

MEDICAL COUNCIL OF INDIA

POSTGRADUATE MEDICAL EDUCATION COMMITTEE

25TH MAY, 2007

Minutes of the meeting of the Postgraduate Medical Education Committee held on 25th May, 2007 at 2 p.m. in the Office of the Medical Council of India, Pocket-14, Sector-8, Dwarka, New Delhi-110 077.

Present:

Dr. Ved Prakash Mishra - Chairman
Dr. Indrajit Ray
Dr. S.K. Sinha
Dr. N.B. Singh
Dr. A. Rajasekaran
Dr. (Mrs.) Sneh Bhargava

Lt. Col. (Retd.) Dr. A.R.N. Setalvad – Secretary

Apologies for absence were received from Dr. S.R. Maralihalli and Dr. V. Kanagraj.

1. Minutes of the last meeting of the Postgraduate Committee – confirmation of.

The minutes of the Postgraduate Committee meetings held on 26/2/2007 & 28/2/2007 were confirmed.

2. Minutes of the last meeting of the Postgraduate Committee – action taken thereon.

The Postgraduate Committee noted the action taken on the various items included in the minutes of the meetings of the Postgraduate Committee held on 26/2/2007 & 28/2/2007.

3. Starting of DM (Nephrology) course at T.N. Medical College, Mumbai affiliated to Mumbai University u/s 10A of the IMC Act, 1956.

Read: The compliance verification report (March, 2007) on the physical and other teaching facilities available at T.N. Medical College, Mumbai affiliated to Mumbai University for consideration of starting of DM(Nephrology) course u/s 10A of the IMC Act, 1956.

The Postgraduate Committee considered the compliance verification inspection report (March,2007) and noted that the compliance is unsatisfactory; decided to reiterate its earlier decisions taken at its meetings held on 30.06.2004, 26.03.2005, 23.11.2005 and 16.06.2006 recommending to the Central Govt. not to issue Letter of Intent for starting of D.M.(Nephrology) course at T.N. Medical College, Mumbai affiliated to Mumbai University u/s 10A of the I.M.C. Act,1956 as the following deficiencies are still persisting/increased:-

1. Prof. & Head does not possess requisite super-speciality qualification.
2. Promotion of Prof. & Head is not as per MCI norms.
3. Lecturer does not possess super-speciality qualification.
4. Resultantly, teaching complement is incomplete.
5. Library facilities are inadequate.
6. Chronic ambulatory peritoneal dialysis is practically not being done.
7. Renal transplant are also infrequent.
8. Immediate post renal transplant room is not available.
9. Other deficiencies as pointed out in the inspection report.

4. Starting of M.Ch.(Surgical Gastroentrology) course at Bangalore Medical College, Bangalore affiliated to Rajiv Gandhi University of Health Sciences, Bangalore u/s 10A of the IMC Act, 1956.

Read: The letter dated 24/2/2007 received from the Principal, Bangalore Medical College, Bangalore for consideration of starting of M.Ch.(Surgical Gastroentrology) course u/s 10A of the IMC Act, 1956.

The Postgraduate Committee considered the letter dated 24.02.2007 and noted that the compliance is unsatisfactory; decided to reiterate its earlier decision taken at its meeting held on 30.06.2004 recommending to the Central Govt. not to issue Letter of Intent for starting of M.Ch.(Surgical Gastroentrology) course at Bangalore Medical College, Bangalore affiliated to Rajiv Gandhi University of Health Sciences, Bangalore u/s 10A of the I.M.C. Act,1956 as the following deficiencies are still persisting:-

1. Prof. & HOD does not possess super-speciality qualification.
2. 2nd Prof. is Honorary and also does not possess requisite postgraduate qualification in the speciality.
3. Teaching complement is incomplete.
4. Other deficiencies/observations as pointed out in the inspection report.

5. Starting of M.Ch.(Neuro-Surgery) course at Thanjavur Medical College, Thanjavur under The Tamilnadu Dr. MGR Medical University, Chennai u/s 10A of the IMC Act, 1956.

Read: The compliance received from the institute dated April,2007 along with inspection report (November,2006) on the physical and other teaching facilities available at Thanjavur Medical College, Thanjavur under The Tamilnadu Dr. MGR Medical University, Chennai for consideration of starting of M.Ch.(Neuro-Surgery) course.

The Postgraduate Committee considered the compliance received from the Institute dated April,2007 along with inspection report (November,2006) and decided to verify the same by way of an inspection.

6. King George's Medical University, Lucknow, – Recognition of M.Ch.(Paediatrics Surgery) qualification in respect of students being trained at King George's Medical University, Lucknow.

Read: The compliance together with the Council Inspector's report (February, 2007) on the standard of examination and other teaching facilities available at King George's Medical University, Lucknow for purpose of recognition of M.Ch.(Paediatrics Surgery) qualification granted by King George's Medical University, Lucknow.

The Postgraduate Committee considered the compliance together with the Council Inspector's report (February, 2007) and noted that the compliance is unsatisfactory; decided to reiterate its earlier decision taken at its meeting held on 26.02.2007 recommending not to recognize M.Ch.(Paediatrics Surgery) qualification granted by King George's Medical University, Lucknow in respect of students being trained at King George's Medical University, Lucknow as the following deficiencies are still persisting:-

1. Teaching complement continues to be incomplete in both the units.
2. Surgical work-load is inadequate even now.
3. Other deficiencies/observations as pointed out in the inspection report.

In view of above, the Committee further decided to direct the institution authorities to henceforth stop admissions in M.Ch. (Paediatric-Surgery) course from the ensuing academic session 2008-2009.

7. **Shivaji University – Approval of Dr. V.M. Medical College, Solapur for the award of MD(SPM) qualification & recognition of DPH qualification.**

Maharashtra University of Health Sciences, Nashik – Approval of V.M. Medical College, Solapur for the award of DPH qualification.

Read: The compliance together with the Council Inspector's report (Jan., 2005) for purpose of i) recognition of DPH qualification and approval of the college for the award of MD (SPM) qualification granted by Shivaji University and (ii) approval of the college for the award of DPH qualification under Maharashtra University of Health Sciences, Nashik along with the order of the Hon'ble High Court of Mumbai in writ Petition No. 1461 of 2007 dated 23.04.2007.

The Postgraduate Committee considered the compliance together with the Council Inspector's report (Jan., 2005) and noted that the Hon'ble High Court of Mumbai in its order dated 23.04.2007 in Writ Petition No. 1461 of 2007 has directed as under:-

".....2. Considering the above, we request the MCI to send the inspection team to the college and to take a decision as early as possible so that the seats are not lost, if otherwise there has been compliance by the institution....."

In view of above, the Postgraduate Committee decided to verify the compliance by way of an inspection and directed the office that the inspection report may be placed at its ensuing meeting.

8. **Shivaji University – Approval of V.M. Medical College, Solapur for the award of MD (Paediatrics) & DCH qualification.**

Maharashtra University of Health Sciences, Nashik – Approval of V.M. Medical College, Solapur for the award of DCH qualification.

Read: The compliance together with the Council Inspector's report (Dec., 2004) on the standard of examination and other teaching facilities available at V.M. Medical Solapur for purpose of i) approval of the college for the award of M.D.(Paediatrics) & DCH qualification granted by Shivaji University and ii) approval of V.M. Medical College, Solapur for the award of DCH qualification granted by Maharashtra University of Health Sciences, Nashik.

The Postgraduate Committee considered the compliance together with the Council Inspector's report (Dec., 2004) and noted that the Hon'ble High Court of Mumbai in its order dated 23.04.2007 in Writ Petition No. 1461 of 2007 has directed as under:-

".....2. Considering the above, we request the MCI to send the inspection team to the college and to take a decision as early as possible so that the seats are not lost, if otherwise there has been compliance by the institution....."

In view of above, the Postgraduate Committee decided to verify the compliance by way of an inspection and directed the office that the inspection report may be placed at its ensuing meeting.

9. **Andhra Pradesh University of Health Sciences, Vijayawada & NTR University of Health Sciences, Vijayawada – Approval of Gandhi Medical College, Hyderabad for the award of M.S. (E.N.T.) & D.L.O. qualifications.**

Read: The compliance verification report together with the Council Inspector's report (November, 2001) on the standard of examination and other teaching facilities available at Gandhi Medical College, Hyderabad for purpose of approval of the college for the award of M.S. (E.N.T.) & D.L.O. qualifications earlier granted by Osmania University, Andhra Pradesh University of Health Sciences, Vijayawada & now by NTR University of Health Sciences, Vijayawada.

The Postgraduate Committee considered the compliance verification report together with the Council Inspector's report (November, 2001) and decided to recommend that Gandhi Medical College, Hyderabad be approved for the award of M.S. (E.N.T.) & D.L.O. qualifications earlier granted by Osmania University, Andhra Pradesh University of Health Sciences,

Vijayawada & now by NTR University of Health Sciences, Vijayawada restricting the number of admission to 2 (two) students for degree and 2 (two) students for diploma per year.

10. Calcutta University – Approval of Vivekanand Institute of Medical Sciences, Calcutta for the award of M.D (General Medicine) qualification.

Read: The letter dated 13/3/2007 received from Dean, Vivekanand Instt. Of Medical Sciences, Calcutta together with the Council Inspector's report (April, 2006) on the standard of examination and other teaching facilities available at Vivekanand Institute of Medical Sciences, Calcutta for purpose of approval of the college for the award of M.D.(General Medicine) qualification granted by Calcutta University.

The Postgraduate Committee considered the letter dated 13.03.2007 together with the Council Inspector's report (April,2006) and decided that Vivekanand Institute of Medical Sciences, Calcutta be approved for the award of M.D.(General Medicine) qualification granted by Calcutta University restricting the number of admission to 1 (one) student per year.

11. Madras University and The Tamilnadu Dr. M.G.R. Medical University, Chennai- Approval of Kilpauk Medical College, Chennai for the award of D.C.P. qualification.

Read: The compliance verification report (March, 2007) together with the Council Inspector's report (April, 2004) on the standard of examination and other teaching facilities available at Kilpauk Medical College, Chennai for purpose of approval of the college for the award of D.C.P. qualification earlier granted by Madras University and now by The Tamilnadu Dr. M.G.R. Medical University, Chennai.

The Postgraduate Committee considered the compliance verification inspection report (March,2007) together with the Council Inspector's report (April,2004) and noted that the compliance is unsatisfactory; decided to reiterate its earlier decision taken at its meeting held on 22.05.2004 recommending not to approve Kilpauk Medical College, Chennai for the award of DCP qualification earlier granted by Madras University and now by The Tamilnadu Dr. M.G.R. Medical University, Chennai as the following deficiencies are still persisting:-

1. There are no infrastructural facilities like space for office and office staff.
2. Important equipment/instruments as required in the department are not available.
3. Facilities for specialized investigations are not available. Bonemarrow, Fragility Test and Hemoglobin Electrophoresis Tests are quite less in number.
4. Other deficiencies/observations as pointed out in the inspection report.

In view of above, the Committee further decided to direct the institution authorities to henceforth stop admissions in DCP course from the academic session 2008-2009.

12. The Tamilnadu Dr. MGR Medical University, Chennai – Recognition of M.Ch.(Surgical Gastroenterology) qualification in respect of students being trained at Stanley Medical College, Chennai.

Read: The compliance together with the Council Inspector's report (August, 2006) on the standard of examination and other teaching facilities available at Stanley Medical College, Chennai for purpose of recognition of M.Ch.(Surgical Gastroenterology) qualification granted by The Tamilnadu Dr. MGR Medical University, Chennai.

The Postgraduate Committee considered the compliance together with the Council Inspector's report (August, 2006) and decided to recommend that M.Ch.(Surgical Gastroenterology) qualification granted by The Tamilnadu Dr. MGR Medical University, Chennai be recognized and included in the 1st Schedule to the I.M.C. Act,1956 restricting the number of admission to 2 (two) students per year.

13. Delhi University – Approval of Safdarjung Hospital, New Delhi for the award of MD(Obst. & Gynae.) & DGO qualification.

Read: The letter dated 23/4/2007 received from the Assistant Registrar, University of Delhi together with the Council Inspectors reports (April, 2005) on the standard of examination and other teaching facilities available at Safdarjung Hospital, New Delhi for purpose of approval

of the college for the award of MD(Obst. & Gynae.) & DGO qualification granted by Delhi University.

The Postgraduate Committee considered the letter dated 23.04.2007 received from the Assistant Registrar, University of Delhi together with the Council Inspector's report (April, 2005) and decided to recommend that Safdarjung Hospital, New Delhi be approved for the award of MD(Obst. & Gynae.) & DGO qualifications granted by Delhi University restricting the number of admission to 4(four) students for degree and 6 (six) students for diploma per year.

14. Nizam's Institute of Medical Sciences, (Deemed University) Hyderabad – Approval of Nizam's Institute of Medical Sciences, Hyderabad for the award of M.D.(Anaesthesia) qualification in respect of increased intake.

Read: The compliance together with the Council Inspector's report (October, 2006) on the standard of examination and other teaching facilities available at Nizam's Institute of Medical Sciences, Hyderabad for purpose of approval of the college for the award of M.D.(Anaesthesia) qualification granted by Nizam's Institute of Medical Sciences, (Deemed University) Hyderabad for the increased intake.

The Postgraduate Committee considered the compliance together with the Council Inspector's report (October, 2006) and noted that MD (Anaesthesia) qualification already stands approved with two seats and now the matter is for consideration of approval of the college in respect of increased intake, decided to recommend that Nizam's Institute of Medical Sciences, Hyderabad be approved for the award of M.D. (Anaesthesia) qualification granted by Nizam's Institute of Medical Sciences, (Deemed University) Hyderabad restricting the number of admissions to 4 (four) students per year.

15. Punjab University/Baba Farid University of Health Sciences – Recognition of M.D(Pharmacology) qualification in respect of students being trained at Dayanand Medical College, Ludhiana.

Read: The compliance verification report together with the Council Inspector's report (September, 2006) on the standard of examination and other teaching facilities available at Dayanand Medical College, Ludhiana for purpose of recognition of M.D(Pharmacology) qualification granted by Punjab university/Baba Farid University of Health Sciences, Faridkot.

The Postgraduate Committee considered the compliance verification inspection report (April,2007) together with the Council Inspector's report (September, 2006) and decided to recommend that M.D(Pharmacology) qualification granted by Punjab university/Baba Farid University of Health Sciences, Faridkot be recognized and included in the 1st Schedule to the I.M.C. Act,1956 restricting the number of admission to 2 (two) students per year.

16. Rajiv Gandhi University of Health Sciences, Bangalore. - Approval of Govt. Medical College, Mysore for the award of M.D (Skin & VD/Dermatology,Venerology & Leprosy/Dermatology) & DVD/DDVL.

Read: The Council Inspector's report (May, 2007) on the standard of examination and other teaching facilities available at Govt. Medical College, Mysore for purpose of approval of the college for the award of M.D (Skin & VD/Dermatology,Venerology & Leprosy/Dermatology) & DVD/DDVL qualification granted by Rajiv Gandhi University of Health Sciences, Bangalore.

The Postgraduate Committee considered the Council Inspector's report (May,2007) and decided to recommend that Govt. Medical College, Mysore be approved for the award of M.D (Skin & VD/Dermatology,Venerology & Leprosy/Dermatology) & DVD/DDVL qualifications granted by Rajiv Gandhi University of Health Sciences, Bangalore restricting the number of admission to 1(one) student for degree and 1 (one) student for diploma per year.

17. Rani Durgawati Vishwavidyalaya – Permitting intake in MS (OBG) course at NSCB Medical College, Jabalpur.

Read: The inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S. (OBG) & D.G.O. qualifications at NSCB Medical College, Jabalpur.

The Postgraduate Committee considered the Inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S. (Obst.) & D.G.O.. qualifications at NSCB Medical College, Jabalpur and noted the following:-

1. Teaching complement is incomplete in Unit-III.
2. 7 Degree and 10 Diploma students are admitted against 5 postgraduate teachers.
3. Facilities of postoperative ward should be upgraded.
4. Investigative facilities like CT Scan, availability of more OTG machines in labour room and operative laparoscope will improve postgraduate teaching.
5. Special clinics are run with general OPD and should be separated.
6. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th November, 2006 for continuance of recognition of MBBS degree:-

1. The shortage of teaching staff required at present stage is as under:-

- (a) The shortage of teaching faculty is 31.7% as under:-

1	Professor	04	Biochemistry 01, Microbiology 01, Skin VD 01, Dentistry 01)
2	Associate Professor	29	(Anatomy 03, Physiology 03, Biochemistry 01, Pharmacology 02, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 01, General Medicine 05, Pediatrics 01, General Surgery 02, Orthopedics 01, Anesthesia 03, Radio-diagnosis 02, Dentistry 01)
3	Assistant Professor	30	(Anatomy 02, Physiology 03, lecturer bio physics 01, Biochemistry 01, Pharmacology 01, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 05, General Medicine 03, Pediatrics 02, General Surgery 03, Orthopedics 02, OBGY 01, Anesthesia 01, Radio-diagnosis 01,)
4	Tutor	05	(Anatomy 05)

- (b) The shortage of Residents is 34.1% as under :-

1	Sr Residents	39	General Medicine 06, Pediatrics 03, TB Chest 01, Skin VD 01, Psychiatry 01, General Surgery 06, Orthopedics 03, ENT 01, Ophthalmology 01, OBGY 03, Anesthesia 08, Radio-diagnosis 05,)
2.	Jr Residents	01	Dentistry 01

- There are no Senior Residents in any Clinical Departments.

2. Bed occupancy is inadequate as under:-

	Daily average	Day of Inspection
Bed Occupancy %	72%	72.7%

3. The following deficiencies are observed in the infrastructure of pre-clinical departments:-

Anatomy.

1. The cooling cabinet is not functioning.
2. MRI, CT and X-ray are not displayed in the museum.
3. Catalogue in the museum is not displayed.
4. Department Library cum Seminar room is located in the research lab.
5. Demonstration rooms capacity is not as per MCI norms.

Biochemistry:

1. The gas cylinders are kept in the practical lab.
2. There is seepage in the practical Lab.
3. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Department of Biochemistry.
4. There is no department library cum seminar room.
5. There is no demonstration room.

4. The following deficiencies are observed in the infrastructure of para-clinical departments:-
- Pathology:
1. One Demonstration room is located inside the museum.
 2. There is a no research laboratory.
 3. Catalogues are not available.
- Microbiology:
1. There is no research laboratory.
 2. There is no museum
 3. There is no provision for artificial light in the practical lab.
 4. Practical lab is shared with Forensic Medicine Department.
- For. Medicine :
1. There is only 01 faculty in the department who is the HOD.
 2. There are no catalogue are kept in the museum.
 3. There is no research laboratory.
 4. The demonstration room is located inside the museum.
 5. There is no practical lab in the department. It is being shared with the Microbiology Department.
 6. There is no department library cum seminar room.
- Com. Medicine:
1. One demonstration room is located in the museum.
 2. There is no research laboratory
5. The number of beds in the Deptt. of Pead. is 80 in three units against the requirement of 90 beds in three units.
6. The Audiometry room is not sound proof and not airconditioned.
7. There are only five operation theatres having 10 tables against the requirement of 10 operation theatres. The arrangement for more than one table in OT is also not as per the MCI norms.
8. Septic labour room and eclampsia room are not available.
9. There is no separate surgical & medical ICU. There is no Gynae. ICU and Neonatal ICU.
10. CT Scan is not available.
11. Number of para-medical staff is grossly inadequate is as under:-
 Laboratory Technicians: 7 (5 posts vacant)
 Laboratory Assistants: 01
 Laboratory Attendants: 04 (1 post vacant)
12. The Nursing Staff is inadequate as under :
- | | |
|--------------------------------|-----------------------|
| Nursing Superintendent: | nil (1 post vacant) |
| Deputy Nursing Superintendent: | nil |
| Matron | 01 |
| Asstt. Nursing Superintendent | nil |
| Nursing Sisters | 32 (2 posts vacant) |
| Staff nurses | 144 (36 posts vacant) |
- There is a deficiency of paramedical and nursing staff and is not as per MCI norms.
13. There are only four lecture theatres having capacity of 150 each which is not as per MCI norms.
14. Hostel accommodation is available only for 516 students against the requirement of 700.
15. Separate hostel for interns is not available.
16. In the central library – no current journals are available for the year 2005. Only few current journals for the year 2006 are available upto the month of July. Total number of journals subscribed are 86 which is inadequate.

