



## Concerns About National Exit Test

**For Prelims:** Concerns About National Exit Test, [IMA](#), [National Exit Test \(NeXT\)](#), [National Medical Commission](#).

**For Mains:** Concerns About National Exit Test.

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### Why in News?

The [Indian Medical Association \(IMA\)](#) has urged the [National Medical Commission \(NMC\)](#) to reconsider its proposed [National Exit Test \(NeXT\)](#) for all **MBBS students in India**, which will now be the licentiate exam and post graduate selection exam.

### What is the National Exit Test?

- The NExT is a medical licensing exam that is **designed to assess the competency of medical graduates**.
- Students who received their **medical degrees (who have completed the final MBBS course) from NMC approved medical institutions** and overseas students also will have to qualify for the National Exit Test.
  - To register for medical practice in India, they must pass the NExT test.
- This centralized common **exam will be conducted by a body formed by the commission for this purpose**.
  - **National Medical Commission (Amendment) Bill, 2022**, proposes an autonomous board, 'Board of Examinations in Medical Sciences', which, when comes to effect, will be responsible for holding the NExT exam.
- NExT will take the place of **tests like FMGE and NEET PG**.
- The NExT will comprise two separate exams called 'Steps'.
- There is no restriction in the number of attempts provided that the candidate passes both the steps within 10 years of joining MBBS.

### What are the IMA's Concerns?

- Nearly 50% of India's medical colleges have been established in the last 10-15 years and may not have the same level of well-trained teachers and systems as older institutions. Therefore, comparing the standards of these newer colleges with more established ones may not be appropriate.
- The IMA asserts that conducting the **NExT** through the All-India Institute of Medical Sciences (AIIMS) could disadvantage **students from recently established medical colleges**.
- They advocate for a minimum passing mark of no more than 30% and suggest that **the focus of the licensing exam should be on assessing the minimum standard** rather than including challenging questions.
- Additionally, the IMA emphasizes that the **post-graduate medical entrance exam should be**

separate from the NExT to evaluate the most meritorious students.

## What is the Standard of Medical Education India?

### ▪ Admission Process:

- In India, admission to undergraduate medical courses, including MBBS, in all medical institutions **goes forward only after the student has cleared the NEET** conducted by the National Testing Agency.
- The National Board of Examinations in Medical Sciences (NBEMS) is responsible for holding exams for Post Graduation (NEET PG).

### ▪ Accreditation:

- The Medical Council of India (MCI), replaced by the **National Medical Commission (NMC)**, is responsible for accrediting and recognizing medical colleges in India.
  - Accreditation ensures that colleges meet the prescribed standards of infrastructure, faculty, facilities, and curriculum. However, there have been instances where colleges fail to meet these standards, leading to concerns about the quality of education.

### ▪ Seats:

- In recent years, there has been a significant rise in the number of available medical seats (MBBS) in colleges, increasing from 60,000 to 1,04,333 as of 2023. Among these seats, 54,278 are allocated to Government Medical Colleges, while the remaining 50,315 are designated for Private Medical Colleges.

## What are the Problems Plaguing Medical Education in India?

### ▪ Demand-Supply Mismatch:

- There is a serious **demand-supply mismatch** as well as inadequate seats in terms of population norms. In private colleges, these seats are priced between **Rs 15-30 lakh per year** (not including hostel expenses and study material).
- This is way more than what most Indians can afford. It is difficult to comment on quality as nobody measures it. However, it is highly variable and poor in most medical colleges, irrespective of the private-public divide.

### ▪ Issues of Skilled Faculty:

- The government's initiative to open new medical colleges has run into a serious faculty crunch. Except at the lowest level, **where new entrants come, all that the new colleges have done is poach faculty** from a current medical college. Academic quality continues to be a serious concern.
- The MCI did try to address many of the earlier loopholes of ghost faculty and corruption. It introduced the **requirement of publications for promotions to improve the academic rigor** of faculty. But this has resulted in the mushrooming of journals of dubious quality.

### ▪ Problems with Private Medical Colleges:

- A change in the **law in the 1990s made it easy to open private schools** and so many such medical institutes cropped up in the country, funded by businessmen and politicians, who had **no experience of running medical schools**. It commercialized medical education to a great extent.

### ▪ Corruption in Medical Education:

- Fraudulent practices and rampant corruption such as fake degrees, bribes and donations, proxy faculties, etc. in the medical education system is a major problem.

## Way Forward

- Recent efforts by the NMC to **regulate college fees are being resisted by medical colleges**. The government should seriously consider subsidizing medical education, even in the private sector, or look at alternative ways of financing medical education for disadvantaged students.
- Quality assessments of medical colleges **should be regularly conducted**, and reports should be available in the public domain. The NMC is proposing a **common exit exam for all medical undergraduates** as a quality control measure.

- In addition to raising the standards of medical professionals, the system should innovate to meet the growing shortage of health professionals to serve aging populations with lifestyle and lifetime ailments.

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