

No.MCI-5(3)/2003-Med./

MEDICAL COUNCIL OF INDIA

EXECUTIVE COMMITTEE

Minutes of the meeting of the Executive Committee held on Sunday, the 28th March, 2004 at 12.00 Noon in the Council office, Aiwan-E-Galib Marg, Kotla Road, New Delhi –2 where the members of the Adhoc Committee appointed as per the Hon'ble Supreme Court order dated 20.11.2002 were also present.

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Present:

Dr.P.C. Kesavankutty Nayar	]President (Acting)]Former Dean, Govt. Medical]College, Trivandrum
Padamshree Prof. P.N.Tandon	]Former Prof. & Head of Neuro-]Surgery, A.I.I.M.S, New Delhi and]Member, Adhoc Committee]appointed by the]Hon'ble Supreme Court
Dr. (Mrs.) S.Kantha	]Former Vice Chancellor,]Rajiv Gandhi University of Health]Sciences, Karnataka and Member,]Adhoc Committee appointed by]the Hon'ble Supreme Court
Padamshree Prof. K.S. Chugh	]Emeritus Professor of Nephrology]P.G.I., Chandigarh
Dr.D.K. Sharma	]Former Prof. & Head]Deptt. of Paediatrics]LLRM Medical College]Meerut.
Dr.Ajay Kumar	]Consultant Urologist]Hony. Secretary,]Urologist Society of India](USI)
Dr.M.K. Sharma	]Deptt. of Surgery, SMS Medical]College, Jaipur.
Dr. V.K. Puri	]Prof.& Head, Deptt. of Cardiology,]K.G.Medical College, Lucknow.
Dr. P.K. Sur	]Professor of Radio-therapy,]Medical College,]Kolkatta.
Dr. G.B. Gupta	]Prof. of Medicine, Pt.JNM Medical]College, Raipur

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

Apologies for absence were received from Prof. N. Rangabashyam, Member, Adhoc Committee and Dr. Nitin S. Vora, Member, Executive Committee.

1. Condolence on the demise of Dr. (Mrs.) M.C.Pathak, Whole Time Inspector of the Council on 8th March, 2004.

At the outset, the Secretary informed the members with regret about the sad demise of Dr.(Mrs.) Mrinalini Pathak, Whole-time Inspector of the Council on 08.03.2004 as she met with an accident. He also informed that condolence to the bereaved family has been conveyed on his behalf and on behalf of the members of the Adhoc Committee and of the Executive Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council expressed their grief on the sad demise of Dr. (Mrs.) Pathak and passed the following condolence resolution to be conveyed to the bereaved family:-

“The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council resolved to condole the tragic death of Dr. (Mrs.) Mrinalini C. Pathak and pray the God Almighty to give peace to the departed soul and to give strength and courage to the bereaved family to bear the irreparable loss.”

Two minutes silence was observed by the members in the memory of late Dr. (Mrs.) Mrinalini C. Pathak.

2. Minutes of the Executive Committee held on 3rd Feb., 2004 – Confirmation of.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council confirmed the minutes of the meeting of the Executive Committee held on 3rd Feb., 2004.

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

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the action taken on the minutes of the Executive Committee meeting held on 3rd Feb., 2004 with the following modifications:-

1. Item No. 2 “Minutes of the last meetings of the Executive Committee – Action taken thereon”.

In the action taken report under this item action taken by the office was not recorded. Action taken in the matter be read as “noted”.

2. Item No. 4 “Kamineni Instt. of Medical Sciences, Narketpally, Nalgonda – renewal of permission for admission of 6th batch of students during the year 2004-05.

The action taken in the matter be read corrected as under:-

“Letter conveying renewal of permission has been issued by Govt. of India on 12.3.2004.”

3. Item No. 20, “Equivalence to Bio-technology course at +2 level”. The action taken in the matter be read modified as under:-

“Meeting of the Sub-Committee comprising of Dr. Indrajit Ray and Dr. S.B. Siwach was held on 09.03.2004. The report of the Sub-Committee is included as an agenda item of this meeting”.

4. Item No. 26 “Comprehensive Act on “Tele-Medicine” and “Tele-Health” proposal regarding. The action taken in the matter be read modified as under:-

As conveyed by the Chairman, Dr. Mahendra Bhandari, the meeting will be held in the month of April,2004”.

4. Pending Items arising out of the decisions taken by the Executive Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council reviewed the list of pending items arising out of the decisions of the Executive Committee and directed the Secretary as under:-

- (a) As regards item No. 6 of the meeting of the Executive Committee dated 30.06.2003 regarding the admission policy in medical colleges in the State of Tamil Nadu, the Secretary was directed to initiate action u/s 10B in respect of all the excess admissions in respect of medical colleges in the State of Tamil Nadu, with strict direction be given to the State Govt. not to admit any excess admission over and above the approved number to each medical college hereinafter.

5. Establishment of new medical college at Bhubaneswar by Siksha-O-Anusandhan, Bhubaneswar.

Read : The inspection report (27th & 28th February 2004) for establishment of new medical college at Bhubaneswar by Siksha-O-Anusandhan, Bhubaneswar.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (27th & 28th Feb.,2004) and noted the following:-

1. The proposed college, which is not in existence, owns and is in possession of a unitary, contiguous plot of land admeasuring 32.821Acres located in Khurda District. Document regarding certification by the revenue authorities is not available. It is in Kalinga Nagar. Well connected by road but no public transport is available. The documents of ownership & possession could not be verified due to non availability of Original Registered Deed & copies of Mutation.
2. The SUM Hospital is not in existence.
3. Accommodation of Principal's office complex for accounts, academic & establishment sections does not exist.
4. No teaching beds are available.
5. Clinical material is not available.
6. OPD services are not available.
7. No O.T.s are available.
8. No labour rooms are available.
9. No Intensive Care Units are available.
10. The Radiodiagnosis department does not exist.
11. Blood Bank is not available.
12. Central Pharmacy, C.S.S.D., mechanized laundry, EPABX, central kitchen & canteen are not available.
13. Incinerator not available.
14. No para medical or nursing staff is available.
15. No lecture theatres are available.
16. No Staff quarters are available.
17. Hostels for boys, girls, residents and nurses are not available.

18. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine are not available.
19. Central library not available.
20. No teaching staff is available.
21. There is no Principal.
22. Other observations/deficiencies pointed out in the inspection report.

In view of above, whereby it has been found that the applicant has failed to fulfil the mandatory and statutory precondition of owning & managing of a functional hospital of not less than 300 beds, laid down in the Establishment of Medical College Regulations, 1999, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. to disapprove the scheme for establishment of new medical college at Bhubaneswar by Siksha-O-Anusandhan, Bhubaneswar received u/s 10A of the I.M.C. Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided to write a letter to the State Govt. of Orissa requesting to intimate as to how they have issued the Essentiality Certificate certifying that the applicant owned and managed a functional hospital having adequate clinical material.

6. Establishment of new medical college at Pandara, Khurda Distt. by Vigyan Bharati Charitable Trust, Bhubaneswar.

Read : The inspection report (27th & 28th February 2004) for establishment of new medical college at Pandara, Khurda Distt. by Vigyan Bharati Charitable Trust, Bhubaneswar.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (27th & 28th Feb., 2004) and noted the following:-

1. Land is not an agricultural land, hence the conversion to N.A. is not available, verified.
2. The proposed college is located in Pandara of Dist. Khurda of Bhubaneswar. On the western side of the land, there is a main small narrow kachcha road linking Rasulgarh and Pandara, the NH 5 is approximately ½ km from this road. Another approach road from the city about 3 km. That is also kachcha road. The two kachcha roads need to be converted into wide pakka roads for mobilization of the patient and the student. There are two high tension towers without wires within the limit of 25 acres of land which need to be removed.
3. The construction of proposed Hi-Tech Hospital which is affiliated to the proposed college is in progress and when completed, it proposes to house 300 beds. The hospital is non-functional with OPD facilities starting just 4 days back and is without any indoor admission as well as casualty admission. There is no Radiological, Laboratory, Operative, Pharmacy and Blood Bank facilities available. The hospital is owned and managed by the trust which proposes to set up this college. Out of the 8 proposed wards, 6 have been completed; 1 ward in the ground floor and 1 ward in the first floor need to be completed. The wards are not equipped but 128 beds with mattresses pillow and bed sheets were laid down in casualty and some of the wards. It was brought to the knowledge of inspecting team by the college management that non teaching 300 bedded hospital existed in a period June 2003 to Dec. 2003 with indoor admission facilities, which has been totally demolished for the new requirements. Though no documented data is available, however the college has provided some statistical data of the OPD and indoor admissions processed by Bangalore firm, no other supportive evidence could be gathered from management.
4. No accommodation of Principal's office complex for accounts, academic & establishment sections as proposed is available in hospital or college.
5. Similarly, no accommodation has been created for Hospital Medicine Suptd. Office.
6. Although 128 teaching beds have been provided, they are non-functional.
7. The construction of only one minor OT has been completed, all other OT areas are under construction.
8. No labour room facilities are available.

9. Space for 8-bedded ICU has been earmarked but not equipped. No other intensive care areas are available.
10. X-Ray machine, USG Machine and CT Scan machine are not available.
11. Blood Bank is non-existent.
12. Space for Central Pharmacy has been earmarked but CSSD mechanized laundry, EPABX, Central kitchen and canteen are not available.
13. No incinerator has been installed. The college authorities have run into an agreement with a local agency for disposal of bio-medical waste.
14. Nursing and technical staff are grossly inadequate.
15. No Lecturer theatre in both College and Hospital is available as yet. However the area for lecturer theatre has been earmarked in the hospital. Some space for clinical demonstration has been earmarked for both OPD and wards which needs to be thoroughly equipped and updated.
16. Staff quarters for teaching and non-teaching medical staff a nurses' hostel and hostels for residents are in the preliminary stages of construction.
17. Hostels for boys, girls, residents and nurses have just begun to be constructed.
18. The Teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine are not yet constructed.
19. Central Library has not yet been constructed.
20. Other observations/deficiencies pointed out in the inspection report.

In view of above, whereby it has been found that the applicant has failed to fulfil the mandatory and statutory precondition of owning and managing of a functional hospital of not less than 300 beds, laid down in the Establishment of Medical College Regulations, 1999, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. to disapprove the scheme for establishment of new medical college at Pandara, Khurda Distt. by Vigyan Bharati Charitable Trust, Bhubaneswar received u/s 10A of the I.M.C. Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided to write a letter to the State Govt. of Orissa requesting to intimate as to how they have issued the Essentiality Certificate certifying that the applicant owned and managed a functional hospital having adequate clinical material.

7. Establishment of new medical college at Sattur, Dharwad by shri Dharmasthala Manjunathesgwara Educational Society, Ujire.

Read : The inspection report (04th & 05th March 2004) for Establishment of new medical college at Sattur, Dharwad by shri Dharmasthala Manjunathesgwara Educational Society, Ujire.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (4th & 5th March, 2004) and noted the following:-

1. The shortage of teaching staff required for Letter of Permission is as under :-
 - (a) Shortage of Teaching Faculty is 41.4%.
 Professor –5 (Bio-Chem-1, Microbiology-1, Pharmacology-1, Forensic Medicine-1, Obst. & Gynae – 1)
 Assoc. Prof. –5 (Anatomy-2, Bio-Chem-2, Physiology-2)
 Asst. Prof. – 6 (Anatomy-2, Physiology- 2, Bio-chemistry-1 and Gen. Surgery-1)
 Tutor – 9 (Anatomy – 3, Physiology – 2, Forensic Medicine-1, Radiology-2, Anaesthesia-1)
 - (b) Shortage of resident is 78%

 Sr. Resident 14 (Gen. Medicine-4, Gen. Surgery-4, Obst. & Gynae-2, Paed-1, Ortho-1, ENT-1, Opth-1)

 Jr. Resident 16 (Gen. Medicine – 5, Gen. Surgery-5, Paediatrics – 2, Ortho-2, Ent-1, Ophthalmology-1)
2. Non Teaching Staff is not appointed in pre-clinical and para-clinical departments.

3. **Clinical material** is inadequate as under:-

	Daily Average	Day of inspection	
O.P.D. attendance	230	390	
Casualty attendance	03	0	
Number of admissions/ discharge	05/03	28/4	
Bed Occupancy%	5.08%	37.4%	
<u>Operative work</u>			
Number of major surgical operations	02	01	
Number of minor surgical operations	04	09	
Number of normal deliveries	13 till date	Nil	
Number of caesarian Sections	03 till date	Nil	
<u>Radiological Investigations</u>		O.P.	I.P.
X-ray	10	25	07
Ultrasonography	03	06	01
Special Investigations			
C.T. Scan			
<u>Laboratory Investigations</u>			
Biochemistry	42	61	09
Microbiology	01	01	00
Serology	03	13	15
Parasitology	04	--	--
Haematology	20	49	--
Histopathology	--	--	01
Cytopathology	04	03	03
Others	09	18	05

4. **Dean's Office** is located on Ground Floor of the college building along with administrative block. Only space is available which is earmarked for Dean's office and administrative staff. Furniture and other facilities are not provided.

5. **Blood Bank** : As it is not inspected by the competent authorities, it has not been made functional.

6. **Nursing Staff** :

Nursing Superintendent : One
 Asstt. Nursing Superintendent : Two
 Nursing Staff : Seven
 Staff Nurses : Seventy Six

Nursing staff should be appointed as per Council guidelines.

7. **Lecture Theatres** :-

	College	Hospital
Number	Five	One
Type	Gallery	Gallery
Capacity	Four are having 120 seats each and one is having 250 capacity	Capacity 150
A.V.Aids	Not available	Not available

All the lecturers' theatres are not having furniture, electrical and water supply.

8. **Central Library** - only space is available. Only one librarian is appointed. No books, no furniture and no electricals are available.

9. **Residential Quarters** - The construction of 21 two bedroom flats is under progress the building is in the campus. The quarters will be ready for the occupation within a month as per the Dean's submission.

10. **Hostels** :- Construction of Girls and boys hostels is in the progress. Both hostels are in the campus.

Girls' Hostel – The Civil construction of girls hostel having 60 two bedded rooms, 58 three bedded rooms and four single bedded rooms is in progress.

Boys' Hostel : The Civil construction of boys hostel having 60 two bedded rooms, 58 three bedded rooms and four single bedded rooms is in progress.

Residential Hostels : Not available

Nurses' Hostels : Not available.

11. **Pre-Clinical Departments** : (Anatomy, Physiology and Bio-chemistry departments) Only space is provided. Commissioning of the departments is not completed.
12. **Para Clinical Departments** : Only space is provided. These departments are not operational.
13. In the college building, space has been provided in the Medical college for the Dean's office, administrative block, common rooms for boys and girls, medical education unit, statistical unit, photography unit, council room, animal house, examination hall, museum and library. Furniture and equipment have not been provided in any of these areas.
14. Other observations/deficiencies pointed out in the inspection report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. not to issue Letter of Permission for establishment of SDM Medical Sciences & Hospital, Sattur, Dharwad by Shri Dharmasthala Manjunatheswara Education Society, Ujire u/s 10A of the I.M.C. Act, 1956.

8. **Establishment of new medical college at Dehradun by Sri Guru Ram Rai Education Mission, Dehradun.**

Read : The inspection report (03rd & 04th March 2004) for Establishment of new medical college at Dehradun by Sri Guru Ram Rai Education Mission, Dehradun.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (3rd & 4th March, 2004) and noted the following:-

1. (a) The applicant is in possession of 35.47 acres of land, which is divided by a road. The original plot of land measuring 21.46 acre to which another adjacent plot measuring 4.6 acre was added to make this plot 26.06 acres. It is in this plot that the college campus is being constructed. Across the road is a plot of land measuring 9.4 acre on which the hospital has been constructed. The total area available for the complex is thus 35.47 acres. Thus, on one side of the road there is the Mahant Indireswari Hospital which is the hospital attached to the proposed college while on the other side is the main college complex. This land is located at the site vide survey No. 1400F in Village Dehrakhas, Tehsil Dehra, District Dehradun. This road is connecting Saharanpur Road on one side and a residential colony on other side. Thus the proposed land is in two pieces and hence does not meet with the Qualifying Criteria number 2(2) for the Establishment of Medical College Regulations, 1999.

(b) The proof of ownership & possession is verified by the papers issued from the office of Tehsildar, Dehradun and Revenue Accounts, Collectorate, Dehradun.

(c) **Land use conversion to Non Agriculture use is not verified as no document has been provided.**
2. Accommodation of Principal's office complex for accounts, academic & establishment sections as proposed is under construction.
3. Blood Bank is not available. Accommodation has been constructed.
4. Medical Superintendent is only MBBS and not qualified to hold the post.
5. Incinerator is not available. Order has been placed.

6. Clinical material is inadequate as under:-

	Daily Average	Day of inspection	
O.P.D. attendance	500	543	
Casualty attendance	10	11	
Number of admissions/ discharge	22	18	
Bed Occupancy%	47	50	
<u>Operative work</u>			
Number of major surgical operations	2.24	4	
Number of minor surgical operations	2.46	4	
Number of normal deliveries	0.5	0	
Number of caesarian Sections	0.25	0	
<u>Radiological Investigations</u>			
X-ray	40.5	47	
Ultrasonography	15	12	
Special Investigations			
C.T. Scan	3	2	
<u>Laboratory Investigations</u>			
Biochemistry	73.5	80	
Microbiology	5	4	
Serology	8.5	8	
Parasitology	13	10	
Haematology	55.5	60	
Histopathology	4	2	
Cytopathology	6	5	
Others	-	-	

7. Two gallery type lecture theatres of capacity of 120 each are under construction in the college. Staff quarters for 8 medical staff, 8 residents and a nurses' hostel for 60 nurses are available.

8. Hostels for boys, girls, residents and nurses :

Hostels	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Boys	Not available	-	-	-	-
Girls	Not available	-	-	-	-
Residents	1	4	8	Yes	Yes
Nurses	1	23	60	Yes	Yes

A building with 28 rooms with capacity of 70 has been identified at a distance of 2 kms from the college campus to be utilized as boy's hostel. The building belongs to the Society.

The hostel for the girl students has been identified at a distance of 1.5 kms from the campus. The hostel has capacity of 30.

9. The Medical Record Department is not computerised. ICD X Classification of diseases is not followed for indexing. Follow up service is still not established.

10. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine are under construction.

11. Central library is not constructed. Area has been earmarked. Orders for 1400 books have been placed, out of which 255 books have been received.

12. In the department of Bio-Chemistry all the staff members are non-medical.

13. Approval of Construction of the College Building from the competent authority is not available. However, the plan has been submitted.

14. Mechanized Central Laundry is not available. However it is stated that the required equipments have been received.
15. Other observations/deficiencies pointed out in the inspection report.

In view of above, whereby it has been found that the applicant has failed to fulfil the mandatory and statutory precondition of possession of single plot of land, laid down in the Establishment of Medical College Regulations, 1999, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. to disapprove the scheme for establishment of new medical college at Dehradun by Shri Guru Ram Rai Education Mission, Dehradun received u/s 10A of the IMC Act, 1956.

9. Establishment of new medical college at Mysore by Gopala Gowda Shanthaveri Memorial Hospital, Mysore.

Read : The inspection report (03rd & 04th March 2004) for Establishment of new medical college at Mysore by Gopala Gowda Shanthaveri Memorial Hospital, Mysore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (3rd & 4th March, 2004) and noted the following:-

1. The shortage of teaching faculty is as under :-
 - a. Faculty - 75% (66 out of 88)
 - i) Professor - 4 (Anatomy-1, Physiology-1, Medicine-1, Surgery-1)
 - ii) Associate Professor - 13 (Anatomy-2, Physiology-2, Biochemistry-1, Pharmacology-1, Pathology-1, Microbiology-1, Paed.-1, Ortho-1, OBG-1, Anaes.-1, Radio-1,
 - iii) Assistant Professor – 21 (Anatomy-3, Physiology-3, Biochemistry-1, Pathology-1, FM-1, Medicine-3, Surgery-3, Oph.-1, ENT-1, OBG-1, Anaes.-1, Radio-Diagnosis-1, Dentistry-1)
 - iv) Tutor - 28 (Anatomy-2, Physiology-2, Biochemistry-2, Pharmacology-1, Pathology-1, Microbiology-1, FM-1, Medicine-4, Paed.-1, Surgery-4, Ortho.-1, Oph.-1, ENT-1, OBG-2, Anaes.-2, Radio-Diagnosis-2)
 - (b) Jr. Residents – 100% i.e. 24 out of 24 (Medicine-8, Paed.-2, Surgery-8, Ortho.-2, Oph.-1, ENT-1, OBG-2)
2. The applicant is in possession of 29.04 acres of land in a unitary plot of land vide survey No. 39/2, 40, 41, 42, 43, 47 in P.G. Hundi of Taluq Mysore of Dist. Mysore. This plot of 29.04 acres is in a curvilinear shape adjoining each other and is located on Mysore – Kollegal Highway, 12 kms away from Mysore City. There is a Kacha road belonging to local panchayat connecting the highway to the nearby village Palya and preceding on a Bannur Road. It is 220 meters away from the highway.
4. Hospital construction activities have just started. The Trust does not own any hospital at the present stage. No facilities are available.
5. Dr. Z.A. Khan, Medical Superintendent is only a postgraduate Diploma holder and thus not qualify to hold the post of Medical Superintendent.
6. Electric supply is not available.
6. Central library is not available.
7. Accommodation of Principal's office complex for accounts, academic & establishment sections is under construction.
8. No teaching beds are available.
9. Available clinical material is Nil.
10. OPD services are not available.
11. Incinerator is not available.
12. The para medical staff are not available.
13. Staff quarters are not available.

14. OTs, labour rooms, ICCU, X-Ray services and blood bank are not available.
15. Central pharmacy, CSSD, Mechanised laundry, EPABX, Central kitchen and canteen are not available.
16. Lecture theatres are not available.
17. Hostels for boys, girls, residents and nurses are not available.
18. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine are not established.
19. Central library is not available.
20. Other observations/deficiencies pointed out in the inspection report.

In view of above, whereby it has been found that the applicant has failed to fulfil the mandatory and statutory precondition of owning & managing of a functional hospital of not less than 300 beds, laid down in the Establishment of Medical College Regulations, 1999, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. to disapprove the scheme for establishment of new medical college at Mysore by Gopala Gowda Shanthaveri Memorial Trust, Mysore received u/s 10A of the IMC Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided to write a letter to the State Govt. of Karnataka requesting to intimate as to how they have issued the Essentiality Certificate certifying that the applicant owned and managed a functional hospital having adequate clinical material.

10. Vydehi Instt. of Medical Sciences & Research Centre, Bangalore – renewal of permission for admission of 3rd batch of students for the academic session 2004-2005.

Read : The inspection report (9th & 10th March 2004) for renewal of permission for admission of 3rd batch of students for the academic session 2004-2005 at Vydehi Instt. of Medical Sciences & Research Centre, Bangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (9th & 10th March, 2004) and decided to recommend to the Central Govt. to renew the permission for admission of 3rd batch of 100 students at Vydehi Instt. of Medical Sciences & Research Centre, Bangalore for the academic session 2004-2005.

11. Navodya Medical College, Raichur – renewal of permission for admission of 2nd batch of students for the academic session 2004-2005

Read : The inspection report (09th & 10th March 2004) for renewal of permission for admission of 2nd batch of students for the academic session 2004-2005 at Navodya Medical College, Raichur.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (9th & 10th March, 2004) and noted the following:-

1. Available clinical material is inadequate as under:-

Average bed occupancy is 65-75%.		
<u>Operative work</u>		
Number of major surgical operations	4-6	1
Number of minor surgical operations	6-8	2
Number of normal deliveries	1-2	1
Number of caesarian Sections	0-1	0
<u>Radiological Investigations</u>		
X-ray	50-64	48
Ultrasonography	39-45	32
Special Investigations	2-4	03
C.T. Scan	1-2	01

2. Medical Superintendent is having only 3 years of experience and not qualified to hold the post.
3. Hostels

Hostels	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Boys		36	72	Yes	Yes
Girls		108	216	Yes	No
Interns		-	-	-	
Residents*		-	-	-	
P.G.		-	-	-	
Nurses*		-	-	-	

- Lady Resident Doctors are provided accommodation in the Girls Hostel
- Nurses are also accommodated in the Girls Hostel.
- There is no separate Mess in the Girls Hostel. They are permitted to take food from the Boys Hostel Mess in a separate enclosure.

Hostel:

Boys	Within campus
Girls	Within campus

- No teaching area is provided in TB & Chest, Skin & VD and Psychiatry OPDs. In Surgery and Obst. & Gynae. OPDs., teaching rooms do not have x-ray view box.
- Male Resident Doctors are accommodated in a rented flat situated 1.5 Kms away from the college. 14 such flats with a capacity of 56 seats are available. There is no mess in this hostel.
- Anatomy demonstration room have 40 seats.
- Central Library: Library is located on the second floor of a separate building. Total area available is 750 sq.mt. The number of seats available for the reading rooms are as under:-

		Rooms	Capacity
a.	Students	1	70
b.	Interns & Residents	-	-
c.	Staff	1	15
	Total	2	85

- Medical Record Department is yet to be computerised.
- RHTC is under the control of Govt. of Karnataka and the college is allowed to use its facilities for teaching purposes.
- It has been noted that the following teachers were found working in other institutions:-

Sl.No.	Name of the teacher	Name of the college	Date of joining	Date of inspection
1.	Dr. S. Mahantappa	HKE Societies M.R. Medical College, Gulbarga	19.05.1980	08.08.2003
2.	Dr. Shailendra S. Zamakade	Padamshri Dr. Vithalrao Vikhe Patil Foundation, Ahmednagar	Oct.,2002	28.12.2003
3.	Dr. N.V. Narayana Setty	PES Instt. of Medical Sciences & Research, Kuppam	31.12.2002	26.05.2003
4.	Dr. Ambekar M.N.	HKE Societies M.R. Medical College, Gulbarga	14.12.1997	08.08.2003

- Examination hall is yet to be furnished fully.
- Residential quarters: 11 two bedded flats are available at 1.5 kms. away from the college which are taken on lease for a period of 3 years.
- Other observations/deficiencies pointed out in the inspection report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the

Central Govt. not to renew the permission for admission of 2nd batch of 100 students at Navodaya Medical College, Raichur for the academic session 2004-2005.