17. No training courses were held for teachers by the Medical Education Unit during the year.
18. Guinea pig, mice and large animals are not available in the animal house. The veterinary officer visits are as per MCI norms.
19. RHTC-Natwara is under the control of the State Health Govt. Department and not under the control of Dean.
20. No Lecturer-cum-Medical Officer with MD(PSM) is available. Audio-visual aids have not been provided.
21. The college does not have any Urban Health Centre at present.
22. There is no Medical Record Department and there is no staff appointed for the same. ICD X classification of diseases is not followed for indexing.
23. Instrumentation is grossly inadequate. Only one Ambu Bag and BP instrument is available. There is no minor operation theatre and there is no emergency operation theatre.
24. Doctors for pre-clinical are posted on rotation in the casualty which is not as per MCI norms. There is no emergency treatment in the casualty.
25. The CSSD Hall is not as per MCI norms. Distribution and receiving points are not separate.
26. The following deficiencies have been observed in the infrastructure of three MBBS departments:-
 Anatomy: 1. The cooling cabinet is not functioning; 2. MRI, CT and X-ray are not displayed in the museum; 3. Catalogue in the museum are not displayed; 4. Departmental library cum seminar room is located in the research lab.
 Physiology: 1. One demonstration room is located in the practical lab
 Biochemistry: 1. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Deptt. of Biochemistry
 2. There is no departmental library cum seminar room; 3. There are no demonstration room in the department and it is shared with the Physiology department. 4. The Gas cylinders need to be kept away in a separate enclosure.
27. There are no departmental library for TB & Chest, Dermatology and Psychiatry department.
28. Number of books in Radio-diagnosis and Anatomy department are inadequate.
29. The following deficiencies are observed in the para-clinical departments of Pharmacology, Microbiology and Forensic Medicine:-
 Pharmacology – photographs and medicinal plants are not available in the museum.
 Pathology – 1. One demonstration room is located inside the museum; 2. There is no research laboratory; 3. Catalogues are not available in the museum.
 Microbiology – 1. There is no research laboratory; 2. There is no museum; 3. There is no provision for artificial light in the practical lab.; 4. Practical lab. Is shared with the Forensic Medicine department.
 Forensic Med. Deptt 1. There are no catalogue are kept in the museum. 2. There is no research laboratory. 3. The demonstration room is located inside the museum. 4. There is no practical lab. in the department. It is being shared with the Microbiology Lab. 5. There is no departmental library cum seminar room.
 Comm. Med.deptt. – One demonstration room is located in the museum.
 There is no Research lab.
30. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S.(Obst.) & D.G.O. qualifications at NSCB Medical College, Jabalpur granted by Jabalpur University u/s 19 of the I.M.C.Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admission in M.S. (Obst.) & D.G.O. qualifications from the academic session 2008-2009.

18. Rani Durgawati Vishwavidyalaya – Permitting intake in MD (Paediatrics) & DCH course at NSCB Medical College, Jabalpur.

Read: The inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of MD(Paediatrics) & DCH qualifications at NSCB Medical College, Jabalpur.

The Postgraduate Committee considered the Inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D.(Paediatrics) & D.C.H. qualifications at NSCB. Medical College, Jabalpur and noted the following:-

1. Bed occupancy is 35.67% which is grossly inadequate.
2. Teaching complement is incomplete in Unit-I.
3. No Ventilators, Central Oxygen and Central Suction facilities are available in NICU.
4. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th November, 2006 for continuance of recognition of MBBS degree:-

1. The shortage of teaching staff required at present stage is as under:-
- (a) The shortage of teaching faculty is 31.7% as under:-

1	Professor	04	Biochemistry 01, Microbiology 01, Skin VD 01, Dentistry 01)
2	Associate Professor	29	(Anatomy 03, Physiology 03, Biochemistry 01, Pharmacology 02, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 01, General Medicine 05, Pediatrics 01, General Surgery 02, Orthopedics 01, Anesthesia 03, Radio-diagnosis 02, Dentistry 01)
3	Assistant Professor	30	(Anatomy 02, Physiology 03, lecturer bio physics 01, Biochemistry 01, Pharmacology 01, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 05, General Medicine 03, Pediatrics 02, General Surgery 03, Orthopedics 02, OBGY 01, Anesthesia 01, Radio-diagnosis 01,)
4	Tutor	05	(Anatomy 05)

- (c) The shortage of Residents is 34.1% as under :-

1	Sr Residents	39	General Medicine 06, Pediatrics 03, TB Chest 01, Skin VD 01, Psychiatry 01, General Surgery 06, Orthopedics 03, ENT 01, Ophthalmology 01, OBGY 03, Anesthesia 08, Radio-diagnosis 05,)
2.	Jr Residents	01	Dentistry 01

- There are no Senior Residents in any Clinical Departments.

2. Bed occupancy is inadequate as under:-

	Daily average	Day of Inspection
Bed Occupancy %	72%	72.7%

3. The following deficiencies are observed in the infrastructure of pre-clinical departments:-

Anatomy.

1. The cooling cabinet is not functioning.

2. MRI, CT and X-ray are not displayed in the museum.
3. Catalogue in the museum is not displayed.
4. Department Library cum Seminar room is located in the research lab.
5. Demonstration rooms capacity is not as per MCI norms.

Biochemistry:

1. The gas cylinders are kept in the practical lab.
2. There is seepage in the practical Lab.
3. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Department of Biochemistry.
4. There is no department library cum seminar room.
5. There is no demonstration room.

4. The following deficiencies are observed in the infrastructure of para-clinical departments:-

- Pathology:
1. One Demonstration room is located inside the museum.
 2. There is a no research laboratory.
 3. Catalogues are not available.

- Microbiology:
1. There is no research laboratory.
 2. There is no museum
 3. There is no provision for artificial light in the practical lab.
 4. Practical lab is shared with Forensic Medicine Department.

- For. Medicine :
1. There is only 01 faculty in the department who is the HOD.
 2. There are no catalogue are kept in the museum.
 3. There is no research laboratory.
 4. The demonstration room is located inside the museum.
 5. There is no practical lab in the department. It is being shared with the Microbiology Department.
 6. There is no department library cum seminar room.

- Com. Medicine:
1. One demonstration room is located in the museum.
 3. There is no research laboratory

5. The number of beds in the Deptt. of Pead. is 80 in three units against the requirement of 90 beds in three units.
6. The Audiometry room is not sound proof and not airconditioned.
7. There are only five operation theatres having 10 tables against the requirement of 10 operation theatres. The arrangement for more than one table in OT is also not as per the MCI norms.
8. Septic labour room and eclampsia room are not available.
9. There is no separate surgical & medical ICU. There is no Gynae. ICU and Neonatal ICU.
10. CT Scan is not available.
11. Number of para-medical staff is grossly inadequate is as under:-
Laboratory Technicians: 7 (5 posts vacant)
Laboratory Assistants: 01
Laboratory Attendants: 04 (1 post vacant)
12. The Nursing Staff is inadequate as under :

Nursing Superintendent:	nil (1 post vacant)
Deputy Nursing Superintendent:	nil
Matron	01
Asstt. Nursing Superintendent	nil
Nursing Sisters	32 (2 posts vacant)
Staff nurses	144 (36 posts vacant)

There is a deficiency of paramedical and nursing staff and is not as per MCI norms.

13. There are only four lecture theatres having capacity of 150 each which is not as per MCI norms.
14. Hostel accommodation is available only for 516 students against the requirement of 700.
15. Separate hostel for interns is not available.
16. In the central library – no current journals are available for the year 2005. Only few current journals for the year 2006 are available upto the month of July. Total number of journals subscribed are 86 which is inadequate.
17. No training courses were held for teachers by the Medical Education Unit during the year.
18. Guinea pig, mice and large animals are not available in the animal house. The veterinary officer visits are as per MCI norms.
19. RHTC-Natwara is under the control of the State Health Govt. Department and not under the control of Dean.
20. No Lecturer-cum-Medical Officer with MD(PSM) is available. Audio-visual aids have not been provided.
21. The college does not have any Urban Health Centre at present.
22. There is no Medical Record Department and there is no staff appointed for the same. ICD X classification of diseases is not followed for indexing.
23. Instrumentation is grossly inadequate. Only one Ambu Bag and BP instrument is available. There is no minor operation theatre and there is no emergency operation theatre.
24. Doctors for pre-clinical are posted on rotation in the casualty which is not as per MCI norms. There is no emergency treatment in the casualty.
25. The CSSD Hall is not as per MCI norms. Distribution and receiving points are not separate.
26. The following deficiencies have been observed in the infrastructure of three MBBS departments:-
 Anatomy: 1. The cooling cabinet is not functioning; 2. MRI, CT and X-ray are not displayed in the museum; 3. Catalogue in the museum are not displayed; 4. Departmental library cum seminar room is located in the research lab.
 Physiology: 1. One demonstration room is located in the practical lab
 Biochemistry: 1. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Deptt. of Biochemistry
 2. There is no departmental library cum seminar room; 3. There are no demonstration room in the department and it is shared with the Physiology department. 4. The Gas cylinders need to be kept away in a separate enclosure.
27. There are no departmental library for TB & Chest, Dermatology and Psychiatry department.
28. Number of books in Radio-diagnosis and Anatomy department are inadequate.
29. The following deficiencies are observed in the para-clinical departments of Pharmacology, Microbiology and Forensic Medicine:-
 Pharmacology – photographs and medicinal plants are not available in the museum.
 Pathology – 1. One demonstration room is located inside the museum; 2. There is no research laboratory; 3. Catalogues are not available in the museum.
 Microbiology – 1. There is no research laboratory; 2. There is no museum; 3. There is no provision for artificial light in the practical lab.; 4. Practical lab. Is shared with the Forensic Medicine department.

Forensic Med. Deptt 1. There are no catalogue are kept in the museum. 2. There is no research laboratory. 3. The demonstration room is located inside the museum. 4. There is no practical lab. in the department. It is being shared with the Microbiology Lab. 5. There is no departmental library cum seminar room.

Comm. Med.deptt. – One demonstration room is located in the museum.
There is no Research lab.

30. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Paediatrics) & D.C.H. qualifications at NSCB Medical College, Jabalpur granted by Jabalpur University u/s 19 of the I.M.C.Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admission in M.D.(Paediatrics) & D.C.H. qualifications from the academic session 2008-2009.

19. Rani Durgawati Vishwavidyalaya – Permitting intake in MD (Radiology) course at NSCB Medical College, Jabalpur.

Read: The inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of MD(Radiology) qualification at NSCB Medical College, Jabalpur.

The Postgraduate Committee considered the Inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S. (Obst.) & D.G.O. qualifications at NSCB. Medical College, Jabalpur and noted the following:-

1. Instrumentation is inadequate as there is no CT Scan, MRI.
2. There is no full time Radiophysicist.
3. Teaching staff is deficient even for undergraduate studies by 2 Associate Professors & 1 Assistant Professor.
4. Additional teaching component for postgraduate studies is not available.
5. Other deficiencies as pointed out in the inspection report.

While considering this matter it was noted by the Committee that the Postgraduate Committee had recommended stoppage of admissions in M.D.(Radiology) course in the year 2004, but the college authorities are still admitting students for this course. It was decided that henceforth a copy of communication be also sent to affiliating university wherever stoppage of admissions is recommended.

It was further decided to seek an explanation from the college authorities for non compliance with the decision of the Committee of stoppage of admissions.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th November, 2006 for continuance of recognition of MBBS degree:-

1. The shortage of teaching staff required at present stage is as under:-
- (a) The shortage of teaching faculty is 31.7% as under:-

1	Professor	04	Biochemistry 01, Microbiology 01, Skin VD 01, Dentistry 01)
2	Associate Professor	29	(Anatomy 03, Physiology 03, Bichemistry01, Pharmacology 02, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 01, General Medicine 05, Pediatrics 01, General Surgery 02, Orthopedics 01, Anesthesia 03, Radio-diagnosis 02, Dentistry 01)
3	Assistant Professor	30	(Anatomy 02, Physiology 03, lecturer bio physics 01, Biochemistry 01, Pharmacology 01, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 05, General Medicine 03, Pediatrics 02, General Surgery 03, Orthopedics 02, OBGY 01, Anesthesia 01, Radio-diagnosis 01,)
4	Tutor	05	(Anatomy 05)

(b) The shortage of Residents is 34.1% as under :-

1	Sr Residents	39	General Medicine 06, Pediatrics 03, TB Chest 01, Skin VD 01, Psychiatry 01, General Surgery 06, Orthopedics 03, ENT 01, Ophthalmology 01, OBGY 03, Anesthesia 08, Radio-diagnosis 05,)
2.	Jr Residents	01	Dentistry 01

- There are no Senior Residents in any Clinical Departments.

2. Bed occupancy is inadequate as under:-

	Daily average	Day of Inspection
Bed Occupancy %	72%	72.7%

3. The following deficiencies are observed in the infrastructure of pre-clinical departments:-

Anatomy:

1. The cooling cabinet is not functioning.
2. MRI, CT and X-ray are not displayed in the museum.
3. Catalogue in the museum is not displayed.
4. Department Library cum Seminar room is located in the research lab.
5. Demonstration rooms capacity is not as per MCI norms.

Biochemistry:

1. The gas cylinders are kept in the practical lab.
2. There is seepage in the practical Lab.
3. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Department of Biochemistry.
4. There is no department library cum seminar room.
5. There is no demonstration room.

4. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology:

1. One Demonstration room is located inside the museum.
2. There is a no research laboratory.
3. Catalogues are not available.

Microbiology:

1. There is no research laboratory.
2. There is no museum
3. There is no provision for artificial light in the practical lab.
4. Practical lab is shared with Forensic Medicine Department.

For. Medicine :

1. There is only 01 faculty in the department who is the HOD.
2. There are no catalogue are kept in the museum.
3. There is no research laboratory.
4. The demonstration room is located inside the museum.
5. There is no practical lab in the department. It is being shared with the Microbiology Department.
6. There is no department library cum seminar room.

Com. Medicine:

1. One demonstration room is located in the museum.
4. There is no research laboratory

5. The number of beds in the Deptt. of Peadt. is 80 in three units against the requirement of 90 beds in three units.
6. The Audiometry room is not sound proof and not airconditioned.
7. There are only five operation theatres having 10 tables against the requirement of 10 operation theatres. The arrangement for more than one table in OT is also not as per the MCI norms.
8. Septic labour room and eclampsia room are not available.
9. There is no separate surgical & medical ICU. There is no Gynae. ICU and Neonatal ICU.

10. CT Scan is not available.
11. Number of para-medical staff is grossly inadequate is as under:-
Laboratory Technicians: 7 (5 posts vacant)
Laboratory Assistants: 01
Laboratory Attendants: 04 (1 post vacant)
12. The Nursing Staff is inadequate as under :

Nursing Superintendent:	nil (1 post vacant)
Deputy Nursing Superintendent:	nil
Matron	01
Asstt. Nursing Superintendent	nil
Nursing Sisters	32 (2 posts vacant)
Staff nurses	144 (36 posts vacant)

There is a deficiency of paramedical and nursing staff and is not as per MCI norms.
13. There are only four lecture theatres having capacity of 150 each which is not as per MCI norms.
14. Hostel accommodation is available only for 516 students against the requirement of 700.
15. Separate hostel for interns is not available.
16. In the central library – no current journals are available for the year 2005. Only few current journals for the year 2006 are available upto the month of July. Total number of journals subscribed are 86 which is inadequate.
17. No training courses were held for teachers by the Medical Education Unit during the year.
18. Guinea pig, mice and large animals are not available in the animal house. The veterinary officer visits are as per MCI norms.
19. RHTC-Natwara is under the control of the State Health Govt. Department and not under the control of Dean.
20. No Lecturer-cum-Medical Officer with MD(PSM) is available. Audio-visual aids have not been provided.
21. The college does not have any Urban Health Centre at present.
22. There is no Medical Record Department and there is no staff appointed for the same. ICD X classification of diseases is not followed for indexing.
23. Instrumentation is grossly inadequate. Only one Ambu Bag and BP instrument is available. There is no minor operation theatre and there is no emergency operation theatre.
24. Doctors for pre-clinical are posted on rotation in the casualty which is not as per MCI norms. There is no emergency treatment in the casualty.
25. The CSSD Hall is not as per MCI norms. Distribution and receiving points are not separate.
26. The following deficiencies have been observed in the infrastructure of three MBBS departments:-
Anatomy: 1. The cooling cabinet is not functioning; 2. MRI, CT and X-ray are not displayed in the museum; 3. Catalogue in the museum are not displayed; 4. Departmental library cum seminar room is located in the research lab.
Physiology: 1. One demonstration room is located in the practical lab

Biochemistry: 1. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Deptt. of Biochemistry
2. There is no departmental library cum seminar room; 3. There are no demonstration room in the department and it is shared with the Physiology department. 4. The Gas cylinders need to be kept away in a separate enclosure.

27. There are no departmental library for TB & Chest, Dermatology and Psychiatry department.
28. Number of books in Radio-diagnosis and Anatomy department are inadequate.
29. The following deficiencies are observed in the para-clinical departments of Pharmacology, Microbiology and Forensic Medicine:-
Pharmacology – photographs and medicinal plants are not available in the museum.
Pathology – 1. One demonstration room is located inside the museum; 2. There is no research laboratory; 3. Catalogues are not available in the museum.
Microbiology – 1. There is no research laboratory; 2. There is no museum; 3. There is no provision for artificial light in the practical lab.; 4. Practical lab. Is shared with the Forensic Medicine department.
Forensic Med. Deptt 1. There are no catalogue are kept in the museum. 2. There is no research laboratory. 3. The demonstration room is located inside the museum. 4. There is no practical lab. in the department. It is being shared with the Microbiology Lab. 5. There is no departmental library cum seminar room.
Comm. Med.deptt. – One demonstration room is located in the museum. There is no Research lab.
30. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Radiology) qualification at NSCB Medical College, Jabalpur granted by Jabalpur University u/s 19 of the I.M.C.Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admission in M.D. (Radiology) qualification from the academic session 2008-2009.

20. Rani Durgawati Vishwavidyalaya – Permitting intake in MS (Anatomy) course at NSCB Medical College, Jabalpur.

Read: The inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S. (Anatomy) qualification at NSCB Medical College, Jabalpur.

The Postgraduate Committee considered the Inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S. (Anatomy) qualifications at NSCB Medical College, Jabalpur and noted the following:-

1. Teaching faculty is inadequate even for undergraduate studies.
2. Additional component for postgraduate studies is not available.
3. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th November, 2006 for continuance of recognition of MBBS degree:-

1. The shortage of teaching staff required at present stage is as under:-
- (a) The shortage of teaching faculty is 31.7% as under:-

1	Professor	04	Biochemistry 01, Microbiology 01, Skin VD 01, Dentistry 01)
2	Associate Professor	29	(Anatomy 03, Physiology 03, Biochemistry 01, Pharmacology 02, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 01, General Medicine 05, Pediatrics 01, General Surgery 02, Orthopedics 01, Anesthesia 03, Radio-

3	Assistant Professor	30	diagnosis 02, Dentistry 01) (Anatomy 02, Physiology 03, lecturer bio physics 01, Biochemistry 01, Pharmacology 01, Pathology 01, Microbiology 01, Forensic Medicine 02, Community Medicine 05, General Medicine 03, Pediatrics 02, General Surgery 03, Orthopedics 02, OBGY 01, Anesthesia 01, Radio-diagnosis 01,)
4	Tutor	05	(Anatomy 05)

(d) The shortage of Residents is 34.1% as under :-

1	Sr Residents	39	General Medicine 06, Pediatrics 03, TB Chest 01, Skin VD 01, Psychiatry 01, General Surgery 06, Orthopedics 03, ENT 01, Ophthalmology 01, OBGY 03, Anesthesia 08, Radio-diagnosis 05,)
2.	Jr Residents	01	Dentistry 01

- There are no Senior Residents in any Clinical Departments.

2. Bed occupancy is inadequate as under:-

	Daily average	Day of Inspection
Bed Occupancy %	72%	72.7%

3. The following deficiencies are observed in the infrastructure of pre-clinical departments:-

Anatomy.

