document related to MLC ownership of medical records Confidentiality Privilege communication Release of medical information Unauthorized disclosure retention of medical records other various aspects.
- 9. Professional Indemnity insurance policy
- 10. Development of standardized protocol to avoid near miss or sentinel events
- 11. Obtaining an informed consent.

#### **Professionalism and Values**

The module on professionalism will deliver the concept of what it means to be a professional and how a specialized profession is different from a usual vocation. It also explains how relevant is professionalism in terms of healthcare system and how it affects the overall patient environment.

- 1. Professional values- Integrity, Objectivity, Professional competence and due care, Confidentiality
- 2. Personal values- ethical or moral values
- 3. Attitude and behavior- professional behavior, treating people equally
- 4. Code of conduct, professional accountability and responsibility, misconduct
- 5. Differences between professions and importance of team efforts
- 6. Cultural issues in the healthcare environment

# Paper 4th Pathology/Microbiology/Biochemistry

#### **Pathology**

- 1. Cellular adaptation and cell death
- 2. Inflammation and repair, infection, circulatory disorders, immune defense
- 3. Genetics of disease
- 4. Neoplasia
- 5. Cell injury and adaptation

- 6. Atrophy, hypertrophy, metaphase, hyperplasia
- 7. Classification of tumors, premalignant lesion
- 8. Types of inflammation & system manifestations of inflammation
- 9. Disorders of vascular flow & shock (brief introduction)
- 10. Oedema, hyperemia or congestion, thrombosis, embolism, infarction shock, ischemia, over hydration, dehydration
- 11. The response to infection
- 12. Categories of infectious agents, host barriers to infection
- 13. How disease is caused
- 14. Inflammatory response to infectious agents
- 15. Hematopoietic and lymphoid System
- 16. Hemorrhage, various types of anemia, leucopenia, leukocytosis, bleeding disorders coagulation mechanism.

#### **Clinical Microbiology**

- 1. Morphology
  - a. Classification of microorganisms, size, shape and structure of bacteria. Use of microscope in the study of bacteria.
- 2. Growth and nutrition
  - a. Nutrition, growth and multiplications of bacteria, use of culture media in diagnostic bacteriology.
- 3. Culture media
  - a. Use of culture media in diagnostic bacteriology, antimicrobial sensitivity test.
- 4. Sterilization and Disinfection
  - a. Principles and use of equipment of sterilization namely hot air oven, autoclave and serum inspissator, pasteurization, antiseptic and disinfectants.
- 5. Immunology
  - a. Immunity, vaccines, types of vaccine and immunization schedule, principles and interpretation of common serological tests namely Widal, VDRL, ASLO, CRP, RF & ELISA.
  - b. Rapid tests for HIV and HBsAg (excluding technical details).
- 6. Systematic Bacteriology
  - a. Morphology, cultivation, diseases caused, laboratory diagnosis including specimen collection of the following bacteria (excluding classification, antigenic structure and pathogenicity),
  - b. Staphylococci, Streptococci, Pneumococci, Gonococci, Meningococci, C. diphtheriae, Mycobacteria, Clostridia, Bacillus, Shigella, Salmonella, E. coli, Klebsiella, Proteus, Vibrio cholerae, Pseudomonas & Spirochetes.
- 7. Parasitology
  - a. Morphology, life cycle, laboratory diagnosis of following parasites: E. histolytica, Plasmodium, tape worms, Intestinal nematodes.
- 8. Mycology
  - a. Morphology, diseases caused and lab diagnosis of following fungi. Candida, Cryptococcus, Dermatophytes, opportunistic fungi
- 9. Virology
- a. General properties of viruses, diseases caused lab diagnosis and prevention of following viruses, Herpes, Hepatitis, HIV, Rabies and Poliomyelitis

#### **Biochemistry:**

- 1. Carbohydrates Glucose and Glycogen Metabolism
- 2. Proteins-Classification of proteins and functions
- 3. Lipids- Classification of lipids and functions
- 4. Enzymes- Definition, Nomenclature, Classification, Factors affecting enzyme activity, Active site. Coenzyme, Enzyme Inhibition, Units of enzymes, Isoenzymes and Enzyme pattern in diseases
- 5. Vitamins & Minerals- Fat soluble vitamins (A, D, E, K), water soluble vitamins, B-complex vitamins, principal elements (Calcium, Phosphorus, Magnesium, Sodium, Potassium, Chlorine and Sulphur), trace elements, calorific

value of foods, Basal Metabolic Rate (BMR), Respiratory Quotient (RQ), Specific Dynamic Action (SDA), balanced diet, Marasmus and Kwashiorkor

