

## Perception of the Medical Undergraduates Regarding the National Medical Commission Bill, 2017 in Mangaluru.

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### ABSTRACT

#### Introduction:

The shortcomings of the MCI are well recorded and often required interventions from the judicial system and legislature. NMC BILL, 2017 is the 13th legislative attempt (Bills and Amendments) to reform the Medical Council of India (MCI). Under the proposed NMC bill, the majority of the commission would consist of nominated members. Also, it proposes an exit examination upon completion of the MBBS course. In addition, the new bill also initiates to bring into existence a bridge course for the dental students. This study assessed the awareness and perception regarding the NMC bill among the medical undergraduates.

**Objective:** To assess the perception regarding the National Medical Commission (NMC) BILL, 2017 and its sub-clauses.

**Methods:** This Cross-sectional study was conducted at KMC Mangalore, MAHE, from the study was conducted after taking clearance from the institutional Ethical Committee. The study was conducted among the 410 undergraduates in the first, second and third year of MBBS. The collected data was analyzed using Statistical Package for Social Sciences (SPSS) 16.0 and the results were expressed as proportions & percentages using appropriate tables and figures.

**Results:** 61.46% of the study participants disagreed with the NITI Aayog's recommendation to establish a national exit exam for medical undergraduates. Whereas 72.68% of the study participants feel that bridge-course is unscientific and dangerous whereas 76.09% participants feel that bridge course will degrade health care services.

**Conclusion:** Based on the response given by the study participants regarding the NMC bill it can be said that the recommendation such as bridge course for AYUSH, the National licensing exam should be reconsidered by the government. Overall, the study participants the response wasn't positive for most of the clauses in the NMC bill.

**Keywords:** NMC bill, Bridge course, Exit Exam, Fee cap

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### I. Introduction

The shortcomings of the MCI are well recorded and often required interventions from the judicial system and legislature, NMC BILL, 2017 is the 13th legislative attempt (Bills and Amendments) to reform the Medical Council of India (MCI). The New Bill was drafted with the intention of ending the prevailing corruption and overhauling the existing regulatory body with a new one, improving the quality of medical education and services, and the doctor-patient ratio.

Under the proposed NMC bill the majority of the commission will be consisting of nominated members, and the number of elected doctors in the commission down to only five. This section 4 of the Bill lays down the composition of the proposed NMC. In comparison with the 04-member board of the MCI, the new NMC board will have only 25 members, out of which three members will be experts from their fields, not representing the health profession. Of the 25 members there will be 12 ex-officio members, 11 part-time members, a chairperson and a member secretary.

The NMC will replace MCI and function as a regulatory body along with other medical bodies such as The Under-Graduate Medical Education Board, Post-Graduate Medical Education Board, The Medical Assessment & Rating Board and The Ethics and Medical Registration Board under it. State Medical Councils (SMC) will be developed by the NMC within three years. The new bill also proposed to allow practitioners of alternative medicine to practice modern by undergoing a bridge course. The intention is to promote

medical pluralism by approving educational modules that will bridge the gap between modern and traditional medicines. This bridge course clause has now been scrapped after the widespread protest by the IMC and other medical associations such as FORDA, etc.

According to the new bill, there will come into existence an exit examination upon completing the MBBS course. The purpose of the exit exam is to check whether the students who have passed the final MBBS exam have acquired the right skills to pursue the medical practice. The proposed NMC bill will give the private medical colleges a free hand to determine how much they would charge for 60 percent of the seats. The committee will then decide the tuition fees of the 40 percent of seats for students who are not able to afford for the education because of lack of funds.

## II. Methodology

The present Cross-sectional study was conducted at Kasturba Medical College, Mangalore. This premier institution has a long and illustrious history and has been a pioneer in medical education in the country with a unique public-private partnership model. With an Annual intake of 250 students per year from every corner of the country and from abroad as well.

The study was conducted among the 410 undergraduates in the first, second and third year of MBBS after the approval of the Institutional Ethics Committee (IEC) of Kasturba Medical College (Manipal Academy of Higher Education) Mangaluru was received. Prior permission from the authorities was taken and the study participants were revisited on the pre-informed dates. Interns, postgraduates, final year MBBS were excluded from the study.