1. The cooling cabinet is not functioning.
2. MRI, CT and X-ray are not displayed in the museum.
3. Catalogue in the museum is not displayed.
4. Department Library cum Seminar room is located in the research lab.
5. Demonstration rooms capacity is not as per MCI norms.

Biochemistry:

1. The gas cylinders are kept in the practical lab.
2. There is seepage in the practical Lab.
3. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Department of Biochemistry.
4. There is no department library cum seminar room.
5. There is no demonstration room.

4. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology:

1. One Demonstration room is located inside the museum.
2. There is a no research laboratory.
3. Catalogues are not available.

Microbiology:

1. There is no research laboratory.
2. There is no museum
3. There is no provision for artificial light in the practical lab.
4. Practical lab is shared with Forensic Medicine Department.

For. Medicine :

1. There is only 01 faculty in the department who is the HOD.
2. There are no catalogue are kept in the museum.
3. There is no research laboratory.
4. The demonstration room is located inside the museum.
5. There is no practical lab in the department. It is being shared with the Microbiology Department.
6. There is no department library cum seminar room.

Com. Medicine:

1. One demonstration room is located in the museum.
5. There is no research laboratory

5. The number of beds in the Deptt. of Pead. is 80 in three units against the requirement of 90 beds in three units.
6. The Audiometry room is not sound proof and not airconditioned.

7. There are only five operation theatres having 10 tables against the requirement of 10 operation theatres. The arrangement for more than one table in OT is also not as per the MCI norms.
8. Septic labour room and eclampsia room are not available.
9. There is no separate surgical & medical ICU. There is no Gynae. ICU and Neonatal ICU.
10. CT Scan is not available.
11. Number of para-medical staff is grossly inadequate is as under:-
Laboratory Technicians: 7 (5 posts vacant)
Laboratory Assistants: 01
Laboratory Attendants: 04 (1 post vacant)
12. The Nursing Staff is inadequate as under :

Nursing Superintendent:	nil (1 post vacant)
Deputy Nursing Superintendent:	nil
Matron	01
Asstt. Nursing Superintendent	nil
Nursing Sisters	32 (2 posts vacant)
Staff nurses	144 (36 posts vacant)

There is a deficiency of paramedical and nursing staff and is not as per MCI norms.
13. There are only four lecture theatres having capacity of 150 each which is not as per MCI norms.
14. Hostel accommodation is available only for 516 students against the requirement of 700.
15. Separate hostel for interns is not available.
16. In the central library – no current journals are available for the year 2005. Only few current journals for the year 2006 are available upto the month of July. Total number of journals subscribed are 86 which is inadequate.
17. No training courses were held for teachers by the Medical Education Unit during the year.
18. Guinea pig, mice and large animals are not available in the animal house. The veterinary officer visits are as per MCI norms.
19. RHTC-Natwara is under the control of the State Health Govt. Department and not under the control of Dean.
20. No Lecturer-cum-Medical Officer with MD(PSM) is available. Audio-visual aids have not been provided.
21. The college does not have any Urban Health Centre at present.
22. There is no Medical Record Department and there is no staff appointed for the same. ICD X classification of diseases is not followed for indexing.
23. Instrumentation is grossly inadequate. Only one Ambu Bag and BP instrument is available. There is no minor operation theatre and there is no emergency operation theatre.
24. Doctors for pre-clinical are posted on rotation in the casualty which is not as per MCI norms. There is no emergency treatment in the casualty.
25. The CSSD Hall is not as per MCI norms. Distribution and receiving points are not separate.

26. The following deficiencies have been observed in the infrastructure of three MBBS departments:-
 Anatomy: 1. The cooling cabinet is not functioning; 2. MRI, CT and X-ray are not displayed in the museum; 3. Catalogue in the museum are not displayed; 4. Departmental library cum seminar room is located in the research lab.
 Physiology: 1. One demonstration room is located in the practical lab
 Biochemistry: 1. The administration of the department is done by HOD Physiology as there is no Professor/Associate Professor in the Deptt. of Biochemistry
 2. There is no departmental library cum seminar room; 3. There are no demonstration room in the department and it is shared with the Physiology department. 4. The Gas cylinders need to be kept away in a separate enclosure.
27. There are no departmental library for TB & Chest, Dermatology and Psychiatry department.
28. Number of books in Radio-diagnosis and Anatomy department are inadequate.
29. The following deficiencies are observed in the para-clinical departments of Pharmacology, Microbiology and Forensic Medicine:-
 Pharmacology – photographs and medicinal plants are not available in the museum.
 Pathology – 1. One demonstration room is located inside the museum; 2. There is no research laboratory; 3. Catalogues are not available in the museum.
 Microbiology – 1. There is no research laboratory; 2. There is no museum; 3. There is no provision for artificial light in the practical lab.; 4. Practical lab. Is shared with the Forensic Medicine department.
 Forensic Med. Deptt 1. There are no catalogue are kept in the museum. 2. There is no research laboratory. 3. The demonstration room is located inside the museum. 4. There is no practical lab. in the department. It is being shared with the Microbiology Lab. 5. There is no departmental library cum seminar room.
 Comm. Med.deptt. – One demonstration room is located in the museum. There is no Research lab.
30. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S.(Anatomy) qualification at NSCB Medical College, Jabalpur granted by Jabalpur University u/s 19 of the I.M.C.Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admission in M.S. (Anatomy) qualification from the academic session 2008-2009.

21. Devi Ahilya Vishwavidyalaya - Permitting intake in MS (Ophthalmology) & DOMS courses at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of MS. (Ophthalmology) & DOMS qualifications at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S. (Ophthalmology) & DOMS qualifications at M.G.M Medical College, Indore and noted the following:-

1. Clinical workload is inadequate.
2. Surgical workload is inadequate.
3. Teaching complement is incomplete in Unit-II.
4. In Unit-I against 2 postgraduate teachers, 5 degree and 8 diploma students are being admitted.
5. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07

Laboratory Assistants: 05
Laboratory Attendants: 02

15. Nursing staff is inadequate as under:-

Nursing Superintendent:	Nil
Deputy Nursing Superintendent:	Nil
Matron	04
Asstt. Nursing Superintendent	Nil
Nursing Sisters	32
Staff nurses	198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
Each demonstration rooms should have 75 seats.
All practical laboratories should have 90 workplaces each.

Biochemistry Department:
Two demonstration rooms of 75 seats each is required.
The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:
Histopathology laboratory should have 90 workplaces.
Clinical pathology lab should have 40 workplaces.

Microbiology Department:
Two demonstration rooms of 75 seats each are required.
Practical laboratory should have 90 workplaces.

Forensic Medicine Department:
Two demonstration rooms of 75 seats each are required.

Community Medicine Department:
Two demonstration rooms of 75 seats each are required.
The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.

27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S. (Ophthalmology) & DOMS qualifications at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.S. (Ophthalmology) & DOMS qualifications from the academic session 2008-2009.

22. Devi Ahilya Vishwavidyalaya - Permitting intake in MS (General Surgery) course at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S. (General Surgery) qualification at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S. (General Surgery) qualification at M.G.M Medical College, Indore and noted the following:-

1. There is no Associate Professor in Unit-I.
2. Unit-IV is also headed by HOD.
3. Resultantly, teaching complement is incomplete in Unit-I & IV.
4. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
- In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron 04
Asstt. Nursing Superintendent Nil
Nursing Sisters 32
Staff nurses 198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:

Each demonstration rooms should have 75 seats.

All practical laboratories should have 90 workplaces each.

Biochemistry Department:

Two demonstration rooms of 75 seats each is required.

The practical laboratory should have 90 workplaces.

22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:

Histopathology laboratory should have 90 workplaces.

Clinical pathology lab should have 40 workplaces.

Microbiology Department:

Two demonstration rooms of 75 seats each are required.

Practical laboratory should have 90 workplaces.

Forensic Medicine Department:

Two demonstration rooms of 75 seats each are required.

Community Medicine Department:

Two demonstration rooms of 75 seats each are required.

The practical laboratory should have 90 workplaces.

23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S. (General Surgery) qualification at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.S. (General Surgery) qualification from the academic session 2008-2009.

23. Devi Ahilya Vishwavidyalaya - Permitting intake in DTCD course at MGM Medical College, Indore.

Read: The inspection report (January, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of DTCD qualification at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (January, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of DTCD qualification at M.G.M Medical College, Indore and noted the following:-

1. Associate Professor and Assistant Professor do not possess recognized postgraduate qualification.

2. Professor & HOD of Medicine Department is the head of the department. As such, department is not headed by a Professor.
3. The institution is admitting 3 Diploma students against Unit-I which is not as per PG Regulations.
4. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).

- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.

13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron: 04
Asstt. Nursing Superintendent: Nil
Nursing Sisters: 32
Staff nurses: 198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
Each demonstration rooms should have 75 seats.
All practical laboratories should have 90 workplaces each.

Biochemistry Department:
Two demonstration rooms of 75 seats each is required.
The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-
Pathology Department:
Histopathology laboratory should have 90 workplaces.
Clinical pathology lab should have 40 workplaces.
Microbiology Department:
Two demonstration rooms of 75 seats each are required.
Practical laboratory should have 90 workplaces.
Forensic Medicine Department:
Two demonstration rooms of 75 seats each are required.
Community Medicine Department:
Two demonstration rooms of 75 seats each are required.
The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.

26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of DTCD qualification at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in DTCD qualification from the academic session 2008-2009.

24. Devi Ahilya Vishwavidyalaya - Permitting intake in M.S.(Anatomy) course at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S.(Anatomy) qualification at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (January, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S.(Anatomy) qualification at M.G.M Medical College, Indore and noted the following:-

1. Teaching faculty is deficient even for undergraduate studies.
2. Additional component for postgraduate studies is not available.
3. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
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- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
- In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
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11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron 04
Asstt. Nursing Superintendent Nil
Nursing Sisters 32
Staff nurses 198
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17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
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Histopathology practical laboratory should have 90 workplaces.

Physiology Department:

Each demonstration rooms should have 75 seats.

All practical laboratories should have 90 workplaces each.

Biochemistry Department:

Two demonstration rooms of 75 seats each is required.

The practical laboratory should have 90 workplaces.

22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:

Histopathology laboratory should have 90 workplaces.

Clinical pathology lab should have 40 workplaces.

Microbiology Department:

Two demonstration rooms of 75 seats each are required.

Practical laboratory should have 90 workplaces.

Forensic Medicine Department:

Two demonstration rooms of 75 seats each are required.

Community Medicine Department:

Two demonstration rooms of 75 seats each are required.

The practical laboratory should have 90 workplaces.

23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S. (Anatomy) qualification at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.S. (Anatomy) qualification from the academic session 2008-2009.

25. **Devi Ahilya Vishwavidyalaya - Permitting intake in M.S.(E.N.T.) & D.L.O. course at MGM Medical College, Indore.**

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S.(E.N.T.) & D.L.O. qualifications at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S.(E.N.T.) & D.L.O. qualifications at M.G.M Medical College, Indore and noted the following:-

1. Instrumentation is inadequate.

2. There is no full time Audiologist & Speech Therapist
3. 4 Degree and 2 Diploma students are being admitted against 2 postgraduate teachers in one Unit which is not as per Postgraduate Regulations.
4. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).

- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.

13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron 04
Asstt. Nursing Superintendent Nil
Nursing Sisters 32
Staff nurses 198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
Each demonstration rooms should have 75 seats.
All practical laboratories should have 90 workplaces each.

Biochemistry Department:
Two demonstration rooms of 75 seats each is required.
The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-
Pathology Department:
Histopathology laboratory should have 90 workplaces.
Clinical pathology lab should have 40 workplaces.
Microbiology Department:
Two demonstration rooms of 75 seats each are required.
Practical laboratory should have 90 workplaces.
Forensic Medicine Department:
Two demonstration rooms of 75 seats each are required.
Community Medicine Department:
Two demonstration rooms of 75 seats each are required.
The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.

26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S. (ENT) & DLO qualifications at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.S. (ENT) & DLO qualifications from the academic session 2008-2009.

26. Devi Ahilya Vishwavidyalaya - Permitting intake in M.S.(OBG) & D.G.O. courses at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.S.(O.B.G.) & D.G.O. qualifications at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of MS. (OBG) & D.G.O. qualification at M.G.M Medical College, Indore and noted the following:-

1. Only 11 teachers are available against the requirement of 15 for 5 Units.
2. There is no Associate Professor in Unit-1.
3. Units II-V have only 2 teaching faculties each.
4. Total 6 Asstt. Profs. in 5 Units are part time teachers and cannot be considered. Resultantly, teaching faculty is inadequate.
5. There are no Senior Residents.
6. PG students admitted are 6 degree & 11 diploma although only 6 postgraduate teachers with recognized postgraduate qualifications are available.
7. The layout of labour room is disorganized and overused. It requires redesigning, expansion and renovation. It does not have any special equipment and has only basic facilities.
8. There is no Obstetrics ICU.
9. There is no separate emergency Obstetric operation theatre. There are 2 OTs with 1 table each. Whenever emergency Caesarean Section has to be performed during routine working hours, routine Gynaecological operations have to be postponed or cancelled. Routine Gynaecological surgeries are not performed after 1 p.m. for non-availability of Anaesthetists and O.G. Surgeons. Present OT complex in M.Y. Hospital lacks facilities. Resultantly, operative facilities are grossly inadequate.
10. Equipment like Colposcope were nonfunctional on the day of inspection.
11. M.T. Hospital which has 65 beds has only basic facilities. Although Residents are posted here in rotation, Obstetrical operations are not performed. Resultantly, training is inadequate at this hospital.
12. Number of books in the departmental library are inadequate.
13. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:

- (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
- (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
- (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
- (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
- i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
- ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
- In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil

Deputy Nursing Superintendent:	Nil
Matron	04
Asstt. Nursing Superintendent	Nil
Nursing Sisters	32
Staff nurses	198

16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
Each demonstration rooms should have 75 seats.
All practical laboratories should have 90 workplaces each.

Biochemistry Department:
Two demonstration rooms of 75 seats each is required.
The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:
Histopathology laboratory should have 90 workplaces.
Clinical pathology lab should have 40 workplaces.

Microbiology Department:
Two demonstration rooms of 75 seats each are required.
Practical laboratory should have 90 workplaces.

Forensic Medicine Department:
Two demonstration rooms of 75 seats each are required.

Community Medicine Department:
Two demonstration rooms of 75 seats each are required.
The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.

28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S. (Obst. & Gynae.) & D.G.O. qualifications at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in MS (Obst. & Gynae.) & D.G.O. qualifications from the academic session 2008-2009.

27. Devi Ahilya Vishwavidyalaya - Permitting intake in M.D.(General Medicine) course at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(General Medicine) qualification at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(General Medicine) qualification at M.G.M Medical College, Indore and noted the following:-

1. Dr. A. Bajpai, head of the department is Professor of TB & Chest which is not as per Regulations. Resultantly, teaching faculty is inadequate.
2. Facilities in ICU are inadequate. Central O₂, monitors or ventilators are not available.
3. Central Oxygen supply is not available in wards.
4. Skin & V.D., Psychiatry and TB & Chest are part of Medicine department and do not exist as separate departments which is not as per Regulations.
5. 12 Postgraduate students are admitted although there are only 10 postgraduate teachers.
6. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
- In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
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Nursing Superintendent: Nil
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16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:

Each demonstration rooms should have 75 seats.

All practical laboratories should have 90 workplaces each.

Biochemistry Department:

Two demonstration rooms of 75 seats each is required.

The practical laboratory should have 90 workplaces.

22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:

Histopathology laboratory should have 90 workplaces.

Clinical pathology lab should have 40 workplaces.

Microbiology Department:

Two demonstration rooms of 75 seats each are required.

Practical laboratory should have 90 workplaces.

Forensic Medicine Department:

Two demonstration rooms of 75 seats each are required.

Community Medicine Department:

Two demonstration rooms of 75 seats each are required.

The practical laboratory should have 90 workplaces.

23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(General Medicine) qualification at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D. (General Medicine) qualification from the academic session 2008-2009.

28. Devi Ahilya Vishwavidyalaya - Permitting intake in M.D.(Physiology) course at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Physiology) qualification at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Physiology) qualification at M.G.M Medical College, Indore and noted the following:-

1. Lecturer in Biophysics is not available. Resultantly, teaching faculty is inadequate.
2. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
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Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.

- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-

Laboratory Technicians: 07
 Laboratory Assistants: 05
 Laboratory Attendants: 02

15. Nursing staff is inadequate as under:-

Nursing Superintendent:	Nil
Deputy Nursing Superintendent:	Nil
Matron	04
Asstt. Nursing Superintendent	Nil
Nursing Sisters	32
Staff nurses	198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
 2 demonstration rooms each having 75-100 seats are required.
 Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
 Each demonstration rooms should have 75 seats.
 All practical laboratories should have 90 workplaces each.

Biochemistry Department:
 Two demonstration rooms of 75 seats each is required.
 The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:
 Histopathology laboratory should have 90 workplaces.
 Clinical pathology lab should have 40 workplaces.

Microbiology Department:
 Two demonstration rooms of 75 seats each are required.
 Practical laboratory should have 90 workplaces.

Forensic Medicine Department:
 Two demonstration rooms of 75 seats each are required.

Community Medicine Department:
 Two demonstration rooms of 75 seats each are required.
 The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.

27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Physiology) qualification at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D. (Physiology) qualification from the academic session 2008-2009.

29. Devi Ahilya Vishwavidyalaya - Permitting intake in M.D.(Pharmacology) course at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Pharmacology) qualification at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Pharmacology) qualification at M.G.M Medical College, Indore and noted the following:-

1. There is no Professor or Associate Professor. Teaching faculty is grossly inadequate and deficient by 1 Professor, 3 Associate Professor, 1 Assistant Professor and 2 Tutors.
2. There is no postgraduate teacher in the department although 1 postgraduate student is admitted.
3. Clinical Pharmacology laboratory is not available.
4. Equipment and infrastructure are inadequate.
5. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
- In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron 04
Asstt. Nursing Superintendent Nil
Nursing Sisters 32
Staff nurses 198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:

Each demonstration rooms should have 75 seats.

All practical laboratories should have 90 workplaces each.

Biochemistry Department:

Two demonstration rooms of 75 seats each is required.

The practical laboratory should have 90 workplaces.

22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:

Histopathology laboratory should have 90 workplaces.

Clinical pathology lab should have 40 workplaces.

Microbiology Department:

Two demonstration rooms of 75 seats each are required.

Practical laboratory should have 90 workplaces.

Forensic Medicine Department:

Two demonstration rooms of 75 seats each are required.

Community Medicine Department:

Two demonstration rooms of 75 seats each are required.

The practical laboratory should have 90 workplaces.

23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D. (Pharmacology) qualification at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(Pharmacology) qualification from the academic session 2008-2009.

30. **Devi Ahilya Vishwavidyalaya - Permitting intake in M.D.(Anaesthesia) & D.A. courses at MGM Medical College, Indore.**

Read: The inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Anaesthesia) & D.A. qualifications at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D. (Anaesthesia) & D.A. qualifications at M.G.M Medical College, Indore and noted the following:-

1. Teaching faculty is deficient by 1 Asstt. Professor.

2. Senior Residents are not available against the requirement of 7.
3. 3 Anaesthesia machines, 4 Cardioscopes and 4 Cautery machines were out of order on the day of inspection. There was no Defibrillator in working status. All Anaesthesia machines do not have calibrated and factory compensated vapourizers for using Anaesthetic agents. There are no multipara monitors in the main OT complex. Resultantly, equipment is grossly inadequate. All Ots should have multipara monitors.
4. Emergency/casualty has only simple trolleys which is inadequate. There is no ICU under the department of Anaesthesia.
5. Pain management clinic is not available.
6. Dean refused to verify and sign on the relevant sheets of the report in respect of the information to confirm budget, infrastructure and other facilities available in various departments.
7. There were no documents available to support many activities of various departments.
8. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH

and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.

6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
- In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.

9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron 04
Asstt. Nursing Superintendent Nil
Nursing Sisters 32
Staff nurses 198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
Each demonstration rooms should have 75 seats.
All practical laboratories should have 90 workplaces each.

Biochemistry Department:
Two demonstration rooms of 75 seats each is required.
The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-
Pathology Department:
Histopathology laboratory should have 90 workplaces.
Clinical pathology lab should have 40 workplaces.
Microbiology Department:
Two demonstration rooms of 75 seats each are required.
Practical laboratory should have 90 workplaces.
Forensic Medicine Department:

Two demonstration rooms of 75 seats each are required.

