Al Ameen J Med Sci 2025;18(4):261-269 ● US National Library of Medicine enlisted journal ● ISSN 0974-1143

ORIGINAL ARTICLE CODEN: AAJMBG

Does the 'cadaveric oath ceremony' embark proper AETCOM teaching? – A Kirkpatrick model analysis in Phase 1 MBBS Anatomy students

Hironmoy Roy[1*], Kuntala Ray[2] and Shweta Parwe[3]

[1]Department of Anatomy, Institute of Post Graduate Medical Education & Research & SSKM Hospital, 244 AJC Bose Road, Kolkata-700020, West Bengal, India, [2]Department of Community Medicine, Institute of Post Graduate Medical Education & Research, SSKM Hospital, 244 AJC Bose Road, Kolkata-700020, West Bengal, India and [3]Department of Panchakarma, Vice Dean (Research) Mahatma Gandhi Ayurved College, Hospital & Research Centre, Salod (H), Wardha, Datta Meghe Institute of Higher Education & Research (DMIHER) (DU), Wardha-442001, Maharashtra, India

Received: 31st July 2025; ***Accepted:*** 18th September 2025; ***Published:*** 01st October 2025

Abstract: *Rationale:* AETCOM teaching of the NMC module 1.5 "cadaver as our first teacher" is traditionally been taught to the Phase 1 students at the very beginning of their Anatomy course with the event of lecture followed by cadaveric oath-ceremony. But evaluation of such programme has yet to be found in literature conducted in this state. *Methodology:* Amongst the three-level programme evaluation plan, for 1st level "students' reaction" was gathered from the immediate feedback after the cadaveric oath ceremony. 2nd level impact of the programme, i.e. "students' learning" was evaluated by reflection analysis and their score in theory examination. Level 3, i.e. "students' change in behaviour" was assessed by planning Directly-Observed-Non-Clinical Skill station during Anatomy Practical examination. *Results:* the study has incorporated data of all 200 1st year students. Students' responses to feedback of the event of cadaveric oath ceremony was 90% favorable. On analyzing the reflection-essays submitted by the students, it was observed that they could gain the attitude to show respect to the cadaver. Although almost all of the students have achieved 60% marks in theory assessment of AETCOM but Practical assessment revealed their score ranged from 40% to 90% out of the full marks. *Conclusion:* Although the Anatomy-Education-Teaching-Curriculum-Outcome-Model incorporates the cadaveric oath ceremony event since 2016; but the regular periodical evaluation of the programme seemed essential especially to stress upon the "does" level of Millar's pyramid. The present study provided the concept of such practical assessment plan, although very first time; so far searched in literature.

Keywords: Anatomy-Education-Teaching-Curriculum-Outcome-Model, Skill assessment, Affective domain assessment, Directly Observed Non-Clinical Skill (DONCS).

Introduction

For teaching AETCOM in Anatomy at Phase 1 MBBS, the NMC (erstwhile MCI) has proposed the AETCOM module booklet, one of which is 'cadaver as our first teacher' (Module no. traditionally been taught in Anatomy department since 2019. Usually that session get conducted at very beginning of Anatomy dissection class (on its first day) with first phase of one hour lecture session followed by 'cadaveric oath ceremony'. The "cadaveric oath ceremony" was first evidenced much earlier, as a part Bioethics, to sensitise learners in maintaining respect to the cadaver in Anatomy classes, with presumption that once the learner can be able to respect the dead, in future s/he would be able to respect the livings. [1-6]

Till date, as per the laid norms of NMC & university, this module is assessed by the theory question of five (5) marks in the first paper mandatorily, but there was almost no data of its structured evaluation throughout the year. Moreover, there was also limited evidence of evaluation of such AETCOM teaching learning programme using the Kirkpatrick model of programme evaluation [6-7].

As explained in literature, The 'Kirkpatrick model' is used to evaluate any programme (here applicable for AETCOM teaching learning programme in Anatomy for Phase 1 MBBS students) as-

Level 1	How much the participants did like the programme?
Level 2	What they have learnt from the programme?
Level 3	Whether the programme could impart some change in behaviour of the learner?
Level 4	What was the long term effectiveness of change in behaviour?
Level 5	What was the cost-benefit outcome for organizing programme?

