

No.MCI-5(3)/2005-Med./

MEDICAL COUNCIL OF INDIA

EXECUTIVE COMMITTEE

Minutes of the meeting of the Executive Committee held on Friday, the 22nd September, 2006 at 9.30 a.m. in the Council Office at Sector 8, Pocket 14, Dwarka, New Delhi-110 075 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
Dr. (Mrs.) S. Kantha	]Former Vice-Chancellor,]Rajiv Gandhi University of Health]Sciences, Bangalore and]Member, Adhoc Committee]appointed by the Hon'ble Supreme]Court
Dr. K.P. Mathur	]Former Medical Superintendent,]Ram Manohar Lohia Hospital,]77, Chitra Vihar,]Delhi-110092
Dr. D.K. Sharma	]Former Professor & Head,]Department of Paediatrics,]L.L.R.M. Medical College,]Meerut
Dr. P.K. Sur	]Director,]I.P.G.M.E.R.,]Kolkatta
Dr. G.K. Thakur	]Professor & Head,]Department of Radiodiagnosis,]S.K.Medical College, Muzaffarpur
Dr. Mukesh Kr. Sharma	]Deptt. of General Surgery,]S.M.S. Medical College,]Jaipur
Prof. B.C. Das	]Director,]State Institute of Health & Family]Welfare, Govt. of Orissa, Nayapalli,]Bhubaneshwar.
Lt.Col. (Retd.) Dr. A.R.N. Setalvad	-]Secretary

The apology for absence was received from Dr. P.N. Tandon & Dr. N. Rangabashyam, members of the Adhoc Committee and Dr. G.B. Gupta, member, Executive Committee.

1. India Singapore Comprehensive Economic Cooperation Agreement(CECA)- MRA Negotiations between professional bodies.

Read : The visiting report (8th & 9th September, 2006) submitted by the members of the visiting Committee with regard to India Singapore Comprehensive Economic Cooperation Agreement(CECA)-MRA Negotiations between professional bodies.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council deliberated upon the report of the visit of the delegation of Medical Council of India for discussion with the delegates of Singapore Medical Council, Singapore with regard to India Singapore Comprehensive Economic Cooperation Agreement(CECA)-MRA Negotiations between professional bodies. . After due deliberations, it was observed that in so far as the limited registration u/s 14 of the I.M.C. Act,1956, the applicability should be specified as mentioned in Section 14(1) of the Act itself which reads as under:-

“14(1) The Central Government after consultation with the Council, may, by notification in the Official Gazette, direct that medical qualifications granted by medical institutions in any country out-side India in respect of which a scheme of reciprocity for the recognition of medical qualifications 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:

- (a) shall be permitted only if such persons are enrolled as medical practitioners in accordance with the 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.”

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 refer back the matter to the Sub-Committee for amendment in the report and further decided to defer the consideration of the matter till then.

2. Selection for the post of Deputy Secretary(Medical) in the office of the Medical Council of India.

Read : The recommendation of the Selection Committee for the post of Deputy Secretary(Medical) in the office of the Medical Council of India.

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 which met in the Council office on 18.09.2006 that no candidate was found suitable for the post of Deputy Secretary (Medical) and therefore none was selected.

3. Selection for the post of Law officer in the office of the Medical Council of India.

Read : The recommendation of the Selection Committee for the post of Law Officer in the office of the Medical Council of India.

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 which met in the Council office on 18.09.2006 that no candidate was found suitable for the post of Deputy Secretary (Medical) and therefore none was selected.

Office Note: It was observed by the members that on repeated advertisements, the Selection Committee is finding that the number of candidates applying and appearing for the interview for these posts are decreasing and even amongst those who appeared for the interview, the Selection Committee has found them to be not suitable for the post. One of the reasons may be salary

structure which the prospective candidates may not be finding attractive. In view of this, the office is directed to prepare a consolidated proposal for revision in the pay structure of such posts.

4. Consideration for grant of Permanent Registration to Mr. Oliver Sunil Sequeira u/s 13(3) of the IMC Act, 1956 –Regarding.