Community Medicine Department:

Two demonstration rooms of 75 seats each are required.

The practical laboratory should have 90 workplaces.

23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Anaesthesia) & D.A. qualifications at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D. (Anaesthesia) & D.A. qualifications from the academic session 2008-2009.

31. Devi Ahilya Vishwavidyalaya - Permitting intake in M.D.(Radio-Diagnosis) & DMRD courses at MGM Medical College, Indore.

Read: The inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Radio-diag.) & DMRD qualifications at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D. (Radio-Diagnosis) & D.M.R.D. qualifications at M.G.M Medical College, Indore and noted the following:-

1. Dr. A. Agrawal, Assistant Professor does not possess recognized postgraduate qualification. Dr. A.K. Jain has been designated as post postgraduate Assistant which is not a teaching post as per Regulations. Resultantly, teaching faculty is deficient by 1 Associate Professor & 4 Assistant Professors.
2. Only 1 Senior Resident is available against the requirement of 5.
3. 4 Degree & 5 Diploma students are admitted against 3 postgraduate teachers.
4. Equipment like Conventional/DSA Angiography, ERCP, Lymphangiography, etc. are not available. Resultantly, equipment is inadequate.
5. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)

- (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
- (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
- (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
- i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
- ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.
- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
- In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron 04

Asstt. Nursing Superintendent	Nil
Nursing Sisters	32
Staff nurses	198

16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
Each demonstration rooms should have 75 seats.
All practical laboratories should have 90 workplaces each.

Biochemistry Department:
Two demonstration rooms of 75 seats each is required.
The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:
Histopathology laboratory should have 90 workplaces.
Clinical pathology lab should have 40 workplaces.

Microbiology Department:
Two demonstration rooms of 75 seats each are required.
Practical laboratory should have 90 workplaces.

Forensic Medicine Department:
Two demonstration rooms of 75 seats each are required.

Community Medicine Department:
Two demonstration rooms of 75 seats each are required.
The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.

29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D. (Radio-Diagnosis) & D.M.R.D. qualifications at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(Radio-Diagnosis) & D.M.R.D. qualifications from the academic session 2008-2009.

32. Devi Ahilya Vishwavidyalaya - Permitting intake in M.D.(Paediatrics) & D.C.H. courses at MGM Medical College, Indore.

Read: The inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Paediatrics) & D.C.H. qualifications at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D. (Paediatrics) & D.C.H. qualifications at M.G.M Medical College, Indore and noted the following:-

1. There are only 2 faculty in Unit-III. Resultantly, teaching complement is incomplete in Unit III.
2. Teaching faculty is deficient by 1 Asstt. Prof.
3. Although there are only 3 Units, 5 students are admitted in Diploma. Total 5 degree & 8 diploma students are admitted against 5 postgraduate teachers which is not as per P.G. Regulations.
4. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17

Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

 - Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
 - Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
 - Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
 - Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
 - TB & chest and Dermatology departments are not separated from Medicine Department.
 - Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

 - Unit I, II & III are having 34 beds each.

In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

 - Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
 - Unit II is having 35 beds.
 - Unit III is having 35 beds.
 - Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
 - Unit V is having two assistant professors (it is headed by Assistant Professor)
 - Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

 - Unit I is having 31 beds, one professor and one assistant professor.
 - Unit II is having one associate professor and one assistant professor.
 - Unit III is having one associate professor.

Obstetrics & Gynecology Department:

 - Unit I is having 52 beds.
 - Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
 - Unit III is having 37 beds and one associate professor and one assistant professor.
 - Unit IV is having 37 beds, one associate professor and one assistant professor.
 - Unit V is having 37 beds, one associate professor and one assistant professor.
7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.

8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-
Laboratory Technicians: 07
Laboratory Assistants: 05
Laboratory Attendants: 02
15. Nursing staff is inadequate as under:-
Nursing Superintendent: Nil
Deputy Nursing Superintendent: Nil
Matron 04
Asstt. Nursing Superintendent Nil
Nursing Sisters 32
Staff nurses 198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
2 demonstration rooms each having 75-100 seats are required.
Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
Each demonstration rooms should have 75 seats.
All practical laboratories should have 90 workplaces each.

Biochemistry Department:
Two demonstration rooms of 75 seats each is required.

The practical laboratory should have 90 workplaces.

22. The following deficiencies are observed in the infrastructure of para-clinical departments:-
 Pathology Department:
 Histopathology laboratory should have 90 workplaces.
 Clinical pathology lab should have 40 workplaces.
 Microbiology Department:
 Two demonstration rooms of 75 seats each are required.
 Practical laboratory should have 90 workplaces.
 Forensic Medicine Department:
 Two demonstration rooms of 75 seats each are required.
 Community Medicine Department:
 Two demonstration rooms of 75 seats each are required.
 The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.
27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D. (Paediatrics) & D.C.H. qualifications at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(Paediatrics) & D.C.H. qualifications from the academic session 2008-2009.

33. Devi Ahilya Vishwavidyalaya - Permitting intake in M.D.(Pathology) & DCP courses at MGM Medical College, Indore.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Pathology) & D.C.P. qualifications at M.G.M Medical College, Indore.

The Postgraduate Committee considered the inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the IMC Act of M.D.(Pathology) & D.C.P. qualifications at M.G.M Medical College, Indore and noted the following:-

1. Teaching faculty is deficient by 4 Assoc. Prof., 1 Assistant Professor & 1 Tutor.
2. Investigations like frozen section, bone marrow aspiration & USG & FNAC guided FNAC are not performed.
3. Mycology, Parasitology, Virology & Endocrinology investigations are not carried out.
4. Hostel accommodation for postgraduates is inadequate.
5. New journals are not subscribed. Resultantly, library facilities are inadequate.
6. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th Nov., 2006 for continuance of recognition of MBBS degree :-

1. (a) The shortage of teaching faculty is 27.85% as under:
 - (i) Professor -02 (Pharmacology-1, Forensic Medicine-1)
 - (ii) Assoc.Prof. - 16 (Anatomy-2, Pathology-4, Microbiology-1, Pharmacology-3, Psychiatry-1, Surgery-4, PSM-1)
 - (iii) Asstt.Prof.-25 (Anatomy-3, Physiology-1, Lecturer in Biophysics-1, Biochemistry-1, Pathology-1, Microbiology-1, Pharmacology-1, Pharmaceutical Chemist-1, Forensic Medicine-2, PSM-1, Lecturer in Epidemiology-1, Medicine-3, Surgery-3, Obst. & Gynae.-1, ANMO-1, MWO-1, Radiology-2)
 - (iv) Tutor -18 (Anatomy-2, Pathology-2, Pharmacology-2, Radiology-5, Anaesthesia-7)
- (b) The shortage of Residents is 29.56% as under:-
 - i) Sr. Resident – 25 (Medicine-6, TB & Chest-1, Dermatology-1, Psychiatry-1, Paediatric-3, Surgery-6, Orthopaedic-3, ENT-1, Obst. & Gynae.-3)
 - ii) Jr. Resident-09 (Dermatology-3, Psychiatry-3, Ophthalmology-3)
2. Clinical material in terms of OPD attendance, bed occupancy and Radiological investigations is inadequate on the day of inspection as under:

	Day of inspection	
OPD attendance	728	
Bed Occupancy%	61.39%	
<u>Radiological investigations</u>	OP	IP
x-ray	40	26
Ultrasonography	41	17
Special investigations	-	07
CT Scan	-	-

3. Dr. D.K. Jain shown as Medical Superintendent is not qualified to hold the post of Medical Superintendent as he has 3 years of administrative experience against the requirement of 10 years.
4. Dr. V.K. Saini, Dean of the medical college is also holding the additional charge of Director of Medical Education which is not as per norms.
5. Distribution of teaching beds in different specialities is not as per Council recommendation. In the department of Psychiatry there are 164 beds (9 beds in MYH and 155 beds in Mental Hospital). All these beds are managed by the Psychiatry Department. The beds of TB & Chest and Dermatology are combined with those of medicine and these two are not separate specialities.
6. The composition of units in Medicine, Paediatrics, Surgery, Ophthalmology and Obst. & Gynae. is not as per norms of the Council as under:-

Medicine Department:

- Medicine Unit I is having 31 beds (Unit should not have more than 30 beds)
- Medicine Unit III is having one professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit V is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- Medicine Unit VI is having one associate professor and one assistant professor (Unit should have 3 senior faculty members).
- TB & chest and Dermatology departments are not separated from Medicine Department.

- Head of the Department of Medicine is Professor of TB & Chest department.

Pediatric Department:

- Unit I, II & III are having 34 beds each.
In addition to this 52 beds are common for all the three units.
Hence the total beds available in Pediatric department are 154 beds.

Surgery Department:

- Unit I is having 35 beds and two assistant professors (it is headed by Assistant Professors).
- Unit II is having 35 beds.
- Unit III is having 35 beds.
- Unit IV is having 32 beds and two assistant professors (it is headed by Assistant Professor)
- Unit V is having two assistant professors (it is headed by Assistant Professor)
- Unit VI is having two assistant professors (it is headed by Assistant Professor)

Ophthalmology Department:

- Unit I is having 31 beds, one professor and one assistant professor.
- Unit II is having one associate professor and one assistant professor.
- Unit III is having one associate professor.

Obstetrics & Gynecology Department:

- Unit I is having 52 beds.
- Unit II is having 37 beds and one assistant professor. (Unit is headed by Assistant Professor)
- Unit III is having 37 beds and one associate professor and one assistant professor.
- Unit IV is having 37 beds, one associate professor and one assistant professor.
- Unit V is having 37 beds, one associate professor and one assistant professor.

7. In the O.P.D. Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not available in all the rooms. There is no separate injection room for male and female patients. Injection room was without any emergency drugs. There is no minor O.T. There is a physiotherapy section. OPD is overcrowded and the space provided to different specialties for examination of patients, sitting of doctors & teaching is inadequate.
8. Most of the wards are not provided with duty doctor room, nurse duty room, pantry, examination/procedure room, teaching area and side laboratory. Nursing station is available in most of the wards but it is outside in most of the wards. In the ward bed-side teaching is carried out as there is no designated teaching area in any ward. There is overcrowding of the beds in most of the wards. Beds are numbered but in most of the wards unit distribution of the beds is not clearly mentioned. All the beds are not provided with side lockers. In one of the Medicine male ward patients of medicine, psychiatry & dermatology and TB & Chest are kept. The same situation is seen in one female medicine ward.
9. Some of the operation theatres are not air-conditioned which is not as per norms. Central oxygen & Nitrous oxide supply and central suction are not functional in any OT and they are under repairs.
10. The ICCU is not air conditioned. Central oxygen and central suction is not available in Medical ICU. There is no central oxygen or central suction. Equipments are grossly inadequate. Burns ICU is not available. There is no central suction and oxygen in Neonatal ICU at CNBC. Hospital.
11. CT Scan is not available. There is no 800 MA x-ray machine available.
12. In CSSD, ETO sterilization is not available.
13. Services of Dietician are not available. There is no provision for supply of diet as recommended by physician.
14. The para-medical staff is grossly inadequate as under:-

Laboratory Technicians: 07
 Laboratory Assistants: 05
 Laboratory Attendants: 02

15. Nursing staff is inadequate as under:-

Nursing Superintendent:	Nil
Deputy Nursing Superintendent:	Nil
Matron	04
Asstt. Nursing Superintendent	Nil
Nursing Sisters	32
Staff nurses	198
16. The auditorium has a capacity of only 425 seats against the requirement of 750.
17. The common room for girls does not have adequate furniture.
18. The accommodation for students in Hostels is available only for 337 students which is inadequate against the requirement of 700.
19. There is no hostel for working nurses.
20. In the central library, the number of journals subscribed are only 65 against the requirement of 100.
21. In the infrastructure of pre-clinical departments, the following deficiencies are observed:-

Anatomy Department:
 2 demonstration rooms each having 75-100 seats are required.
 Histopathology practical laboratory should have 90 workplaces.

Physiology Department:
 Each demonstration rooms should have 75 seats.
 All practical laboratories should have 90 workplaces each.

Biochemistry Department:
 Two demonstration rooms of 75 seats each is required.
 The practical laboratory should have 90 workplaces.
22. The following deficiencies are observed in the infrastructure of para-clinical departments:-

Pathology Department:
 Histopathology laboratory should have 90 workplaces.
 Clinical pathology lab should have 40 workplaces.

Microbiology Department:
 Two demonstration rooms of 75 seats each are required.
 Practical laboratory should have 90 workplaces.

Forensic Medicine Department:
 Two demonstration rooms of 75 seats each are required.

Community Medicine Department:
 Two demonstration rooms of 75 seats each are required.
 The practical laboratory should have 90 workplaces.
23. In animal house, large animals are not available. Veterinary officer is part-time which is not as per norms.
24. At RHTC Harsola, messing facilities are not available. Audio-visual aids have not been provided.
25. At UHC, Lecturer-cum-Medical Officer having MD(PSM) qualification is not available.
26. In the medical record department, no qualified medical record officer available. ICD IX classification of diseases is followed for indexing which should be replaced by ICD X classification.

27. Central oxygen supply and central suction are not available in the casualty emergency area. It is not equipped with adequate equipments. Disaster trolley and crash cots are not available. There is no minor O.T. Space provided for casualty is grossly inadequate and there is over-crowding of beds.
28. Collection and segregation of hospital waste is not carried out as per pollution control board guidelines.
29. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Pathology) & DCP qualifications at MGM Medical College, Indore granted by Devi Ahilya Vishwavidyalaya u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D. (Pathology) & DCP qualifications from the academic session 2008-2009.

34. A.P. Singh University – Permitting intake in M.D. (OBG) course at SS Medical College, Rewa.

Read: The inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D. (OBG) qualification at S.S. Medical College, Rewa.

The Postgraduate Committee considered the Inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D. (OBG qualification at S.S. Medical College, Rewa and noted the following:-

1. There is no Associate Professor in Unit I.
2. Teaching faculty is deficient by 2 Associate Professors and 1 Asstt. Prof.
3. 4 degree & 2 diploma students are admitted against 1 postgraduate teacher.
4. There is only 1 Unit which has 120 beds which is not as per Regulations.
5. Average bed occupancy is 48-76%. Resultantly, clinical material is inadequate.
6. Operative workload is inadequate due to shortage of staff in O.G. & Anaesthesia. Artificial insemination is not available.
7. There are no research projects in the department.
8. Publications in last 3 years are inadequate.
9. There is no separate postgraduate hostel.
10. Facilities like operating laparoscopy are not available.
11. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th November, 2006 for continuance of recognition at MBBS degree:-

1. The shortage of teaching staff required at present stage is as under:-
 - (a) Faculty 63 %
 - i) Professor : 6 (1- Physio, 1- Biochem., 1-Pharma, 1-Path., 1-FMT, 1-Anaesthesia)
 - ii) Associate Professor: 18 (1-Anatomy, 1-Physio, Biochem, 1-Pharma, 1-PSM, 1-Medicine, 1-Pediatrics, 1 Skin VD., 1-Surgery, 1-Ortho, 1-Ophthalmology, 3-O&G, 2- Anaesthesiology, 1-Radiology, 1-Dentistry)
 - iii) Assistant Professor: 27 (3-Anatomy, 1-Physio, 1-Biochem, 2-Pharma, 1-Micro, 4- PSM, 3- Medicine, 2-Ped, 1-TB Chest, 1 Psychiatry, 2-Ophthalmology, 1-ENT, 2-O&G, 2-Anaesthesia & 1 LECT Biophysics)
 - iv) Tutor: 3 (1-Pharma, 1-Radiology 1-Dentistry)
 - (v) Pharmaceutical Chemist 1
 - (b) Resident 31.00 %
 - (i) Sr. Resident: 14 (3-Med, 1-Ped, 1-TB& Chest, 1-Skin & VD, 1-Psychiatry, 3-Surgery, 2-Ortho, 1-Ophthalmology, 1-O&G)
 - (ii) Jr. Resident: 09 (3-TB Chest, 3-Skin VD, 3- Psychiatry)
2. Clinical Material is inadequate in terms of bed occupancy and Lab. Investigations are as under:-

	Daily Average	Day of Inspection
Bed occupancy %	60-80%	70%
<u>Laboratory Investigations</u>		
Biochemistry	110-200	130
Microbiology	15-25	20
Serology	20-35	25
Parasitology	5-10	08
Haematology	120-220	160
Histopathology	4-8per day	06
Cytopathology	4-8 per day	04
Others		

3. The institution does not have separate departments of Psychiatry and skin & V.D. These specialities are sections/divisions of department of medicine. These specialities do not have their separate departmental libraries. The head of department of Medicine is also the head of these specialities which is not as per MCI norms.
4. Hostel accommodation for students is inadequate as it is available for 216 students only against the requirement of 300.
5. Non-teaching staff in the library is inadequate.
6. Number of available journals are only 45 against the requirement of 100.
7. Central Animal house with required facilities are not available. No animal is regularly maintained in the animal house.
8. No Lecturer cum medical officer having MD(PSM) is available at RHTC. Infrastructural facilities are inadequate at RHTC. No audio-visual aids are provided.
9. At UHC – No Lecturer-cum-Medical Officer for MD(PSM) qualification is posted. Record for investigations are not maintained properly.
10. Registration counter for OPD is not computerized.
11. The indoor registration counter is not computerized and not cross linked with the outdoor registration.
12. The Medical Record department is not computerized. ISD classification of record is not being followed.
13. Only one mobile x-ray unit is available which is inadequate as per MCI norms.
14. Canteen for patients, staff and students is not available.
15. In Pathology department, the up-keeping of the museum is not satisfactory.
16. Service laboratory for Serology, virology, parasitology, mycology and tuberculosis are not available in the Department of Microbiology.
17. Catalogues are not available in the museum of Deptt. of Forensic Medicine.
18. Number of books in the departmental library in TB & Chest, Psychiatry, ENT, Paediatrics is inadequate as per MCI norms.
19. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D. (OBG) qualification at S.S. Medical College, Rewa granted by A.P. University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(OBG) qualification from the academic session 2008-2009.

35. A.P. Singh University – Permitting intake in M.S. (Ortho.) & D.Ortho. courses at S.S. Medical College, Rewa.

Read: The inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S.(Ortho.) & D.Ortho. qualifications at S.S.. Medical College, Rewa.

The Postgraduate Committee considered the Inspection report (March, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S.(Ortho.) & D.Ortho. qualifications at S.S. Medical College, Rewa and noted the following:-

1. Teaching faculty is deficient by 1 Associate Professor.
2. Unit-I does not have Associate Professor.
3. Unit-II has only 2 teaching faculty.
4. Resultantly, teaching complement is incomplete in both the units.