This model of programme-evaluation is globally been used for evaluation of different programmes allied with the teaching-learning & assessment. [8-11].

Side by side, in consideration of the concept of 'Millar's pyramid' in competency assessment the levels are from base to top as- 'knows' (what a student know, i.e. rote memory assessment), 'knows how' (assessment of applied knowledge in theoretical problem solving, i.e. higher level of cognitive domain assessment), 'shows how' (practical assessment in simulated condition) and the top most level is the 'does', that is 'how the student is actually performing the task in real scenario'. If that concept is implemented in regard of assessment of this particular module, then the highest level of assessment would to be assessment of a learner in handling cadaver, when he/she is actually handling it. So, in the teaching learning programme evaluation at the level 2 & 3 of Kirkpatrick model, the Millar's pyramid is hiddenly embedded [8-14] [Fig 1].

Fig-1: Concept of embedding Millar's pyramid of competency assessment in Kirkpatrick programme evaluation model

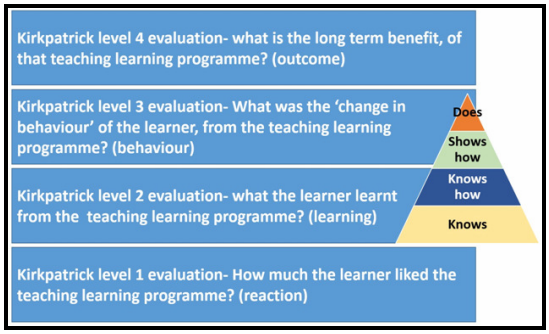


Illustration: The competency assessment of a learner/participant is attempted in Millar's pyramid tiers, it automatically evaluates the teaching learning programme in level 2 & 3 of Kirkpatrick model.

In 2017, Dinesh Kumar. V, S. Jayagandhi,, V.K.Nim, Phansalkar M, Alexander T have published their work from Pondicherry, which was done on 200 UG learners on their record analysis of learners' reflection after the cadaver disrobing ceremony (Level 1 analysis) [16]. Later in 2020, Singal A, Sahni D, Chaudhary P, Singh H [11] have worked on students' 'reaction' & 'learning' parts on handling cadaver during Anatomy course after a virtual thanks giving programme to a cadaver. Here authors could evaluate till level 2 of Kirkpatrick model [17].

Keche HA, Thute P, Gajbe U, Keche AS from Wradha , Maharashtra (2020), have explored perceptions of 220 first year medical learners on 5-point likert scale after the 'cadaveric oath ceremony' in their institute. In this work, authors could evaluate the 'reaction' part (Level 1) was assessed only [18].

Sv S, Maria Francis Y, Karunakaran B, Raghunath G, M K, Begum Z, Subramanian R. from Chennai published their work on learners' feedback upon the cadaveric oath ceremony, organized at their institute. Here again authors accessed the 'reaction' part of the AETCOM teaching learning programme only. Higher levels were not been addressed [19].

The case-control study of Narasipuram A from Andhra Pradesh, India (2022) and work of Adabala N.V.V. Veerraju, Telagareddy Divya Jyothi Boda Narayana Rao, Anand Acharya from Amlapuram (2023) also described the 'reaction' part only after the cadaveric oath ceremony by students' feedback. Further levels not been assessed [20-21]. So far searched, from West Bengal or eastern India, till date no literature has been found aligning such.

Research Question: Whether the Cadaveric Oath Ceremony conducted as the part of AETCOM teaching- learning programme in

Anatomy, embarked effective changes in learning of Phase 1 MBBS learners of Anatomy?

Objective:

1. To explore the reaction of learners after the cadaveric oath ceremony
2. To analyse the learning of the learners in handling the cadaver
3. To measure the behavior of the learners while handling cadaver

Material and Methods

Place of study: The study was carried on in the Department of Anatomy of Institute of Post Graduate Medical Education & Research, Kolkata.

