

No.MCI-5(3)/2002-Med./

MEDICAL COUNCIL OF INDIA

EXECUTIVE COMMITTEE

Minutes of the meeting of the Executive Committee held on Thursday, the 9th January 2003 at 11.00 am in the Council office, Aiwan-E-Galib Marg, Kotla Road, New Delhi-110 002 which was also attended by the members of the Adhoc Committee as appointed by the Hon'ble Supreme Court vide its order dated 20.11.2002.

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Present:

Dr. P.C.Kesavankutty Nayar	-	President (Acting)
Prof. N. Rangabashyam	]	Members
Prof. P.N.Tandon	]	Adhoc Committee
Dr. S.K. Bhansali	]	
Dr. (Mrs.) S. Kantha	]	
Dr. K.S. Chugh		
Dr. D.K. Sharma		
Dr. Nitin S. Vora		
Dr. F.U. Ahmed		
Dr. P.M. Jadhav		
Dr. Ajay Kumar		
Dr. V.K. Puri		
Dr. B.P. Dubey		
Dr. M.K. Sharma		
Dr. Ved Prakash Mishra	-Chairman, PG Committee	Special Invitee

Dr. (Mrs.) M. Sachdeva - Secretary

At the outset Dr. P.C. Kesvankutty Nayar, President(Acting) gave a brief resume about the Public interest litigation filed by one Dr. Harish Bhalla challenging the election and membership of Dr. Ketan Desai, as President of the MCI and informed as under:-

- 23rd of Nov., 2001, the Hon'ble Delhi High Court passed an order appointing Administrator in place of the President, MCI.
- 26th Nov., 2001, Administrator took over.
- MCI preferred special leave petition before the Hon'ble Supreme Court against the order of the Hon'ble Delhi High Court of 23-11-2001.
- Hon'ble Supreme Court by an order dated 20th of April, 2002 directed the Administrator to hold the General Body meeting of the Council for deciding the pending matters which accordingly was held on 30th April/1st May, 2002.
- By another interim order dated 15th July, Hon'ble Supreme Court directed the Administrator to hold the meeting of the General Body for electing members of the Executive Committee and also to elect 3 members of the PG Committee from amongst members of the Council.
- Accordingly the present Executive Committee is elected by the General Body in terms of the orders passed by the Hon'ble Supreme Court.
- By another interim order dated 20th Nov. 2002 the Hon'ble Supreme Court replaced the Administrator, desired the Vice-President to be an (Acting) President and constituted the present Adhoc-Committee.
- The 1st meeting of the Adhoc Committee was held on 11th Dec., 2002 wherein the Committee along with Acting President, Chairman of PG Committee and two Executive Committee Members, described the functioning of the various Committees including the Inspecting Committee. It was decided to have the next meeting of the Adhoc Committee with the Executive Committee.

- Accordingly, the present meeting is a consequential follow up of the aforesaid decision whereby we look forward to advise, counsel, guidance and cooperation of the Adhoc Committee appointed by the Hon'ble Supreme Court so as to avail their experience, seniority and creativity at their disposal in managing the affairs of the MCI for the purpose of its enhancement of the credibility of the MCI.

Dr. Nayar then invited the Adhoc Committee members to say a few words before taking up the agenda.

Dr. P.N. Tandon informed that the 4 members of the Adhoc-Committee are still not clear about the precise role they are expected to play to help in the affairs of the Council and removing the impression from the minds of the general public about its functioning. The order of the Hon'ble Supreme Court does not tell the precise function of the Adhoc Committee and also about the duration for which they are expected to assume the responsibility. As seen from the Hon'ble Supreme Court order the Adhoc Committee would work harmoniously and in full co-operation with the Executive Committee of the Council. The Committee would associate itself particularly in selection and appointment of Inspectors and scrutinize their reports and making recommendations for grant of recognition to medical colleges.

The members of the Adhoc Committee felt that they have been adequately briefed by Dr. Nayar, President (Acting) and Dr. (Mrs.) M. Sachdeva, Secretary regarding the genesis of the court order and over all functioning of the Council. They also considered it a privilege that the Hon'ble Supreme Court reposed such confidence in them and they are deeply conscious of the onerous responsibility assigned to them. The Adhoc Committee observed that there is a huge task of carrying out inspections on behalf of the MCI by its various inspectors, hence, they suggested that appointed of five zonal inspectors can be considered to take up the task of carrying out inspections. However, these zonal inspectors may not be involved for carrying out inspections pertaining to the medical colleges of their own zones. It was also informed that in the 9th Plan the Planning Commission had decided that there is no need for any more medical colleges in the country. However, if opening of medical colleges is considered, it has to be in the States which are in need of medical colleges.

1. **Minutes of the Executive Committee meetings held on 17/10/2002 & 31/10/2002 – Confirmation of.**

The minutes of the meetings of the Executive Committee held on 17/10/2002 & 31/10/2002 were confirmed.

2. **Minutes of the last meetings of the Executive Committee – Action taken thereon.**

The Executive Committee noted the action taken by the office on various items included in the agenda of the meeting held on 17/10/2002 & 31.10.2002 with the following modifications:-

17.10.2002

1. On page No. 2 paragraph 9 reading as “The Executive Committee in response.....finances paid be withdrawn, it is reported that Administrator was relieved from the office as per directions of the Hon'ble Supreme Court order dated 20.11.2002. He had not submitted any report of his visits.

The Executive Committee decided that in compliance of the decision taken by the Committee a letter be sent to the Administrator requesting him to submit the report of his visits.

2. On page No. 3 last para reading as “While discussing the action taken, matter regarding non-receipt of the letter of Dr. Amitabh Verma dated 27.9.2002.....PS is still on leave.

On page No. 4 para 1 & 2 reading as “After much deliberation.....inquired into by this Committee”, it is recorded that a letter was sent to Dr. D.K. Sharma with copy to Dr.K.K. Arora, Joint Secretary on 12.12.2002 requesting to investigate the matter and submit their report.

Further development of the case was informed to the Executive Committee, hence, the action taken be read corrected as under:-

The Inquiry Committee met on 27.12.2002 and took the statements of concerned employees regarding the non-receipt of letter dated 27.9.2002 of Dr. Amitabh Verma. Regarding fixation of the responsibility, it was informed that the Inquiry Committee will submit their report in the next meeting.

3. On page No. 5, item No. 9 “W.P.No.15876/2002 filed by Prathima Educational Society Vs. Union of India and Medical Council of India”,

On page No. 13, item No. 62 “W.P.No.19320/2002 filed by PES Institute of Medical Sciences Vs. Govt. of India, Health & F.W. Deptt. and another”.

While discussion about the action taken under these items it was informed that these items are included in the agenda of today’s meeting, hence, the action taken be tagged with the items included in the agenda.

31/10/2002.

1. On page No. 2 item No. 8 “Sikkim Manipal Instt. of Medical Sciences, Gangtok – Renewal of permission for admission of 2nd batch of students”.

While discussion about the action taken under this item it was informed that this item is included in the agenda of today’s meeting, hence, the action taken be tagged with the item included in the agenda.

2. On page No. 8 item No. 19 “To consider fax letter No. NAAC/DO/MCI/2002 dated 5th September, 2002 from Prof. V.N. Rajasekharan Pillai, Director, National Assessment and Accreditation Council, Bangalore”.

In the minutes recorded under this item para 2, 6th line the word “of” be deleted.

3. On page No. 26, item No. 54 “Establishment of medical college at Dichpalli by Church of South India Trust, Association of Medak Diocesan Education Society u/s 10A of the I.M.C. Act,1956”. The action taken in this item be read corrected as under:-

“Decision of the Executive Committee was communicated to the Central Govt. on 5.11.2002.”

3. **Khaja Banda Nawaz Instt. of Medical Sciences, Gulbarga – Renewal of permission for admission of 3rd batch of students.**

Read : The compliance verification inspection report (8th & 9th Nov., 2002) for renewal of permission for admission of 3rd batch of students at Khaja Banda Nawaz Instt. of Medical Sciences, Gulbarga.

The Executive Committee considered the compliance verification inspection report (8th & 9th Nov.,2002) along with the court order dated 03.12.2002 wherein it is stated that the Central Govt. on consideration of the recommendations of the Medical Council of India would grant the renewal of permission if the petitioner institution

satisfies all the legal requirements within seven days from the date of receipt of such recommendations.

On going through the verification inspection report 8th & 9th Nov.,2002, the Executive Committee noted the following:-

1. The Blood bank is still not functional which deficiency was pointed out earlier also in the inspection report dated 22nd & 23rd August,2002.
2. As per regulations of the Council there should be a Resident doctors hostel where the resident doctors should be staying. From the report it is noted that the resident doctors are not staying in the hostel and the statement of the authorities that all the resident doctors belong to Gulbarga proper, hence, do not stay in resident doctors hostel is not acceptable.
3. Kitchen facilities are not adequate as a small kitchen has been recently started in the hospital which can cater to the needs of only 50 patients.
4. No fuel operated electric incinerator has been provided as required.
5. Shortage of staff:

Professor – 2: (Anatomy – 1, Biochemistry –1)

Associate Professors – 3 : (Anatomy-1, Physiology-1, Medicine-1)

Assistant Professor – 5 : (Pharmacology-1, Physiology-1, PSM –1, Lecturer in Statistics-1, Lecturer in Epidemiology-1.

Tutor – 3: (Biochemistry –1, Pathology-1, PSM-1)

Total – 13 (more than 5%)

6. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Committee decided to recommend to the Central Govt. not to renew the permission for admission of 3rd batch of students at Khaja Banda Nawaz Instt. of Medical Sciences, Gulbarga for the academic session 2002-03.

4. **Baseveshwara Medical College & Hospital, Chitradurga – Renwal of permission for admission of 2nd batch of students**

Read : The compliance verification inspection report (24th Dec., 2002) for renewal of permission for admission of 2nd batch of students at Baseveshwara Medical College & Hospital, Chitradurga.

The Executive Committee considered the compliance verification inspection report (24th Dec.,2002) along with the court order dated 03.12.2002 in W.P. No. 42277/2002 Murugarajendra Vidyapeetha, Chitradurga Vs. UOI & Ors. passed by the Hon'ble Karnataka High Court and noted the following:-

1. As seen from the inspection report the 350 bedded teaching hospital located at a distance of 2 kms. from the college campus is now reported to be having a title of "Basaveshwara Hospital & Research Centre Private Limited" which shows that the hospital is a private limited company. This information was not provided earlier either in the project report or during the previous inspection which amounts to concealing the facts and misinforming the Council.
2. Though the State Govt. has permitted the college to utilize clinical facilities at District Hospital which is having 426 functional beds out of which 30 beds each in Medicine, Surgery and Obst. & Gynae. i.e. total 90 beds have been allocated to the college but there are no case sheets in the name of medical college. The teachers from the medical college are not attending OPDs. or are not treating the patients in the wards or performing any operations at this hospital. The circulars for the posting of staff and the students were issued by the college only

on 21.12.2002 while the detailed posting order for one Assistant Professor each in the departments of Medicine, Surgery and Obst. & Gynae. for a rational period of one month was issued on 24.12.2002 when the inspection of the college was carried out. This arrangement at present has sanctioned for one year only.

3. Clinical Material: Average bed occupancy as claimed by the institution is 89.76%. However, on the day prior to the inspection i.e. 23.12.2002 it was 235/350 beds – 67.14% as per ward census.

The case sheets of many patients admitted in the hospital did not show any details like the unit, indoor admission number, date of admission, outdoor linkage, bed number, clinical notes, treatment given etc. Many of the patients did not require admission. Records of the most of the indoor patients were incomplete. Work load of major clinical departments is too less. Casualty register showed nil attendance on many days and/or only 1-2 attendance on other days.

The work output of service departments like Pathology, Biochemistry, Microbiology, Radio-diagnosis and Pharmacy as verified from the registers maintained by the respective departments did not corroborate the outdoor/indoor attendance as claimed and in certain aspects showed deterioration over the previous report.

The major departments of Medicine, Surgery, Paediatrics and Obst.&Gynae.have two examination rooms and one teaching room in the OPD. The other departments have one examination room in the OPD. The extension to the OPD which was to be completed in the year 2001 has not yet been completed.

4. No wardrobes have been provided in any of the hostel rooms (only 1 rack is provided).
5. Construction of residential quarters has not taken place as per the time bound programme.
6. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Committee decided to recommend to the Central Govt. not to renew the permission for admission of 2nd batch of students at Baseveshwara Medical College & Hospital, Chitradurga for the academic session 2002-03.

5. **Mahatma Gandhi Medical College & Research Instt. Pondicherry - renewal of permission for admission of 2nd batch of students.**

Read : The inspection report (10th & 11th Dec., 2002) for renewal of permission for admission of 2nd batch of students at Mahatma Gandhi Medical College & Research Instt., Pondicherry.

The Executive Committee considered the Council Inspectors report (10th & 11th Dec.,2002) and decided to recommend to the Central Govt. to renew the permission for admission of 2nd batch of 100 (hundred) students at Mahatma Gandhi Medical College & Research Instt., Pondicherry for the academic session 2002-03.

6. **MNR Medical College at Sangareddy Distt., Medak - renewal of permission for admission of 2nd batch of students during the academic session 2002-2003.**

Read : The inspection report (11th & 12th Dec., 2002) for renewal of permission for admission of 2nd batch of students at MNR Medical College, Medak.

The Executive Committee considered the Council Inspectors report (11th & 12th Dec.,2002) and noted the following:-

1. Work load of lab investigations in Histopathology, Cytopathology & Microbiology labs needs to be increased.

2. Audiometry room is still not air-conditioned.
3. The accommodation for senior/junior residents and nurses need to be provided with cots, wardrobes, tables and chairs.
4. There is a need to keep more benches and chairs in the various waiting areas in the outpatient departments and near the registration counter. Internal telephone extensions also need to be provided in all the wards and all the clinical departments.
5. The toilet and bathroom facilities are inadequate in entire hospital for the patients.
6. There is a need to add more qualified staff nurses as per the Indian Nursing Council norms.
7. There is a need to add the following equipments:

ECHO, TREAD MILL, Pulmonary function tests equipment for Medicine department.
ENDOSCOPE and LAPROSCOPE for Surgery and Obst. & Gynae. department.
Paediatric ventilator, defibrillator, bedside monitor etc. for neonatal intensive care unit.
8. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Committee decided to recommend to the Central Govt. not to renew the permission for admission of 2nd batch of students at MNR Medical College, Sangareddy for the academic session 2002-03.”

Note: The Executive Committee noted that the Central Govt. vide its letter dated 1.3.2002 had issued LOI for establishment of MNR Medical College, Sangareddy with an annual intake of 100 students with prospective effect and subsequently vide letter dated 19.3.2002 had issued Letter of Permission for establishment of the college with prospective effect from the academic year 2001-2002. The Committee decided to write a letter to the Central Govt. that in future they should specify the academic session for which the Letter of Intent was issued.

7. **Govt. Medical College, Anantapur - renewal of permission for admission of 3rd batch of students.**

Read : The inspection report (2nd & 3rd Jan., 2003) for renewal of permission for admission of 3rd batch of students at Govt. Medical College, Anantapur.

The Executive Committee on perusal of the compliance verification inspection report (2nd & 3rd Jan., 2003) of Govt. Medical College, Anantapur, noted that the college has already admitted students against the academic session 2002-03 (3rd batch) without getting the permission renewed by the Central Govt. as under:-

- (a) 99 students including 14 NRI students against the session 2002-03.
 - (b) 14 NRI students of the batch of 2000-01 against this session
- (Total 113 students)

Thus the college has not only admitted students against the said session without getting the permission renewed by the Central Govt. but has also increased the seats from 100 to 113 which calls for action u/s 10B of the I.M.C. Act, 1956.

The Executive Committee, therefore, decided to initiate action u/s 10B of the I.M.C. Act, 1956 against the admissions made by the college authorities for the academic session 2002-03 without getting the permission renewed by the Central Govt. for which the institution be directed to send a merit wise list to the Council immediately. The

Committee also decided that the Central Govt. may be requested to take up the matter with the Secretary (Medical Education) and Director, Medical Education, Govt. of Andhra Pradesh to take steps to rectify the violations immediately.

Since, the college had already admitted students for the academic session 2002-03, the Committee decided not to consider the inspection report carried out for renewal of permission for admission of 3rd batch of students at Govt. Medical College, Anantapur.

Office Note:

The Committee directed the office to send a circular as per practice to Health Secretary(s) and Director(s) Medical Education of all the States directing not to admit students in the medical colleges established u/s 10A of the I.M.C. Act, 1956 against any academic session without getting the permission renewed by the Central Govt. on the recommendations of the Medical Council of India.