5. No Senior Residents are available.
6. Only 2 O.T. tables are running per week for both the units which is inadequate.
7. Annual intake is 4 degree & 3 against 2 postgraduate teachers.
8. Daily average OPD is 51 only which is inadequate.
9. Investigations facilities like Nerve Conduction, EMG, etc. are not available. Resultantly, instrumentation is inadequate.
10. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th November, 2006 for continuance of recognition at MBBS degree:-

1. The shortage of teaching staff required at present stage is as under:-
 - (c) Faculty 63 %
 - (i) Professor : 6 (1- Physio, 1- Biochem,, 1-Pharma ,1-Path., 1-FMT, 1-Anaeshtsiology)
 - (ii) Associate Professor: 18 (1-Anatomy, 1-Physio, Biochem, 1-Pharma, 1-PSM, 1-Medicine, 1-Peaditrics, 1 Skin VD., 1-Suregery, 1-Ortho, 1-Ophthalm.,3-O&G, 2- Aneshthisiology, 1-Raidodio. 1-Dentistry)
 - (iii) Assistant Professor: 27 (3-Anatomy, 1-Phsio, 1-Biochem, 2-Pharma, 1-Micro, 4- PSM, 3- Medicine, 2-Pead, 1-TB Chest, 1 Psychiatry, 2-Ophthalm., 1-ENT, 2-O&G , 2-Anaesht. &1 LECT Biophysics .
 - (iv) Tutor: 3 (1-Pharma, 1-Rediology 1-Dentistry)
 - (v) Pharmaceutical Chemist 1
 - (d) Resident 31.00 %
 - (i) Sr. Resident: 14 (3-Medi, 1-Peda.1-TB& Chest, 1-Skin &VD, 1-Psychiatry, 3-Surgery, 2-Ortho,1-Ophthalm., 1-O&G)
 - (ii) Jr. Resident: 09 (3-TB Chest, 3-Skin VD, 3- Psychiatry)
2. Clinical Material is inadequate in terms of bed occupancy and Lab. Investigations are as under:-

	Daily Average	Day of Inspection
Bed occupancy %	60-80%	70%
<u>Laboratory Investigations</u>		
Biochemistry	110-200	130
Microbiology	15-25	20
Serology	20-35	25
Parasitology	5-10	08
Haematology	120-220	160
Histopathology	4-8per day	06
Cytopathology	4-8 per day	04
Others		

3. The institution does not have separate departments of Psychiatry and skin & V.D. These specialities are sections/divisions of department of medicine. These specialities do not have their separate departmental libraries. The head of department of Medicine is also the head of these specialities which is not as per MCI norms.
4. Hostel accommodation for students is inadequate as it is available for 216 students only against the requirement of 300.
5. Non-teaching staff in the library is inadequate.
6. Number of available journals are only 45 against the requirement of 100.
7. Central Animal house with required facilities are not available. No animal is regularly maintained in the animal house.
8. No Lecturer cum medical officer having MD(PSM) is available at RHTC. Infrastructural facilities are inadequate at RHTC. No audio-visual aids are provided.
9. At UHC – No Lecturer-cum-Medical Officer for MD(PSM) qualification is posted. Record for investigations are not maintained properly.
10. Registration counter for OPD is not computerized.
11. The indoor registration counter is not computerized and not cross linked with the outdoor registration.
12. The Medical Record department is not computerized. ISD classification of record is not being followed.

13. Only one mobile x-ray unit is available which is inadequate as per MCI norms.
14. Canteen for patients, staff and students is not available.
15. In Pathology department, the up-keeping of the museum is not satisfactory.
16. Service laboratory for Serology, virology, parasitology, mycology and tuberculosis are not available in the Department of Microbiology.
17. Catalogues are not available in the museum of Deptt. of Forensic Medicine.
18. Number of books in the departmental library in TB & Chest, Psychiatry, ENT, Padiatrics is inadequate as per MCI norms.
19. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S. (Orthopaedics) & D.Ortho. qualifications at S.S. Medical College, Rewa granted by A.P. University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.S. (Orthopaedics) & D.Ortho. qualifications from the academic session 2008-2009.

36. A.P. Singh University – Permitting intake in M.S. (Anatomy) course at SS Medical College, Rewa.

Read: The inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S.(Anatomy) qualification at S.S.. Medical College, Rewa.

The Postgraduate Committee considered the Inspection report (Feb., 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S.(Anatomy) qualification at S.S. Medical College, Rewa and noted the following:-

1. Teaching faculty is deficient by 1 Associate Professor & 3 Assistant Professors. for undergraduate studies.
2. Additional component for postgraduate studies is not available.
3. Museum has only 355 specimens & 31 charts and requires upgradation.
4. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 27th & 28th November, 2006 for continuance of recognition at MBBS degree:-

1. The shortage of teaching staff required at present stage is as under:-
 - (a) Faculty 63 %
 - (i) Professor : 6 - Physio, 1- Biochem,, 1-Pharma ,1-Path., 1-FMT, 1-Anaeshtsiology)
 - (ii) Associate Professor: 18 (1-Anatomy, 1-Physio, Biochem, 1-Pharma, 1-PSM, 1-Medicine, 1-Peaditrics, 1 Skin VD., 1-Suregery, 1-Ortho, 1-Ophthalm.,3-O&G, 2- Aneshthisiology, 1-Raidodio. 1-Dentistry)
 - iii) Assistant Professor: 27 (3-Anatomy, 1-Phsio, 1-Biochem, 2-Pharma, 1-Micro, 4- PSM, 3- Medicine, 2-Pead, 1-TB Chest, 1 Psychiatry, 2-Ophthalm., 1-ENT, 2-O&G , 2-Anaesht. &1 LECT Biophysics .
 - iv) Tutor: 3 (1-Pharma, 1-Rediology 1-Dentistry)
 - v) Pharmaceutical Chemist 1
 - (b) Resident 31.00 %
 - (i) Sr. Resident: 14 (3-Medi, 1-Peda.1-TB& Chest, 1-Skin &VD, 1-Psychiatry, 3-Surgery, 2-Ortho,1-Ophthalm., 1-O&G)
 - (ii) Jr. Resident: 09 (3-TB Chest, 3-Skin VD, 3- Psychiatry)

2. Clinical Material is inadequate in terms of bed occupancy and Lab. Investigations are as under:-

	Daily Average	Day of Inspection
Bed occupancy %	60-80%	70%
<u>Laboratory Investigations</u>		
	110-200	130
Biochemistry	15-25	20
Microbiology	20-35	25
Serology	5-10	08
Parasitology	120-220	160
Haematology	4-8per day	06
Histopathology	4-8 per day	04
Cytopathology		
Others		

3. The institution does not have separate departments of Psychiatry and skin & V.D. These specialities are sections/divisions of department of medicine. These specialities do not have their separate departmental libraries. The head of department of Medicine is also the head of these specialities which is not as per MCI norms.
4. Hostel accommodation for students is inadequate as it is available for 216 students only against the requirement of 300.
5. Non-teaching staff in the library is inadequate.
6. Number of available journals are only 45 against the requirement of 100.
7. Central Animal house with required facilities are not available. No animal is regularly maintained in the animal house.
8. No Lecturer cum medical officer having MD(PSM) is available at RHTC. Infrastructural facilities are inadequate at RHTC. No audio-visual aids are provided.
9. At UHC – No Lecturer-cum-Medical Officer for MD(PSM) qualification is posted. Record for investigations are not maintained properly.
10. Registration counter for OPD is not computerized.
11. The indoor registration counter is not computerized and not cross linked with the outdoor registration.
12. The Medical Record department is not computerized. ISD classification of record is not being followed.
13. Only one mobile x-ray unit is available which is inadequate as per MCI norms.
14. Canteen for patients, staff and students is not available.
15. In Pathology department, the up-keeping of the museum is not satisfactory.
16. Service laboratory for Serology, virology, parasitology, mycology and tuberculosis are not available in the Department of Microbiology.
17. Catalogues are not available in the museum of Deptt. of Forensic Medicine.
18. Number of books in the departmental library in TB & Chest, Psychiatry, ENT, Peadiatrics is inadequate as per MCI norms.
19. Other deficiencies/remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S.(Anatomy) qualification at S.S. Medical College, Rewa granted by A.P. University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.S.(Anatomy) qualification from the academic session 2008-2009.

37. Jiwaji University – Permitting intake in M.D. (General Medicine) course at GR Medical College, Gwalior.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D.(General Medicine) qualification at G.R. Medical College, Gwalior.

The Postgraduate Committee considered the Inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D.(General Medicine) qualification at G.R. Medical College, Gwalior and noted the following:-

1. Teaching faculty is deficient by 3 Assoc. Prof. & 1 Asstt. Prof. Unit 1 does not have Asso. Prof. Unit VI has only 2 faculty and is headed by Asstt. Prof. which is not as per Regulations. Resultantly, teaching faculty is incomplete in both these Units.
2. There are no Senior residents against the requirement of 6.
3. Although there are only 5 PG teachers in 6 Units, 14 students are admitted in M.D.(General Medicine) annually, violating both the ratios of Teacher:Student & Unit:Student.
4. Auxiliary departments like Psychiatry, Skin & VD and TB & Chest do not exist which is not as per Regulations.
5. Facilities for teaching & training of basic life support to UG, interns & PG are not available.
6. There is no proper ICCU & RCCU. Patients of acute coronary events are accommodated in a small designated area which is inadequate.
7. There are no trained technicians for taking ECG & other investigations.
8. Female nurses were not available at workplace to assist the male doctors in examining female patients which is not as per Regulations.
9. Paramedical & administrative staff is inadequate.
10. Rooms for faculty are inadequate. Their offices are in the wards.
11. Speciality clinics do not have separate accommodation. No separate classroom is available. Most of the wards do not have proper demonstration rooms, doctors' duty room, nursing station, changing rooms etc.
12. Central suction & O₂ are not available.
13. Hygiene in the wards is poor. Wards are found dirty & all kinds of spits and water flow through galleries.
14. There are no isolation beds.
15. A laboratory was shown as PG laboratory. However, it was being used as investigations laboratory for the entire hospital.
16. College & hospital timings are from 9 a.m.-2p.m. which is inadequate for the teaching & training and patient care services.
17. Examination of thesis is not done as per MCI rules.
18. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 24th & 25th November, 2006 for continuance of recognition at MBBS degree :-

1. The shortage of teaching faculty is as under:-
 - (a) Faculty 28.8%

Professor :	04 (Microbiology-1, TB & Chest -1, Medicine - 1, ENT -1)
Associate Professor:	28 (Anatomy -2, Physiology -1, Biochemistry- 1, Pathology -4, Microbiology -1, Pharmacology -3, FMT -2, Medicine - 2, Psychiatry-1, Pediatrics -2, Surgery -4, Orthopaedics - 1, Dental -1, Ophthalmology -2, Radiology -1)
Assistant Professor:	16 (Anatomy-3, Physiology-1, Biochemistry - 2, Pathology -1, Pharmacology -2, FMT-1, PSM- 1, Medicine -1, Surgery - 2, Radiodiagnosis - 2),
Tutor:	01(FMT -1)
 - (b) Resident 25.8%
 - (i) Sr. Resident: 20(TB & Chest - 1, Medicine-6, Pediatrics- 3, Surgery - 6, Orthopaedics-3, Ophthalmology- 1)
 - (ii) Jr. Resident: 08 (TB & Chest -2, Skin & VD - 3, Psychiatry-3)
2. Central oxygen, nitrous oxide & central suction in the operation theatres are not in working order.
3. Paramedical staff is inadequate is as under:-

Laboratory Technicians	-	07
Laboratory Assistants	-	02
Laboratory Attendants	-	02
4. Nursing staff is inadequate as under:-

Nursing superintendent Gr I (matron)	-	02
Nursing superintendent Gr.II	-	nil
Nursing superintendent Gr. III (nursing sister)	-	24

- | | | |
|---------------------|---|-----|
| Staff nurse | - | 127 |
| ANM | - | 18 |
| Maternity Assistant | - | 14 |
| Other categories | - | nil |
5. The capacity of lecture theatre is not as per Council norms.
 6. The accommodation in students' hostel is available only for 585 students against the requirement of 700 at this stage. There is only one combine hostel for interns, PGs and Residents with a capacity of 100 which is grossly inadequate.
 7. In the central library, the number of journals subscribed are only 41 against the requirement of 100. The non-teaching staff in library is inadequate.
 8. The capacity of examination hall is only 230, which is inadequate.
 9. In the central animal house, Guinea pig, mice and large animals are not available. The veterinary officer and attendants are also not available.
 10. RHTC, Dabra is under the control of Director Medical & Health Services, which is not as per norms.
 11. The indoor registration counter is computerized but not cross linked with outdoor registration counter and of MRD computer.
 12. The organizational and the operational part of both OPD and indoor laboratories is not proper. There are no adequate required automation instruments in any of the laboratories
 13. The Biochemistry department is not involved in any diagnostic services neither in college nor in hospital. The anomalies in the working of various diagnostic units should be corrected and all the three departments i.e pathology, microbiology & biochemistry should be effectively involved in the library work.
 14. Central laundry is not available.
 15. In the infrastructure of 1st MBBS deptt., the following deficiencies are observed:-
 - a. Anatomy
 - There is no electric saw
 - There is no separate cooling cabinet available.
 - b. Physiology
 - The laboratory of human and mammalian experiments is not available.
 - c. Biochemistry
 - There is no demonstration room available.
 - Gas cylinders need to be kept away in a separate enclosures.
 - The department does not participates in hospital work.
- In the infrastructure of para-clinical department, the following deficiencies are observed:
- (a) Pharmacology
 - The clinical pharmacology and experimental pharmacology laboratory is not as per norms.
 - (b) Pathology
 - The capacity of demonstration room is not as per norms.
16. The institution does not have separate departments of Psychiatry, Skin & VD and TB & Chest. These specialties are divisions / section under the department of medicine which is not as per norms. These departments do not have their own teaching / demonstration rooms, side laboratories and libraries which is not as per norms.
 17. The Professor of Skin & VD is the Head of department of medicine.
 18. Other deficiencies / remarks are in the report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D. (General Medicine) qualification at G.R. Medical College, Gwalior granted by Jiwaji University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(General Medicine) qualification from the academic session 2008-2009.

38. Jiwaji University – Permitting intake in M.D. (Anaesthesia) & D.A. course at GR Medical College, Gwalior.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D.(Anaesthesia) & D.A.qualifications at G.R. Medical College, Gwalior.

The Postgraduate Committee considered the Inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D.(Anaesthesia) & D.A.qualifications at G.R. Medical College, Gwalior and noted the following:-

1. Teaching faculty is deficient by 1 Assoc. Prof. & 1 Asstt. Prof.
2. Annual intake is 5 degree & 7 diploma although there are only 5 PG teachers.
3. Only 11 Boyle's apparatus & 1 Anaesthesia machine are available amongst 14 Ots.
4. Resultantly, Anaesthesia equipment is inadequate.
5. Monitored Anaesthetic care is not available.
6. Only 3 multiparamonitors, 5 pulse oxymeter & 7 sphygmomanometer & 2 Ventilators are available 14 Ots. Resultantly, Monitoring & Resuscitation equipment are inadequate.
7. Only 1 room is available for Head of the Department & all the faculty which is inadequate. Demonstration room is not available.
8. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 24th & 25th November, 2006 for continuance of recognition at MBBS degree :-

1. The shortage of teaching faculty is as under:-
 - (a) Faculty 28.8%

Professor : 04 (Microbiology-1, TB & Chest -1, Medicine - 1, ENT -1)

Associate Professor: 28 (Anatomy -2, Physiology -1, Biochemistry- 1, Pathology -4, Microbiology -1, Pharmacology -3, FMT -2, Medicine - 2, Psychiatry-1, Pediatrics -2, Surgery -4, Orthopaedics - 1, Dental -1, Ophthalmology -2, Radiology -1)

Assistant Professor: 16 (Anatomy-3, Physiology-1, Biochemistry - 2, Pathology -1, Pharmacology -2, FMT-1, PSM- 1, Medicine -1, Surgery - 2, Radiodiagnosis - 2),

Tutor: 01(FMT -1)
 - (b) Resident 25.8%
 - (i) Sr. Resident: 20(TB & Chest - 1, Medicine-6, Pediatrics- 3, Surgery - 6, Orthopaedics-3, Ophthalmology- 1)
 - (ii) Jr. Resident: 08 (TB & Chest -2, Skin & VD - 3, Psychiatry-3)
2. Central oxygen, nitrous oxide & central suction in the operation theatres are not in working order.
3. Paramedical staff is inadequate is as under:-

Laboratory Technicians	-	07
Laboratory Assistants	-	02
Laboratory Attendants	-	02
4. Nursing staff is inadequate as under:-

Nursing superintendent Gr I (matron)	-	02
Nursing superintendent Gr.II	-	nil
Nursing superintendent Gr. III (nursing sister)	-	24
Staff nurse	-	127
ANM	-	18
Maternity Assistant	-	14
Other categories	-	nil
5. The capacity of lecture theatre is not as per Council norms.
6. The accommodation in students' hostel is available only for 585 students against the requirement of 700 at this stage. There is only one combine hostel for interns, PGs and Residents with a capacity of 100 which is grossly inadequate.
7. In the central library, the number of journals subscribed are only 41 against the requirement of 100. The non-teaching staff in library is inadequate.
8. The capacity of examination hall is only 230, which is inadequate.
9. In the central animal house, Guinea pig, mice and large animals are not available. The veterinary officer and attendants are also not available.
10. RHTC, Dabra is under the control of Director Medical & Health Services, which is not as per norms.
11. The indoor registration counter is computerized but not cross linked with outdoor registration counter and of MRD computer.
12. The organizational and the operational part of both OPD and indoor laboratories is not proper. There are no adequate required automation instruments in any of the laboratories
13. The Biochemistry department is not involved in any diagnostic services neither in college nor in hospital. The anomalies in the working of various diagnostic units should be

corrected and all the three departments i.e pathology, microbiology & biochemistry should be effectively involved in the library work.

14. Central laundry is not available.
15. In the infrastructure of 1st MBBS deptt., the following deficiencies are observed:-
 - a. Anatomy
 - There is no electric saw
 - There is no separate cooling cabinet available.
 - b. Physiology
 - The laboratory of human and mammalian experiments is not available.
 - c. Biochemistry
 - There is no demonstration room available.
 - Gas cylinders need to be kept away in a separate enclosures.
 - The department does not participates in hospital work.

In the infrastructure of para-clinical department, the following deficiencies are observed:

- a. Pharmacology
 - The clinical pharmacology and experimental pharmacology laboratory is not as per norms.
- (b) Pathology
 - The capacity of demonstration room is not as per norms.
16. The institution does not have separate departments of Psychiatry, Skin & VD and TB & Chest. These specialties are divisions / section under the department of medicine which is not as per norms. These departments do not have their own teaching / demonstration rooms, side laboratories and libraries which is not as per norms.
17. The Professor of Skin & VD is the Head of department of medicine.
18. Other deficiencies / remarks are in the report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Anaesthesia) & D.A.qualifications at G.R. Medical College, Gwalior granted by Jiwaji University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(Anaesthesia) & D.A. qualifications from the academic session 2008-2009.

39. Jiwaji University – Permitting intake in M.D. (Physiology) course at GR Medical College, Gwalior.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D.(Physiology) qualification at G.R. Medical College, Gwalior.

The Postgraduate Committee considered the Inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.D.(Physiology) qualification at G.R. Medical College, Gwalior and noted the following:-

1. Teaching faculty is deficient by 1 Lecturer in Biophysics even for UG. Additional component for PG is not available.
2. Number of books in the departmental library is only 59 which is inadequate. Journals are also inadequate.
3. Museum is not available. Charts are displayed in laboratories & corridor. Only 40 charts are available which is inadequate.
4. Only 1 technician is available which is grossly inadequate.
5. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 24th & 25th November, 2006 for continuance of recognition at MBBS degree :-

1. The shortage of teaching faculty is as under:-
 - (a) Faculty 28.8%
 - Professor : 04 (Microbiology-1, TB & Chest –1, Medicine – 1, ENT -1)
 - Associate Professor: 28 (Anatomy -2, Physiology -1, Biochemistry– 1, Pathology –4, Microbiology –1, Pharmacology –3, FMT –2, Medicine – 2, Psychiatry-1, Pediatrics –2, Surgery –4, Orthopaedics – 1, Dental –1, Ophthalmology –2, Radiology –1)

Assistant Professor: 16 (Anatomy-3, Physiology-1, Biochemistry – 2, Pathology -1, Pharmacology -2, FMT-1, PSM– 1, Medicine –1, Surgery – 2, Radiodiagnosis – 2),

Tutor: 01(FMT -1)

(b) Resident 25.8%

(i) Sr. Resident: 20(TB & Chest – 1, Medicine-6, Pediatrics- 3, Surgery – 6, Orthopaedics-3, Ophthalmology– 1)

(ii) Jr. Resident: 08 (TB & Chest -2, Skin & VD – 3, Psychiatry-3)

2. Central oxygen, nitrous oxide & central suction in the operation theatres are not in working order.
3. Paramedical staff is inadequate is as under:-

Laboratory Technicians	-	07
Laboratory Assistants	-	02
Laboratory Attendants	-	02
4. Nursing staff is inadequate as under:-

Nursing superintendent Gr I (matron)	-	02
Nursing superintendent Gr.II	-	nil
Nursing superintendent Gr. III (nursing sister)	-	24
Staff nurse	-	127
ANM	-	18
Maternity Assistant	-	14
Other categories	-	nil
5. The capacity of lecture theatre is not as per Council norms.
6. The accommodation in students' hostel is available only for 585 students against the requirement of 700 at this stage. There is only one combine hostel for interns, PGs and Residents with a capacity of 100 which is grossly inadequate.
7. In the central library, the number of journals subscribed are only 41 against the requirement of 100. The non-teaching staff in library is inadequate.
8. The capacity of examination hall is only 230, which is inadequate.
9. In the central animal house, Guinea pig, mice and large animals are not available. The veterinary officer and attendants are also not available.
10. RHTC, Dabra is under the control of Director Medical & Health Services, which is not as per norms.
11. The indoor registration counter is computerized but not cross linked with outdoor registration counter and of MRD computer.
12. The organizational and the operational part of both OPD and indoor laboratories is not proper. There are no adequate required automation instruments in any of the laboratories
13. The Biochemistry department is not involved in any diagnostic services neither in college nor in hospital. The anomalies in the working of various diagnostic units should be corrected and all the three departments i.e pathology, microbiology & biochemistry should be effectively involved in the library work.
14. Central laundry is not available.
15. In the infrastructure of 1st MBBS deptt., the following deficiencies are observed:-
 - d. Anatomy
 - There is no electric saw
 - There is no separate cooling cabinet available.
 - e. Physiology
 - The laboratory of human and mammalian experiments is not available.
 - f. Biochemistry
 - There is no demonstration room available.
 - Gas cylinders need to be kept away in a separate enclosures.
 - The department does not participates in hospital work.