Study design: Descriptive mixed method longitudinal study

Study period: One year

Period required for data collection: 08 months

Sampling frame: Learners of Phase 1 MBBS

Sampling technique: departmental records belonging to all the learners (200) were accessed and studied.

Sample size: records of all 200 learners were accessed.

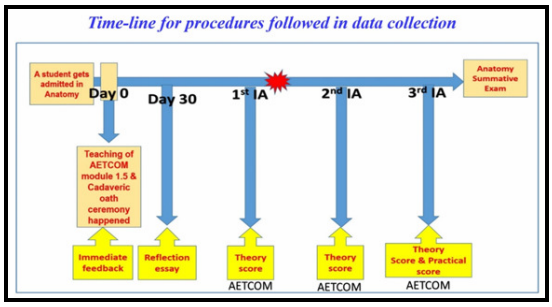
Inclusion criteria: records of all 200 1st year learners, who have undergone Anatomy curriculum; were collected. Before such, requisite permissions were taken from the appropriate authorities. There was no drop out.

Exclusion criteria: Any absentee in internal assessment exam.

Study tool: Departmental records of -

a) Feedback form after the of 'cadaveric oath ceremony' class.
b) Reflection essays as written by learners after the 'cadaveric oath ceremony'.
c) Theory score capture sheet- to capture marks of 1st, 2nd, 3rd IA exams.
d) Practical score in particular station in 3rd IA exam [Fig 2].

Fig-2: Entire study plan



Making & validating the tool: This project was a part of the MHPE course of SHPER, DMIMS (DU) Wardha. Approval has already been granted from there to conduct the work. Approval has also been obtained from Institutional Ethics committee from the place of work.

Here we could assess up to level 3 of Kirkpatrick model. For each level, the tools of evaluation were used as-

Level	What to evaluate	Tools used	How validation done
Level 1	How the participants liked the programme?	Feedback questionnaire	By experts, both inside & outside the institutes
Level 2	What they have learnt from the programme?	a) Reflection essay b) Theory answers in internal assessment exam	Not applicable
Level 3	Whether the programme sets some change in behaviour of the learner?	DONCS task & scope capture sheet [15]	By experts, both inside & outside the institutes

Statistics: For descriptive analysis the mean, median, mode, frequencies, ranges, standard deviations were calculated using SPSS (version 12) software. Qualitative content analysis of the Reflection essays were done by participant authors. From the phrases codes were formulated and clubbing them, themes were generated.

Results

Among the total 200 students 59% were male, with mean age of 19 years, where 69% were by faith Hindu and approximately equal proportion of students have been brought up in English, Bengali & Hindi medium of instructions till their XII standard of education [Fig 3].

Level 1 Kirkpatrick evaluation: On assessing the students' feedback it was found that their responses were in average 90% favorable representing their likingness to the event [Fig 4].

Fig-3: Demographic distribution of the participants [N=200]