Read : The matter with regard to grant of Permanent Registration to Mr. Oliver Sunil Sequeira u/s 13(3) of the IMC Act, 1956 along with the decision of the Registration & Equivalence Committee dated 18.09.2006.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council noted the following decision of the Registration & Equivalence Committee dated 18.09.2006:-

“The Registration & Equivalence Committee considered the matter of request of Mr. Oliver Sunil Sequeira for grant of permanent registration and noted that –

- (i) The candidate obtained M.D.(Physician) diploma from erstwhile USSR in the year 1992 and thereafter has undergone specialized training in Medicine (Clinical Ordinatura) from October,1992 to October,1994 and thereafter has done Ph.D. which he completed in July,1998.
- (ii) He applied for registration in the Council on 21.10.1999 and was granted provisional registration on 26.06.2004 for purposes of undergoing one year internship training in the recognized hospital.
- (iii) The candidate vide his letter dated 06.03.2003 returned the original provisional registration certificate issued to him by MCI with the request to this Council that he be considered for grant of permanent registration as he has already done Clinical Ordinatura as well as Ph.D. from a medical institution in erstwhile USSR and the same may be considered as one year internship training.
- (iv) Council has already received verification reports of both the documents i.e. 10+2 mark sheet and degree from the concerned authorities. In addition, the Council has also received verification of Ph.D. degree from the Embassy of India.

The Registration & Equivalence Committee further noted that in a similar case, the matter was considered by the Executive Committee at its meeting held on 16.06.1999 and it was decided as under:-

“The Executive Committee noted and ratified the action taken by the President after having discussion with the Chairman, Registration & Equivalence Committee to grant permanent registration to the candidates who have successfully completed three year ordinatura after his or her obtaining the degree of M.D. 'Physician'.

This decision is taken considering first year of the three years clinical ordinatura as one year's internship.”

In this regard, it is stated that the above matter was considered by the Registration & Equivalence Committee at its meeting held on 18.09.2006 and the Committee decided to refer the matter to the Executive Committee for consideration.

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 grant permanent registration to Mr. Oliver Sunil Sequeira u/s 13(3) of the I.M.C. Act,1956.

5. Request for Grant of Permanent Registration to the candidates who after obtaining MBBS qualification from Indian Universities have completed one year internship without obtaining provisional registration certificate or beyond validity period of certificate.

Read : The matter with regard to Grant of Permanent Registration to the candidates who after obtaining MBBS qualification from Indian Universities have completed one year internship without obtaining provisional registration certificate or beyond validity period of certificate.

The members of the Adhoc Committee appointed by the Hon'ble Supreme Court and of the Executive Committee of the Council considered the matter and decided to obtain the legal opinion of Ld. Additional Solicitor General in the matter.

6. Establishment of new Medical College at Hassan by Govt. of Karnataka.

Read : The compliance verification inspection report (20th Sept., 2006) for establishment of new medical college at Hassan by Govt. of Karnataka 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 considered the Council Inspectors report (20th September, 2006) and noted the following:-

1. The shortage of teaching staff is as under:-
 - (a) The shortage of teaching faculty is 25.42% as under:-
 - (i) Professor - 2 (Physio.-1, Biochem-1)
 - (ii) Associate Professor – 6 (Ortho. -1, OG-1, Anaes.-1, Anat.-1, Physio.-1, Pharma.-1)
 - (iii) Asst.Prof - 4 (Anat-3, Biophysics-1)
 - (iv) Tutor - 3(Physio-1, Radiodiag-2)
 - (b) The shortage of Residents is 31.57% as under :-
 - i) Sr. Resident 07 (Med-3, Surgery-2, Paed-1, ENT-1)
 - ii) Jr. Resident 05 (Med-2, Surgery-2, Ophthal-1)
 - (c) Dr. H.R. Krishne Gowda, Medical Superintendent has nil years of administrative experience.
 - (d) No administrative staff is posted yet.
 - (e) It may be pointed that the hospital is under the Dte. of Health Services while the college is under the Director of Medical Education. The staff of the hospital is not under the administrative control of the Dean of the college.
2. The clinical material is inadequate as under :-