In the infrastructure of para-clinical department, the following deficiencies are observed:

 - (b) Pharmacology
 - The clinical pharmacology and experimental pharmacology laboratory is not as per norms.
 - (b) Pathology
 - The capacity of demonstration room is not as per norms.
16. The institution does not have separate departments of Psychiatry, Skin & VD and TB & Chest. These specialties are divisions / section under the department of medicine which is not as per norms. These departments do not have their own teaching / demonstration rooms, side laboratories and libraries which is not as per norms.
17. The Professor of Skin & VD is the Head of department of medicine.

18. Other deficiencies / remarks are in the report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D. (Physiology) qualification at G.R. Medical College, Gwalior granted by Jiwaji University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(Physiology) qualification from the academic session 2008-2009.

40. Barkatullah University – Permitting intake in M.S. (Ophthalmology) & DOMS course at Gandhi Medical College, Bhopal.

Read: The inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S.(Ophthalmology) & DOMS qualifications at Gandhi Medical College, Bhopal.

The Postgraduate Committee considered the Inspection report (February, 2007) for purpose of continuance of recognition u/s 19 of the I.M.C. Act, 1956 of M.S.(Ophthalmology) & DOMS qualifications at Gandhi Medical College, Bhopal and noted the following:-

1. Unit II has only 25 beds & Unit III has only 15 beds which is inadequate.
2. Average daily bed occupancy is only 35.8% which is inadequate. Average daily operative workload is inadequate (Major:2; Minor:1). Resultantly, clinical material is inadequate.
3. Many equipment were out of order on the day of inspection.
4. Eye bank is not available. There is facility for moist chamber preservation only which is inadequate.
5. Space is insufficient for equipment & faculty.
6. AIDS clinic is not available.
7. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 24th & 25th November, 2006 for continuance of recognition at MBBS degree :-

1. The shortage of teaching faculty is as under:-
 - (a) Faculty 40%
 - (i) Professor : 02 (TB & Chest-1, Microbiology-1)
 - (ii) Associate Professor: 22 (Anatomy -3, Physiology -3, Biochemistry-1, Pathology -3, Microbiology -2, Forensic medicine-1, Medicine -1, TB & Chest-1, Pediatrics -1, Surgery -3, Radiology-1, Anaesthesia -1, Dentistry-1)
 - (iii) Assistant Professor: 32 (Anatomy -4, Physiology-2 Lecturer in Biophysics-1, Biochemistry-2, Pathology-2, Microbiology-1, Pharmacology-3, Pharmacist-1, Forensic Medicine -1, PSM-2, lecturer in epidemiology -1, Medicine-1, Psychiatry -1, Paediatric-2, Surgery-2, Orthopedics-2, ANMO-1, MWO -1, Radiology-1, Anaesthesia -1)
 - (iv) Tutor: 32 (Anatomy-3, Physiology-5, Biochemistry-1, Pathology-3, Pharmacology-1, Forensic Medicine-2, PSM-3, Radiology -5, Anaesthesia-8, Dentistry-1)
 - (b) Resident 25.8%
 - (i) Sr. Resident: 26 (Medicine-6, TB & Chest -1, Dermatology-1, Psychiatry-1, Paediatric-3, surgery-6, Orthopaedic-3, ENT-1, Ophthalmology-1, Obst. & Gynae.-3)
 - (ii) Jr. Resident: 08 (TB & Chest -2, Dermatology -3, Psychiatry-3)
2. Bed occupancy is only 70% on the day of inspection, which is inadequate.

3. In the department of Obst. & Gynae. there are 235 teaching beds distributed in 3 units, which is not as per norms.
4. The unit composition in the departments of Pediatrics, Medicine, Skin & VD, Psychiatry & TB & Chest is inadequate as under:-
 - (a) Skin & VD : At present dermatology is under medicine department. There are no senior resident or junior resident. Dermatology department should be separated at from medicine.
 - (b) Psychiatry – Psychiatry Department is having only 1 Professor. No other teaching staff and no senior or junior resident.
 - (c) TB & Chest department is having only 1 assistant professor. No other teaching staff and no senior or junior resident.
5. There is no central registration counter in the OPD. Each speciality is having its own registration counter which is not as per norms.
6. Some of the rooms in OPD are very small in size. There is no privacy for the patients in most of the areas. Facilities like patient couch, stools, x-ray view box, examination tray etc. are not provided in most of the rooms. Paramedical staff and nurses are very few. Most of the specialities are not provided teaching areas.
7. Air conditioning of the Audiometry room is not working. There is no proper sound proofing. Audiometry technician is not available.
8. Most of the wards are not having teaching areas. Side laboratories are not available in most of the wards. Most of the wards are over crowded. Space between the two cots is not adequate. The unit distribution of beds is not clearly marked. Bed side lockers are not provided to many beds. Patients of Psychiatry, TB & Chest & Skin diseases are kept in the same ward. Male and female patients are also kept together which is not as per norms. Most of the wards are not having duty doctor room and duty nurse room. There is no provision of safe drinking water in OPD and Wards.
9. Obst. & Gynae operation theatres do not have any specialized equipment like bed side monitors, pulse oximeters, infusion pump, ventilators, defibrillator etc.
10. The infrastructural facilities in the ICCU are grossly inadequate. There are no medical, surgical, burns in ICU. Ventilator in the ICCU is not available. For entry of dialysis room patients and staff has to cross through the entire ICCU. There is no central oxygen supply and central suction in ICCU. Air condition is not functional in the ICCU.
11. There are no departmental libraries of TB & Chest, Skin & VD and Psychiatry. Number of books in the departmental library of Pediatrics, ENT, Radiodiagnosis and Anaesthesia are inadequate.
12. At present both the labour room are closed for major repair. Except for delivery tables, no other special equipments are available in makeshift labour room.
13. Canteen is not available.
14. There is no provision to supply special diet as recommended by Physician.
15. Para medical staff is grossly inadequate as under:-

Hamidia Hospital Sultania Hospital		
Laboratory Technicians	07	01
Laboratory Assistants	Nil	01
Laboratory Attendants	02	01
16. Nursing staff is inadequate as under:-]

Nursing Superintendent	Nil	01
Deputy Nursing Superintendent	Nil	Nil
Matron	02	Nil
Asstt. Nursing Superintendent	Nil	Nil
Nursing Sister	24	10
Staff Nurses	84	27
17. Residential quarters for teaching and non-teaching staff within the campus are inadequate.
18. In the central library only 36 journals are available against the requirement of 100
19. No training courses for faculty were conducted during this year by medical education unit.
20. Common room for boys is not available. Common room for girls is empty room without any furniture.
21. In the animal house large animals. Guinea pig are not available. Para medical staff is not available in the animal house.

22. In RHTC, Lecturer cum medical officer having MD (PSM) qualification is not available. At present students / interns are not staying in the hostel.
23. In UHC, Lecturer cum medical officer having MD (PSM) qualification is not available.
24. Separate hostels for interns is not available.
25. Dr. V.K. Pandya is incharge medical superintendent of the main teaching hospital which is not as per norms. Full time Medical Superintendent of the main hospital is not available. Dr. Neeraj Bedi who is Associate Professor has been posted as full time medical superintendent of Sultania Hospital. He is not qualified to hold the post as he has no administrative experience.
26. Medical Record department is not computerized. The staff in MRD is not qualified.
27. There is no collection and segregation of hospital waste as per the guidelines of Pollution Control Board.
28. The following deficiencies have been observed in the Pre-clinical department:-
 - a. Anatomy:
 - The capacity of demonstration room is not as per Council norms.
 - There is no cooling cabinet.
 - b. Biochemistry
 - The department does not participate in hospital work.
29. Following deficiencies have been observed in the infrastructure of Para-clinical department:-
 - a. Microbiology
 - it has not its own laboratory and using practical laboratory of Pathology for students.
30. Other deficiencies / remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.S.(Ophthalmology) & DOMS qualifications at Gandhi Medical College, Bhopal granted by Barkatullah University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.S.(Ophthalmology) & DOMS qualifications from the academic session 2008-2009.

41. **Barkatullah University – Permitting intake in M.D. (Anaesthesia) & D.A. courses at Gandhi Medical College, Bhopal.**

Read: The Council Inspector's report (February, 2007) carried out as per decision of the Postgraduate Committee dated 27/12/2006 for purpose of fixing intake in M.D.(Anaesthesia) & D.A. courses at Gandhi Medical College, Bhopal.

The Postgraduate Committee considered the Council Inspector's report (February, 2007) for purpose of fixing intake in M.D.(Anaesthesia) & D.A. courses at Gandhi Medical College, Bhopal and noted the following:-

1. Teaching faculty is deficient by 2 Asstt. Prof.
2. Senior Residents are not available.
3. Annual intake is 4 degree & 9 diploma although against 6 PG teachers.
4. Average daily OPD is 25-30/day. Average daily operative workload is 20-25 major & 5-10 minor which is inadequate.
5. There are 16 OTs but only 11 senior teachers are available. Thus on any day 5 OT would be without any senior teacher which is not as per norms.
6. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies as observed during the inspection carried out on 24th & 25th Nov., 2006 for continuance of recognition of MBBS degree :-

1. The shortage of teaching faculty is as under:-
Faculty 40%
 - (i) Professor : 02 (TB & Chest-1, Microbiology-1)
 - (ii) Associate Professor: 22 (Anatomy -3, Physiology -3, Biochemistry- 1,

Pathology –3,
Microbiology –2, Forensic medicine–1, Medicine –1, TB & Chest-1, Pediatrics –1, Surgery –3, Radiology–1, Anaesthesia –1, Dentistry–1)

(iii) Assistant Professor: 32 (Anatomy -4, Physiology-2 Lecturer in Biophysics– 1, Biochemistry–2, Pathology-2, Microbiology-1, Pharmacology– 3, Pharmacist-1, Forensic Medicine – 1, PSM– 2, lecturer in epidemiology –1, Medicine-1, Psychiatry – 1, Paediatric-2, Surgery-2, Orthopedics-2, ANMO-1, MWO –1, Radiology-1, Anaesthesia –1)

(iv) Tutor: 32 (Anatomy-3, Physiology-5, Biochemistry-1, Pathology-3, Pharmacology-1, Forensic Medicine-2, PSM-3, Radiology –5, Anaesthesia-8, Dentistry-1)

Resident 25.8%

(i) Sr. Resident: 26 (Medicine-6, TB & Chest –1, Dermatology-1, Psychiatry-1, Paediatric-3, surgery-6, Orthopaedic-3, ENT-1, Ophthalmology-1, Obst. & Gynae.-3)

(ii) Jr. Resident: 08 (TB & Chest -2, Dermatology – 3, Psychiatry-3)

9. Bed occupancy is only 70% on the day of inspection, which is inadequate.
10. In the department of Obst. & Gynae. there are 235 teaching beds distributed in 3 units, which is not as per norms.
11. The unit composition in the departments of Pediatrics, Medicine, Skin & VD, Psychiatry & TB & Chest is inadequate as under:-
 - (a) Skin & VD : At present dermatology is under medicine department. There are no senior resident or junior resident. Dermatology department should be separated at from medicine.
 - (b) Psychiatry – Psychiatry Department is having only 1 Professor. No other teaching staff and no senior or junior resident.
 - (c) TB & Chest department is having only 1 assistant professor. No other teaching staff and no senior or junior resident.
12. There is no central registration counter in the OPD. Each speciality is having its own registration counter which is not as per norms.
13. Some of the rooms in OPD are very small in size. There is no privacy for the patients in most of the areas. Facilities like patient couch, stools, x-ray view box, examination tray etc. are not provided in most of the rooms. Paramedical staff and nurses are very few. Most of the specialities are not provided teaching areas.
14. Air conditioning of the Audiometry room is not working. There is no proper sound proofing. Audiometry technician is not available.
15. Most of the wards are not having teaching areas. Side laboratories are not available in most of the wards. Most of the wards are over crowded. Space between the two cots is not adequate. The unit distribution of beds is not clearly marked. Bed side lockers are not provided to many beds. Patients of Psychiatry, TB & Chest & Skin diseases are kept in the same ward. Male and female patients are also kept together which is not as per norms. Most of the wards are not having duty doctor room and duty nurse room. There is no provision of safe drinking water in OPD and Wards.
9. Obst. & Gynae operation theatres do not have any specialized equipment like bed side monitors, pulse oximeters, infusion pump, ventilators, defibrillator etc.
10. The infrastructural facilities in the ICCU are grossly inadequate. There are no medical, surgical, burns in ICU. Ventilator in the ICCU is not available. For entry of dialysis room patients and staff has to cross through the entire ICCU. There is no central oxygen supply and central suction in ICCU. Air condition is not functional in the ICCU.
11. There are no departmental libraries of TB & Chest, Skin & VD and Psychiatry. Number of books in the departmental library of Pediatrics, ENT, Radiodiagnosis and Anaesthesia are inadequate.
12. At present both the labour room are closed for major repair. Except for delivery tables, no other special equipments are available in makeshift labour room.
13. Canteen is not available.
1. There is no provision to supply special diet as recommended by Physician.

2. Para medical staff is grossly inadequate as under:-
- | | Hamidia Hospital | Sultania Hospital |
|------------------------|------------------|-------------------|
| Laboratory Technicians | 07 | 01 |
| Laboratory Assistants | Nil | 01 |
| Laboratory Attendants | 02 | 01 |
3. Nursing staff is inadequate as under:-]
- | | Hamidia Hospital | Sultania Hospital |
|-------------------------------|------------------|-------------------|
| Nursing Superintendent | Nil | 01 |
| Deputy Nursing Superintendent | Nil | Nil |
| Matron | 02 | Nil |
| Asstt. Nursing Superintendent | Nil | Nil |
| Nursing Sister | 24 | 10 |
| Staff Nurses | 84 | 27 |
4. Residential quarters for teaching and non-teaching staff within the campus are inadequate.
5. In the central library only 36 journals are available against the requirement of 100
6. No training courses for faculty were conducted during this year by medical education unit.
7. Common room for boys is not available. Common room for girls is empty room without any furniture.
8. In the animal house large animals. Guinea pig are not available. Para medical staff is not available in the animal house.
9. In RHTC, Lecturer cum medical officer having MD (PSM) qualification is not available. At present students / interns are not staying in the hostel.
10. In UHC, Lecturer cum medical officer having MD (PSM) qualification is not available.
11. Separate hostels for interns is not available.
12. Dr. V.K. Pandya is incharge medical superintendent of the main teaching hospital which is not as per norms. Full time Medical Superintendent of the main hospital is not available. Dr. Neeraj Bedi who is Associate Professor has been posted as full time medical superintendent of Sultania Hospital. He is not qualified to hold the post as he has no administrative experience.
13. Medical Record department is not computerized. The staff in MRD is not qualified.
14. There is no collection and segregation of hospital waste as per the guidelines of Pollution Control Board.
15. The following deficiencies have been observed in the Pre-clinical department:-
1. Anatomy:
 - The capacity of demonstration room is not as per Council norms.
 - There is no cooling cabinet.
 2. Biochemistry
 - The department does not participates in hospital work.
29. Following deficiencies have been observed in the infrastructure of Para-clinical department:-
3. Microbiology
 - it has not its own laboratory and using practical laboratory of Pathology for students.
- 30 Other deficiencies / remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Anaesthesia) & D.A. qualifications at Gandhi Medical College, Bhopal granted by Barkatullah University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(Anaesthesia) & D.A. qualifications from the academic session 2008-2009.

42. Barkatullah University – Permitting intake in M.D. (General Medicine) courses at Gandhi Medical College, Bhopal.

Read: The Council Inspector's report (February, 2007) carried out as per decision of the Postgraduate Committee dated 27/12/2006 for purpose of fixing intake in M.D.(General Medicine) course at Gandhi Medical College, Bhopal.

The Postgraduate Committee considered the Council Inspector's report (February, 2007) for purpose of fixing intake in M.D.(General Medicine) course at Gandhi Medical College, Bhopal and noted the following:-

1. Unit 1 does not have Assoc. Prof. Resultantly, teaching complement is incomplete in Unit I
2. Senior Residents are not available.
3. Annual intake is 14 while against 9 PG teachers.
4. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies as observed during the inspection carried out on 24th & 25th Nov., 2006 for continuance of recognition of MBBS degree :-

1. The shortage of teaching faculty is as under:-
Faculty 40%

(i) Professor : 02 (TB & Chest-1, Microbiology-1)

(ii) Associate Professor: 22 (Anatomy -3, Physiology -3, Biochemistry-1, Pathology -3, Microbiology -2, Forensic medicine-1, Medicine -1, TB & Chest-1, Pediatrics -1, Surgery -3, Radiology-1, Anaesthesia -1, Dentistry-1)

(iii) Assistant Professor: 32 (Anatomy -4, Physiology-2 Lecturer in Biophysics-1, Biochemistry-2, Pathology-2, Microbiology-1, Pharmacology-3, Pharmacist-1, Forensic Medicine -1, PSM-2, lecturer in epidemiology -1, Medicine-1, Psychiatry -1, Paediatric-2, Surgery-2, Orthopedics-2, ANMO-1, MWO -1, Radiology-1, Anaesthesia -1)

(iv) Tutor: 32 (Anatomy-3, Physiology-5, Biochemistry-1, Pathology-3, Pharmacology-1, Forensic Medicine-2, PSM-3, Radiology -5, Anaesthesia-8, Dentistry-1)

Resident 25.8%

(i) Sr. Resident: 26 (Medicine-6, TB & Chest -1, Dermatology-1, Psychiatry-1, Paediatric-3, surgery-6, Orthopaedic-3, ENT-1, Ophthalmology-1, Obst. & Gynae.-3)

(ii) Jr. Resident: 08 (TB & Chest -2, Dermatology -3, Psychiatry-3)

16. Bed occupancy is only 70% on the day of inspection, which is inadequate.
17. In the department of Obst. & Gynae. there are 235 teaching beds distributed in 3 units, which is not as per norms.
18. The unit composition in the departments of Pediatrics, Medicine, Skin & VD, Psychiatry & TB & Chest is inadequate as under:-
 - (a) Skin & VD : At present dermatology is under medicine department. There are no senior resident or junior resident. Dermatology department should be separated at from medicine.
 - (b) Psychiatry – Psychiatry Department is having only 1 Professor. No other teaching staff and no senior or junior resident.
 - (c) TB & Chest department is having only 1 assistant professor. No other teaching staff and no senior or junior resident.