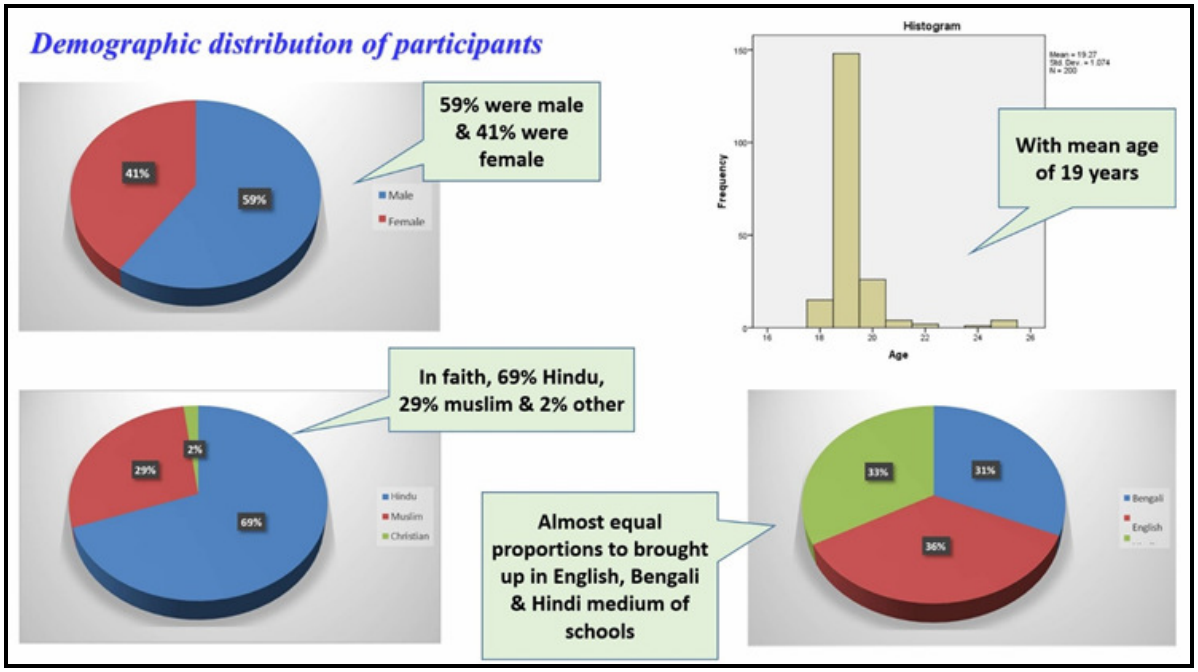
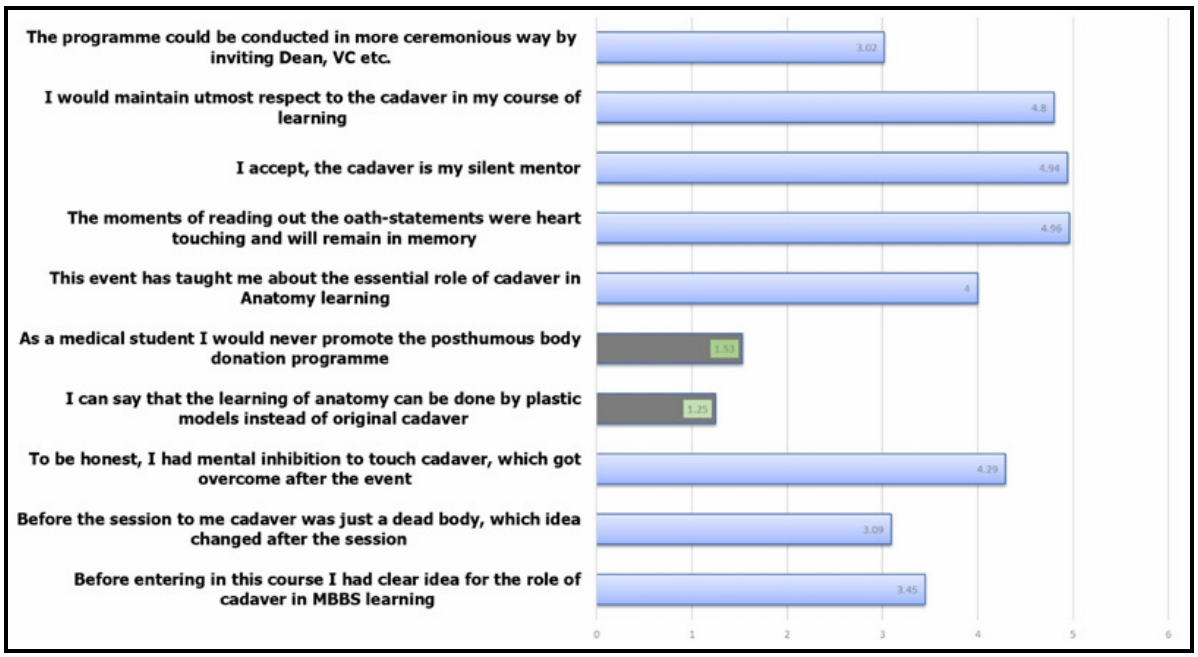


Fig-4: Bar diagram showing the response of the participants on immediate feedback after the cadaveric oath ceremony [Level 1 Kirkpatrick- students' reaction to the programme]



Level 2 Kirkpatrick evaluation:

(1) Qualitative analysis of the reflective writings have explored that students have learnt proper attitude to handle cadaver and maintenance of discipline in the dissection hall [Table 1].

