

**King George's Medical University Uttar Pradesh,**

**Lucknow, India**

**Ordinances for  
PDCC  
In  
Trauma Counseling & Trauma  
Rehabilitation (TCTR)**

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## 1. Goal:

In response to national demand the Department of Trauma Surgery, King George's Medical University has introduced the PDCC in Trauma Counseling & Trauma Rehabilitation (TCTR). This is the first PDCC TCTR coursework program of its kind in India providing you the opportunity to extend your knowledge of trauma care through counseling & rehabilitation, including post trauma care, Emergency Safety management, Disaster preparedness and management, Basic life Support (BLS) trainings, and many more, whose prime motto is to prepare skill manpower or trainers for Trauma Counseling & Rehabilitation.

In recognition of the importance of Trauma Counseling & Trauma Rehabilitation as a specialty in prevention of post-traumatic stress disorder & other traumatic events, the PDCC in Trauma Counseling & Rehabilitation (TCTR) has been initiated Trauma Surgery Department who is involved with teaching, training & research trauma prevention and management that would give participants the training, necessary to implement a systematic, evidence-based treatment approach for diverse forms of trauma & post trauma implementing a coherent treatment process as well as tackle co-morbidities associated with Trauma.

The length of the course allows for trauma treatment skills to be covered in depth and breadth; ensuring that participants are able to develop a comprehensive treatment approach.

## 2. Objective of the program:

- To prepare our community for disaster and emergency situation, from post-traumatic stress and provide opportunities for community-based life-long learning by offering courses of general interest to the community for personal development & skill based training for proper handling and management of emergency situations.
- To resource patient or people to help them to get their life back on track by proper counseling and proper rehabilitation.
- This course is designated to offer advanced education and clinical skills with specialized knowledge and skills in curative, preventive and primitive aspects of Post Trauma care.
- Promote the development of collaborative working, decision making, independent practice, communication, teamwork and leadership.
- Provide a thriving learning environment where you will explore current clinical and organizational practice, locally and within the wider health and social care policy context.
- Foster originality in the application of knowledge, together with a practical understanding of how research paradigms and enquiry are used to create and interpret knowledge in trauma care practice.

- Enable you to develop an understanding of the psychosocial effects of the patient journey and the holistic approach to family and patient-centered care.

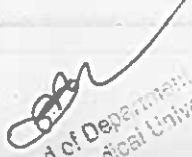
### 3. Scope of the program:

At the end of the course, the student will:

- Described the concept and principals of trauma Counseling and Trauma Rehabilitation.
- To work on the causes & overcome of PTSD
- Analyze trauma care system & post-hospital/patient care.
- Can give first aid or primary treatment in emergency and trauma cases
- Is well aware of concepts of "Golden Hours", "Stay & play", "Scoop & run".
- Can very well perform CPR, BLS and can measure vitals sign and symptoms.
- Can safely use emergency drugs and treatment.
- Conduct research and development on various aspect of Trauma Rehabilitation
- Teach and supervise other, allied health worker's family and community.
- Participate effectively as a member of Trauma care in emergency cases.
- Understand the outcomes of major trauma including extremes of age.
- Be familiar with principles of quality assurance process and organization of disaster response

### 4. ADMISSION TERMS AND CONDITIONS

1. There shall be entrance and exit examination.
2. The examinations will be conducted by the Controller of Examinations.
- 3 the non-refundable application fees rs. 10,000 include the fee for entrance examination.
4. The entrance examination will be multiple choice types with one paper of 100 questions each of one mark. The questions will be prepared by the Faculty of the department where the course is being run.
5. Short listed candidates will be called for interview, which will be convened by the Controller of Examinations. The interview board shall consist of the Dean of the faculty- chairperson, the head of the department, faculty in charge of the course, a vice chancellor nominee, and a Prof. of the University of Sc and OBC categories each. Marks for the interview will be 10.
6. Candidates have to secure a minimum of 50% marks in Theory for short listing for interview and 50% marks in interview for selection. Both marks will be added for final selection.
7. For exist examination the fee will be rs.30, 000 and will be updated by the university from time to time.
8. For appearing in the Exit examination, the candidate should have an attendance of least 80% to be certified by the course coordinator and Head of department. The course Coordinator and HOD have also to certify that the candidate has learnt the skills for which the candidate has enrolled.

  
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9. There shall be two theory papers. One with multiple choice questions of 100 questions (1 mark each) to be completed in 120 minutes and second with short answer type questions with 10 questions (10 marks each) in 120 minutes. Both will be completed on the same day.