19. There is no central registration counter in the OPD. Each speciality is having its own registration counter which is not as per norms.
20. Some of the rooms in OPD are very small in size. There is no privacy for the patients in most of the areas. Facilities like patient couch, stools, x-ray view box, examination tray etc. are not provided in most of the rooms. Paramedical staff and nurses are very few. Most of the specialities are not provided teaching areas.
21. Air conditioning of the Audiometry room is not working. There is no proper sound proofing. Audiometry technician is not available.
22. Most of the wards are not having teaching areas. Side laboratories are not available in most of the wards. Most of the wards are over crowded. Space between the two cots is not adequate. The unit distribution of beds is not clearly marked. Bed side lockers are not provided to many beds. Patients of Psychiatry, TB & Chest & Skin diseases are kept in the same ward. Male and female patients are also kept together which is not as per norms. Most of the wards are not having duty doctor room and duty nurse room. There is no provision of safe drinking water in OPD and Wards.
9. Obst. & Gynae operation theatres do not have any specialized equipment like bed side monitors, pulse oximeters, infusion pump, ventilators, defibrillator etc.
10. The infrastructural facilities in the ICCU are grossly inadequate. There are no medical, surgical, burns in ICU. Ventilator in the ICCU is not available. For entry of dialysis room patients and staff has to cross through the entire ICCU. There is no central oxygen supply and central suction in ICCU. Air condition is not functional in the ICCU.
11. There are no departmental libraries of TB & Chest, Skin & VD and Psychiatry. Number of books in the departmental library of Pediatrics, ENT, Radiodiagnosis and Anaesthesia are inadequate.
12. At present both the labour room are closed for major repair. Except for delivery tables, no other special equipments are available in makeshift labour room.
13. Canteen is not available.
16. There is no provision to supply special diet as recommended by Physician.
17. Para medical staff is grossly inadequate as under:-

	Hamidia Hospital	Sultania Hospital
Laboratory Technicians	07	01
Laboratory Assistants	Nil	01
Laboratory Attendants	02	01
18. Nursing staff is inadequate as under:-]

Nursing Superintendent	Nil	01
Deputy Nursing Superintendent	Nil	Nil
Matron	02	Nil
Asstt. Nursing Superintendent	Nil	Nil
Nursing Sister	24	10
Staff Nurses	84	27
19. Residential quarters for teaching and non-teaching staff within the campus are inadequate.
20. In the central library only 36 journals are available against the requirement of 100
21. No training courses for faculty were conducted during this year by medical education unit.
22. Common room for boys is not available. Common room for girls is empty room without any furniture.
23. In the animal house large animals. Guinea pig are not available. Para medical staff is not available in the animal house.
24. In RHTC, Lecturer cum medical officer having MD (PSM) qualification is not available. At present students / interns are not staying in the hostel.
25. In UHC, Lecturer cum medical officer having MD (PSM) qualification is not available.
26. Separate hostels for interns is not available.
27. Dr. V.K. Pandya is incharge medical superintendent of the main teaching hospital which is not as per norms. Full time Medical Superintendent of the main hospital is not

- available. Dr. Neeraj Bedi who is Associate Professor has been posted as full time medical superintendent of Sultania Hospital. He is not qualified to hold the post as he has no administrative experience.
28. Medical Record department is not computerized. The staff in MRD is not qualified.
 29. There is no collection and segregation of hospital waste as per the guidelines of Pollution Control Board.
 30. The following deficiencies have been observed in the Pre-clinical department:-
 1. Anatomy:
 - The capacity of demonstration room is not as per Council norms.
 - There is no cooling cabinet.
 2. Biochemistry
 - The department does not participate in hospital work.
 29. Following deficiencies have been observed in the infrastructure of Para-clinical department:-
 3. Microbiology
 - it has not its own laboratory and using practical laboratory of Pathology for students.
 30. Other deficiencies / remarks are in the main report.

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(General Medicine) qualification at Gandhi Medical College, Bhopal granted by Barkatullah University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(General Medicine) qualification from the academic session 2008-2009.

43. Barkatullah University – Permitting intake in M.D.(Physiology) course at Gandhi Medical College, Bhopal.

Read: The Council Inspector's report (February, 2007) carried out as per decision of the Postgraduate Committee dated 27/12/2006 for purpose of fixing intake in M.D.(Physiology) course at Gandhi Medical College, Bhopal.

The Postgraduate Committee considered the Council Inspector's report (February, 2007) for purpose of fixing intake in M.D.(Physiology) course at Gandhi Medical College, Bhopal and noted the following:-

1. Teaching faculty is deficient by 2 Assoc. Prof., 2 Asstt. Prof. & 3 Tutors even for UG.
2. Additional component for PG is not available.
3. Number of laboratory technicians are 3 at present which is inadequate.
4. Some of the very important equipments for undergraduate teaching for example Perimeter, Spirometer, Mossos Ergograph, Microscopes etc. are less in number and some very important equipments like Physiographs 3 channel & single channel are not available.
5. Other deficiencies as pointed out in the inspection report.

The Postgraduate Committee also noted that the following deficiencies were observed during the inspection carried out on 24th & 25th Nov., 2006 for continuance of recognition of MBBS degree :-

1. The shortage of teaching faculty is as under:-
Faculty 40%
 - (i) Professor : 02 (TB & Chest-1, Microbiology-1)
 - (ii) Associate Professor: 22 (Anatomy -3, Physiology -3, Biochemistry- 1, Pathology -3, Microbiology -2, Forensic medicine-1, Medicine -1, TB & Chest-1, Pediatrics -1, Surgery -3, Radiology-1, Anaesthesia -1, Dentistry-1)

(iii) Assistant Professor: 32 (Anatomy -4, Physiology-2 Lecturer in Biophysics- 1, Biochemistry-2, Pathology-2, Microbiology-1, Pharmacology- 3, Pharmachemist-1, Forensic Medicine – 1, PSM- 2, lecturer in epidemiology –1, Medicine-1, Psychiatry – 1, Peadiatric-2, Surgery-2, Orthopedics-2, ANMO-1, MWO –1, Radiology-1, Anaesthesia –1)

(iv) Tutor: 32 (Anatomy-3, Physiology-5, Biochemistry-1, Pathology-3, Pharmacology-1, Forensic Medicine-2, PSM-3, Radiology –5, Anaesthesia-8, Dentistry-1)

Resident 25.8%

(i) Sr. Resident: 26(Medicine-6, TB & Chest –1, Dermatology-1, Psychiatry-1, Peadiatric-3, surgery-6, Orthopaedic-3, ENT-1, Ophthalmology-1, Obst. & Gynae.-3)

(ii) Jr. Resident: 08 (TB & Chest -2, Dermatology – 3, Psychiatry-3)

23. Bed occupancy is only 70% on the day of inspection, which is inadequate.
24. In the department of Obst. & Gynae. there are 235 teaching beds distributed in 3 units, which is not as per norms.
25. The unit composition in the departments of Pediatrics, Medicine, Skin & VD, Psychiatry & TB & Chest is inadequate as under:-
 - (a) Skin & VD : At present dermatology is under medicine department. There are no senior resident or junior resident. Dermatology department should be separated at from medicine.
 - (b) Psychiatry – Psychiatry Department is having only 1 Professor. No other teaching staff and no senior or junior resident.
 - (c) TB & Chest department is having only 1 assistant professor. No other teaching staff and no senior or junior resident.
26. There is no central registration counter in the OPD. Each speciality is having its own registration counter which is not as per norms.
27. Some of the rooms in OPD are very small in size. There is no privacy for the patients in most of the areas. Facilities like patient couch, stools, x-ray view box, examination tray etc. are not provided in most of the rooms. Paramedical staff and nurses are very few. Most of the specialities are not provided teaching areas.
28. Air conditioning of the Audiometry room is not working. There is no proper sound proofing. Audiometry technician is not available.
29. Most of the wards are not having teaching areas. Side laboratories are not available in most of the wards. Most of the wards are over crowded. Space between the two cots is not adequate The unit distribution of beds is not clearly marked. Bed side lockers are not provided to many beds. Patients of Psychiatry, TB & Chest & Skin diseases are kept in the same ward. Male and female patients are also kept together which is not as per norms. Most of the wards are not having duty doctor room and duty nurse room. There is no provision of safe drinking water in OPD and Wards.
9. Obst. & Gynae operation theatres do not have any specialized equipment like bed side monitors, pulse oximeters, infusion pump, ventilators, defibrillator etc.
10. The infrastructural facilities in the ICCU are grossly inadequate. There are no medical, surgical, burns in ICU. Ventilator in the ICCU is not available. For entry of dialysis room patients and staff has to cross through the entire ICCU. There is no central oxygen supply and central suction in ICCU. Air condition is not functional in the ICCU.
11. There are no departmental libraries of TB & Chest, Skin & VD and Psychiatry. Number of books in the departmental library of Pediatrics, ENT, Radiodiagnosis and Anaesthesia are inadequate.
12. At present both the labour room are closed for major repair. Except for delivery tables, no other special equipments are available in makeshift labour room.
13. Canteen is not available.
31. There is no provision to supply special diet as recommended by Physician.

32. Para medical staff is grossly inadequate as under:-

	Hamidia Hospital	Sultania Hospital
Laboratory Technicians	07	01
Laboratory Assistants	Nil	01

	Laboratory Attendants	02	01
33.	Nursing staff is inadequate as under:-]		
	Nursing Superintendent	Nil	01
	Deputy Nursing Superintendent	Nil	Nil
	Matron	02	Nil
	Asstt. Nursing Superintendent	Nil	Nil
	Nursing Sister	24	10
	Staff Nurses	84	27
34.	Residential quarters for teaching and non-teaching staff within the campus are inadequate.		
35.	In the central library only 36 journals are available against the requirement of 100		
36.	No training courses for faculty were conducted during this year by medical education unit.		
37.	Common room for boys is not available. Common room for girls is empty room without any furniture.		
38.	In the animal house large animals. Guninea pig are not available. Para medical staff is not available in the animal house.		
39.	In RHTC, Lecturer cum medical officer having MD (PSM) qualification is not available. At present students / interns are not staying in the hostel.		
40.	In UHC, Lecturer cum medical officer having MD (PSM) qualification is not available.		
41.	Separate hostels for interns is not available.		
42.	Dr. V.K. Pandya is incharge medical superintendent of the main teaching hospital which is not as per norms. Full time Medical Superintendent of the main hospital is not available. Dr. Neeraj Bedi who is Associate Professor has been posted as full time medical superintendent of Sultania Hospital. He is not qualified to hold the post as he has no administrative experience.		
43.	Medical Record department is not computerized. The staff in MRD is not qualified.		
44.	There is no collection and segregation of hospital waste as per the guidelines of Pollution Control Board.		
45.	The following deficiencies have been observed in the Pre-clinical department:-		
	1. Anatomy:		
	- The capacity of demonstration room is not as per Council norms.		
	- There is no cooling cabinet.		
	2. Biochemistry		
	- The department does not participates in hospital work.		
29.	Following deficiencies have been observed in the infrastructure of Para-clinical department:-		
	3. Microbiology		
	- it has not its own laboratory and using practical laboratory of Pathology for students.		
30	Other deficiencies / remarks are in the main report.		

In view of above, the Postgraduate Committee decided to recommend to the Council for withdrawal of recognition of M.D.(Physiology) qualification at Gandhi Medical College, Bhopal granted by Barkatullah University u/s 19 of the IMC Act, 1956.

The Committee further decided to direct the institution authorities to henceforth stop admissions in M.D.(Physiology) qualification from the academic session 2007-2008.

44. **Patna University – Continuation of recognition of M.Ch.(Plastic-Surgery) qualification in respect of student being trained at Patna Medical College, Patna.**

Read: The compliance report together with the Council Inspector report (November,2006) on the standard of examination and other teaching facilities available at Patna Medical College, Patna for purpose of continuance of recognition of M.Ch.(Plastic-Surgery) qualification granted by Patna University.

The Postgraduate Committee considered the compliance report with the additional information and compliance submitted by the Institute vide letter dated 22.1.2007 along with the Council Inspector's report (November, 2006) and observed that Unit-1 has 20 beds and 3 teaching faculty and is complete. Therefore, the Postgraduate Committee after due deliberation decided to recommend that recognition of M.Ch.(Plastic-Surgery) qualification granted by Patna University in respect of student being trained at Patna Medical College, Patna be continued restricting the number of admission to 1 (one) student per year.

45. **Non-teaching Hospital – Recognition of Central Railway Hospital, Kalyan for housemanship.**

Read: The Council Inspector's report (March, 2007) on the physical and other teaching facilities available at Central Railway Hospital, Kalyan for recognition of the hospital for Housemanship.

The Postgraduate Committee considered the Council Inspector's report (March, 2007) and decided to recommend that Central Railway Hospital, Kalyan be recognized for housemanship in the following subjects with a number of house post as indicated against each:-

Medicine	-	2
Obst. & Gynae.-		1

The Postgraduate Committee further decided to recommend not to recognize Central Railway Hospital, Kalyan for housemanship in the subjects of Surgery & Ophthalmology as the infrastructure facilities available in these departments are less than the minimum required as per Regulations.

46. **Change in nomenclature of Postgraduate degree qualification in the subject of Anatomy from M.S. to M.D under Lucknow University/Chhatrapati Shahuji Maharaj University/King George Medical University.**

Read: The letter dated 26/4/2007 of the Registrar, King George Medical University with regard to change in the nomenclature of the Degree from MS(Anatomy) to MD(Anatomy) granted by Lucknow University/Chhatrapati Shahuji Maharaj University/King George Medical University.

The Postgraduate Committee considered the letter dated 26/4/2007 of the Registrar, King George Medical University and noted that MS (Anatomy) qualification granted by Lucknow University/Chhatrapati Shahuji Maharaj University/King George Medical University is already recognized; decided to recommend that MD(Anatomy) qualification granted by the said universities be recognised and included in the 1st schedule to the I.M.C. Act, 1956 being change of nomenclature of the qualification.

47. **Inclusion of DM/PDCC courses in Cardiac Anaesthesia for commencement the course in LPS Instt. of Cadiology, GSVM Medical College, Kanpur.**

Read: The matter with regard to inclusion of DM/PDCC courses in Cardiac Anaesthesia for commencement the course in LPS Instt. of Cadiology, GSVM Medical College, Kanpur as referred by the General Body of the Council at its meeting held on 10/3/2007.

The Postgraduate Committee considered the matter with regard to inclusion of DM/PDCC courses in Cardiac Anaesthesia and observed that A.I.I.M.S., New Delhi & PGIMER, Chandigarh are running in D.M. Cardiac Anaesthesia course and after due deliberation decided that D.M.(Cardiac Anaesthesia) course be included in the schedule of super speciality qualification.

48. **Rajiv Gandhi University of Health Sciences, Bangalore - Approval of JSS Medical College, Mysore for the award of DVD/DDVL qualification.**

Read: The Council Inspector's report (May, 2007) on the standard of examination and other teaching facilities available at JSS Medical College, Mysore for purpose of approval of the college for the award of DVD/DDVL qualification granted by Rajiv Gandhi University of Health Sciences, Bangalore.

The Postgraduate Committee considered the Council Inspector's report (May, 2007) and decided to recommend that JSS Medical College, Mysore be approved for the award of DVD/DDVL qualification granted by Rajiv Gandhi University of Health Sciences, Bangalore restricting the number of admission to 1 (one) student per year.

49. **University of Bombay/Mumbai- Approval of L.T.M. Medical College Mumbai for the award of M.S. (Anatomy) qualification.**

Read: The compliance verification inspection report (March, 2007) together with the Council Inspector's report (Aug. 1999) on the standard of examination and other teaching facilities available at L.T.M. medical college, Mumbai for purpose of approval of the institution for the award of M.S. (Anatomy) qualification granted by University of Bombay/Mumbai.

The Postgraduate Committee considered the compliance verification inspection report (March, 2007) together with the Council Inspector's report (Aug. 1999) and decided not to approve L.T.M. medical college, Mumbai for the award of M.S. (Anatomy) course granted by University of Bombay/Mumbai because of the following:-

1. Teaching faculty is deficient by 1 Asstt. Prof. & 3 Tutors.
2. Additional component for PG is not available.
3. Resultantly teaching faculty is inadequate.
4. Other deficiencies as pointed out in the inspection report.

50. **Tribhuvan University – recognition of M.S.(General Surgery) qualification in respect of Institute of Medicine, Maharaj Gunj, Kathmandu Nepal.**

Read: The letter dated 20/3/2007 received from the Dean, Instt. Of Medicine, Maharaj Gunj, Kathmandu along with the inspection report (June, 2006) for recognition of M.S.(General Surgery) qualification in respect of Institute of Medicine, Maharaj Gunj, Kathmandu Nepal.

The Postgraduate Committee considered the letter dated 20/3/2007 received from the Dean, Instt. Of Medicine, Maharaj Gunj, Kathmandu along with the inspection report (June, 2006) and decided not to recommend recognition of M.S.(General Surgery) qualification in respect of students being trained at Institute of Medicine, Maharaj Gunj, Kathmandu Nepal because of the following:-

1. Deficiencies of teaching faculty & infrastructure remain as they are.
2. Dr.M.P. Khakurel, Professor, Dr.P. Vaidya, Assoc. Prof. in Unit 1 & Dr.Y.P. Singh, Assoc. Prof. in Unit III do not possess PG qualifications as prescribed in the Regulations.
3. Resultantly, teaching faculty is deficient in Unit I & III.
4. Other deficiencies as pointed out in the inspection report.

51. **Admission to D.M. Cardiology superspeciality seat at J.J. Hospital, Mumbai – order passed by the High Court of Judicature at Bombay Ordinary Original Civil Jurisdiction Writ Petition No.144 of 2007.**

Read: The matter with regard to admission to D.M. Cardiology super-speciality seat at J.J. Hospital, Mumbai along with the order passed by the High Court of Judicature at Bombay Ordinary Original Civil Jurisdiction Writ Petition No.144 of 2007.

The Postgraduate Committee considered the matter with regard to admission to D.M. Cardiology super-speciality seat at J.J. Hospital, Mumbai along with the order passed by the High Court of Judicature at Bombay Ordinary Original Civil Jurisdiction Writ Petition No.144 of 2007, while considering the representation of Dr.Kalyan S.Munde has decided as under:-

“The Postgraduate Committee noted that in its meeting held on 18.10.2006 upon consideration of the letter dated 4.10.2006 received from the Director, Medical Education, Mumbai alongwith the order of the Hon'ble High Court of Bombay in Writ Petition (L) No.2296 of 2006 i.e. Dr.Kalyan Munde –vs- State of Maharashtra & Anrs. had decided citing reasons that “students cannot be allocated to the teachers who are suspended from the work and as such the posts of suspended teachers cannot be counted for determining the number of seats for admission to super speciality courses.”

The above decision was communicated to the Director of Medical Education & Research, Govt. of Maharashtra vide MCI letter dated 20.10.2006.

The Committee also noted that the Hon'ble High Court of Judicature at Bombay Ordinary Original Civil Jurisdiction Writ Petition No.144 of 2007 filed by Dr.Kalyan Munde – vs- State of Maharashtra & Ors. on 26.2.2007 have passed the following orders which reads as follows:-

“The learned counsel for the petitioner submits that in view of the peculiar facts and circumstances under which the petitioner was given admission in the D.M. Cardiology at Grant Medical College, Mumbai, the petitioner may be permitted to withdraw the petition and approach the Medical Council of India by way of representation for seeking approval of his admission which was granted provisionally on 30.9.2006 for the academic year 2006-07.

We, therefore, permit the petitioner to withdraw the petition with liberty to approach the Medical Council of India. The Medical Council of India to consider the case of the petitioner for regularization of his admission in view of the changed circumstances i.e. reinstatement of Dr.Bansal who was nominated as guide for the petitioner.

The learned counsel for the petitioner submits that the representation shall be made within a period of one week. On receipt of such a representation the Medical Council of India to take a decision in the matter within a period of two weeks in the back-drop of the facts and circumstances and keeping in mind the interest of the petitioner and the institution as paramount.”

Pursuant to the aforesaid High Court order, the petitioner has submitted his representation on 1.3.2007. The legal opinion was sought from the Retainer Advocate of the Council who opined as under:-

“In my opinion since the suspension of Dr.Bansal has been revoked and he has been reinstated by the Govt. of Maharashtra and as per clause 12(4) of the Postgraduate Medical Education Regulations, 2000, which reads as under:-

“12(4) The number of students to be admitted in case of postgraduate degree (Super-speciality) courses shall be one student per year per recognized postgraduate teacher in a department having a minimum of three faculty members (one Professor, one Assoc. Prof./Reader and one Asstt. Prof./Lecturer) and twenty beds. If the number of Postgraduate teachers in the unit is more than one then the number of students may be increased proportionately but not more than two in a unit per year in any circumstances. For this purpose one student should associate with one postgraduate teacher:

Provided that no postgraduate seats left unfilled in an academic year, shall be carried forward to the next of subsequent academic years, an academic year being from 1st January to 31st December of any calendar year.