- 6. Acids and bases-Definition, pH, Henderson Hassel Balch equation, Buffers, Indicators, Normality, Molarity, Molality
- 7. Hormones
- 8. Applied Chemistry:
  - a. Nomenclature of compounds containing Halogen. Alcohols and Phenols. Ethane, Propane, Ether, Aldehydes, Ketones, Carboxylic acid, Cyanides, Isocyanides, Nitrogen compounds and amines.
  - b. Catalysis.
  - c. Hemoglobin, Blood and respiration.

# Paper 5<sup>th</sup> PREVENTIVE MEDICINE AND HEALTH CARE

#### **UNIT-I**

Water, air, and noise Pollution: Removal of water hardness, purification of water and standards of water quality. Air and Pollution and their prevention. Housing and air conditioning.

Hygiene and sanitation: Sanitation barriers, excreta disposal and disposal of hospital waste. Incineration and disinfection.

Infections and control: Microbial Pathogenecity, source and spread of infection in community, pathogenesis, toxigenicity, invasiveness, variations and virulence, host factors controlling infections to men, mode of spread and their control by physical & chemical agents.

#### **UNIT-II**

Epidemiology: Epidemiology, surveillance and control of community infections. Role of laboratory in community and hospital infections. Emergence of drugs resistance. Methods of prevention and control-Isolation of patients, quarantine and incubation periods of various infectious diseases. Management of patients infectious disease hospital (IDH).

Prophylactic immunization: Rationale of immunization, immune response and duration of immunity, controlled studies of prophylactic Vaccines and hazards immunization. Various national immunization programs and vaccine schedule.

Reproductive, Family Planning & Child Health Care Programs.

### **UNIT-III**

- 1. Health care by balance diet and yoga: Normal constituents of diet, various diet programs, balanced diet and factors responsible for etiology of various nutritional disorders. Carcinogens in food, Role of regular exercise and yoga in prevention and management of various diseases.
- 2. Health Planning and Management: Health planning, Planning cycle, malaria eradication and various other national health policy and programs.

# **OTT Directed Clinical Education - part I (studentship)**

Students will observe the basic operations of the operation theatre while interacting with the multidisciplinary team members involved in providing optimal care to the patients. The student will be introduced to terminologies, equipment, and techniques used for preparation and management of the OT.

#### **BOTT - 2<sup>ND</sup> YEAR**

SR. NO.CODE	SUBJECT	THEORY	THEORY INTERNAL	TOTAL	PRACTICAL	INTERNAL	TOTAL
1.	PRINCIPLES OF MANAGEMENT	70	30	100	-	-	-
2	QUALITY CONTROL AND PATIENT SAFETY	70	30	100	70	30	100
3	MEDICINE AND CLINICAL PHARMOCOLOGY	70	30	100	70	30	100
4.	PRINCIPLES OF ANESTHESIA	70	30	100	-	-	-
5.	BASIC TECHNIQUE OF ANESTHESIA	70	30	100	70	30	100

Paper 1st Principles of management

# 1. Principles of management:

- a. Development of Management: Definitions of Management Contributions of F.W. Taylor, Henry Fayol and others.
- b. Functions of Management: Planning Organizing Directing Controlling Planning: Types of planning Short-term and long plans Corporate or Strategic Planning Planning premises Polices Characteristics and sources principles of policy making Strategies as different from policies Procedures and methods–Limitations of planning.
- c. Organizing: Importance of organization Hierarchy Scalar chain Organization relationship Line relationship Staff relationship Europeanization Functional relationship Committee organization Management committees Depart mentation.
- d. Motivation: Motivation theories McGregor's theory X and theory Y Maslow's and Herzberg's theory Porter and Lawler model of complex view of motivation– Other theories Diagnostic signs of motivational problems Motivational Techniques.
- e. Communication: Types of communication Barriers of effective communication– Techniques for improved communication.
- f. Directing: Principles relating to Direction process Principles and theories of leadership Leadership Styles Delegation of authority.
- g. Controlling: Span of control Factors limiting effective span of control Supper management, General managers, Middles managers and supervisors Planning and controlling relationships Management control process Corrective measures Strategic control points Budgetary control Types of budgets.
- h. Co-ordination: Co-ordination and co-operation Principles of co-ordination Techniques of co-ordination charts and records Standard procedure instructions.