8. **Aarupadai Veedu Medical College, Pondicherry - renewal of permission for admission of 3rd batch of students.**

Read : The inspection report (13th & 14th Dec., 2002) for renewal of permission for admission of 3rd batch of students at Aarupadai Veedu Medical College, Pondicherry.

The Executive Committee considered the Council Inspectors report (13th & 14th Dec., 2002) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (hundred) students at Aarupadai Veedu Medical College, Pondicherry for the academic session 2002-03.

9. **Medical college at Eluru, West Godawari Distt. By Alluri Sitaram Raju Educational Society, Eluru - renewal of permission for admission of 3rd batch of students.**

Read : The compliance verification inspection report (3rd & 4th Dec., 2002) for renewal of permission for admission of 3rd batch of students at Medical College, Eluru.

The Executive Committee considered the compliance verification inspection report (3rd & 4th Dec., 2002) along with the previous inspection report (July, 2002) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 (hundred) students at Medical College, Eluru for the academic session 2002-03.

10. **Establishment of medical college at Ahmednagar, Maharashtra by Padmashree Dr. Vithalrao Patil Foundation, Ahmednagar u/s 10A of the IMC Act, 1956.**

Read : The inspection report (27th & 28th Dec., 2002) for grant of LOP for establishment of Medical College at Ahmednagar, Maharashtra.

The Executive Committee considered the Council Inspectors report (27th & 28th Dec., 2002) and noted the following:-

1. Access to the college from the highway is by a kutchra road, full of potholes which needs to be repaired by construction of a pucca road.
2. Internal roads are yet to be built. The access to girls' hostel is through uneven terrain.
3. No furniture has been provided in the common rooms or in the hostels for boys and girls as yet.
4. Residents quarters have been provided only for 42 residents against the requirement of 50 quarters at this stage.

5. Computer room with Medlar/Internet facilities is not available in the library. This should be provided at the earliest.
6. Blood bank is not functional.
7. Average daily attendance in the O.P.D. varies between 288 - 439 with average attendance of 390. On the day prior to the inspection i.e. 26/12/2002, it was 423 while on the day of inspection - i.e. 27/12/2002, it was 388. Steps should be taken to increase the O.P.D. attendance.
8. Daily bed occupancy varies between 44.00 % -79.33% with average occupancy of 66.40 %. On the day prior to the inspection, it was 174 out of 300 beds - i.e. 58.33 %. Bed occupancy is less than 80% as prescribed by the Council in its regulations.
9. The workload of operations, deliveries, laboratory investigations, X-rays and investigations is not adequate.
10. Casualty ward has 20 beds but it is distributed in 3 places in 2 wards with no contiguity between them. Casualty wards should be brought to one place so that proper resuscitation facilities can be provided.
11. O.P.D. and indoor registration is manual. All the departments in O.P.D. do not follow uniform pattern of registration. The registers should be made uniform for all the departments and should include all details. Computerization of registration section should be expedited only after manual system is put in place properly. ICD 10 classification should be followed for record keeping of indoor cases.
12. Proper teaching areas are not provided in the O.P.D. with examination trays, patient couches, X-ray viewing boxes, etc. Separate accommodation is not provided in the OPD for special clinics like immunization clinic, ante-natal clinic, infertility clinic with appropriate equipment. The O.P.D. for Obstetrics & Gynaecology should be reorganized to ensure privacy for female patients.
13. CSSD service should be augmented by providing more space and also by providing more equipment like 2 horizontal sterilizers.
14. Separate medical ICCU should be established with appropriate resuscitation and monitoring equipment.
15. Facilities in NICU should be augmented with proper resuscitation and monitoring equipment.
16. One mobile ultrasound should be procured or else an ultrasound machine should be additionally procured for the use of Obstetrics & Gynaecology department.
17. Mechanised laundry has not been provided.
18. Accommodation for teaching and non-teaching staff is inadequate in all the clinical departments. Separate rooms as per MCI norms need to be provided to the teaching staff in all the departments.
19. Shortage of staff:

Assistant Professor – 6 : (General Medicine –1,Surgery-1, Oph.-1, Anaes.-2,Dentistry –1)

Tutor – 1 (General Medicine)

Jr. Residents – 2 (Surgery, Obst. & Gynae.)

Total deficiency 8.41%.

20. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Executive Committee decided to recommend to the Central Govt. not to issue Letter of Permission for establishment of Padmashri Dr. Vithalrao Vikhe Patil Education's Medical College, Ahmednagar u/s 10A of the I.M.C. Act, 1956.

11. **Establishment of Medical College at Akola, Maharashtra by Govt. of Maharashtra u/s 10A of the IMC Act, 1956.**

Read : The compliance verification inspection report (5th Dec., 2002) carried out for verification of the information furnished by the college authorities subsequent to the inspection carried out on 30th Sept. & 1st Oct., 2002 for establishment of Medical College at Akola by Govt. of Maharashtra.

The Executive Committee considered the compliance verification inspection report (5th Dec., 2002) along with the previous inspection report 30th Sept. & 1st Oct., 2002 and decided to recommend to the Central Govt. to issue Letter of Intent for establishment of Medical College at Akola by Govt. of Maharashtra u/s 10A of the I.M.C. Act, 1956 with an annual intake of 100 (students) for the academic session 2002-03.

12. **Establishment of Medical College at Latur, Maharashtra by Govt. of Maharashtra u/s 10A of the IMC Act, 1956.**

Read : The compliance verification inspection report (6th & 7th Dec., 2002) carried out for verification of the information furnished by the college authorities subsequent to the inspection carried out on 9th & 10th Oct., 2002 for establishment of Medical College at Latur by Govt. of Maharashtra.

The Executive Committee considered the verification inspection report (6th & 7th Dec., 2002) along with the previous inspection report 9th & 10th Oct., 2002 and decided to recommend to the Central Govt. to issue Letter of Permission for establishment of Medical College at Latur by Govt. of Maharashtra u/s 10A of the I.M.C. Act, 1956 for the academic session 2002-03 with an annual intake of 100 (hundred) students.

13. **Establishment of medical college at Chinoutpally, A.P. (Dr.Pinnamaneni Siddhartha Instt. of Medical Sciences & Research Foundation) by Siddhartha Academy of General & Technical Education, Vijaywada.**

Read : The inspection report (26th & 27th Dec., 2002) for establishment of medical college at Chinoutpally, A.P.

The Executive Committee considered the Council Inspectors report (26th & 27th Dec., 2002) and decided to recommend to the Central Govt. to issue Letter of Intent for establishment of medical college at Chinoutpally, A.P. (Dr. Pinnamaneni Siddhartha Instt. of Medical Sciences & Research Foundation) by Siddhartha Academy of General & Technical Education, Vijayawada u/s 10A of the I.M.C. Act, 1956 with an annual intake of 150 (one hundred & fifty) students for the academic session 2003-04.

14. **S.V.Medical College, Tirupathi - Renewal of permission for admission of 3rd batch of students against the increased intake (100 to 150).**

Read : The compliance verification inspection (14th & 15th Nov., 2002) for renewal of permission for admission of 4th batch of students against the increased intake (100 to 150) at S.V.Medical College, Tirupathi.

The Executive Committee noted that inspection for renewal of permission for admission of 3rd batch of students i.e. for the academic session 2002-03 against the increased intake (100 to 150) at S.V.Medical College, Tirupathi was carried out by the Council Inspectors on 21st & 22nd March, 2002 and the inspection report was considered by the Executive Committee at its meeting held on 24.4.2002. In view of various

deficiencies pointed out in the inspection report with regard to teaching staff and other infrastructural facilities renewal of the permission for admission against the increased intake was not recommended. In response to above decision, the Central Govt. vide its letter dated 19.6.2002 forwarded a copy of compliance report on the deficiencies pointed out in the above inspection report submitted by the Director, Govt. of Andhra Pradesh. Inspection to verify the compliance was carried out by the Council Inspectors on 14th & 15th Nov.,2002.

The Committee further noted from the letter dated 23.12.2002 of the Registrar, NTR University of Health Sciences, A.P. that admissions against the increased intake for the academic session 2002-03 have already been made (143+7 NRI seats) without getting the permission renewed by the Central Govt. The Executive Committee therefore decided to initiate action as per provisions of Section 10B of the IMC Act,1956 in respect of admissions made for which the institution authorities be directed to send a merit wise list to the Council immediately. The Committee also decided that the Central Govt. may be requested to take up the matter with the Secretary (Health) and Director, Medical Education, Govt. of Andhra Pradesh to take steps to rectify this violation immediately failing which the Council will be constrained to recommend to the Central Govt. for taking necessary action as per the provisions of Section 19 of the IMC Act,1956 against the medical college.

Since, the college had already admitted students for the academic session 2002-03, the Committee decided not to consider the inspection report carried out for renewal of permission for admission of the students against the increased intake for the said academic session at S.V.Medical College, Tirupathi.

15. **NHL Municipal Medical College, Ahmedabad - Renewal of permission for admission of 3rd batch of students against the increased intake (100 to 150).**

Read : The inspection reports (Sept., 2002 & 4th Dec., 2002) for renewal of permission for admission of 4th batch of students against the increased intake (100 to 150) at NHL Municipal Medical College, Ahmedabad.

The Executive Committee noted that the Central Govt. has already conveyed its approval vide letter dated 29.10.2002 for provisional renewal of permission for admission of 3rd batch of MBBS students against the increased intake i.e. from 100 to 150 at the college during the academic year 2002-03. This permission granted by the Central Govt. is subject to the condition that the college authorities/Govt. of Gujarat will furnish an undertaking within two weeks from the date of issue of the letter that they will provide all the facilities as per MCI norms and get the formal recommendations of Medical Council of India within 3 months for the renewal of permission for admission of 3rd batch of students against the increased intake i.e. 100 to 150. It further noted that in the same letter MCI was requested to verify the compliance as forwarded by the Ministry in respect of above medical college.

The Committee upon consideration of the compliance verification inspection report (4th Dec.,2002) decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of students for the academic session 2002-03 against the increased intake i.e. from 100 to 150 at Smt. NHL Municipal Medical College, Ahmedabad.

The Committee further decided that the Central Govt. may be requested not to grant permission directly without the recommendations of the Council as per provision of Section 10A of the I.M.C. Act,1956 in future.

16. **K.J.Somaiya Medical College, Mumbai – Renewal of permission for admission of 4th batch of students against the increased intake (50 to 100).**

Read : The compliance verification inspection (15th Nov., 2002) for renewal of permission for admission of 4th batch of students against the increased intake (50 to 100) at K.J.Somaiya Medical College, Mumbai.

The Executive Committee considered the compliance verification inspection report (15th Nov.,2002) carried out on receipt of the compliance on rectification of the deficiencies pointed out in the inspection report (16th & 17th July,2002) and noted that the following deficiencies still persist:-

1. Clinical material is inadequate (Bed occupancy is 43.5% to 68% instead of 80% as required).
2. Space available in the OPDs. like Surgery, Orthopaedics, Obst. & Gynae., Eye and ENT, Paediatrics continue to be in the same condition. The space available in these OPDs is less and need to be increased as per MCI norms.
3. No auditorium has been constructed so far in the college campus.
4. The college does not have its own rural health training centre. The rural health centre at Nareshwadi which is under the administrative and financial control of the college is at a distance of 70 kms. The supervision by the Community Medicine department continues to be poor because of this distance.
5. The college has provided only three rooms on the ground floor as hostel for girls at Sion. On the 2nd and 3rd floor the facility is meant for boys hostel. So far no girl students are staying in the hostel. This arrangement of keeping the girls hostel in the same building along with the boys is not proper.
6. No quarters have been provided for teaching and non-teaching staff in the college campus.
7. No accommodation has been provided for non PG House Surgeons, Tutors/Demonstrators, Nursing Staff and Interns.
8. The same Medical Superintendent who is above the age of 65 years continues, hence, deficiency not complied with.
9. 800 MA x-ray machine has not been purchased so far and neither any time frame has been given to procure the CT Scan.
10. In the central casualty still there is no separate examination room/facility with wash area for examination of the patients. The casualty space continues to be less.
11. There is no separate central sterilisation department.
12. There is no mechanised laundry.
13. In some O.Ts. two operation tables are placed as reported in the last inspection report, hence deficiency not corrected.
14. Space is too less in the changing rooms for various staff members and pre and post operative areas.
15. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Committee decided to recommend to the Central Govt. not to renew the permission for admission of 4th batch of students against the increased intake i.e. from 50 to 100 at K.J. Somaiya Medical College, Mumbai for the academic session 2002-03.

17. **Dr.B.R.Ambedkar Medical College, Bangalore - renewal of permission for admission of 3rd batch of students against the increased intake i.e. from 100 to 120.**

Read : The inspection report (Nov., 2002) alongwith the additional information furnished by the college authorities after the inspection was carried out for renewal of permission for admission of 3rd batch of students against the increased intake i.e. from 100 to 120 at Dr. B.R.Ambedkar Medical College, Bangalore.

The Executive Committee considered the Council Inspectors report (Nov.,2002) and noted the following:-

1. **Shortage of staff:**

Reader – 8 : (Anatomy-1, Physiology-2, Biochemistry-2, TB & Chest-1, Psychiatry-1, Anaes.-1)

Lecturers-6 : (Anatomy-2, Forensic Medicine-1, PSM-1, Epidemiologist-1, Anaes.-1)

Sr.Residents/Tutors-8 : (Anatomy-1,Physiology-1, Pharmacology-2, PSM-3, Radio-Diag.-1).

Jr. Residents –13 : (Gen.Med.-4, TB Chest-3, Psychiatry-2, Gen.Surgery-3, Ortho.-1)

Total Faculty shortage – 14

Residents shortage – 21

The shortage of faculty is 11.4% and the shortage of Residents is 14.3%.

2. **Teaching Hospital:**

The Institution is utilising the following hospitals:-

1. Dr.Ambedkar Medical College Hospital,(405 teaching beds) and
2. K.C. General Hospital, Bangalore (270 beds)

Clinical Material as available in these two hospitals is as under:-

Sl no.	Particulars	Dr. B.R.A.M.C. Hospital	K.C.G. Hospital
1.	OPD per day	263 – 370. In the month of November, 2002 the OPD attendance has been between 169 to 236 per day.	874 – 904
2	Bed occupancy	25% to 51%. On 19.11.02 i.e. one day before the inspection, the bed occupancy was 72%.	95%
3	Casualty attendance per day	5 per day	10 – 15 per day
4	Major surgeries per day	10 to 12	15 to 20
5	Deliveries per year	220	5252
6	Clinical pathology investigations per day	45	85
7	Biochemistry investigations per day	80	78
8	Micro biology investigations per day	15	20
9	Histopathology per year	1266	--
10	Cytopathology per year	120 – 140	--

The clinical material available in terms of OPD attendance, bed occupancy, Casualty attendance, deliveries and lab investigations is inadequate in Dr.B.R.Ambedkar Medical College Hospital.

3. In some of the OPDs, examination material/instruments and X-ray view boxes are not available. The office space provided for most of the clinical departments is not equipped with furniture, hence, are non-functional.
4. The Medical Record Section needs to be computerized.
5. Attendance in Central Casualty is inadequate even the beds have not been provided as per MCI norms.
6. There is a need to increase the work load of Central Lab.
7. The number of ventilators and defibrillators need to be increased in ICU & ICCU.
8. Central Sterilisation department has not been established as per MCI norms.
9. There is a gross shortage of Nursing, Para-Medical and Non-teaching staff.
10. Residential Quarters:

There are only 8 quarters, out of which in 2 quarters staff nurses are staying with 10-13 nurses in one room with practically no facilities. In other 6 quarters some essential staff like Nursing Supdt., Electrician etc. are staying. There are no staff quarters for any other category like teaching faculty, Residents, Demonstrators/Tutors and non PG Residents.
11. There is no auditorium and no workshop for equipments and instruments repair. Intercom facilities to various departments/sections need to be provided.
12. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Executive Committee decided to recommend to the Central Govt. not to renew the permission for admission of 3rd batch of students against the increased intake i.e. from 100 to 120 at Dr. B.R.Ambedkar Medical College, Bangalore for the academic session 2002-03.

18. **Increase of MBBS seats from 65 to 100 at Indira Gandhi Medical College, Shimla u/s 10A of the IMC Act, 1956.**

Read : The inspection report (26th & 27th Nov., 2002) along with the clarification on the deficiencies pointed out in the inspection report furnished by the authorities of State Govt. of Himachal Pradesh for Increase of seats from 65 to 100.