12. V.S.S. Medical College, Burla – increase of seats in Ist MBBS course from 107 to 150.

Read : The inspection report (12th & 13th February 2004) for increase of seats in Ist MBBS course from 107 to 150 at V.S.S. Medical College, Burla.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (12th & 13th Feb.,2004) and noted the following:-

1. The Principal is not qualified as he has experience of only 1 ½ years as Professor.
 2. (a)The shortage of teaching staff required at present stage is as under:-
Faculty 24.1% (i.e. 41out of 170)
 - i) Professor : 03 (Microbiology :1, Skin & VD :1, Orthopaedics :1)
 - ii) Associate Professor: 16 (Anatomy :1, Psychiatry :2, PSM :1, Microbiology :1, ENT :1, Medicine :4, Pediatrics :1, Surgery:2, Obst. & Gynea: 2)
 - iii) Assistant Professor: 15 (Anatomy :4, Physiology : 3, Biophysics :1, Biochemistry : 2, Microbiology :1, Epidemiologist –cum-Lecturer :1, Statistician-cum-Lecturer - 1, Ophthalmology :1, Obst. & Gynae : 1)
 - iv) Tutor: 7 (Psychiatry :1, Microbiology :3, Community Medicine :3)
 - b) Resident : 15% (i.e. 15 out of 102)
 - i) Sr. Resident: 6 out of 24 (Pediatrics :1, Orthopaedics :2, Obst. & Gynae.:2, Surgery :1)
 - ii) Jr. Resident: 9 out of 78 (Pediatrics :5, Psychiatry :3, Orthopaedics :1)
 - c) One tutor in Anaesthesia Dr. U.N. Hota has not received his salary since last two years i.e. 13.01.2002.He is working in the department without posting orders.
 - d) Five staff members have left and 31 staff members have joined the college in last 3 months.
3. Available clinical material is inadequate as under:-

	Daily Average	Day of Inspection
O.P.D. attendance	505	503
Casualty attendance	38	46
Number of admissions	522	548
Bed occupancy%	67.5	70.9
<u>Radiological Investigations</u>		
X-ray	55	46
Ultrasonography	7	3
Special Investigations	nil	nil
C.T. Scan	22	14
<u>Laboratory Investigations</u>		
Biochemistry	35	50
Microbiology	6	2
Serology	21	24
Parasitology	3	-
Haematology	35	50
Histopathology	-	-
Cytopathology	27	18
Others	-	-

4. Teaching beds are 652. However, there is deficiency of 30 beds in Orthopaedics..

5. OPD services are run daily in morning sessions. No space for teaching area is available in the OPDs of major departments like Medicine, Surgery, Paediatrics, Obstetrics & Gynaecology and Orthopaedics.
6. Total eight O.T.s are available. They are unhygienic. Scrub area is inside the O.T.
7. One labour room, clean with 2 beds is available. No separate septic labour room is available.
8. ICCU with 6 beds and Medical ICU with 2 beds are available. Surgical Critical Care Unit & Burns Unit do not exist. Central monitoring system is out of order. Pediatric & Neonatology ICU are not available.
9. Static unit of 100 mA and 300 mA & mobile unit of 100 mA are available. 500 mA X-ray machine is non-functional.
10. There is no laundry & CSSD.
11. There is no incinerator.
12. The following deficiencies are observed in the infrastructure of pre-clinical departments:-
 - (a) Anatomy - Cooling cabinet is to be repaired urgently.
 - (b) Biochemistry - The biochemical investigations should be carried out in Biochemistry dept. under the supervision of Professor in Central laboratory.
13. The following deficiencies are observed in the infrastructure of para-clinical departments:-
 - (a) Pathology - The service laboratory for biochemical investigations should be handed over to bio chemistry department.
 - (b) Microbiology - Separate 07 service laboratories are to be established with adequate equipments paramedical staff.
 - (c) Forensic Medicine - Professor of Forensic Medicine is also Principal of College. Cooling cabinets should be repaired immediately.
 - (d) Community medicine - Rural Health Training Centre, infrastructure is available but not utilised for teaching & training purposes.
14. The following deficiencies are observed in the infrastructure of clinical departments:-
 - (a) Medicine & Allied Deptt. – Teaching areas with facilities and furniture should be provided in outpatients as well as wards.
 - (b) Paediatric ICU and Neo Natal ICU are to be established urgently and facilities in ICCU and ICU are to be upgraded.
 - (c) Central monitoring system of ICCU is out of order and necessary steps are to be taken urgently.

Septic Labour room and Eclampsia room are to be established.
Neo- Natal resuscitation facilities and ICU are to be available near Labour room.
15. It was also observed that the college is deficient in facilities even for 107 students i.e. the present intake.
16. Other observations/deficiencies pointed out in the inspection report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. not to issue Letter of Permission for increase of seats in 1st MBBS course from 107 to 150 at V.S.S. Medical College, Burla u/s 10A of the IMC Act, 1956.

13. MKCG Medical College, Berhampur – increase of seats in Ist MBBS course from 107 to 150.

Read : The inspection report (12th & 13th February 2004) for increase of seats in Ist MBBS course from 107 to 150 at MKCG Medical College, Berhampur.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (12th & 13th Feb.,2004) and noted the following:-

1. The Principal is not qualified as he has experience of Professor for only 3 years.
2. The shortage of teaching staff required at present stage is as under:-

Faculty 16.0% (i.e. 32 out of 199)

- | | | |
|----------------------------|----|---|
| (a) Professor : | 2 | (1 Microbiology & 1 Physiology) |
| (b) Associate Professor: | 11 | (2 Anatomy 1 -Physiology 1-Biochemistry 1-Microbiology 1-. Medicine 3- Surgery, 1-Anaesthesia, 1-Radiodiagnosis.) |
| (c) Assistant Professor: | 8 | (2- Anatomy 1-Physiology, 3- Community Medicine, 2- Radiodiagnosis) |
| (d) Tutor/Sr.Res./Reg. | 9 | (4-Anatomy,2-Physiology,1-ENT,2-Radiodiagnosis) |
| (e) Lect. In Biophysics. | 1 | |
| (f) Pharmaceutical Chemist | 1 | |

- (b) Sr. Resident - Nil
Jr. Resident - 8 (3-Psychiatry, 5-Orthopaedics).

3. Available clinical material is inadequate as under:-

	Daily Average	Day of Inspection
O.P.D. attendance	600	550
Casualty attendance	15 to 20 /shift	27
Bed occupancy %	73.5	73%
<u>Radiological Investigations</u>		
X-ray	46	70
Ultrasonography	12	15
Special Investigations	1-3	6-5
C.T. Scan	6	6
<u>Laboratory Investigations</u>		
Biochemistry	180	150
Microbiology	11-20	25
Serology	18	07
Parasitology	14	22
Haematology	260	239
Histopathology	7	5
Cytopathology	10	12
Others (H.I.V.)	51	NA*

(*) No test for HIV is being done for the last 15-20 days due to non-supply of reagents by NACO.

4. ICCU with 3 beds, is the only ICU which caters to all medical and surgical patients admitted in the Hospital. There is no separate Medical/Surgical ICU. This ICU is equipped with patient monitors but no central monitoring facility. Paediatric ICU is not available but neonatal ICU with 10 beds are available. Monitoring and resuscitation equipment are available in these ICUs.
5. There is no central pharmacy unit functional in the hospital. The CSSD unit is located in O.T. complex with three horizontal autoclaves, and one bulk sterilizer. The unit does not have a separate receiving and distribution station. This facility needs to be augmented.
6. There is no Incinerator installed in the Hospital complex. The institution has run into a contract with local Municipal Corporation for the disposal of Bio-medical wastes. There

is also a practice of dumping some selected bio-medical waste material in a specified area in Hospital premises.

7. The availability of para medical staff of different categories is; Lab. Technicians – 23, Lab. Attendants – 8, Lab. Assistants – Nil, Nursing Supdt. – Nil, Dy. Nursing Supdt. – Nil, Matron – 1, Asst. Nursing Superintendent – 1, Nursing Sisters – 15 and Staff Nurses – 134. These needs to be brought as per Council's requirement.
8. Journals are inadequate.
9. (a). The Deptt. of Pathology practical class is also shared by Microbiology Deptt. for their practical and demonstrations purposes which needs to be separated with separate facilities.
 (b) The Pathology museum needs improvement in terms of increasing more representative system specimens.
 (c) The sharing of Microbiology museum with that of Pathology museum is to be discontinued. The Deptt. of Microbiology should organise and develop their own museum.
10. Other observations/deficiencies pointed out in the inspection report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. not to issue Letter of Permission for increase of seats in 1st MBBS course from 107 to 150 at MKCG Medical College, Berhampur u/s 10A of the I.M.C. Act, 1956.

14. Govt. Mohankumaramangal Medical College, Salem – increase of seats in Ist MBBS course from 75 to 150.

Read : The compliance verification inspection report (19th & 20th February 2004) for increase of seats in Ist MBBS course from 75 to 150 at Govt. Mohankumaramangal Medical College, Salem.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance verification inspection report (19th & 20th Feb., 2004) and noted the following:-

1. The shortage of teaching staff is as under:-

- (a) The shortage of teaching faculty is 9% (12 out of 134)

i)	Professor	:	2	(Ortho-1, Dental-1)
ii)	Associate Professor	:	2	(Anatomy-2)
iii)	Assistant Professor	:	7	(Anatomy -3, Physiology-1, Biophysics-1, Statistician-cum-Lecturer-1, Pharmaceutical Chemist-1)
iv)	Tutor	:	1	(Physiology-1)

- (b) The shortage of Residents is 13.5% (i.e. 5 out of 37)

i)	Jr. Residents	:	5	(TB-1, Psychiatry-3, ENT-1)
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- I. 17 faculty members have joined in last 3 months. 3 faculty members have left in last 3 months.
- II. Dr.K.B.Elango, Tutor, Department of surgery has not drawn salary for last 3 years.
- III. Dr.K. Mangaiyarkarasi, Tutor in Pathology has not drawn salary for last 18 months.

2. The following deficiencies pointed out in the inspection report of 26th & 27th May 2003 have been rectified partially to the extent indicated hereunder :

Deficiency	Extent to which rectified	Extent to which it still continues
1. Examination hall	Lounge of the auditorium is modified to accommodate 200 students in addition to 200 capacity examination hall.	Construction of the permanent examination hall is to be completed.
2. RHTC & UHC's	Two vehicles have been purchased for transport of staff & students.	RHTC & UHC are still under the control of Health Services and not under the control of Dean.
4. Hospital sanitation	Has improved.	Overcrowding persists.
4. Microbiology section of service laboratory	The section is still separate but 2 sections are made operational.	Site for serology, Immunology, Mycology, MycoBacterial Laboratory are available but not yet functional
5. Generator capacity	75 KVA generator is available.	Order for additional 75 KV generator has been placed but is not yet received.
6. Incinerator	Segregation in color coded containers is carried out.	For final disposal the incinerator is not available as permission from State Pollution control Board is pending.
7. Surgery block	Construction is complete. One operation theatre is commissioned.	Three operation theatres are to be equipped and made functional.
8. Blood bank	Under the control of Department of Pathology.	License expired.
9. Girls hostel	Facilities are made available.	Construction of extension for 75 students is under progress.
Boys Hostel	Only few rooms are provided like cots, tables, chairs, etc.	All the rooms should be properly furnished.

3. The following deficiencies pointed out in the inspection report of 26th & 27th May 2003 have not been rectified :-

- Reading room in college library
- Subscription to Indexed journal is not made.
- Bedside lockers have not been provided.
- Intercom facilities remain poor.
- Residential quarters for teaching and non-teaching staff are still not available.
- Central photography section is not equipped and started.
- Residents hostel and interns hostel is not available.

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

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to return the file to the Central Govt. recommending disapproval of scheme received u/s 10A of the I.M.C. Act, 1956 for increase of seats in 1st MBBS course from 75 to 150 at Govt. Mohankumaramangal Medical College, Salem.

15. Karnataka Instt. of Medical Sciences, Hubli – renewal of permission for admission of 4th batch of students against the increased intake from 50 to 100.

Read : The inspection report (19th & 20th February 2004) for renewal of permission for admission of 4th batch of students against the increased intake from 50 to 100 at Karnataka Instt. of Medical Sciences, Hubli for the academic session 2004-05.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (19th & 20th Feb.,2004) and noted the following:-

1. Number of teaching units is 4 each in Medicine, Surgery and Obst. & Gynae., 3 units in Orthopaedics, 2 units each in Paediatric, Skin & VD, Ophthalmology and ENT. Number of PG seats in the above departments are disproportionate to the available no. of clinical units. Units in Orthopaedics are not as per Council norms.
2. Total 11 OTs are available out of which 4 are allotted to superspecialty departments such as Neurosurgery, Paediatric Surgery and Plastic Surgery. TV with camera attachment is not available. Resuscitation and monitoring equipment is shared by the different OTs. A common post-operative ward with 2 beds is also available.
3. Blood Bank license expired in December 1997.
4. There is Pharmacy available in OPD block functioning only between 9 AM to 4 PM.
5. CSSD is located next the ENT OT. There are 3 horizontal Autoclaves available. 2 flash autoclaves are available in the OT. No ETO is available. 50 to 60 drums are being autoclave daily.
6. Nursing Staff : Nursing Suptd. – 01, Deputy Nursing Suptd. – 13, Matron – Nil, Asstt. Nursing Suptd. – 15, Nursing Sisters – Nil, Staff Nurses – 208.
7. There is no separate PG/Resident Hostels.
8. The Library is located in a single storied building adjacent to the college. Library function between 9 AM to 11 PM on all days including Sunday.
9. No Lecturer cum medical officer having MD (PSM) is posted at RHTC.
10. In the department of Microbiology, students' laboratory and demonstration hall are together and there is no separation.
11. No laboratory for students is available in the department of Forensic Medicine.
12. No CT Scan is available.
13. The following teachers were found working in other institutions:-

Sl.No.	Name of the teacher	Name of the college	Date of joining	Date of inspection
1.	Dr. Badiger Sanjeev Bhaskarappa	M.N.R. Medical College, Sangareddy	07.01.2003	04.09.2003
2.	Dr. Gajanan Naik	PES Instt. of Medical Sciences & Research, Kuppam	01.06.2003	17.09.2003

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

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council to recommend to the Central Govt. not to renew the permission for admission of 4th batch of students during 2004-2005 against the increased intake from 50 to 100 at Karnataka Instt. of Medical Sciences, Hubli.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council also decided that the State Govt. may also be informed

regarding two teachers of this college who have shown themselves as teachers in private medical colleges also for necessary action.

16. Bharati Vidyapeeth Medical College, Pune – Increase of seats in 1st MBBS course from 120 to 150 – Consideration of Compliance Report.

Read : The Compliance Report submitted by the authorities of Bharati Vidyapeeth Medical College, Pune through the Central Govt. for increase of seats in Ist MBBS course from 120 to 150.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Bharati Vidyapeeth Medical College, Pune, received through the Central Govt., for increase of seats in Ist MBBS course from 120 to 150 and decided to verify the same by way of an inspection.

17. Increase of seats in 1st MBBS course from 65 to 100 at Mahatma Gandhi Instt. of Medical Sciences, Wardha – Grant of Letter of Permission.

Read : The compliance report received through the Central Government for grant of Letter of Permission for increase of seats in 1st MBBS course from 65 to 100 at Mahatma Gandhi Instt. of Medical Sciences, Wardha.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Mahatma Gandhi Instt. of Medical Sciences, Sevagram, Wardha, received through the Central Govt., for increase of seats in Ist MBBS course from 65 to 100 and decided to verify the same by way of an inspection.

18. Increase of MBBS seats from 110 to 150 at Coimbatore Medical College, Coimbatore –Grant of LOP.

Read : The compliance report received through the Central Government for grant of Letter of Permission for Increase of MBBS seats from 110 to 150 at Coimbatore Medical College, Coimbatore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Coimbatore Medical College, Coimbatore, received through the Central Govt., for increase of seats in Ist MBBS course from 110 to 150 and decided to verify the same by way of an inspection.

19. Increase of MBBS seats from 50 to 100 at Santosh Medical College & Hospital, Ghaziabad – Regarding.

Read : The letter received from the Central Govt., Ministry of Health & F.W., requesting to conduct the Inspection of Santosh Medical College, Ghaziabad for increase of seats in Ist MBBS course from 50 to 100 for Grant of Letter of Permission any time after 15th March 2004.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Santosh Medical College & Hospital, Ghaziabad, received through the Central Govt., for increase of seats in Ist MBBS course from 50 to 100 and decided to verify the same by way of an inspection.

20. Establishment of new medical college, Davangere by Bapuji Educational Association, Davangere.

Read : The letter dt. 03rd March 2004 received from the Central Government requesting to consider the proposal for establishment of new medical college, Davangere by Bapuji Educational Association, Davangere.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the letter dated 3rd March, 2004 received from the Central Govt. stating therein that in the essentiality certificate dated 14.1.2004 issued by the State Government has certified the availability of 300 bedded hospital and also adequate clinical material. Upon consideration of the letter it was observed that the Essentiality Certificate is not in

proper order as in the Essentiality Certificate it has been mentioned that (a) The college has a parent functional teaching hospital and (b) The teaching hospital will provide clinical material as per the norms of Medical Council of India.

From the above it is noted that the mandatory requirements of issuing a certificate in Form-2 by the competent authority of the State Govt. stating therein –

“(a) The applicant owns and manages 300 bedded hospital which was established in.....” and

“(d) Adequate clinical material as per the Mci norms is available”, is still not met with in this case.

In view of above, the members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council decided to return back the file pertaining to establishment of medical college at Davangere by Bapuji Educational Association, Davangere recommending disapproval of the scheme received u/s 10A of the I.M.C. Act, 1956.

21. Establishment of new medical college at Asaripallam by Govt. of Tamil Nadu – Grant of LOP.

Read : The compliance report submitted by the authorities of Medical College, Asaripallam through the Central Govt. for grant of letter of permission for establishment of new medical college at Asaripallam.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the Secretary to the Govt. of Tamil Nadu, Health & F.W. department, Chennai, received through the Central Govt., for grant of Letter of Permission for establishment of new medical college at Asaripallam and decided to verify the same by way of an inspection.

22. Establishment of new Medical College at Malappuram by Muslim Educational Society, Calicut – Grant of LOP - Regarding.

Read : The compliance report submitted by the authorities of Muslim Educational Society, Calicut through the Central Govt. for Grant of Letter of Permission for establishment of new Medical College at Malappuram.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Muslim Education Society, Calicut, received through the Central Govt., for grant of Letter of Permission for establishment of new Medical College at Malappuram and decided to verify the same by way of an inspection.

23. Establishment of medical college, Dhamtari by Mennonite Medical Board Trust, Chhattisgarh - Grant of LOP.

Read : The compliance report submitted by the authorities of Medical College, Dhamtari through the Central Govt. for grant of letter of permission for establishment of new Medical College at Dhamtari.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by Mennonite Medical Board Trust, Chhattisgarh, received through the Central Govt., for grant of Letter of Permission for establishment of medical college at Dhamtari and decided to verify the same by way of an inspection.

24. Establishment of Midnapore Medical College & Hospital at Midnapore by Govt. of West Bengal – grant of letter of Permission.

Read : The compliance report received through the Central Govt. vide letter dated 30/9/2003 submitted by the authorities of Midnapore Medical College & Hospital, Midnapore for grant of Letter of Permission for establishment of the college.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by Govt. of West Bengal, received through the Central Govt., for grant of Letter of Permission for establishment of Midnapore Medical College & Hospital at Midnapore and decided to verify the same by way of an inspection.

25. Establishment of new medical college at Instt. of Postgraduate Medical Education & Research, Kolkatta.

Read : The compliance report received through the Central Govt. vide letter dated 30/9/2003 submitted by the authorities of IPGMER, Kolkata for grant of Letter of Permission for establishment of the college.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of IPGMER, Kolkata, received through the Central Govt., for grant of Letter of Permission for establishment of new medical college at IPGMER, Kolkata and decided to verify the same by way of an inspection.

26. Establishment of medical college at Arogyavaram by CSI Arogyavaram Medical Centre, Chittor, Andhra Pradesh – Consideration of Compliance Report.

Read : The compliance report submitted by the authorities of CSI Arogyavaram Medical Centre through the Central Govt. on the deficiencies pointed out in the MCI inspection report 23rd & 24th Jan., 2004 for establishment of medical college at Arogyavaram.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of CSI Arogyavaram Medical Centre, Chittor, Andhra Pradesh, received through the Central Govt., for establishment of Medical College at Arogyavaram and decided to verify the same by way of an inspection.

27. Establishment of medical college at Azamgarh by All India Children Care & Educational Development Society, Azamgarh.

Read : The compliance report submitted by the authorities of Medical College at Azamgarh through the Central Govt. on the deficiencies pointed out in the MCI inspection report 11th & 12th Dec., 2003 for establishment of Medical College at Azamgarh. .

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by All India Children Care & Educational Development Society, Azamgarh, received through the Central Govt., for establishment of medical college at Azamgarh and decided that a personal hearing be given to the concerned authorities requesting them to bring all the original documents pertaining to registered sale deed, proof of possession of land etc. It was also decided that the Council Retainer Advocate be also present at the time of hearing. President (Acting) is authorised for further necessary action.

28. Amrita Instt. of Medical Sciences & Research Centre, Kochi – renewal of permission for admission of 3rd batch of students during 2004-05.

Read : The compliance report submitted by the authorities of Amrita Instt. of Medical Sciences & Research Centre, Kochi received through the Central Govt. on the deficiencies pointed out in the MCI inspection report 09th & 10th Jan., 2004 for renewal of permission for admission of 3rd batch of students during 2004-05.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Amrita Instt. of Medical Sciences & Research Centre, Kochi, received through the Central Govt., for renewal of permission for admission of 3rd batch of students and decided to verify the same by way of an inspection.

29. To consider the letter dt. 3.2.2004 received from the Central Government with regard to neutralization of students at Pt. B.D. Sharma Post Graduate Institute of Medical Sciences, Rohtak against the permission granted for the academic year 2003-04 for increase of seats from 115 to 150.

Read : The letter dated 3.2.2004 received from the Central Government with regard to neutralization of students at Pt. B.D. Sharma Postgraduate Institute of Medical Sciences, Rohtak

against the permission granted for the academic year 2003-04 for increase of seats from 115 to 150.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the letter dt. 3.2.2004 received from the Central Government with regard to neutralization of students at Pt. B.D. Sharma Post Graduate Institute of Medical Sciences, Rohtak against the permission granted for the academic year 2003-04 for increase of seats from 115 to 150.

30. Admission for the academic year 2004-2005 in the 1st MBBS course at M.R. Medical College, Gulbarga.

Read : The report of the Sub-Committee constituted as per decision of the Executive Committee at its meeting held on 23rd August, 2003 to look into the irregularities in MR Medical College, Gulbarga.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that they at their earlier meeting held on 23.08.2003 were clearly of the view that it would be against the interest of innocent students who, if not stopped, will be admitted in the college for the academic year 2003-04 and further that the State Govt. was advised not to make admissions in the 1st year of MBBS course for the academic year 2003-04.

The Committee further noted that a Sub-Committee was also constituted to look into the irregularities prevailing at M.R.Medical College, Gulbarga. It was also decided that the inspection report be referred to the Postgraduate Medical Education Committee for consideration regarding postgraduate courses.

The above decision of the Committee was communicated to the concerned authorities including the Registrar, Rajiv Gandhi University of Health Sciences, Bangalore. The Registrar in response to Council letter informed vide his letter dated 28.8.2003 that as per the orders of Govt. of Karnataka, the CET Cell had conducted counselling for selection of candidates for admission to 1st MBBS course for the academic year 2003-04. He further informed that candidates had been allotted to different medical colleges including M.R.Medical College, Gulbarga. The admission process had already been completed during July,2003 and the students had already joined the course. The Registrar, therefore, requested that recognition for the academic session 2003-04 may be renewed and necessary action may be taken to restrict the admission for the next academic year i.e. 2004-05. The letter of the Registrar was considered by the members of the Adhoc Committee and Executive Committee in their meeting held on 19.9.2003 and it was decided that no admission shall be made for the academic session 2004-05 without prior approval of the Council/Govt. of India.

The Committee further considered the final report of the Sub-Committee dated 20.2.2004 constituted to look into the irregularities in M.R.Medical College, Gulbarga and decided to reiterate their decision taken in the meeting held on 19.9.2003 of stoppage of admission at the college for the academic session 2004-05 for undergraduate course as well as in all the postgraduate courses being run by the college as recommended by the Postgraduate Committee at its meeting held on 09.10.2003. Copy of the letter be marked to the Registrar, Rajiv Gandhi University of Health Sciences, Officer-in-Charge, CET Cell, Bangalore; Director of Medical Education, Govt. of Karnataka and the Principal of the College.

31. Admission for the academic year 2004-2005 in the 1st MBBS course at Dr. B.R. Ambedkar Medical College, Bangalore.

Read : The letter dated 5/3/2004 received from Just. S.R. Venkatesha Murthy, Chairman, Adhoc-Committee for granting permission to Dr. BR Ambedkar Medical College, Bangalore to make admissions for undergraduate and postgraduate courses for the academic year 2004-2005.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the letter from Mr. Justice Venkatesh Murthy, Chairman of the Adhoc Committee appointed by the Hon'ble High Court of Karnataka. It was further noted that no compliance of the deficiencies pointed out in the Inspection Report has been submitted in this letter.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate its earlier decision in view of the gross deficiencies in terms of teaching staff, clinical material etc. at the time of inspection. It was further reiterated that no admissions shall be made for the academic session 2004-05 without prior approval of the Council and Government of India for the various Undergraduate and Postgraduate Courses.

32. Continuance of recognition of MBBS degree granted by Maharashtra University of Health Sciences, Nasik in respect of students being trained at D.Y. Patil Medical College, Kolhapur.

Read : The compliance verification inspection report (19th & 20th Feb., 2004) for continuance of recognition of MBBS degree granted by Maharashtra University of Health Sciences, Nasik in respect of students being trained at D.Y. Patil Medical College, Kolhapur.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted as under :-

1. The college owns and is in possession of 3 plots of land totally measuring 26.5 acres distributed as college building occupying 4 acres plus Hospital Building complex occupying 20 acres & boys and girls hostels and Residential quarters 2.5 acres at a distance of 2 kms between hospital and college and ½ kms between college & Hostel complexes. in Kasaba Bavada Kolhapur District, The Boys and Girls Hostels are located at a distance of ½ Km from College & Hospital constructed on a land area of 2378 Sq Mtrs.
2. The shortage of teaching staff is less than 5%. However, the ratio of non medical staff in Biochemistry department is more than prescribed sum of 50%.
3. The following deficiencies pointed out in the inspection report of 17th & 18th OCT 2003 have been rectified partially to the extent indicated herein under:

<u>Deficiency</u>	<u>Extent to which rectified</u>	<u>Extent to which it still continues</u>
1.The College is divided into 3 main campuses.	The college hospital with 100 beds have been completely shifted to newly constructed hospital & ward Complex 4th floor of the main Hospital.	The College has 3 Campuses, a main college building complex, main hospital complex and a boys and girls hostel complex.
2.The Clinical material is in adequate	The OPD figures average 800, bed occupancy 86.5%, No. of X-rays and some lab investigations have been increased.	The OPD attendance with average of 662 to 700 and 725 on the day of inspection was recorded Histopathology FNAC & Microbiology laboratory work still needs improvement, as last year Pathology Department performed approximately 780 biopsies only.
3. Examination Hall	Of 300 capacity provided.	The examination hall with capacity of 300 with furniture has been provided in the basement of the main college building. The toilet attached to the examination hall is not proper and needs to be made close to examination hall.
4. Hostels		The capacity of 467 for boys and girls was available, and 120 to 130 for residents.

4. The College has so far not obtained permission for conducting Post Mortems.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided that one month's time be given for removal of the deficiencies and the President (Acting) is authorized to take a decision upon receipt of the compliance report from the college.

33. Continuance of recognition of MBBS degree granted by Amravati University in respect of students being trained at Dr.Panjabrao Alias Bhausaheb Deshmukh Memorial Medical College, Amravati.

Read : The compliance verification inspection report (19th & 20th Feb., 2004) for continuance of recognition of MBBS degree granted by Amravati University in respect of students being trained at Dr.Panjabrao Alias Bhausaheb Deshmukh Memorial Medical College, Amravati.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted as under :-

1. The shortage of teaching staff is as under: - (Annexure – 1)

Faculty -----9.4% (14 out of 134)

- i) Professor ----- 1 (Biochemistry)
- ii) Associate Professor: -----5 (Anatomy-2, Biochemistry-1, FMT-1, Dentistry-1)
- iii) Assistant Professor: -----8 (Anatomy-3, FMT-1, Dentistry-1, PSM-2, Physiology-1)

2. Available clinical material in the college hospital is inadequate as under:-

	Average		Day of Inspection	
<u>Laboratory</u>				
<u>Investigations</u>	105	150	120	70
Biochemistry	10	24.8	30	30
Microbiology	47	23.8	50	30
Serology	1.4	03.8	03	04
Parasitology	73	134.8	40	11
Haematology	6.2	38.4	02	70
Histopathology	1.4	14	02	05
Cytopathology				
Others				

3. The following deficiencies pointed out in the inspection report of 6th & 7th Nov. 2000 have been rectified partially to the extent indicated hereunder:

Deficiency	Extent to which rectified	Extent to which it still continues
1. Inadequacy of clinical material in own attached hospital	There is improvement in OPD attendance and bed occupancy	Average Daily OPD attendance is 373 in own hospital
2. Incinerator	Hospital has made an arrangement of the disposal of waste with the municipal corporation of Amaravati.	Arrangement for disposal of waste made, but incinerator has not been installed.