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Objective of Personnel Management – Role of Personnel Manager in an organization – Staffing and work distribution techniques – Job analysis and description – Recruitment and selection processes – Orientation and training – Coaching and counselling – disciplining – Complaints and grievances – Termination of employees – Performance appraisal – Health and safety of employees - Consumer Protection Act as applicable to health care services.

# 3. Financial management:

Definition of financial Management – Profit maximization – Return maximization – wealth maximization – Short term Financing – Intermediate Financing – Long term Financing – leasing as a source of Finance – cash and Security Management – Inventory Management – Dividend policies – Valuations of Shares – Financial Management in a hospital – Third party payments on behalf of patients. Insurance – health schemes and policies.

# Paper 2<sup>nd</sup> Quality control and patient safety

- 1. Quality assurance and management The objective of the course is to help students understand the basic concepts of quality in health Care and develop skills to implement sustainable quality assurance program in the health system.
  - a. Concepts of Quality of Care
  - b. Quality Improvement Approaches
  - c. Standards and Norms
  - d. Quality Improvement Tools
  - e. Introduction to NABH guidelines
- 2. Basics of emergency care and life support skills Basic life support (BLS) is the foundation for saving lives following cardiac arrest. Fundamental aspects of BLS include immediate recognition of sudden cardiac arrest (SCA) and activation of the emergency response system, early cardiopulmonary resuscitation (CPR), and rapid defibrillation with an automated external defibrillator (AED). Initial recognition and response to heart attack and stroke are also considered part of BLS. The student is also expected to learn about basic emergency care including first aid and triage. Topics to be covered under the subject are as follows:
  - a. Vital signs and primary assessment
  - b. Basic emergency care first aid and triage
  - c. Ventilations including use of bag-valve-masks (BVMs)
  - d. Choking, rescue breathing methods
  - e. One- and Two-rescuer CPR
  - f. Using an AED (Automated external defibrillator).
  - g. Managing an emergency including moving a patient

At the end of this topic, focus should be to teach the students to perform the maneuvers in simulation lab and to test their skills with focus on airways management and chest compressions. At the end of the foundation course, each student should be able to perform and execute/operate on the above mentioned modalities.

- 3. Bio medical waste management and environment safety- The aim of this section will be to help prevent harm to workers, property, the environment and the general public. Topics to be covered under the subject are as follows:
  - a. Definition of Biomedical Waste
  - b. Waste minimization
  - c. BMW Segregation, collection, transportation, treatment and disposal (including color coding)
  - d. Liquid BMW, Radioactive waste, Metals / Chemicals / Drug waste
  - e. BMW Management & methods of disinfection
  - f. Modern technology for handling BMW
  - g. Use of Personal protective equipment (PPE)

- h. Monitoring & controlling of cross infection (Protective devices)
- 4. Infection prevention and control The objective of this section will be to provide a broad understanding of the core subject areas of infection prevention and control and to equip AHPs with the fundamental skills required to reduce the incidence of hospital acquired infections and improve health outcomes. Concepts taught should include
  - a. Evidence-based infection control principles and practices [such as sterilization, disinfection, effective hand hygiene and use of Personal protective equipment (PPE)],
  - b. Prevention & control of common healthcare associated infections,
  - c. Components of an effective infection control program, and
  - d. Guidelines (NABH and JCI) for Hospital Infection Control
- 5. Antibiotic Resistance
  - a. History of Antibiotics
  - b. How Resistance Happens and Spreads
  - c. Types of resistance- Intrinsic, Acquired, Passive
  - d. Trends in Drug Resistance
  - e. Actions to Fight Resistance
  - f. Bacterial persistence
  - g. Antibiotic sensitivity
  - h. Consequences of antibiotic resistance
  - i. Antimicrobial Stewardship- Barriers and opportunities, Tools and models in hospitals
- 6. Disaster preparedness and management- The objective of this section will be to provide knowledge on the principles of on-site disaster management. Concepts to be taught should include
  - a. Fundamentals of emergency management,
  - b. Psychological impact management,
  - c. Resource management,
  - d. Preparedness and risk reduction,
  - e. Key response functions (including public health, logistics and governance, recovery, rehabilitation and reconstruction), information management, incident command and institutional mechanisms.