10. For practical Examination there shall be 4 examiners, two internal namely the head of the Department and the course Coordinator and two external examiners. Practical will be of 200 marks.

11. Candidate should get a minimum of 75% marks in MCQ paper and 50% marks in Short answer questions and 50% in Practical marks to pass the examination.

12. At the end of the examination the result will be submitted by the COE to the Dean and the Course Coordinator.

## 5. ORGANISATIONS OF THE COURSE

Duration: Duration of the course is one academic year

### 7.1 Distribution of the course in weeks:

- Teaching Theory & Clinical practice .....28 weeks
- Internship & Report ..... 12 weeks
- Examination (including preparation) ..... 2 weeks
- Vacation .....As per KGMU Rules
- Public holidays .....As per KGMU Rules

## 6. COURSE CONTENTS:


The curriculum of the course shall consist of theory papers and dissertation as under:

Theory Paper: There shall be 4 papers of 100 marks each

Project Report/Dissertation + Viva: 100 marks

## COURSE STRUCTURE

Paper No.	Title of the Paper	Max. Marks
Paper – I	Trauma & Trauma Care	100
Paper – II	Trauma Counseling	100
Paper – III	Trauma Therapy & Rehabilitation	100
Paper – IV	EMS(Emergency Medical System) & Trauma Care Training courses	100
Paper – V	Internship (Report)	100
<b>Total Marks</b>		<b>500</b>

  
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## 7. Distribution of Marks-

Category	% Marks
Theoretical paper	70%
Internal	10%
Viva	10%
Attendance	5%
Assignment	5%

## 8 CONDITIONS FOR ADMISSIONS TO EXAMINATION

### The Student

1. Has attended not less than 75% of the theoretical instructions hours in each subject during the one year.
2. Has done not less than 75% of the clinical practical hours. However, students should make up 100% of attendance for integrated practice experience and internship in term of hours and activities before awarding the certificate.

## 9 EXAMINATION

The examinations will be conducted by Controller of Examinations of the University.

## 10 CERTIFICATION:

### 10.1 TITLE- PDCC in Trauma Counseling & Trauma Rehabilitation (TCTR)

10.2 A PDCC TCTR is awarded upon successful completion of the prescribed study which will state that


- Candidate has completed the prescribed course of Trauma Counseling & Trauma Rehabilitation.
- Candidate has had clinical experience at hospital.
- Candidate has passed the prescribed examination.

## 11 Hostel accommodation:

Hostel accommodation will be subject to availability of the same in the university

## 12 PDCC in Trauma Counseling & Trauma Rehabilitation (TCTR)

All the administrative work related to PDCC in TCTR will be done at the Department of Trauma Surgery, King Georg's Medical University, U.P; staff at department will be entrusted with the responsibility of handling any work/papers related to the program.

  
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### 13 PDCC TCTR Fee Structure

Fee	Amount	Account	Refundable/Non Refundable
Application Fee	Rs. 10,000	COE	Non-Refundable
Registration Fee	Rs. 5,000	Dean	Course Fee
Tuition Fee	Rs. 25,000	Concerned Department	
Other University Fee	Rs. 25,000	KGMU	Fee for Chemical/ Consumable as per Deptt. Advice
Library Fee	Rs. 1,000	Library	
Exam Fee	Rs. 20,000	COE	
Caution Money	Rs. 10,000	KGMU	Refundable
Fee for Chemical/ Consumable as per Deptt. Advice		Concerned Department	

### 14 Seats:

17.1. The course can only be started any year if a minimum of 10 candidates are found eligible and selected for the course. The maximum permissible seats will be 25.


17.2. The existing State Government policy for reservation of seats will be applicable.

### 15 Eligibility

Post graduate in any stream/BDS/BHMS/BUMS/BAMS/MBBS.

### 16 Cancellation of Candidature:

The registration in PDCC in TCTR is liable to be cancelled in case of non-deposition of fees, misconduct, and absence from work without information if the candidate is found ineligible at a later time.