4. The following deficiencies pointed out in the inspection report of 6th & 7th Nov. 2000 have not been rectified: -

- a.) The deficiency of the staff rooms & Demonstration rooms in associated / attached Govt. Hospitals.
- b.) Institute needs to develop its own 500 beds. There is still deficiency of 170 beds of their own.
 - a) Training of interns in rural health center
 - b) Ownership / lease of the urban health center
 - c) Permission for medico legal work
 - d) Qtrs. for resident and nursing staff
 - e) Air conditioning and sound proofing of audiometry room
 - f) Mechanical laundry and incinerator
 - g) Medical staff in the department of biochemistry.
 - k) Shortage of nursing staff.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to issue a show cause notice to the concerned authorities as to why steps should not be initiated to recommend to the Central Govt. to derecognise the institution for the award of MBBS degree granted by Amravati

University in respect of students being trained at Dr. Panjabrao alias Bhausaheb Deshmukh Memorial Medical College, Amravati and further decided to give one month's time to the institution to respond to the show cause notice. Copy of the letter sent to the institution be marked to the Chief Secretary, Secretary (Medical Education), Director of Medical Education, Registrar of the University, member of the Council representing the State and the Central Govt.

34. To note Letter of Intent/Permission/disapproval of the scheme for establishment of medical colleges/Increase of seats u/s 10A of the IMC Act, 1956.

Read : The Letter of Intent/Permission/disapproval of the scheme for establishment of medical colleges/Increase of seats u/s 10A of the IMC Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the Letter of Intent/Permission/disapproval of scheme for establishment of medical colleges/Increases of seats issued by the Central Government as under:-

Name of the college	Date of letters issued by the Central Govt.
Establishment of National Instt. of Medical Sciences, Jaipur by Indian Medical Trust, Jaipur	The Central Government vide letter dated 13.2.2004 has issued LOP for establishment of the college with an annual intake of 100 students for the academic session 2004-05 for a period of one year.
Sree Balaji Medical College & Hospital, Chennai	The Central Govt. vide letter dated 16.2.2004 renewed the permission for admission of 2 nd batch of students during the year 2004-05.
Mahatma Gandhi National Instt. of Medical Sciences, Jaipur	The Central Govt. vide letter dated 16.2.2004 renewed the permission for admission of 4 th batch of students during the year 2004-05.
Increase of seats in MBBS course from 110 to 150 at Coimbatore Medical College, Coimbatore	The Central Govt. vide letter dated 16.2.2004 has issued LOI for increase of seats at the college for the academic session 2004-05.
Establishment of new medical college at Shillong by North Eastern India Trust for Education and Development, Shillong	The Central Govt. vide letter dated 5.2.2004 has disapproved the scheme for establishment of the college
Establishment of new medical college at Cuddapah by Mohammadiya Educational Society, Cuddapah	The Central Govt. vide letter dated 3.3.2004 has disapproved the scheme for establishment of the college.
Increase of MBBS seats from 50 to 150 at Chengalpattu Medical College, Chengalpattu	The Central Govt. vide letter dated 26.2.2004 has disapproved the scheme for increase of seats at the college.

35. Continuance of recognition of MBBS degree granted by Calicut University in respect of students being trained at Govt. Medical College, Kozhikode.

Read : The compliance verification inspection report (27th & 28th Feb., 2004) for continuance of recognition of MBBS degree granted by Calicut University in respect of students being trained at Govt. Medical College, Kozhikode.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted as under :-

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

Faculty : 18.9% (i.e. 50 out of 270)

- Professor : 38% (i.e. 8 out of 21, Physiology-1, Biochemistry-1, Anaesthesiology-2, Forensic Medicine-1, PSM-1)
- Associate Professors : 35.5% (i.e. 22 out of 62)
(Anatomy-3, Physiology-3, Pharmacology-2, Pathology-4, Forensic Medicine-3, PSM-2, Anaesthesia-3, Radiodiagnosis-1, General Medicine – 1)
- Assistant Professors : 10.4% (i.e. 8 out of 77)
(Anatomy-1, Physiology-1, PSM-3, Anaesthesia-2, Radiodiagnosis-1)
- Tutors : 9.9% (10 out of 110)
(PSM-5, General Medicine-3, Radiodiagnosis-2)

2. Number of teaching units is as follows :-

Speciality	Required Beds/Units	Present Beds/Units	Deficiency, if any
Medicine & Allied Specialties			
General Medicine	240/8	270/6	Deficiency of 2 units.
Paediatrics	120/4	152/4	
TB & Chest	42/1	100/2	
Skin & VD	20/1	45/3	
Psychiatry	20/1	45/2	
Total	442	612	
Surgery & Allied Specialties			
General Surgery	240/8	287/6	Deficiency of 2 units. Deficiency of 1 unit. Deficiency of 6 beds.
Orthopaedics	120/4	119/3	
Ophthalmology	40/1	80/2	
ENT	40/1	34/3	
Total	440	520	
Obstetrics & Gynaecology			
Obstetrics & ANC Gynaecology	120/4	368/6	No deficiency
Total	982	1500	

- OPD Services are run daily in 1 session between 8.00 and 11.00 am. Space for teaching area is not available in the OPDs of major departments like Medicine, Surgery and Orthopaedics.

4. Intensive Care : The following intensive care areas are not available :-

Surgical Obstetrics

5. Two 800 MA, one 500 MA (IMCH), six 300MA (two in ICD and one in casualty), one 60MA, one 20MA X-Ray units are available and they are distributed in all the three hospitals. There is no C-arm available. There is a spiral CT available. No MRI is available. There are 3 ultrasound machines available, one with colour Doppler and one Black and White Ultrasound is available in IMCH. There is a reporting room and class room available. BARC approval is not available and the license got expired 3 years back.

6.	i)	Paramedical staff :	Laboratory Technicians	:	52
			Laboratory Assistants	:	31
			Laboratory Attendants	:	32
	ii)	Nursing Staff :			

Nursing Superintendent	:	1
Deputy Nursing Superintendent	:	Nil
Matron	:	Nil
Asst. Nursing Superintendent	:	Nil
Nursing Sisters	:	80
Staff nurses	:	229

Paramedical & Nursing Staff are quite inadequate considering the number of beds and the workload of the hospital. It is understood that the nursing staff and the paramedical workers belong to a separate category and they do not come under the administrative /financial control of the Medical Superintendent/Principal.

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

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to give 3 months' time to the institution to comply with the deficiencies pointed out in the inspection report. Copy of the letter sent to the institution be marked to the Secretary (Medical Education), Director of Medical Education, Registrar of the University.

36. Continuance of recognition of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore in respect of students being trained at M.S. Ramaiah Medical College, Bangalore.

Read : The Council Inspection report (2nd & 3rd Dec., 2003) along with compliance report received from the Principal & Dean, M.S. Ramaiah Medical College, Bangalore on the deficiencies pointed out in the inspection report for Continuance of recognition of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore in respect of students being trained at M.S. Ramaiah Medical College, Bangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted as under :-

1. The shortage of teaching faculty is 9% (i.e. 10 out of 112) is as under:-

a) Faculty (i.e. 10 out of 112)

- i) Associate Professor: Physiology –1, Biochemistry –1
- iii) Assistant Professor: Anatomy –1 , physiology –1, community medicine –3 , Physiology –1, Biochemistry-2, Forensic Medicine - 1 Total - 9
- iv) Tutor: Anatomy –2, Biochemistry - 1

2. Available clinical material is inadequate as under:-

	Daily Average	Day of Inspection 2 nd Dec,2003
O.P.D. attendance	747	661
Casualty attendance	41	48
Bed occupancy%	66%	70.53%
<u>Operative work</u>		
Number of major surgical operations	10	11
Number of minor surgical operations	7	9
Number of normal deliveries	7	2
Number of caesarian Sections	1-2	1
<u>Radiological Investigations</u>		
X-ray	70	67
Ultrasonography	12	20
Special Investigations	-	-
C.T. Scan	2	4
<u>Laboratory Investigations</u>		
Biochemistry	1500	1091
Microbiology	30	38
Serology	90	126
Parasitology	6	3
Haematology	1117	1363
Histopathology	12	16
Cytopathology	10	03
Others		

- 3. Blood Bank licensed upto 2001.
- 4. Auditorium has a capacity of 500 only against 750 required as per MCI norms.
- 5. No Lecturers cum medical officers having MD (PSM) qualification is posted at RHTC. L.M.O. is not available at RHTC.

6. Paramedical staff for laboratories is inadequate.
7. In the department of Pharmacology, there is only one laboratory functioning which is combined for experimental Pharmacology and Pharmacy laboratories.
8. The number of books in the department of libraries and Biochemistry, Microbiology, Medicine, TB & Chest, Skin & VD, Psychiatry, Paediatrics, Surgery, Orthopaedics, ENT, Ophthalmology and Radiodiagnosis are inadequate.
9. Other deficiencies/remarks in the main report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council also reviewed the compliance submitted by the college. It was observed that the college has submitted compliance only regarding the appointment of the faculty and no compliance has been submitted on other deficiencies as observed in the Inspection report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to ask the college to submit a detailed compliance on all the deficiencies/remarks observed in inspection report within a period of one month.

37. To consider the letter dated 27th Jan., 2004 received from the Principal, Assam Medical College, Dibrugarh requesting to postpone the compliance verification inspection till July, 2004.

Read : The letter received from the Principal, Assam Medical College, Dibrugarh requesting to postpone the compliance verification inspection till July, 2004.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to accept the request of the Principal to postpone the compliance verification inspection till July 2004.

38. To consider the letter received from the Director, Rajendra Instt. of Medical Sciences, Ranchi requesting to grant six months time to remove the deficiencies pointed out in the inspection report carried out on behalf of the Council on 28th & 29th Nov., 2003.

Read : The letter dated 17th Feb., 2004 received from the Director, Rajendra Instt. of Medical Sciences, Ranchi requesting to grant six months time to remove the deficiencies pointed out in the inspection report carried out on behalf of the Council on 28th & 29th Nov., 2003.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council observed that the matter is subjudiced in the Hon'ble High Court of Jharkhand at Ranchi and the Director, RIMS, Ranchi has already filed a supplementary affidavit in the above matter in the Hon'ble Jharkhand High Court on 12th February 2004.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided that the college may be advised to approach the Hon'ble High Court of Jharkhand for the extension of time for removal of deficiencies.

39. To consider the letter dated 9th Feb., 2004 received from the Principal & Medical Supdt., Lady Hardinge Medical College, New Delhi requesting to postpone the compliance verification inspection fixed for 12th & 13th Feb., 2004 in the later half of August, 2004.

Read : The letter dated 9th Feb., 2004 received from the Principal & Medical Supdt., Lady Hardinge Medical College, New Delhi requesting to postpone the compliance verification inspection fixed for 12th & 13th Feb., 2004 in the later half of August, 2004.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council agreed for the postponement of compliance verification inspection till July, 2004 only and no further extension be given to the Institute.

40. Renewal of permission for admission of students in respect of five Govt. Medical College in Andhra Pradesh granted by the Central Government for the academic session 2003-04 – Consideration of compliance report.

Read : The compliance report submitted by the Govt. of Andhra Pradesh in respect of five Govt. Medical Colleges in Andhra Pradesh received through the Central Government.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council reviewed the reply to the Show Cause Notices as submitted by the Medical Colleges of Andhra Pradesh as under :-

1. Rangaraya Medical College, Kakinada:

Sl.No.	Deficiencies pointed out in the report	Remarks
1.	(a) The shortage of teaching faculty is 11 % -i.e. 23 out of 203 - as under: (i) Professor: Nil. (ii) Associate Professor: 8 (Physiology:3; Pathology:3; Forensic Medicine:1; Paediatrics:1) (iii) Assistant Professor: 7 (Lecturer in Biophysics:1; Pharmaceutical Chemist:1; Forensic Medicine:1; Epidemiologist cum Lecturer: 1; Anaesthesia: 1; Radiodiagnosis: 1; Dentistry:1) (iv) Tutor / Resident: 8 (Pharmacology:2; Pathology:3; Microbiology:1; Forensic Medicine:1; Anaesthesiology:1). (b) The shortage of Jr. Resident is 17 % -i.e. 13 out of 76- as under: (i) Jr. Resident: 13 (Paediatrics:4; Psychiatry:2; Surgery:5 & O.G.:2) © 30 faculty members have joined the college and 8 have left within last three months. A total of 33 teachers joined the college during the last one month before this inspection. Out of which, 19 teachers were transferred only from one medical college i.e. Andhra Medical College, Vishakhapatnam and the remaining 14 were transferred from various other medical colleges in the State. Out of these 33 teachers about 25 have joined the college just a week before the date of inspection.	The shortage of teaching faculty i.e. 11 % -i.e. 23 out of 203 continues to remain as it is. Merely an explanation is given by the college that the inspectors have not considered those persons on leave. However, no compliance or proof is submitted as regards to how the deficiencies have been fulfilled. No declaration forms or any additional staff have been submitted. Hence deficiency remains as it is.
2.	Blood bank license has expired in 2000. It has not been renewed since then.	Not rectified. No information is given thereafter as regards renewal of license. Deficiency remains as it is.
3.	Nursing staff is grossly inadequate as only 189 nurses are available against the requirement of 306 nurses – i.e. there is shortage of 39 %. On the day of inspection, it was found that staff nurses were very few in number in most of the wards.	The deficiency of Nursing staff being grossly inadequate is not rectified as the college has claimed to have utilized the services of student nurses and the nurses from the private nursing schools, which is not acceptable. Thus, the deficiency remains as it is.

4.	Central library is located in paraclinical block opposite teaching hospital. There is no library facility in the college building which is 3 km. away and it has only 1 reading room of the capacity of 100. The number of foreign journals received in the central library is grossly inadequate as only 12 foreign journals are available against 30 required. The seating capacity of library is inadequate as only 120 seats are available for U.G. students and 60 for P.G. students.	Not rectified. The number of journals still remains inadequate. The seating capacity also still remains inadequate as no information has been furnished about how the seating capacity has been increased in the central library. Deficiency remains as it is.
5.	In the infrastructure of preclinical and paraclinical departments, the following deficiencies are observed: (a) In the department of Pharmacology, Experimental Pharmacy laboratory is too small as only it has a capacity of only 15. Research laboratory is not available. Adequate furniture is not available in demonstration rooms or in the departmental library. (b) In the department of Forensic Medicine, students' laboratory is not available. Catalogue is not available in the museum. Viewing gallery for students is not provided in the mortuary.	Deficiency is partially rectified. Research laboratory is still not provided. Deficiency remains as it is as no further information has been received as to the completion of the new mortuary block and students laboratory.
6.	Veterinary surgeon is available only part time and that too only once a week. Facilities are inadequate as operating room or table is not available. Maintenance of animal house needs improvement.	Partially rectified as the Veterinary Surgeon still continues to be available part time.
7.	Boys' hostel is available in a separate campus. It is old and needs renovation and improvement.	Partially rectified as no information has been supplied as to how the renovation has been carried out in the hostel rooms.

2. Govt. Medical College, Anantapur.

Sl. No.	Deficiencies pointed out in the inspection report.	Remarks
1.	There is no regular full time Principal/Dean in the College.	No compliance of any appointment is submitted. Deficiency remains as it is.
2.	There is severe shortage of teaching faculty i.e. more than 50% as under: - Professor : 12 (Physiology-1, Pathology-1, Microbiology-1, PSM-1, Medicine-1, Paediatrics-1, T.B. & Chest-1, Skin-1, Psychiatry-1, Ortho.-1, Obst. &	No compliance of any appointment is submitted Deficiency remains as it is.

	Gynae.-1, Anaesthesia-1) 60% deficiency. Assoc. Prof. : 14 (Anatomy-1, Physiology-1, Biochemistry-1, Pharmacology-1, Micro.-1, FM-1, PSM-1, Medicine-1, Paed.-1, Surgery-1, Obst. & Gynae.-1, Anaesthesia-1, Radio-diagnosis-1, Dental-1) 70% deficiency. Lecturer : 10 (Anatomy-2, Lect. In Biophysics-1, Statistician-1, Epidemiologist-1, Pharma.-1, Paediatrics-2, Psychiatry-1, Ophthalmology-1) 36% deficiency. Tutors : 7 (Pharma.-1, TB & Chest-2, Surgery-2, Obst. & Gynae.-2) 20% deficiency Residents : 48 (Medicine-9, Paediatrics-6, Skin-3, Psychiatry-3, Surgery-9, Ortho.-6, Ophthalmology-3, ENT-3, Obst. & Gynae.-6) 84% deficiency.	
3.	Adequate furniture like chairs, blackboard, x-ray view boxes, etc. are not yet provided in all the teaching areas.	No satisfactory compliance is given. Deficiency remains as it is
4.	Separate treatment room and injection areas are not provided for medical and surgical OPD. The audiometry room should be made functional. Audiometrist is not available. There is no accommodation available for nurses.	Rectified partially. No compliance submitted for deficiency of Audiometry room/audiometrist and accommodation for nurses. To that extent, deficiency remains as it is.
5.	Disposable syringes are being sterilized and reused which is an unethical practice and it must be stopped immediately.	There is no firm statement about complete stoppage or reusing the disposable syringes. Deficiency remains as it is.
6.	Casualty ward has only 3 beds which is much less than the number of beds required as per norms.	No details given for rectification of deficiencies. No information provided for installation of equipment thereafter. Deficiency remains as it is.
7.	Essential life saving equipments like defibrillator, pulse oxymeter, cardiac monitor, ventilator are not available.	No satisfactory explanation is given. Deficiency remains as it is
8.	Microbiological services are very rudimentary and only 10 investigations are done daily.	No satisfactory explanation is given. Deficiency remains as it is
9.	The number of clinical pathology investigations are very little.	No satisfactory explanation is given. Deficiency remains as it is
10.	There is no separate chamber for FNAC.	No satisfactory explanation is given.

		Deficiency remains as it is
11.	Histopathology services are not provided because of lack of equipments and staining process.	No satisfactory explanation is given. Deficiency remains as it is
12.	There is a common ICU & ICCU in which the essential life saving equipment is not provided for each bed. The equipment available is less in comparison with the number of beds available.	No satisfactory explanation is given. Deficiency remains as it is
13.	Separate ICCU is not provided.	No satisfactory explanation is given. Deficiency remains as it is
14.	Separate surgical ICU is not provided. However, only 5 beds combined with post operative ward are available without any other infrastructural support. Emergency equipment is shared with common ICU.	No satisfactory explanation is given. Deficiency remains as it is
15.	In the Paediatric ICU only 8 beds are provided with no other infrastructural facilities.	No satisfactory explanation is given. Deficiency remains as it is
16.	BARC regulations are not followed in the Radiology department for the present work. The department is not approved by BARC. Adequate protection from the nearby wards is to be provided.	Approval is not yet obtained. To that extent, deficiency remains as it is.
17.	C-arm is not available in the college.	No satisfactory explanation is given. Deficiency remains as it is
18.	The number of investigations are also less (35-40 routine x-rays, 12-14 Ultra sound and 5 CT scan daily). Number of special investigations 6-7 per month.	No satisfactory explanation is given. Deficiency remains as it is
19.	In the OTs there are only 2 major and 2 minor OTs which are functional. There is no viewing gallery and no CCTV arrangement for the students to watch is available.	No satisfactory explanation is given. Deficiency remains as it is
20.	No proper preoperative anaesthetic area is available.	No satisfactory explanation is given. Deficiency remains as it is
21.	Separate post operative beds are not available in the OT complex.	No satisfactory explanation is given. Deficiency remains as it is
22.	The post operative recovery beds are shared with ICU.	No satisfactory explanation is given. Deficiency remains as it is
23.	There is no CSSD available. Only 2 vertical sterilizers are placed in a room which is grossly inadequate for covering to the requirement of the hospital.	Not yet rectified. No further details/information given about receipt of sterilizers thereafter. To that extent, the deficiency

		remains as it is.
24.	Dietician is not available in the central kitchen.	No satisfactory explanation is given. Deficiency remains as it is
25.	No canteen is available.	No satisfactory explanation is given. Deficiency remains as it is.
26.	The drier in the laundry is not functioning. No staff nurses posted in the laundry.	No satisfactory explanation is given. Deficiency remains as it is
27.	Supporting para medical staff is inadequate in several departments like Medicine, Radiology and Pharmacology.	No satisfactory explanation is given. Deficiency remains as it is
28.	The number of staff nurses available are only 80 on regular basis and 30 contractual workers. Thus the shortage of nursing staff for teaching hospital of 400 beds is more than 25%.	No satisfactory explanation is given. Deficiency remains as it is
29.	There is no functional Medical Education Unit.	No satisfactory explanation is given. Deficiency remains as it is
30.	Statistical unit is not yet functional.	No satisfactory explanation is given. Deficiency remains as it is
31.	There is no artist cum photographic unit in the department of Anatomy.	No satisfactory explanation is given. Deficiency remains as it is
32.	UHC & RHC are yet to be made functional. They are not yet attached to the medical college.	No satisfactory explanation is given. Deficiency remains as it is
33.	The required number of staff is not posted at these two centers.	No satisfactory explanation is given. Deficiency remains as it is
34.	The number of rooms provided for resident doctors is inadequate.	No satisfactory explanation is given. Deficiency remains as it is
35.	In the hostels for boys and girls rooms are not properly furnished. More number of chairs and tables are to be provided.	No satisfactory explanation is given. Deficiency remains as it is
36.	In the infra structure of various departments, the following deficiencies are observed :- A) Research laboratory in the department of Physiology is not properly equipped. B) The number of specimens available in the museum of Physiology department is much less and no catalogue is available. C) The special laboratory services in the Microbiology department are not yet functional. D) Research laboratory in the Microbiology department is not yet	No satisfactory explanation is given. Deficiency remains as it is

	functional. E) In the museum of Microbiology department, the specimens are not displayed properly. F) Books in the departmental library is also not adequate.	
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3. **Kurnool Medical College, Kurnool:**

Sl.No.	Deficiencies pointed out in the report	Remarks
1.	(a) The shortage of teaching faculty after considering the requirements for U.G. and P.G. courses is 26 % – i.e. 61 out of 237- as under: (i) Professor: 1 (Pharmacology:1) (ii) Associate Professor; 13 (Anatomy:1; Physiology:2; Pathology:2; Microbiology:1; Forensic Medicine:1; P.S.M.:2; TB & Chest:1; Surgery:1; Anaesthesia:1; Radiodiagnosis:1) (iii) Assistant Professor: 18 (Anatomy:3; Pharmacology:2; Pharmaceutical Chemist:1; Pathology:1; Forensic Medicine:1; P.S.M.:2, Epidemiologist cum Lecturer:1; Statistician cum Lecturer:1; Anaesthesia:3; Radiodiagnosis:3) (iv) Tutor / Sr. Resident: 29 (Anatomy:2; Physiology:1; Biochemistry:3; Pharmacology:3; Pathology:2; Microbiology:4; Forensic Medicine:2; Surgery:3; Anaesthesia:5; Radiodiagnosis:4) (b) The shortage of Jr. Resident is 15 % -i.e. 12 out of 79- as under: (i) Jr. Resident: 12 (Surgery:9; Orthopaedics:3) On scrutiny of the declaration forms submitted during the inspection, it was found that 24 teachers joined the institution within a month and as a	(a) As regards Associate Professor, the compliance is silent whether those who were promoted to Kurnool Medical College have in fact actually joined at Kurnool. No Declaration Forms are attached with the compliance. Deficiency remains as it is. (b) As regards the deficiency of Assistant Professors, the compliance does not reveal that any new person has joined the college and no Declaration Form has been attached and therefore the deficiency remains as it is although, the college has claimed that the deficiency of Asst. Professor cadre are only one in Pharmacology, one in Epidemiology in SPM and one in Radio-diagnosis, however, no further details have been given how they have removed the deficiency of other Assistant Professors. Deficiency remains as it is. (c) Similarly, no satisfactory/proper compliance has been given by the college regarding the removal of deficiencies of tutors/Sr. Residents. Deficiency remains as it is.

	matter of fact 23 of them within the last 10 days of the date of inspection. All these teachers were drawn from different Government Medical Colleges of the State of Andhra Pradesh. Out of these 24 teachers, 7 are Professors, 10 Associate Professors and 7 Assistant Professors.	
2.	Teaching beds are deficient to the extent of 15 % -i.e. 111 out of 750 beds- as under: (i) Medicine: 48 beds (ii) Paediatrics: 26 beds (iii) Orthopaedics: 37 beds	The college has not provided any evidence of making up deficiency of beds. The deficiency is not rectified. Deficiency remains as it is.
3.	Hospital is old, dilapidated building and is poorly maintained, overcrowded and stinking. It does not have ambience of teaching hospital. It does not have adequate facilities for toilets and drinking water and overall cleanliness is very poor. Space between two beds is not sufficient.	Partially rectified as no information has been provided about how the space between the two beds has been increased commensurate with teaching beds. To that extent, deficiency remains as it is.
4.	Blood bank license expired in 1997. It has not been renewed since then.	Not rectified as no information has been provided thereafter about the renewal of license. Deficiency remains as it is.
5.	The number of books and journals in the central library is grossly inadequate. Only 4,350 books are available against 8,000 required at this stage. The number of journals available are only 58 –11 foreign & 47 Indian- against requirement of 100 journals. The number of foreign journals is too low for a medical college library. The staff is inadequate and the post of librarian is vacant.	Not rectified. The number of books still continues to remain deficient. The number of journals still continues to remain inadequate and the number of foreign journals is too low for a medical college library. The deficiency continues to remain as it is.
6.	In the infrastructure of pre-clinical and para-clinical departments, the following deficiencies as observed. (a) Clinical Physiology laboratory is not available in the Department of Physiology. In other laboratories in the department, the equipment are old and not in working order. It appears that the equipments have not been used for a long time. (b) Furniture in the department of Biochemistry and Pharmacology is old. Washbasins and water supply in the laboratory of Biochemistry department are satisfactory. Research laboratory of Biochemistry department has old non-working equipment.	Partially rectified as no compliance is given regarding equipment in other laboratory. To that extent, deficiency remains as it is. Partially rectified. No compliance is given regarding equipment in research laboratories. To that extent, deficiency remains as it is.

4. S.V.Medical College,Tirupati:

Sl.No.	Deficiencies pointed out in the report	Remarks
1.	The shortage of teaching faculty after considering U.G. & P.G. requirements is as under: Professor - Nil Reader - 21 (Anatomy-2; Physiology:2; Pharmacology-2; Pathology-3; Microbiology-2; PSM-2; ENT-1; Anaesthesia-4; Radio-Diagnosis-2; Dental-1) Lecturer - 25 (Anatomy-2; Physiology:1; Pharmacology:1; Pharmaceutical Chemist-1; Pathology-4; Microbiology:1; PSM-3; Medicine:6; Anaesthesia-2; Radio-Diagnosis-3; Dental-1) Tutors - 17 (Pharmacology:1; Microbiology-2; PSM-1; Medicine-4; TB & Chest-1; Psychiatry-1; Orthopaedics-1; Anaesthesia-5; Radiodiagnosis:1) Residents - 13 (Medicine-6; Surgery-3; Paediatrics-2; Psychiatry-2) Total staff deficiency is 32 % i.e. 76 out of 238. A total of 21 teachers were transferred to S.V.Medical College, Tirupati during the last one month before this inspection. 14 of these teachers were transferred in the month of September and the remaining 7 after 22nd of August,2003 from various other Govt. Medical Colleges in the State. They include 10 Professors, 1 Associate Professor, 8 Assistant Professors and 2 Tutors. There is no mention about the resultant vacancies of those medical colleges from where these teachers are drawn.	(a) As regards Associate Professor, the compliance is silent about the persons who were promoted to S. V. Medical College have in fact actually joined at S. V Medical College. No Declaration Forms are attached with the compliance. Deficiency remains as it is (b) As regards the deficiency of Assistant Professors, the compliance does not reveal that any new person has joined the college and no Declaration Form has been attached. Deficiency remains as it is. (c) As regards deficiency of tutors, even though the college has claimed that there is no deficiency of tutors/Sr. Residents, nothing has been mentioned about how the deficiency has been rectified. The deficiency remains as it is.
2.	Examination Hall can accommodate only 175 students which is smaller than norms.	Inadequate capacity of examination hall remains as it is as the compliance merely states that the tenders have been called for the construction work. Deficiency remains as it is.
3.	Hostels for boys and girls is inadequate; a minimum of 100 more seats in each hostel has to be provided.	The compliance merely states that proposals are being submitted to increase the accommodation further and the construction of another floor over the girls hostel is being taken up. The deficiency remains as it is.