# Paper 3<sup>rd</sup> Medicine/ CLINICAL PHARMACOLOGY

#### Medicine

- 1. Common symptoms of diseases
  - a. Pain: pathophysiology, clinical types, assessment and management  $% \left( 1\right) =\left( 1\right) \left( 1\right)$
  - b. Fever: clinical assessment and management
  - c. Cough, chest pain, dyspnoea, hemoptysis
  - d. Edema, anasarca, ascites
  - e. Pallor, jaundice
  - f. Bleeding
  - g. Anorexia, nausea and vomiting
  - h. Constipation and diarrhea
  - i. Hematemesis, malena and hematochezia
  - j. Common urinary symptoms- dysuria, pyuria, anuria, oliguria, polyuria, nocturia, enuresis
  - k. Body pains and joint pains

- l. Headache, seizures, fainting, syncope, dizziness, vertigo
- m. Disturbances of consciousness and coma
- n. Weight loss and weight gain
- 2. Immune Response and Infections
  - a. Approach to infectious diseases diagnostic and therapeutic principles
  - b. Immune defense mechanisms
  - c. Laboratory diagnosis of infections
  - d. Principles of immunization and vaccine use
  - e. Immunodeficiency disorders acquired
  - f. Immunodeficiency disorders congenital

#### 3. Systems

- a. Cardiovascular system- Clinical examination of the cardiovascular system, major manifestations of cardiovascular disease
- b. Respiratory system Clinical examination of the respiratory system, major manifestations of respiratory disease
- c. Renal and genito-urinary system- Major manifestations of renal and urinary tract disease
- d. Liver and biliary tract disease Viral hepatitis, alcoholism.
- e. Endocrinology and metabolism Diabetes mellitus, Hyper and hypothyroidism.
- f. Disorders of the Immune System, Connective Tissue and Joints
- g. Disorder of haemopoesis Anemia iron deficiencies anemia.

#### **CLINICAL PHARMACOLOGY**

- 1. Antisialagogues: Atropine, Glycopyrrolate.
- 2. Sedatives I Anxiolytics: Diazepam, Midazolam, Phenergan, Lorazepam, Chlorpromazine, and Triclofos.
- 3. Narcotics: Morphine, Pethidine, Fentanyl, Pentazozine, tramadol.
- 4. Antiemetic's: Metoclopramide, Ondanseteron, Dexamethasone
- 5. Induction Agent: Thiopentone, Diazepam, Midazolam, Ketamine, Propofol, Etomidate.
- 6. Muscle Relaxants: Depolarizing Suxamethonium, Non depolarizing Vecuronium, Atracurium, rocuranium
- 7. Inhalational Gases: Gases-02, N20, Air, Agents-Ether , Halothane, Isofllurane, Saevoflurane, Desflurane
- 8. Reversal Agents: Neostigmine, Glycopyrrolate, Atropine, Naloxone, Flumazenil (Diazepam).
- 9. Local Anesthetics: Xylocaine, Bupivacaine Topical, Prilocaine-jelly, Emla Ointment, Etidocaine. Ropivacaine.
- 10. Emergency Drugs: Mode or administration, dilution, dosage and effects
  - a. Adrenaline, Atropine
  - b. Ephedrine, Mephentramine

# paper 4th Principles of anesthesia

- 1. Medical gas supply
  - a. Compressed gas cylinders
  - b. Color coding
  - c. Cylinder valves; pin index.
  - d. Gas piping system
  - e. Recommendations for piping system