(2) Roll-wise marks in AETCOM theory questions have been explored and it was found that that almost all of the students scored between 3 to 4 out of full marks 5 (60-80%) in the theory examination [Table 2].

Table-1: Qualitative analysis of the reflection essays submitted by the learners after 'cadaveric oath ceremony' (thematic analysis) [Level 2 Kirkpatrick- students' learning from the programme]

Statements	First order coding	Themes
"In my life I have seen cadaver for first time". *"For first time I saw a dead body in front of me".* *"I was scared, seen a dead body in front of me for first time."* *"I was just in front of a dead body"* *"Never seen a cadaver ready for us to study."* *" It was first time, I saw a cadaver on table."* *"I could not imagine that I would to study real dead body."* *"I am going to study real human being."* *"Feeling excited, I will be studying human body from cadaver."* *"For the first time I am seeing cadaver."* *"He is lying for me."* *"I dreamed for this day, when I will dissect true human body."*	First time saw cadaver Excited on seeing cadaver	Excited on seeing cadaver in Anatomy lab
"I recited the cadaveric oath." *"The statements in oath was thrilling."* *"I recited the oath with friends."* *"The words in the oath was really thrilling."* *"I never imagined such an oath be possible."* *"Each words in the oath was touching my heart."* *"I felt the altruism of the person, while was reciting oath."* *"I can never forget the altruism of this person."* *"While I was reciting oath, I felt cried for the person."* *"Teachers were also reciting with us."* *"Every words of the oath has deep meaning."* *"I tried to feel the inner message of the oath statement"*	Felt excited on reciting the cadaveric oath. Words of the oath statements were heart touching Felt the altruism of the donor.	First sensitization to altruism
"We all maintained strict discipline there." *"We all wore apron, stood side by side."* *"With all my friends, I stood in row silently."* *"After oath, there was silence in hall."* *"I felt God present there."* *"Highest magnitude of donation making the place sacred."* *"I paid floral tribute to cadaver."* *"I gave flower to the dead person."* *"I felt the cadaver is Anatomy God."*	Faculties & learners maintained discipline all were in proper attire	Discipline in the Dissection hall
"I should enter the hall with maintaining its dignity." *"I shall be in proper dress while entering the hall."* *"I shall be properly equipped while approaching the cadaver for dissection."* *"I shall never take selfie with cadaver".* *"I should honor the donation throughout my life."* *"I shall promote body donation among my relatives."* *"I shall disrobe and robe the cadaver properly."* *"While in class I will take care of the cadaver so that its dignity is maintained."*	Respectful attitude to cadaver Care in handling Promote body donation Take care for the cadaver	Learnt respect in handling cadaver.

Table-2: Comparison of the score obtained in theory Q & Practical station of AETCOM assessment [N=200]	
Variables	**Values**
Mean of the individual's theory marks in AETCOM question (when formulated out of 10)	Mean= 6.51 Std. devn. = 0.53
Mean of individual's practical marks (formulated out of 10)	Mean = 7.40 Std. deviation= 0.88
Paired sample t test	t= (-) 11.13 df= 199 correlation= 0.225 p= 0.067

Level 3 Kirkpatrick evaluation: On analyzing the score of practical assessment part it was found that their score varied from 04 to 09 (40-90%) out of full marks 10 with mean of 7.44 ± 0.88) with non-significant/ weak-significant correlation with the incumbent's theory score in AETCOM question. [Table 2].

Discussion

The teaching of AETCOM Module 1.5 "cadaver as our first teacher" has been conducted in very beginning of Anatomy classes in every academic session, in two phases- one hour lecture session followed by 'cadaveric oath ceremony' since 2019 admission batch. So it becomes evident that if we could access the feedback from the learners regarding the AETCOM sessions and "cadaveric oath ceremony" then it would be able to assess the "reaction" of the learners (Level 1). Later on, learners 'narratives on reflection' were used be as tool to assess their "learning" (Level 2). But to access the further higher level (i.e. Behavior) how they are actually handling cadaver and biological human remains (bones/ viscera) during their Anatomy learning programme, we need to opt for some 'work-placed based assessment (WPBA)' tools.