The Executive Committee considered the Council Inspectors report (26th & 27th Nov., 2002) and noted the following:-

1. Shortage of Staff:

Professor – 1: (Biochemistry-1)

Reader- 8: (Anatomy-1, Physiology-2, Pharmacology-1, Pathology- 1, Microbiology-1, PSM-1, Anaesthesia-1)

Assistant Prof./ - 7: (Physiology-1, PSM-2, Epidemiologist-1, Statistics-1, Lecturer. Medicine-1, Anaesthesia – 1)

Jr.Resident - 8: (TB & Chest 3, Dermatology-2, Psychiatry-3,)

□ Total Faculty shortage - 16 i.e. nearly 16 % (16 / 104)

Resident shortage - 8 i.e. 6% (8 / 121)

2. Some of the examination rooms in the OPD do not have X-Ray view boxes. The space provided for teaching rooms in most of the OPDs needs to be furnished.
3. The number of journals both Indian & Foreign in the library are less. The Space and seats for Undergraduate, Postgraduate and in staff reading rooms is inadequate. Most of the posts in the Central Library are lying vacant which need to be filled. The space of Central library needs to be increased.
4. The Medical Record section needs to be completely computerized.
5. There is a need to provide emergency operation theatre near the casualty.
6. The Blood bank needs to be under the technical control of the Prof. & HOD Pathology/Microbiology.
7. The clinical lab. of Kamla Nehru Women Hospital also needs to be brought under the technical control of HOD Pathology & Biochemistry.
8. 3 OTs monitors in the operation theatres, Colour Doppler in Radio-diagnosis department in medical college hospital and Pulse Oximeters, Capnograph, ECG Monitor, Ventilators, Defibrillator, and Techometer need to be added in the operation theatre of Obst. & Gynae. department in Kamla Nehru Women Hospital
9. There is also a need to post a staff of Anaesthesia department to cover the night emergencies/surgeries instead of the existing system of Call Duty of Anaesthesia department staff.
10. The various equipments which are lying out of order like Boyle's machine – 3, OT Light –2, OT Table – 2, Ventilator – 1, Central Monitoring Unit in Medicine Department and other equipment in the hospital, need to be repaired immediately.
11. There is need to improve the Neonatology Unit/Nursery in Kamla Nehru Women Hospital by addition of Pead. Ventilators-2, Bed Side Monitors-4, Pulse Oximeters-4, Bilirubin meter-1.
12. There is a need to establish a mechanised laundry as per MCI norms.
13. There is shortage of Para-Medical, Nurses and non-teaching staff for 100 admissions.
14. Deficiencies in basic & para-clinical departments:-

In most of these departments the demonstration rooms are not of the required seating capacity. The students practical labs. are also not of the required seating capacity in some of these departments.
15. Other observations/deficiencies pointed out in the inspection report.

In view of above, the Executive Committee decided to recommend to the Central Govt. not to issue Letter of Intent for increase of MBBS seats from 65 to 100 at Indira Gandhi Medical College, Shimla u/s 10A of the I.M.C. Act, 1956.

19. **Silchar Medical College, Silchar – Increase of MBBS seats from 65 to 100 at Silchar Medical College, Silchar.**

Read : The compliance report submitted by the authorities of Silchar Medical College, Silchar on rectification of the deficiencies pointed out in the inspection report (29th & 30th August 2002) through the Central Govt. for increase of MBBS seats from 65 to 100.

The Executive Committee on going through the compliance submitted by the authorities of Silchar Medical College, Silchar on rectification of the deficiencies pointed

out in the Council inspectors report (29th & 30th August 2002) through the Central Govt. noted that that the observations as sent on the deficiencies by the concerned authorities cannot be treated as a compliance since the institution has only contested the remarks made in the inspection report instead of sending a proper compliance. The Committee therefore decided to direct the college authorities to send a proper compliance touching on all the deficiencies pointed out in the inspection report and intimate the action taken for removing these deficiencies.

20. **Mamtha Medical College, Khammam – Approval of the college for the award of MBBS degree granted by NTR University of Health Sciences, Vijaywada.**

Read : The inspection report (20th & 21st November 2002) for approval of Mamtha Medical College, Khammam for the award of MBBS degree granted by NTR University of Health Sciences, Vijaywada.

The Executive Committee considered the Council Inspectors report (20th & 21st Nov.,2002) of the physical and other teaching facilities available at Mamtha Medical College, Khammam along with the standard of examination and decided to recommend to the Council that Mamtha Medical College, Khammam be approved for the award of MBBS degree granted by N.T.R. University of Health Sciences, Vijayawada with an annual intake of 100 (hundred) students.

21. **Dr.Rajendra Prasad Medical College, Tanda – Renewal of permission for the 4th batch of students.**

Read : The compliance report submitted by the authorities of Rajendra Prasad Medical College, Tanda through the Central Govt. on rectification of the deficiencies pointed out in the inspection report 5th & 6th August 2002.

The Executive Committee considered the letter dated 19.10.2002 of the authorities of Dr. Rajendra Prasad Govt. Medical College, Tanda as forwarded by the Central Govt. vide its letter dated 29.10.2002 providing clarifications in respect to deficiencies pointed out in the Council inspectors report dated 5th & 6th August,2002.

The Committee noted the clarifications as under:-

1. That the construction of teaching hospital has not started at Tanda and it has got delayed on account of the decision of the Town & Country Planning Organisation to restrict the construction of new buildings to only three floors on account of seismic zone considerations. On account of this ceiling, all architectural plans that had been prepared earlier had to be recast and worked out afresh to accommodate the MCI requirements in a three floor building. Considerable efforts had to be put in to demonstrate to the Town & Country Planning Organisation that due to these restrictions, both land coverage and construction costs would increase substantially which could jeopardize the viability of the project.

Relaxation of the three-floor limit has since been received along with the architectural plans which have been finalised after conducting soil stability investigations and incorporating appropriate earthquake resistant features. However, this entire process has delayed the construction of the hospital.

2. The State Govt. has engaged the Hospital Services Consultancy Corporation (a Govt. of India Undertaking) to execute the project for construction of the hospital on a turnkey basis at the estimated cost that has now been pegged at Rs.46.95 crores as against the earlier estimate of Rs.107.67 crores. The pre-qualification of the contractors has been finalised and tenders have also been floated.

3. Completion of OPD block and casualty block has been prioritized for early completion.

The State authorities have emphasised that inspite of the above facts, the teaching has not been allowed to suffer and has invested substantial amounts to upgrade the facilities at its hospital at Dharamshala.

4. The State Public Works Department has already initiated action for acquiring the private land under the Land Acquisition Act to widen the approach road already existing into a three land approach road to meet with the deficiency pointed out.

5. Additional equipment as suggested in the Council Inspectors report i.e. 2 Anaesthesia Machines with Anaesthesia Ventilator make ESAB INDIA, 2 Anaesthesia Ventilators, 2 Vital Sign Monitors Viridia 24 CT, 2 Ventilators Mechanical and 2 Portable plus and oxygen Saturation Monitor Model 504 plus has been ordered at a cost of Rs.58,39,808/-. In addition equipment for Surgical department has also been ordered worth Rs.7,22,229/-. Thus equipments have been ordered for a total of Rs.65,62,037/-.

TMT & Pulmonary Function Test are already available at Tanda which are now being shifted to hospital at Dharamshala.

6. Regarding transfer of staff from Indira Gandhi Medical College, Shimla the authorities have clarified that as per the Govt. policy every faculty member has to serve for at least one year at Dr.RPGMC, Tanda. Since this cycle commences after the completion of the academic session, an impression is generated that these transfers have been ordered on the eve of the inspection.

After noting the above clarifications, the Executive Committee observed that main deficiencies pointed out in the inspection report dated 5th & 6th August,2002 were pertaining to non-construction of 500 bedded hospital at Tanda and that the construction of hospital has got delayed on account of larger concerns of public safety as intimated by the State Govt. authorities which amounts to grant of permission for extension of time bound programme for the said construction which can only be considered by the Central Govt.

In view of above and that the institution is meeting with the other requirements for renewal of permission for admission of 4th batch, the Executive Committee decided to recommend to the Central Govt. to renew the permission for admission of students of the said batch i.e for the academic session 2002-03 at Dr.Rajendra Prasad Govt. Medical College, Tanda provided change in the original project report as far as the construction of the hospital is concerned which is not completed within the time frame given in the project report is accepted by the Central Govt. as requested by the State authorities.

22. Ruxmaniben Deepchand Gardi Medical College, Ujjain – Renewal of permission for admission of 3rd batch of students.

Read : The letter dated 20th Nov., 2002 received from the Central Govt. for carrying out the inspection of Ruxmaniben Deepchand Gardi Medical College, Ujjain for renewal of permission for admission of 3rd batch of students.

The Executive Committee noted that the Central Govt. vide its letter dated 15.3.2002 renewed the permission for admission of 2nd batch of students during 2001-02 at Ruxmaniben Deepchand Gardi Medical College, Ujjain against the recommendations of the Executive Committee communicated to them not to renew the permission. While renewing the permission the Central Govt. requested the college authorities that the deficiencies pointed out in the MCI inspection report and compliance report thereon be sent to the Ministry within six months. The Committee further noted that the Central Govt. vide its letter dated 13.9.2002 had forwarded a copy of the compliance report submitted by the college authorities for verification and sending the recommendations of the Council for renewal of permission for the academic year 2002-03. The same was considered by the Committee at its meeting held on 31.10.2002 where it was decided to write a letter to the Central Govt. that this compliance report which was submitted on the

deficiencies pointed out in the inspection report dated Dec.,2001 by the college authorities cannot be considered for renewal of permission for admission of 3rd batch of students i.e. for the academic session 2002-03.

The Committee now considered the letter dated 20.11.2002 from the Central Govt. forwarding therewith a copy of the letter dated 18.11.2002 from the authorities of Ruxmaniben Deepchand Gardi Medical College, Ujjain intimating that they have created all the facilities for admission of 3rd batch of students during the year 2002-03 as per norms of the MCI and they are ready for inspection.

The Committee decided to arrange inspection for renewal of permission for admission of 3rd batch of students.

23. **Establishment of Medical College at Sullia by Academy of Liberal Education, Sullia u/s 10A of the IMC Act, 1956 – consideration of appointment Inspectors for carrying out the renewal of inspection for admission of 2nd batch.**

Read : The matter with regard to appointment of inspectors for carrying out inspection for renewal of permission for admission of 2nd batch at Medical College, Sullia.

The Executive Committee noted that the Central Govt. vide its letter dated 12.4.2002 and subsequent letter dated 19.4.2002 issued LOI and LOP for establishment of medical college at Sullia by Academy of Liberal Education, Sullia with annual intake of 100 students with prospective effect from the academic year 2002-03 in contravention of the recommendations of the Executive Committee communicated to them and also in violation of the norms of the Council regarding the requirement of 25 acres of land in a single piece.

The Committee decided not to arrange inspection for renewal of permission for admission of 2nd batch of students during 2003-04 at Medical College, Sullia.

24. **Graduate Medical Education (Amendment) Regulations, 2002 – Reg.**

Read : The Statement of the amendments proposed in the Regulations on Graduate Medical Education, 1997 and modification proposed by the DGHS.

The Executive Committee considered the Statement of the amendments proposed in the Regulations on Graduate Medical Education, 1997 and modification proposed by the DGHS and decided as under mentioned under the heading remarks in the statement:-

AMENDMENTS PROPOSED IN THE REGULATIONS ON GRADUATE MEDICAL EDUCATION, 1997 –

(Words and sentences in **Bold** indicates the new clauses to be inserted)

Existing Clause	NEW/REVISED CLAUSE (PROPOSED) BY MEDICAL COUNCIL OF INDIA	MODIFICATION PROPOSED BY DGHS	REMARKS
	<u>NEW CLAUSE TO BE ADDED</u> <u>Eligibility criteria for admission to MBBS.</u> Regulation 4 (2)(d)(i): “The first year of the three years degree course of a recognised University, with Chemistry, Botany and Zoology including a practical test in these subjects provided the examination is a “University Examination” and candidate has	The proposed new clause may read as under: “The first year of the three years degree course of a recognised University, with	The Executive Committee agreed with the suggestion of DGHS.

	passed 10+2 with Physics and also English at a level not less than a core course. OR”	Chemistry, Botany and Zoology including a practical test in these subjects.”	
	Regulation 4(2)(e)(i): “B.Sc. examination of an Indian University, provided that he/she has passed the B.Sc. examination with not less than two of the following subjects – Chemistry, Botany and Zoology and further that he/she has passed the earlier qualifying examination with Physics, Chemistry, Biology and English.” (The requirement for qualifying 10+2 Exam. with the combination of Physics, Chemistry and Biology with English by a student who has passed B.Sc. with one or two of these subjects may be discussed in the meeting.	This regulation is not required.	
Regulations 6(1): Migration from one medical college to other is not a right of a student. However, migration of students from one medical college to another medical college in India may be considered by the Medical Council of India only in exceptional cases on extreme compassionate grounds*, provided the following criteria are fulfilled. Routine migration on other grounds shall not be allowed.	<u>REVISED CLAUSE</u> <u>Migration</u> Regulation 6(1): “Migration from one medical college to other is not a right of a student. However, migration of students from one medical college to another recognized medical college in India including migration within the same university may be considered by the Medical Council of India only in exceptional cases on extreme compassionate grounds*, provided the following criteria are fulfilled. Routine migration on other grounds shall not be allowed. Further no such migration shall be permitted on any ground from one medical college to another within the same university in the same city.”	<u>MIGRATION:</u> DGHS has proposed that in place of the existing provisions, MCI may be advised to mention only the per percentage i.e. 5% of migration permissible with NOC from both institutions and universities within 3 months of passing 1st professional examination. Powers to issue NOC to individual cases and such stringent clause should not be there in the regulation. MCI while doing periodical inspection of the institutions may specifically check the compliance of the migration case and suggest corrective measure, if needed.	The number of students migrating from one medical college to another medical college during one year will be kept to the minimum so that the training of the regular students of that college is not adversely affected. The number of students migrating to/from any one medical college should not exceed the limit of 5% of its intake in any one medical

			college in one year. - Cases not covered under the above regulations are to be referred to the Medical Council of India for consideration on individual merits. - An intimation about the admission of migrated students into any medical college should be sent to the Medical Council of India forthwith.
Regulation 6(2): Both the colleges i.e. one at which the student is studying at present and one to which migration is sought are recognised by the Medical Council of India Regulation.	Regulation 6(2): Both the colleges, i.e. one at which the student is studying at present and one to which migration is sought are recognized by the Medical Council of India and the sanctioned intake capacity of transferee/receiving medical college is not vitiated.” After Regulation 6(4), the following proviso to be inserted:- Provided that if any of the compassionate grounds criteria listed in Note 2 under this regulation occurs after more than one month of passing the first professional MBBS examination, he/she may be considered for grant of migration provided that the other conditions are met with and the candidate gives an affidavit to complete the whole duration of the second professional course in the transferee medical college, after the date of migration. Provided further that such a waiver has to be approved by the		

	Medical Council of India in each individual case.”		
Regulation 6(5): The applicant candidate must submit an affidavit stating that he/she will pursue 18 months of prescribed study before appearing at 2 nd professional Bachelor of Medicine and Bachelor of Surgery (MBBS) examination at the transferee medical college, which should be duly certified by the Registrar of the concerned University in which he/she is seeking transfer. The transfer will be applicable only after receipt of the affidavit.	Regulation 6(5): The applicant candidate must submit an affidavit duly sworn before First Class Magistrate giving an undertaking therein that “I will study for full 18 months of 2nd phase of MBBS course in the transferee medical college, before being considered eligible for 2nd professional university examination of the affiliating university of the transferee medical college.		
Existing Note 2: (on Compassionate Grounds Criteria) (i) Death of a supporting guardian. (ii) Illness of the candidate causing disability. (iii) Disturbed conditions as declared by Government in the Medical College area.	Note 2 ‘on Compassionate Grounds Criteria’ to be substituted as under:- (i) Death of a supporting guardian as defined by Government of India for various purposes. (ii) Illness of the candidate causing disability which has occurred after admission to MBBS course. The evaluation and extent of disability should be certified by a medical board constituted by the parent medical college/ respective State Government. (iii) Disturbed conditions as declared by Government in the Medical College area.		
Regulation 7(6):- Universities shall organise admission timings and admission process in such a way that teaching in first semester starts by	Training Period and Time Distribution. Regulation 7(6) may be substituted by:- “(6) Universities, Central Board of Secondary Education, Central Government, State Governments, Private Medical College and other	The existing Regulation 7(6) may be replaced as:- “Admission timings and admission process shall be organized in such a way that teaching in	The Executive Committee agreed with the suggestion of DGHS.