4.	There is no Auditorium available.	The deficiency of unavailability of Auditorium continues to remain as it is as the compliance merely states that the funds are released and the nodal agencies are entrusted with the work of auditorium. The deficiency remains as it is.
5.	Intensive Care Units have to be provided with Central Oxygen Supply, Suction, Emergency Equipments and other Resuscitative measures. In the medical ICU Ventilator, pulse oximeter, cardiac monitor and defibrillator are not available. In Paediatric ICU no life supportive or emergency equipment are available. There is no separate surgical ICU. Only post operative ward with 16 beds is available and no emergency equipment or resistive measures are provided.	Partially rectified. Details of equipment available are not provided. Surgical ICU is still not available. Central suction is not available. To that extent, deficiency remains as it is.
6.	Casualty ward does not have central oxygen, suction, ventilator and other equipments. There is no disaster trolley available. There is no minor OT. Cardiac monitor, pulseoximeter and defibrillator are not available.	Partially rectified. Details of equipment not provided. To that extent, deficiency remains as it is.
7.	Radiology department has got only one functioning 500 MA unit. More x-ray machines are to be provided.	Not rectified as no further information about the installation of x-ray machine has been provided thereafter. Deficiency remains as it is.
8.	There is no CT Scan available.	Not rectified as no further information about the installation of x-ray machine has been provided thereafter. Deficiency remains as it is.
9.	Nursing staff are grossly inadequate considering the total number of beds available. Only 123 nurses are available against the 253 required i.e. shortage of 51%. Most of the nursing work is being done by the student nurses only.	It is claimed by the Institute that the deficiency of nursing staff is removed and the Nursing Council Norms have been followed, however no further details as to how many nurses have been appointed or joined at the institute are given. Deficiency remains as it is.
10.	In the infrastructure of pre-clinical and para-clinical departments the following deficiencies are observed. (a) The space and the capacity in the students lab. in the department of Pharmacology are inadequate. (b) Clinical Pathological lab. for the students is not available. (c) Students viewing gallery in mortuary block is not available. Teaching aids are not available in the demonstration rooms of Forensic Medicine.	No satisfactory explanation is given. Deficiency remains as it is. No satisfactory explanation is given. Deficiency remains as it is. No satisfactory explanation is given. Deficiency remains as it is.

5. **Kakatiya Medical College, Warangal:**

Sl.No.	Deficiencies pointed out in the report	Remarks
1.	(a) The shortage of teaching faculty considering U.G. & P.G. courses is 25 % -i.e. 59 out of 238- as under: (i) Professor; 2 (Physiology:1; Dentistry:1) (ii) Associate Professor: 21 (Anatomy:2; Physiology:2; Pharmacology:3; Pathology:4; Microbiology:1; P.S.M.: 2; Medicine:1; TB & Chest:1; Orthopaedics:1; Anaesthesia:1; Radiodiagnosis:2; Dentistry:1) (iii) Assistant Professor: 14 (Anatomy:1; Physiology:1; Lecturer in Biophysics:1; Pharmacology: 1; Pharmaceutical Chemist:1; Pathology:1; P.S.M.: 3; Epidemiologist cum Lecturer:1; TB & Chest: 1; Radiodiagnosis:3) (iv) Tutor / Sr. Resident: 22 (Anatomy:2; Physiology:1; Biochemistry: 2; Pathology:6; Microbiology:1; Forensic Medicine: 2, P.S.M.: 2; TB & Chest:1; Anaesthesia:2; Radiodiagnosis: 2; Dentistry: 1) (b) The shortage of Jr. Resident is 53 % -i.e. 41 out of 77- as under: Jr. Resident: 41 (Medicine:9; TB & Chest:2; Skin & V.D.: 3; Psychiatry:3; Paediatrics:9; Surgery:9; Ophthalmology:3; E.N.T.:3) On scrutiny of the declaration forms it has been found that 21 teachers have joined the institution within a period of one month from the date of inspection, this includes 14 Professors, 3 Associate Professors and 4 Assistant Professors, Out of 21 teachers, 20 are being drawn from Hyderabad and one from Kurnool.	(a) As regards the deficiency of Professors, it has been claimed that they were on leave. No further information is submitted. Deficiency remains as it is. (b) Although the college has claimed that the actual deficiency of Associate Professor is only eight and the inspectors did not consider the promotion orders of certain staff who had not actually joined the college at the time of inspection. No further details about these Associate Professors joining the college subsequently have been given, nor have their Declaration Forms been attached. Deficiency remains as it is. (c) The college has claimed that there is no such shortage of tutors, however no further details as to how the shortage of 22 tutors/Sr. Residents has been rectified. No details have been furnished and no declaration forms have been attached. Deficiency remains as it is.
2.	Beds in the hospital are laid closely. The distance between two beds is inadequate.	The deficiency of beds in the hospital being laid closely to each other is not yet rectified as the college in its compliance has claimed that these deficiencies will be rectified with enough space at the earliest. That means the deficiency still exists on the date of submission of the compliance.
3.	Nursing staff is grossly inadequate. Only 177 nurses are available against	The deficiency of Nursing staff being grossly inadequate is not rectified as

	requirement of 351 nurses – i.e. there is shortage of 50%.	the college has claimed to have utilized the services of student nurses and the nurses from the private nursing schools, which is not acceptable. Deficiency remains as it is.
4.	In Medical Records Section, ICD X classification is not used. Records are not maintained properly.	The deficiency of ICD (X) classification not being followed, still persists. Deficiency remains as it is.
5.	CSSD facilities are inadequate and the deficiency still persists. In CSSD, only 1 sterilizer is functional which caters to bedside dressing sets only. O.T.s maintain their sterilization.	The deficiency of emergency Operation Theatre, equipment for CSSD are partially rectified as the equipment has been ordered and in the process of being supplied or being installed. Deficiency remains as it is.
6.	Maternity hospital is in bad shape. Renovation is at slow pace.	The deficiency of maternity hospital still persists. Deficiency remains as it is.
7.	In central library, not a single foreign journal is available. Total journals available are only 26 against 100 required.	The deficiencies of not a single foreign journal being available and the total number of journals available being only 26 against 100 required still persist. Deficiency remains as it is.
8.	Veterinary surgeon is only on visiting basis. He is not full time employee of the college.	Not rectified. Deficiency remains as it is.
9.	There is shortage of residential quarters for all categories of staff. This deficiency continues.	Not rectified as the number of quarters are inadequate as required under the norms. Deficiency remains as it is.

The Committee further noted as under:-

1. It is to be noted that in the reply to the show cause notice the Govt. of Andhra Pradesh itself has indicated as under:

“The Andhra Pradesh Health Medical Housing & Infrastructure Development Corporation has informed that all the deficiencies pointed out by Medical Council of India, in all the 5 medical colleges and teaching hospitals at Kakinada, Warangal, Kurnool, Tirupati and Ananthapur will be completed by 31.3.2004.”

However, no further information has been received by this office till date as regards the completion and rectification of the deficiencies pointed out in the inspection report.

2. Even though in the Letter of Permission the Govt. of India specifically indicated that the permission is further subject to the condition that the Govt. of Andhra Pradesh shall sort out the pending issue of admissions made in these colleges during the year 2002-03 with Medical Council of India, however, no attempt has been made by the State Govt. either in the reply to this show cause notice or independently at any stage to sort out the pending issue of admissions made in 2002-03 without permission with MCI.

In view of the above, the members of the Executive Committee and of the Ad hoc Committee appointed by the Hon’ble Supreme Court decided to reiterate its recommendation to the Central Govt. to recall the permission letters dated 16.8.2003 issued in favour of Govt. Medical Colleges in Andhra Pradesh i.e. Rangraya Medical College, Kakinada; Govt. Medical College, Anantapur; Kurnool Medical College, Kurnool; S.V.Medical College, Tirupati and Kakatiya Medical College, Warangal.

41. Renewal of permission for admission of students against the increased intake i.e. 60 to 100 at Indira Gandhi Medical College, Nagpur granted by the Central Government for the academic session 2003-04 – Consideration of compliance report.

Read : The compliance report submitted by Govt. of Maharashtra in respect of Indira Gandhi Medical College, Nagpur received through the Central Government.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council reviewed the reply to the Show Cause Notice as submitted by the Medical College as under :-

S.No	Deficiencies pointed out in the report.	Remarks
1.	The shortage of teaching faculty considering U.G. & P.G. requirements is as under: (i) Professor: Nil (ii) Associate Professor: 2 (Pharmacology:1; Radiodiagnosis:1) (iii) Assistant Professor: 4 (Surgery:1; Orthopaedics:1; Radiodiagnosis:2) (iv) Tutor / Sr. Resident: 3 (Medicine:3)	Deficiency remains as it is.
2.	The deficiency relating to location of pre-clinical and para-clinical departments in different old buildings continues to remain as such and is not rectified. The construction for the expansion of all the facilities as per the project report submitted by the institution is yet to begin.	No evidence of compliance is submitted. Deficiency remains as it is.
3.	The deficiency of the lecture theaters persist partially. Although two more lecture theaters have been added, they are smaller than required as per norms. The gallery type lecture theater of capacity of 250 is still under construction.	No evidence of compliance is submitted. Deficiency remains as it is.
4.	The CT scan has not been installed and as such the deficiency continues. The Government of Maharashtra has issued order for immediate transfer of one of two CT scans from Government Medical College Nagpur to I.G.M.C., Nagpur. However, the machine is not yet installed.	No evidence has been submitted as to whether actual shifting and installation of CT Scan machine at IGMCC, Nagpur has been carried out or not. Deficiency remains as it is.
5.	The examination hall has a capacity of only 100 which is less than required as per norms.	No evidence of compliance is submitted. Deficiency remains as it is.
6.	Total area for central library is 388 sq.m. which is much less than the requirement of 800 sq.m. as per norms. Total sitting capacity for the U.G. & P.G. students is only 80 which is grossly inadequate. The sitting capacity for the staff is only 20 which is also grossly inadequate.	No rectification has been shown in the explanation given by the college. Deficiency remains as it is.
7.	Total accommodation available in the hostels of boys and girls is only 309 against requirement of 500.	No plans or documents have been submitted for compliance. Deficiency remains as it is.
8.	Total accommodation available for residents is only 105 which is less than 125 required as per norms.	Deficiency remains as it is.

In view of the above, the members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court decided to reiterate its recommendation to the Central Govt. to recall the permission letter dated 3.9.2003 issued in favour of Indira Gandhi Medical College, Nagpur.

42. Renewal of permission for admission of students against the increased intake i.e. 100 to 150 at Govt. Medical College, Aurangabad granted by the Central Government for the academic session 2003-04 – Consideration of compliance report.

Read : The compliance report submitted by Govt. of Maharashtra in respect of Govt. Medical College, Aurangabad received through the Central Government..

The Members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee reviewed the reply to the Show Cause Notice as submitted by the Medical College as under :-

S.No.	Deficiencies pointed out in the report.	Remarks.
1.	The shortage of teaching faculty is 10 % - i.e. 25 out of 246 after considering U.G. & P.G. courses as under (i) Professor: Nil (ii) Associate Professor: 4 (TB & Chest:1; Orthopaedics:1; Anaesthesia:1; Radiodiagnosis:1) (iii) Assistant Professor: 19 (Medicine:5; Paediatrics:3; Surgery:6; Orthopaedic:3; O.G.:2) (iv) Tutor / Sr. Resident: 2 (Psychiatry:1; Orthopaedics:1)	No information has been provided as to whether any new staff member has joined the college. No declaration form of any new staff member has been provided. Even the tabular statement submitted by the college only reflects the statement of teachers transferred out from the college and into the college, resulting in no net gain for the college. Deficiency remains as it is.
2.	In Central Library, the number of journals subscribed are less than norms – Total only 51 journals (31 Indian & 20 foreign journals) are available against requirement of 100 journals – 70 Indian & 30 foreign journals.	No satisfactory explanation is given. Deficiency remains as it is.
3.	Audiometry technician is also working as speech therapist. Both these posts should be filled separately.	No satisfactory explanation is given. Deficiency remains as it is.
4.	Non-teaching technical staff is grossly inadequate.	No satisfactory explanation is given. Deficiency remains as it is.
5.	The following deficiencies are still continuing: (a) Thyroid & other hormone assays are not carried out even to-day. (b) O.P.D. registration is still partially computerized. The staff is not trained in medical record technology. M.R.O. is only B.D.S. and is not trained in medical record work. (c) Audiometry technician is being appointed on ad-hoc, temporary basis for a period of 29 days. This practice must be avoided and full time audiometry technician should be appointed.	No satisfactory explanation is given. Deficiency remains as it is.
6.	The admissions for academic year 2003-2004 are not as per Central Government letter dt. 07.07.2000.	No satisfactory explanation is given by the college as to why the specific instructions contained in the Central Govt. letter dt.7.7.2000 have not been followed and why the excess admissions disregarding specific instructions of the Central Govt. have been done.

		Deficiency remains as it is.
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In view of the above, the members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court decided to reiterate its recommendation to the Central Govt. to recall the permission letter dated 3.9.2003 issued in favour of Govt. Medical College, Aurangabad.

43. Renewal of permission for admission of students granted by the Central Government for the academic session 2003-04 at Ruxmaniben Deepchand Gardi Medical College, Ujjain – Consideration of compliance report.

Read : The compliance report submitted by college authorities through the Central Government.

The Members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee reviewed the reply to the Show Cause Notice as submitted by the Medical College as under :-

S.No	Deficiencies pointed out in the report.	Remarks.
1	<u>Shortage of staff:</u> Professors – 3 (Microbiology-1, Forensic Medicine-1, Radio-Diagnosis-1) Associate Professors – 7 (Anatomy-1, Physiology-2, Biochemistry-1, Medicine-1, Obst. & Gynae.-1, Anaesthesia-1) Asstt. Professors – 5 (Anatomy-2, Physiology-1, Biophysics-1, Community Medicine –1) Junior Residents – 7 (General Medicine-1, General Surgery-4, Ophthalmology-1, Obst. & Gynae.-1).	Only an explanation and not compliance is given. No details of any new staff members joining the department have been provided. No declaration forms of any additional staff joining the institute have been attached. The shortage of teaching faculty is more than 20%. Deficiency remains as it is.
2.	<u>C.R. Gardi Hospital, Surasa (new) –</u> (a) On the day of inspection, no senior faculty was present in the OPD and the work was handled by Junior Residents except in the Surgery OPD which was managed by one Associate Professor. (b) There is only one operation theatre to carry out minor procedures under local anaesthesia. This theatre lacks piped oxygen suction and other necessary equipment and infrastructure to undertake surgery under general anaesthesia. (c) The average work load in the x-ray department is 10 plain x-rays and equal number of ultrasonography. The special procedures like Barium studies and IVPs are carried out very infrequently. (d) The wards consist of cubicles housing 6-8 patients each and thus not possible for the nurses at the nursing station to have a proper over view. The side labs in the wards are not	The college itself has admitted in its reply that senior faculty comes late to the hospital. Available clinical material is still inadequate. Deficiency remains as it is. Partially rectified. No details of resuscitation equipment have been provided. To that extent, deficiency remains as it is. Deficiency remains as it is. No satisfactory explanation is given. Deficiency remains as it is. The existing arrangement is not conducive for proper teaching. Deficiency remains as it is.

	equipped and furnished. Bed occupancy is hardly 10%. On the day of inspection in the male medical ward there was not a single patient. (e) No Blood Bank, CSSD, laundry and kitchen. (f) No deliveries are conducted. (g) No surgeries are conducted at this hospital. (h) The average OPD attendance is about 320. (i) Records are maintained manually.	No satisfactory explanation is given. Deficiency remains as it is. No satisfactory explanation is given. Deficiency remains as it is. No satisfactory explanation is given. Deficiency remains as it is. Clinical material is inadequate. Deficiency remains as it is. No satisfactory explanation is given. Deficiency remains as it is.
3.	The status of Ujjain Charitable Hospital, Budhwariya is same as reported during inspection of 24 th and 25 th July, 2003.	No details of compliance are given. Deficiency remains as it is.
4.	The departmental libraries of Anatomy, Physiology, Pathology, Microbiology & Forensic Medicine departments do not have adequate numbers of books.	No specific compliance is submitted. Deficiency remains as it is.
5.	The departmental laboratories for Histopathology, Cytopathology & Research Laboratory in the department of Pathology is still not functional.	No specific compliance related to new hospital is given. Deficiency remains as it is.

In view of the above, the members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court decided to reiterate its recommendation to the Central Govt. to recall the permission letter dated 26.8.2003 issued in favour of Ruxmaniben Deepchand Gardi Medical College, Ujjain.

44. Renewal of permission for admission of students granted by the Central Government for the academic session 2003-04 at Sikkim Manipal Instt. of Medical Sciences, Gangtok – Consideration of compliance report.

Read : The compliance report submitted by Sikkim Manipal University of Health Medical & Technological Sciences, Gangtok through the Central Government.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council reviewed the reply to the Show Cause Notice as submitted by the Medical College as under :-

<u>Sl. No.</u>	<u>Deficiencies pointed out in the inspection report</u>	<u>Remarks</u>
1.	Shortage of staff is as follows: (a) Faculty: 35 out of 79 i.e. 44%. <u>Professors-4</u> (Biochemistry-1, Pathology-1, Pediatrics-1, Orthopedic-1) <u>Assoc.Professors-17</u> (Anatomy-2, Physiology-1, Pathology-2, Micro-1, Forensic Med.-1, Medicine-3, Paediatric-1, Surgery-1, Ortho.-1, OBG-1, Ane-2, Radio.-1) <u>Asstt. Professors-14:</u> (Anatomy-1,	No compliance has been submitted by the College. What is stated by the college is merely an explanation for its deficiencies. The staff at STNM hospital which is under the payroll and the control of the Government cannot be considered as the staff of the medical college as in the letter of the Government of Sikkim itself, it has been mentioned that these are the honorary and part time teachers in medical College which is not acceptable as per the regulations. Deficiency of the teaching staff remains

	Pathology-1, Community Medicine-2, Paed. -1, TB & Chest-1, Skin & VD-1, Surgery-2, Ane-2, Radio-2, Dental-1) (b) Jr. Faculty: 63 out of 75 i.e. 89%. Tutor/Sr.Residents: 26 Jr. Residents-37 (c) About 33 teaching staff members have left the institute in last 3 months and about 40 teaching staff members were on the leave on the day of inspection as certified by the Dean without submitting original leave report. The institute has also shown about 54 medical officers from STNM Medical Hospital who are actually the staff of Govt. of Sikkim. (d) There is a severe shortage of teaching staff compared to the deficiency of last time. Even in this teaching staff doctors from STNM hospitals are included which was not a teaching hospital. These designated teachers of STNM are government employees are not under control of Dean. None of them can head the unit which is constructed at STNM hospital. Senior unit head from CRH cannot come at STNM and head the unit. Looking to this disparity there is likely to be more deficiency then what is shown above.	as it is.
2.	The position of deficiencies of non-teaching staff continues as it is in the departments of Anatomy, Microbiology, Pharmacology and Community Medicine.	No satisfactory explanation is given. Deficiency remains as it is.
3.	In the central library appointment of required staff pointed out in the last report is not done. The staff is less than as required as per norms.	Not rectified. The appointment of the staff in the Central Library is still less than that required as per norms. Deficiency remains as it is.
4.	The position of the deficiency for the hostel of resident doctors remains the same what is pointed out in the last inspection report	Not rectified. No hostel of resident doctors has been provided. Deficiency remains as it is.
5.	Residential Quarters: The situation remains the same. No new residential quarters are constructed.	What is stated by the college is merely an explanation and not compliance. Deficiency remains as it is.
6.	Ward side laboratories: Still individual ward is not provided with such laboratories.	No satisfactory explanation is given. Deficiency remains as it is.
7.	Still one person is only working as audiometry technician and speech therapist. They should have been appointed separately. Deficiency still continued.	No satisfactory explanation is given. Deficiency remains as it is.
8.	Workload in Radiology department is still inadequate.	No satisfactory explanation is given. Deficiency remains as it is.

9.	Clinical material is still grossly inadequate as under: <table> <tr> <td>Daily Average</td><td>CRH</td><td>STNM</td></tr> <tr> <td>OPD attendance</td><td>95</td><td>205</td></tr> <tr> <td>Bed occupancy</td><td>27.5%</td><td>100%</td></tr> <tr> <td>Casualty attendance</td><td>7.0</td><td>50</td></tr> <tr> <td>Major Surgeries</td><td>1</td><td>4-5</td></tr> <tr> <td>Minor Surgeries</td><td></td><td>12</td></tr> <tr> <td>Normal deliveries</td><td>1/week</td><td>4</td></tr> <tr> <td>Caesarian Section</td><td>3/week</td><td>2</td></tr> <tr> <td>Biochemical Inves.</td><td>76</td><td>NA</td></tr> <tr> <td>Pathology Inves.:</td><td>104</td><td>NA</td></tr> <tr> <td>Histopathology invest.</td><td>1</td><td>NA</td></tr> <tr> <td>Cytopathology invest.</td><td>0-1</td><td>NA</td></tr> <tr> <td>Microbiology invest.</td><td>12</td><td>NA</td></tr> <tr> <td>Parasitology invest.</td><td>04</td><td>NA</td></tr> <tr> <td>Routine X-rays</td><td>10</td><td>NA</td></tr> <tr> <td>U.S.G.</td><td>10</td><td>14-15</td></tr> <tr> <td>C.T. Scan</td><td>1-2</td><td>3-4</td></tr> </table> Precise arrangements & modus operandi to utilize facilities at STNM hospital are not yet complete. The staff of the medical college is not yet functional in the hospital. The students are not posted there.	Daily Average	CRH	STNM	OPD attendance	95	205	Bed occupancy	27.5%	100%	Casualty attendance	7.0	50	Major Surgeries	1	4-5	Minor Surgeries		12	Normal deliveries	1/week	4	Caesarian Section	3/week	2	Biochemical Inves.	76	NA	Pathology Inves.:	104	NA	Histopathology invest.	1	NA	Cytopathology invest.	0-1	NA	Microbiology invest.	12	NA	Parasitology invest.	04	NA	Routine X-rays	10	NA	U.S.G.	10	14-15	C.T. Scan	1-2	3-4	No details have been given as to how and up to what extent availability of clinical material has improved. Available clinical material is still inadequate. Deficiency remains as it is.
Daily Average	CRH	STNM																																																			
OPD attendance	95	205																																																			
Bed occupancy	27.5%	100%																																																			
Casualty attendance	7.0	50																																																			
Major Surgeries	1	4-5																																																			
Minor Surgeries		12																																																			
Normal deliveries	1/week	4																																																			
Caesarian Section	3/week	2																																																			
Biochemical Inves.	76	NA																																																			
Pathology Inves.:	104	NA																																																			
Histopathology invest.	1	NA																																																			
Cytopathology invest.	0-1	NA																																																			
Microbiology invest.	12	NA																																																			
Parasitology invest.	04	NA																																																			
Routine X-rays	10	NA																																																			
U.S.G.	10	14-15																																																			
C.T. Scan	1-2	3-4																																																			
10.	The number of deliveries is grossly inadequate. The deficiency continues.	No satisfactory explanation is given. Deficiency remains as it is.																																																			
11.	The position regarding PHCs in Urban & Rural areas remains the same. They are not under the control of the Dean and no posting of the students is done. No staff is earmarked.	No satisfactory explanation is given. Deficiency remains as it is.																																																			
12.	The overall strength of the nursing staff is still grossly inadequate as only total 80 nurses are available against 159 required.	The number of nurses is grossly inadequate as only 80 nurses are available against 159 required as per norms. Still only 1 person is working as Audiometry staff and speech therapist. This clearly reveals the extent of the deficiency of non-teaching, nursing and technical staff, in the institute. It is also pertinent to note that the College has claimed non-teaching staff is adequate for present workload. However what it is not stated by the institute is that staff is adequate for the present workload because the existing workload itself is inadequate and less than as required under the norms. Deficiency remains as it is.																																																			
13.	The construction of various buildings in a time frame manner is not being done and is running behind the schedule as per the Council requirements.	No satisfactory explanation is given. Deficiency remains as it is.																																																			

In view of the above, the members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court decided to reiterate its recommendation to the Central Govt. to recall the permission letter dated 5.9.2003 issued in favour of Sikkim Manipal Instt. of Medical Sciences, Gangtok.

45. Renewal of permission for admission of students granted by the Central Government for the academic session 2003-04 at Rajendra Prasad Govt. Medical College, Tanda – Consideration of compliance report.

Read : The compliance report submitted by Govt. of Himachal Pradesh through the Central Government.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council reviewed the reply to the Show Cause Notice as submitted by the Medical College as under :-

S.No.	Deficiencies pointed out in the report.	Remarks.																											
1.	The staff deficiency is as follows: (a) Faculty : 32 out of 73 i.e. 44% <table> <tr> <td>Professors</td><td>-</td><td>10</td></tr> <tr> <td>Associate Profs.</td><td>-</td><td>10</td></tr> <tr> <td>Assistant Profs.</td><td>-</td><td>12</td></tr> </table> (b) Tutors/Residents : 34 out of 90 i.e. 38% <table> <tr> <td>Tutors</td><td>-</td><td>04</td></tr> <tr> <td>Senior Residents</td><td>-</td><td>11</td></tr> <tr> <td>Junior Residents</td><td>-</td><td>19</td></tr> </table>	Professors	-	10	Associate Profs.	-	10	Assistant Profs.	-	12	Tutors	-	04	Senior Residents	-	11	Junior Residents	-	19	Partially rectified. Deficiency of teaching staff is more than 5%. (a) The shortage of teaching faculty, even after considering the staff claimed to have joined the college, remains at 9.09% (i.e. 6 out of 73) as under:- (i) Asstt. Professor – 6 (Statistician cum Lecturer-1, M.O.cum-Lecturer at RHTC-1, M.O.-cum Lecturer at UHC-1, Medicine-2, Orthopaedics-1). (b) The shortage of Tutor/ Demonstrator remains at 20% (i.e. 7 out of 35). – (Anatomy-1, Physiology-1, Pathology-1, Community Medicine-2, Orthopaedics-1, Psychiatry-1). (c) The shortage of Jr.Resident is 43.13% (i.e. 22 out of 51) – (Medicine-9, Paediatrics-1, Psychiatry-2, Skin & VD-1, Ophthalmology-1, Surgery-4, Orthopaedics-4). The staff shown do not meet department-wise requirements. Neither declaration form nor any appointment orders/joining letters have been attached. Deficiency remains as it is.									
Professors	-	10																											
Associate Profs.	-	10																											
Assistant Profs.	-	12																											
Tutors	-	04																											
Senior Residents	-	11																											
Junior Residents	-	19																											
2.	Laminar Air Flow is not available in Microbiology.	No satisfactory explanation is given. Deficiency remains as it is.																											
3.	The hospital has deficiency of total 87 beds. The deficiency in various departments is as follows: <table> <tr> <td>Surgery</td><td>-</td><td>10</td></tr> <tr> <td>Paediatrics</td><td>-</td><td>10</td></tr> <tr> <td>TB</td><td>-</td><td>16</td></tr> <tr> <td>Skin & VD</td><td>-</td><td>07</td></tr> <tr> <td>Psychiatry</td><td>-</td><td>08</td></tr> <tr> <td>General Surg.</td><td>-</td><td>24</td></tr> <tr> <td>Orthopaedics</td><td>-</td><td>08</td></tr> <tr> <td>Ophthalmology</td><td>-</td><td>02</td></tr> <tr> <td>ENT</td><td>-</td><td>02</td></tr> </table>	Surgery	-	10	Paediatrics	-	10	TB	-	16	Skin & VD	-	07	Psychiatry	-	08	General Surg.	-	24	Orthopaedics	-	08	Ophthalmology	-	02	ENT	-	02	The college itself has stated in its reply that the work of the hospital will be completed by December 2005. Deficiency remains as it is.
Surgery	-	10																											
Paediatrics	-	10																											
TB	-	16																											
Skin & VD	-	07																											
Psychiatry	-	08																											
General Surg.	-	24																											
Orthopaedics	-	08																											
Ophthalmology	-	02																											
ENT	-	02																											
4.	The OPD attendance is only 550 per day which is inadequate. The problem of overcrowding still persists in the wards.	No details are given. No details have been provided in the reply as to how the OPD attendance has improved. Available clinical material is still inadequate. Deficiency remains as it is.																											