Among the globally accepted tools of Work Placed Based Assessment (i.e. assessing a student when s/he is actually doing the work in real life scenario in real setting), Mini-CEX, Multi-source feedback, Peer assessment tool (PAT), Mini-PAT, Kalamazoo consensus, Directly observed Non-clinical skill (DONCS) etc. are usually used to assess the affective domain of a learner.

Multisource feedback (MSF *alias*. 360 degree evaluation) was not been felt applicable in this particular aspect as for that the trainee would to get feedback from the patient's relatives as well as the patient himself (here cadaver is silent and relatives were absent). DOPS (Direct observation of Procedural Skill) also could not be undertaken as there would not be any procedure of skill domain. The Kalamazoo scale, also could not been applied, as no communication been taken place between the learner & the cadaver. So, considering all feasibilities, the Direct Observation of Non Clinical Skill (DONCS) with certain modifications was planned of [8-9, 15].

Earlier studies, carried on outside the state, in different places of India; have explored the learners' immediate feedback, as well as learners learning by reflection writing. Thus they pioneer authors could approach till the Level 1 & Level 2 of Kirkpatrick. Addressing to Level 3 of Kirkpatrick upon this AETCOM teaching-learning programme, has not been found, ill literature been searched. Moreover the application of OSPE (level: Shows How) not get befit to assess the cadaver- handling skill, as it's not a dummy environment for an Anatomy learner. So there was also dearth of toll and assessment of cadaver handling skill for the learners [Table 3- Comparison with previous works].

Table-3: Comparative chart showing the work with previous authors		
Previous work & present work		
Sl no.	**Authors**	**Gross findings**
1	Dinesh Kumar. et al [16] Pandicherry 2017	This study was carried on by analyzing students' reflection after the cadaver disrobing ceremony. Record analysis of students' reflection was done. The responses were classified under four themes (cognitive, moral, behavioral and affective) and presented. (Level 2 Kirkpatrick analysis)

Sl no.	Authors	Gross findings
2	Singal A et al [17] Haryana 2021	Students' reflection analysis was done to explore their gratitude for cadaver in the importance of cadaveric dissection from the reflection of students who experienced hybrid anatomy learning amidst COVID- 19. Those students were not very much exposed to real cadaveric dissection due to COVID epoch. (Level 2 Kirkpatrick analysis)
3	Keche H et al [18] Wardha 2020	Among 220 students a feedback on likert scale was obtained after the cadaveric oath ceremony. (So they achieved Level 1 in Kirkpatrick model)
4	Sv S et al [19] Chennal 2022	Students' perception to human body in cadaver lab was assessed in a questionnaire to explore students' ethical values, which was not mentioned to be related with cadaveric oath ceremony. (So they achieved Level 1 in Kirkpatrick model)
5	Adabala N.V.V. et al [21]. Andhra Pradesh 2023	Study was conducted with 200 students to get the feedback of the cadaveric oath ceremony. (So achieved Level 1 Kirkpatrick model) Further levels not been assessed.
6	Narasipuram A [20]. Hyedrabad 2022	It was a case control study. 50 students participated in cadaveric oath, and 50 were not. Later on, students' values of bioethics were assessed. (Level 2 Kirkpatrick model was achieved)
7	Present study Kolkata 2024	It was a year-long observation *(Longitudinal model)*. Students' feedback/ Perception for the cadaveric oath ceremony was explored (Level 1). Their reflection essays were analysed (Level 2). Their cadaver handling skill was also assessed to explore their cadaver handling skill (Level 3). So here, we could achieve till the *Level 3* of Kirkpatrick model.

Conclusion

As the proverb 'assessment drives learning' says, no learning is completed unless it is assessed for. Similarly no programme is completed unless it is evaluated in structured way. Although the AETCOM teaching-learning programme is on run from 2019 batch (except the Covid phase), still now it is in practice that the AETCOM assessment is done only by 5-marks theory question, where moreover an examiner gives marks with subjective assessment.

