

SRI LAKSHMI NARAYANA INSTITUTE OF MEDICAL SCIENCES



Date: 04/09/2017

From:
Dr. Aravind C
Professor and Head,
Department of General Medicine
Sri Lakshmi Narayana Institute of Medical Sciences
Bharath Institute of Higher Education and Research
Chennai

To
The Dean,
Sri Lakshmi Narayana Institute of Medical Sciences
Bharath Institute of Higher Education and Research
Chennai

Sub: Permission to conduct value-added course: Substance abuse among medics

Respected Madam,

With reference to the subject mentioned above, the department proposes to conduct a value-added course titled: SUBSTANCE ABUSE AMONG MEDICOS on 06/10/2017. We solicit your kind permission for the same.

Kind Regards

Dr. Aravind C

FOR THE USE OF DEAN'S OFFICE

Names of Committee members for evaluating the course:

The Dean: Dr. Jayalakshmi

The HOD: Dr. Aravind C

The Expert: Dr. Chellapandian

The committee has discussed about the course and is approved.

Dean

Subject Expert

HOD



OFFICE OF THE DEAN

Sri Lakshmi Narayana Institute of Medical Sciences

OSUDU AGARAM VILLAGE, VILLIANUR COMMUNE, KUDAPAKKAM POST,
PUDUCHERRY - 605 552.

(Recognised by Medical Council of India, Ministry of Health letter No. U/12012/249/2005-ME (F-II) dt. 11/07/2011)
(Affiliated to Bharath University, Chennai - TN)

Circular

11/09/2017

Sub: Organising Value-added Course: SUBSTANCE ABUSE AMONG MEDICOS reg

With reference to the above mentioned subject, it is to bring to your notice that Sri Lakshmi Narayana Institute of Medical Sciences, **Bharath Institute of Higher Education and Research**, is organising a Value added course, titled, "SUBSTANCE ABUSE AMONG MEDICOS". The course content is enclosed below.

The hard copy of the application should be sent to the institution by registered/ speed post only, so as to reach on or before 29/09/2017. Applications received after the mentioned date shall not be entertained under any circumstances.

Dean

Incl: Copy of Course content

COURSE PROPOSAL

Course Title: SUBSTANCE ABUSE AMONG MEDICOS

Course Objective: To create an awareness among students of the 2nd year M.B.B.S about the vice of substance abuse among medicos

Course Outcome: Awareness on substance abuse among medicos has been imparted to the group of 25 students from 2nd year MBBS

Course Audience: A batch of 25 students belonging to the Second year of M.B.B.S

Course Coordinator: Dr. C. Aravind

Course Faculties with Qualification and Designation:

1. Dr. Chellapandian
Professor
Department of General Medicine
2. Dr. Muthukumarasamy, B
Professor
Department of General Medicine
3. Dr. Arul Murugan
Associate Professor
Department of General Medicine

Course Curriculum/Topics with schedule

S/No	Date	Topic	Time	Hours	Name of the faculty
1.	06/10/2017	What is substance abuse?	5 pm to 7 pm	2 hours	Dr. Arul Murugan
2	09/10/2017	Prevalence of substance abuse among medical students	4:30 pm to 6:30 pm	2 hours	Dr. Chellapandian
3.	13/10/2017	Risk factors for substance abuse	5 pm to 7 pm	2 hours	Dr. Arul Murugan
4.	16/10/2017	Why are medicos more prone for stress, depression and addictions?	5 pm to 7 pm	2 hours	Dr. Arul Murugan
5.	20/10/2017	Harmful effects of substance abuse	5 pm to 7 pm	2 hours	Dr. Chellapandian
6.	23/10/2017	The negative effects of social and visual media	4:30 pm to 6:30 pm	2 hours	Dr. Muthukumarasamy, B