5.	The number of laboratory investigations and x-ray investigations is grossly inadequate.	No satisfactory explanation is given. Deficiency remains as it is.
6.	Surgical ICU, NICU, PICU facilities are not available.	Partially rectified. NICU & PICU are still not available. Deficiency remains as it is.
7.	The following nine senior faculty members who were verified to be present during the last inspection on 1st and 2nd July,2003 were not available:- Physiology : 1. Dr. Urmil Gupta, 2. Dr. Anita Padam Obst. & Gynae.: Dr. H.K. Premi (Prof.) Dentistry : Dr.B.K. Gautam (Assoc.Prof.),Dr. Yogesh Bhardwaj(Asstt.Prof.) General Medicine : Dr. Dilip Gupta (Asstt.Prof.) Chest & TB : Dr. Surendra Kashyap (Prof.) Psychiatry : Dr. Ravi Chand Sharma (Prof.) Skin : Dr. Vivay Shankar (Asstt. Prof.) During the present inspection the above mentioned teachers were not found. Their salary was never drawn. They had not given joining report.	No satisfactory explanation has been provided by the college. Deficiency remains as it is.

In view of the above, the members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court decided to reiterate its recommendation to the Central Govt. to recall the permission letter dated 03.09.2003 issued in favour of Rajendra Prasad Medical College, Tanda.

46. Nomination of the representative of the Medical Council of India on the Fee Committee for the State of Gujarat and Karnataka.

Read : The matter with regard to nomination of the representative of the Medical Council of India on the Fee Committee for the State of Gujarat and Karnataka..

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided that in case where a specific request is received from the respective State Government, the President (Acting) is authorized to nominate a Local representative on the Fee Committee of that State.

47. Representation of IIIrd MBBS Part - IInd MBBS students Vidyarathi Kriti Samiti, Maharashtra University of Health Sciences with regard to award of Grace Marks.

Read : The representation of IIIrd MBBS Part - IInd MBBS students Vidyarathi Kriti Samiti, Maharashtra University of Health Sciences with regard to award of Grace Marks.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided not to accede to the request of Vidyarathi Kriti Samiti, Maharashtra regarding award of 10 grace marks in 3rd MBBS Part II as it is against the provisions of Graduate Medical Education Regulations,1997. It was further decided that the issue of the re-examination of the students failing in practicals does not come within the purview of the Council and it is for the concerned University to decide on the issue.

48. Equivalence to Biotechnology course with Biology at +2 level.

Read : The report of the Sub-Committee constituted as per the decision of the Executive Committee at its meeting held on 03rd February 2004 with regard to Equivalence to Biotechnology course with Biology at +2 level.

The Members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the contents of the report of the Sub-Committee and decided that Biotechnology may be allowed as an optional subject in the 10+2 examination and it was further decided to place this before the General Body of the Council.

49. Medical Examination of MBBS students before Registration.

Read : The report of the Sub-Committee constituted as per decision of the Executive Committee at its meeting held on 30 June 2003 with regard to Medical Examination of MBBS students before Registration.

The Members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council accepted the report of the Sub-Committee as under :-

“Any medical student doing their MBBS Course if suffering from Mental illness like Schizophrenia can pursue the study leading to grant of MBBS degree and he is also fit to discharge the duties of a doctor provided he takes proper treatment of particular mental illness like Schizophrenia under strict supervision of a Psychiatrist.

In recent advances of the Schizophrenia disorder, this illness has good prognosis because of the advance in Psycho (pharmacological molecules). If upon completion of successful treatment if such a student have found to be recovered and found to be fit, there cannot be any further bar or he is acquiring a degree after passing the examination and competing the internship as required under the various guidelines of MCI and no further safeguard are necessary for granting registration to such candidates in accordance with the law prevailing from time to time.”

50. Report of the Sub-Committee with regard to uniform procedure in medical institutions for examining visually handicapped students.

Read : The report of the sub-Committee with regard to uniform procedure in medical institutions for examining visually handicapped students.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council accepted the report as under and decided to place this before the General Body of the Council:-

1. “ The Hon'ble Supreme Court in its judgment dated 18th September, 2002 vide Civil Appeal No. 4604 of 2000 with CA No. 7892 of 2001 decided as under:-

“It may be noticed that the Medical Council of India who issues guidelines for admission to the medical courses in the country, infact, had taken a decision on 5.11.1999 indicating that there cannot be any reservation for admission into the MBBS course and postgraduate medical course for disabled persons, as provided in Section 39 of the Act. This decision, however, appears to have been reversed by the subsequent resolution of MCI dated 5.7.2001. Under the resolution dated 5.7.2001 it has been unequivocally indicated that 3% reservation for physically handicapped persons for admission into the medical courses should be followed excluding, however, for those who are visually handicapped and hearing defects.”

2. The Medical Council of India in its General Body meeting held on 21/22nd June, 2001 while considering the various Sub-Committees meeting of MCI, inter-alia, the categories of people under the disabilities as classified under the Act covers the following three categories :-

1. Visual Handicapped
2. Persons suffering from hearing defects
3. Physically handicapped with the locomotory disorders.

The 3% of reservation under the above 3 categories has been apportioned as 1% under each category u/s 33 of the 1956 Act. It was also noted that the Govt. of Tamil Nadu in their G.O. No.137 dated 29.1.1990 had also fixed the same percentage of reservation for these categories for admission to MBBS/Engineering etc. courses.

The Council further noted that the Sub-Committee in the same meeting had also noted that the Hon'ble High Court of Calcutta in its judgement (case No. MAT.NO.3105 of 1998 & C.A. No.7514 of 1998) had also agreed upon the apportioning of the reservation under the above three categories in respect of the posts under Government. The same logic is applied for reservation for educational institutions also and taking guidelines adopted by the Govt. of Tamil Nadu, the Committee was of the opinion that such apportioning of reservation is both logical and sustainable in the court of Law.

The Committee has concluded that the visually handicapped is not in a position to pursue the medical course and do the internship, as corrected vision is absolutely necessary for the study and for the practice of Medicine.

The hearing impairment will interfere with the training in medical education since the process of hearing of various signs and auscultation is absolutely essential to pursue the medical training and to follow the medical practice.

In view of the above observations the visually handicapped and hearing disabled should be deleted from this category and they should be considered invalid for admission in the MBBS.

Among the locomotory disabled the upper limb should be functional & normal as it is required to elicit sign during clinical examination and finer movements are desired for conduct of surgical procedure. Again the feeling and the sensation are important for clinical diagnosis and the treatment and locomotory disabled involving upper limb should be considered not eligible for admission to the professional medical course. The locomotory disabled involving the lower limb is permissible but it should be with the following guidelines:-

- 1 If it involves only one lower limb it should have a minimum of 40% and should not exceed 60%.
- 2 If it involves both the lower limbs the total disability should not exceed 60% with a minimum of 40%.

The Disability certificate should be produced by a duly constituted and authorized Medical Board.

The candidates should have minimum eligibility criteria as per MCI guidelines. The candidates should be otherwise fit medically.

Those candidates who are aspiring to get seats under this reservation category should apply specifically along with the valid disability certificate.

In case there are not enough number of candidates who qualify themselves for such number of reserved seats the remaining seats should be merged with the respective category of existing reservation.

3. A previous Sub-Committee of MCI met on 24.1.2003 at 2.30 p.m. and discussed the various issues pertaining to visually handicapped persons to be examined, evaluated and awarded MBBS degree. The Committee considered the following broad headings:-

1. Admission of visually handicapped persons for MBBS.
2. The time of onset of blindness and continuation of their curriculum from thereon.
3. Methods of training, assessment and evaluation of such handicapped persons at various stages of their curriculum.
4. Method of giving them the training during the internship prior to the award of MBBS degree.

5. Analysing the avenues of employment for visually handicapped candidates after awarding them the degree.
6. Any restrictions for visually handicapped doctors in clinical practice.

The Committee is of the view that the sympathetic consideration to a handicapped person should not be at the expense of causing risk to the society or its members. In the event of allegations arising from the mis-diagnosis, wrong medicines prescriptions and the eventual casualties, many litigations are filed under the Consumer Forum in various States. In these circumstances, allowing the visually handicapped persons to practice medicine and prescribe drug will cause enormous harm to the public and will bring the entire profession into disrepute. They will also raise questions about the validity of the norms adopted for registration of such candidates by the competent authorities. Though National Human Rights Commission has quoted instances wherein blind persons are being appointed as Lecturers and performing their duties satisfactorily; these are only exceptional cases and cannot be made basis for framing new rules to enable blind persons to be medical professionals.

1. Admission of visually handicapped persons for MBBS:

It is mandatory that the students who are selected to join MBBS course should undergo an eye examination by a qualified Ophthalmologist and must be certified to have best corrected visual activity of 6/9 in each eye. In case of one-eyed persons, the best corrected visual activity should be 6/6. The candidate should be able to identify the three primary colours.

2. The time of onset blindness and continuation of their curriculum from thereon:

Retention of normal vision is an absolute need for undergoing the training in medical curriculum unlike in other streams of education like Arts, and Science. Medicine is a course where perfect vision is the absolute need. The Committee recommends that a candidate who becomes visually challenged after having been admitted to the course and completed to a reasonable extent his clinical training may still be considered fit for assessment and final examination. However, if the candidate develops visual challenge before acquiring reasonable amount of knowledge and skill in clinical and basic sciences he/she should be discharged from the course.

3. Method of imparting training during the internship prior to the award of MBBS degree:

During the period of internship the student requires to learn skills and knowledge in the actual management of patients in various disciplines of Medicine and Surgery, and as such presence of normal vision is essential for internship training. In case of visually handicapped, the training programme would need to be modified depending upon the severity of handicap. The component of patient care may be reduced in order to minimize the potential of harm arising from the handicap. At the same time, the candidate would be encouraged by faculty and the resident staff to achieve maximum knowledge and skills within the constraints of his vision.

4. Analysing the avenues of employment for such of those candidates after awarding them the degree:

Such of the visually challenged individuals who have successfully completed their studies and internship would become eligible for employment in those areas which do not include patient care either directly or indirectly. The Committee feels from the instances quoted by National Human Rights Commission they may be accommodated in areas such as teaching, research and counseling.

5. Recommendations to Medical Council of India:

When the Medical Council of India or respective State Medical Councils issue the medical registration certificate to such of these candidates who are visually handicapped should clearly mention in the registration certificate itself that they are debarred from doing clinical practice either directly or indirectly. Suitable amendment to the existing constitution should be made for inscribing such words.

To conclude it is wise to remember the judgement passed by Ohio Supreme Court in the denial of admission to a blind student in a medical school in Ohio, USA which reads as under:-

“An otherwise qualified handicapped person is one who is able to safely and substantially perform an educational program’s essential requirements with reasonable accommodation. An accommodation is not reasonable where it requires fundamental alterations in the essential nature of the program or imposes an undue financial or administrative burden”, the majority decision states.

“Furthermore, an educational institution is not required to accommodate a handicapped person by eliminating a course requirement which is reasonably necessary to the proper use of the degree conferred at the end of study,” the ruling noted.”

It is also a well-settled proposition of law that the rights of the society as a whole cannot be subservient to the rights of an individual or even a section of society.

The Sub-Committee after going through the above all past decisions of the various Committees as well as ruling of the Hon’ble Supreme Court decided as under:

1. As per the decision of MCI dated 5.7.2001 and the order of Hon’ble Supreme Court issued on 18.9.2002 in C.A. No. 4604 of 2000 with CA No. 7892 of 2001 that visually handicapped and hearing defects cannot be considered for admission into MBBS course as provided under section 39 of the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 .
2. In case a person who became visually challenged before appearing in the course and does not qualify first professional examination, he/she should be discharged from the course. In case the candidate passed the first/second professional examination and becomes blind in the final professional, he/she should also be discharged from the course as visually handicapped person is not in a position to pursue the medical course and do the internship as correct vision is absolutely necessary for the study and for the practice of medicine.”

51. Submission of Report of Sub-Committee regarding consideration of matter of agreement between Ukraine and India on cooperation in the field of Health Care and Medical Sciences.

Read : The report of the Sub-Committee regarding agreement between Ukraine and India on cooperation in the field of Health Care and Medical Sciences.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council accepted the report as under :

“ Director, Medical Education, Govt. of India in a communication addressed to the Secretary, Medical Council of India has forwarded the Draft of the proposed Agreement from IC Division in the Ministry of Health and Family Welfare, Govt. of India on cooperation in the field of Health care and medical science sent by the Indian Mission in Kiev.

They have sought the comments from the Medical Council of India on the said Draft Agreement particularly with reference to Article 3 thereof giving inter-alia the details about the parameters and standards of medical education (Graduate/Postgraduate/Doctoral level etc.) in the medical institutions of Ukraine vis a vis those obtained in India as per the provisions of Indian Medical Council act, 1956. it is also stated therein that in addition comments may also be given about the eligibility requirement of the medical institutions in Ukraine for the purpose of training in their institutions in Graduate/Postgraduate/Doctoral levels etc.

For the purposes of ready reference Article 3 in the Draft Agreement is reproduced herein below.

‘The parties shall facilitate in particular –

- Exchange of information in the field of health care in which they show mutual interests.

- Exchanges of specialists for the purpose of study and consultations identified as priorities.
- Training in high medical and pharmaceutical universities, and in institutions of Postgraduate education.
- Direct contacts between institutions and organizations in their respective countries.
- Exchange of information on new equipment, pharmaceutical products and the development of technologies related to health care and medical sciences.
- Other mutually agreed forms of cooperation in the fields of medicine and public health.

The committee noted that Medical Council of India in terms of powers vested with it under Section 33 (j) of the Act can prescribe Regulations pertaining to the Courses and period of study examinations and the standards of proficiency therein to be obtained in Universities or medical institutions for grant of recognized medical qualifications and further in terms of sub clause (k) can regulate the standards of Staff, Equipment, Accommodation, Training and other facilities for medical education.

Likewise, in terms of Sub section (1), it can regulate the conduct of Professional Examination, Qualifications of examiners and the conditions of admissions to such Examinations.

Further by an additional sub-clause (m-a) it is provided that by a Regulation, the Council may prescribe the modalities for conducting Screening test under sub-section (4-A) and under the proviso to sub-section (4B) of Section 13 of the IMC Act 1956 along with its Amendments.

Section (4-A0 and (4-B) incorporated under Section 13 of the IMC act, have been reproduced herein below for ready reference.

(4-A) – A person who is citizen of India and obtains medical qualification granted by any medical institution in any country outside India recognized for enrollment as medical practitioner in that country after such date as may be specified by the Central Government under Sub-Section (3) shall not be entitled to be enrolled on any medical register maintained by a State Medical Council or to have his name entered in the Indian Medical Register unless he qualifies the screening test shall foreign medical qualification after such person qualifies that said screening test shall be deemed to be the recognized medical qualification for the purposes of this act for that person.

(4-B) A person who is citizen of India shall not after such date as may be prescribed by the Central Government under Sub Section (3) be eligible to get admission to obtain medical qualification granted by any medical institution in any foreign country without obtaining an eligibility certificate issued to him by the Council and in case any such person obtains such qualification without obtaining such eligibility certificate, he shall not be eligible to appear in the Screening Test referred to in Sub-Section (4-A).

Provided that an Indian citizen who has acquired the medical qualification from foreign medical institution or has obtained admission in foreign medical institution before the commencement of the Indian Medical Council (Amendment) Act, 2001, shall not be required to obtain Eligibility Certificate under this Sub-Section but, if he is qualified for admission to any medical course for recognized medical qualification in any medical institution in India, he shall be required to qualify only the Screening Test prescribed for enrollment on any State Medical Register or for entering his name in the Indian Medical Register.

(4-C) - Noting contained in Sub-section (4-A) and (4-B) shall apply to the medical qualifications referred to in section 14 for the purposes of that Section.

Section 14 pertains to “Special provisions in certain cases for recognition of medical qualifications granted by medical institutions in countries with which there is no scheme of reciprocity”. And it reads as under “-

“14(1) - The Central Government after consultations with the Council may, by notification in the official gazette, direct that medical qualification granted by medical

institutions in any country outside India in respect of which a scheme of reciprocity for the recognition of medical qualification is not in force, shall be recognized medical qualification for the purposes of this Act or shall be so only when granted after a specified date”.

Provided that medical practice by persons possessing such qualifications,

- (a) Shall be permitted only if such persons are enrolled as medical practitioner in accordance with law regulating the registration of medical practitioners for the time being in force in that country;
- (b) Shall be limited to the institution to which they are attached for the time being for the purposes of teaching, research or charitable work; and
- (c) Shall be limited to the period specified in this behalf by the Central Government by general or special order.

(2) In respect of any such medical qualification the Central Government, after consultation with the Council may, by notification in the official Gazette direct that it shall be a recognized medical qualification only when granted before a specified date.

Section 12 of the Act governs “Recognition of medical qualification granted by medical institution in countries with which there is a scheme of reciprocity” and it reads as under:

12 (1) “The medical qualification granted by medical institution outside India which are included the Second Schedule shall be recognized medical qualification for the purposes of this Act.

- (2) The Council may enter into negotiations with the Authorities in any country outside India which by the law of such country is entrusted with the maintenance of a Register of medical practitioners for the settling of a scheme of reciprocity for the recognition of medical qualifications and in pursuance of any such scheme, the Central Government may, by notification in the official Gazette, amend the Second Schedule so as to include therein the medical qualifications which the Council has decided should be recognized and any such notification may also direct that an entry shall be made in the last column of the Second Schedule against such medical qualifications declaring that it shall be a recognized medical qualification only when granted after a specified date.
- (3) The Central Government, after consultation with the Council, may, by notification in the official Gazette, amend the Second Schedule by directing that an entry be made therein in respect of any medical qualification declaring that it shall be recognized medical qualification only when granted before a specified date.
- (4) Where, the Council has refused to recommend any medical qualification which has been proposed for recognition by any authority in sub-section (2) and that Authority applies to the Central Government in this behalf, the Central Government after considering such application and after obtaining from the Council a report, if any, as to the reasons for any such refusal, may by notification in the official Gazette amend, the second Schedule, so as to include such qualification therein and the provisions of sub-section (2) shall apply to such notification.

In the context of aforesaid statutory provisions relevant to the present issue the Committee further noted that as per the eligibility requirement for admission in an undergraduate medical college in a foreign medical institution, the Indian national applicant ought to be of 17 years of age in the year of admission and should have passed in the individual subjects of Physics, Chemistry, Biology and English at 10+2 level and should have a minimum aggregate of 50% marks in the subjects of Physics, Chemistry and Biology taken together (40% in case of SC/ST/OBC).

Those Indian applicants fulfilling the aforesaid criteria, alone are eligible for grant of Eligibility Certificate by the Council to enable them to pursue the medical course in the medical institutions located in foreign countries, which are recognised by the Council or alternatively the institutions where after completion of the medical course, the passing candidate is eligible for registration for practice of medicine in that country where the medical institution is located i.e. Ukraine in the instant case.

Likewise, the applicants from Ukraine desirous of undergoing medical course in India would need to have the same eligibility requirements fulfilled as are applicable to any Indian

national for admission to a medical course in a medical institution in India or abroad. (i.e. for admission in the institutions located in Ukraine).

For the Postgraduate and Super Specialty courses the foreign nationals holding equivalent of MBBS Qualification are entitled for admission in medical institutions in India only in case the requisite recognition for the same is accorded by the Govt. of India on the recommendations of the Medical Council of India.

The Committee noted that the scheme of reciprocity in terms of Section 12 of the IMC Act does not exist with Ukraine as of now. Further the Postgraduate and Super Specialty courses from the institutions located in Ukraine and other countries of the erstwhile USSR are presently not recognized by the Medical Council of India for admission of the Indian nationals.

In view of the above, the Exchange Programme of super specialist/specialists for a shorter duration of period between the two countries as of now is permissible only in terms of Section 14 of the IMC Act, for the purposes of teaching, research, charitable work etc. for such period as is specified in this behalf by the Central Government by a general or special order.

Article 3 of the Draft Memorandum of Understanding may be viewed approximately in the context of factual propositions that have been brought out herein above by the Committee.

52. Undertaking given by medical teachers for working in more than one medical college.

Read : The Undertaking given by medical teachers for working in more than one medical college along with the decision of Ethical Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to take action as per legal opinion of the Council Advocate.

53. Action to be taken against the teachers who have shown employment in more than one medical college at the same point of time, in the light of the recommendations of the Ethics Committee and Council Advocate.

Read : The Action to be taken against the teachers who have shown employment in more than one medical college at the same point of time, along with the decision of the Ethical Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to take action as per the legal opinion of the Council Advocate.

54. Admission of MBBS students by various medical institutions for the academic year 2003-04 beyond 50% management quota.

Read: the matter with regard to Admission of MBBS students by various medical institutions for the academic year 2003-04 beyond 50% management quota.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council reviewed the replies received from the colleges/institutes and deliberated the matter at length. They also reviewed the legal opinion received from the Council Advocate of which operative part is as under:

- “1. Communications by the querist to the competent authorities of the concerned State Governments where the erring medical college i.e. the college which has violated the fixation of 50% of management quota by the Hon'ble Supreme Court and has made admissions in the management quota over and above the 50% limit fixed by the Hon'ble Supreme Court, are located – calling upon them to state/indicate whether the names of meritorious students to the extent of 50% of the seats for the Government quota, was made by the competent authority of the State Government and the reasons why those students allocated by the competent authority of the State have not been granted admissions by the management of the erring private medical college;
2. If the responses from the concerned competent authority of the State Governments indicate no omission on the part of the concerned State authorities but on the other hand indicate defiance and wilful non compliance of the judgement of the Hon'ble Supreme court by the management

of the erring college, a show-cause notice be issued to such erring medical colleges calling upon them why the querist Council should not take necessary steps by filing appropriate application/petition before the Hon’ble Supreme Court for initiation of contempt proceedings against them.

3. In the event that the responses from the concerned competent State authorities indicate deliberate non adherence and/or deliberate omission on their part in ensuring compliance with the judgement/direction of the Hon’ble Supreme Court in this regard, the querist Council may consider issuing a show-cause notice to such competent State authorities, calling upon them why the querist Council should not take necessary steps by filing appropriate application/petition before the Hon’ble Supreme Court for initiation of contempt proceedings against them.
4. In any case, the managements of the erring colleges should be clearly informed by the querist that all such colleges shall be duty bound to make available seats from their management quota for the next/subsequent academic year(s), to the extent of excess admissions made by them i.e. over and above 50% limit fixed by the Hon’ble Supreme Court for the academic years 2003-04.”

The members of the Adhoc Committee and of the Executive Committee decided to ascertain the veracity of the claim made by the colleges in their replies regarding non-submission of the list by the government agencies/universities for 50% government quota in time before 30th September,2003 is correct or not and further authorized President (Acting) to take action in accordance with the legal opinion received based upon the replies received from the college.

55. Admission of MBBS students by various medical institutions for the academic year 2003-04 after the cut off date of 30/09/2003.

Read: the matter with regard to Admission of MBBS students by various medical institutions for the academic year 2003-04 after the cut off date of 30/09/2003.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council reviewed the matter at length. Meanwhile, a notification for amending the Graduate Medical Education Regulations,1997 has been issued on 25.2.2004 wherein Sub-Regulation 6 in Regulation 7 has been amended as under:-

- (i) for sub-regulation (6) the following sub-regulation shall be substituted, namely:-

“(6) The Universities and other authorities concerned shall organize admission process in such a way that teaching in first semester starts by 1st of August each year. For this purpose, they shall follow the time scheduled indicated in APPENDIX-E”.

- (ii) after sub-regulation (6), the following sub-regulations shall be inserted:

“(6A) There shall be no admission of students in respect of any academic session beyond 30th September under any circumstance. The Universities shall not register any student admitted beyond the said date.

6(B) The Medical Council of India may direct, that any student identified as having obtained admission after the last date for closure of admission be discharged from the course of study, or any medical qualification granted to such a student shall not be a recognized qualification for the purpose of the Indian Medical Council Act,1956.

The Institution which grants admission to any student after the last date specified from the same shall also be liable to face such action as may be prescribed by MCI including surrender of seats equivalent to the extent of such admission made from its sanctioned intake capacity for the succeeding academic year”.

“APPENDIX-E

TIME SCHEDULE FOR COMPLETION OF THE ADMISSION PROCESS FOR FIRST MBBS COURSE

Schedule for Admission	Seats filled up by Central Govt. through All India Entrance Examination	Seats filled up by the State Govts./Institutions
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Conduct of Entrance Examination	Month of May	Month of May
Declaration of Result of Qualifying Exam./Entrance Exam.	By 5 th June	By 15 th June
1 st round of counseling/admission	To be over by 30 th June	To be over by 25 th July
Last date for joining the allotted College and Course	Within 15 days from the date of allotment of seat @@	31 st July
2 nd round of counseling for allotment of seats from Waiting List:	To be over by 8 th August	Upto 28 th August
Last date for joining for candidates allotted seats in 2 nd round of counseling from the Waiting List	Within 15 days from the date of allotment of seat. (Seats vacant after 22 nd August will be surrendered back to the States/Colleges)	31 st August

Commencement of academic Session: 1st of August
Last date upto which students can be admitted against vacancies arising due to any reason 30th September

NOTE: @@Head of the Colleges should intimate the vacancies existing after the last date for joining the course by the candidate concerned in respect of the All India Quota of seats to the DGHS within seven days and latest by 23rd of July.”

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council decided that action in sub-regulation 6(B) may be undertaken by the Council in respect of the colleges where admissions after 30.9.2003 have been made.

56. Reconsideration of not recognizing the clinical facilities at District Hospitals for training students from Private Medical Colleges – Regarding.

Read: the letter dt. 23/12/2003 received from the Registrar, Rajiv Gandhi University of Health Sciences, Bangalore with regard to reconsideration of the matter for not recognizing the clinical facilities at District Hospitals for training students from Private Medical Colleges.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council decided not to accede to the request from the Registrar, Rajiv Gandhi University of Health Sciences, Bangalore for recognizing the clinical facilities at District Hospitals for training students from Private Medical College as it is against the basic requirements as mentioned in clause 2(5) of the Qualifying Criteria prescribed under Establishment of Medical College Regulations, 1999 which states as under –

“2(5).....that the person owns and manages a hospital of not less than 300 beds with necessary Infrastructural facilities capable of being developed into a teaching institution in the campus of the proposed medical college”.

57. Permission for recognition of Amrita Institute of Medical Sciences and Research Centre, Cochin for internship training.

Read: the application received from the Principal, Amrita Institute of Medical Sciences and Research Centre, Cochin for recognition of the Institute for internship training.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council deliberated upon the matter at length and decided that the permission for internship training cannot be granted to Amrita Institute of Medical Sciences and Research Centre, Cochin in view of the fact that the college has already submitted an application u/s 10A for establishment of a medical college in the year 2001 under which the permissions for admission of two batches have already been granted in the year 2002-03 and 2003-04 and further in view of the fact that by a decision taken in the earlier Executive Committee meeting held on 3.2.2004 it has been decided to recommend not to renew the permission for admission of 3rd batch

of students for the academic session 2004-05 in view of the gross deficiencies observed during the inspection carried out on 9th and 10th January, 2004.

58. To consider correct interpretation of the Provision of Regulations 12(2) Examination Regulation of the Graduate Medical Education Regulations – 1997 on internal assessment.

Read: the matter with regard to correct interpretation of the Provision of Regulations 12(2) Examination Regulation of the Graduate Medical Education Regulations – 1997 on internal assessment.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to obtain legal opinion in the matter and authorized President (Acting) to decide accordingly.

59. Complaint against Dr. Alok B, Mathur & Dr. Anil Saxena as alleged by Mr. Pedro Medrano.

Read: the Complaint against Dr. Alok B, Mathur & Dr. Anil Saxena as alleged by Mr. Pedro Medrano along with the decision of the Ethical Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted & approved the decision of the Ethics Committee taken at its meeting held on 23rd and 24th February, 2004 as under:-

“The Ethics Committee noted the action taken by the Delhi Medical Council. The names of these two doctors may be struck off from IMR namely Dr. Alok B. Mathur and Dr. Anil Saxena for a period of six weeks w.e.f. 21st May, 2003. The office of the Council may be directed to keep a note in the Indian Medical Register that their name were erased and reinstated.”