- f. Alarms & safety devices.
- g. Scavenging of waste anesthetic gases
- 2. Anesthesia machine
  - a. Hanger and yoke system
  - b. Cylinder pressure gauge
  - c. Pressure regulator
  - d. Flow meter assembly
  - e. Vaporizers types, hazards, maintenance, filling and draining, etc.
- 3. Breathing system
  - a. General considerations: humidity & heat
  - b. Common components connectors, adaptors, reservoir bags.
  - c. Capnography
  - d. Pulse oximetry
  - e. Methods of humidification.
  - f. Classification of breathing system
  - g. Mapleson system a b c d e f
  - h. Jackson Rees system, Bain circuit
  - i. Non rebreathing valves Ambu valves
  - j. The circle system
- 4. Face masks & Airway laryngoscopes
  - a. Types, sizes
  - b. Endotracheal tubes Types, sizes.
  - c. Cuff system
  - d. Fixing, removing and inflating cuff, checking tube position, complications.
- 5. Anesthesia ventilator and working principles
- 6. Monitoring
  - a. Electrocardiography(ECG)
  - b. Pulse oximetry(Sp02)
  - c. Temperature- central and peripheral
  - d. End tidal carbon dioxide( EtCO2)
  - e. Anesthesia gas monitoring
  - f. Non-invasive blood pressure (NIPB) and Invasive blood pressure(IBP)
  - g. Central venous pressure(CVP)
  - h. PA Pressure, LA Pressure & cardiac output
  - i. Anesthesia depth monitor
  - j. Neuromuscular transmission monitor

# Practical

- 1. Supply of compressed gases:
  - a. Types of gases and their chemical and physical properties.
  - b. Types of containers.
  - c. Their checking and maintenance.
  - d. Types of compressors.
  - e. Structure and mechanism of various type of gauges, liquid oxygen storage and supply system.
- 2. Structure of reducing valves
  - a. Mechanism of pressure reducing valves.
  - b. Their maintenance and safety checks
- 3. Structure and mechanism of flow meters, maintenance and safety checks
- 4. Volatile anaesthetic agents.
  - a. Selection of material to be used for containers of the volatile anaesthetic agents.
  - b. Structure of different types of vaporizers.
  - c. Principles of various vaporizers, their maintenance and safety precautions.
- 5. Types of circuits:

- a. Open, Semi closed and closed circuits.
- b. Non-rebreathing valves.
- c. T-piece circuit and its modifications.
- d. To and fro system and circle absorber.
- 6. Types of valves used in the different circuits. Structure and working of Heidbrink's valve, Rubin valve nu-man valve etc.
  - c. Bicarbonate, calcium, potassium.
  - d. Inotropes: dopamine, dobutamine, amidarone
  - e. Aminophylline, hydrocortisone, antihistaminic,
  - f. Antihypertensive -Beta-blockers, Ca-channel blockers.
  - g. Antiarrhythmic- xylocard
  - h. Vasodilators- nitroglycerin & sodium nitroprusside
  - i. Respiratory system- Bronchodilators
  - j. Renal system- Diuretics, frusemide, mannitol

#### Paper 5th Basic techniques of anesthesia

- 1. Resuscitation techniques:
  - a. Basic life support (Airway, breathing, circulation) and the equipment used for it.
  - b. Drugs used in CPR.
  - c. AED and Defibrillators.
- 2. Anesthesia drugs and techniques:
  - a. Principles of anesthesia.
  - b. Basics of general anesthesia depth, mechanism and intubation.
  - c. Techniques of general anesthesia.
  - d. Various intravenous and inhalational agents.
  - e. Regional anesthesia, spinal and epidural, posture and drugs.
  - f. Local Anaesthetic agents.
  - g. Neuro muscular blocking agents.
  - h. Principles of oxygen administration along with the apparatus.
  - i. Care of patient in the recovery room.
  - j. Post-operative pain: evaluation and management.
  - k. Types of fluid and therapy.
  - l. Blood and blood components transfusion.
  - m. Preparation of anesthesia machine, intubation kit, suction machine, anesthesia drugs.
  - n. Patient identification, marking, shifting to OT before surgery and out of OT to recovery room after surgery, complete takeover and handover of the patient with vital signs recording before and after surgical procedure to the nursing staff.

#### **Practical**

- 1. Anesthesia work station
- 2. Boyle's anesthesia apparatus and other Advanced Anesthesia machines.
- 3. Apparatus and technique of the intravenous injections:
  - a. Selection of the material used for intravenous injection.
  - b. Different types of intravenous needles and cannulas.
  - c. Theoretical study for testing of the toxicity of the materials.
- 4. Resuscitation equipment and Resuscitation techniques:
  - a. Endotracheal tubes:
    - ☐ Selection of the material used for the endotracheal tube
    - 2 Study of the structure of various types of the endotracheal tubes. Cleaning and sterilization of ETT.
  - b. Connectors: Various connectors, size and material used.

- c. Mask: Material, structure and importance of dead space of face mask.
- d. Supraglottic airways.
- e. Spinal and epidural blocks: equipment, types of spinal and epidural needles, their structure. Instruments used for spinal and epidural blocks.
- f. Laryngeal sprays: Types, structure and material used, mechanism, uses and their maintenance.