7	03/11/2017	Alcohol consumption among medics	6:30 pm to 7 pm	2 hours	Dr. Chellapandian
8	06/11/2017	Narcotic substance abuse	5 pm to 7 pm	2 hours	Dr. Muthukumarasamy B
9	10/11/2017	Physical and psychological dependence	4 pm to 6 pm	2 hours	Dr. Muthukumarasamy B
10	13/11/2017	De-addiction programmes	4 pm to 6 pm	2 hours	Dr. Arul Murugan
11	17/11/2017	Stress coping mechanisms	4 pm to 6 pm	2 hours	Dr. Arul Murugan
12	20/11/2017	Prevention is better than cure	4 pm to 6 pm	2 hours	Dr. C. Aravind
13	24/11/2017	Psychiatric assistance: role of faculty – student and parent – student relationship	4 pm to 7 pm	3 hours	Dr. Chellapandian
14	01/12/2017	SUMMARY – of plans and methods to tackle the menace of substance abuse	4 pm to 7 pm	3 hours	Dr. C. Aravind
			Total Hours	30	

REFERENCE BOOKS:

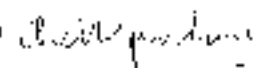
1. HARRISON'S PRINCIPLES OF INTERNAL MEDICINE; 18th EDITION
2. NEW OXFORD TEXTBOOK ON PSYCHIATRY

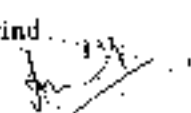
VALUE ADDED COURSE

1. Name of the programme and code
Substance abuse among medicals. IM07
2. Duration & period
30 hrs; between October 2017 to December 2017
3. Information Brochure and course content of value-added courses
Enclosed as Annexure - I
4. List of students enrolled
Enclosed as Annexure - II
5. Assessment procedures:
Short notes Enclosed as Annexure - III
6. Certificate model
Enclosed as Annexure - IV
7. No. of times offered during the same year
1; October 2017 to December 2017
8. Year of discontinuation
2018
9. Summary report of each program year wise.

VALUE ADDED COURSE: October 2017 - December 2017					
Sr. No.	Course code	Course name	Resource persons	Target Students	Strength and year
1	IM07	Substance abuse among medicals	Dr. Chellapandian Dr. Arul Murugan Dr. Muthokumarasamy B	2 nd year MBBS	25 (October 2017- December 2017)

10. Course feedback
Enclosed as Annexure V

RESOURCE PERSON - Dr. Chellapandian 

COORDINATOR - Dr. C. Aravind 

ANNEXURE - I

PARTICIPANT HANDBOOK

SUBSTANCE ABUSE AMONG MEDICAL STUDENTS



VALUE ADDED COURSE (OCTOBER 2017 TO DECEMBER 2017)

COURSE DETAILS

PARTICULARS	DESCRIPTION
Course title	SUBSTANCE ABUSE AMONG MEDICAL STUDENTS
Course code	IM07
Objective	<ol style="list-style-type: none"> 1. What is substance abuse? 2. Prevalence of substance abuse among medical students 3. Risk factors for substance abuse 4. Why are medicos more prone for stress, depression and addictions? 5. Harmful effects of substance abuse 6. The negative effects of social and visual media 7. Alcohol consumption among medicos 8. Narcotic substance abuse 9. Physical and psychological dependence 10. De addiction programmes 11. Stress coping mechanisms 12. Prevention is better than cure 13. Psychiatric assistance; role of faculty – student and parent -- student relationship 14. SUMMARY – of plans and methods to tackle the menace of substance abuse
Key competencies	On successful completion of the course, the students will have a better awareness about substance abuse among medical students
Target students	Second year MBBS
Duration	30 hours; between October 2017 and December 2017
Assessment procedure	Short notes

SUBSTANCE ABUSE AMONG MEDICAL STUDENTS AND GRADUATES

Substance abuse, also known as drug abuse, is use of a drug in amounts or by methods which are harmful to the individual or others. It is a form of substance related disorder. Differing definitions of drug abuse are used in public health, medical and criminal justice contexts. In some cases, criminal or anti social behaviour occurs when the person is under the influence of a drug, and long- term personality changes in individuals may occur as well. In addition to possible physical, social, and psychological harm, use of some drugs may also lead to criminal penalties, although these vary widely depending on the local jurisdiction.

Drug addiction, also called substance use disorder, is a disease that affects a person's brain and behavior and leads to an inability to control the use of a legal or illegal drug or medication. Substances such as alcohol, marijuana and nicotine also are considered drugs. When you're addicted, you may continue using the drug despite the harm it causes.

Drug addiction can start with experimental use of a recreational drug in social situations, and, for some people, the drug use becomes more frequent. For others, particularly with opioids, drug addiction begins with exposure to prescribed medications, or receiving medications from a friend or relative who has been prescribed the medication.