the 1 st of August each year.	statutory agencies shall organise admission timings and admission process in such a way that teaching in first semester commences by the 1 st of August each year.”	first semester commences by the 1 st of August each year.”	
Regulation (7)(7):- Supplementary examination may be conducted within six months so that the students who pass can join the main batch and the failed students will have to appear in the subsequent year.	Regulation (7)(7) may be substituted by:- “supplementary examination may be conducted within four to six months and the students who pass the examination shall not be allowed to join the main batch for teaching, training and examination but shall be treated as a separate batch, i.e., supplementary batch.” The Council has recommended changes in the Time Table of clinical posting of doctors. The total duration of clinical postings in various departments will remain the same. However, clinical postings in general surgery and general medicine will be reduced to 2 weeks each and instead clinical posting in psychiatry and anaesthesiology will be given two weeks each. (Pl. see comparative Time Table of clinical posting – existing & proposed at ANNEX –I) <u>NEW CLAUSE TO BE ADDED</u> <u>CURRICULUM OF MBBS COURSE</u> Regulation 9: -Under clause (3) Biochemistry (ii) (a) knowledge, insert the following after sub-clause (12), namely:- “(13) describe the changes in the biochemical parameters which occur in AIDS.” -Under clause (4) Introduction to Humanities and community medicine – objectives (a) Knowledge – insert the following after sub-clause (6), namely:- “(7) Bring about awareness about AIDS among the community.” <u>PARA-CLINICAL SUBJECTS OF PHASE II</u> Regulation 10: -Under clause (1) Pathology (ii) objectives (a) knowledge: insert the following after sub clause (4) namely:- “(5) describe the pathological changes in AIDS.” -Under clause (2) Microbiology (ii) objectives (a) knowledge, insert	Existing regulation (7)(7) is to be maintained. Suggested changes (as at ANNEX-I) may be incorporated. Not required. Not required	The Executive Committee did not agree with the suggestion of DGHS. The amendment as proposed by the MCI be retained. The Executive Committee agreed with the suggestion of DGHS. The Executive Committee agreed with the suggestion of DGHS.

	the following after sub-clause (7):- “(8) learn immuo-biology of Human Immuno Deficiency Virus (HIV) and the immunological changes in AIDS. (9) Investigate procedure for early detection of AIDS.” -Under clause (5) Community Medicine (ii) objectives (a) knowledge, insert the following after sub clause (10): “(11) understand the problems of AIDS in the community.” <u>CLINICAL SUBJECTS OF PHASE II AND PHASE III</u>		
	Regulation 11:	Not required.	
	-Under clause (1) Medicine and its allied specialities:- (A) Medicine (ii) objectives (a) knowledge – insert the following after sub-clause (5), namely:- “(6) recognise the problems arising in patients of AIDS.” -Under (B) Paediatrics (ii) objectives : (a) knowledge – insert the following after sub-clause (5), namely:- “(6) outline the mode of transmission of HIV virus in Paediatric age group and its prevention strategies and define the impact of HIV infection & AIDS on childhood immunization.” -Under (C) Psychiatry (ii) objectives: (a) knowledge – insert the following after sub clause (5), namely :- “(6) provide counselling to patients suffering from diseases like AIDS.” -Under (D) Dermatology & STD (ii) objectives: (b) Skills – at the end of sub regulation (3), add the following, namely:- “Particularly about AIDS”		The Executive Committee agreed with the suggestion of DGHS.

Revised clauses

EXISTING CLAUSE	NEW/REVISED (PROPOSED) CLAUSE	MODIFICATION PROPOSED BY DGHS	<u>REMARKS</u>
Regulation 12(1): “(1) ATTENDANCE: 75% of attendance in a subject for appearing in the examination is	<u>EXAMINATION</u> Regulation 12(1): “(1) ATTENDANCE: 75% attendance in a subject for appearing I the examination is compulsory inclusive of attendance in non-lecture teaching, i.e. seminars, group	The changes may be incorporated.	

compulsory provided he/she has 80% attendance in non-lecture teaching, i.e. seminars, group discussions, tutorials, demonstration, practicals, hospital (Tertiary, Secondary, Primary) postings and bed side clinics, etc.” Regulation 12(2)(v):- “student must secure at least 50% marks of the total marks fixed for internal assessment in a particular subject in order to be eligible to appear in final university examination of that subject.” Regulation 12(3) (para 8) “There shall be one main examination in a year and a supplementary to be held not later than 6 months after the publication of its results. University examinations shall be held as under”:	discussions, tutorials, demonstrations, practicals, hospital (Tertiary, Secondary, Primary) posting and bed side clinics, etc”. Regulation 12(2)(v):- “student must secure at least 35% marks of the total marks fixed for internal assessment in a particular subject in order to be eligible to appear in final university examination of that subject.” Regulation 12(3) (para 8) may be substituted by the following, namely:- “There shall be one main examination in a year and one supplementary examination which shall be conducted between 4 to 6 months (not before 4 months and not after months) from the date of declaration of result of the main examination. University examinations shall be held as under:”	The changes may be incorporated. The existing regulation is to be maintained.	The Executive Committee did not agree with the suggestion of DGHS
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	Regulation 12(4): The Council has recommended changes in the distribution of marks in the subjects of Anatomy, Physiology, and Biochemistry for first professional examination; changes in the distribution of marks in the Second Professional Examination in the subject of Pathology, Microbiology, Pharmacology, and Forensic Medicine; and also changes in the distribution of marks in the Third Professional Examination in the subjects of Ophthalmology, Oto-Rhino-Laryngology, Community Medicine including Humanities, Medicine, General Medicine (including Psychiatry, Dermatology, STD & T.B. and Chest Diseases), Surgery, Obstetrics and Gynaecology and Paediatrics. <u>A comparative statement showing the existing and proposed distribution of marks is at APPENDIX –II, (This needs to be discussed in the meeting.</u>	The distribution of marks may be kept as proposed by DGHS in Annex-II.	The Executive Committee did not agree with the suggestion of DGHS
Regulation 13(1) (Existing) No person shall be appointed as an examiner in any of the subjects of the Professional examination leading to and including the final Professional examinations for the award of the MBBS degree unless he has taken atleast five years previously, a doctorate degree of a recognized university or an equivalent qualification in the particular subject as per recommendation of the Council on teachers' eligibility qualifications and has had at least five years of total teaching experience in the subject concerned in a college affiliated to a recognized university at a faculty position.	APPOINTMENT OF EXAMINERS: Regulation 13(1): (Revised) No person shall be appointed as an examiner in any of the subjects of the Professional examination leading to and including the final Professional examinations for the award of the MBBS degree unless he has taken atleast five years previously, a Post Graduate degree of a recognized university/college or an equivalent qualification in the particular subject as per recommendation of the Council on teachers' eligibility qualifications and has had at least five years of total teaching experience in the subject concerned in a college affiliate to a recognized university at a faculty position.	The changes may be incorporated.	
Regulation 13(2): There shall be at least four examiners for 100 students, out of whom not less than 50% must be external	Regulation 13(2): “There shall be at least four examiners for 100 students out of whom not less than 50% must be external examiners. Of the four examiners, the seniormost internal examiner will act as the	The Changes may be incorporated. However, the number of	The Executive Committee agreed with the suggestion

50% must be external examiners. Of the four examiners, the seniormost internal examiner will act as the Chairman and coordinator of the whole examination programme so that uniformity in the matter of assessment of candidates is maintained. <i>Where candidates appearing are more than 100, one additional examiner, for every additional 50 or part thereof candidates appearing, be appointed.</i> Regulation 13(9): Except Head of department of subject concerned in a college/institution, all others with the rank of reader or equivalent and above with requisite qualifications and experience shall be appointed internal examiners by rotation in their subjects; provided that where there is no post of reader, then an Assistant Professor of 5 years' standing as Assistant Professor may be considered for appointment as examiner.	internal examiner will act as the Chairman and coordinator of the whole examination programme so that uniformity in the matter of assessment of candidates is maintained. Not more than 30 candidates will be examined in one day". Regulation 13(9): "All the eligible teachers with the rank of Professor or Reader/Associate Professor or equivalent with requisite qualifications and experience shall be appointed internal examiners by rotation in their subjects; provided that where there is no post of Reader/Associate Professor, then an Assistant Professor of 5 years' standing as Assistant Professor may be considered for appointment as examiner." <u>NEW CLAUSE TO BE ADDED</u> Regulation 13(10): "Grace marks upto a maximum of five (5) marks may be awarded at the discretion of the University for a student who has failed only in one subject but has passed in all the other subjects."	number of candidates to be examined in one day may be kept as 40 instead of 30 proposed by MCI. Existing regulation should be maintained. (already notified with the approval of Central Govt.)	of DGHS. The Executive Committee did not agree with the suggestion of DGHS.
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Regulation 14(4): Community Medicine – 3 months	INTERNSHIP – TIME DISTRIBUTION Regulation 14(4): “Community Medicine ... 3 months (including 2 weeks of Paediatric posting)”	This amendment proposed by MCI is justified.	
Regulation 14(4): Surgery including Orthopaedics – 2 months	Regulation 14(4): “Surgery ... 2 months (including 2 weeks of posting in Orthopaedics)”	This amendment proposed by MCI is justified.	
Regulation 14(5)(i): All parts of the internship shall be done as far as possible in institution of India. In case of any difficulties, the matter may be referred to MCI to be considered on individual merit.	Regulation 14(5)(i) may be substituted as : All parts of the internship shall be done in the parent medical college. However, in exceptional circumstances, candidates may be permitted to undergo internship in another medical college for good and sufficient reasons which may be laid down by the Medical Council of India. Provided that internship may be permitted to be undertaken in non-teaching hospitals which are recognized by the Medical Council of India for this purpose on definite and strict criteria and subject to periodical renewal. In case of any difficulties, the matter may be referred to MCI to be considered on individual merit.	<u>The amendment proposed by MCI in Regulation 14(5)(I) may be substituted as:</u> “All parts of the internship shall be done in the parent medical college. However, in the exceptional circumstances, candidates may be permitted to undergo internship in another medical college/teaching hospital, which may be decided by Principal/Dean of both medical colleges and competent authority of State.”	The Executive Committee agreed with the recommendation of DGHS
	NEW CLAUSE TO BE ADDED: Regulation 14(5)(ia): “The Internship training should be supervised by the medical education Department or Medical Education Committee constituted within the medical college for this purpose under the chairmanship of Principal/Dean who shall be responsible and accountable for implementation, supervision and satisfactory completion of internship programme in its entirety.”	Not necessary	The Executive Committee agreed with the suggestion of DGHS.

	Regulation 14(5)(xii): “All interns attached to the institution which are located in various States/Union Territories shall be paid stipend at par with the rates of stipend being paid to the interns of State Government Medical Institutions/Central Government Medical Institutions, in the State/U.T. in which the institution is located.”	This clause may be incorporated.	
	Regulation 14(5)(xiii): “Each intern shall be eligible for grant of twelve days leave of all kinds during the whole year of internship subject to a maximum of three days in a month.”	The proposed new clause 14(5)(xiii) may be incorporated with the following modification: “Each intern shall be eligible for grant of twelve days leave of all kinds during the whole year of internship.”	The Executive Committee agreed with the suggestion of DGHS.
<u>Appendix A</u> Curriculum in ‘Family Welfare’ for MBBS course – PART-II-Seminars: The medical colleges shall organise occasional seminars in which staff from all departments and the in service trainees shall participate.	Appendix A Curriculum in ‘Family Welfare’ for MBBS course – PART –II – Seminars: “The medical colleges shall periodically organize seminars which staff from all departments and the in-service trainees shall participate.” Appendix B – A comprehensive list of skills recommended as desirable for MBS graduate – under the heading “XIII. MANAGEMENT OF EMERGENCIES.” The following may be inserted as Item (a) and the existing items (a) to (h) may be renumbered as (b) to (I): “(a) To administer Cardio Pulmonary Resuscitation.” The Council has also recommended changes in Appendix C – Prescribed Teaching Hours and suggested model time tables:- Under item B-Para-Clinical subjects in place of the existing brackets, figures and words, “(phase II- 5th to 7th semester)”, the following brackets, figures and words may be substituted, namely:- “(Phase II – 3rd to 5th semester)”	Amendment proposed in Appendix –A are accepted. Amendment proposed in Appendix – B are accepted. Changes in Appendix-C are accepted.	

25. **Continuation of recognition of MBBS degree granted by Ranchi University in respect of students being trained at Rajendra Instt. of Medical Sciences, Ranchi.**

Read : The letter dated 16.11.2002 received from the Director, Rajendra Instt. of Medical Sciences, Ranchi requesting to grant 4 months time to the proposed inspection by the Inspectors of the Council as decided by the Executive Committee for consideration of the above matter.

The Executive Committee noted that the periodical inspection for continuation of recognition of MBBS degree in respect of students being trained at Rajendra Medical College, Ranchi now known as Rajendra Instt. of Medical Sciences, Ranchi in Jan.,1997 and the last compliance on the deficiencies pointed out in the inspection report was considered by the Committee at its meeting held on 22.5.2002. The Committee decided to verify the same by way of an inspection. Accordingly, a letter was sent to the college authorities on 11.07.2002 by the Council office intimating the names of inspectors appointed by the Committee for carrying out the said inspection.

The Executive Committee considered the letter dated 16.11.2002 received from the Director, Rajendra Instt. of Medical Sciences, Ranchi in response to above communication wherein he informed that for better management of the institute the Govt. of Jharkhand has given autonomy to this institution. The Governing body of the institute is taking very prompt action to fill up the posts of teaching & non-teaching side which have remained vacant for some time. He has further informed that the posts are to be filled as per provisions laid down in the Act and Rules of the institute and not on departmental promotion basis which will take some time since this is a newly conceived autonomous institute. He has further requested to grant four months time to the institution for the proposed inspection by the Council Inspectors.

In view of above, the Executive Committee decided to grant final four months time as requested by the Director, Rajendra Instt. of Medical Sciences, Ranchi for carrying out the inspection.

26. **Recognition of MBBS degree granted by Maharashtra University of Health Sciences, Nashik.**

Read : The matter with regard to recognition of MBBS degree granted by Maharashtra University of Health Sciences, Nashik request received through the Central Govt. u/s 11(2) of the IMC Act, 1956.

The Executive Committee considered the letter dated 4.12.2002 received from the Central Govt., Ministry of Health & F.W. enclosing therewith a copy of letter dated 8.10.2002 from the Registrar, Maharashtra University of Health Sciences, Nashik making request u/s 11(2) of the I.M.C. Act,1956 for recognition of MBBS degree granted by Maharashtra University of Health Sciences, Nashik in respect of students being trained in various medical colleges in Maharashtra and the degree granted by the universities in the State i.e. Mumbai, Pune, Shivaji, North Maharashtra, Dr. Babasaheb Ambedkar Marathawada, Swami Ramanand Tirth Marathwada & Nagpur Universities.

First batch of students admitted under Maharashtra University of Health Sciences appeared in the final MBBS examination held by the university in Nov.,2002.

The Executive Committee also noted the decision taken by it at its meeting held in June,1998 that "No inspection is required where there is change of name and change of affiliation of the University or the college whose medical qualifications are already recognised and included in the 1st Schedule to the I.M.C. Act,1956 unless the Executive Committee decides otherwise".

Since MBBS degree granted by Mumbai, Pune, Shivaji, North Maharashtra, Dr. Babasaheb Ambedkar Marathawada, Swami Ramanand Tirth Marathwada & Nagpur Universities is already recognised and included in the First Schedule to the I.M.C. Act, the Committee decided to recommend to the Council that MBBS degree granted by

Maharashtra University of Health Sciences, Nashik be recognised for the purpose of its inclusion in the First Schedule being change of affiliating universities of the medical colleges in Maharashtra w.e.f. Dec.,2002 when the first batch passed the 1st MBBS examination.

27. **Request for grant of an additional attempt to appear in the 1st MBBS examination.**

Read : The matter with regard to grant of an additional attempts over & above 4 attempts to clear the 1st MBBS examination within 3 years from the date enrollment as prescribed in the Regulations of the Council in the Graduate Medical Education, 1997.

The Executive Committee noted that as per Regulations of the Council on Graduate Medical Education, 1997 “no student shall be permitted to join the Phase II (Para-clinical/clinical) group of subjects untill he has passed in all the Phase I (Pre-clinical) subjects for which he will be permitted not more than four chances (actual examination) provided four chances are completed in three years from the date of enrollment.”