60. Removal of name of Dr. Md. Abdul Quader & Dr. Amulya Ratan Biswas.

Read: the order dated 31-12-2003 received from the Registrar, West Bengal Medical Council alongwith the decision of the ethical committee with regard to Removal of name of Dr. Md. Abdul Quader & Dr, Amulya Ratan Biswas.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the action taken by the West Bengal Medical Council with regard to removal of name of Dr. Md. Abdul Quader for a period of six months & Dr. Amulya Ratan Biswas for a period of three years w.e.f. 30.12.2003 and directed to Secretary to remove the names in accordance with the action taken by the West Bengal Medical Council from the Indian Medical Register and also to give intimation in this regard to all the State Medical Councils in the country.

61. Creation of two more posts of Whole Time Inspectors in the Council Office.

Read: the matter with regard to creation of two more posts of Whole Time Inspectors in the Council Office.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter in detail and observed as under:-

The last cadre review for different posts was carried out in the year 1997, wherein total 3 posts of Whole Time Inspectors have been created. Since then the work of the Council has increased manifold. The number of medical colleges coming within the purview of the Council has increased to more than 211 colleges and every year new medical colleges are being added which requires continuous monitoring by way of inspections and assessment.

Last year the Govt. of India has received applications for 54 medical colleges to be set up. The number of inspections carried out by the Council Inspectors has increased tremendously - i.e. by 50% over last 2 years - as under :-

2001	-	117
2002	-	135
2003	-	176

This number is going to increase in 2004 with more applications of establishment of new colleges to be set up. The transit time spent by the Inspectors has also increased as the newer colleges have been established in far flung areas necessitating more days being spent in transportation to and from the head quarters. Many colleges have to be inspected more than once for compliance verification for LOI/LOP/renewal of permission. Correspondingly, the inspections for approval of degree would also increase.

The number of colleges which have to be inspected periodically has also gone up over the last few years. Due to shortage of Inspectors, the periodical inspections are not being carried out as per schedule.

It was further observed that the number of colleges in the Southern Region comprising of the State of Andhra Pradesh, Karnataka, Tamilnadu, Kerala and Western Region comprising of the State of Maharashtra, Gujarat and M.P. are far higher than the number of colleges in other region.

Presently, the Council has only three posts of Whole Time Inspectors and it is difficult to carry out the inspections of colleges with the available Inspectors. At least two more Whole Time Inspectors are required to be appointed so that the Council may recommend to the Govt. of India for various purposes in a time bound manner efficiently.

In view of the above, the members of the Adhoc Committee and of the Executive Committee decided that two more posts of Whole Time Inspectors in the pay scale of Rs.18400-22400 be approved in the office of the Council.

It was further decided that the post of the Zonal Inspectors for the East Zone which is falling vacant on account of resignation tendered by Dr.Mrs. Shakuntala Chakraborty and of the North Zone which is already lying vacant be translocated to the South Zone and West Zone respectively as the number of colleges in these two regions is significantly higher than in the remaining parts of the country. It was further decided that transit insurance cover may be provided to the Whole Time Inspectors and Zonal Inspectors.

62. Extension of services of Dr. K. Anandakannan as Zonal Inspector on consolidated salary.

Read: the matter with regard to extension of services of Dr. K. Anandakannan as Zonal Inspector.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that the services of Dr. K. Anandakannan as a Zonal Inspector is going to expire on 7.5.2004. The Committee decided to extend the services of Dr. K. Anandakannan for a period of one year i.e. upto 7.5.2005.

63. Extension of services of Dr. M.C.R. Vyas as Whole Time Inspector.

Read: the extension of service of Dr. M.C.R. Vyas as Whole Time Inspector.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that the services of Dr. M.C.R. Vyas as a Whole Time Inspector is going to expire on 9.4.2004. The Committee decided to extend the services of Dr.M.C.R. Vyas for a period of one year i.e. upto 9.4.2005.

64. Introduction of Group Saving Linked Insurance (GSLI) Scheme of LIC for the employees of the MCI.

Read: the Introduction of Group Saving Linked Insurance (GSLI) Scheme of LIC for the employees of the MCI.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to approve the introduction of Group Saving Linked Insurance (GSLI) Scheme of LIC for the employees of the Council and directed the office to take necessary steps for implementation of the scheme.

65. Recognition of MBBS degree awarded by Universal College of Medical Sciences, Bhairahawa, Nepal Affiliated to Tribhuvan University – under section 12 of the IMC Act, 1956.

Read: the matter with regard to Recognition of MBBS degree awarded by Universal College of Medical Sciences, Bhairahawa, Nepal Affiliated to Tribhuvan University – under section 12 of the IMC Act, 1956.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to obtain legal opinion in the matter and authorized President (Acting) to decide in accordance with the legal opinion so received.

66. S.V.S. Medical College, Mahboobnagar – renewal of permission for admission of 6th batch of students during the year 2004-2005.

Read : the inspection report (19th & 20th Feb., 2004) for renewal of permission for admission of 6th batch of students for the academic session 2004-2005.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the inspection report (19th & 20th Feb., 2004) of S.V.S. Medical College, Mahboobnagar and noted the following:-

1. Radiological & Laboratory investigations are inadequate as under :-

Clinical Material:

	Daily Average		Day of Inspection	
	O.P.	I.P.	O.P.	I.P.
<u>Radiological Investigations</u>				
X-ray	34	13	36	15
Ultrasonography	13	6	14	8
Special Investigations	3	2	2	1
C.T. Scan	6	4	5	2
<u>Laboratory Investigations</u>	O.P.	I.P.	O.P.	I.P.
Biochemistry	161	48	121	48
Microbiology	23	7	23	6
Serology	47	16	41	19
Parasitology	39	9	36	9
Haematology	156	60	154	59
Histopathology	7	2	5	1
Cytopathology	6	3	2	1
Others	-	-	-	-

2. Unit wise distribution of beds is not seen in any ward. There is no system of having units in different specialities. It is difficult to make out a patient belongs to which unit. Even the doctors and nurses were not in the position to explain about clinical units in different specialties.
3. In OPD - Teaching facilities like patient couch, stools, x-ray view box, examination tray, etc. are not provided in each room. In some rooms there are no curtains for examination of female patients. In some other rooms there is inadequate materials (examination tray etc.) for examination of patients and washbasin is not available. Physiotherapy room is very small and necessary equipment are not available for completion of therapy.
4. There is no involvement of Forensic Medicine department in medico-legal work.
5. There is no automatic cell counter in central clinical laboratory.
6. In most of the wards nursing station arrangements is not satisfactory. All beds are not provided with bed side lockers. There is over crowding of beds in most of the wards. In some places some beds are not numbered. There is no unit wise distribution of beds in any ward. In General Medicine ward, patients of Dermatology are kept. There is a common ward for psychiatry and dermatology patient. In this ward male & female are put together.
7. There is no separate Paediatric ICU. In surgical ICU two beds are ear marked for PICU.
8. In the department of Radio-diagnosis, equipment are not as per Council norms.

9. Nursing staff :

Nursing Superintendent :	1
Deputy Nursing Superintendent:	2
Matron	1
Asstt. Nursing Superintendent:	8
Nursing Sisters	20
Staff Nurses	183

Nursing staff should be appointed as per Council norms.
10. Interns hostel is not provided. Residents Hostel – Accommodation is available for only 40 residents which is not as per norms.
11. Nurses Hostel : There are 20 doubled bedded rooms on the first floor of the hospital building total accommodation is for 48.
There are 50 double bedded rooms on the second floor of the Library building. Total accommodation is for 100. Total accommodation available for the nurses is 148. Accommodation should be increased as per Council requirements.
12. Central library should have 7000 books as against available 5403 books. Internet & Medlar facilities are not available.
13. Record Department needs complete computerisation as early as possible. ICD X classification of diseases and is not followed for indexing at present. It should be started immediately.
14. The following deficiencies are observed in the infrastructure of para-clinical departments:-
 - a. Anatomy department and animal house are not yet shifted inside the campus.
 - b. Department of Microbiology :
 - (i) No Research Laboratory
 - (ii) Catalogues are not available in the museum
 - c. Department of Forensic Medicine
 - (i) There is no laboratory
 - (ii) Research laboratory is not available
 - (iii) There is no involvement of in the casualty department
15. Gap analysis of staff position between the last and present inspection
Department of Anatomy :Gap of 1 Asso. Professor for 9 months
Department of Pathology Gap of 1 Asst. professor for 8 months
Department of General Medicine : Gap of 1 Professor for 6 months
16. Other deficiencies/remarks are in the report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Government not to renew the permission for admission of 6th batch of students for the academic session 2004-05 at S.V.S. Medical College, Mahboobnagar.

67. GSL Medical College, Rajahmundry – renewal of permission for admission of 2nd batch of students during the year 2004-2005.

Read: the inspection report (9th & 10th March, 2004) for renewal of permission for admission of 2nd batch of students for the academic session 2004-2005.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the inspection report (9th & 10th March, 04) and decided to recommend to the Central Government to renew the permission for admission of 2nd batch of 150 students at GSL Medical College, Rajahmundry for the academic session 2004-2005.

68. Establishment of a new medical college at Amlapuram by Mother Theresa Educational Soccity, Amlapuram.

Read : the inspection report (3rd & 4th March, 2004) for establishment of new medical college at Amlapuram by Mother Theresa Educational Society, Amlapuram.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the inspection report (3rd & 4th March, 2004) and noted the following:-

1. The shortage of teaching staff required for Letter of Permission is as under:-

(a) Faculty 45.45% (i.e.40 out of 88)

- iv) Professor : 3(Physiology-1,Medicine-1, Surgery-1)
- ii) Associate Professor : 8(Anatomy-2,Physiology-2,Pharmacology-1, OBG-1, Anaes.-1, Radio-diagnosis-1)
- iii) Assistant Professor : 17 (Anatomy-3, Physiology-3, Pathology-1, ForensicMed.-1, PSM-1, Medicine-2, Surgery-2, Ophth.-1, Anaes.-2, Radio-diagnosis-1)
- iv)Tutor :12(Anatomy-2, Physiology-2, Pathology-1, FM-1,PSM-1, Surgery-3, Anaes.-2)

(b) Jr. Resident –11 out of 24 (45.83%) (Medicine-4,Surgery-4,Oph.-1,OBG-2)

2. Clinical material is inadequate as under:-

Bed occupancy%	35%-45%	45%
<u>Operative work</u>		
Number of major surgical operations	--	--
Number of minor surgical operations	10-15 per day	12
Number of normal deliveries	--	--
Number of caesarian Sections	--	--
<u>Radiological Investigations</u>		
	O.P. I.P.	O.P.
X-ray	--	--
Ultrasonography	--	--
Special Investigations	--	--
C.T. Scan	--	--I.P.
<u>Laboratory Investigations</u>		
Biochemistry	50-55	55
Microbiology	--	--
Serology	--	--
Parasitology	--	--
Hematology	50	45
Histopathology	--	--
Cytopathology	--	--
Others	--	--

3. Hospital starting from second floor onwards upto the fourth floor only masonry work is completed. Plumbing, Electrical work, Furniture and other necessary equipments are yet to be installed.

4. Mechanised laundry is not available.

5. No major surgical operations & deliveries are performed. No Radiological. Microbiology, Histopathology and Serology investigations have yet started. Only 50-55 Biochemistry tests and about 50 Heamatology tests are performed.

6. Total 5 O.Ts are available out of which 2 are under construction and the remaining 3 has to be made functional by adequately equipping these with required resuscitation equipments etc.

7. The main ICCU and CCU are still to be commissioned though floor space has been earmarked in the second floor above the Dean's office. Only 4 beds near Causalty is available at present. The Dean is advised to shift the CCU to the ground floor near the causality so that there is a zero delay. Resuscitation equipments are not installed.
8. Blood Bank is not functional. Space has been created for the same in the hospital building
9. The College has not installed incinerator. It has entered into a contract with a local firm for disposal of their biomedical waste. The undertaking in this respect has been obtained from the Dean of the College.
10. Space for one level type lecture theatre of capacity 200 on the fourth floor of the hospital has been created which is yet to be furnished and equipped with A.V. Aids. 2 lecture theatres of Gallery type of capacity approximately 200 are under construction and near completion. These are to be furnished and equipped with A.V. Aids.
11. Hostels for boys, girls, residents and nurses :

Hostels: Location – within / outside campus at a distance of 500 Meters.

Hostels	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Boys	1	22	60	Are to be furnished	Facility is available but not functional at present
Girls	1	45	110	--do--	--do--
Residents	P.G./Interns share 30 Rooms with boys and girls hostel				
Nurses	1 with 3 floors; 2 floors constructed - 1 under construction	24	96	--do--	--do--

Hostel:

Boys	Within campus	At a distance of 300 meters.
Girls	Within campus	At a distance of 500 meters.

12. The teaching departments of Anatomy, Physiology, Biochemistry and Community Medicine are completely constructed but are yet to be furnished and equipped for teaching purposes.
13. The space for Library block and its various sections have been completely constructed on the first floor of the College building with a reading room of total capacity for 150. These are yet to be furnished and equipped. No books are available. No staff is appointed.
14. Other deficiencies/remarks are in the report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Government to disapprove the scheme for establishment of new medical college at Amlapuram by Mother Theresa Educational Society, Amlapuram received under Section 10A of the IMC Act, 1956.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided to write a letter to the State Govt. of Andhra Pradesh requesting to intimate as to how they have issued the Essentiality Certificate certifying that the applicant owned and managed a functional hospital having adequate clinical material.

69. Mahatma Gandhi Medical College & Research Instt., Pondicherry – renewal of permission for admission of 4th batch of students for the academic session 2004-2005.

Read : the inspection report (16th & 17th March, 2004) for renewal of permission for admission of 4th batch of students for the academic session 2004-2005 at Mahatma Gandhi Medical College & Research Instt. Pondicherry.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors' report (16th & 17th March, 04) and decided to recommend to the Central Government to renew the permission for admission of 4th batch of 100 students at Mahatma Gandhi Medical College & Research Instt., Pondicherry for the academic session 2004-05.

70. Pondicherry Instt. Of Medical Sciences, Pondicherry – renewal of permission for admission of 3rd batch of students.

The subject matter be read corrected as under :

Pondicherry Instt. of Medical Sciences, Pondicherry - to consider the Council inspectors report carried out on receipt of complaint from Sh. S. Arumugam, Love Brothers Youth Association forwarded by Central Govt. in respect of serious irregularities and malpractice's committed by the management of Pondicherry Institute of Medical Sciences, Pondicherry.

Read : the inspection report (18th & 19th March, 2004) carried out for verification of the facts contained in the complaint.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspector's report (18th & 19th March, 04) carried out on receipt of complaint from Sh. S. Arumugam, Love Brothers Youth association in respect of serious irregularities and malpractice's committed by the management of Pondicherry Institute of Medical sciences and observed that all the allegations made in the complaint are baseless.

71. NKP Salve Instt. of Medical Sciences – renewal of permission for admission of 4th batch of students against the increased intake i.e. from 50 to 100 for the academic session 2004-2005.

Read : the inspection report (15th & 16th March, 2004) for renewal of permission for admission of 4th batch of students against the increased intake i.e. from 50 to 100 for the academic session 2004-2005.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the inspection report (15th & 16th March, 04) and noted the following:-

1. Clinical material is inadequate in terms of OPD attendance, surgical work and X-ray investigations as under :-

	Daily Average	Day of Inspection
O.P.D. attendance	663	810
<u>Operative work</u>		
Number of major surgical operations	3	8
Number of minor surgical operations	16	22
Number of normal deliveries	3	3
Number of caesarian Sections	1.8	4
<u>Radiological Investigations</u>		
X-ray	67	106
Ultrasonography	14.4	32
Special Investigations	3.6	4
C.T. Scan	6.2	7
<u>Laboratory Investigations</u>		
Biochemistry	363	413
Microbiology }		
Serology }	63	84

Parasitology}		
Haematology	449.6	758
Histopathology	4.6	4
Cytopathology	8.4	9
Others	---	--

2. Hostel accommodation for boys, girls, residents, and nurses is inadequate as under:-
Hostels: (a) Location – Girls hostel within and boys hostel outside campus.
(b) Accommodation is available for only 312 students against 400 required.

Hostels	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Boys	1	52	156	Yes	Yes
Girls	1	52	156	Yes	Yes
Residents	0	0	0	---	---
Nurses	1	52	156	Yes	Yes

Hostel:

Boys	Outside campus	At a distance of 1.5 km.
Girls	Within campus	At a distance of 0.25 kms.

3. All Residents are accommodated in the unoccupied staff quarters and in the unoccupied rooms available in the girls and nurses hostels. A Residents hostel for accommodating 60 Residents is under construction in a two storied building adjoining the Hospital.
4. Central Laundry is manual.
5. Other deficiencies/remarks are in the report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Government not to renew the permission for admission of 4th batch of students against the increased intake i.e. from 50 to 100 for the academic session 2004-2005 at N.K.P. Salve Instt. of Medical Sciences, Nagpur.

72. J.N. Medical College, Swangi, Wardha – renewal of permission for admission of 2nd batch of students against the increased intake from 100 to 150 for the academic session 2004-2005.

Read : the inspection report (18th & 19th March, 2004) for renewal of permission for admission of 2nd batch of students against the increased intake from 100 to 150 for the academic session 2004-2005.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the inspection report (18th & 19th March, 04) and decided to recommend to the Central Government to renew the permission for admission of 2nd batch of students against the increased intake from 100 to 150 for the academic session 2004-05.

However, the college authorities be advised to comply with the observations made in the inspection report and send a compliance to that effect within 3 months.

73. Establishment of new medical college at Delhi by Army Welfare Society, New Delhi.

Read : the application for establishment of medical college at Delhi by Army Welfare Society along with the clarification submitted by the college authorities through the Central Govt.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the letter dated 15th March, 04 received from the Central Government forwarding therewith the comments/compliance received through the Army Welfare Society, New Delhi and decided to obtain legal opinion in the matter and President (Acting) is authorised for further necessary action.

74. Establishment of new medical college at Indore by Sri Aurobindo Institute of Medical Sciences, Indore.

Read : the application for establishment new medical college at Indore by Sri Aurobindo Institute of Medical Sciences, Indore along with fresh Essentiality Certificate issued by the State Govt. of Madhya Pradesh.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Sri Aurobindo Instt. of Medical Sciences, Indore, received through the Central Government, for establishment of new medical college at Indore and decided to verify the same by way of an inspection.

75. Establishment of new medical college at Peerancheeru by Shadan Educational Society, Hyderabad.

Read : the compliance report submitted by the authorities of Shadan Educational Society, Hyderabad on the deficiencies pointed out in the inspection report (26th & 27th Dec., 2003).

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Shadan Educational Society, Hyderabad received through the Central Government, for establishment of new medical college at Peerancheeru and decided to verify the same by way of an inspection.

76. Establishment of new medical college at Bangalore by Moogambigai Charitable & Charitable & Educational Trust, Bangalore.

Read : the compliance submitted by the authorities of Moogambigai Charitable and Educational Trust, Bangalore on the deficiencies pointed out in the MCI inspection report (23rd & 24th Dec., 2003) for establishment of Medical college at Bangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance submitted by the authorities of Moogambigai Charitable & Cahritable & Educational Trust, Bangalore received through the Central Government, for establishment of new medical college at Bangalore and decided to verify the same by way of an inspection.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council further decided that henceforth in future whenever compliance received through the Central Govt. which is found to be satisfactory upon scrutiny, President (Acting) is authorised to take further necessary action in the matter.

77. Admission for the academic year 2004-2005 in the Ist MBBS course at Adichunchanagiri Instt. of Medical Sciences, Bellur.

Read : the compliance verification inspection report (26th & 27th Feb., 2004) of Adichunchanagiri Instt. of Medical Sciences, Bellur carried out to assess the undergraduate teaching facilities available at the college.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance verification inspection report (26th & 27th Feb., 04) and noted the following:-

1. (i) The shortage of teaching faculty is 32.7% (i.e.46 out of 141) as under:-
 - a) Professor :2 (PSM-1, Forensic Med.-1)
 - b) Associate Professor :15 (Anatomy - 2, Physiology-1, Biochemistry-1, Microbiology-1, For. Med.-1, PSM- 2, TB & Chest-1, Psychiatry-1, Radiodiagnosis-2, Anaesthesia-3, Dentistry-1)
 - c) Assistant Professor :14 (Anatomy-1, Microbiology-1, Forensic Medicine- 1, PSM-2, Epidemiologist-1, Statistics-1, Psychiatry-1, Radiodiagnosis-2, Anaesthesia-3, Dentistry-1)
 - d) Tutor :15 (Anatomy-3, Phsysiology-1, community Medicdine-3, Radiodiagnosis-4, anaesthesia - 4)
- (ii) The shortage of Tutor/Resident is more than 25% as under:-

- i) Sr. Resident : 3 (Skin & VD-1, Psychiatry-1, Obst.-1)
 ii) Jr. Resident : 19 (15-TB & Chest, Skin & VD-3, Psychiatry-3, Obst. & Gynae. -6)

One Associate Professor of Surgery was not present on 26th February for verification i.e. PG inspection.

One Professor of Obst. & Gynae. was not present for verification on 26th February for PG inspection. He was present for verification on 27th February.

One Professor for Orthopaedics was not present on 26th February i.e. PG inspection and was present on 27th February.

Smt. Veena, Lecturer in Statistics appeared for verification, however, on scrutiny of the documents, it was found that degree certificates was not available and the mark list of MSc (Statistics) submitted by her showed that she was failing in the examination, hence, not eligible for the post of Lecturer. Hence, she is not counted for the post.

2. Clinical Material is grossly inadequate as under :-

	Daily Avrg.	Day of Inspection
O.P.D. attendance	278	542
Casualty attendance	13	9
Bed occupancy%	53%	108.4%
<u>Operative work</u>		
Number of major surgical operations	2	4
Number of minor surgical operations		
Number of normal deliveries	2	1
Number of caesarian Sections	2	1
<u>Radiological Investigations</u>		
X-ray	20	42
Ultrasonography	11	17
Special Investigations	1	-
C.T. Scan	1	1
<u>Laboratory Investigations</u>		
Biochemistry	27	29
Microbiology	41	126
Serology	-	-
Parasitology	-	-
Haematology	105	72
Histopathology	4	0
Cytopathology	1	2
Others		

3. Although bed occupancy was 108% on the day of inspection, majority of them were of cataract patients, who had been admitted during eye camp. There is one single ward having 160 beds with single nursing station having 2 staff nurses catering to Paediatrics, Ophthalmology, Orthopaedics, TB & Chest, ENT& Surgery. However, 145 beds were occupied by cataract patients.
4. In Paediatrics ward, bed occupancy was only 5 patients, all of whom were adult cataract patients who were operated during eye camp.
5. The following deficiencies pointed out in the inspection report of 9/8/03 have not been rectified:-
- a) Psychiatry department has no faculty member.
 b) Forensic Medicine has no faculty, only one tutor is available.
6. There is shortage of 10 beds in Ophthalmology.
7. Only 2 lecture halls are available against 4 required.
8. In the department of Microbiology, seven separate service laboratories are not available and Laminar flow is not available.
9. In the department of Pathology, there is only one laboratory for students against 2 required as per norms.

10. Only 5 OTs are available against the required number of 10 as per norms.

11. Other deficiencies/remarks are in the report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to reiterate its earlier decision taken at its meeting held on 23rd August, 2003 recommending stoppage of admissions for the academic year 2004-2005 in the Ist MBBS course at Adichunchanagiri Instt. of Medical Sciences, Bellur. Copy of the letter be marked to the Registrar, Rajiv Gandhi University of Health Sciences, Bangalore, Officer-in-Charge CET Cell, Bangalore, DME, Govt. of Karnataka and Principal of the college.

78. Continuance of recognition of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore in respect of students being trained at Kempegowda Instt. of Medical Sciences, Bangalore.

Read : the inspection report (17th & 18th March, 2004) along with the compliance verification inspection report for continuance of recognition of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore in respect of students being trained at Kempegowda Instt. of Medical Sciences, Bangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the compliance verification inspection report (17th & 18th March, 04) and noted the following:-

1. (i) The shortage of teaching Faculty is 14.2 % (i.e. 28 out of 203) as under:-
 - a) Professor : (TB & Chest-1; Psychiatry-1)
 - b) Associate Professor : (Anatomy-1, Pathology-2, Microbiology-1; FM-2 and PSM-1)
 - c) Assistant Professor : (Biophysics-1; Pharma-1; Pathology-1; PSM-3; TB & Chest-1; Anaes.-1)
 - d) Tutor : (Pharma-3; FM-1; PSM-2; G. Medicine -2; TB & Chest - 1; RD-1; G. Surgery-1)(ii) the shortage of resident is 20% (i.e. 15 out of 71) (Medicine-5; Skin & STD-3; TB & Chest -3; Surgery-4)

2. Clinical Material is grossly inadequate as under:-

	Daily Avg.	Day of Inspection
O.P.D. attendance	315 to 430	425
Casualty attendance	13 to 16	8
Bed occupancy%	64/50	51/43
<u>Operative work</u>		
Number of major surgical operations	10 to 17	20
Number of minor surgical operations	7 to 9	9
Number of normal deliveries	1 to 3	1
Number of caesarian Sections	1 to 3	2
<u>Radiological Investigations</u>		
X-ray	48 to 60	41
Ultrasonography	17 to 27	17
Special Investigations	2 to 3	nil
C.T. Scan	7 to 10	8
<u>Laboratory Investigations</u>		
Biochemistry	170 to 250	241
Microbiology	8 to 18	9
Serology	55 to 88	91
Parasitology	5 to 11	10
Haematology	200 to 270	202
Histopathology	7 to 10	14
Cytopathology	4 to 7	5
Others		

3. Teaching beds are 501. Distribution of teaching beds in different specialties is as follows:

Speciality	Required Beds/Units	Present Beds/Units	Deficiency if any
Medicine & Allied Specialities			
General Medicine	150/5	108/5	42 beds less

Paediatrics	75/3	40/3	35 beds less
TB & Chest	25/1	15/0	no teachers
Skin & VD	13/1	0/1	no beds available
Psychiatry	12/1	21/1	
Total	275	184	91 beds less
Surgery & Allied Specialities			
General Surgery	150/5	123/5	27 beds less
Orthopaedics	75/3	88/3	
Ophthalmology	25/1	10/1	15 beds less
ENT	25/1	17/1	8 beds less
Total	275	238	37 beds less
Obstetrics & Gynaecology			
Obstetrics & ANC	40/2		
Gynaecology	35/1	89/3	No deficiency
Total	75		

There is an overall deficiency of 124 beds and the distribution of beds is not as per the Council norms. The units are not clearly demarcated & the beds are not numbered. Ward laboratories are not available.

- All the OPDs except Psychiatry continue to the function on the ground floor of the Dental college building. Space for teaching area is not adequately available in the OPDs of major departments like Medicine, Surgery, Paediatrics, Obstetrics & Gynaecology and Orthopaedics.
- The Principal has declined to give the undertaking of non-admittance of students for academic year 2004-05.
- The seminar rooms available in the hospital complex are used as teaching areas by all the departments and are not demarcated for a particular Department.
- The medical college is located in two different places separated by a distance of 4.5 Kms., the Pre-clinical departments of Anatomy, Physiology and Biochemistry are located separately in a built-up area of 4200 sq.mtrs. in a land of 6 acres which also houses the Pharmacy college run by the same management. Hostel for Boys and Girls is located right across this block in an area of 7094 sq.mtrs. Para-clinical departments of Pharmacology, Pathology, Microbiology, Forensic Medicine and Community Medicine are located near the Hospital in a land of 16 acres at an area of 8430 sq.mtrs. Hospital is spread over an area of 20488 sq.mtrs. This land is further occupied by the college of Dental Science, college of Nursing, college of Physiotherapy, Instt. of Technology, college of Science, college of Arts and Commerce, College of Law, Evening College of Law, Arts and Science and Pre-university college running to a total student strength of 6650 at any given time.
- Lecture Theatres :- There are 7 lecture halls of different capacity - all located in the 6th floor of the OPD building complex a portion which huses the college of Dental Science also. Except 4 larger halls other are smaller and can accommodate 60 to 80 students where university exams for medical and dental students are being conducted. Audio-visual equipments are brought from the respective departments during the time of lectures.