The risk of addiction and how fast you become addicted varies by drug. Some drugs, such as opioid painkillers, have a higher risk and cause addiction more quickly than others.

As time passes, you may need larger doses of the drug to get high. Soon you may need the drug just to feel good. As your drug use increases, you may find that it's increasingly difficult to go without the drug. Attempts to stop drug use may cause intense cravings and make you feel physically ill (withdrawal symptoms).

Drugs most often associated with this term include: alcohol, amphetamines, barbiturates, benzodiazepines, cannabis, cocaine, hallucinogens, methaqualone, and opioids. The exact cause of substance abuse is not clear, with the two predominant theories being: either a

genetic disposition which is learned from others, or a habit which if addiction develops, manifests itself as a chronic debilitating disease.

In 2010 about 5% of people (230 million) used an illicit substance. Of these 27 million have high-risk drug use otherwise known as recurrent drug use causing harm to their health, psychological problems, or social problems that put them at risk of those dangers. In 2015 substance use disorders resulted in 307,400 deaths, up from 165,000 deaths in 1990. Of these, the highest numbers are from alcohol use disorders at 137,500, opioid use disorders at 122,100 deaths, amphetamine use disorders at 12,200 deaths, and cocaine use disorders at 11,100.

DRUG MISUSE

Drug misuse is a term used commonly when prescription medication with sedative, anxiolytic, analgesic, or stimulant properties are used for mood alteration or intoxication ignoring the fact that overdose of such medicines can sometimes have serious adverse effects. It sometimes involves drug diversion from the individual for whom it was prescribed.

Prescription misuse has been defined differently and rather inconsistently based on status of drug prescription, the uses without a prescription, intentional use to achieve intoxicating effects, route of administration, co-ingestion with alcohol, and the presence or absence of dependence symptoms. Chronic use of certain substances leads to a change in the central nervous system known as a 'tolerance' to the medicine such that more of the substance is needed in order to produce desired effects. With some substances, stopping or reducing use can cause withdrawal symptoms to occur, but this is highly dependent on the specific substance in question.

The rate of prescription drug use is fast overtaking illegal drug use in the United States. According to the National Institute of Drug Abuse, 7 million people were taking prescription drugs for nonmedical use in 2010. Among 12th graders, nonmedical prescription drug use is

now second only to cannabis. In 2011, "Nearly 1 in 12 high school seniors reported nonmedical use of Vicodin; 1 in 20 reported such use of OxyContin." Both of these drugs contain opioids. A 2017 survey of 12th graders in the United States, found misuse of OxyContin of 2.7 percent, compared to 5.5 percent at its peak in 2005. Misuse of the combination hydrocodone/paracetamol was at its lowest since a peak of 10.5 percent in 2003. This decrease may be related to public health initiatives and decreased availability.

Avenues of obtaining prescription drugs for misuse are varied: sharing between family and friends, illegally buying medications at school or work, and often "doctor shopping" to find multiple physicians to prescribe the same medication, without knowledge of other prescribers.

Increasingly, law enforcement is holding physicians responsible for prescribing controlled substances without fully establishing patient controls, such as a patient "drug contract". Concerned physicians are educating themselves on how to identify medication-seeking behavior in their patients, and are becoming familiar with "red flags" that would alert them to potential prescription drug abuse.

SUBSTANCE ABUSE AMONG MEDICOS

Medical students, as future doctors, hold a unique place in society and earn privileges and responsibilities different from those of other students. Different standards of professional behaviour are hence expected from them. Substance use by medical students poses risks and can also have serious consequences on their effectiveness and fitness to practice as tomorrow's doctors. It is believed that substance use among physician starts early in their careers and the importance of studying the lifestyles of medical students to detect substance abuse is well recognized.

The probable adverse effects of these psychoactive substances have caused international concern over many years and international legislations have been enacted at various times to control their circulation and use. Various studies have reported an increasing trend in the prevalence of substance abuse, particularly among the youth, and its seriousness as a public

health hazard. A greater cause for concern is the finding of a similarity between urban and rural trends in drug use.

Substance use among doctors is a personal health risk and could lead to serious professional consequences including negligent behaviour, impaired fitness to practise and even serious harm to patients. Physicians who misuse addictive substances may also fail to take the issue seriously when confronted by such problems in their patients.