It further noted that the matter with regard to grant of additional attempt who could not pass the 1st MBBS examination as prescribed in the above regulations was considered by the Committee at its meeting held on 10.5.1996 where it was decided that additional attempt may be granted to the candidates on their request provided the University has no objection for the same. As per the decision taken the additional attempts were being granted to the students on individual merits after getting the approval from the President.

It also noted that the Committee at its meeting held on 31.1.2002 after much deliberations decided that no change from the existing rules and regulations be accepted and the regulations with regard to not giving more than four chances (actual examination) provided four chances are completed in 3 years from the date of enrolment be followed. Accordingly, additional attempts to appear in the 1st MBBS examination is not being allowed now and a circular to this effect was sent to all the medical colleges/universities on 15.6.2002.

The Council is receiving many representations some of them even through Ministry of Health & Family Welfare for grant of additional attempts over and above 4 attempts representing that if additional attempts will not be granted the career of students will be jeopardized and further that some of the students have committed suicide as noted from an article published in Times of India newspaper in the Bangalore addition dated 02.10.2002.

In view of the above, the Executive Committee decided to recommend to the Council to delete the number of chances clause completely from the Graduate Medical Education Regulations as the same clause is not included for 2nd & 3rd Professional examinations.

28. **Eligibility of colour blind students for admission to MBBS course – Reg.**

Read : The recommendations of the Sub-Committee with regard to eligibility of colour blind students for admission to MBBS course.

The Executive Committee noted that a Sub-Committee consisting of Dr. Usha Sharma, Dr. S.B.Siwach, Dr.(Prof.) Sandeep Mithal, Dr. (Prof.) V.P. Gupta, and Dr. (Prof.) C.S. Dhull met in the Council office on 21.11.2002 and made the following recommendations:-

“The expert committee deliberated at length about the importance of normal colour vision to pursue various subjects in the curriculum of MBBS course. All the experts unanimously thought that the presence of normal colour vision was indispensable to acquire the desired competency of a MBBS doctor. The presence of good colour vision is also essential to pursue postgraduation in various disciplines of Medicine and

Surgery. Moreover, as the normal colour vision is essential all the services mentioned under the category “Technical” which included Indian Police Service, Indian Forest Service, Railway Engineering Service, Indian Railway Traffic Service, Posts on Marine establishment, Telegraph Engineering Services, etc., it is imperative that the doctor who conducts the medical exam of these individuals should also have normal colour vision. The main recommendations of the Committee were as follows:-

“The testing of colour vision must be conducted in respect of all the students for admission to MBBS course. The colour defective students should not be allowed to pursue the MBBS course as a normal colour vision is absolutely necessary for such a study.”

The Committee approved the above recommendations of the Sub-Committee and decided to refer the same to the General Body of the Council for its approval.

29. **Recommendations of the Sub-Committee to decide upon the Internship Training programme permitted in different hospitals consideration thereof.**

Read : The recommendations of the Sub Committee constituted by the Executive Committee at its meeting held on 31.10.2002 in the above matter.

The Executive Committee noted that a Sub-Committee as constituted by the Executive Committee to decide upon the internship training programme permitted in different hospitals met in the Council office on 29.11.2002 and made the following recommendations:-

“The Sub-Committee after detailed deliberations on this issue, decided to recommend following guidelines :-

1. The total number of beds in a hospital should be a minimum of 100 beds.
2. In any discipline, there must be at least 30 beds, i.e. one unit where such training can be permitted and these institutions must at least have the departments of Medicine, Surgery, Obst. & Gynaecology and Paediatrics before they can be considered for internship training. Out of the total beds, 33 beds must be free beds i.e. with free drugs and diet etc.
3. The hospital must have a regular Out Patient space and waiting hall.
4. Emergency services must be available round the clock and manned by at least one Casualty Medical Officer all the time.
5. There should be facilities for a Blood Bank with the capacity of at least 50 bottles of blood.
6. The hospital should have functional ambulance services.
7. Adequate library facilities with speciality journals also be available.
8. There should be adequate well furnished residential accommodation for interns with provisions for boarding and extra curricular activities.
9. Multi disciplinary academic facilities should be provided by the hospital.
10. The ancillary department of Pathology, Radiology, and Anaesthesiology manned by qualified specialists in the subject must also be available.
11. In one unit there should at least be two Consultants with Postgraduate qualifications and one medical officer.
12. In a 100 bedded hospital besides a unit of 30 beds in a discipline, with at least two Consultants with PG qualifications and one medical officer, two interns may be posted for the purpose of training.
13. The approval of the hospital by the MCI shall be given only after a thorough inspection which can be done after receiving a preliminary report of facilities provided by the institution.
14. If such hospitals are recognised for the purposes for training of interns, in the specialities available in the hospitals, the remaining part of the internship for which the facilities are not available in these hospitals has to be completed in the parent institution from where the student has qualified.”

The Committee accepted the above recommendations of the Sub-Committee with correction that under point No. 13 in first line the word ‘thorough’ be deleted.

30. **Teachers' Eligibility Qualifications – Counting of Teaching Experience of specialities graded doctors of A.M.C.**

Read : The recommendations of the Sub-Committee for counting of the Teaching Experience of specialities graded doctors of A.M.C.

The Executive Committee noted the recommendations of the Sub-Committee constituted by it at its meeting held on 31.10.202 to consider the matter with regard to counting of teaching experience of specialists graded doctors of A.M.C. and decided to defer the consideration of the matter for the next meeting.

31. **Discrepancies in the staff and equipment recommendation for various Departments.**

Read : The letter dt. 29.11.2002 received from the Prof. & Head Deptt. of Medicine Indira Gandhi Medical College, Shimla pointing out certain discrepancies with regard to staff and equipment as prescribed in the Recommendations of the Council on Minimum Standard Requirement for a medical colleges for 100 admissions annually.

The Executive Committee considered the letter dated 29.11.2002 received from the Prof. & Head Deptt. of Medicine, Indira Gandhi Medical College, Shimla pointing out certain discrepancies with regard to staff and equipment as prescribed in the Recommendations of the Council on Minimum Standard Requirement for a Medical College for 100 Admissions Annually and decided to form a Sub-Committee consisting of the following to examine the same and submit its recommendations:-

Dr. D.K. Sharma, Meerut
Dr. Mukesh Kumar Sharma, Jaipur

32. **Inclusion of Reproductive Health Issues and Family Planning Training in the Undergraduate and Post-Graduate Curriculum.**

Read : The letter dated 11.10.2002 from the Deputy Commissioner (RSS), Govt. of India, Ministry of Health & FW with regard to inclusion of Reproductive Health issues and Family Planning Training in the Undergraduate and Postgraduate curriculum.

The Executive Committee considered the letter dated 11.10.2002 from the Deputy Commissioner (RSS), Govt. of India, Ministry of Health & FW submitting therewith the recommendations made by the Committee of Experts as:-

- (1) compulsory short note on male sterilisation, specially No Scalpal Vasectomy or a long question on Recanalisation (micro-surgical Anastomosis of Vas) or Reproductive Health disorder be made compulsory in the postgraduate examination, and
- (2) during the surgical posting of the intern, he/she must compulsorily observe and perform vasectomy, specially No Scalpel Vasectomy. He/she must also during the rural posting, acquire skills for counselling men on family planning and reproductive health issues.

The Executive Committee agreed to include clause No.2 as suggested above in the undergraduate curriculum and not agreed with the suggestion given in clause No.1.

33. **Improving quality of Undergraduate Medical Education including Internship.**

Read : The letter dated 11.11.2002 from the Deputy Secretary, Govt. of Rajasthan requesting to approve the scheme proposed for improving quality of Undergraduate Medical Education including internship.

The Executive Committee considered the letter dated 11.11.2002 received from the Deputy Secretary, Govt. of Rajasthan proposing that 40% weightage be given to the marks obtained in Undergraduate Examination, 10% weightage be given to Internship and 50% weightage be given to marks obtained in Postgraduate Entrance Examination while considering the candidature for postgraduate admissions.

The Committee accepted the above proposal to be implemented uniformly in all States and not only for State of Rajasthan. However the matter be deliberated in the General Body for final decision.

34. **Standardisation of Digital Information to facilitate implementation of Tele Medicine systems using IT – Enabled services.**

Read : The matter with regard to Standardisation of Digital information to facilitate implementation of Tele Medicine systems using IT – Enabled services.

The Executive Committee considered the letter dated 22.8.2002 received from the Director, Ministry of Communications and Information Technology enclosing therewith the minutes of the second meeting of the “Committee for Standardisation of Digital Information to facilitate implementation of telemedicine system using IT – Enabled services” for views/comments of the Council in the matter. The Committee authorised the President to form a Committee of Experts to deliberate in the matter and submit its recommendations.

35. **Autopsy on models in the place of Human dead body by the Medical Students.**

Read : The matter received from the Director, Govt. of M.P. with regard to Autopsy on models in the place of Human dead body by the Medical Students.

The Executive Committee considered the letter dated 20.11.2002 from the Director, Medical Education, Govt. of Madhya Pradesh requesting to inform whether according to the regulations autopsy can be performed on the models in place of human's dead body by the Medical Students as has been done in the State of Gujarat.

The Committee decided to refer the matter to the General Body as it is a larger issue and needs deliberation at a larger forum.

36. **Recognition of Malar Hospital Limited, Chennai.**

Read : The inspection report 5.11.2002 for recognition of Malar Hospital Limited for compulsory rotating internship training.

The Executive Committee considered the Council Inspector's report (5.11.2002) and decided to recognise Malar Hospital Limited, Chennai for purpose of Compulsory Rotating Internship Training in the following subjects as under:-

General Medicine	-	3
General Surgery	-	3
Obstetrics/Gynae.	-	3

37. **Recommendation of the Sub-Committee with regard to requirement of extra staff in certain departments conducting postgraduate courses.**

Read : The recommendations of the Sub-Committee constituted by the Executive Committee at its meeting held on 31.10.2002 in the above matter.

The Executive Committee noted that a Sub-Committee was constituted by it at its meeting held on 31.10.2002 to consider the question of requirement of extra staff (as per DCI norms) for teaching of BDS students (in institutions having attached Dental Colleges/running BDS course) and made the following recommendations:-

“The Committee accepted the recommendations of the sub-Committee deciding that this is the prerogative of the Dental Council of India and not the Medical Council of India to decide regarding the quantum of the staff required for teaching medical subjects in a Dental College. The Committee further felt that if the Dental Council want any change in staffing pattern/qualification of teachers in Dental College/Dental Wing of the medical colleges granting BDS degrees for teaching medical subjects, may form Committee of their own along with members of the Medical Council of India i.e. one member from Executive Committee and one member from Postgraduate Committee for the said purpose.”

38. **C.W.P. No.3976/2002 filed by Dr. Raghunath Subbaramanaiah Kumar Vs. Major General (Retd.) S.P.Jhingon & Ors before the Hon'ble Delhi High Court.**

The Executive Committee decided to refer the matter to the General Body for its consideration.

39. **C.W.P. NO. 3260/2001 filed by Shri Jagdish Chand – Vs. – Medical Council of India & Anr. Before the Hon'ble Delhi High Court.**

The Executive Committee noted that MCI was fined Rs.3,000/- due to lapse of MCI Counsel Advocate, Mrs. Acharya in the above matter and decided that such instances should be avoided in future.

40. **To consider the matter where the students of Govt. Medical College, Amritsar were permitted to appear in the 1st Prof. MBBS examination only after completion of 5 months of study; comments of Baba Farid University of Health Sciences, Faridkot.**

The Executive Committee noted that the Council received a case of migration of one candidate Ms. Kranti Garg, from Govt. Medical College, Amritsar to Govt. Medical College, Patiala who was admitted at Govt. Medical College, Amritsar in 1st MBBS course in Feb.,2002 under CBSE quota and who was allowed to be appeared in the professional examination held by Baba Farid University of Health Sciences, Faridkot in July,2002.

The Committee further noted the comments sought by the office from the Registrar, Baba Farid University of Health Sciences, Faridkot in the matter where it has been informed that “the shifting on the basis of PMET-2000 waiting list was delayed due to a case pending in the Hon'ble Punjab & Haryana High Court and the movement of waiting list was done in the month of Feb.,2002. The candidates admitted against CBSE quota in other states were also eligible for appearing in PMET-2001 and hence such students were also on the PMET-2001 waiting list. Further, the students who were shifted/admitted to MBBS course on the basis of PMET-2001 waiting list in February,2002 were allowed to appear in the 1st Prof. Examination held in July,2002 on the certification from the Principals of the respective institutions that the students have completed the requisite number of lectures for appearing in the First Professional examination”.

As per Regulations of the Council on Graduate Medical Education,1997 First Phase consists of two semesters of six months each and a candidate cannot be allowed to appear in the 1st professional examination till he/she completes 240 teaching days.

The Committee noted that Baba Farid University of Health Sciences, Faridkot has committed violation of the prescribed regulations and decided to write letter to the Vice-Chancellor, Baba Farid University of Health Sciences, Faridkot; Secretary (Health), Govt. of Punjab and Director, Medical Education, Govt. of Punjab directing them to take immediate corrective steps failing which the Council will be constrained to initiate action u/s 19 of the I.M.C. Act,1956.

41. **To change the name of (Santo Tomas University Manila, Philippines) to Pontifical and Royal University of Santo Tomas, Manila. The Catholic University of the Philippines.**

The Executive Committee noted the change of name of Santo Tomas University Manila, Philippines to Pontifical and Royal University of Santo Tomas, Manila, The Catholic University of the Philippines.

42. **Recognition of the medical course in English Language – Odessa State Medical University – Correction in the date of the Executive Committee given in the decision.**

The Executive Committee noted its following decision taken at its meeting held on 05.08.2002 with regard to recognition of the medical course in English Language conducted by the Odessa State Medical University:-

“The Executive Committee agreed for the conduct of M.D.(Physician) medical course in English language instead of Russian language being conducted by the Odessa State Medical University as per its earlier decision dated 14.7.2002 which was taken for Russian People’s Friendship University.”

The above decision of the Committee be read corrected as under:-

“The Executive Committee agreed for the conduct of M.D.(Physician) medical course in English language instead of Russian language being conducted by the Odessa State Medical University as per its earlier decision dated 08.09.2000 which was taken for Russian People’s Friendship University.”

43. **Removal of the name of deceased person from the Medical Register.**

Read : The letter dated 10.10.2002 received from the Registrar, Rajasthan Medical Council intimating that Dr. Rajesh Kumar Aggarwal (Regn.No.20397) has expired and his name has been removed from the Register of the Registered Medical Practitioner.

The Executive Committee noted the letter dated 10.10.2002 received from the Registrar, Rajasthan Medical Council, Jaipur intimating that Dr. Rajesh Kumar Aggarwal (Regn.No.20397) has expired and his name has been erased from the register of Registered Medical Practitioners. The Committee decided to remove the name of above mentioned doctor from the Indian Medical Register and also to give intimation in this regard to all the State Medical Councils in the country.

44. **To note the conversion of Rajendra Medical College & Hospital, Ranchi into an Autonomous Institution – to be known as “Rajendra Institute of Medical Sciences” w.e.f. 15/08/2002.**

The Executive Committee noted that vide notification No. S.O.137(29)/H./Ranchi, dated 27.7.2002 issued by Govt. of Jharkhand, Rajendra Medical College & Hospital, Ranchi has been converted into an Autonomous Institution to be known as “Rajendra Institute of Medical Sciences” w.e.f. 15/08/2002.