In this study a practical skill assessment station for AETCOM has been implemented to supplement the AETCOM-assessment in Anatomy with its traditional theory question part. Moreover, the AETCOM teaching learning programme also got evaluated till the 3rd level of Kirkpatrick model, which was not been documented in previous literatures, so far searched for.

Strength, Limitation & future scope: Strength of this work can be mentioned as-

a) All 200 students' data were analysed. There was no drop out
b) First time AETCOM teaching learning programme got evaluated till Kirkpatrick level-3 in Anatomy
c) First time assessment of 'Does' level could be conducted in structured way, for AETCOM in Anatomy learners (students were assessed their cadaver-handling skill while they were actually handling cadaver)
d) First time use of 'directly observed non-clinical skill (DONCS)' as a part of Work placed based assessment in Anatomy learners

Limitation: In the sheet for immediate feedback, no option were been put for open ended comments, which might restrict learners comment in some way. For crunch of time the tools like 'multi source feedback' could not been used, which can be carried on in future during the Anatomy class hours in weekly schedule. In future the practical assessment questionnaire may be implemented in other institutes also for the assessment of 'cadaver handling skill'.

Future scope:

1. Long term effect, i.e. *Level 4* can be further planned.
2. To introduce *multi-centric work* for Practical assessment of AETCOM in Does level
3. To plan & implement the *multi-source feedback* component in daily class hours
4. AETCOM Theory Question can be *structured,* and further correlation study may be planned with the practical assessment score
5. AETCOM skill assessment may be incorporated in all disciplines.

Translatory component actualized-

1. During practical exam of Anatomy, one station can be done for the assessment of "cadaver handling skill" of the learners.
2. To incorporate such assessment plan in Anatomy Education Teaching Curriculum Outcome Model, nationwide; so that practical AETCOM assessment gets mandated at every set up.
3. In other subjects too the AETCOM assessment to be addressed in "does" level.
4. AETCOM Theory question can be framed structured and scenario based.
5. Learners to be encouraged in reflection writing and proper evaluation of such writings also to be done. For this faculty-sensitization is to be done.

Acknowledgement

The authors sincerely acknowledge Chairperson/ members of the Institutional Ethics Committee, the Head of the institution, and the Head of the department for their permission to do the work. Sincere regards and thanks to be conveyed to Prof. Dr. Vaibhav Anjankar, Director, of the School of Health Education & Research, DMIHER, Wardha for his continuous inspiration and guidance throughout the MHPE course. Faculties, residents of department and outside the department, faculties of Medical Education Unit are also been acknowledged for their participation in the validation of the practical station. Last but not the least, authors wish to convey their sincere regards and gratitude to Prof. Dr. Vedprakash Mishra, the Pro-VC of DMIHER (DU) for his expert comments on the presentation of the work.

Financial Support and sponsorship: Nil

Conflicts of interest: There are no conflicts of interest.