A study from a medical school in Pakistan reported peer pressure, academic stress and curiosity to be the commonest reasons attributed to substance use by medical students. Moral unacceptability, religious barriers, harmful effects of drugs and fear of being caught were reasons cited for not using drugs. Moore et al. identified several medical school precursors of physician drug abuse including lack of religious affiliation, smoking a pack of cigarettes a day, regular use of alcohol, anxiety or anger as a response to stress, and frequent use of alcohol in non-social settings. Idealistic behaviours, high academic rank in class, perfectionist behaviour—traits that are likely to predict success in medical school—have been described as risk factors for substance use.

Medical students, being young adults, are inherently at risk. Medical schools and councils in western countries have drafted explicit guidelines about dealing with substance use among medical students and have developed programmes for the rehabilitation of affected students and physicians. In the UK, the Medical Schools Council (MSC) and the General Medical Council (GMC) have overseen the development of guidance for medical students with a substance use problem, which aims to balance a positive approach to the professional behaviour of medical students. It also provides specific advice for medical schools on how to develop consistent fitness-to-practise procedures. Impaired physician programmes and physician health committees in the USA provide confidential services to educate, treat, support, rehabilitate and monitor impaired medical students and physicians, and to protect the public from harm. Baldissarri describes the set up of such committees and interventions in detail and observes that, compared with other groups, recovery rates of impaired physicians are higher, independent of provider, location or treatment model.

Unfortunately, there is still no clear provision in the Indian medical school system to positively rehabilitate impaired medical students or indeed, physicians, and interventions, if applied, are likely to be punitive in nature.

The Medical Council of India does not seem to have any clear reference to substance use by doctors or guidance against self-prescriptions in its Code of Ethics. Medical schools could lay more emphasis on stress management techniques, encourage medical students to identify their own substance use habits, and provide relevant health education and support as early as possible.

With India's massive economic growth, lifestyles are changing and affordability is rapidly rising, and since our data collection in 2003, there have been reports in the national media of a greater use of recreational drugs such as ecstasy, cocaine and LSD. Pragmatically, recreational and experimental use of substances is often considered to be a determinant of, and on the same continuum with, future harmful or dependent use.

Trends in the West have shown a general increase in alcohol and illicit substance use by medical students, especially women. However, the rates of nicotine use have been decreasing progressively, which is likely to be a result of the powerful preventative nature of public health programmes against smoking in general. Lessons need to be learnt from the West regarding successful reduction of tobacco use, and medical schools and councils in India need to develop guidelines and rehabilitation programmes that are non-punitive, supportive and ensure confidentiality for those talented but vulnerable medical students who enter and get lost in the whirlpool of substance use.

After all, they are the doctors of tomorrow and some, like the legendary William S. Halstead (a man trapped for years by cocaine addiction but more famously known as the father of modern surgery), with adequate support, have the potential to go on to do great things for mankind and medicine.

Annexure II

Bharath Institute of Higher Education and Research

Sri Lakshmi Narayana Institute of Medical Sciences

Participant list with signatures

Value added course: **SUBSTANCE ABUSE AMONG MEDICAL STUDENTS** (dated 06/10/2017)

Sl.No	Reg.No	Name of the candidate	Signature
1.	U15MB260	ARCHITH VIGNESHI B	[Signature]
2.	U15MB261	ARJUNBALAJI A	[Signature]
3.	U15MB262	ARUL NIVETHINI V.A	[Signature]
4.	U15MB263	ARUL PRINCE E	[Signature]
5.	U15MB265	ARUN PRASAD K	[Signature]
6.	U15MB266	ARUNA S	[Signature]
7.	U15MB264	ARUNKUMAR S	[Signature]
8.	U15MB267	ASAN THASTHAGIR M	[Signature]
9.	U15MB268	ASWIN B	[Signature]
10.	U15MB269	BALAMANI KANDAN S	[Signature]
11.	U15MB270	BHALA KUMARAN S	[Signature]
12.	U15MB271	CHELLAMARIAPPAN S	[Signature]
13.	U15MB272	CHIBALAA D	[Signature]
14.	U15MB273	DEEPIKA DIVYA KUMARI B	[Signature]
15.	U15MB274	DEEPIKA PRIYADITARSHINI B	[Signature]
16.	U15MB275	DEVANAND M	[Signature]
17.	U15MB276	DEVANATHIAN R	[Signature]
18.	U15MB277	DIANA PRIYA P	[Signature]