The petitioner shall be allowed to continue in the said course i.e. DM(Cardiology) super-speciality seat because he was admitted before the cut-off date as per the MCI schedule for PG courses admission 2006-2007. Before taking any final decision the matter should be placed before the Postgraduate Committee of the Council to decide the representation dated 1.3.2007 submitted by the candidate alongwith the copy of the order dated 26.2.2007 passed in Writ Petition No.144/07 filed by the candidate on priority basis due to changed circumstances since in the present case because the same has to be disposed off within two weeks from the date of his representation i.e. 1.3.2007 as per the direction of the Hon'ble High Court. The final decision has to be taken by the Postgraduate Committee keeping in view its earlier decision which was taken by it in its meeting held on 18.10.2006. It is further submitted that the candidate has to complete his entire classes/course including clinical work related with patient care or any teaching or training activities within the said period i.e. academic session 2006-2007 to get him eligible for appearing in the final Postgraduate examination to be conducted by the said college/university.”

The Committee also noted a communication dated 25.5.2007 received from its Counsel Simran Puri & Associates, Advocates and Legal Consultants to the effect that “in respect of Notice of Motion No.274/2007 in writ petition 144 of 2007 – Dr. Kalyan Munde –vs- State of

Maharashtra & others, the Hon'ble Vacation Court upon consideration of the said application for urgent orders allowed the Postgraduate Committee to consider the Petitioner's case and has extended the time for the same upto 31.5.2007 for compliance of order."

Taking note of the fact that Kalyan Munde was admitted on 30th September, 2006 to DM(Cardiology) course at J.J.M. Hospital, Mumbai in the academic year 2006-2007 and Dr.N.O. Bansal, who is his postgraduate teacher-cum-supervisor was re-instated by the Govt. of Maharashtra on 30th December, 2006, the Committee decided that the admission granted to Dr.Munde for the DM(Cardiology) course may be regularized. However, his academic terms for the DM Super Speciality course be treated to have commenced from 30th December, 2006 i.e. the date of re-instatement of his as supervisor. Further the three years training period required as per Postgraduate Regulations, 2000, which being statutory Regulations are mandatory and binding in character and therefore in the case of Dr.Kalyan S. Munde the same may be computed from the said date i.e. 30.12.2006. As such he will be only considered to be eligible for the university examination for DM (Cardiology) to be conducted in November/December, 2009, subject to his fulfillment of prescribed academic requirements and otherwise being eligible to appear in the said examination."

52. **Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University – Recognition of M.D. (Paediatrics) & DCH qualification in respect students being trained at B.R.D. Medical College, Gorakhpur.**

Read: The compliance verification report (April, 2007) together with the Council Inspector's report (May, 2006) on the standard of examination and other teaching facilities available at B.R.D. Medical College, Gorakhpur for purpose of recognition of M.D. (Paediatrics) & DCH qualifications granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University.

The Postgraduate Committee considered the compliance verification report (April, 2007) together with the Council Inspector's report (May, 2006) and decided to recommend that M.D. (Paediatrics) & DCH qualifications granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University in respect of students being trained at B.R.D. Medical College, Gorakhpur be recognized and included in the 1st Schedule to the I.M.C. Act, 1956.

The Committee further decided to direct the institution authorities prospectively to restrict the number of admission to 1 (one) student in each course per year.

53. **Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University – Recognition of M.S. (General Surgery) qualification in respect students being trained at B.R.D. Medical College, Gorakhpur.**

Read: The compliance verification report (April, 2007) together with the Council Inspector's report (May, 2006) on the standard of examination and other teaching facilities available at B.R.D. Medical College, Gorakhpur for purpose of recognition of M.S. (General Surgery) qualification granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University.

The Postgraduate Committee considered the compliance verification report (April, 2007) together with the Council Inspector's report (May, 2006) and decided to recommend that M.S. (General Surgery) qualification granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University in respect of students being trained at B.R.D. Medical College, Gorakhpur be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 restricting the number of admissions to 3 (three) students per year.

54. **Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University – Recognition of M.D./M.S. (Obst. & Gynae) & DGO qualification in respect students being trained at B.R.D. Medical College, Gorakhpur.**

Read: The compliance verification report (March, 2007) together with the Council Inspector report (May, 2006) on the standard of examination and other teaching facilities available at B.R.D. Medical College, Gorakhpur for purpose of recognition of M.D./M.S. (Obst. & Gynae.) & DGO qualifications granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University.

The Postgraduate Committee considered the compliance verification report (March, 2007) together with the Council Inspector's report (May, 2006) and decided to recommend that M.D./M.S. (Obst. & Gynae.) & DGO qualifications granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University in respect of students being trained at B.R.D. Medical College, Gorakhpur be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 restricting the number of admissions to 3 (three) students in MD/MS (Obst.& Gynae.) & 2 (two) students in DGO courses per year prospectively.

55. **Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University – Recognition of M.D. (Dermatology, Venereology & Leprosy/Skin & VD) & DVD qualifications in respect students being trained at B.R.D. Medical College, Gorakhpur.**

Read: The compliance verification report (April, 2007) together with the Council Inspector's report (May, 2006) on the standard of examination and other teaching facilities available at B.R.D. Medical College, Gorakhpur for purpose of recognition of M.D. (Dermatology, Venereology & Leprosy/Skin & VD) & DVD qualifications granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University.

The Postgraduate Committee considered the compliance verification report (April, 2007) together with the Council Inspector's report (May, 2006) and decided to recommend that M.D. (Dermatology, Venereology & Leprosy/Skin & VD) & DVD qualifications granted by Deen Dayal Upadhyaya Gorakhpur University/ Gorakhpur University in respect of students being trained at B.R.D. Medical College, Gorakhpur be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 restricting the number of admissions to 2 (two) students in M.D. (Dermatology, Venereology & Leprosy/Skin & VD) & 1 (one) student in DVD courses per year prospectively.

56. **Marathwada University/Dr.Babasaheb Ambedkar Marathwada University – Approval of S.R.T.R. Medical College, Ambajogai for the award of M.S. (Ophthalmology) & D.O./D.O.M.S. qualifications.**

Read: The compliance verification report (March, 2007) together with the Council Inspector's report (September, 2003) on the standard of examination and other teaching facilities available at S.R.T.R. Medical College, Ambajogai for purpose of approval of the college for the award of M.S.(Ophthalmology) & D.O./D.O.M.S. qualifications earlier granted by Marathwada University and now by Dr.Babasaheb Ambedkar Marathwada University.

The Postgraduate Committee considered the compliance verification report (March, 2007) together with the Council Inspector's report (September, 2003) and decided to recommend that S.R.T.R. Medical College, Ambajogai be approved for the award of M.S.(Ophthalmology) & D.O./D.O.M.S. qualifications earlier granted by Marathwada University and now by Dr.Babasaheb Ambedkar Marathwada University restricting the number of admission to 1 (one) student in each course per year.

57. **Marathwada University/Dr. Babasaheb Ambedkar Marathwada University – Approval of SRTR Medical College, Ambajogai for the award of MS (General Surgery) qualification.**

Read: The compliance verification report (March, 2007) together with the Council Inspector's report (August, 2003) on the standard of examination and other teaching facilities available at SRTR Medical College, Ambajogai for purpose of approval of the college for the award of MS (General Surgery) qualification earlier granted by Marathwada University and now by Dr.Babasaheb Ambedkar Marathwada University.

The Postgraduate Committee considered the compliance verification report (March, 2007) together with the Council Inspector's report (August, 2003) and decided to recommend that SRTR Medical College, Ambajogai be approved for the award of MS (General Surgery) qualification earlier granted by Marathwada University and now by Dr.Babasaheb Ambedkar Marathwada University.

The Committee further decided to direct the institution authorities to restrict the number of admissions to 2 (two) students per year prospectively.

58. **West Bengal University of Health Sciences, Kolkata – Recognition of M.D.(Anatomy) qualification in respect of students being trained at North Bengal Medical College, Darjeeling.**

Read: The Council Inspector's report (April, 2007) on the standard of examination and other teaching facilities available at North Bengal Medical College, Darjeeling for purpose of recognition of M.D.(Anatomy) qualification granted by West Bengal University of Health Sciences, Kolkata.

The Postgraduate Committee considered the Council Inspector's report (April, 2007) 58 and decided to recommend that M.D. ((Anatomy) qualification granted by West Bengal University of Health Sciences, Kolkata in respect of students being trained at North Bengal Medical College, Darjeeling be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 restricting the number of admissions to 3 (three) students per year.

59. **West Bengal University of Health Sciences, Kolkata – Approval of R.G. Kar Medical College, Kolkata for the award of M.D(Paediatrics) qualification.**

Read: The Council Inspector's report (April, 2007) on the standard of examination and other teaching facilities available at R.G. Kar Medical College, Kolkata for purpose of approval of the college for the award of M.D.(Paediatrics) qualification granted by West Bengal University of Health Sciences, Kolkata.

The Postgraduate Committee considered the Council Inspector's report (April, 2007) and decided to recommend that R.G. Kar Medical College, Kolkata be approved for the award of M.D.(Paediatrics) qualification granted by West Bengal University of Health Sciences, Kolkata restricting the number of admissions to 2(two) students per year.

60. **The Tamilnadu Dr. M.G.R. Medical University, Chennai – Approval of Stanley Medical College, Chennai for the award of M.S(ENT) qualification.**

Read: The Council Inspector's report (March, 2007) on the standard of examination and other teaching facilities available at Stanley Medical College, Chennai for purpose of approval of the college for the award of M.S.(ENT) qualification granted by The Tamilnadu Dr. M.G.R. Medical University, Chennai.

The Postgraduate Committee considered the Council Inspector's report (March, 2007) and decided to recommend that Stanley Medical College, Chennai be approved for the award of M.S.(ENT) qualification granted by The Tamilnadu Dr. M.G.R. Medical University, Chennai restricting the number of admissions to 2(two) students per year.

The attention of the authorities concerned be drawn towards the implementation of observations made by the Council Inspector in his inspection report.

61. **Kashmir University–Recognition of M.D.(Pathology) qualification in respect of students being trained at Govt. Medical College, Srinagar.**

Read: The Council Inspector's report (March, 2007) on the standard of examination and other teaching facilities available at Govt. Medical College, Srinagar togetherwith compliance for purpose of recognition of M.D.(Pathology) qualification granted by Kashmir University.

The Postgraduate Committee considered the Council Inspector's report (March, 2007) and decided not to recommend recognition of MD(Pathology) qualification granted by Kashmir University because of the following:-

1. Staff is deficient by 1 Asstt. Prof. even for undergraduate studies.
2. Additional component for postgraduate is not available.
3. Other deficiencies as pointed out in the inspection report.

62. **Sri Venkateswara Institute of Medical Sciences, (Deemed University) Tirupati – Recognition of M.Ch. (Urology/Genito-Urinary-Surgery) qualification in respect students being trained at Sri Venkateswara Institute of Medical Sciences, Tirupati.**

Read: The compliance verification report (February, 2007) together with the Council Inspector's report (March, 2006) on the standard of examination and other teaching facilities available at Sri Venkateswara Institute of Medical Sciences, Tirupati for purpose of recognition of M.Ch. (Urology/Genito-Urinary-Surgery) qualification granted by Sri Venkateswara Institute of Medical Sciences (Deemed University), Tirupati.

The Postgraduate Committee considered the compliance verification report (February, 2007) together with the Council Inspector's report (March, 2006) and decided to recommend recognition of Sri Venkateswara Institute of Medical Sciences (Deemed University), Tirupati for the award of M.Ch. (Urology/Genito-Urinary-Surgery) qualification in respect of students being trained at Sri Venkateswara Institute of Medical Sciences, Tirupati be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 restricting the number of admissions to 2 (two) students per year against Unit-I.

63. **Mahatma Gandhi University–Recognition of D.M.(Neurology) qualification in respect of students being trained at Medical College, Kottayam.**

Read: The Council Inspector's report (March, 2007) on the standard of examination and other teaching facilities available at Medical College, Kottayam for purpose of recognition of D.M. (Neurology) qualification granted by Mahatma Gandhi University.

The Postgraduate Committee considered the Council Inspector's report (March, 2007) and decided to recommend recognition of D.M. (Neurology) qualification granted by Mahatma Gandhi University in respect of students being trained at Medical College, Kottayam be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 restricting the number of admission to 1(one) student per year.

64. **Mahatma Gandhi University, – Recognition of M.D(T.B & Respiratory Disease) qualification in respect of students being trained at Medical College, Kottayam.**

Read: The compliance verification report (March, 2007) together with the Council Inspector's report (December 2006) on the standard of examination and other teaching facilities available at Medical College, Kottayam for purpose of recognition of M.D(T.B & Respiratory Disease) qualification granted by Mahatma Gandhi University.

The Postgraduate Committee considered the compliance verification report (March, 2007) and decided to recommend that M.D(T.B & Respiratory Disease) qualification granted by Mahatma Gandhi University in respect of students being trained at Medical College, Kottayam be recognized and included in the 1st Schedule to the I.M.C. Act, 1956 restricting the number of admissions to 2(two) students per year.

65. **Patna University – Recognition of M.D(Community Medicine/PSM) qualification in respect of students being trained at Patna Medical College, Patna.**

Read: The Council Inspector's report (March, 2007) on the standard of examination and other teaching facilities available at Patna Medical College, Patna for purpose of recognition of M.D.(Community Medicine/PSM) qualification granted by Patna University, Patna.

The Postgraduate Committee considered the Council Inspector's report (March, 2007) and decided not to recommend recognition of M.D.(Community Medicine/PSM) qualification granted by Patna University, Patna because of the following:-

1. Dr.Shashi Sinha, Prof. & HOD does not possess requisite recognized postgraduate qualification. Hence teaching component is incomplete.
2. Other deficiencies as pointed out in the inspection report.

66. **The Tamilnadu Dr. MGR Medical University, Chennai – Approval of Arvind Eye Hospital Madurai for the award of M.S.(Ophthalmology) qualification in respect of increased intake.**

Read: The Council Inspector's report (March, 2007) on the standard of examination and other teaching facilities available at Arvind Eye Hospital Madurai for purpose of approval of the college for the award of M.S.(Ophthalmology) qualification granted by The Tamilnadu Dr. M.G.R. Medical University, Chennai against the increased intake.

The Postgraduate Committee considered the Council Inspector's report (March, 2007) and noted that M.S.(Ophthalmology) qualification is already recognized and included in the 1st schedule to the I.M.C. Act, 1956 and now the matter is for approval of the college against increased of seats from 4 (four) to 6 (six); decided to recommend that Arvind Eye Hospital Madurai be approved for the award of M.S.(Ophthalmology) qualification granted by The Tamilnadu Dr. M.G.R. Medical University, Chennai restricting the number of admissions to 6(six) students per year prospectively against the increased intake.

67. **Request for ex post facto recognition of postgraduate (MD/MS) degrees being hitherto granted by Panjab University for students admitted in and trained at the Post Graduate Institute of Medical Education and Research (PGIMER), Chandigarh.**

Read: The report of the Sub-Committee dated 27/4/2007 with regard to grant of ex post facto recognition of postgraduate (MD/MS) degrees being hitherto granted by Panjab University for students admitted in and trained at the Post Graduate Institute of Medical Education and Research (PGIMER), Chandigarh.

The Postgraduate Committee accepted the following report of the Sub-Committee:-

The present Sub-Committee constituted by the Postgraduate Medical Education Committee of MCI met in the Council office on 27.4.2007 at 11.30 a.m. with the following members:-

1. Dr.Indrajit Ray
2. Dr.Surendra Kumar Sinha

The Sub-Committee at its meeting considered its previous report dated 30.8.2006, Agenda item No.46 of the Postgraduate Committee meeting dated 18.10.2006 and also the letter No.10471, dated 13.6.2006 of PGIMER, Chandigarh addressed to the President (Acting), MCI.

The President (Acting) constituted a Sub-Committee as per decision of the Executive Committee of the Council in its meeting held on 28.7.2003 comprising of Dr.K.S. Chugh, Dr.D.K. Sharma and Dr.Ved Prakash Mishra.

The said Sub-Committee submitted its report referring to various facts and facets including a copy of the Hon'ble Punjab & Haryana High Court judgement enclosed by the applicant and concluded that MS(Anaesthesia) qualification conferred to Maj.Gen. Virender Singh by the Punjab University in terms of his teaching and training at PGIMER, Chandigarh was a recognized degree in terms of its inclusion in the schedule and referring to the order by the Hon'ble Punjab & Haryana High Court.

It may not be out of context to mention here that the said Sub-Committee also records the fact that "MCI had sent a Visitation Committee comprising of Late Dr.Bhaskar Ray Choudhary, and Dr.K.S. Chugh to PGIMER, Chandigarh for an informal visit for the facilities available at the institute and opined that the facilities in the PGI were excellent and a report had been submitted to the MCI."

The present Sub-Committee in its meeting considered the communication from the Director, PGIMER, Chandigarh wherein he has requested for ex post facto

recognition of Postgraduate (MD/MS) degrees being hitherto granted by Punjab University for students admitted in and trained at the PGIMER, Chandigarh.

In the aforesaid letter, the Director, PGIMER has mentioned that :-

1. PGIMER, Chandigarh after becoming an Institute of National Importance by an Act of Parliament had been accepting a few candidates for registration to MD/MS courses of the Punjab University against the surplus training capacity available in the department concerned in addition to the number of resident postgraduates sanctioned for each of the teaching departments. The Punjab University had been registering these aforementioned candidates at PGI, Chandigarh and granting degrees to them after they passed the examinations conducted by the Punjab University. The examinations used to be conducted at PGI Chandigarh by the examiners appointed by the Punjab University.
2. This arrangement was in consonance with Section 29 of the PGI Act under which the PGIMER was obliged "to continue to provide facilities to the Governments of Haryana and Punjab."
3. PGIMER, Chandigarh started holding its examinations and granting its own degrees w.e.f. June, 1969. Prior to this date, all degrees were being awarded by Punjab University.
4. Govt. of India was informed by the PGIMER in 1969 that the institute had not disaffiliated from the Punjab University.
5. The Governing Body of PGIMER at its meeting held on 16.4.1979 decided to maintain the status quo regarding affiliation of PGIMER with Punjab University.
6. PGIMER had stopped enrolling of Punjab University students for MD/MS courses since 1994.

It may not be out of context to mention here the provisions of Sections 23 & 24 of PGIMER, 1966 and the same are reproduced as under:-

"23. Grant of medical degrees, diplomas, etc. by Institute – Notwithstanding anything contained in any other law for the time being in force, the institute shall have power to grant medical degrees, diplomas and other academic distinctions and titles under this Act.

24. Recognition of medical qualifications granted by Institute – Notwithstanding anything contained in the Indian Medical Council Act, 1956, the medical degrees & diplomas granted by the Institute under this Act shall be recognized medical qualifications for the purposes of that Act and shall be deemed to be included in the First Schedule to that Act"

The Sub-Committee also noted the legal opinion of the Council Advocate on the subject of Report of the Sub-Committee regarding the eligibility of Maj. Gen. Virender Singh for the post of Director of Pt. B.D. Sharma PGIMS, Rohtak, which states that "there does not appear to be any area on which the Council may not agree with the unanimous conclusion of the Sub-Committee."

The Sub-Committee considered all the aforementioned points and all other relevant documents including the legal opinion and was of the opinion that the prayer of Dr. Surjit Singh MD(Pediatric) for considering his qualification as a recognized one may be granted on the basis of principle of equity.

The Sub-Committee was of further opinion that considering this matter in a piecemeal way will not solve this issue permanently and there is every possibility that some other prayer or appeal will come regarding this issue and hence decided to recommend to the Postgraduate Committee that the postgraduate degrees (MD/MS) granted by Punjab university for students admitted in and trained at PGIMER, Chandigarh, who has been admitted prior to 1994 may be considered as a recognized degree on a similar footing.

The following postgraduate degrees granted by Punjab University and trained at PGIMER, Chandigarh are being recommended for recognition by the Sub-Committee:-

MD degree: Anaesthesia, Biochemistry, Dermatology, Gen.Medicine, Microbiology, Obst. & Gynae., Peadiatric, Psychiatry, Pathology, Pharmacology, Radio-Diagnosis & Radio-therapy.

MS degree: Gen.Surgery, Orthopaedics, Ophthalmology and ENT.”

(Lt. Col. (Retd.) Dr.ARN Setalvad)
Secretary.

*New Delhi, dated the
25th May, 2007.*

A P P R O V E D

(DR. VED PRAKASH MISHRA)
CHAIRMAN