  
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## SYLLABUS AND CURRICULUM

### OF

## PDCC in Trauma Counseling & Trauma Rehabilitation (TCTR)

### Paper I

### Trauma & Trauma Care

#### Unit I

##### Understanding Trauma

- Definition of Trauma
- Scope of Traumatic Events
- Components of Traumatic Life Events
- Impact of Trauma on Health and Well Being
- Compassion Fatigue and Posttraumatic Growth– Understanding Yourself and Knowing when to Say NO

#### Unit II

##### Overview of the Cognitive, Affective, Behavioral and Neurological Squealed Associated with Trauma Understanding the Effects of Trauma Response to Trauma

- Emotional Response
- Cognitive Response
- Behavioral Response
- Physical Response

#### Unit III


- Introduction to Trauma Care
- Principles & technique of trauma care
- Six phase of trauma care management
- Glasgow Coma score (GCS)
- Patient referral & transport, Consent
- Trauma in Children & Pregnancy

#### Unit IV

##### Introduction to Research Methodology, Statistics and Data Processing

Meaning and Scope of Research Methodology, Research Problem, Identification of the Problem Area, Selection and Formulation of the Research Question(s), Pilot Study, Research Design, Meaning and Components of Research Design, Importance of Designing Research, Typology of Research Designs.

Measures of central tendencies -Mean, Median and Mode, Measures of Dispersion-Range, Standard Deviation, Standard Error, Co-efficient of Variation, Test of significance, t test and Chi square. Test of Correlation.

  
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**Paper II**  
**Trauma Counseling**

**Unit I**

- An Introduction to Counseling Survivors of Trauma: Beginning to Understand the Context of Trauma
- Historical & theoretical context of Trauma Counseling.
- Neurobiological Effects of Trauma and Psychopharmacology

**Unit II**


- Issues of Loss and Grief, Trauma Survivorship and Disability
- Sexual Trauma: An Ecological Approach to Conceptualization and Treatment
- Trauma Experienced in Early Childhood & Adolescence
- Treating Adult Trauma Survivors, Addiction and Psychological Trauma: Implications for Counseling Strategies

**Unit III**

- School Violence, Trauma and its counseling
- Assessment in Psychological Trauma: Methods and Intervention
- Models for Trauma Intervention: Integrative Approaches to Therapy
- Strategies and Techniques for Counseling Survivors of Trauma

**Unit IV**

- Ethical Perspectives on Trauma Work.
- Vicarious Traumatization
- Therapist Self-Care: Being a Healing Counselor Rather Than a Wounded Healer.
- Trauma and Supervision
- Conclusion: An Integrative Systemic Approach to Trauma & Trauma counseling.

  
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**Paper III**

**Trauma Therapy & Rehabilitation**

**Unit I**

Trauma Therapy, Development Trauma, Philosophy of traumatic models of working, PTSD: Introduction to a systemic treatment Approach, Development of PTSD, Defining PTSD & Complex PTSD, An Imagery Approach for Treating Complex Type II PTSD.

**Unit II**

Introduction to Trauma Rehabilitation  
Methodology & type of Rehabilitation  
Epidemiology of trauma related Disability

**Unit III**

Early Rehabilitation Intervention,  
Rehabilitation after traumatic brain injury & traumatic lower extremity amputation  
Diagnosis & Rehabilitation of Peripheral Nerve injuries  
Burns  
Rehabilitation Therapy, Audiology and speech.

**Unit IV**

- Quality care indicators for trauma Rehabilitation with special consideration for pediatric patients with disability due to trauma.
- Prevention of disability secondary to trauma



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**Paper IV**

**EMS (Emergency Medical System)  
& Trauma Care Training courses**

**Unit I**

Preparatory EMS System - Roles and Responsibilities

General Anatomy & Physiology, only basic relevant pathology, pharmacology and Microbiology (relevant to ETCT)

Medical / Legal and Ethical Issues

Vital recording, first aid, bandaging and triage.

IM/IV/SC injection, Nebulization

**Unit II**

Patient Assessment (History taking, Techniques of Physical Examination, Patient Assessment, Clinical Decision Making, Communication & Documentation)

Basic Life Support (BLS), ATLS, ACLS and CPR

Various Procedure done in Emergency & critical & drug used.

Biomedical waste management, Basic of CSSD & Sterilization practices.

**Unit III**

Stress & Anxiety scoring scale.

Scoring of Trauma- AIS, GCS, ISS, NISS, TRIS, ICD-09, ICD-10

Documents related to trauma and emergency medical care.

Quality control and quality management in health care system

Medical Assessment – Based Management

- Endocrinology, Urology/ Renal, Allergies and Anaphylaxis & Hematology, Toxicology and Environmental Conditions, Gynecology & Obstetrics, Behavioral and Psychiatric Disorders. Operations
- Ambulance operations
- Medical Incident Command

**Unit IV**

- Hospital Emergency Disaster Management
- APPROACHES TO DISASTER RISK REDUCTION-To promote Prevention and Preparedness for disaster, to undertake Mitigation & Risk Reduction steps, to prioritize Rescue and Relief operation
- Mock Drill for Hospital Emergency Disaster Management