19.	U15MB278	DIHANALAKSHMI M	Ph. M
20.	U15MB279	DIHANU S.H.R	Ph. M
21.	U15MB280	DIHANUSH KODALI	Ph. M
22.	U15MB281	DHIVYA KUMARI P	Ph. M
23.	U15MB282	DIVYA S	Ph. M
24.	U15MB283	DIVYA DIKSHINI N	Ph. M
25.	U15MB284	EVANGELINE PRETTY G	Ph. M

ANNEXURE- III



**SRI LAKSHMI NARAYANA INSTITUTE OF MEDICAL
SCIENCES**

SUBSTANCE ABUSE AMONG MEDICOS

SHORT NOTES

Course Code: IM07

WRITE SHORT NOTES ON THE FOLLOWING:

1. What is substance abuse?
2. Risk factors for substance abuse among medicos
3. Physical and mental ill- effects of substance abuse
4. How to tackle the menace of substance abuse among medicos?



SUBSTANCE ABUSE AMONG MEDICOS

SHORT NOTES

Q. No. 18/2021

Course Code: IM07

Answer Question A

WRITE SHORT NOTES ON THE FOLLOWING:

1. What is substance abuse?
2. Risk factors for substance abuse among medicos
3. Physical and mental ill-effects of substance abuse
4. How to tackle the menace of substance abuse among medicos?

10
10

Ans. part 1

Substance abuse is the harmful or hazardous use of psychoactive substances, including alcohol and drugs. It can be defined as the use of a substance in a way that is not intended by the manufacturer or in a way that is not socially acceptable. It is a complex phenomenon that involves both physical and psychological factors. The use of substances in a way that leads to negative health and social consequences is considered abuse. This can include the use of alcohol, prescription drugs, and illicit drugs. The abuse of substances can lead to a range of physical and mental health problems, including liver disease, heart disease, and mental illness. It can also lead to social problems, such as family conflict and job loss. The abuse of substances is a global public health problem that affects people of all ages and backgrounds. It is a complex phenomenon that involves both physical and psychological factors. The use of substances in a way that leads to negative health and social consequences is considered abuse. This can include the use of alcohol, prescription drugs, and illicit drugs. The abuse of substances can lead to a range of physical and mental health problems, including liver disease, heart disease, and mental illness. It can also lead to social problems, such as family conflict and job loss. The abuse of substances is a global public health problem that affects people of all ages and backgrounds.

Substance abuse is a complex phenomenon that involves both physical and psychological factors. The use of substances in a way that leads to negative health and social consequences is considered abuse. This can include the use of alcohol, prescription drugs, and illicit drugs. The abuse of substances can lead to a range of physical and mental health problems, including liver disease, heart disease, and mental illness. It can also lead to social problems, such as family conflict and job loss. The abuse of substances is a global public health problem that affects people of all ages and backgrounds. It is a complex phenomenon that involves both physical and psychological factors. The use of substances in a way that leads to negative health and social consequences is considered abuse. This can include the use of alcohol, prescription drugs, and illicit drugs. The abuse of substances can lead to a range of physical and mental health problems, including liver disease, heart disease, and mental illness. It can also lead to social problems, such as family conflict and job loss. The abuse of substances is a global public health problem that affects people of all ages and backgrounds.

- poor mood or academic performance
- loss of interest in formerly enjoyable activities
- depression, anxiety, paranoia, hallucinations, poor decision.

4) 1. Behavioral therapy

2. Group therapy - people to change of attitude, share, cont.

3. Medication on withdrawal of symptoms

SUBSTANCE ABUSE AMONG MEDICOS

SHORT NOTES

Q. 2) & 3) Marks

Short Answer Type

Course Code: 18102

WRITE SHORT NOTES ON THE FOLLOWING:

1. What is substance abuse?
2. Risk factors for substance abuse among medicos
3. Physical and mental ill effects of substance abuse
4. How to tackle the menace of substance abuse among medicos?