# **OTT Directed Clinical Education - part II (studentship)**

Students will improve their skills in clinical procedures. Progressive interaction with patients and professional personnel are monitored as students practice in a supervised setting. Additional areas include problem solving, identifying machine components and basic side effect management. Students will demonstrate competence in beginning, intermediate, and advanced procedures.

#### **BOTT - 3RD YEAR**

SR. NO.CODE	SUBJECT	THEORY	THEORY INTERNAL	TOTAL	PRACTICAL	INTERNAL	TOTAL
1.	BASIC OF SURGICAL PROCEDURE/SPECILIZES SURGERY AND ANESTHESIA	70	30	100	70	30	100
2	CSSD PROCEDURES	70	30	100	70	30	100
3	ADVANCED ANESTHESIA TECHNIQUE	70	30	100	70	30	100
4.	BASIC INTENSIV CARE	70	30	100	-	-	-
5.	ELECTRONIC AND TECHNOLOGY IN SURGERY AND ANESTHESIA.	70	30	100	70	30	100

# Paper 1st Basics of surgical procedures/ Specialized anesthesia and surgery

# **Basics of surgical procedures**

- 1. Blood Transfusion
  - a. History of discovery of blood groups and genetics of blood groups.
  - b. Types of blood groups and Rh factor.
  - c. Coombs test.
  - d. Collection of blood, its preservation and standardization.
  - e. Various types of blood and blood products(Packed cells, PRP, FFP)
  - f. Pre-transfusion checks.
  - g. Transfusion reactions.
  - h. Fluids and electrolytes
  - i. Body fluid compartments and the effect of fluid administration on them.
  - j. Types of fluids (crystalloids and colloids) and their chemical composition.
  - k. Indications of specific fluids and their complications.
- 2. General surgical procedure and para-surgical equipment
  - a. Operating tables: structure, material used, maintenance, control, Hydraulic system and Electrical system.
  - b. Different types of diathermy machine. Monopole, Bipolar, Ligasure, Harmonic Scalpel, CUSA- Principle, hazards, prevention, functioning and maintenance.
  - c. Types of operation lights and light sources: Features, Care, cleaning, sterilization and maintenance.
  - $d.\ Operation\ The atre sterilization-\ Different\ recent\ advances.$

- e. LAR/APR--Positioning of patient, care-Prevention of hazards.
- f. Total thyroidectomy—with emphasis on proper positioning.
- g. Transthoracic esophagectomy—Different approaches.
- h. Venesection and Tracheostomy.
- i. Laproscopic Cholecystectomy Pneumoperitonium Creation and removing, principles.
- j. Nephrectomy.
- k. Breast surgery.
- l. Positioning of patient for different operations: Problems and hazards.
- m. Hypothermia and hyperthermia.

#### Specialized anesthesia and surgery

- 1. Cardiovascular and Respiratory System- Techniques, equipment, procedures and instruments
  - a. Diseases of cardiovascular and respiratory systems.
  - b. Types of perfusion machines.
  - c. Techniques of Perfusion and operational capabilities.
  - d. Intra-aortic Balloon pump.
  - e. Cell saver techniques.
  - f. Care, maintenance and working of Heart lung Machine.
  - g. Patient's record keeping preoperatively, during anesthesia and post-operatively.
  - h. Principles and techniques of temperature monitoring.
  - i. Positioning during cardiothoracic surgical procedures.
  - j. Positioning and techniques for:
    - 2 Radial artery cannulation.
    - Central venous cannulation/pulmonary artery catheter.
    - ② Femoral artery/venous cannulation.
- 2. Monitoring Techniques and Equipment:
  - a. Cardiac monitors, blood pressure and ECG monitoring.
  - b. Respiratory monitors, respiratory rate, Spirometers, SpO2, and EtCO2.
  - c. Temperature monitors.
  - d. TEE and echocardiography machine
  - e. Non- invasive cardiac output machine
- 3. Positioning
  - a. During various neurosurgical procedures including sitting, prone, lateral and position for transsphenoidal hypo-physectomy.
  - b. Fixation of head during various neurosurgical procedures.
  - c. Prone and Knee chest position for spine surgery.
- 4. Requirements during intubation in a case of cervical spine fracture including fiber- optic laryngoscopy, awake intubation, LMA family especially ILMA.
- 5. Anaesthetic and surgical requirements during aneurysm surgery.
- 6. Surgical and Anaesthetic requirements during micro neurosurgery including types of microscopes, principle, structural features, microscopic photography and cameras used.
- $7.\ An aesthetic\ and\ surgical\ requirements\ during\ thyroid\ surgery,\ adrenal\ surgery.$
- 8. Anaesthetic and surgical requirements during abdominal surgery including Laproscopic surgery, genitourinary surgery including percutaneous nephrolithotomy, Endoscopic surgery, TURP, TURBT, Lithotripsy, ESWL (Extracorporeal shock wave therapy)
- 9. Anaesthetic and surgical requirement during renal transplant donor and recipient surgery including care and precautions during operative procedures of hepatitis B & hepatitis C positive patients.
- 10. Anaesthetic and surgical requirement during pediatric and Neonatal surgical procedures including emergency procedures like tracheo-esophageal fistula. Sub diaphragmatic hernia, major abdominal and thoracic procedures. Foreign body bronchus and esophagus.
- 11. Apparatus and techniques for measuring blood pressure and temperature.