	Daily Average		Day of Inspection	
O.P.D. attendance	350 to 550		512	
<u>Operative work</u>				
Number of major surgical operations	7 to 14		Nil	
Number of minor surgical operations	5 to 6		2	
Number of normal deliveries	6 to 8		3	
Number of caesarian Sections	1 to 3		3	
<u>Radiological Investigations</u>	O.P.	I.P.	O.P.	I.P.
X-ray	18 - 30		15	
Ultrasonography	20-25		07	
Special Investigations	1 - 2		Nil	
C.T. Scan	NA		NA	
<u>Laboratory Investigations</u>				
Biochemistry	40-60		70	
Microbiology	Nil		18	
Serology	5 -10		Nil	
Parasitology	1 -2		Nil	
Haematology	60 -70		76	
Histopathology	Nil		Nil	
Cytopathology	Nil		03	
Others	--		--	

3. The Medical College, Lecture Theatres, Common room for boys and girls, Animal House, Central library, Central photography cum audio-visual units, all are under construction.
4. In OPD, Registration is done manually and no computer is available.

5. Medicine O.P.D. has got 2 cubicles with one x-ray box, there is no class room available. Paediatrics O.P.D. has got one cubicle with no x-ray view box. Skin & VD OPD has got one cubicle and no Microscope. No Psychologist is available. There is no class room available in any OPD. The Audio metry room is not Air conditioned. No technician is available. There is no class room available in the OPD. Deficiencies remain as it is except for additional 2 cubicles.
6. Registration and Medical Record Section is not computerized. No ICD index is being followed.
7. Nursing stations are located outside the ward. There is no pantry, ward lab. and teaching area available in any of the wards.
8. Central clinical laboratory managed only the technicians. It functions only OPD hours and no emergency back up service available. Equipments for doing basic investigations only are available. Deficiencies remain as it is except for few faculty members are posted.
9. Oxygen supply is through the cylinder only and suction is by mechanical instrument. No emergency equipments or Crash cart are available in the ward. There is no minor O.T or Emergency O.T available in the Casualty.
10. The following equipments are available in O.T. block which is inadequate: -

Multiparameter Monitor (with capnograph)	-	Nil
Respiratory Gas Monitor	-	Nil
Respiratory Gas Monitor with Pulse oximeter	-	Nil
Defibrillators	-	One
Ventilator	-	Two
Boyles' apparatus	-	Five
Infusion Pump	-	Nil
Drip Infusion Pump	-	Nil
11. There is no CSSD Available.
12. There is no Intercom facility available and the wards are not connected by Phone.
13. Laundry service is being out sourced.
14. There is no provision to supply special Diet.
15. There is deficiency of 5 para Medical Staff (Laboratory Technicians/Assistant & Laboratory Attendants).
16. Nursing Staff is grossly inadequate as under.

Nursing Superintendent	:	One
Deputy Nursing Superintendent	:	One
Matron	:	Nil
Asstt. Nursing Superintendent	:	Nil
Nursing Sisters	:	Three
Staff nurses	:	Sixty Three
17. The Pre clinical department of Anatomy, Physiology, Biochemistry are under construction and not functional.
18. Hostels are under construction.
19. Teaching beds are not adequate in number and distribution at this stage.
20. Other deficiencies/remarks are 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 reiterate its earlier decision taken at its meeting held on 14th – 15th June 2006 & 7th September 2006 recommending to the Central Govt. to disapprove the scheme for Establishment of new medical college at Hassan by Govt. of Karnataka u/s 10A of the IMC Act, 1956.

7. T.D. Medical College, Alappuzha – Increase of seats in 1st MBBS course from 100 to 150.

Read : The compliance verification inspection report (20th Sept., 2006) for increase of seats in 1st MBBS course from 100 to 150 at T.D. Medical College, Alappuzha.