10
A. Lakshmi
20/11/2018

Q. 2) Substance abuse is the harmful or hazardous use of psychoactive substances, including alcohol and drugs. It involves the use of substances in a way that is not intended or approved by the manufacturer, and can lead to physical and mental health problems. It is a global public health problem, with an estimated 10% of the world's population using substances in a harmful way. The most common substances abused are alcohol, tobacco, and drugs. Substance abuse can lead to a range of health problems, including liver disease, heart disease, and mental health problems. It can also lead to social and legal problems. Substance abuse is a complex problem that requires a multi-faceted approach to address it. This includes education, prevention, and treatment. Education can help people understand the risks of substance abuse and make informed choices. Prevention can help reduce the availability of substances and the social norms that encourage their use. Treatment can help people who are struggling with substance abuse to get back on track. Substance abuse is a serious problem that affects millions of people around the world. It is important to take steps to prevent and treat substance abuse in order to protect public health and well-being.

Q. 3) Risk factors for substance abuse among medicos include: 1. Genetic factors: Some people are genetically predisposed to substance abuse. 2. Environmental factors: Growing up in a household where substance abuse is common, or having friends who use substances, can increase the risk. 3. Psychological factors: People with mental health problems, such as depression or anxiety, are more likely to use substances. 4. Professional factors: The high-stress environment of a medical profession, the availability of substances, and the social norms of the profession can all contribute to substance abuse among medicos. 5. Peer pressure: The pressure to fit in with colleagues who use substances can be a significant risk factor. 6. Lack of social support: People who lack a strong support system are more likely to use substances. 7. Easy access to substances: The availability of substances, particularly in a medical setting, can increase the risk of abuse. 8. Personality factors: People who are impulsive, risk-taking, or have a history of substance abuse are more likely to abuse substances. 9. Stress: The high-stress environment of a medical profession can lead to substance abuse as a coping mechanism. 10. Lack of awareness: Not understanding the risks of substance abuse or the signs and symptoms of addiction can increase the risk of abuse.

Q. 4) Physical and mental ill effects of substance abuse include: 1. Physical effects: Substance abuse can lead to a range of physical health problems, including liver disease, heart disease, and respiratory problems. It can also lead to weight gain, high blood pressure, and diabetes. 2. Mental effects: Substance abuse can lead to a range of mental health problems, including depression, anxiety, and psychosis. It can also lead to memory loss, impaired judgment, and decreased motivation. 3. Social effects: Substance abuse can lead to social isolation, relationship problems, and legal issues. 4. Professional effects: Substance abuse can lead to decreased productivity, absenteeism, and loss of licensure. 5. Financial effects: Substance abuse can lead to financial problems, including debt and bankruptcy. 6. Family effects: Substance abuse can lead to family conflict, child abuse, and neglect. 7. Health care costs: Substance abuse can lead to increased health care costs, both for the individual and for society. 8. Mortality: Substance abuse is a leading cause of death, particularly among young people. 9. Quality of life: Substance abuse can significantly reduce the quality of life, both for the individual and for their family. 10. Public health burden: Substance abuse is a major public health burden, both in terms of the health care costs it generates and the social and economic problems it causes.

Q. 5) How to tackle the menace of substance abuse among medicos? 1. Education: Educating medicos about the risks of substance abuse and the signs and symptoms of addiction is a key step in preventing and treating substance abuse. 2. Prevention: Reducing the availability of substances and the social norms that encourage their use can help prevent substance abuse. 3. Treatment: Providing access to effective treatment for substance abuse is essential for helping people who are struggling with addiction. 4. Support: Providing social and professional support for people who are struggling with substance abuse can help them get back on track. 5. Policy: Implementing policies that reduce the availability of substances and increase the consequences of substance abuse can help prevent and treat substance abuse. 6. Research: Conducting research on the causes and consequences of substance abuse among medicos can help inform prevention and treatment efforts. 7. Collaboration: Collaborating with other professionals, including lawyers, social workers, and family members, can help address the complex needs of people who are struggling with substance abuse. 8. Self-help: Encouraging people to seek self-help resources, such as support groups and online programs, can help them get back on track. 9. Peer support: Encouraging people to seek support from their colleagues can help them feel less isolated and more motivated to get back on track. 10. Long-term monitoring: Monitoring people who have a history of substance abuse for signs of relapse is important for preventing long-term consequences.

1) Important types of kinematic pairs are
a) Revolute pair b) Prismatic pair

✓ Revolute pair is a pair of two links
connected by a revolute joint.
It is a lower pair and has 1 degree of freedom.
It is a closed pair and has 1 degree of freedom.