	College	Hospital
Number	4	4
Type	Flat	Flat
Capacity	130 each	60 each
A.V.Aids	NA	NA

- Hostel for boys, girls, residents, and nurses is inadequate as under:-

Hostels	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Boys	1	61	172	Yes	Yes
Girls	1	76	228	Yes	Yes
Interns	NA	NA	NA	NA	NA

Residents	NA	NA	NA	NA	NA
P.G.	Same	22	44	Yes	Yes
Nurses	NA	NA	NA	NA	NA

Hostel :

Boys	Outside campus	At a distance of 4.5 kms.
Girls	Outside campus	At a distance of 4.5 kms.

10. No indoor games/Gymnasium are available
11. Nurses are accommodated in working women's hostel run by the management and located 5 Kms. away from the hospital.
12. There is no Kitchen & no dietician available. Food is prepared from the canteen run by the private management.
13. Incinerator is not functional.
14. The deficiency of the staff quarters remains as it is as no residential quarters are available for the staff.
15. The RHTC and UHTC are under the Administrative and Financial control of the State Government & the Municipal Corporation respectively and the college is allowed to use its facilities for teaching purposes. Infrastructural facilities like mess, lecture hall, etc. are not available. Accommodation for interns is provided in rental premises and the agreement is valid upto 2006. Deliveries are not conducted.
16. Playground is not available.
17. Microbiology department museum is not available.
18. Viewing gallery is not provided in the Mortuary. Microscopes are not available in the laboratory of Forensic Medicine department.
19. Central Library : Library is located at three different places - one at the basement of the paraclinical building which functions as the main Library; second one is located at the hospital building which is named as PG library and has text books and journals of clinical subjects only under the caption of individual clinical departments; third library is located at the pre clinical block located 4.5 kms away and consists of all pre clinical subjects.

The number of seats available for the reading rooms are as under :-

S.NO.		Rooms	Capacity
A	Students	Three	280
B	Interns & Residents	Two	48
C	Staff	One	20
	Total	Six	348

No subscription has been made for journals in 2003-04; last journals received are only for 2002. Xerox facility is not available in the library.

20. Demonstration rooms of Anatomy, Biochemistry are having capacity of 20 only against the required norm of 50.
21. In the department of Pharmacology, only one laboratory for students is available which functions as a combined laboratory for Experimental Pharmacology & Clinical Pharmacology.
22. In the department of Pathology, only one laboratory is available which functions as a combined laboratory for Clinical Pathology & Haematology laboratories.
23. Other deficiencies/remarks are in the report.

In view of above, the members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to direct stoppage of admissions for the academic year 2004-2005 in the Ist MBBS course at Kempegodwa Instt. of Medical Sciences, Bangalore. Copy of the letter be marked to the Registrar, Rajiv Gandhi University of Health Sciences, Bangalore; Officer-in-Charge, CET Cell, Bangalore; DME, Govt. of Karnataka and Principal of the college.

79. Continuance of recognition of MBBS degree granted by NTR University of Health Sciences, Vijayawada in respect of students being trained at Guntur Medical College, Guntur.

Read : the compliance verification inspection report (12th & 13th Feb., 2004) for continuance of recognition of MBBS degree granted by NTR University of Health Sciences, Vijayawada in respect of students being trained at Guntur Medical College, Guntur

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that the Executive Committee at its meeting held on 13.3.2003 decided to issue a show cause notice to the concerned authorities as to why steps should not be initiated to recommend to the Central Government to de-recognise the institution for the award of MBBS degree granted by NTR university of Health Sciences as per provision of Section 19(2) of the IMC Act, 1956 for not submitting the proper compliance on the deficiencies pointed out in the inspection report and further noted that one month time was granted to the institution to respond to the show cause notice.

The Committee further noted that the compliance report received from the DME, Andhra Pradesh was considered by the Executive Committee at its meeting held on 2.6.2003 wherein it was decided to verify the same by way of an inspection. Accordingly, an inspection to verify the compliance was carried out on 12th & 13th Feb., 2004.

The members of the Adhoc Committee and of the Executive Committee of the Council considered the inspection report (12th & 13th Feb., 2004) and noted that the deficiencies are still persisting as under:-

1. The shortage of teaching faculty is 15.8 % (i.e.34 out of 215) as under:-
 - a) Professor : 1 (Dentistry)
 - b) Associate Professor : 11 (Anatomy 2, Physiology - 2, Pharmacology -2, TB & Chest-1, Ortho-1, RD-2, Dental -1)
 - c) Assistant Professor : 14 (Anatomy-4, Physiology-2, Microbiology-1, PSM-5, Anaesthesia-1, and RD -1)
 - d) Tutor :6 (Pharma-4, and FM-2)
2. Though the total number of beds are more than 750 the distribution of beds is not as per Council norms as Paediatrics has got only 75 beds against 90 required. Teaching facilities are inadequate. Treatment room is not available in any ward. Proper demarcation of units is not provided. Paediatrics ward is over crowded and space between beds is very narrow. Teaching areas are not available in Ophthalmology, ENT etc. Unit distribution in Paediatrics, TB & Chest, Psychiatry, Orthopaedics, Ophthalmology is not as per Council norms since the institution is running postgraduate courses also.
3. In the OPDs of major departments like Medicine, Surgery, Paediatrics, Obstetrics & Gynaecology and Orthopaedics, space for teaching area is inadequate. Facilities like blackboard, X-ray view box etc. are not provided. Class rooms and demonstration rooms are not available for clinical departments. Ward side labs are not available for Medicine department. Microscope is not available in STD OPD. In Surgery OPD cubicles are provided with temporary partition. Clinical Psychologist is not available. There is a common room for plaster application and plaster cutting where running water is not available.
4. In the casualty area, only 10 beds are provided. Central oxygen or suction is not available. Only one Pulse Oximeter and one nebuliser are available. No other resuscitation equipment is provided. Duty room for CMO is too small. No room for resident doctors is provided.
5. In the central laboratory, there is no common sample collection area.
6. Medical Record Department is not computerised.
7. Central Laundry : There is a mechanized laundry available with four hydro extractor and two washer. Drier is not functional.
8. Incinerator is not available.

9. Blood Bank : License for the blood bank expired in 1997. 10 to 20 units of blood is being collected and 15 to 20 units are being distributed daily, which is not commensurate with the workload desired. It is not under the control of Professor and Head of Pathology.
10. Available Paramedical staff is as under:
Laboratory Technicians : 36
Laboratory Assistant : 17
Laboratory Attendants : 20
There is a shortage of 8 technicians, 13 assistants, and 15 attenders.
11. Nursing staff :
Nursing Superintendent 01
Deputy Nursing Superintendent : 01
Nursing Tutors : 09
Asstt. Nursing Superintendent : -Nil-
Nursing Sisters : 46
Staff nurses : 183
Total : 240

There is a gross deficiency of Nursing staff for a hospital with a bed strength of 1177.
12. Auditorium is under construction.
13. Hostel accommodation for boys and girls is inadequate as accommodation is available for only 340 students against 750 required as under :

Hostels	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Boys	1	74	146	Yes	Yes
Girls	1	94	194	Yes	Yes
Interns	1	40	50	Yes	Yes
Residents	Nil	Nil	Nil	Nil	Nil
P.G.	1	41	41	Yes	Yes
Nurses	1	85	160	Yes	Yes

Hostel : Hostel accommodation is inadequate.

Boys	Outside campus	At a distance of 05 kms.
Girls	Outside campus	At a distance of 01 kms.

14. In the Central library, total number of journals subscribed is only 35 against 100 required. Internet and medlar facilities are not available
15. No residential accommodation is available for teaching and non-teaching staff.
16. At RHTC, no lecturers cum medical officers having MD (PSM) qualification is posted. Mess is not available.
17. No practical laboratory in Forensic Medicine.
18. Delivery services are not provided at UHC.
19. Blood bank has to be brought under Pathology department.
20. Sufficient number of lockers are not provided in the department of Anatomy.
21. In the department of Physiology, no couch is available.
23. DNB students – one each in Orthopaedics and Obstetrics & Gynaecology are admitted for 2003-2004.
24. Teachers in clinical departments are not provided with adequate space to sit.

25. Other deficiencies/remarks are in the report.

In view of above, the members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Council to withdraw the recognition of MBBS degree granted by NTR University of Health Sciences, Vijayawada in respect of students being trained at Guntur Medical College, Guntur u/s 19 of the I.M.C. Act, 1956.

The Committee further decided to refer the matter to the Postgraduate Committee for necessary action.

80. Recognition of Dr. Babasaheb Ambedkar Hospital, Rohini, Delhi for compulsory internship training.

Read : the inspection report carried out for recognition of Dr. Babasaheb Ambedkar Hospital, Rohini for compulsory internship training.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter and decided to recognise Dr. Babasaheb Ambedkar Hospital, Rohini, Delhi for compulsory internship training for two seats each in Medicine, Surgery and Obst. & Gynae.

81. To consider the letter dated 21st Feb., 2004 received from the Chairman, Central Board of Secondary Education with regard to revision of syllabus for entrance examination.

Read : the letter dated 21st Feb., 2004 received from the Chairman, Central Board of Secondary Education with regard to revision of syllabus for entrance examination.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter and decided that aptitude test for the same may not be conducted.

82. Removal of the name of deceased person from Medical Register.

Read : the letter dated 23rd Feb., 2004 from the Registrar, Rajasthan Medical Council, Jaipur intimating that Dr. K.D. Gupta (Regn. NO.1482) has expired on 20.2.2004 and his name has been removed from the Register of Registered Medical Practitioners.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the letter dated 23rd Feb., 2004 received from the Registrar, Rajasthan Medical Council, Jaipur intimating that Dr. K.D. Gupta (Regn. No. 1482) has expired on 20.2.2004 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.

83. Cadre review for different posts in the Council office.

Read : the matter with regard to cadre review for different posts in the Council office.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that they at their meeting held on 28-7-2003 while sanctioning the one additional post of Deputy Secretary in the Council office suggested that a comprehensive statement be prepared by the Council office showing the requirement of staff in all categories and the same will be placed before the Committee.

In this context, it is submitted that the main objectives of the Council are as under:

- a) maintain standards of the medical education both undergraduate and postgraduate.
- b) register medical practitioner and maintain All India Medical Register
- c) recognize medical degrees
- d) recognize/de-recognize Indian and foreign medical qualifications

- e) inspect and visit of medical colleges with a view to maintain proper standard of medical education
- f) grant of permission to start postgraduate courses
- g) negotiate with other countries for reciprocity for the recognition of medical qualification
- h) register basic and additional qualifications and issue of good standing certificates
- i) issue of eligibility certificates and verification of documents
- j) lay down standards of professional conduct and etiquette and a code of ethics for the medical practitioners.

In order to maintain these objectives, it is further submitted that the work in the Council office is spread over several sections as under :-

- a) Medical Education Section
- b) Registration and Eligibility
- c) Ethics
- d) Monitoring
- e) Administration (Establishment & Accounts)
- f) Legal
- g) IMR
- h) Miscellaneous (Curriculum, Migration, Teachers' Eligibility and other matters not covered under any of the above)

The last cadre review for different posts was done in 1997. Since then, the work load of the Council in each section has increased manifold as shown below :

1. Medical Education Section : The number of medical colleges coming within the purview of the Council has increased to more than 210 colleges from 138 colleges as on 30th June, 1997. Every year, new medical colleges are being added and this year about 25 applications for new medical colleges and six applications for increase of seats have been received so far. This requires continuous monitoring and possessing of applications. The number of inspections carried out by the Council have also increased over last 3 years as under :-

Year	Undergraduate	Postgraduate
2001	117	238
2002	135	306
2003	176	377

As a consequence, this office work related with these inspections has also increased proportionately.

2. Registration & Eligibility : The number of registration has increased over last 3 years correspondently. The work of registration certificates has also increased commensurately. Provision of Screening Test Regulations have made it mandatory, for candidates who are going abroad, for medical studies to obtain eligibility certificate from the Council. This has been introduced from 2002. This section is also entrusted with issuance of Good Standing Certificate required for the doctors who are going abroad. The section is receiving approximately 80 letters per day which are disposed off in accordance with rules and regulations. The increase in the workload of this section is as under :-

	2001	2002	2003
a) Permanent Registration	1360	1380	1067
b) Good Standing Certificate	723	1027	1311
c) Eligibility Certificate	-	1674	2522

Parallel task undertaken by this section is verification of the documents – mainly 10+2 certificate from the respective Boards and degree/diploma certificates which have to be verified from the respective Universities and authenticated by Indian Embassies.

3. Ethics : The number of cases handled by the Ethics Committee during the last 3 years is increased as under :-

2001	-	763
2002	-	1025
2003	-	1379

Another development which is to be noted is that as per the direction of Hon'ble Supreme Court, the General Body of the Council has already approved the modification of the Professional Conduct of Ethics and Etiquette Regulations in which para 8.7 and 8.8 are to be added to the existing provisions wherein the appellate power is being entrusted to the Council. These modifications have already been sent to the Govt. for approval. As and when these Regulations are approved by the Government, the Council will have the appellate jurisdiction over all State Medical Councils in disciplinary and ethical issues which will increase its work tremendously.

4. Monitoring :This is a new section which has been created in 2003 when it was observed that many teachers are found to be claiming employment in more than one medical college simultaneously. Since then this section is entrusted with scrutiny of the declaration forms being brought by the inspectors at each inspection of the medical colleges. It is also entrusted with the task of finding out the cases of teachers who are employed in more than one medical college.

This section is also entrusted with monitoring the admissions of students in medical colleges in 1st MBBS for which the data are collected and compiled from all the medical colleges and any admission found to be in violation of – a) the last date of admission of 30th September; b) Admission in excess of 50% by the Management in unaided institutions; and c) Excess of the permitted intake – are being continuously monitored. The show cause notice are issued whenever violations are observed. For the academic year 2003-04 such show cause notice have been issued to 13 medical colleges for violation of prescribed last date of admission; 19 colleges for violation of 50% Management and to 13 colleges for violating the permitted intake. This work has also been expected to increase over a period of time.

It should be noted that this section does not have any staff sanctioned for it as it has been created after the last review. The entire staff has been posted from other sections deputing other sections.

5. Administration (Establishment & Accounts) :

This section deals with the following:-

- 1) Service matter of employees.
- 2) Loans and advances of employees.
- 3) Salary of employees.
- 4) Maintaining Service records of employees.
- 5) Work related to construction of Council Building.
- 6) Purchase related work.
- 7) Appointments related work.

In consonance with the increasing workload in different sections, the workload related to the service matters, maintenance of their records, payment of salary/allowances, loans and advances, typing, data entry work etc. has also increased commensurately.

It is also to be observed that the new building at Dwarka is nearing completion and the Office will be shifting to the new premises soon. Although, it is envisaged that the utility services like sanitation, security, canteen, etc. will be handed out on contractual basis to agencies specializing in such type of work, thereby achieving the twin objectives of getting the desired work done without adding to the employee burden on the Council. However, limited number of posts which are having specialized functions related with the overall safety of the building and the employees will have to be created.

6. Legal: This section is entrusted with the monitoring of the cases in which the Council is a party either as a petitioner/applicant or as a defendant/ respondent. It has been observed that the number of cases pending in Hon'ble Supreme Court and other Courts is gradually increasing over a period of time. The major task to be carried out by this section is to complete the file work related with filing of the petitions or reply affidavits, to assist to the Council Advocates in preparation of the affidavits and to monitor and review the progress of the cases. The workload has shown significant increase over a period of last 3 years and at present total 546 cases are pending in the Hon'ble Supreme Court and High Courts.

7. IMR : This section is entrusted with the task of maintaining Indian Medical Register. Data from all State Councils are received for compilation which is done centrally. The IMR section is also receiving 10-15 requests for issue of IMR verification certificates.

8. Miscellaneous (Curriculum, Migration, Teachers' Eligibility etc.)

This Section is entrusted with work related to Migration, Teachers' Eligibility, Curriculum Revision, Record of Meetings, Record of Members of the Council etc.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council approved the following new posts which are required for carrying out the work of the Council effectively:-

Sl. No.	Post	Grade	Existing No.	Additional No. required
1.	Deputy Secretary (Medical)	Rs.12000-375-18000/-	3	1
2.	Assistant Secretary	Rs.10000-325-15200/-	3	2
3.	Stenographer Grade-II	Rs.5500-175-9000/-	2	2
4.	Computer Operator	Rs.4000-100-6000/-	2	4
5.	U.D.C.	Rs.4000-100-6000/-	16	1
6.	Stenographer Grade-III	Rs.4000-100-6000/-	5	2
7.	Telephone Operator	Rs.4000-100-6000/-	1	1
8.	Electrician	Rs.4000-100-6000/-	Nil	1
9.	Lower Division Clerk	Rs.3050-75-3950-80-4590/-	29	4
10.	D.G. Set Operator	Rs.3050-75-3950-80-4590/-	Nil	1
11.	Peon	Rs.2550-55-2660-60-3200/-	5	3
12.	Messenger	Rs.2550-55-2660-60-3200/-	2	1

84. Departmental Promotions in the office of the Medical Council of India.

Read : to approve the decision of the Departmental Promotion Committee with regard to promotion of employees of the Council.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered following recommendations of the departmental Promotions Committee and approved the same:-

S.No	Name	Date of Promotion	Promoted from the post	Promoted to the Post of
1.	Sh. Sanjay Kumar	01/12/2003	L.D.C	U.D.C.
2.	Mrs. Alka Lajpal	22/12/2003	L.D.C	U.D.C.
3.	Ms. Anjana	22/12/2003	L.D.C	U.D.C.
4.	Mrs. Madhu Rawat	12/01/2004	L.D.C	U.D.C.

85. K.S. Hegde Medical College, Mangalore – Approval of the college for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore.

Read: the Inspection report (24th & 25th March, 2004) carried out to assess the teaching and training facilities available at K.S. Hegde Medical College, Mangalore along with the standard of examination held under Rajiv Gandhi University of Health Sciences, Bangalore for approval of the college for the award of MBBS degree granted by RGUHS, Mangalore.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (24th & 25th March, 2004) and noted the following:-

1. Available clinical material is inadequate as under:-

Clinical Material:

	Daily Average	Day of Inspection
O.P.D. attendance	480 to 730	767
Bed occupancy%	70 to 80%	70.2%

<u>Operative work</u>		
Number of normal deliveries	1 to 3	3
Number of caesarian Sections	0 to 2	1
<u>Radiological Investigations</u>		
Special Investigations	0 to 2	1
C.T. Scan	2 to 7	2
<u>Laboratory Investigations</u>		
Biochemistry	280 to 420	423
Microbiology	86 to 120	231
Serology	60 to 90	114
Parasitology	9 to 11	9
Haematology	89 to 147	690
Histopathology	4 to 8	4
Cytopathology	2 to 4	1
Others	---	-

2. The teaching beds are inadequate by 14 beds as under:-

- (a) General Medicine - 8 beds
- (b) TB and Chest -1 bed
- (c) General Surgery - 3 beds
- (d) Ophthalmology - 1 bed
- (e) ENT -1 bed

Total – 14 beds

3. Para-medical Staff: Laboratory Technicians – 38
Laboratory Assistants - 6
Laboratory Attendants - 14

It is inadequate. It should be appointed as per norms.

4. Books in the departmental libraries of depts. of Medicine, TB & Chest, Psychiatry, General Surgery, Orthopaedic, ENT, Ophthalmology, Radio-diagnosis and Anesthesia are less than required as per norms.

5. Obstetric ICU is not available.

6. No separate hostel accommodation is provided for the interns & residents. Total hostel accommodation for boys & girls is 337 which is inadequate against 500 required as per norms. Accommodation for only 24 residents is provided in boys' hostel which is inadequate.

7. There is shortage of 2 operation theatres i.e. 8 OTs. available against the requirement of 10.

8. Total accommodation provided in the examination hall is 195 – one hall of capacity of 120 and 3 smaller halls of capacity of 25 each. Thus the available accommodation in the examination halls is less than required as per the Council norms.

9. There is no demonstration room in TB & Chest OPD. Chairs are not provided in the class room of medicine & surgery wards as well as in the demonstration rooms of Paediatrics, Skin & V.D. and Surgery OPDs.

10. Other deficiencies/remarks are in the report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend not to approve K.S. Hegde Medical Academy, Mangalore for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore.

86. Fr. Muller's Medical College, Mangalore – Approval of the college for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore.

Read: the Inspection report (24th & 25th March, 2004) carried out to assess the teaching and training facilities available at Fr. Muller's Medical College, Mangalore along with the

standard of examination held under Rajiv Gandhi University of Health Sciences, Bangalore for approval of the college for the award of MBBS degree granted by RGUHS, Mangalore.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (24th & 25th March, 2004) and decided to recommend that Fr. Muller's Medical College, Mangalore be approved for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore with an annual intake of 100 students.

87. Yenopoya Medical College, Mangalore – Approval of the college for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore.

Read: the Inspection report (24th & 25th March, 2004) carried out to assess the teaching and training facilities available at Yenopoya Medical College, Mangalore along with the standard of examination held under Rajiv Gandhi University of Health Sciences, Bangalore for approval of the college for the award of MBBS degree granted by RGUHS, Mangalore.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspectors report (24th & 25th March, 2004) and decided to recommend that Yenepoya Medical College, Mangalore be approved for the award of MBBS degree granted by Rajiv Gandhi University of Health Sciences, Bangalore with an annual intake of 100 students.

88. Dr. Pinnamaneni Siddhartha Institute of Medical Sciences & Research Foundation, Chinoutpalli, A.P. – renewal of permission for admission of 2nd batch of students for the academic session 2004-05.

Read: the Inspection report (22nd & 23rd March, 2004) for renewal of permission for admission of 2nd batch of students during the year 2004-05 at Dr. Pinnamaneni Siddhartha Institute of Medical Sciences & Research Foundation, Chinoutpalli, A.P.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the inspection report and also the additional information received by the Council from the college after the inspection and decided to verify the same by way of an inspection.

89. Prathima Instt. of Medical Sciences, Karimnagar – renewal of permission for admission of 2nd batch of students for the academic session 2004-05.

Read: the Inspection report (25th & 26th March, 2004) for renewal of permission for admission of 2nd batch of students during the year 2004-05 at Prathima Instt. of Medical Sciences, Karimnagar.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted that the inspection of Prathima Instt. of Medical Sciences, Karimnagar was carried out on 3rd & 4th March, 2004 by a team of Council Inspectors namely Dr.(Mrs.) Mrinalini C. Pathak, Dr. Sanjay Bijwe and Dr. P.G. Kolandaivelu. Unfortunately before the report could be submitted Dr.(Mrs.) Pathak died in a road accident. The papers were seized by the Police which were ultimately retrieved with the help of a MCI Member Dr. V.P. Mishra. Perusal of these papers revealed that the complete report was not available. Meanwhile, a request has been received from the college to consider the permission in future for 100 admissions only. Accordingly, an inspection was carried out on 25th & 26th March, 2004 by the Council Inspectors.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council inspectors report (25th & 26th March, 2004) and decided to recommend to the Central Government to renew the permission for admission of 2nd batch of students at Prathima Instt. of Medical Sciences, Karimnagar for the academic session 2004-05 with an annual intake of 100 students.

90. MNR Medical College, Sangareddy – renewal of permission for admission of 3rd batch of students during the year 2004-05.

Read: the Inspection reports (09th & 10th March, 2004 and 22nd March, 2004) for renewal of permission for admission of 3rd batch of students for the academic session 2004-05 at MNR Medical College, Sangareddy.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the Council Inspector's reports (09th & 10th March, 2004 and 22nd March, 2004) and noted the following:-

1. Shortage of teaching staff –

(a) Faculty 55%. (i.e. 76 out of 138)

- i) Professor –2 (Biochemistry – 1, Radio-Dignosis-1)
- ii) Associate Professor – 14 (Anatomy-1, Physiology -1, Bio-chem.-1, Pathology -3, Microbiology - 1, Pharmaco.- 1, Com.Medi.-1, General Medicine -1, Orthopeadic-1, Obst. & Gynae. – 1, Anaesthesia -1, Radio-Diagnosis -1)
- iii) Assistant Professor – 17 (Anatomy - 3, Physiology-1, Bio-chemistry-1, Pharmacology- 1, Community Medicine - 4, Dermatology Venerology & Leprosy – 1, Psychiatry -1, General Surgery-1, Anaesthesia.-3, Dentistry-1)
- iv) Tutor – 32 (Anatomy-1, Physiology-2, Bio-chemistry.-1, Pathology.- 4, Microbiology -1, Pharmacology - 4, Fore. Med. – 1, General Medicine – 3, TB & Resp. Diseases – 1, Psychiatry -1, Paediatric -2, General Surgery -3, Orthopaedic - 1, Anaesthesia -4, Radio-Diagnosis-2, Dentistry-1)

(b) Resident – 33 (General Medicine – 7, TB & Resp. Diseases – 2, Dermatology Venerology & Leprosy –1, Psychiatry –2, Paediatrics – 1, General Surgery – 11, Orthopaedics – 5, Oto-Rhino-Laryngology –2, Ophthalmology-1, Obst. & Gynae.-1)

(c) Attendance register is not maintained in several departments.

2. NTR University of health Sciences, Vijayawada, AP has affiliated the medical college for the year 2002-2003 and there is no further renewal of affiliation for subsequent years.

3. Number of units are inadequate and lesser than the required as per norms for Medicine Paediatrics, General Surgery and Ophthalmology. There is no demarcation of beds between TB & Chest, skin & VD and surgery. Total combined of 17 beds are located without any clear demarcation. There is also a shortage of 9 beds as only 17 beds located in the department of Skin & VD and Psychiatry against 24 required as per norms.

4. Clinical material is grossly inadequate.

Clinical Material:

	Daily Average	Day of Inspection
O.P.D. attendance	94-110	50 till 1.00pm
Casualty attendance	3-4	2 till 1.00 pm
Number of admissions / discharge	25/20	
Bed occupancy%	10-15%	Less than 10%
<u>Operative work</u>		O.P. & I.P.
Number of major surgical operations	0-2	1 "
Number of minor surgical operations	1-3	1 "
Number of normal deliveries	0-1	0 "
Number of caesarian Sections	0-1	0 "
<u>Radiological Investigations</u>	O.P & I.P.	O.P & I.P.
X-ray	12-15	5 till 1.00 pm
Ultrasonography	4-9	3 till 1.00 pm
Special Investigations	8 per week	nil
C.T. Scan	3-5 per day	2 till 1.00 pm
<u>Laboratory Investigations</u>		
Biochemistry	22-29	20 till 1.00 pm
Microbiology	2-5	3 "
Serology	6-9	7 "
Parasitology	0-2	- "
Haematology	41-50	38 "
Histopathology	1-3	- "
Cytopathology	3-5	- "
Others		

5. In OPD Audiometry technicians visited only 3 times a week.
6. The room for dentistry, Obst. & Gynae. found to be closed at the time of inspection.
7. There is no separate family planning OPD rooms.
8. Male medical ward with 70 beds was found to be non-functional due to non availability of nursing station and patients. Paediatric ward with 50 beds, TB & Chest, Psychiatry and Skin ward all with 17 beds are found to be non functional due to non availability of nursing station and patients. Female medical ward with 23 patients was having 3 male patients. In Obst. & Gynae. ward only 16 beds are functional and remaining 40 are non functional due to absence of nursing station and patients. The ward class room empty with no chair and absence of other facilities.
9. In the medical records the discharge cases were found to be incomplete and the records of examination, evaluation and investigations were not properly maintained.
10. No teacher was found in the central laboratory of Biochemistry, Pathology and Microbiology on the day of inspection.
11. No teacher available in the Blood Bank.
12. The Anesthesia Register does not have entry of any case after 9.3.04, Ortho., Ophthal. & ENT registers do not show any entry after 10.3.04.
13. No equipment is available in Surgical, Obst. & Paediatrics ICU provided. No ventilator is available in the ICUs on the day of inspection. No patients were found to be present.
14. Central laundry was closed on the day of inspection.
15. The department of Medicine, Paediatrics, General Surgery, Orthopaedic, ENT, Ophthalmology, Radiology, Anesthesia were closed on the day of inspection.
16. No teaching area is provided in any ward of OPD.
17. The library is situated in the basement. No toilet is available. There is no water cooler in the library.
18. All the foreign journals are of the previous years and no documentary evidence were available about subscription paid for these journals in the current year.
19. There is a minor OT available in the casualty, Anesthesia Register does not have entry of any case after 09.03.04, Ortho, Ophthal. & ENT registers do not show any entry after 10.03.2004.
20. No ventilator is available in the ICUs and no patients were found to be present.
21. Pharmacy- The pharmacy is run by a contractor and not under the control of the Hospital; No Pharmacist was available at the time of inspection. All the drugs are given only on payment.
22. Intercom facilities:- Facilities are not available in all the wards.
23. Kitchen – There is no hospital kitchen available; food for the patients is being prepared from the common mess located in the boys hostel.
24. Paramedical Staff – The total no. of Technicians and Nurses were found to be very few in number. The details are not provided.
25. Central Library. The Reading room is available on ground floor, which is not functional. The binding section is not functional. There is no water cooler in the library. The toilets are situated on ground floor.
26. Other deficiencies/remarks in the main report.