45. **To note the LOP/letter of renewal of permission issued by the Central Govt. for establishment of medical colleges/ increase of seats.**

The Executive Committee noted the LOP/letter of renewal of permission issued by the Central Govt. for establishment of medical colleges/ increase of seats as under and also observed that in many of the cases the Central Govt. has issued LOP/renewed the permission against the recommendations of the Executive Committee which is against the regulations and the matter be taken up with the Central Govt. accordingly:-

Name of the Medical College	Date of LOP/renewal of permission.
M.R. Medical College, Gulbarga.	Letter of renewal of permission for admission of 2 nd batch of MBBS students against the increased intake i.e. from 100 to 150 for the academic session 2002-2003 dated 16-10-2002
Goa Medical College, Goa.	Letter of renewal of permission for admission of 2 nd batch of MBBS students against the increased intake i.e. from 70 to 100 for the academic session 2002-2003 dated 08-10-2002
N.K.P. Salve Instt. of Medical Sciences, Nagpur	Letter of renewal of permission for admission of 2 nd batch of MBBS students against the increased intake i.e. from 50 to 100 for the academic session 2002-2003 dated 13-11-2002.
B.S. Medical College, Bankura	Letter of renewal of permission for admission of 2 nd batch of MBBS students against the increased intake i.e. from 50 to 100 for the academic session 2002-2003 dated 14-11-2002.
Govt. Medical College, Aurangabad	Letter of renewal of permission for admission of 5 th batch of MBBS students against the increased intake i.e. from 100 to 150 for the academic session 2002-2003 dated 14-11-2002.
North Bengal Medical College, Darjeeling	Letter of renewal of permission for admission of 2 nd batch of MBBS students against the increased intake i.e. from 50 to 100 for the academic session 2002-2003 dated 14-11-2002.
NHL Municipal Medical College, Ahmedabad.	Letter for provisional renewal of permission for admission of 3 rd batch of MBBS students against the increased intake i.e. from 100 to 150 for the academic session 2002-2003 dated 29-10-2002.
K.A.P. Viswanathan Govt. Medical College, Trichy.	Letter of renewal of permission for admission of 5 th batch of 100 students for the academic session 2002-2003 dated 13-11-2002.
Municipal Corporation Medical College, Muglisara, Surat.	The recommendation of the Executive Committee renewing the permission for 3 rd batch of Students was send to the Central Govt. vide Council Letter dated. 01 st Nov. 2002. However the Central Govt. vide Letter dated 29/11/2002 renewed the permission provisionally before the decision was communicated to them.
C.U. Shah Medical College, Surendranagar, Gujarat.	Letter of renewal of permission for admission of 3 rd batch of 100 students for the academic session 2002-2003 dated 13-11-2002.

Medical College at Mehaboobnagar	Letter of renewal of permission for admission of 4 th batch of 100 students for the academic session 2002-2003 dated 30-09-2002.
Sikkim Manipal Instt. of Medical Sciences, Gangtok.	Letter of renewal of permission for admission of 2 nd batch of 100 students for the academic session 2002-2003 dated 21-11-2002 which is against the recommendation of the E.C.
Vardhman Mahavir Medical College, Safdarjung Hospital, New Delhi.	The Central Govt. vide its Letter dated 28/10/2002 have renewed the permission for admission for the second batch of 100 students during the academic year 2002-2003 of its own.
Malankara Orthodox Syrian Church Medical College at Kolencherry.	LOP dated 28 th October, 2002 for 100 students during 2002-03.
Katuri Medical College & Hospital at Guntur.	LOP dated 23 rd October, 2002 for 100 students during 2002-03.
Navodaya Medical College, Raichur	LOP dated 22 nd October, 2002 for 100 students during 2002-03.
Pondicherry Instt. of Medical Sciences, Pondicherry.	LOP dated 14 th November, 2002 for 100 students during 2002-03.
Prathima Instt. of Medical Sciences, Nagunur, Karimnagar.	LOP dated 12 th November, 2002 for 150 students during 2002-03, which is against the recommendations of the E.C.
P.E.S. Instt. of Medical Sciences & Research, Kuppam	LOP dated 12 th November, 2002 for 150 students during 2002-03 which is against the recommendations of the E.C.
Swami Vivekanand Instt. of Medical Sciences and Research at Valia.	LOP dated 15 th November, 2002 for 100 students during 2002-03 which is against the recommendations of the E.C.

46. **Minutes of the Finance Committee – Approval of.**

The Executive Committee approved the minutes of the Finance Committee meeting held on 4th Dec., 2002.

47. **Appointment of Inspectors for carrying out the inspections for establishment of new Medical Colleges/increase of seats/recognition/periodical inspection.**

The Executive Committee authorised the President (Acting) to appoint inspectors for carrying out various inspections in respect of applications received by the Medical Council of India at undergraduate and postgraduate level from the Panel of Inspectors prepared by the members of the Adhoc Committee as appointed by the Hon'ble Supreme Court vide its order dated 20.11.2002 and the Executive Committee respectively.

48. **Appointment of Inspectors for carrying out the inspection for renewal of permission for the medical colleges established u/s 10A of the IMC Act, 1956/increase of seats u/s 10A of the IMC Act, 1956.**

Decision is recorded under item No. 47.

49. **Appointment of Inspectors for carrying out the inspection of postgraduate medical courses – regarding.**

Decision is recorded under item No. 47.

50. **Continuance of recognition of MBBS degree in respect of students being trained at D.Y. Patil Medical College, Kolhapur.**

Read : The inspection report (17th & 18th Dec., 2002) for continuance of recognition of MBBS degree in respect of students being trained at D.Y. Patil Medical College, Kolhapur.

The Executive Committee noted that in compliance of the order passed by the Hon'ble High Court of Judicature at Bombay 12.9.2002 in W.P.No.2324/2000 between D.Y.Patil Medical College, Kolhapur Vs. State of Maharashtra & Others an inspection of D.Y.Patil Medical College, Kolhapur was carried out on 17th & 18th Dec.,2002, which reads as under:-

“Medical Council of India is directed to submit to this court the report in respect of D.Y.Patil Medical College particularly relating to objection column Nos. 5,9,11 and 12 of the report dated 28th & 29th January,2002. Medical Council of India shall also clarify whether the present facilities for D.Y.Patil Medical College are as per the norms.”

The Committee decided to obtain legal opinion whether only the inspection report has to be sent to the Hon'ble court as per the above court order or the inspection report be sent with the recommendations of the Executive Committee. In case the comments of the Executive Committee are required to be furnished, then the Committee decided that it was an appropriate case for issue of show cause notice for the purpose of de-recognition in view of deficiencies pointed out by the Council Inspectors in their inspection report especially the deficiency in the number of teaching beds.

51. **Continuance of recognition of MBBS degree in respect of Medical Colleges in Bihar State.**

Read : The compliance report received from Patna Medical College, Nalanda Medical College, Patna, S.K. Medical College, Muzaffarpur, J.N. Medical College, Bhagalpur, and Darbhanga Medical College, Laheriasarai on the deficiencies pointed out in the periodical inspection report carried out in respect of each medical college.

The Executive Committee decided to verify the compliance received from Patna Medical College, Nalanda Medical College, Patna, S.K. Medical College, Muzaffarpur, J.N. Medical College, Bhagalpur, and Darbhanga Medical College, Laheriasarai on the deficiencies pointed out in the periodical inspection report carried out in respect of each medical college and authorised the President (Acting) to appoint inspectors in term of decision recorded under item No. 47.

52. **Increase of MBBS seats in Govt. Medical Colleges in Andhra Pradesh.**

Read : The matter with regard to increase of MBBS seats in Govt. Medical Colleges in Andhra Pradesh.

The Executive Committee perused the note prepared by the office for increase of MBBS seats in the following Govt. Medical Colleges in Andhra Pradesh request of which was received u/s 10A of the I.M.C. Act,1956:-

1. Rangarya Medical College, Kakinada (From 100 to 150)
2. Kakatiya Medical College, Warangal (From 100 to 150)
3. S.V.Medical College, Tirupathi (From 100 to 150)
4. Kurnool Medical College, Kurnool (From 130 to 150)

The Committee further noted that the above medical colleges have already admitted students against the increased intake during the year 2002-03 without getting the permissions renewed by the Central Govt.

The Executive Committee therefore decided to initiate action as per provisions of Section 10B of the IMC Act,1956 in respect of excess admissions made by each medical college during the year 2002-03 and the institution authorities be directed to send a merit

wise list to the Council immediately. Moreover, it is observed that in the past also the State of Andhra Pradesh had admitted students in their colleges without obtaining permission from Govt. of India violating the Section 10A of the I.M.C. Act,1956. In the past the Govt. of India had taken up the matter with the State Govt. and was constrained to reduce proportionate number of admissions phase-wise in Kurnool Medical College, Kurnool and Kakatiya Medical College, Warangal. Medical Council of India had also taken action u/s 10B of the I.M.C. Act,1956 for admitting excess number of students without statutory permission from Govt. of India in Rangarya Medical College, Kakinada. The Executive Committee, therefore, noted that the State of Andhra Pradesh inspite of action taken u/s 10B as well as proportionate reduction of intake capacity commensurate with the excess admissions made, have still continued to admit the students in excess without obtaining permission from Govt. of India.

In view of this, the Committee was of the considered opinion that the Central Govt. may be requested to take up this matter seriously with the Secretary (Medical Education) and Director, Medical Education, Govt. of Andhra Pradesh to take steps to rectify this violation immediately failing which the Council will be constrained to recommend to the Central Govt. for taking necessary action as per the provisions of Section 19 of the IMC Act,1956 against the erring medical colleges.

53. **Recognition of MBBS and Postgraduate courses awarded by Chhatrapati Shahuji Maharaj Medical University, Lucknow in respect of students being trained at K.G. Medical College, Lucknow.**

Read : The matter with regard to recognition of MBBS and Postgraduate courses awarded by Chhatrapati Shahuji Maharaj University, Lucknow in respect of students being trained at K.G. Medical College, Lucknow.

The Executive Committee considered the letter dated 9.10.2002 received from the Vice-Chancellor, Chhatrapati Shahuji Maharaj Medical University, Lucknow making request u/s 11(2) of the I.M.C. Act,1956 for recognition of MBBS and various postgraduate medical courses granted by the said university.

From the letter of the Vice-Chancellor, the Committee noted that Chhatrapati Shahuji Maharaj Medical University, Lucknow has been established by the Govt. of U.P. by upgrading King George Medical College, Lucknow. This University came into existence on 16.9.2002 by the Uttar Pradesh Chhatrapati Shahuji Maharaj Medical University Act,2002 – “to provide for the establishment of a Medical University by the name of Chhatrapati Shahuji Maharaj Medical University by transfer of the King George’s Medical College and the Gandhi Memorial and Associated Hospitals from the University of Lucknow to the said Medical University and for matters connected therewith”.

The Executive Committee also noted the decision taken by it at its meeting held in June,1998 that “No inspection is required where there is change of name and change of affiliation of the University or the college whose medical qualifications are already recognised and included in the 1st Schedule to the I.M.C. Act,1956 unless the Executive Committee decides otherwise”.

Since K.G.Medical College, Lucknow is already recognised under Lucknow University for the award of MBBS and various postgraduate qualifications which are included in the First Schedule to the I.M.C. Act,1956, the Committee decided to recommend to the Council that MBBS and various postgraduate qualifications in respect of students being trained at King George’s Medical College be recognised under Chhatrapati Shahuji Maharaj Medical University, Lucknow w.e.f. 16.09.2002 being change of affiliation of the University.

54. **Conduct of Screening Test for Indian nationals with foreign Medical qualifications for the purpose of their registration in India to practice medicine.**

Read : The letter dated 30/12/2002 received from the Central Govt., Ministry of Health & F.W. with regard to amendments in the Screening Test Regulations, 2002.

The Executive Committee considered the letter dated 30.12.2002 received from the Under Secretary, Govt. of India, Ministry of Health & Family Welfare wherein a reference has been made to minutes of the meeting taken by the Joint Secretary in the Ministry on 22.10.2002 with regard to conduct of screening test for Indian nationals holding foreign medical qualifications.

The Committee further considered the following amendments suggested to be carried out in the Screening Test Regulations, 2002 by the Central Govt.:-

1. Allowing students unlimited number of chance to appear in the Screening Test.
2. In case a student fails in one or two of the three papers, he shall be required to appear and pass only in those papers while making the subsequent attempts.

The Committee upon deliberation decided to recommend to the General Body that the chances to appear in the examination be increased from 3 to 4 and the regulations be suitably amended to incorporate this clause. It may also be suggested in the regulations that these 4 chances be completed in 3 years. However, the Committee did not agree for the second suggestion of the Central Govt. i.e. In case a student fails in one or two of the three papers, he shall be required to appear and pass only in those papers while making the subsequent attempts.

55. **Use of Alternatives in study of the effect of drugs.**

Read : The letter dated 26th Dec., 2002 received from the Director, Ministry of Environment and Forests, Govt. of India with regard to use of alternative in the study of the effect of drugs.

The Executive Committee considered the letter dated 26th Dec., 2002 received from the Director, Ministry of Environment and Forests, Govt. of India with regard to use of alternative in the study of the effect of drugs and decided to form a Sub-Committee as under to deliberate in the matter and submit its recommendations for further consideration:-

Dr. Ved Prakash Mishra, Chairman, PG Committee
Dr. A.C. Borah
Dr. S.B. Siwach

56. **Contempt petition (C.) No.344/2002 in W.P.(C.) No.8/2001 – Ashish Pratap Singh Vs. Dr. Mrs. M. Sachdeva & Ors.**

The Executive Committee noted that in compliance of the order passed by the Hon'ble Supreme Court order dated 11.3.2002 in the W.P.(C) No. 8/2001 between Ashish Pratap Singh & Ors. Vs. Union of India & Ors., with regard to adjustment of MBBS students of Azamgarh Medical College in the recognised Govt. Medical Colleges in U.P., a letter dated 17.07.2002 was sent to the Director General, Medical Education, Govt. of U.P. to take an appropriate step for compliance/implementation of the judgement of the Hon'ble Supreme Court and to consider granting the admission to the petitioners before the Hon'ble Supreme Court, within the annual intake capacity fixed for these colleges.

On being informed by the Director General of Medical Education State of U.P. that the admissions in the 1st year of the MBBS course in the State of UP for the

academic session 2002-03 had been completed in August, September, 2002, the Hon'ble Supreme Court on 23.12.2002 passed the following order:-

- “1. The MCI and the Directorate General Medical Education of U.P. to work out a solution in such a manner that all the students be accommodated in respect of whom directions have been given in these matters in respective colleges in the second professional examination.
2. The seats that have to be provided to these students shall be allocated in different colleges after finding out the total infrastructure available in each of the college which shall be adjusted over the time by reducing the intake in the next years so that the overall strength of the college does not get enhanced and the infrastructure is available to all the students within the intake allocated to the college. For example, if the intake of the college is 50 in the first year, all of them may not necessarily get through to the second year and so on. With resultant vacancies as long as the admissions are within the total intake of such college though in some year/class intake is slightly less or more the MCI shall deem that its regulations have been fulfilled.
3. The MCI and the Directorate General Medical Education of UP shall comply with this process and make a report to this Court on 14.1.2003.

List the matter on 14.1.2003 the Director General, Medical Education of U.P. shall be present in person on that date.....”

The above mentioned order was sent to the Director General, Medical Education, State of U.P. along with the MCI letter dated 27.10.2002. Pursuant thereto the Director General Medical Education, U.P. vide his letter dated 01.01.2003 has informed that for the present academic session 2002-2003, there are following vacancies in the Govt. Medical Colleges in the State of U.P. in the 2nd year of the MBBS course to which the students involved in the present case can be admitted.