2) A revolute pair is a pair of

two links connected by

a revolute joint. It is a lower pair and has 1 degree of freedom.

It is a closed pair and has 1 degree of freedom.

✓ It is a lower pair and has 1 degree of freedom.

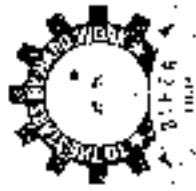
It is a closed pair and has 1 degree of freedom.

It is a lower pair and has 1 degree of freedom.

It is a closed pair and has 1 degree of freedom.

It is a lower pair and has 1 degree of freedom.

It is a closed pair and has 1 degree of freedom.



Sri Lakshmi Narayana Institute of Medical Sciences



CERTIFICATE OF MERIT

This is to certify that ARUNA.S has actively participated in the Value Added Course on "Substance abuse among medicos" conducted between October 2017 – December 2017 by Sri Lakshmi Narayana Institute of Medical Sciences, Pondicherry- 605 502, India.

Dr. Chellapandian

RESOURCE PERSON

Dr. Aravind.C

COORDINATOR



Sri Lakshmi Narayana Institute of Medical Sciences



CERTIFICATE OF MERIT

This is to certify that BHALA KUMARAN S has actively participated in the Value Added Course on "Substance abuse among medicos" between October 2017 – December 2017 Organized by Sri Lakshmi Narayana Institute of Medical Sciences, Pondicherry- 605 502, India.

Dr. Chellapandian

RESOURCE PERSON

Dr. Aravind. C

COORDINATOR

ANNEXURE - V
Student Feedback Form

Course Name: **SUBSTANCE ABUSE AMONG MEDICAL STUDENTS**

Subject Code: **IM07**

Name of Student: Pravish Kumar S Roll No.: 24110224

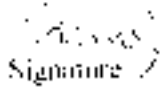
We are constantly looking to improve our classes and deliver the best training to you. Your evaluations, comments and suggestions will help us to improve our performance.

Sl. NO	Particulars	1	2	3	4	5
1	Objective of the course is clear				✓	
2	Course contents met with your expectations				✓	
3	Lecturer sequence was well planned				✓	
4	Lectures were clear and easy to understand				✓	
5	Teaching aids were effective				✓	
6	Instructors encourage interaction and were helpful				✓	
7	The level of the course				✓	
8	Overall rating of the course	1	2	3	4	5

* Rating: 5 – Outstanding; 4 - Excellent; 3 – Good; 2- Satisfactory; 1 - Not Satisfactory

Suggestions if any:

Date: 01/05/2024

Signature: 

ANNEXURE - V
Student Feedback Form

Course Name: **SUBSTANCE ABUSE AMONG MEDICAL STUDENTS**

Subject Code: **IM07**

Name of Student Prasanna Singh Roll No. 1211009101

We are constantly looking to improve our classes and deliver the best training to you. Your evaluations, comments and suggestions will help us to improve our performance

Sl. NO	Particulars	1	2	3	4	5
1	Objective of the course is clear					
2	Course content met with your expectations					
3	Lecture sequence was well planned					
4	Lectures were clear and easy to understand					
5	Teaching aids were effective					
6	Instructors encourage interaction and were helpful					
7	The level of the course					
8	Overall rating of the course					

* Rating: 5 – Outstanding; 4 – Excellent; 3 – Good; 2 – Satisfactory; 1 – Not Satisfactory

Suggests, if any

Date 01/10/2021

Prasanna Singh
Signature

Date: 04/12/2017

From
Dr. Aravind C
Professor and Head
Department of General Medicine
Sri Lakshmi Narayana Institute of Medical Sciences
Bharath Institute of Higher Education and Research
Chennai

Through: Proper Channel

To
The Dean,
Sri Lakshmi Narayana Institute of Medical Sciences
Bharath Institute of Higher Education and Research
Chennai

Sub: Completion of value-added course: Substance abuse among medicos

Respected Madam,

With reference to the subject mentioned above, the department has conducted the value-added course titled: "**Substance abuse among medicos**" on 01/12/2017. We solicit your kind action to send certificates for the participants. Also, I am attaching the photographs captured during the conduct of the course.

Kind Regards

Dr. Aravind C

Encl: **Photographs**

