



Vice
Chancellor

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Principal Secretariat

No. UHS/VC-26/1034
Dated: 27-04-2026

UNIVERSITY OF HEALTH SCIENCES LAHORE

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NOTIFICATION

GUIDELINES FOR STUDENT ELECTIVES IN MEDICAL AND DENTAL COLLEGES (UHS CONSTITUENT & AFFILIATED INSTITUTIONS)

In continuation of the University's mandate to ensure standardized, competency-based medical and dental education, and with the approval of the Competent Authority, the following Guidelines for Student Electives are hereby notified for implementation across all constituent and affiliated institutions.

1. PURPOSE:

Electives are structured academic activities designed to:

- Enhance clinical, research, and community health competencies
- Provide national and international exposure
- Promote self-directed learning and career orientation
- Strengthen professionalism and ethical conduct

2. SCOPE:

This policy applies to:

- MBBS students (Year 4 and Year 5)
- BDS students (Year 3 and Year 4)

Electives may be undertaken in:

- Recognized local institutions
- Approved international universities/hospitals
- Research and public health organizations

3. DURATION & TIMING:

- Duration: 2-4 weeks
- To be completed during:
 - Summer/Winter vacations
- Shall not interfere with:
 - Academic schedule
 - Examinations or assessments

4. TYPES OF ELECTIVES:

- Clinical Electives (specialty rotations)
- Research Electives (laboratory/clinical research)
- Community/Public Health Electives
- International Electives / Observerships

5. ELIGIBILITY CRITERIA:

Students must:

- Pass all previous professional examinations
- Maintain $\geq 75\%$ attendance
- Have satisfactory disciplinary record
- Obtain approval from host institution and NOC from parent institution

For Academic Council + BME & Med. /
+ Class Group + (BSCS) + Natta Board.

As Per Rules

30-4-26

web site -

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6. SOURCING, FUNDING & INSTITUTIONAL FACILITATION (CORE CLAUSE):

6.1 Student-Initiated Electives (Primary Pathway):

Students are strongly encouraged to independently identify and apply for elective opportunities offered by:

- i. National and international universities and hospitals
- ii. Research institutions and laboratories
- iii. Public health organizations and NGOs
- iv. Donor agencies and global health programs

This approach promotes:

- i. Self-directed learning
- ii. Professional networking
- iii. Global academic exposure

6.2 Financial Responsibility:

Electives are primarily self-financed, including:

- i. Travel and accommodation
- ii. Application/placement fees
- iii. Visa and insurance (if applicable)

Students may avail:

- i. Scholarships, grants, or donor-funded placements
- ii. Sponsored opportunities through partner organizations

6.3 Institutional Support:

The parent institution/UHS shall facilitate through issuance of:

- i. No Objection Certificate (NOC)
- ii. Good Standing Certificate
- iii. Academic transcripts

DME should ensure alignment with:

- i. Curriculum and competency requirements

6.4 Institutional MoUs:

UHS Affiliated colleges may establish MoUs with national and international institutions.

Benefits may include:

- i. Reserved elective placements
- ii. Fee waivers or subsidized opportunities
- iii. Structured rotations

6.5 UHS Exchange Programs

UHS may offer formal student exchange programs, including:

- i. Reciprocal academic exchanges
- ii. Clinical observerships
- iii. Research electives

Selection shall be:

- i. Merit-based
- ii. Transparent and competitive

6.6 Equity Consideration

Institutions shall:

- i. Encourage participation of academically deserving students

Explore:

- ii. Institutional support funds
- iii. Donor-assisted placements

7. APPROVAL PROCESS

- i. Student submits
 - a) Elective application(Annex-I):
 - b) Elective proposal (Annex-II)
 - c) Host acceptance letter
- ii. Review by:
 - a) HOD and DME
- iii. Approval by:
 - a) Principal/Dean
 - b) UHS (where applicable)

8. LEARNING OBJECTIVES & LOGBOOK

Each elective must include:

- i. Defined learning outcomes
- ii. Daily/weekly logbook
- iii. Supervisor certification

9. CODE OF CONDUCT

Students must:

- i. Maintain patient confidentiality
- ii. Follow institutional rules
- iii. Adhere to ethical practices
- iv. Avoid unauthorized clinical procedures

10. RISK MANAGEMENT

- i. Mandatory pre-elective briefing
- ii. Compliance with infection control protocols
- iii. Health insurance for international electives

11. DOCUMENTATION & CERTIFICATION

Upon completion, submission of:

- i. Logbook (Annex-III)
- ii. Supervisor report (Annex-IV)
- iii. Reflective report (Annex-V)

Host institution shall issue:

- i. Elective Completion Certificate

12. MONITORING & QUALITY ASSURANCE

- i. Oversight by Department of Medical Education
- ii. Annual review of elective programs
- iii. Feedback from students and host institutions

13. IMPLEMENTATION

Applicable to all UHS constituent and affiliated institutions

Ahsan Waheed Rathore

Prof. Dr. Ahsan Waheed Rathore,
MBBS DCH, MRCP (UK), MRCPCH (UK), FRCP (London),
Vice Chancellor,
University of Health Sciences, Lahore.

Copy for Information to:

- Pro-Vice Chancellor, UHS
- Principals of all UHS Constituent and affiliated Medical & Dental Colleges
- Director Medical Education, UHS
- Director Undergraduate Studies, UHS
- Registrar, UHS
- Controller of Examinations (COE)
- Director Student Affairs, UHS
- Office file

Documents Required

List of Annexure:

- Annex-I: Elective Application Form
- Annex-II: Elective Proposal Template
- Annex-III: Logbook Format
- Annex-IV: Supervisor Evaluation Form
- Annex-V: Reflective Report Template

NOC (Official institutional permission letter)

ANNEXURE-I

ELECTIVE APPLICATION FORM

Student Name

Father Name

College Roll No

UHS Registration No

CNIC

Program/Year/Session

PROPOSED ELECTIVE TITLE

Student Institution

Host Institution

Duration

Student Signatures

Principal Signature &
Stamp

Seena Yusuf

ANNEXURE-II

ELECTIVE PROPOSAL TEMPLATE

Student name

Institute

Objectives

Expected Competencies

Activities Plan

Supervisor Details

Student Signature

ANNEXURE-III

LOGBOOK FORMAT

Date:

Student Name:

PROCEDURES OBSERVED/PERFORMED

REFLECTIONS

Supervisor verification

ANNEXURE-IV

SUPERVISOR EVALUATION FORM

Professionalism	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Satisfactory <input type="checkbox"/> Poor	Remarks
Knowledge	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Satisfactory <input type="checkbox"/> Poor	Remarks
Skills	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Satisfactory <input type="checkbox"/> Poor	Remarks
Overall Performance	<input type="checkbox"/> Excellent <input type="checkbox"/> Very Good <input type="checkbox"/> Good <input type="checkbox"/> Satisfactory <input type="checkbox"/> Poor	Remarks
Supervisor Signature		

ANNEXURE-V

REFLECTIVE REPORT TEMPLATE

Student Name

Electives Title

LEARNING EXPERIENCE

SKILLS GAINED

CHALLENGES FACED

FUTURE RELEVANCE

Student Signature