RURAL INTERNSHIP TO MEDICAL GRADUATES: PROS AND CONS

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Sir,

The Union Health Ministry is contemplating the introduction of compulsory rotational internship of two years for MBBS students, of which one year will have to be served in a rural station of the student's choice in any state.¹ Currently, MBBS students in country undergo four and half years of study while one year of internship is charted out in teaching institution. The proposal is to add another year of compulsory rural internship to the existing five and half years course.² After its implementation, the total duration of the MBBS course would become six-and-a-half years in medical colleges in the country, after which the students would get permanent registration from the MCI. Till then, the degree would be provisional. One of the recommendations of the taskforce of NRHM had been the introduction of an additional year of compulsory rural internship as part of the MBBS course.³,⁴ According to it, students will be attached with the Ministry's flagship National Rural Health Mission during the year-long rural posting which will also help improve health care services in villages. Students will be attached to a rural hospital and a nearby medical college during this one year period. They will get a stipend from the NRHM for their services during this period.

Once this proposal becomes part of MBBS curriculum, a medical student, after completing 4.5 years of study and thereafter the hospital internship, will have to undergo a mandatory year-long house job in the form of a rural posting before getting the degree. Sources say government is working to do away with the compulsory three-month rural posting during the year-long MBBS internship and the same will be made part of one-year rural house job with an NRHM facility henceforth.⁴

It is said that one-year mandatory rural posting will help aspiring doctors to learn from senior doctors who act as mentors in the rural area. Government's efforts to attract doctors for rural postings through various incentives earlier did not yield any fruit.

One of the issues of concerns is long duration of course and mandatory posting for students in rural areas. With this giving placement at different rural areas to medical students who have just completed their study will also be a challenge. The safety issue while posting to female students in rural area should also be taken care of. The choice of place and preference of students will also be troublesome as most of the students will prefer to serve nearby rural areas of the city. In that case will this compulsory rural posting serve the purpose of government? Students have also to undergo various Post graduates entrance examination in the very next year, so the rural internship will interfere with their preparation, while in that case, will the students be able to do justice with their designated duty hours? Another issue is that students will have only provisional registration, so they can’t share medico legal duties of medical officers. They have to learn under the guidance of the medical officers, independent work will not be allotted to them for most of the times. This will not help the health sector much to decrease the burden. Instead of it, one more regular Medical Officer will serve better to the community and will decrease the burden of work of one Medical Officer. Instead of posting to graduates, posting of post graduates after their post graduation will work better because they can do work independently as well as there is no more burden of further studies on them. Vacant posts of specialists at various rural health centers can be filled up by freshly passed post graduates.

REFERENCES

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