FIRST LIST OF STUDENTS OF MEDICAL COLLEGE AZAMGARH -

Sl.No.	Name of the Student	Marks obtained in Ist Prof.	Allotted name of the college.
1.	Meena Arora	445	Medical College, Kanpur
2.	Vijay Kr. Dwivedi	440	Medical College, Kanpur
3.	Shailey Singh	438	Medical College, Kanpur
4.	Ashish Pratap Singh	434	Medical College, Kanpur
5.	Surya Kant Ojha	425	Medical College, Kanpur
6.	Arpita Porwal	401	Medical College, Kanpur
7.	Navnit Kumar	394	Medical College, Kanpur
8.	Abhinav Aggarwal	391	Medical College, Kanpur
9.	Rajiv Sharma	388	Medical College, Kanpur
10.	Nupur Vajpai	382	Medical College, Kanpur
11.	Sourabh Tiwari	380	Medical College, Kanpur
12.	Brahma Nand Sharma	379	Medical College, Kanpur
13.	Navnit Rohal	378	Medical College, Kanpur
14.	Priyanka Singh	371	Medical College, Kanpur
15.	Shvetank Goyal	370	Medical College, Kanpur
16.	Harender Singh Bansal	368	Medical College, Agra
17.	Anurag Pd. Verma	366	Medical College, Agra
18.	Rahul Singh	366	Medical College, Agra
19.	Prashant Kr. Singh	365	Medical College, Agra
20.	Yogita Agarwal	361	Medical College, Agra
21.	Vineet Kr. Modi	360	Medical College, Agra
22.	Mohd. Asif Gufan Khan	360	Medical College, Agra
23.	Ajay Kumar Garg	354	Medical College, Agra
24.	Anuj Gangwar	353	Medical College, Agra

25.	Sandeep Kr. Srivastav	353	Medical College, Agra
26.	Sharad Chand Kesari	353	Medical College, Allahabad
27.	Shuchi Tripathi	340	Medical College, Allahabad
28.	Varun Kr. Singh	335	Medical College, Allahabad
29.	Navin Prakash Verma	332	Medical College, Allahabad
30.	Poonam Gautam	323	Medical College, Allahabad

LIST OF STUDENTS OF MEDICAL COLLEGE AZAMGARH WHO PASSED 1ST PROFESSIONAL EXAMINATION IN SECOND ATTEMPT –

Sl.No.	Name of the Student	Marks obtained in Ist Prof.	Allotted name of the college.
1.	Alok Kr. Singh	364	Medical College, Allahabad
2.	Shashank Mathur	336	Medical College, Allahabad
3.	Tariq Akhtar	329	Medical College, Meerut
4.	Jyoti Singh	325	Medical College, Meerut
5.	Richa Ojha	322	Medical College, Meerut
6.	Arvind Kr. Kamboj	315	Medical College, Meerut
7.	Arun Kumar	312	Medical College, Meerut
8.	Pramod Kr. Dubey	306	Medical College, Meerut
9.	Shailja Ojha	305	Medical College, Meerut
10.	Dinesh Kr.	302	Medical College, Meerut
11.	Shailbala Mishra	300	Medical College, Meerut
12.	Richa Shukla	295	Medical College, Meerut
13.	Sushma	288	Medical College, Meerut
14.	Rupesh Rai	281	Medical College, Meerut
15.	Shamim Akhtar	278	Medical College, Jhansi
16.	Sachin Katariya	273	Medical College, Jhansi
17.	Dharmender Mani Tripathi	266	Medical College, Jhansi
18.	Deepak Sarswat	252	Medical College, Gorakhpur
19.	Vineet Kumar	249	Medical College, Gorakhpur
20.	Avnish Dwivedi	241	Medical College, Gorakhpur

The Executive Committee considered the above mentioned order dated 23.12.2002 passed by the Hon'ble Supreme Court wherein it has been clearly stipulated that though all the students be adjusted for the 2nd year of the MBBS course but the same shall be on the condition of an adjustment over time by reducing the intake in the next year so that over all strength of the college does not get enhanced and the infrastructure is available to all the students within the intake allocated to the college.

The Executive Committee examined the proposal of the Director General of Medical Education, State of U.P. in the light of the above mentioned directions of the Hon'ble Supreme Court and found that if the proposal of the State of UP is accepted then only the 1st direction be complied with but the 2nd direction of the Hon'ble Supreme Court would not be complied with i.e. there would be any reduction in the intake capacity in the 1st year of the MBBS in the present academic session as the admission in the Govt. Medical Colleges in the State of U.P. have already been complied with and the course has already commenced.

The Executive Committee further noticed the judgement of the Hon'ble Supreme Court in the case of MCI Vs. Madhu Singh and Ors. – (2002) 7 SCC 258 wherein this Hon'ble Court has laid down that there cannot be any mid-session admission.

In the light of the above and considering all the facts and directions issued by the Hon'ble Supreme Court, the Executive Committee considered it appropriate to suggest to the Director General of Medical Education, State of U.P. that the order of the Hon'ble Supreme Court would be possible to be complied with if the students involved in the present case are granted admissions in the coming academic session of 2003-2004 starting from July-August 2003 by adjusting them in the 2nd year of the MBBS course and reducing the same number of admissions in the 1st year of the MBBS course in the

admissions to be made in the academic session 2003-2004 in the Govt. Medical College in the State of U.P.

57. **Petitions for Special Leave to appeal (Civil) No.21999-22004 of 2002 from the judgement and order dated 1/10/2002 in DBCSA 419/2002, DBCSA 499/2002, DBCSA 652/2002, DBCSA 1236/2002 DBCSA 1237/2002 of the High Court of Rajasthan at Jaipur between Secretary, Ministry of Health and Welfare & Anr. (MCI) Vs. Indian Medical Trust & Ors.**

The Executive Committee noted the petitions for Special Leave to appeal (Civil) No.21999-22004 of 2002 from the judgement and order dated 1/10/2002 in DBCSA 419/2002, DBCSA 499/2002, DBCSA 652/2002, DBCSA 1236/2002 DBCSA 1237/2002 of the High Court of Rajasthan at Jaipur between Secretary, Ministry of Health and Welfare & Anr. (MCI) Vs. Indian Medical Trust & Ors.

58. **Matter regarding Shri C.S.P. Anka Toppo, student of 1989 batch of All India Institute of Medical Sciences, New Delhi case no.1754/30/2000-2001/FC before the Hon'ble National Human Rights Commission.**

Read : The matter regarding Shri C.S.P. Anka Toppo, student of 1989 batch of All India Institute of Medical Sciences, New Delhi case no.1754/30/2000-2001/FC before the Hon'ble National Human Rights Commission.

The Executive Committee while considering the matter regarding Shri C.S.P. Anka Toppo, a visually handicapped candidate of 1989 batch of All India Institute of Medical Sciences, New Delhi case No. 1754/30/2000-2001/FC before the Hon'ble National Human Rights Commission noted that he has been allowed by the AIIMS to appear in the final MBBS examination and now is undergoing internship training.

The Committee further noted that the Hon'ble Human Rights Commission desired that the Medical Council of India should also work out the modalities for examining blind students in light of experience of AIIMS in the case of Shri C.S.P. Anka Toppo.

The Executive Committee decided to form a Sub-Committee consisting of the following members to work out the modalities and submit its report to place the same before the Hon'ble National Human Rights Commission on 27.1.2003.

Dr. J.N. Pandey, AIIMS, New Delhi.
Dr. K. Annand Kannan, Chennai.
Dr. H.K. Tiwari, AIIMS, New Delhi.

59. **Regularisation/approval of migration of students allowed by Maharshi Dayanand University, Rohtak in April, 1998.**

Read : The matter with regard to regularisation/approval of migration of students allowed by Maharshi Dayanand University, Rohtak in April, 1998.

The Executive Committee noted that it at its meeting held on 24.4.2002 considered the matter of regularisation/approval of migration of following students allowed by Maharshi Dayanand University, Rohtak in April,1998 in pursuance of the order passed in Civil Suit No.228 of 1999/2001 by the Court of Civil Judge (Sr. Division), Rohtak and decided to allow migration as a one time measure and not to be quoted as a precedence.

1. Suman Malik from Medical College, Baroda (Gujarat)
2. Chakitan Singh from Kasturba Medical College, Mangalore
3. Sanjay Garg from Kasturba Medical College, Mangalore
4. Sundeep from ACPM Medical College, Dhule
5. Mohit Singhal from Silchar Medical College, Silchar
6. Ramandeep Virk from Dr. V.M. Medical College, Solapur

The Committee further noted that subsequently on receipt of a request from the authorities of university to regularise the migration of Shri Amit Jawa of Bharti Vidyapeeth Medical College, Pune in place of migration of Ms. Suman Malik of Medical College, Baroda, stating therein that Ms. Suman Malik had not joined the institution at Rohtak, the matter was again considered by the Committee twice and the Committee had not agreed for this migration.

The Committee now considered the letter dated 19.12.2002 from the authorities of Maharshi Dayanand University, Rohtak stating therein that migration of Shri Amit Jawa was allowed by the University vide its letter dated 10.7.1998. The Hon'ble Court of Civil Judge (Sr.Division), Rohtak vide its decision dated 15.2.2002 had allowed the migration of Shri Amit Jawa along with others and the Hon'ble court passed ".....a decree of permanent injunction restraining the defendants from cancelling the migration of the plaintiffs to PGIMS, Rohtak and preventing them from prosecuting their studies for taking the professional examination of MBBS course along with other candidates"..... The Hon'ble court further passed "a decree for mandatory injunction", directing "the defendants to register the names of the plaintiffs in their rolls as a regular student, with all consequential benefits including declaration of results, issuing of marksheets, degree etc. on completion of the MBBS course".....

The authorities of University in the above quoted letter have requested to consider the migration of Shri Amit Jawa so that no more hardship is caused to the student. The migration of the six candidates including Shri Amit Jawa has already been accepted by the Hon'ble Court.

In view of above, the Executive Committee decided to regularise/approve the migration of Shri Amit Jawa from Bharti Vidyapeeth Medical College, Pune to PGIMS, Rohtak allowed by the authorities of M.D.University, Rohtak in the year 1998. However, it should not be quoted as a precedence.

60. Purchase of Laptop Computers.

The Executive Committee approved the procurement of three Laptop Computers for office use and authorised the Secretary to constitute a Purchase Committee for the same.

61. Selection and Departmental Promotions in the office of the Medical Council of India.

The Executive Committee approved the selection and appointment of Lt. Col. (Dr.) A.R.N. Setalwad as Whole-time Inspector in the Council office.

The Committee also approved the following promotions made as per recommendations of the Department Promotion Committees at their meetings held on 10/12/2002 & 12/12/2002 respectively:-

Date of the meeting	No.	Name of the Employee	Category	Promoted from the post	Promoted to the post of
12/12/2002	1.	Sh. Lal Singh	General	Superintendent	Section Officer
	2.	Mrs. S. Savitha	General	Head Clerk	Superintendent
	3.	Sh. Babu Ram	S.C.	Head Clerk	Superintendent
10/12/2002	1.	Sh. Kadam Singh	General	L.D.C.	U.D.C.
	2.	Mrs. Pushpa Rai	S.C.	L.D.C.	U.D.C.

The Executive Committee also decided that the vacant posts of Whole-time Inspectors, Additional Secretary etc. be filled up at the earliest in the administrative interest.

The Committee constituted the Selection Committees as follows:-

Whole-time Inspector	-	Dr. L.S. Chawla Dr. Indrajit Ray Dr.(Mrs.) Usha Sharma
Additional Secretary and Joint Secretary	-	Dr. D.K. Sharma Dr. Ved Prakash Mishra
Assistant Secretary	-	Dr. Ajay Kumar Dr. B.P. Dubey

62. **Establishment of MVJ Medical College, Bangalore – Renewal of permission regarding.**

Read : The letter dated 03.01.2003 forwarding therewith a copy of the inspection report on the inspection carried out by a team constituted by the Ministry for verification of the compliance submitted by the authorities of M.V.J. Medical College, Bangalore with regard to MCI inspection report of July,2002 along with a copy of the compliance after the above inspection was carried out .

The Executive Committee on going through the inspection report submitted by the inspection team constituted by the Central Govt. consisting of namely Shri Rajesh Bhushan, Director, Ministry of Health & F.W., Department of Health; Dr. Y.N. Rao, DDG(M), DGHS and Dr. V. Kanagaraj, Member, MCI (Govt. of India's nominee) along with the compliance as forwarded by the Central Govt. noted that -

1. The three member Committee constituted by the Central Govt. to verify the compliance report submitted by the authorities of MVJ Medical College & Research, Bangalore on the Council inspection report dated July, 2002, carried out its inspection of the said college on 15th & 16th Dec. 2002 and submitted its report to the Govt. of India. Consequent to this inspection report, the college authorities have also submitted a representation dated 29th Dec., 2002 giving further compliance.
2. On going through the verification report of the three member committee, it is observed as under :-
 - a) As regards the affiliation by the Rajiv Gandhi University of Health Sciences, the Syndicate of the University has only resolved that continuation of affiliation be granted to the existing students. For the admissions for 2002-03, the college was directed to await for further orders from Govt. of India. The University also decided to await the action by MCI in the matter. The perusal of this letter makes it clear that the University has not granted the continuation of affiliation for the new admissions for the year 2002-03.
 - b) The land is in three pieces separated by National Highway No.4 and a village road which has already been reported in the earlier inspection reports carried out in Oct. 2001 and July 2002. This is against the regulations prescribed for the qualifying criteria and therefore is not acceptable and the position remains the same.
 - c) As per the statement made by the college authorities and as for the agreement between L&T (Contractor) and college authorities, the construction of the building of the college and hospital would be completed only by Oct. 2004. As per the time bound programme, as furnished by L&T and the college authorities, the complete possession of the buildings would have been handed over in October 2004. However, perusal of this time bound programme shows that in the same programme it was envisaged that work of the 1st floor slab would be completed by Nov. 2002 and 2nd floor slab would be completed by Dec. 2002. However, as the

construction work has commenced on 16th Nov., 2002 only, it appears that the work is likely to be delayed as the time bound schedule upto Dec., 2002 as envisaged by L & T and by the college authorities and as submitted to the inspection team, has not been maintained till date.

- d) As on date, the basic departments, administrative offices, hostels, etc. are still functioning from separate buildings located inside the Engineering college campus and the position remains same and these deficiencies have not been removed.
- e) As on date, the institute does not own any functional hospital. The fact was reported in earlier inspections also. The institution has attached HAL and ITI hospitals for teaching purposes. Distance between these two hospitals is 8 kms.
- f) No details of the clinical material or the work out put in the last six months has been shown, or submitted in the inspection report. The clinical material data available for the earlier inspections show that the bed occupancy at HAL hospital ranges from 57% - 73% and at ITI hospital from 30% - 40% which is too less. The number of deliveries is about 15 per month at ITI hospital which is also too less.
- g) The Medical Superintendents of the HAL & ITI hospitals have informed the inspection team that the quality of services rendered by them has improved as a result of association of the teaching faculty provided by the college authorities. No quantifiable data in terms of bed occupancy, lab. investigations, x-ray, number of deliveries, etc. has been attached to verify the claim whether the clinical material has increased or not. In absence of quantifiable data, it is difficult to accept the claim of the Medical Superintendents.
- h) The shortage of teaching staff is as under :-
 - i) Professor-1 (Forensic Medicine-1)
 - ii) Associate Professor – Nil
 - iii) Assistant Professor/Lecturer – 5 (TB & Chest-1, Psychiatry-1, Obst. & Gynae.-1, Radio-diagnosis-1, Dentistry-1). The Lecturer in Anatomy who was absent on maternity leave has been considered as a staff.
 - iv) Tutor/Sr. Residents – 5 (Anatomy-1, Physiology-1, Medicine –2, Dentistry-1)
 - v) Jr. Residents – 6 (Medicine-1, Surgery-4, Ophthalmology-1)

Total deficiency of faculty - 6 (i.e. 8.22%)
 Total deficiency of Residents – 11 (i.e. 19.30%)

It is also reported that the following staff members were on leave :-

- i) Dr. L. Thirunavukkarasu, Professor of Forensic Medicine (who joined on 03-12-02).
- ii) Dr. Sridhar, HOD of Medicine, who had gone to Calcutta to attend a conference.
- iii) Dr. Vinod Joseph, Professor of Radiology, had gone on official leave.

Although no formal orders sanctioning leave have been attached, while calculating staff shortage, Dr. Sridhar and Dr Joseph who were away on official work have been considered as staff of the college. However, Dr. Thirunavukkarasu, Professor of Forensic Medicine, who has joined only on 3rd Dec., 2002 and who has remained absent on the day of inspection and no formal leave sanctioning orders has been issued, cannot be accepted as staff. Similarly, the residents who were absent on the day of inspection and for whom leave sanctioning orders have not been attached, cannot be considered as staff members.

- iv) The staff members of the clinical departments working at HAL/ ITI hospitals have only been listed showing their names and designations. No further details of experience, qualifications, etc. are available. It is also not clear whether they are staff members of the college or of the respective hospitals.

3. The following deficiencies are still persisting :-
- i) The lecture theatres are level type instead of gallery type.
 - ii) Hostel facilities for Residents and Nursing staff are available only partially at HAL & ITI hospitals. As per the report of the inspecting team, accommodation for 15 Residents have been provided at HAL hospital and 6 Residents at ITI hospital, i.e. total accommodation of 21 Residents has been provided at both these hospitals as combined to the accommodation required for 75 Residents at this stage.
 - iii) As per the claim of the college authorities, statistician-cum- Lecturer has been appointed in Nov. 2002 who reported for duty on 20th Nov. 2002 and at the time of inspection she was reported to be on leave. However, no details have been furnished by the college regarding the establishment of the Statistical unit and it seems that the Statistical unit is yet to be established.
 - iv) Space of Urban Health Centre continues to remain inadequate. The college authorities have stated that new accommodation for UHC is going to be provided. As per the verification made by the inspecting team, the area available at UHC comprising of examination room for male and female patients, store-cum-lab. room and one observation bed. It seems that no accommodation is provided for teaching area or for conduct of the special teaching clinics at UHC and therefore the space continues to remain inadequate.
 - v) The nursing staff in both HAL & ITI hospitals is inadequate as per Nursing Council norms. As per compliance by the college authorities, hospital authorities have been requested to fill up vacant posts and also the Venkatesha Education Society is taking up the matter for appointing additional Nursing staff. However, it seems that no additional nurses have been appointed as yet. The nursing staff at HAL hospital is 68 and at ITI hospital is 80 which is much less as required at this stage in a college affiliated teaching hospital.