The participants were explained the purpose of the study in the language they understand and their written informed consent was taken. The study subjects were selected using convenience sampling (Non-Random) technique. A semi-structured questionnaire was used to collect the responses of the study participants and to assess their awareness regarding the NMC bill. The semi-structured questionnaire contained statements regarding various aspects of the NMC bills such as waiver of the fee cap for 60% seats in a private medical college, bridge course for Ayush practitioners, poor doctor-patient ratio, Ayush medicine in modern world and lifestyle disease management etcetera. The attitude of the participants regarding a particular statement was captured using a five-point Likert scale.

Socio-demographic details of the participants were also collected. The collected data was analyzed using Statistical Package for Social Sciences (SPSS) 16.0 and the results were expressed as proportions & summary measures using appropriate tables and figures.

## III. Result

Out of 410 participants 34.6% were from 2nd Semester, 25.4% and 40% were from 4th and 6th semester respectively. About 95% participants were aware about the proposed NMC bill either via news, social media or through friends and family. Surprisingly 225 (54.87%) of the study participants are of the view that the medical colleges should have the right to increase the medical (MBBS & PG) seats and courses

The response regarding the NMC bill is represented in the table no. 1

**Table no. 1 PERCEPTION OF STUDY PARTICIPANTS REGARDING NMC BILL, 2017 (n=410)**

Recognized medical colleges shouldn't need permission to increase or introduce PG seat and PG courses	225 (54.87%)	89 (21.70%)	96 (23.41%)
Fee cap will discourage the expansion of the medical education in the country thus fee cap on 60% should be removed	122 (29.75%)	158 (38.54%)	130 (31.70%)
NMC will be subservient to the health ministry in the future.	132 (32.19%)	145 (35.36%)	62 (15.12%)
Inclusion of people in NMC from IIT, IIM, IIS, etc. will improve the quality	160 (39.02%)	111 (27.02%)	139 (33.90%)

90% of the participants were aware about the Bridge course, according to which the AYUSH practitioners will get the right to practice modern medicine after a ultra fast crash course on the modern medicine. 298

(72.68%) of the study participants felt that the bridge course is unscientific and dangerous whereas 312 (76.09%) participants felt that the bridge course will degrade the quality of healthcare services. Study participants' perception regarding the bridge course and its various aspects are tabulated below in table no. 2

**Table no. 2 PERCEPTION OF STUDY PARTICIPANTS REGARDING THE BRIDGE COURSE (n=1-10)**

97% of the study participants were aware about the EXITEXAM out of which 252 (61.46%) of them disagree with the NITI Aayog's recommendation to establish a national exit exam which will also be the licensing exam for medical undergraduates.

The bridge course is unscientific and dangerous	298 (72.68%)	56 (13.65%)	56 (13.65%)
The bridge course is going to degrade healthcare services	312 (76.09%)	45 (10.97%)	53 (12.92%)
AYUSH should be given the right to prescribe modern medicine	14 (3.41%)	33 (8.04%)	363 (88.53%)
With growing incidence of lifestyle disease holistic treatment with AYUSH can be integrated with modern medicine	86 (20.97%)	169 (41.21%)	155 (37.80%)

**Table no. 3 PERCEPTION OF MEDICAL UNDERGRADUATES REGARDING EXITEXAM (n=410)**

92.43% of the study participants felt that the best solution to rectify the poor doctor-patient ratio of the country is by increasing the number of seats in the medical college. Whereas 4.14% are of the

It should be compulsory for medical undergraduates to give exit exam to get the License to practice	84 (20.48%)	73 (17.80%)	252 (61.46%)
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View that the bridge course should be for nurses rather than the dental students.

#### IV. Discussion

The present study showed three notable findings. First, the medical undergraduates are reluctant about giving an exit exam after the completion of their MBBS as a licensing and post-graduate entrance exam. Second, the bridge course will be a deterrent in providing the standard level of healthcare to the patient. The bridge course is an ill thought and unscientific proposition made by the National Medical Commission to tackle the poor doctor-patient ratio in the country. On the other hand, the participants do feel that in today's world where the incidence of lifestyle diseases such as diabetes, hypertension, etc. are on the rise, a holistic approach where AYUSH and modern medicine work in symphony should be considered. Third, they recognized that medical colleges should not need permission to increase or introduce PG seats and PG courses respectively. As repeatedly going through the rigmarole of applying and getting permission for the postgraduate seats may hamper the expansion and growth of the medical colleges.

#### V. Conclusion

Thus based on the response given by the study participants regarding the NMC bill, it can be said that the recommendations such as a bridge course for AYUSH, the National licensing exam should be reconsidered by the government and the best course to tackle the poor doctor-patient ratio in the country is by increasing UG and PG medical seats.

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