In view of above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided to recommend to the Central Govt. not to renew the permission for admission of 3rd batch of students for the academic session 2004-2005 at MNR Medical College, Sangareddy.

91. To note the Letter of Permission/disapproval of the scheme for establishment of medical colleges issued by the Central Govt.

Read: the Letter of Permission/disapproval of the scheme for establishment of medical colleges issued by the Central Govt.

The members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the Letter of Permission/disapproval of the scheme for establishment of medical colleges issued by the Central Govt. as under:-

Name of the college	Date of letters issued by the Central Govt.
Kamineni Instt. of Medical Sciences, Narketpally, Nalgonda.	The Central Government vide letter dt. 12.3.2004 has renewed the permission for admission of 6 th batch of MBBS students for the academic year 2004-2005.
Establishment of new medical college at Srikakulam by Aditya Educational Society, Hyderabad.	The applicant authority had not submitted the Essentiality & Feasibility Certificate in prescribed format and time bound programme in tabulated form asked by the MCI. The Central Govt. vide letter dt. 3.3.2004 returned the proposal for establishment of medical college at Srikakulam as incomplete stating that they are free to apply afresh as per MCI regulations.
Establishment of new medical college at Sagar by Dr. Harisingh Gour Vishwavidyalaya, Sagar.	Since the land for establishment of the proposed medical college has not been transferred in the name of applicant university, the Central Govt. vide letter dated 15/3/2004 has returned the proposal for establishment of medical college at Sagar as incomplete stating that they are free to apply afresh as per MCI regulations.

92. Consideration of Affidavit 20/02/2004 filed by the Union of India in WP No. © No. 604/2002 - Dr. Sanjeev Gupta & Ors. Vs. UOI & Anr. – relating to shifting of screening test to 15/03/2004, conducted by National Board of Examinations, New Delhi.

Read: an affidavit 20/02/2004 filed by the Union of India in WP No. © No. 604/2002 - Dr. Sanjeev Gupta & Ors. Vs. UOI & Anr. – relating to shifting of screening test to 15/03/2004, conducted by National Board of Examinations, New Delhi.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council while considering the matter noted as under:-

“It is stated that the Council Advocate, vide his letter dated 25.2.2004 has informed the Council that an additional affidavit on behalf of the Government of India was filed on 20.2.2004. As per the procedure the written request for deferment of the hearing scheduled for 24.2.2004, was prepared and mentioned before the Hon'ble Court.

He has further stated that the case came up for hearing before the Hon'ble Supreme Court on 24.2.2004 and he informed the Hon'ble Court about the additional affidavit filed on behalf of Govt. of India and further submitted that the response on behalf of the MCI can only be given after General Body Meeting of the Council likely to be held in the 2nd or 3rd week of March, 2004.

The Council has also received copy of the additional affidavit from the Council Advocate (the same as self-explanatory is being enclosed). The views of the Council on the additional affidavit on behalf of the Central Govt. have been required and the same would then be required to be placed before the Hon'ble Supreme Court.

The background of the case is that pursuant to an MOU entered into by the MCI with the Ministry of Higher and Secondary Specialised Education of the erstwhile USSR on 27.6.86 and based on the physical verification and curricula evaluation, graduate medical qualifications granted by 29 medical institutions in the erstwhile USSR were recognised for the purpose of I.M.C. Act, 1956 and were included in Part-II of the Third Schedule to the IMC Act. As per this MOU, the USSR was to offer 50 UG seats and 50 PG seats in their medical institutions for Indian students who were to be sponsored by MCI.

Accordingly, from 1987 to 1990, MCI sponsored 174 students for UG and 31 students for PG studies in medical institutions in USSR.

After the disintegration of USSR, serious aberrations in the system of recruitment and admission of students in institutions located in Russia and CIS countries were reported by the Indian Embassies at Moscow & Almaty in the early part of 1994. Various private agencies with dubious antecedents mushroomed and sponsored medical students for commercial gains. A perceptible decline in the standards of medical education in these countries was also noted.

Accordingly, the comments of MCI were sent to the Central Govt. on 01.11.94 recommending de-recognition of all medical degrees of the of the erstwhile USSR included in the IMC Act. In the meantime, the Council stopped sponsoring further students to the medical institutions in the erstwhile USSR after 1990. However, as the students already sponsored by the Council in terms of MOU of 1986 had not completed their studies, they recommended withdrawal of recognition of these institutions after 31.12.1987.

A delegation from MCI visited Russia in June, 1995 to verify the ground realities and inspected various medical institutes. It was concluded by the MCI delegation that the type of training imparted in these institutions was not at par with the accepted norms and standards prevailing in India.

Subsequently, in February 1996, the Counsellor (Education) in the Embassy of India at Moscow brought to the notice of MCI and the Ministry of HRD that the Russian Ministry of Health had continued to welcome students from private agencies in India without their having approved entry qualifications as prescribed under MCI regulations.

MCI also, in August 1997, therefore, issued an advertisement in the newspapers warning the students against taking admission in medical courses in the countries of former USSR through private agencies and informing them that they shall be doing so entirely on their own risk. It was further informed that the matter of recognition of degrees granted by the 29 medical institutions in the countries of the former USSR was currently under review and that the Council would not be granting recognition to students who obtained admission in these institutions on their own without awaiting the decision with regard to the recognition status of these institutes.

As per the decisions taken on 16.11.1998 in the meeting attended by Principal Secretary to the Prime Minister, Foreign Secretary, Health Secretary, Secretary, MCI & other Senior officers of the Ministry of External Affairs, it was decided to amend Section 13 of the I.M.C. Act, 1956. Accordingly, a Bill further to amend the IMC Act, 1956 was introduced in the Rajya Sabha on 12.3.2001.

The Bill after being passed by both the Houses of the Parliament, the section 13 of the Indian Medical Council Act 1956 was amended and notified in the Gazette of India on 3rd September, 2001.

Accordingly, while returning the draft regulations to the MCI after its approval through a communication dated 13.2.2002, the Central Government specified 15th of March, 2002 as the date from which the provisions of the Regulations would take effect. The said Regulations were notified by the MCI in the Official Gazette on 18.2.2002.

Further, in accordance with the amended Act it is the Central Government which has specified 15th of March, 2002 as the date from which no Indian Citizen with a foreign primary medical qualification shall be granted registration, whether provisional or

permanent, to practice medicine in India. These decisions have also been notified in the Official Gazette by the MCI with the previous approval of the Central Government.

In the meanwhile, until the Act was amended and the Regulations framed thereunder took effect from 15.3.2002, MCI continued to grant registration to the eligible persons as per provisions of the Act prior to its amendment. The Executive Committee of MCI in discharge of its statutory duties, on 17.9.97 took the following decisions: -

- “a) The students who complete their medical degree course of less than 6 years duration from institutions in erstwhile USSR shall not be eligible for registration because of the fact that the duration of M.D.(Physician) course is 6 years, after one year preparatory/language course.
- b) The students completing successfully total six years clinical M.D.(Physician) course in an MCI recognised institute i.e., obtaining recognised M.D.(Physician) degree on or after 1/7/97 shall have to undergo one year internship after obtaining the qualification. Such candidates only shall be eligible for permanent registration u/s 13(3) of the M.C.I. Act, 1956 provided they meet the other criteria of the Council laid down with regard to admission for undergraduate medical course.
- c) The Students who were initially admitted in an institution not recognised by the MCI and later on migrated and obtained the degree from recognised medical institutions in erstwhile USSR will not be eligible for any kind of registration in India.”

The decision of the EC of the Council was approved by the General Body of the Council.

Batch of appeals were filed by MCI against the judgements of the various High Courts before the Hon'ble Supreme Court including CA No.2810/2000 – MCI Vs. Tarun Goel involving the issue as to whether the one year internship was a part of 6 years of the teaching and training of the medicine course undertaken abroad in the institutes of erstwhile USSR. All these appeals were finally decided by this Hon'ble Court by the common judgement dated 8.3.2002 in CA No.2779/2000 – MCI versus Indian Doctors from Russia Welfare Association & Ors. and connected matters.

In the above-mentioned batch of appeals the Hon'ble Supreme Court in an interim order dated 17.4.2000 clearly indicated that each candidate is required to undergo internship of 1 years after obtaining the medical qualification from the medical institution in the erstwhile states of USSR. The issue of 6 years of teaching and training and one year internship thereafter was directed by the Hon'ble Supreme Court vide its order dated 17.4.2000 and reiterated by its final order dated 8.3.2002, reported as MCI Vs. Indian Doctors from Russia Welfare Assns. –(2002) 3 SCC 696.

It is stated that the Central Govt. as per the enclosed Affidavit dated 20.2.2004 filed before the Hon'ble Supreme Court seeking the permission of the Hon'ble Apex Court to issue gazette notification by the Central Govt. proposing to fix the date of effect of the Screening Test Regulations, 2002 to be 15.03.2004 as the Screening Test Regulations, 2002 notified by MCI are yet to come into force in the absence of gazette notification by the Central Govt. It has further been stated therein that upon receipt of a large number of representations from the students who had acquired graduate medical qualification from medical institutions in Russia and CIS countries, Central Govt. sought legal advice. As per the legal advice received by the Govt. Screening Test cannot be insisted upon in the absence of a notification by the Govt. specifying 15.03.2002 as the date contemplated in the amended Section 13(3) of the Act and that if the Govt. is to issue such a notification at this stage, it may have to specify a prospective date. It has been proposed in the additional affidavit that the Govt. of India u/s 13(3) of the Act shall issue a notification specifying 15.3.2004 as the date before which medical qualifications granted by medical institutions outside India which are in Part-II of III Schedule shall be recognised medical qualifications for the purpose of the IMC Act, meaning thereby that all such Indian students who obtained medical degrees from outside India which are included in Part-II of III Schedule of the Act shall be eligible to be granted registration to practice medicine in India after the concerned person has undergone

such practical training after obtaining that qualification as may be required by the rules or regulations in force in the country granting the qualification, or if he has not undergone such practical training as may be prescribed in India. After the proposed date of 15.3.2004, Screening Test Regulations, 2002 shall come into force and all Indian students acquiring medical qualifications outside India will be required to qualify the screening test as per the Screening Test Regulations, 2002.

It may be stated the latest affidavit of the Central Govt. dated 20.02.2004 is contrary to its earlier detailed affidavit filed before the Hon'ble supreme court wherein all the above-mentioned relevant facts have been duly incorporated. It is to be seen that recommendation for de-recognition have been sent by the MCI in the year 1994. The Principal Secretary to the Hon'ble Prime Minister, as per the affidavit of the Central Govt. itself, decided on behalf of the Govt. of India to immediately implement the screening test requirement in the year 1998 itself. It still took the Government to take four more years after that to implement the Screening Test Regulations from 15.3.2002 and which has also been accepted by the Hon'ble Supreme Court in its judgement dated 8.3.2002 and again by the Hon'ble Delhi High Court in the judgement dated 11.7.2002.

If the stand taken by the Central Govt. in its latest affidavit dated 20.2.2004 is to be accepted, the net result would be that the enforcement of the Screening Test would be required to be shifted further by at least a period of two years, thereby permitting more than 5000 candidates to start practice of medicine without qualifying the screening test and when their pass percentage for the screening test held is approximately 10%.

It is further to be seen that the recommended de-recognition in the year 1994 has still not taken place and on the contrary the Government is intending to further delay the enforcement of screening test to the year 2004.”

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter at length and reviewed the documents available on records. It was observed that the decision of the Council taken earlier was rational and based on thorough investigation of the prevailing misuse of the automatic registration. It was also observed that if the date of applicability of the Screening Test were to be changed now, it would be unfair to those several thousand students who have been made to undertake the Screening Test in the previous years. It was further observed that no reasons or compulsion for the Government to change the date and applicability have been shown in the documents provided or have been brought on record.

In view of the above, the members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council decided that the date of Screening Test which has been decided by the Hon'ble Supreme Court which was based upon the affidavit filed on behalf of the Govt. of India earlier may not be changed.

It was further decided to place this matter before the General Body of the Council.

93. Meeting of the National Committee on Foreign Medical Education and Accreditation (NCFMEA) held in Washington on March 8-9, 2004.

Read: the report of meeting of the National Committee on Foreign Medical Education and Accreditation (NCFMEA) held in Washington on March 8-9, 2004 attended by President (Acting) and Dr. D.K. Sharma, Member, Executive Committee.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the report of the meeting of the National Committee on Foreign Medical Education and Accreditation (NCFMEA) held in Washington on March 8-9, 2004 submitted by President (Acting) & Dr. D.K. Sharma, Members of the Executive Committee.

94. Approval of the minutes of the Building Committee meetings held on 16/12/2003, 29/12/2003, 24/02/2004 & 26/03/2004.

Read: Approval of the minutes of the Building Committee meetings held on 16/12/2003, 29/12/2003, 24/02/2004 & 26/03/2004.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted and approved the minutes of the Building Committee meetings held on 16/12/2003, 29/12/2003, 24/02/2004 & 26/03/2004.

95. Request for resignation of services of Dr. Sakuntala Chakraborty, Zonal Inspector - Eastern Zone.

Read: the request of Dr. Sakuntala Chakraborty, Zonal Inspector – Eastern Zone who wish to discontinue her services w.e.f. 31/03/2004 due to personal reasons.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council accepted the request of Dr. Sakuntala Chakraborty, Zonal Inspector – Eastern Zone who wishes to discontinue her services as Zonal Inspector of the Council w.e.f. 31/03/2004 due to personal reasons with immediate effect.

96. Appointment for the posts of LDC (General), Record Keeper – cum- Librarian and Messenger in the Council office.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council approved the recommendations of the Selection Committee for appointments of Lower Division Clerk (Gen.), Record Keeper-Cum-Librarian met on 11.01.04 and for the post of Messenger on 1.11.2003 in the Council office :-

1. LDC (Lower Division Clerk)

Selected

1. Sh. Ashok Sharma
2. Ms. Nirmala Srivastava

Waiting

1. Ms. Monika Banyal
2. Sh. Laxmi Narayan
3. Ms. Savita
4. Sh. Vikas Tanwar

2. Record Keeper-Cum-Librarian

Selected

1. Mrs. Veena Devi

Waiting

1. Sh. Arun Kumar Nawani

3. Messenger

Selected

1. Sh. Damodhar (# 20)

Waiting

1. Sh. Rakesh Kumar (# 34)

97. Establishment of new medical college at Vilayodi, Chittur, Palakkad by Safe Development Aims Trust, Palakkad – Permission of Central Govt. – Regarding.

Read: the letter dated 26/3/04 received from the Central Govt. Ministry of Health & FW, for Establishment of new medical college at Vilayodi, Chittur, Palakkad by Safe Development Aims Trust, Palakkad.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the application for Establishment of new medical college at Vilayodi, Chittur, Palakkad by Safe Development Aims Trust, Palakkad alongwith the fresh essentiality certificate dated 22/3/04 issued by the State Govt. of Kerala and noted that in the essentiality certificate State Govt. has certified that:-

- a) The applicant proposes to establish a 300 bedded hospital and other infrastructural facilities as per Medical Council of India norms.

- b) The applicant proposes to make available adequate clinical materials as per the Medical Council of India norms.

As such mandatory requirements of issuing a certificate in Form –2 by the competent authority of State Govt. stating therein :-

- “a) The applicant owns and manages 300 bedded hospital which was established in “and
“b) Adequate clinical material as per the MCI norms is available”, is still not met with in this case.

In view of above, the members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council decided to return back the file pertaining to establishment of medical college at Vilayodi, Chittur, Palakkad by Safe Development Aims Trust, Palakkad recommending disapproval of the scheme received u/s 10A of the IMC Act, 1956.

98. Continuance of recognition of MBBS degree in respect of students being trained in the medical college in the State of Bihar.

Read: letter received from the State Govt. regarding continuance of recognition of MBBS degree in respect of students being trained in the medical college in the State of Bihar.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council noted the letter received from the State Govt. of Bihar in which the factual position has been narrated and decided to give extension for a period of 4 weeks after Model Code of Conduct cease to operate in the State of Bihar and to defer the process for de-recognition till then.

99. Establishment of new medical college at Bhubaneswar By Kalinga Institute of Industrial Technology, Bhubaneswar.

Read: the letter dated 22/3/04 received from the Central Govt. Ministry of Health & FW, enclosing the reply submitted by Kalinga Institute of Industrial Technology, Bhubaneswar for establishment of new medical college at Bhubaneswar.

The members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council considered the letter dated 22.3.04 received from the Central Govt. enclosing the reply submitted by the applicant dated 16.12.2003. It was observed that the lease deed for 99 years is available only for 16.883 acres of land. The lease deed for the remaining part of the land is not yet submitted.

In view of above, the members of the Adhoc Committee appointed by the Hon’ble Supreme Court and of the Executive Committee of the Council decided to return back the file pertaining to establishment of medical college at Bhubaneswar by Kaling Institute of Industrial Technology, Bhubaneswar recommending disapproval of the scheme received u/s 10A of the IMC Act, 1956 as the applicant has failed to fulfil the mandatory and statutory precondition as per Qualifying Criteria No.2(2) laid down in the Establishment of Medical College Regulations, 1999 which reads as under:-

“2(2) that a suitable plot of land measuring not less than 25 acres is owned and possessed by the person or is possessed by the applicant by way of 99 years lease for the construction of the college”.

100. Recommendations of the Departmental Promotion Committee.

Read : The recommendations of the Departmental Promotion Committee.

The members of the Executive Committee and of the Adhoc Committee appointed by the Hon’ble Supreme Court read the recommendations of the DPC pertaining to the case of Dr. K.K. Arora and also considered the relevant records.

Departmental Promotion Committee (DPC) for the post of Additional Secretary met in the office of the Council on 26.3.2004 at 04.00 p.m. for considering the case of Dr.K.K. Arora, at

present working as Joint Secretary on Ad-hoc basis subject to the final selection to be made as per rules.

The DPC has made the following recommendations:-

The DPC, upon consideration of all the relevant facts and more importantly, the fact that Dr. K.K. Arora does not fulfil the minimum required educational qualification conditions, he is not eligible for consideration for appointment to the post of Addl. Secretary of the Council.

The DPC upon consideration of the legal opinion given by the Ld. Solicitor General of India recommends to the Executive Committee that Dr. K.K. Arora be placed in his substance position of Deputy Secretary without any delay.

Some of the facts relevant to this issue are that Dr. K.K. Arora was appointed as Deputy Secretary in the year 1992. As per the Recruitment Rules of 1980 applicable at that point of time, the educational qualification required for the post of Deputy Secretary was recognised MBBS degree, preferably with a recognised postgraduate medical qualification. Since at this point of time in the year 1992 possessing a postgraduate qualification was not a mandatory condition, he was appointed to the post of Deputy Secretary.

On 13.10.1998, Dr. K.K. Arora was appointed as Joint Secretary on ad-hoc basis and subject to final selection to be made as per rules. In accordance with the applicable recruitment rules on 13.10.1998, it was a mandatory condition for the post of Joint Secretary that the candidate must also possess recognised PG medical degree.

Dr. K.K. Arora does not possess any recognised PG medical degree qualification. He had not undergone any selection process, as per the rules, for appointment to the post of Joint Secretary and when the recruitment rules provide the hold of recognised MBBS degree and postgraduate medical degree is a condition precedent for consideration of any candidate for appointment to the post of Joint Secretary.

While Ad-hoc Committee appointed by the Hon'ble Supreme Court by order dated 20.11.2002 was associating itself in the meetings of the Executive Committee of the Council, it was observed that the erstwhile Secretary of the MCI, viz., Dr. M.Sachdeva was to superannuate on 30.4.2003. It was, therefore, necessary to undertake the process for filling up of the post of Secretary of the Council which was to fall vacant on 30.04.2003.

An I.A. was filed by the Amicus Curiae before the Hon'ble Supreme Court being IA No.3. It was prayed to the Hon'ble Court that vide publicity at the national level should be given for filling up of this post and the process must be undertaken in complete supervision of the Ad-hoc Committee appointed by the Hon'ble Supreme Court.

The I.A. No.3 filed by the Amicus Curiae was considered by the Hon'ble Supreme Court on 10.04.2003 and it was directed that the matter of appointment of Secretary of the Council should be brought before the Hon'ble Court after two weeks.

Dr. K.K. Arora filed an application, I.A.No. 4/2003. With his application, he annexed his appointment letters dated 08.12.1992 for the post of Deputy Secretary and 13.10.1998 to the post of Joint Secretary on adhoc basis. He had also annexed with the application the Govt. of India letter dated 12.03.2003 and also the copy of the official gazette notification dated 12.03.2003 being MCI Recruitment (Amendment) Rules,2003.

The legal position from the very beginning that for appointment to the post of Secretary to the Council, the candidate must possess recognised MBBS degree and recognised PG medical degree as enshrined in the Recruitment Rules of 1980, 1996 and 1998, was brought to the notice of the Hon'ble Supreme Court along with the Amendment Rules of 2003 dated 12.03.2003 making it clear that even for a candidate who is seeking to get appointed to the post of Secretary by promotion, possessing the educational qualification of recognised MBBS degree and recognised PG medical degree is a must.

It is also relevant to notice that prior to the Recruitment Rules 2001 which were later on amended by the Amendment Rules of 2003, the post of Secretary could not be filled up by promotion. The method for filling up of the post of Secretary, in all the rules viz. Recruitment Rules of 1980, 1996 and 1998 was only by way of direct recruitment. It was for the first time in

the year 2001 that the channel of promotion for filling up the post of Secretary was also provided. The necessary modification/correction in the recruitment rules, 2001 to continue the longstanding rule position that the candidate must possess the recognised MBBS and recognised PG medicine degree, was carried out by the notification dated 12.03.2003 being Medical Council Recruitment (Amendment) Rules, 2003 suitably correcting the Recruitment Rules of 2001.

Even otherwise, in addition to the reasons set out by the Central Govt. in its communication dated 12.03.2003, it is absolutely a necessity and imperative for the Secretary of the Council to possess the recognised PG medical degree. The Secretary of the Council is the administrative head who has to carry out the day-to-day functioning of the Council including interacting the responding to Medical Colleges, Universities, State Governments etc. about rule position, policy decisions of the Council, its applicability and implementation etc. He is also the Member-Secretary for the Executive Committee, Postgraduate Medical Education Committee, General Body and other Committees of the Council where all policy and other decisions are taken to carry out the purposes of the Act. It is for the imperative requirements of the post that the recruitment rules have throughout stipulated that the candidate seeking consideration for appointment to the post of Secretary of the Council must also possess a recognised PG medical degree.

It is noticed that the entire selection process for the post of Secretary was under the supervision of the members of the Ad-hoc Committee appointed by the Hon'ble Supreme Court and, in fact, one of the members of the Ad-hoc Committee was actually present throughout the process of interview and finalisation by the Selection Committee constituted for this purpose.

On 25.04.2003, when the Hon'ble Supreme Court was informed that the appointment process for the post of Secretary is already underway and shall be carried out in accordance with the recruitment rules, Dr. K.K. Arora had, therefore, rightly accepted the actual rule position whereby he was not entitled for consideration for appointment to the post of Secretary and he rightly did not press his application. The Hon'ble Supreme Court by order dated 25.04.2003 disposed of his application being IA No.4/2003.

The Departmental Promotion Committee (DPC) had met on 25.04.2003 where the representation of Dr. K.K. Arora was considered and he was granted hearing by the DPC. This was happening on the same day when the Hon'ble Supreme Court also on the satisfaction that the recruitment process is in accordance with the rules, had disposed of IA No. 3 & 4/2003. The DPC did not have the order dated 25.04.2003 passed by the Hon'ble Supreme Court on the same day, recommended to take a legal opinion on the issue of eligibility for consideration of Dr. K.K. Arora for the post of Secretary.

The Council sought the opinion of Ld. Solicitor General of India and who by his opinion dated 28.04.2003, clearly advised that in the background of the prevailing recruitment rules it becomes clear that postgraduate degree is a pre-requisite for appointment to the post of Secretary and since, admittedly, Dr. K.K. Arora does not possess this degree, consideration of his case for appointment to the post of Secretary would be clearly contrary to the governing recruitment rules and would, therefore, be illegal. The Ld. Solicitor General of India opined that Dr. K.K. Arora cannot be considered eligible to be appointed as Secretary of the MCI.

The appointment to the post of Secretary was made and approved by the Executive Committee of the Council in its meeting held on 02.06.2003 and the incumbent of the post was appointed.

Dr. K.K. Arora by his representation dated 23.06.2003 made to the Secretary, MCI, requested for consideration of his case for promotion to the post of Addl. Secretary of the Council.

A Departmental Promotion Committee (DPC) was constituted for consideration of his candidature for the post of Addl. Secretary. The DPC met on 18.09.2003. In this meeting, the DPC desired to obtain the legal opinion whether Dr. K.K. Arora is eligible for consideration for the post of Addl. Secretary in the Council.

As was requested by the DPC, the Council once again approached the Ld. Solicitor General of India seeking his invaluable opinion on the issue of eligibility of Dr. K.K. Arora for consideration for appointment to the post of Addl. Secretary to the Council and for which he had also made a representation on 23.06.2003 to the Secretary of the Council. The Ld. Solicitor General of India by his opinion dated 03.03.2004 has advised that it is not open to the MCI to consider the case of Dr. K.K. Arora for appointment to the post of Addl. Secretary. He has

further, inter-alia, advised that the relevant RRs for the post of Joint Secretary also require a postgraduate degree from a recognised postgraduate medical institute, as is the case for the post of Additional Secretary. Dr. Arora does not possess the same and, therefore, he is not qualified to be appointed to the post of Joint Secretary. However, as the appointment was made on an adhoc basis, it is for the Council to consider whether to continue the adhoc appointment or not but in the absence of the minimum additional qualification, continuance of Dr. Arora on this post is certainly not a satisfactory state of affairs. The Council, which has been conferred statutory powers to ensure, inter alia, maintenance of standards in the field of medical education and medical profession, cannot afford to have a person who is not qualified to continue on this post for more than 5 years, as has happened in the case of Dr. Arora and as will be in the fitness of things if the Council appoints a qualified candidate at the earliest. It has been further advised that in accordance with the judgements of the Hon'ble Supreme Court, Dr. K.K. Arora is not entitled for a show cause notice or hearing for putting him to his substantive post of Deputy Secretary.

The case of Dr. K.K. Arora was considered by the Executive Committee of the Council in its meeting held on 28.03.2004 where the members of the Adhoc Committee appointed by the Hon'ble Supreme Court were also present. The recommendations of the DPC were considered. After consideration of the case, it was decided that Dr. K.K. Arora who at present is holding the position of Joint Secretary on adhoc basis be reverted and placed in his substantive post of Deputy Secretary in the Council.

On the post of Joint Secretary thus becoming available, the recommendations of the DPC for the post of Joint Secretary recommending that Dr. P. Kumar, working as Deputy Secretary in the Council and who fulfills all the eligibility conditions for the post of Joint Secretary as per recruitment rules, be promoted to the post of Joint Secretary, was considered and accepted by the members of the Executive Committee and of the Adhoc Committee appointed by the Hon'ble Supreme Court.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council also perused the recommendation of the Departmental Promotion Committee dated 29.4.2003 constituted for the post of promotion of Joint Secretary and approved the recommendation that the competent authority may consider to appoint Dr. Prem Kumar to the post of Joint Secretary, Medical Council of India by promotion.

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

New Delhi, dated
the 28.03.2004

A P P R O V E D

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