References

1. NMC. AETCOM module as available in link *https://www.nmc.org.in/wp-ontent/uploads/2020/01/AETCOM_book.pdf* [last accessed on 29 Aug 2024; p34-37].
2. Sawant SP, Rizvi S. Cadaveric Oath and Its Relevance for Learners of Anatomy (Review article). *Indian Journal of Anatomy*. 2016; 5(2):190-193.
3. Gaikwad MR. Cadaveric Oath: The need of the hour. *Indian Journal of Anatomy & Surgery of Head, Neck & Brain*. 2017; 3(2):56-57.
4. Ajita R, Singh YI. Body Donation and Its Relevance In Anatomy Learning- A Review; J Anat Soc India. 2007; 56(1):44-47.
5. Rosenfield PJ. Jones L (2004). Striking a balance: training medical learners to provide empathetic care. *Med. Educ.* 2004; 38:927-933.
6. NMC. Assessment module. As available in link *https://www.nmc.org.in/wp-content/uploads/2020/08/Module_Competence_based_02.09.2019.pdf* [accessed on 31 Aug 2024].
7. Balandin SA, Sigafoos S, Reed J, Vicki. The Kirkpatrick model: A useful tool for evaluating training outcomes. *J intellectual develop disability.* 2009; 34:266-274.
8. Massod QR, Usmani MAW. Evaluation Of Medical teacher's Training Program through Kirkpatrick's Model. *Khyber Medical University Journal*. 2015; 7(2):76-80.
9. Rouse DN. Employing Kirkpatrick's evaluation framework to determine the effectiveness of health information management courses and programs. *Perspect Health Inf Manag.* 2011; 8(Spring):1c.
10. Ruskanda L, Syharial Z and Suparman A. (2018); Implementation of the Kirkpatrick Model Training Program Evaluation. *Int. J. of Adv. Res.* 2018; 6(8):878-892,
11. Shallal TMA, Alkhateeb NE, Al-Dabbagh A. Virtual faculty development program in bioethics evaluated by Kirkpatrick model: A unique opportunity. *PLoS ONE*. 2023; 18(10):1-9.
12. Williams BW, Byrne PD, Welindt D, Williams MV. Miller's Pyramid and Core Competency Assessment: A Study in Relationship Construct Validity. *J Contin Educ Health Prof.* 2016; 36(4):295-299.
13. Prakash J, Chatterjee K, Srivastava K, Chauhan VS, Sharma R. Workplace based assessment: A review of available tools and their relevance. *Ind Psychiatry J.* 2020; 29(2):200-204.
14. Core Advanced Pharmacist e-portfolio Direct Observation of Non-Clinical Skills (DONCS) example. *Royal pharmacological Society*. Available

in link: *https://www.rpharms.com/development/credentialing/core-advanced-pharmacist-curriculum/core-advanced-pharmacist-e-portfolio/core-advanced-e-portfolio-direct-observation-of-non-clinical-skills-doncs-example.* [Accessed on 29 Feb 2024].
15. Roy H, Ray K, Parwe S. Introducing 'Directly Observed Non Clinical Skill (DONCS)' in AETCOM assessment for Phase 1 MBBS students in Anatomy as a part of Anatomy Education Teaching Curriculum Outcome Model. *Int J Life Sci Biote & Phar Res.*2025;14(5):1039-1044.
16. Dinesh Kumar V, Jayagandhi S, Nim VK, Phansalkar M, Alexander T. Cadaver ceremonies as a foundation step for bioethics: a phenomenological study. *Int J Anat Res*. 2017; 5(3.2):4195-4203.
17. Singal A, Sahni D, Chaudhary P, Singh H. Virtual thanks giving to a cadaver by medical learners exposed to learning anatomy before and amidst COVID-19 pandemic. *Surg Radiol Anat.* 2021; 43(4):523-527.
18. Keche HA, Thute PP, Gajbe UL et al. Cadaveric oath – perceptions of first year medical students. *J Evolution Med Dent Sci.* 2020; 9(37):2722-2725.
19. Sv S, Maria Francis Y, Karunakaran B, Raghunath G, M K, Begum Z, Subramanian R. Donor Oath: Respect to the Mortal Teacher to Learn Ethics and Humanitarian Values of Anatomy. *Cureus.* 2022; 14(3):e22941.
20. Narasipuram A. Impact Of Cadaveric Oath On First MBBS Learners. *Int J Adv Res.* 2022;10(8):733-735.
21. Adabala NVV Veerraju, Telagareddy DJ, Boda NR, Acharya A. Does Cadaveric Oath Influence the Mind-Set of the First Year Medical Learners? A Study in Andhra Pradesh, India. *Int J Phar and Clini Res*. 2023; 15(3):738-743.

Cite this article as: Roy H, Ray K and Parwe S. Does the 'cadaveric oath ceremony' embark proper AETCOM teaching? – A Kirkpatrick model analysis in Phase 1 MBBS Anatomy students. *Al Ameen J Med Sci* 2025; 18(4): 261-269.

*All correspondences to: Dr. Hironmoy Roy, Professor, Department of Anatomy, Institute of Post Graduate Medical Education & Research, SSKM Hospital, 244 AJC Bose Road, Kolkata-700020, West Bengal, India. Email: hroyphd@gmail.com