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 (20th September, 2006) and noted the following:-

1. The shortage of teaching staff is as under:-
 - (a) The shortage of teaching faculty is 22.01%
 - (i) Professor – 01 (Radiodiagnosis)

- (ii) Asso.Professor – 08 (2 Pathology, 1 TB & Chest, 1 Gen.Medicine, 1 Paediatrics, 1 Psychiatry, 1 Anaesthesia and 1 Dentistry)
- (iii) Asst.Professor – 15 (2 Physiology, 1 Biochemistry, 2 Pharmacology, 3 Pathology, 4 Community Medicine, 2 Gen. Surgery and 1 Dentistry)
- (iv) Lecturer – 2 (1-Biophysics & 1 – Pharmaceutical Chemist)
- (v) Tutors – 09 (3 Anatomy, 1 Forensic Medicine, 1 Community Medicine, 3 Radiodiagnosis and 1 Anaesthesia)

(b) The shortage of Residents is 47.36% as under:-

- (i) Sr. Resident – 06 (3 Gen. Medicine, 3 Gen. Surgery)
- (ii) Jr. Resident – 30 (10 Gen. Medicine, 1 Paediatrics, 2 TB & Chest, 1 Skin & VD, 2 Psychiatry, 9 Gen. Surgery, 4 Orthopaedics and 1 OBGY)

(c) Dr. Mohan P. Sam shown as Medical Superintendent of the old hospital at Alappuzha is not qualified to hold the post as he has only 5 years and 3 months of Administrative experience. Dr. K. Rajendran, shown as Medical Superintendent of the New hospital at Vandanam is not qualified to hold the post as he has only nine months administrative experience.

(d) Regular Principal Dr. A.Meharunnisa took charge on 22.08.2006.

2. Total number of journals subscribed are 6 Indian and 21 Foreign in the Departmental Library which are inadequate against the requirement of 70 Indian and 30 Foreign journals at this stage. The number of computer terminals available in the library are three. There was no proper record for number of books available and no proof of any books purchased during the year 2005,2006 was produced.
3. The number of teaching beds in Orthopaedic Department are inadequate as only 42 beds are available against the requirement of 60 beds at this stage.
4. The clinical material is inadequate in terms of OPD attendance and special investigations as under :-

	Daily Average	Day of Inspection
<u>Radiological Investigations</u>		
X-ray	215	316
Special Investigations	Nil	Nil
Number of minor surgery operations	2	Nil
Number of Parasitological test	1	1

5. There are only seven Operation Theatres available against the requirement of 10 at this stage. No central Oxygen, No Nitrous Oxide supply and no central suction is available in all the OTs.
6. The facilities in the Hostels for students, interns and Residents are inadequate as under:-

Hostels	No.	Rooms	Capacity	Furnished Yes/No	Mess Yes/No
Boys	1	33 single seated 15 double seated 33 triple seated	162	Very poorly furnished	Yes
Girls	1	50 single seated 25 four seated	150	Inadequate	Yes

Interns Male	1	21 double seated	42	Inadequate	No
Female	1 located in the new hospital block 3 rd & 4 th floor	12 double seated and 4 four seated	40	Inadequate	No
P.G.Students Male	2 one located in new hospital building & the other in old hospital campus	10 double seated and 2 houses with 7 double seated rooms	34	Inadequate	No
Girls	2 10 rooms in new hospital building and one flat in old hospital campus.	10 double seated and one flat with 4 double seated rooms	28	Inadequate	No
Nurses	1	14 tripple seated rooms	42	Inadequate	No