- 12. Principle and working of direct/Indirect blood pressure monitoring apparatus.
- 13. Intraoperative and postoperative problems and complications of general surgery.
- 14. Management of emergency caesarean section.
- 15. Management of massive obstetrical hemorrhage.
- 16. Surgical management in major burns and craniofacial surgery.
- 17. Surgical management of joint replacement and arthroscopy.
- 18. Surgical management of endoscopies, laryngectomy with RND and cochlear implant.
- 19. Management of PPV and perforating eye injury.
- 20. Care and maintenance of Para-surgical equipment (Cautery, OT Lights, OT Table etc.)

# Paper 2<sup>nd</sup> CSSD procedures

- 1. Principles of sterilization and disinfection.
- 2. Methods of sterilization
- 3. Dry Sterilization.
- 4. Wet sterilization.
- 5. Gaseous sterilization.
- 6. Chemical sterilization.
- 7. Sterilization by radiation (Gamma rays, ultraviolet rays)
- 8. Techniques of sterilization of rubber articles. (LMA, FOB, ETT, Laryngoscopes, Anesthesia machines and circuits.)
- 9. Technique of sterilization of carbonized articles.
- 10. Methods of disinfection.
- 11. Boiling.
- 12. Chemical disinfection.
- 13. Hazards of sterilization.
- 14. Prevention of hazards of sterilization.
- 15. Precautions to be taken during sterilization.
- 16. Recent advances in the methods of sterilization.

# Paper 3<sup>rd</sup> Advance anesthesia techniques

- 1. Heart as a pump.
- 2. Cardiac cycle.
- 3. Cardiac contractility and stroke volume.
- 4. Cardiac output and its measurement.
- 5. Various ECG Leads, their placement and Normal ECG.
- 6. Cardiac Arrhythmias (atrial fibrillation, ventricular tachycardia, extra systoles)
- 7. Circulatory shock and its physiology.
- 8. Cardiac failure.
- 9. Physics of blood flow and pressure.
- 10. Measurement of blood flow.
- 11. Electromagnetic flow meter, ultrasonic flow meter, plethysmography.
- 12. Regulation of arterial pressure and hypertension (Drugs used for treatment of hypertension)
- 13. Arterial circulation including cardiopulmonary bypass.
- 14. Artificial ventilation and related equipment:

- a. Physiology of IPPV (Intermittent positive pressure ventilation)
- b. Principles of mechanical ventilation.
- c. Various modes of IPPV.
- d. Automatic pressure and time cycled ventilators.
- e. Operating room ventilators.
- f. Other types of ventilators (HFIV, NIV)
- g. Complications in patients on ventilators.
- h. General care of a patient on ventilator.
- i. Disinfection and sterilization of ventilators.
- j. Humidification
- k. Principles of oxygen administration and methods used to deliver oxygen.
- l. Acid base balance.
- m. Electrolyte imbalance and its relevance to anesthesia.