Perusal of the letter of the Principal dated 29-12-02 regarding further compliance reveals that the appointment orders and duty reporting letters of some of the faculty members have been attached with that letter. No further compliance on any other deficiency has been submitted.

It is claimed that two Lecturers in Surgery, one Lecturer in Medicine, one Lecturer in Dermatology and one Lecturer in Ophthalmology have been appointed and joined duty. However, details of their qualifications, experience, etc. have not been given. Their declaration forms have also not been attached. In absence of declaration forms, relieving orders from the previous employers, and details, it is difficult to accept the claim *prima facie*. However, even assuming without admitting, the claim of the Principal as regards the appointment of these staff members, it has no bearing on the shortage of staff calculated in para above, as these positions have not been included in the deficiency calculation at all. Thus, the position of the deficiencies remain the same even after considering the letter of Principal.

The Executive Committee noting the above facts and also that grant of permission for establishment to this medical college by the Central Govt. has caused much embarrassment to the Medical Council of India as the example of this college is being quoted by many of the medical colleges who have not been recommended for grant of permission due to similar deficiencies by the Medical Council of India, decided to reiterate its earlier decision communicated to the Central Govt. not to renew the permission for admission of 2nd batch of students at M.V.J. Medical College, Bangalore for the academic session 2002-03 and also to consider withdrawing the Letter of Permission granted for 100 admissions to this college.

63. **Starting of new medical college, National Instt. of Medical Sciences & Research at Jaipur – Permission of Central Govt.**

The Executive Committee deliberated on the report of the personal hearing granted to the Indian Medical Trust, Jaipur on 07.01.2003 on their representation which was enclosed by the Central Govt. with its letter dated 08.01.2003. Upon perusal of the report of the personal hearing, the Executive Committee noted as under:-

1. Dr. Tomar while giving the background of the case has stated that the MCI had recommended Letter of Intent after carrying out first inspection on 30th March,2001 which is a WRONG STATEMENT. No Letter of Intent was recommended by the Executive Committee of the Council to the Central Government.
2. It has been stated that after carrying out the second inspection on 25th & 27th September,2001 which was a compliance inspection where no deficiency was found and a Letter of Permission was recommended by the MCI is again a WRONG STATEMENT as no LOP was recommended to be issued for this college by the Executive Committee to the Central Government.
3. The contention of Dr. Tomar that the inspectors who carried out the inspection on 4th October,2001 stayed only for two hours in the institution and submitted the report only on the deficiencies in respect of OPD patients is WRONG as the inspection was carried out as per usual practice and not finished in two hours.
4. The facts as narrated by Dr. Tomar regarding the deemed permission and various orders of the Hon'ble High Court at Rajasthan are in the full knowledge of the Central Government and it is not true that the Central Government filed the SLP on persuasion of the MCI.
5. Regarding the incident reported by Dr. Tomar against one of the inspector i.e. Dr.Achal Gulati, the full facts have not been brought to the notice of the Central Govt. An FIR which was filed against Dr. Achal Gulati was investigated and the final report as received from the Police Authorities at Jaipur was sent to the Central Government for its information. It was reported that the FIR was false.

As regards other points pertaining to the staff, accommodation, clinical material etc. and the response of the authorities of the institution on the various deficiencies, the Executive Committee decided to carry out inspection of National Instt. of Medical Sciences & Research, Jaipur by Whole-time Inspector along with the members of the Adhoc Committee and authorised Dr. P.C.Kesavankutty Nayar, President (Acting) and Dr. P.N. Tandon, Member, Adhoc Committee to decide the matter on receipt of the inspection report for sending the recommendations to the Central Govt.

64. **Recruitment Rules – Consideration of.**

The Executive Committee noted that the President (Acting) and certain members of the Council pointed out certain errors in the recruitment rules framed for some of the posts and approved the corrections as under:-

<u>Name of post</u>	<u>Existing Recruitment Rules</u>	<u>Remarks</u>
Secretary	<u>Educational Qualifications</u> MBBS from a recognised University with a recognised postgraduate medical degree.	Instead of MBBS from a recognised university it should be <u>a recognised MBBS qualification</u>

	<u>Experience</u> A total of 16 years in the profession out of which 10 years teaching experience in a Medical College after a Postgraduate medical degree with atleast 3 years experience as Professor in any department in a Medical College/Teaching hospital. OR A total of 16 years in the profession out of which 2 years as Additional Secretary or 3 years as Joint Secretary in the Medical Council of India. <u>Column No. 11</u> Promotion – Additional Secretary with 2 years regular service in the grade of Rs.16400-20000/- or with 3 years combined length of regular service in the grades of Additional Secretary/Joint Secretary; or in the event of the post of Additional Secretary remaining unfilled, Joint Secretary with 3 year regular service in the grade of Rs.14300-18300/-.	
Whole-time Inspector	In column No. 9 it has been written ‘Tenure post for three years in the first instance, which may be extended at the option of the Council upto the age of 62 years.’	The sentence should read as 3 years regular service as Joint Secretary as has been mentioned in column 11 for this post. The post is to be filled up by selection by direct recruitment. Hence, ‘tenure’ post for 3 years in first instance, which may be extended at the option of the Council upto the age of 62 years can be applicable only for the selection made of the retired personnel. However, this will not be applicable to the persons who are not retired.
Additional Secretary	<u>Educational Qualifications</u> MBBS from a recognised University with a recognised postgraduate medical degree. <u>Experience</u> A total of 14 years standing in profession out of which	Instead of MBBS from a recognised university it should be <u>a recognised MBBS qualification.</u>

Joint Secretary	8 years teaching experience in a Medical College after a Postgraduate medical degree qualification. OR A total of 14 years standing in profession out of which 2 years regular service as Joint Secretary in the Medical Council of India. <u>Column No. 11</u> Promotion – Joint Secretary with 2 years regular service in grade of Rs.14300-18300/- or with 6 years combined length of regular service in the grades of Joint Secretary/Deputy Secretary. <u>Educational Qualifications</u> MBBS from a recognised University with a recognised postgraduate medical degree. <u>Experience</u> A total of 12 years standing in profession out of which 5 years teaching experience in a Medical College after a Postgraduate medical degree qualification. OR A total of 12 years standing in profession out of which 5 years as Deputy Secretary in the Medical Council of India. <u>Column No. 11</u> Promotion – Deputy Secretary (Medical) with 5 years regular service in the grade of Rs.12000-18000/-.	There is no mention of experience of combined length of regular service in grade of Rs. 14300-18300/- in column No. 11 and moreover the Deputy Secretary be read as Deputy Secretary (Medical).
Deputy Secretary		Instead of MBBS from a recognised university it should be a <u>recognised MBBS qualification</u>. (a) The words Deputy Secretary be read as <u>Deputy Secretary (Medical)</u>. (b) Deputy Secretary (Medical) in the MCI with 5 years <u>regular</u> service in the grade of Rs.12000-18000/-. The sanctioned posts of Deputy Secretary in the Council office are 2 Deputy Secretary (Medical) and one Deputy Secretary (Administration) i.e. non-medical post.

		In the recruitment rules against the post of Deputy Secretary the word '<u>Medical</u>' is not mentioned which needs to be added and number of posts should be read 2 instead of 3.
	<u>Educational Qualifications</u> MBBS from a recognised University with a recognised postgraduate medical degree. <u>Experience</u> Must have 10 years experience in the profession out of which 3 years teaching experience in medical college after postgraduate medical degree.	Instead of MBBS from a recognised university it should be a <u>recognised MBBS qualification</u>.
Deputy Secretary (Admn.)	<u>Educational Qualification</u> Graduate from a recognised university.	In column No.4 Whether Selection post or non-selection post, it has been mentioned 'not applicable' whereas it is a <u>selection post</u>. As this is a selection post 'not applicable words be replaced by 'selection' to keep in consonance with column No. 10 where it is written direct recruitment.
Law Officer	<u>Educational Qualification</u> Graduate with LL.B. with at least 55% marks.	The educational qualification be read as 'postgraduate qualification from a recognised university' instead of 'graduate from a recognised university'.
Head Clerk	In column No. 12 it is written Secretary-Chairman, Joint Secretary, Deputy Secretary, Assistant Secretary (Admn.)	The qualification be read as LL.B. instead of LI.B. as it is a typographical error. The word 'Admn.' be removed as there is not separate post of Assistant Secretary (Admn.). However, there is a post of Assistant Secretary only.

1. The recruitment rules under the sub-caption “Note” at serial No. 5 states that “qualifications are relaxable at the discretion of the appointing authority in case candidates are found otherwise suitable for the job”. In accordance with the same the columns titled “whether age and educational qualifications prescribed for direct recruits will apply in the case of promotees” under which “No” is incorporated, needs to be deleted at all places as the same is contradictory to the aforesaid general rule.
2. The upper age limit in case of Whole-time Inspectors which is prescribed as 62 years be raised to 65 years in view of the non-availability of the persons for the said post as has been the past experience.

The Committee further decided that approval of the General Body members be obtained by circulation.

65. **Request for recognition of experience gained as Pool Officer (Senior Research Associate) towards teaching experience – Reg.**

The Executive Committee noted that a meeting of the Sub-Committee constituted by the Committee at its meeting held on 31.10.2002 to consider the matter with regard to recognition of experience gained as Pool Officer (Senior Research Associate) towards teaching experience was held in the Council office on 08.01.2003 and made the following recommendations:-

“The Sub-Committee noted the earlier decisions of the T.E.Q. Sub-Committee taken at its meetings held on 8.8.2000 and 5.2.2001 which are reproduced here in order as under:

Decision on 8.8.2000

“The Sub-Committee deliberated in detail on the matter referred by the Under Secretary, Union Public Service Commission, New Delhi vide his letter dt. 21.7.2000 in the light of Postgraduate Committee decision taken at its meeting held on 9th and 10th July, 1997. The Committee was of the opinion that the Post of a Pool Officer in a medical college is separate entity than the post of Tutor/Demonstrator/Registrar/Sr. Resident. The Committee, therefore, decided that the experience gained in the capacity of Pool Officer cannot be taken as equivalent experience as a Lecturer nor it can be counted towards teaching experience. The Committee further decided in the light of the same decision of Postgraduate Committee that experience gained in an institution/medical college within India or abroad not recognised by this Council, cannot be counted towards teaching experience. Experience gained in an institution in Malaysia which is not recognised by this Council, cannot be counted towards teaching experience for appointment in a medical college in India. The Committee decided that the authorities of UPSC may be informed accordingly.”

Decision on 5.2.2001

“The Sub-Committee went through the letter dt. 24.11.2000 from the Director, GB Pant Hospital, New Delhi enclosing therewith a representation of Pool Officers (Sr. Research Associate) working in the said hospital. The Committee noted that the Central Health Services who are appointed teachers through the agency of UPSC, have deleted the post of Asstt. Prof./Lecturer in super-speciality subjects – as claimed, on the recommendations of High Power

Committee (Tikku Committee). The Committee also noted that the entry point for teaching posts under the CHS – the super-speciality subjects is the Assoc. Prof./Reader.

The Committee feels that this is an anomalous situation vis-à-vis Council Regulations on Minimum Qualifications for Teachers in Medical Institutions Regulations, 1998, wherein the Council has prescribed a post of Asstt. Prof./Lecturer in the super-speciality subject who is eligible for promotion to the post of Assoc. Prof./Reader after acquiring two years relevant teaching experience as compared to the 5 years relevant teaching experience in case of broad specialities.

The Committee also feels that though this Regulation does take care of the total experience of teachers in broad specialities and super-speciality subjects without jeopardizing the service career of medical teachers in a medical college yet since the CHS has deleted the recruitment of Asstt. Prof./Lecturer in super-speciality subject, such persons with relevant experience are not available/eligible for appointment as Assoc. Prof.

The Committee also noted that since these persons do not have the requisite experience the recruiting agency i.e. UPSC do not consider them eligible for the post of Assoc. Prof./Reader. Moreover, such persons in the absence of teaching cadre of Lecturer/Asstt. Prof. are bound to take up the position of Pool Officers (Sr. Research Associates) or alike.

The Committee is of the opinion that in case such appointments are taken up in a recognised medical college/recognised postgraduate institution, the same may be taken as relevant towards teaching experience so as to render them eligible for the post of Assoc. Prof./Reader as per the recruitment rules framed by CHS. The Committee therefore, decided to recommend to the Council that the experience as Pool Officer/Sr. Research Assoc. may be counted as teaching experience provided the same is obtained by a person holding the requisite recognised postgraduate/Post Doctorate (DM/M.Ch.) qualification in the concerned speciality/super speciality in a recognised medical college/postgraduate institution.”

The Committee also noted that the above decisions of the TEQ Sub-Committee were placed before the Executive Committee at its meeting held on 24.4.2001 and it was decided as under:

“The Executive Committee considered the letter dt. 24.11.2000, received from the Director, GB Pant Hospital, New Delhi enclosing therewith a representation of Pool Officers (Senior Research Associate) working in the hospital for counting of their teaching experience for the post of Associate Professor along with the recommendations of the Teacher’s Eligibility Qualifications Sub-Committee and decided that the teaching experience gained as Pool Officers (Sr. Research Associate) cannot be accepted towards teaching experience for the higher posts.”

The Committee after perusing the various documents/communication made available further noted that:

- (i) in the terms and conditions of appointment of Pool Officer/Sr. Research Associate where it is mentioned that the nature of duties of Sr. Research Associate/Pool Officer is primarily research, teaching being

voluntary/optional implying therein that teaching is not their main responsibility.

- (ii) the nature of the duties of the Pool Officer will vary from institution to institution which does not fit into the existing Residency System as per the MCI norms.
- (iii) the Pool Officer/Sr. Research Associate, since not working against a sanctioned teaching post even in a recognised teaching institution, the experience accruable to him/her cannot be equated with any regular teaching experience as contemplated under Council Regulations on Minimum Qualification for Teachers in a Medical Institutions, 1998.
- (iv) C.G.H.S. is recruiting the holders of the super-speciality qualification directly as Assoc. Professor which is not in consonance with the Council Regulations on Minimum Qualifications for Teachers in Medical Institutions, 1998 and this should be brought to the notice of all concerned.

The Committee after considering the above decision of the Executive Committee and taking into consideration the factors mentioned above decided to recommend that Executive Committee may reiterate its earlier decision taken at its meeting held on 24.4.2001, as quoted above.”

The Executive Committee approved the above recommendations of the Sub-Committee.

66. **Appointment of Inspectors for carrying out the inspection of postgraduate medical courses – regarding.**

Decision is recorded under item No. 47.

67. **Functioning of the Sub-Committee of the Council – Reg.**

The Executive Committee appointed Dr. L.S. Chawla in place of Dr.B.Ray Chaudhuri, who has expired, for the following Sub-Committees:-

- 1. Editorial Board
- 2. Rules & Regulations of the Medical Council of India – Revision of.
- 3. Task Force for implementation of Accreditation Sub-Committee

68. **Nomination of member in BOG in IGIMS, Patna from Medical Council of India in place of Dr. S.K. Sinha who has completed his tenure on 3.4.2002.**

The Executive Committee considered the letter dated 10.12.2002 from the IGIMS, Patna requesting to send fresh nomination in place of Dr. S.K. Sinha whose tenure was expired on 3.4.2002 as a nominated member to the Board of Governors, Indira Gandhi Institute of Medical Sciences, Patna.

The Committee decided to renominate Dr. S.K. Sinha, member, MCI to the Board of Governors, Indira Gandhi Institute of Medical Sciences, Patna.

69. **Date and Venue of the next meeting of the Executive Committee.**

The next meeting of the Executive Committee shall be held on 12th March, 2003 at 11.00 a.m. in the Council office, Aiwan-E-Galib Marg, New Delhi-110 002.

70. **Amendments in the Establishment of Medical Colleges Regulations, 1999.**

The Executive Committee considered and proposed the following amendments in the Establishment of Medical College Regulations, 1999 and decided as under:-

“Applications for establishment of new medical colleges and increase of MBBS seats in the existing recognised medical colleges u/s 10A called between 1st August, to 31st August for each year will be considered for admission in the medical colleges for the next academic session and not for the same academic session in which the applications was received e.g. applications which were received during the year 2002 between 1st August to 31st August are to be considered for admission against the academic session 2003-04 and not for 2002-03.”

(Dr. M. Sachdeva)
Secretary

New Delhi, dated the
9th January, 2003.

A P P R O V E D

(Dr. P.C.Kesavankutty Nayar)
President (Acting)