7. Intern girls and PG girls hostel is located in the new hospital block which is adjacent to the Psychiatry department. There is no security for the girls staying in this block. All the hostels are inadequately furnished. There is no mess in all the hostels.
8. In OPD, there is no proper sitting area for the patients. There is no x-ray view box in any of the cubicles. There were only two teaching areas for the entire OPD block with inadequate seating capacity, no washing area. There is a separate registration counter for O.P.D. cases in O.P.D which is not computerized.
9. In Wards, there was no duty room provided for duty doctors and nurses. One nursing station was provided in a separate area in each floor. No pantry, no examination/procedure room was available. Teaching area was available in few departments with side laboratory. Total 2 clinical demonstration areas with a capacity of 20 have been provided in the wards. There are 2 flat type lecture theatres in the hospital. Office accommodation was available only for heads of departments. The beds in the ward were over crowded. The teaching area were grossly inadequate. There were no duty doctors rooms and office accommodation for faculty members other than heads of departments. Patients from different departments were kept in one room. In the male Orthopaedic ward, besides 26 beds for the Orthopaedic patients, 20 beds were for the ENT patients, 11 beds were for Urology patients and 5 beds were for Trauma Care patients. There was no labeling of beds and units. There is no central suction or oxygen supply in the entire old hospital.
10. Microbiology and histopathology investigations are not done in the hospital central lab as they are being done in the Microbiology department. The patients or their attendants have to travel 11 kilometers to deliver the samples in the microbiology/pathology departments in college campus.
11. BARC is available with the radiographers but not with the faculty.
12. OPD Registration is not computerised. Medical Record is not computerised.
13. Indoor registration counter is not computerised and is not cross linked with outdoor registration.
14. There is no Central oxygen and central suction facility available in the Casualty. Resuscitation equipment is inadequate in the Casualty.
15. There is no Central Oxygen and Central Suction available in all ICUs of the old hospital.
16. Only two static units, one of 500mA and one of 300mA are available which is inadequate. Colour Doppler is not available and CT Scan available in the premises of District Cancer Society.
17. In Anatomy Department, there is only one demonstration room of 25 seats as against the requirement of 2 demonstration rooms of 90 seats each.
18. In Physiology Department, there is only one demonstration room having a capacity of 26 against the requirement of 90 seats at this stage.
19. In Biochemistry Department, there is only one demonstration room with a capacity of 30 seats, which is inadequate.

20. In Microbiology Department, there is no demonstration room. The gas cylinders in the teaching laboratory are kept inside the same laboratory, which is extremely hazardous. There is no colour coding for the waste disposal bags as per the requirement of hospital waste management.
21. There is no ICU available for burns, Obstetrics & Gyn.
22. The Surgical ICU is not functional due to shortage of staff.
23. There is no central sterilization department. There is no washing area, no separate receiving and distribution counters and no instrument washing area.
24. The Laundry is having 01 bulk washing machine which is not functioning.
25. Incinerator is not available. However, hospital waste is disposed off by IMAGE.
26. No Assistant Professor available at the UHC.
27. Other deficiencies/remarks are 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 reiterate its earlier decision taken at its meeting held on 14th – 15th June, 2006 recommending to the Central Govt. to disapprove the scheme for increase of MBBS seats from 100 to 150 at T.D. Medical College, Alappuzha u/s 10A of the IMC Act, 1956.

8. Govt. Medical College, Kottayam – Increase of seats in 1st MBBS course from 100 to 150.

Read : The compliance verification inspection report (20th Sept., 2006) for increase of seats in 1st MBBS course from 100 to 150 at Govt. Medical College, Kottayam.

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 (20th Sept., 2006) alongwith the letter dated 15th July, 2004 of the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to issue Letter of Permission for increase of MBBS seats from 100 to 150 at Govt. Medical College, Kottayam u/s 10A of the IMC Act, 1956 for the academic session 2006-07.

9. Govt. Medical College, Thrissur – Increase of seats in 1st MBBS course from 100 to 150.

Read : The compliance verification inspection report (20th Sept., 2006) for increase of seats in 1st MBBS course from 100 to 150 at Govt. Medical College, Thrissur.

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 (20th Sept., 2006) alongwith the letter dated 15th July, 2004 of the Joint Secretary, Govt. of India, Ministry of Health & F.W. and decided to recommend to the Central Govt. to issue Letter of Permission for increase of MBBS seats from 100 to 150 at Govt. Medical College, Thrissur u/s 10A of the IMC Act, 1956 for the academic session 2006-07.

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

New Delhi, dated the
22nd September, 2006

APPROVED

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