#### Paper 4th Basic Intensive care

- 1. Care and maintenance of ventilators, suction machine, monitoring devices.
- 2. Sterilization and disinfection of ventilators.
- 3. Care, maintenance and operational capabilities of beds, lights and other apparatus.
- 4. Air conditioning and control of pollution in ICU.
- 5. Attachment and intraoperative utility of ventilators and monitoring devices.
- 6. Care of unconscious adult and pediatric patients.
- 7. Physiotherapy techniques, feeding, Ryle's tube insertion and hyper alimentation.
- 8. Suctioning and posturing of semiconscious and unconscious patients.
- 9. Oxygen therapy, maintenance of clear Airway.
- 10. Ventilation of patient in crisis:
- 11. Mouth to mouth.
- 12. Mouth to ET Tube.
- 13. Resuscitator/ bag valve mask assembly
- 14. Different types of Airways.
- 15. Short term ventilation/ Transport ventilators.
- 16. ICU Laboratory; Detection of blood gases of the patient, Principles of ABG machines.
- 17. Management of asepsis.
- 18. Management of tetanus patient.
- 19. Psychological aspects of the patient, relative and staff.
- 20. Hemofiltration and hemodialysis.
- 21. Ventilators: Principles of working of different ventilators:
  - a. Volume cycled/Time cycled/Pressure cycled ventilators.
  - b. High frequency ventilators and other types.
  - c. Methods of measuring the expired gases from the patient; Types of spirometers, Principles of working of spirometers. Clinical application of above apparatus.
  - d. Apparatus and techniques of measuring of blood pressure and temperature; Principle and working of direct/indirect blood pressure monitoring apparatus; structure, principle and working of the oscillotonometer. Principles and working of aneroid manometer type B.P. instrument.
  - e. Laryngeal sprays; Types, material, principle and mechanism.

f. Monitoring techniques and equipment; Cardiac monitors, Respiratory monitors, Spirometers, Temperature monitors.

# Paper 5th Electronics and technology in surgery and anesthesia

- 1. Electronics and electro mechanical techniques
  - a. Electrical safety precautions in operation theatre. OT tables, OT lights, suction machines, electrodes, pressure transducers, electrical safety, application, handling operation.
  - b. Basic electronics, basic principle, care and maintenance and uses of surgical diathermy machine, defibrillator, Boyle's apparatus, anesthesia machine, monitors, pace-makers and stimulators etc.
  - c. Engineering aspects of operation theatre equipment, power supplies, CVT, servo-stabilizers, and ups etc.
- 2. Book keeping and Stock maintenance.
  - a. Moral aspects and duties of OT technologist.
  - b. Indenting, Book keeping and storage procedures of different articles.
  - c. Co-ordination with all working personal in operation Theatre.
  - d. Psychological aspects of patient, staff and relatives of the patient.
  - e. Management of operation theatre in routine and emergency.
- 3. Computer data processing, software information and Data management
  - a. Logging on and off, Security concepts, Sending and receiving Emails.
  - b. Hospital information system.

#### OTT Directed Clinical Education - part III (studentship)

This course is the final in a series of five directed clinical courses. The student will complete the clinical training by practicing all the skills learned in classroom and clinical instruction.

#### **INTERNSHIP**

The internship time period provides the students the opportunity to continue to develop confidence and increased skill in simulation and treatment delivery. Students will demonstrate competence in beginning, intermediate, and advanced procedures in both areas. Students will participate in advanced and specialized treatment procedures. The student will complete the clinical training by practicing all the skills learned in classroom and clinical instruction. The students are expected to work for minimum 8 hours per day and this may be more depending on the need and the healthcare setting.

# Skills based outcomes and monitorable indicators for Operation Theatre Technologist

Competency statements

- 1. Demonstrate ability to prepare and maintain Operation Theater
- 2. Demonstrate ability to maintain equipment support in an acute care environment
- 3. Identify and move to maintain a sterile field
- 4. Follow infection control policies and procedures
- $5.\,Manage\,and\,maintain\,theater\,equipment$
- 6. Demonstrate ability to prepare the patient for operative procedures
- 7. Provide intra-operative equipment and technical support
- 8. Demonstrate skills and knowledge to assist anesthetist in handling emergencies outside of OT Room
- 9. Manage hazardous waste and follow biomedical waste disposal protocols
- 10. Ensure availability of medical and diagnostic supplies
- 11. Monitor and assure quality

- 12. Act within the limits of one's competence and authority
- $13.\,Work\,effectively\,with\,others$
- 14. Manage work to meet requirements
- 15. Maintain a safe, healthy, and secure working

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